

6TL0DDT5NX

24-03698

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0DDT5NX

| | | | | | |
|--|---|--|--|---|--|
| Document Number Override 6TL0D5DZ1N | | Primary Crash Document # | Agency Crash Number 24-03698 | Investigating Officer/Deputy DEPUTY J. HUNTER | |
| Crash Date 04/14/2024 | | Crash Time 07:44 PM | Date Arrived 04/14/2024 | Time Arrived 07:58 PM | |
| Date Notified 04/14/2024 | | Time Notified 07:44 PM | Total Units 01 | Total Injured 02 | Total Killed 00 |
| <input type="checkbox"/> On Emergency | <input type="checkbox"/> Hit and Run | <input checked="" 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 DT4000 (STANDARD CRASH) | | <input checked="" type="checkbox"/> Amended | <input type="checkbox"/> Secondary Crash |

Description

| | |
|--|---|
| Diagram <p>HY 130, N of Durst Rd.</p> | Reconstruction By |
| | Photos By DEPUTY HUNTER |
| | Additional Information PHOTOS |

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

UNIT 1 WAS SOUTHBOUND ON HY 130, NORTH OF DURST RD. THE OPERATOR STATED UNIT 1 WAS TRAVELING APPROXIMATELY 60 MPH. OPERATOR OF UNIT 1 STATED A DEER RAN INTO THE ROAD IN FRONT OF UNIT 1, AND UNIT 1 COLLIDED WITH THE DEER IN THE MIDDLE OF THE SOUTHBOUND LANE. AFTER THE COLLISION UNIT 1 THEN VEERED ONTO THE RIGHT-HAND SHOULDER OF THE ROAD NEAR THE GUARD RAIL. UNIT 1 RE-ENTERED THE SOUTHBOUND LANE AND FELL OVER. BOTH RIDERS WERE SEPARATED FROM UNIT 1, WHICH SLID SOUTH ON THE ROADWAY. UNIT 1 CAME TO REST IN THE NORTHBOUND LANE OF HY 130. OPERATOR OF UNIT 1 CALLED 911, WHICH INITIATED AN EMERGENCY RESPONSE. DEER WAS LOCATED DECEASED NEARBY.

ADDING TO NARRATIVE, ADJUSTED DIAGRAM

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Location

| | | |
|--|---------------------------------------|-----------------------------------|
| ON STH130 SB 0.95 MI W OF SANDUSKY RD IN THE TOWN OF WASHINGTON IN SAUK COUNTY | Latitude 43.390893985 | Longitude -90.170276937 |
| | X Coordinate 243232.5 | Y Coordinate 4809107 |
| | Structure Type NO STRUCTURE | |

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 DAYLIGHT | |
| Road Surface Condition(s) DRY | | Roadway Factor(s) NONE | |
| Environment Factor(s) NONE | | | |
| Weather Condition(s) CLEAR | | | |
| Animal Type DEER | | Relation To Trafficway TRAFFICWAY - ON ROAD | |
| Crash Classification - Location PUBLIC PROPERTY | | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | |
| Tribal Land | | Access Control NO CONTROL | Special Study |
| Within Interchange Area NO | Junction Location NON-JUNCTION | Intersection Type NOT AN INTERSECTION | |
| Closure Type FULL CLOSURE | | Reasons for Closure LAW ENFORCEMENT, FIRE/EMS | |
| Date Initial Lane/Rd Closed 04/14/2024 | Time Initial Lane/Rd Closed 08:00 PM | Date Scene Cleared 04/14/2024 | |
| Date All Lanes Open 04/14/2024 | Time All Lanes Open 09:15 PM | | |

Unit Summary

| | | | | | |
|-------------|--|---|--|--------------------------------|--|
| UNIT | Unit Status IN TRANSIT | Vehicle Operating As Classification M CLASS | | Unit Type MOTORCYCLE | |
| | Vehicle Type MOTORCYCLE | Operating As Endorsements | | | |
| | Total Occs 2 | Train/Bus # Recorded | Total # Citations Issued 1 | Total Trailers 0 | Total HazMat Types 0 |
| | Insurance? YES | Direction Of Travel SOUTHBOUND | <input checked="" type="checkbox"/> Pre CrashTire 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 |
| | Truck Bus or HazMat NO | | | | |

Vehicle

| | | | |
|--------------------------------------|----------------------------------|-----------------|---|
| License Plate Number 115AH | Plate Type CYC - CYCLE | St WI | Country of Issuance UNITED STATES |
|--------------------------------------|----------------------------------|-----------------|---|

