## 6TL0C9H5N7

24-03399

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Crash Document		Document #	Agency Crash Number 24-03399				Investigating Officer/Deputy SERGEANT M. TATE			
N7	Crash Date 04/06/2024	Crash Time 10:46 AM	-		Date Arrived		Time	Time Arrived			
9H5N7	Date Notified 04/06/2024	Time Notified 07:47 PM			Total Units <b>01</b>		Total <b>00</b>		njured Total Killed 00		
ပ္ပ	On Emergency	Hit and Run	t and Run		Work Zone			Trailer or Towed		Reporting Threshold	
6TL	Government Property Crash Type			School Bus Related NO			Tags	Tags			
	✓ Reportable		ANIMAL W/ NO INJURY				Amended		Secondary Crash		
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
1	Location										
i	ON USH12 WB					Latitude			Longitud	ło	_
	0.36 MI N						0050		•		
						43.34550	16952		-89./58	688248	
	OF USH12 WB IN THE TOWN OF SUMPTER IN SAUK COUNTY				X Coordinate 276402.75			-	Y Coordinate <b>4802880</b>		
	IN SAUR COUNTY				Structure Type			URE			
	Crash Scene										
	First Harmful Event						st Harmful Event Location				
	NON DOMESTICATED ANI	MAL (ALIVE)				ON ROA					
	Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT				Light Condition						
	Road Surface Condition(s)					Roadway Factor(s)					
	Environment Eactor(s)					_					
	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
	Tribal Land				Access Control Special Study						
I	Unit Summary										
	Unit Status Vehicle Operating As C					Classification Unit Type					
	IN TRANSIT D CLASS				LASS			AUTOMOBILE			
~	Vehicle Type							Operating A	s Endorser	ments	
01	(SPORT) UTILITY VEHICLE										
	Total Occs	Train/Bus # Recor						ers	Total HazMat Types		
	6			0			0	0			
⊢	Insurance? YES	Direction Of Trave		Pre CrashTire Mark			Speed Lin	ed Limit To		Total Lanes	
UNIT	Most Harmful Event: Collision With			Special Function					Emergency Motor Vehicle Use		
_ ر	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTI			TION		NOT APPLICABLE		
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			

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	Truc	k Bus or HazMat								
		Vehicle								
		License Plate Number ATY5421		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance				
5	~	Vehicle Identification Number		Make	Year	Model				
0	VEHICLE 01	1FM5K8D89GGA38998		FORD	2016	EXPLORER				
				Body Style		Bus Use				
		BLK - BLACK Initial Contact Point		UT - SPORT UTILITY VEHICLE Vehicle Damage						
<b>–</b>		12 - FRONT		7 8 9 10 11						
UNIT		Extent Of Damage		01 - RIGHT FRONT CORNER, 11 - LEFT FRONT       6       12         CORNER, 12 - FRONT       5       4       3       1						
		DISABLING DAMAGE								
		Towed Due To Damage		Vehicle Removed By						
		TOWED DUE TO DISABLING	G DAMAGE	OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other		_						
		Driver Actions								
	щ	NO CONTRIBUTING ACTION	N							
UNIT	VEHICLE									
5	H									
	5									
		Owner Name		Owner Address						
		owner wane		Owner Address						
6	01									
⊢		Policy Holder								
UNIT		Insurance Company Individual								
		GENERAL-CASUALTY-INS-	co	ADOLFO MORALES	S GARCIA					
		Individual								
		Driver ADOLFO MORALES GARCI	Δ	Citations Issued 0	Sex MALE					
	AL			Date of Birth	Race					
⊨	DIVIDUAL				HISPANIC	lic				
UNIT	Σ	Address		Driver License Number						
	Z	E11631 PEN MARC CT BARABOO, WI 53913 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty Crash		Safety Equipment						
	Sa	fety Equipment								
		Row	Seat Position	SHOULDER & LAP	BELT					
		Helmet Use		Helmet Compliance						
		Eye Protection		Tipt Compliance						
		Injury Severity NO APPARENT INJURY		Tint Compliance Airbag						
-	Σ									
6	001									
		Ejected Ejection Path		Trapped/Extricated						
		Medical Transport		EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED								
		Hospital		Date of Death	Date of Death		Time of Death			

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			Distracted By Source	)				
		Distracted By	-					
		Distracted By Action						
			Striking Unit #	Location				
		Non Motorist		Loodion				
		Prior Action						
		Action						
		Action						
	AL							
F	n							
LNU	N							
	INDIVIDUAL							
	-							
		Action Other						To/From School
		Action Other						Ton Tom School
		Druge & Alasha	Suspected Alcohol U	se	Suspected Drug Use			
	L	Drug & Alcohol	NO		NO			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given		Drug Test Type		Drug Test Results		
		TEST NOT GIVEN				-		
2	01	Drug Type						
9	001	Drug Type		<u> </u>		I		
01	001	Drug Type Individual Condition				1		
01	001		1AL	L		1		