

**25-00914**

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

6TL0DQPGH9

Document Number Override		Primary Crash Document #		Agency Crash Number <b>25-00914</b>		Investigating Officer/Deputy <b>DEPUTY B. SONN</b>	
Crash Date <b>01/30/2025</b>		Crash Time <b>08:15 PM</b>		Date Arrived		Time Arrived	
Date Notified <b>01/30/2025</b>		Time Notified <b>08:15 PM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>NON-DOMESTICATED ANIMAL W/ NO INJURY</b>				<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.

<b>ON USH14 WB</b> <b>0.49 MI E</b> <b>OF DYKE RD</b> <b>IN THE TOWN OF SPRING GREEN</b> <b>IN SAUK COUNTY</b>	Latitude	Longitude
	<b>43.189712811</b>	<b>-90.123559681</b>
	X Coordinate	Y Coordinate
	<b>246180.359375</b>	<b>4786620</b>
	Structure Type	

First Harmful Event <b>NON DOMESTICATED ANIMAL (ALIVE)</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition	
Road Surface Condition(s)	Roadway Factor(s)	
Environment Factor(s)		
Weather Condition(s)		
Animal Type <b>DEER</b>	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control	Special Study

Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements	
Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit	Total Lanes	
Most Harmful Event: Collision With <b>NON DOMESTICATED ANIMAL (ALIVE)</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
Traffic Way		Traffic Control		Traffic Control Inoperative/Missing	
Surface Type		Road Curvature		Road Grade	

6TL0DQPGH9

25-00914

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Truck Bus or HazMat						
01	UNIT	VEHICLE	<b>Vehicle</b>					
			License Plate Number <b>ASP5457</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>		
			Vehicle Identification Number <b>KNDPMCAC6H7269801</b>	Make <b>KIA</b>	Year <b>2017</b>	Model <b>SPORTAGE</b>		
			Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use			
			Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE</b>				
			Extent Of Damage <b>DISABLING DAMAGE</b>					
			Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>NACHREINERS TOWING</b>				
			What Driver Was Doing	Vehicle Factors				
			Driver Prior Action Other					
			01	UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
Owner Name	Owner Address							
<b>Policy Holder</b>								
Insurance Company <b>PROGRESSIVE-UNIVERSAL-INSURANCE-COMP</b>	INDIVIDUAL <b>WILLIAM CLARK</b>							
<b>Individual</b>								
DRIVER <b>WILLIAM CLARK</b> <b>(262) 527-9474</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>						
	Date of Birth	Race <b>WHITE</b>						
Address <b>402 N 8TH ST LOT 102</b> <b>AVOCA, WI 53506 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>							
01	UNIT	INDIVIDUAL				<b>Safety Equipment</b>		
						On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
			Row	Seat Position				
			Helmet Use	Helmet Compliance				
			Eye Protection	Tint Compliance				
			<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag			
				Ejected	Ejection Path	Trapped/Extricated		
				Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #		
				Hospital	Date of Death	Time of Death		

6TL0DQPGH9

25-00914

WISCONSIN MOTOR VEHICLE  
CRASH REPORTSAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895

UNIT INDIVIDUAL 01 001	<b>Distracted By</b>		Distracted By Source	
	Distracted By Action			
	<b>Non Motorist</b>		Striking Unit #	Location
	Prior Action			
	Action			
	Action Other			To/From School
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results
	Drug Type			
Individual Condition <b>APPEARED NORMAL</b>				