6TL0DJJ8X9 24-01051

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 24-01051				Investigating Officer/Deputy DEPUTY J. TROTH			
6TL0DJJ8X9	Crash Date 01/29/2024	Crash Time 07:40 PM	-		Date Arrived		Time	Time Arrived			
	Date Notified 01/29/2024	Time Notified 07:48 PM			Total Units 01		Total 00		Total Killed	I	
	On Emergency Hi	Emergency Hit and Run Lane Closure Work Zone				Trailer or Towed Reporting Threshold					
	Government Property	hool Zone	School Bus Related NO			Tags	Tags				
	✓ Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			RY Amended			Secondary Crash			
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
i	Location										
i	ON CTHPF WB					Latitude Longitude					
	0.55 MI W					43.304399331			-89.862914052		
	OF SLOTTY RD					X Coordina	ate		Y Coordinate		
	IN THE TOWN OF HONEY C	REEK				267797.96875 4798599.5					
	IN SAUK COUNTY					Structure					
						Otructure	турс				
	0										
(Crash Scene										
	First Harmful Event						ıful Event Lo	ocation			
	NON DOMESTICATED ANIM	AL (ALIVE)				ON ROA					
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSF	PORT								
	Road Surface Condition(s)					Roadway	Factor(s)				
	Environment Factor(s)										
	c										
	Weather Condition(s)										
	Asimal Torra										
	Animal Type					Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD Crash Classification - Jurisdiction					
	Crash Classification - Location PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
	Tribal Land					Access Control Special Study					
	Tribui Lana						Special Study				
	Unit Summary		117	iala O:-	in a 1 C	eesifi ''		Luce =			
				/ehicle Operating As Classification				Unit Type			
	IN TRANSIT D CLASS					TRUCK Operating As Endorsements					
01	Vehicle Type							Operating /	As Endorser	nents	
٦	UTILITY TRUCK/PICKUP TRUCK					Total Trailers Total HazMat Types			M . T		
	Total Occs Train/Bus # Recorded			0		0				Mat Types	
	1							0 mit Total Land			
		Direction Of Travel	' I —	Pre CrashTir		e Speed		Limit Total Land		es	
UNIT	YES WESTBOUND			Special Function					Emergency Motor Vohicle Lies		
5	Most Harmful Event: Collision With			Special Function NO SPECIAL FUNCTION					mergency Motor Vehicle Use		
	NON DOMESTICATED ANIMAL (ALIVE)										
	Traffic Way			Traffic Control			Traffic Control Inoperative/Missing				
	Surface Type			Dood Cumintum				Road Grad	е		
	- Sanass 1,700			Road Curvature				. todd Grado			

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	Truc	ck Bus or HazMat					(000) 000 1000		
	,	Vehicle							
01		License Plate Number GN5238		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES			
	2	Vehicle Identification Number 1GCVKREC4GZ228967		Make CHEVROLET	Year 2016	Model SILVERADO			
	VEHICLE	Color WHI - WHITE		Body Style PK - PICKUP	Body Style Bus Use				
UNIT		Initial Contact Point 12 - FRONT Extent Of Damage DISABLING DAMAGE		Vehicle Damage 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT 5 4 3 2 1					
		Towed Due To Damage TOWED DUE TO DISABL What Driver Was Doing	ING DAMAGE	Vehicle Removed By EVERETTS TOWING					
		Driver Prior Action Other		Vehicle Factors					
TINO	Driver Actions NO CONTRIBUTING ACTION								
01	70	Owner Name		Owner Address					
L		Policy Holder							
UNIT		Insurance Company ERIE-INS-CO		Individual DALE SCHWANKE					
	- 1	Individual							
	_	Driver DALE SCHWANKE		Citations Issued 0	Sex MALE				
_	INDIVIDUAL	(608) 295-2941		Date of Birth	irth Race WHITE				
LINO		Address E6890 SCHWANKE DR PLAIN, WI 53577 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	On Duty fety Equipment	r Crash	Safety Equipment					
		Row Seat Position		SHOULDER & LAP BELT					
	100	Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
0		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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		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
_	UAL								
LNU	INDIVIDUAL								
	IND								
		Action Other						To/From School	
								TO/T TOTAL SCHOOL	
Drug & Alcohol NO			Suspected Alcohol Us NO		Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results				
6	001	Drug Type							
		Individual Condition							
		APPEARED NORM	AL						