## 6TL0DBC3H7 24-03673

## 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 24-03673				Investigating Officer/Deputy DEPUTY B. TRAGER			
Н7	Crash Date <b>04/14/2024</b>	Crash Time 08:00 AM		Date Arrived		Time	Time Arrived				
0DВС3Н	Date Notified <b>04/14/2024</b>	Time Notified 11:15 AM		Total Units 01		Total		Total Killed <b>00</b>		i	
00E	On Emergency Hi	t and Run	Lane Closi	ure	Wo	rk Zone		Trailer or T	owed	Reporting Threshold	
6TL	Government Property	nool Zone	School Bus Related NO			Tags	Tags				
	<b>✓</b> 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.										
Ì	Location										
Ī	ON STH33 WB					Latitude Longitude					
	354 FT S					43.48089	7918	-89.774434225			
	OF USH12 WB					X Coordin	ate		Y Coordinate		
	IN THE VILLAGE OF WEST	BARABOO				_				4817959.5	
	IN SAUK COUNTY								401700		
						Structure 7	туре				
L	Creek Coons										
,	Crash Scene										
	First Harmful Event						nful Event Lo	ocation			
ļ	NON DOMESTICATED ANIM	O ANIMAL (ALIVE)				ON ROADWAY					
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEHIO	CLE IN TRANSP	PORT								
	Road Surface Condition(s)					Roadway	Factor(s)				
ŀ	Environment Factor(s)										
	(-,										
	Weather Condition(s)										
ļ	Asima I Tura										
	Animal Type				Relation To Trafficway						
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location PUBLIC PROPERTY				Crash Classification - Jurisdiction  NO SPECIAL JURISDICTION						
ŀ	Tribal Land				Access Control Special Study						
	Tribui Land					Special Study					
Ļ											
	Unit Summary Unit Status		1.1/-1-	:-!- 0	: A - O	:£:		T			
				icle Operating As Classification			Unit Type				
	IN TRANSIT D CLASS							AUTOMOBILE Operating As Endorsements			
01	Vehicle Type							Operating A	As Endorser	nents	
J	(SPORT) UTILITY VEHICLE				Total Trailers   Total HazMat Types						
	Total Occs Train/Bus # Recorded			Total # Citations Issued						Mat Types	
	2	0 Direction Of Travel			0			0		-11	
.		Direction Of Travel	Fie Clas					d Limit Total Lan		<del>U</del> S	
LINO				Special Function					Emergency Motor Vehicle Use		
5	Most Harmful Event: Collision With			Special Function NO SPECIAL FUNCTION			TION		NOT APPLICABLE		
ļ	NON DOMESTICATED ANIMAL (ALIVE)										
	Traffic Way			Traffic Control					Traffic Control Inoperative/Missing		
ŀ	Surface Type			Road Curvature				Road Grade			
	21			Trodu Guivaluic				-			

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	Truc	k Bus or HazMat						
	,	Vehicle						
		License Plate Number ARA9234	Plate Type AUT - AUTOMOBILE	St <b>WI</b>	Country of Issuance UNITED STATES			
5	VEHICLE 01	Vehicle Identification Number 1C4RJFAG0HC754206	Make JEEP	Year <b>2017</b>	Model GRAND CHER			
		Color RED - RED	Body Style UT - SPORT UTILITY VEHICLE Bus Use					
LINI		Initial Contact Point 01 - RIGHT FRONT CORNER Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage  01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 12 - FRONT					
		Towed Due To Damage  NOT TOWED	Vehicle Removed By  OWNER					
		What Driver Was Doing	Vehicle Factors					
		Driver Prior Action Other						
LIND	Driver Actions NO CONTRIBUTING ACTION							
		Owner Name	Owner Address					
9	6							
LINO	I	Policy Holder Insurance Company	I a second					
5		ALLSTATE-INS-CO	SHARON SEAMANS	3				
	INDIVIDUAL	Individual Driver	Citations Issued	Sex				
		SHARON SEAMANS	0	FEMALE				
_		(608) 448-2309	Date of Birth	Race WHITE				
LINO		Address 515 BADGER DR BARABOO, WI 53913 , US	Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash fety Equipment	Safety Equipment					
		Row Seat Position	SHOULDER & LAP BELT					
	100	Helmet Use	Helmet Compliance					
		Eye Protection	Tint Compliance					
10		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 04/14/2024

Crash Time 08:00 AM

		Distracted By	Distracted By Source					
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	JAL							
LNO	INDIVIDUAL							
	N							
		Action Other						To/From School
	Drug & Alcohol NO			se	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		;	
2	001	Drug Type						
		Individual Condition						
APPEARED NORMAL								
		AI I LAILLE NOIL	TIAL .					