

6TL0B4X4H3
18-03178

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 18-03178	Investigating Officer/Deputy DEPUTY E. KNULL	
Crash Date 03/28/2018		Crash Time 06:00 AM	Date Arrived	Time Arrived	
Date Notified 03/28/2018		Time Notified 06:00 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 checked="" 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 WALNUT ST/ STH154 EB 0.49 MI E OF CRESCENT DR (2) IN THE TOWN OF WESTFIELD IN SAUK COUNTY	Latitude 43.437489473	Longitude -90.057424413
	X Coordinate 252563.15625	Y Coordinate 4813940.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)	First Harmful Event Location ON ROADWAY	
Manner of Collision 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 AUTOMOBILE			
	Vehicle Type PASSENGER VAN	Operating As Endorsements				
	Total Occs 1	Train/Bus # Injured	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		

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Truck Bus or HazMat NO													
UNIT 01	Vehicle												
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	Color BLK - BLACK	Body Style VN - VAN	Bus Use NOT A BUS										
	Initial Contact Point 12--FRONT	Vehicle Damage											
	Extent Of Damage DISABLING DAMAGE	12--FRONT											
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By WAGNER											
	What Driver Was Doing	Vehicle Factors											
	Driver Prior Action Other												
Driver Actions NO CONTRIBUTING ACTION													
Driver Distractions NOT DISTRACTED													
Owner Name	Owner Address												
UNIT 01	Policy Holder												
	<table border="1"> <tr> <td>Insurance Company WILSON-MUTUAL-INS-CO</td> <td>Individual BARBARA SCOTT</td> </tr> </table>	Insurance Company WILSON-MUTUAL-INS-CO	Individual BARBARA SCOTT										
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	Equipment	On Duty Crash	Safety Equipment										
Seat Position	SHOULDER & LAP BELT												
Helmet Use	Helmet Compliance												
Eye Protection	Tint Compliance												

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01	UNIT	INDIVIDUAL	001						
				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	
				Non Motorist		Striking Unit #	Prior Action	Location	To/From School
				Action					
				Action Other					
				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					
				Individual Condition APPEARED NORMAL					