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| | | | | | | | | |
|---------------------------|------|------------|---|---|---|--|-----------------------|--|
| 01 | UNIT | VEHICLE | 01 | Vehicle Identification Number 1HD1BMY171Y031881 | Make HARLEY DAVIDSON | Year 2001 | Model FLSTF | |
| | | | Color RED - RED | Body Style RS - ROAD-STREET | Bus Use | | | |
| | | | Initial Contact Point 12 - FRONT | Vehicle Damage | | | | |
| | | | Extent Of Damage DISABLING DAMAGE | 15 - ALL AREAS | | | | |
| | | | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By | | | | |
| | | | What Driver Was Doing GOING STRAIGHT | Vehicle Factors | | | | |
| 01 | UNIT | VEHICLE | 01 | Driver Prior Action Other | NOT APPLICABLE | | | |
| | | | 01 | Driver Actions LOOKED BUT DID NOT SEE, UNKNOWN | | | | |
| | | | 01 | Owner Name GAGE FERGUSON | Owner Address 28262 POST HOLLOW LN LONE ROCK, WI 53556 , US | | | |
| Sequence Of Events | | | | | | | | |
| 01 | UNIT | VEHICLE | 01 | Event DOMESTICATED ANIMAL - ALIVE | | | | |
| | | | 02 | Event | | | | |
| | | | 03 | Event | | | | |
| | | | 04 | Event | | | | |
| Policy Holder | | | | | | | | |
| 01 | UNIT | INDIVIDUAL | 01 | Insurance Company GEICO-ADVANTAGE-INSURANCE-CO | Individual GAGE FERGUSON | | | |
| | | | 01 | Driver GAGE FERGUSON | Citations Issued 1 | Sex MALE | | |
| 01 | UNIT | INDIVIDUAL | 01 | Date of Birth | Race WHITE | | | |
| | | | 01 | Address 28262 POST HOLLOW LN LONE ROCK, WI 53556 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | | |
| Safety Equipment | | | | | | | | |
| 01 | UNIT | INDIVIDUAL | 01 | On Duty Crash | Protective Gear BOOTS, LONG PANTS | | | |
| | | | 01 | Row 01 - FRONT ROW | Seat Position 07 - LEFT | | | |
| | | | 01 | Helmet Use NO | Helmet Compliance UNKNOWN | | | |
| | | | 01 | Eye Protection YES: WINDSHIELD | Tint Compliance UNKNOWN | | | |
| 01 | UNIT | INDIVIDUAL | 001 | Injury SUSPECTED SERIOUS INJUR | Airbag NON DEPLOYED | | | |
| | | | 001 | Ejected NOT APPLICABLE | Ejection Path NOT EJECTED/NOT APPLICABLE | Trapped/Extricated NOT TRAPPED | | |

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|--|---|--|---|--|--|
| UNIT INDIVIDUAL | Medical Transport EMS AIR | | EMS Agency Identifier 6001285 | EMS Run # 24040124 | |
| | Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT | | Date of Death | Time of Death | |
| | Distracted By | | Distracted By Source UNKNOWN | | |
| | Distracted By Action UNKNOWN | | | | |
| | Non Motorist | | Striking Unit # | Location | |
| | Prior Action | | | | |
| | Action | | | | |
| | Action Other | | | To/From School | |
| | Drug & Alcohol | | Suspected Alcohol Use YES | Suspected Drug Use NO | |
| | Alcohol Test Given TEST GIVEN | | Alcohol Test Type BLOOD | Alcohol Test Results PENDING | |
| Drug Test Given TEST NOT GIVEN | | Drug Test Type | Drug Test Results | | |
| Drug Type | | | | | |
| Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL | | | | | |
| UNIT INDIVIDUAL | Individual | | | | |
| | Passenger JESSE KENT | | Citations Issued 0 | Sex FEMALE | |
| | | | Date of Birth | Race WHITE | |
| | Address 100 S FOUNTAIN ST # G MONTFORT, WI 53569 , US | | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| | | | Protective Gear LONG PANTS, UNKNOWN | | |
| UNIT INDIVIDUAL | Safety Equipment | | On Duty Crash | | |
| | Row 02 - SECOND ROW | Seat Position 07 - LEFT | | | |
| | Helmet Use NO | | Helmet Compliance UNKNOWN | | |
| | Eye Protection YES: WINDSHIELD | | Tint Compliance UNKNOWN | | |
| | Injury | | Injury Severity SUSPECTED SERIOUS INJUR | Airbag NON DEPLOYED | |
| | Ejected NOT APPLICABLE | Ejection Path NOT EJECTED/NOT APPLICABLE | Trapped/Extricated NOT TRAPPED | | |
| | Medical Transport EMS GROUND | | EMS Agency Identifier 6001024 | EMS Run # 240680 | |

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|------|---|--|--|--|
| UNIT | Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT | | Date of Death | Time of Death |
| | Distracted By Distracted By Source | | | |
| | Distracted By Action | | | |
| | Non Motorist | | Striking Unit # | Location |
| | Prior Action | | | |
| | 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 | 002 | Drug Type | | |
| | | Individual Condition APPEARED NORMAL | | |
| | | Violations | | |
| 01 | UTC Number BG110256 | Issue To? 001 | Statute Number 346.63(2)(a)1 | Description CAUSE INJURY/OPERATE WHILE UNDER INFLUENCE 1ST |