

6TL0D6N05P
24-04069

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 24-04069	Investigating Officer/Deputy DEPUTY B. STODDARD	
Crash Date 04/24/2024		Crash Time 07:50 AM	Date Arrived	Time Arrived	
Date Notified 04/24/2024		Time Notified 07:50 AM	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 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 LEVEE RD 785 FT E OF CHTH NB IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude 43.55958896	Longitude -89.682160562
	X Coordinate 283371.8125	Y Coordinate 4826454.5
	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	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way	Traffic Control	Traffic Control Inoperative/Missing		
	Surface Type	Road Curvature	Road Grade		

NO

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		Truck Bus or HazMat				
01	UNIT	VEHICLE	Vehicle			
			License Plate Number RK8667	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
			Vehicle Identification Number 3C6UR5DL6MG639176	Make RAM	Year 2021	Model 2500
			Color BLK - BLACK	Body Style PK - PICKUP	Bus Use	
			Initial Contact Point 12 - FRONT	Vehicle Damage 12 - FRONT		
			Extent Of Damage MINOR DAMAGE			
			Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
			What Driver Was Doing	Vehicle Factors		
			Driver Prior Action Other			
			01	UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION
Owner Name	Owner Address					
Policy Holder						
01	UNIT	Insurance Company GERMANTOWN-MUTUAL-INS-CO	Individual SPENCER GOODWATER			
		Individual				
01	UNIT	INDIVIDUAL	Driver SPENCER GOODWATER (608) 606-6350	Citations Issued 0	Sex MALE	
				Date of Birth	Race WHITE	
			Address 38 S WAGONER AVE VIOLA, WI 54664 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
			Safety Equipment		On Duty Crash	
01	UNIT	001	Safety Equipment SHOULDER & LAP BELT			
			Row	Seat Position		
			Helmet Use		Helmet Compliance	
			Eye Protection		Tint Compliance	
			Injury	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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UNIT	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	
	Drug Type				
01	001	Individual Condition			
		APPEARED NORMAL			