6TL0CTJN4N 24-00866

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

	Document Number Override	Primary Crash Document #	,	Agency Crash Number 24-00866			Investigating Officer/Deputy DEPUTY A. KULAS			
4 N	Crash Date 01/23/2024	Crash Time 10:30 PM	Date Ar	Date Arrived		Time	Time Arrived			
OCTJN4N	Date Notified 01/23/2024	Time Notified 10:30 PM	Total Ur 01	Total Units 01		Total	otal Injured Total Killed 00		I	
0	On Emergency Hi	t and Run Lane	Closure	□Wo	rk Zone		Trailer or T	owed	Reporting Threshold	
6TL	Government Property	Active School Zone		Bus Relat	ed	Tags				
	✓ Reportable	Crash Type NON-DOMESTICATED	ANIMAL W/ N	O INJUF	RY		Amended		Secondary Crash	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
i	Location									
Í	ON STH33 EB				Latitude Longitude					
	510 FT W					43.564008226 X Coordinate		-90.082	204837	
	OF EMERALD DR							Y Coord		
	IN THE TOWN OF LA VALLE			251091.					4828066	
	IN SAUK COUNTY				Structure 7	Structure Type				
					NO STRUCTURE					
	Crash Scene									
,					T=:					
	First Harmful Event	A1 (A1 IV/E)				nful Event Lo	cation			
	NON DOMESTICATED ANIM Manner of Collision	AL (ALIVE)			ON ROADWAY					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT			Light Condition					
		CLE IN TRANSPORT			Deadway	Fastar/a)				
	Road Surface Condition(s)				Roadway Factor(s)					
	Environment Factor(s)									
	Weather Condition(s)									
	Animal Type				Relation To Trafficway					
	DEER Crash Classification - Location				TRAFFICWAY - ON ROAD					
					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY			NO SPECIAL JURISDICTION			ON			
	Tribal Land			Access Control				Special Study		
i	Unit Summary									
ì	Unit Status		Vehicle Opera	ating As C	lassification		Unit Type			
				D CLASS			AUTOMOBILE			
_	Vehicle Type				Operating As Endorsements					
01	(SPORT) UTILITY VEHICLE									
	Total Occs	Total # Citation	Total # Citations Issued		Total Traile		Total Haz	Mat Types		
	1		0			0		0		
	Insurance?	Direction Of Travel	Pre C	rashTire)	Speed Lim	it	Total Lane	es	
⊨∣	YES	ASTBOUND Mark		lark						
UNIT	Most Harmful Event: Collision With	Special Funct		TION		Emergency Motor Vehicle Use				
_	NON DOMESTICATED ANIM	NO SPECIA	NO SPECIAL FUNCTION				PPLICABLE			
	Traffic Way	Traffic Contro	I			Traffic Control Inoperative/Missing				
	Surface Type	Road Curvatu	ire			Road Grade				

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	Truc	k Bus or HazMat							
	,	Vehicle							
10		License Plate Number AKZ9099	Plate Type	St WI	Country of Issuance UNITED STATES				
	VEHICLE 01	Vehicle Identification Number 1GKEK13T01J120800	Make GENERAL MOTORS O	Year 2001	Model YUK				
		Color BLK - BLACK	Body Style UT - SPORT UTILITY VEHICLE Bus Use						
LIND		Initial Contact Point 12 - FRONT Extent Of Damage DISABLING DAMAGE	Vehicle Damage 7 8 9 10 11 6 2 2 12 5 4 3 2 1						
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
TINO	VEHICLE	Driver Actions NO CONTRIBUTING ACTION							
		Owner Name	Owner Address						
9	2								
⊨		Policy Holder							
LNO		Insurance Company BUTLER	Individual DENNIS RYCZEK						
	DIVIDUAL	ndividual							
		Driver THOMAS RYCZEK	Citations Issued 0	ued Sex MALE					
_		(608) 495-2127	Date of Birth	Race WHITE					
LIND		Address 733 E MAIN ST REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash fety Equipment	Safety Equipment						
		Row Seat Position	SHOULDER & LAP BELT						
	001	Helmet Use	Helmet Compliance						
		Eye Protection	Tint Compliance						
2		Injury Severity NO APPARENT INJURY	Airbag						
		Ejected Ejection Path			Trapped/Extricated				
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #				
		Hospital	Date of Death		Time of Death				

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Crash Date 01/23/2024

Crash Time 10:30 PM

		Distracted By	istracted By Source					
		Distracted By Action						
	,	Non Motorist S	triking Unit #	Location				
		Prior Action						
		Action						
_	UAL							
UNIT	INDIVIDUAL							
	Z							
		Action Other						To/From School
	L	Drug & Alcohol	uspected Alcohol Us I O	se	Suspected Drug Use NO			
		Alcohol Test Given Alcohol Test Typ TEST NOT GIVEN			e Alcohol Test Resu			
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Result		;	
2	001	Drug Type						
		Individual Condition						
		APPEARED NORMA	NL					