6TL0DQPGFV 24-03958

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 Nun 24-03958				stigating Officer/Deputy PUTY B. SONN			
эFV	Crook Data	Crack Time						e Arrived			
	Crash Date 04/21/2024	Crash Time 08:22 PM		Date Arrived							
Ö	Date Notified	Time Notified		Total Ur	nits		Tota	l Injured	Total Killed	d	
QP	04/21/2024	08:22 PM		01		00			00		
00	On Emergency Hi	t and Run	nd Run Lane Closure W			ork Zone		Trailer or Towed		Reporting Threshold	
6TL	Government Active School Zone			School Bus Related NO			Tags	ags			
	✓ Reportable	ICATED ANII	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.										
Ī	Location	ocation									
Ī	ON CTHH EB					Latitude Longitude					
	0.84 MI N					43.6029	15442	-89.9026			
	OF CTHP EB					X Coordin	ate	Y Coordinate		linate	
	IN THE TOWN OF DELLONA	L				_			_	4831865.5	
	IN SAUK COUNTY					Structure	Tyne				
						o ii u o i u i	. , p =				
L											
(Crash Scene										
	First Harmful Event						nful Event Lo	ocation			
	NON DOMESTICATED ANIM	AL (ALIVE)				ON ROA	DWAY				
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSP	ORT								
	Road Surface Condition(s)					Roadway	Factor(s)				
ŀ	Environment Factor(s)										
	LIMIOIIIIEILI actor(s)										
ı	Weather Condition(s)										
	Animal Type				Relation To Trafficway						
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY					NO SPE	CIAL JUR	SDICTION			
	Tribal Land					Access Control				Special Study	
Ţ											
Į	Unit Summary										
				ehicle Opera	rating As Classification			Unit Type			
	IN TRANSIT			D CLASS				AUTOMOBILE			
_	Vehicle Type				Operating As Endorsements						
01	PASSENGER VAN										
	Total Occs Train/Bus # Recorded			Total # Citations Issued		Total Tra		ailers Total H		:Mat Types	
	1			0		0		0			
ŀ	Insurance?	Direction Of Travel	1	Pre CrashTire		Speed Lir				es	
⊢ l	YES	EASTBOUND			Mark						
LIND	Most Harmful Event: Collision With			pecial Funct		1		Emergency Motor Vehicle Use			
⊃	NON DOMESTICATED ANIMAL (ALIVE)			O SPECIA		TION		NOT APPLICABLE			
ŀ	Traffic Way			affic Contro	ol			Traffic Control Inoperative/Missing			
	•										
ŀ	Surface Type			Road Curvature			Road Grade		e		
				-							

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Crash Date 04/21/2024

Crash Time 08:22 PM

	Truc	k Bus or HazMat						
	,	Vehicle						
10	VEHICLE 01	License Plate Number APV3487	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES			
		Vehicle Identification Number 5TDJRKEC4NS117643	Make TOYOTA	Year 2022	Model SIENNA			
		Color RED - RED	Body Style Bus Use VN - VAN					
UNIT		Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage DISABLING DAMAGE	Vehicle Damage 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER 7 8 9 10 11 6 6 7 12 12 12 12 12 12 12 12 12 12 12 12 12					
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By PLATTS WRECKER					
		What Driver Was Doing NEGOTIATING CURVE Driver Prior Action Other	Vehicle Factors NOT APPLICABLE					
		Driver Actions						
UNIT	NO CONTRIBUTING ACTION							
		Owner Name	Owner Address					
0	2							
⊨	l	Policy Holder						
LIND		Insurance Company AMERICAN-FAMILY-MUTUAL-INS-CO	Individual HARESH PATEL					
	INDIVIDUAL	Individual						
		Driver HARESH PATEL	Citations Issued 0	Sex MALE				
_		(262) 497-5336	Date of Birth	Race				
TINO		Address 833 N FRONTAGE RD WISCONSIN DELLS, WI 53965 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash fety Equipment	Safety Equipment					
		Row Seat Position	SHOULDER & LAP BELT					
	001	Helmet Use	Helmet Compliance					
		Eye Protection	Tint Compliance					
5		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	Distracted By Source					
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	JAL							
LNN	INDIVIDUAL							
	<u>N</u>							
		Action Other						To/From School
	ı	Drug & Alcohol	Suspected Alcohol U 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		
10	004	Drug Type				•		
		Individual Condition						
		APPEARED NORM	MAL					