

6TL0DBC3H3
24-02583

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override		Primary Crash Document #	Agency Crash Number 24-02583	Investigating Officer/Deputy DEPUTY B. TRAGER	
Crash Date 03/15/2024		Crash Time 03:15 PM	Date Arrived	Time Arrived	
Date Notified 03/15/2024		Time Notified 03:16 PM	Total Units 01	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

Location

ON CTHBD SB 897 FT S OF OLD HWY 33 IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.493909658	Longitude -89.778475808
	X Coordinate 275348.65625	Y Coordinate 4819415.5
	Structure Type	

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition	
Road Surface Condition(s)	Roadway Factor(s)	
Environment Factor(s)		
Weather Condition(s)		
Animal Type DEER	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control	Special Study

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE			Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? NO	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	

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		Truck Bus or HazMat				
01	UNIT	VEHICLE	Vehicle			
			License Plate Number ABV9770	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
			Vehicle Identification Number JTMBD33V785141121	Make TOYOTA	Year 2008	Model RAV4
			Color SIL - SILVER (ALUMINUM)	Body Style UT - SPORT UTILITY VEHICLE	Bus Use	
			Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT		
			Extent Of Damage DISABLING DAMAGE			
			Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING		
			What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
			Driver Prior Action Other	NOT APPLICABLE		
			01	UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION
Owner Name	Owner Address					
01	UNIT	INDIVIDUAL	Individual			
			Driver ALEJANDRO RUIZ GUEITS (608) 960-6922	Citations Issued 0	Sex MALE	
				Date of Birth	Race WHITE	
			Address 305 MADISON ST BEAVER DAM, WI 53916 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	UNIT	001	Safety Equipment			
			On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
			Row 01 - FRONT ROW	Seat Position 07 - LEFT		
			Helmet Use	Helmet Compliance		
			Eye Protection	Tint Compliance		
			Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED			
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #			
Hospital		Date of Death	Time of Death			
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)				

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UNIT	Distracted By Action NOT DISTRACTED				
	Non Motorist	Striking Unit #	Location		
		Prior Action			
	INDIVIDUAL	Action			
		Action Other		To/From School	
		Drug & Alcohol	Suspected Alcohol Use 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
	01	001	Drug Type		
			Individual Condition APPEARED NORMAL		