6TL08S5WTN 18-04874

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	Primary Crash Document #		Agency Crash Number			Investigating Officer/Deputy SERGEANT S. SCHRAM			
_	Crash Date	Crash Time	Crash Time		Date Arrived		Time Arrived				
	05/13/2018	09:29 PM									
5	Date Notified	Time Notified		Total Ur	nito		Total	Injured	Total Killed	٨	
≥		09:29 PM			nits		00	injurea	00	a	
33	05/13/2018	U9:29 PW		01			00		UU	<u> </u>	
6TL08S5WTN	On Emergency	it and Run	t and Run Lane CI		osure Wo		rk Zone		owed	Reporting Threshold	
	Government			School Bus Related		ed	Tags				
Ĕ	Property	Active Sc	Active School Zone NO			NO					
٥	▼ Reportable	TICATED AN	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.										
i	Location	ocation									
Ī	ON STH60 WB					Latitude Longitude					
	0.57 MI W					43.2004209		156		-89.898619582	
	OF FOX RD										
	IN THE TOWN OF TROY					X Coordin		Y Coordi 478715			
	IN SAUK COUNTY					264501.1			4/0/13	01.0	
						Structure Type					
,	Crash Scene					1					
,											
	First Harmful Event						nful Event Lo	cation			
	NON DOMESTICATED ANIM	/IAL (ALIVE)				ON ROADWAY					
ļ	Manner of Collision					Light Condition					
	NO COLLISION W/VEHICLE	IN TRANSPORT	Т								
ŀ	Road Surface Condition(s)					Roadway	Factor(s)				
	.,					•	* *				
ľ	Environment Factor(s)										
ļ	Weather Condition(s)					1					
ļ	Animal Type				Relation To Traf			afficway			
	DEER				TRAFFICWAY - ON ROAD						
ŀ	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY Tribal Land				NO SPECIAL JURISDICTION						
						Access Co	ontrol			Special Study	
					7.00000 Common			op strain stately			
ļ						<u> </u>				<u> </u>	
_ '	Unit Summary										
	Unit Status Vehicle Operating A				ating As C	Classification		Unit Type			
	IN TRANSIT D CL				D CLASS			AUTOMOBILE			
_	Vehicle Type				Operating As Endorsements						
0	PASSENGER CAR										
ŀ	Total Occs Train/Bus # Injured			Total # Citations Issued		Total Traile		ailers Total Hazi		Mat Types	
	01		0		**						
	Insurance?									201	
					Pre CrashTire		Speed Lim		I Otal Lalles		
LIND	YES WESTBOUND			☐ Mark						tala Haa	
5	Most Harmful Event: Collision With			Special Function		TION		Emergency Motor Vehicle Use NOT APPLICABLE			
-	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION							
	Traffic Way			Traffic Control					Traffic Control Inoperative/Missing		
	Surface Type			Road Curvature			Road Grade				

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	Truc	ick Bus or HazMat								
	NO									
Vehicle										
		License Plate Number	Plate Type	St	Country of Issuance					
		ACM8034	AUT - AUTOMOBILE	WI	UNITED STATES					
UNIT 01	5	Vehicle Identification Number 1C3CCCDG2FN556775	Make CHRYSLER	Year 2015	Model 200 S					
		Color BLU - BLUE	Body Style 4D - 4DR		Bus Use NOT A BUS					
	VEHICLE	Initial Contact Point	Vehicle Damage	Vehicle Damage						
		12FRONT Extent Of Damage FUNCTIONAL DAMAGE	1RIGHT FRONT CORNI	1RIGHT FRONT CORNER, 11LEFT FRONT CORNER, 12FRONT						
		Towed Due To Damage	Vehicle Removed By							
		NOT TOWED		DPERATOR						
		What Driver Was Doing	Vehicle Factors							
		Driver Prior Action Other								
	ш	Driver Actions NO CONTRIBUTING ACTION								
LIND	VEHICLE									
)	VE									
		Driver Distractions								
		NOT DISTRACTED								
5	7									
Ū										
		Owner Name	Owner Address	Owner Address						
_	ı									
LNO		Insurance Company	Individual							
		TOWN-&-COUNTRY-MUTUAL-INS-CO	DUSTIN HUSOM	DOSTIN ROSOM						
		Driver	Citations Issued		Sex					
	_	DUSTIN MICHAEL HUSOM	0		MALE					
_	DUA	(608) 432-4325	Date of Birth		Race WHITE					
LINO	INDIVIDUAL	Address STATE OF THE PROPERTY	Driver License Number	Driver License Number						
		504 S IOWA ST DODGEVILLE, WI 53533 , US	STATE: WISCONSIN C	STATE: WISCONSIN COUNTRY: UNITED STATES						
		Equipment On Duty Crash	Safety Equipment	Safety Equipment						
		Seat Position	SHOULDER & LAP BE	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance	Helmet Compliance						
	Eye Protection		Tint Compliance							

Crash Time 09:29 PM

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Crash Date 05/13/2018

Crash Time 09:29 PM

					1						
10	001	Injury	Injury Severity NO APPARENT	INJURY	Airbag						
		Ejected	cted			Ejection Path		Trapped/Extricated			
		Medical Transport			EMS Agency Identifier		EMS Run#				
		NOT TRANSPOR	TED								
		Hospital			Date of Death	Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School			
		Action	•	•		•					
	7										
_	INDIVIDUAL										
UNIT	₽										
	\geq										
	닐										
	=										
		Action Other									
			Suspected Alcohol	Use	Suspected Drug U						
	E	Drug & Alcohol	NO		NO						
	Alcohol Test Given				Alcohol Test Type		Alcohol Test Results				
		TEST NOT GIVEN	I		,						
	Drug Test Given			Drug Test Type		Drug Test Results					
		TEST NOT GIVEN									
_	Ξ	Drug Type									
5 6 Drug Type											
Individual Condition											
	APPEARED NORMAL										