## 6TL096J8WV

### 18-05418

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash I	Primary Crash Document #		Agency Crash Number 18-05418			Investigating Officer/Deputy DEPUTY J. SOLCHENBERGER			
>	Crash Date	Crash Time			Date Arrived			Time Arrived			
Z	05/26/2018 Date Notified	05:26 PM Time Notified		<b>T</b> ( ) ( )	•••				<b>T</b> ( 1700 )		
3J8	05/26/2018	05:36 PM		Total Units 01		Total <b>00</b>		Injured	Injured Total Killed 00		
6TL096J8WV	On Emergency	Hit and Run	Lane Clos	ure	Wo	/ork Zone		Frailer or T	owed	Reporting Threshold	
6TL	Government Property Active School Z			School Bus Related			Tags	Tags			
	Reportable	Crash Type NON-DOMES	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			Amended			Secondary Crash		
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
ļ											
	ON CTHT SB					Latitude			•	Longitude	
	221 FT W OF BUMP RD				43.517056518		-89.705		5796114		
	IN THE TOWN OF FAIRFIELD						X Coordinate 281309		Y Coordinate 4821792.5		
	IN SAUK COUNTY				Structure Type			402179	4021792.5		
						ourdotaro i	уре				
	Crash Scene										
	First Harmful Event					First Harm	ful Event Lo	cation			
	NON DOMESTICATED AI				ON ROADWAY Light Condition						
	Manner of Collision										
	NO COLLISION W/VEHIC	NO COLLISION W/VEHICLE IN TRANSPORT									
	Road Surface Condition(s)					Roadway Factor(s)					
	Environment Factor(s)										
	Weather Condition(s)	Weather Condition(a)									
	Weather Condition(3)	samer Condition(s)									
	Animal Type TURKEY Crash Classification - Location				Relation To Traffic TRAFFICWAY -						
						Crash Classification - Jurisdiction					
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION			Special Study			
	Tribal Land			A		Access Control					
	Unit Summary 🛛 💻										
	Unit Status			Vehicle Operating As Classification				Unit Type			
				D CLASS			AUTOMOBILE				
01	Vehicle Type PASSENGER CAR							Operating	As Endorsen	nents	
•	Total Occs Train/Bus # Injured			Total # Citations Issued		Total Tra		ailers Total Haz		Mat Types	
	1		- 100			0					
Т	Insurance? YES	Direction Of Trave		Pre CrashTire Mark		Speed Lim		it Total Lane		es	
UNIT	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			
	21 *										

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	Truck Bus or HazMat									
	NO									
		Vehicle								
01		License Plate Number 192YUG	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES					
	6	Vehicle Identification Number 1J4GW48S74C399286	Make JEEP	Year 2004	Model GRAND CHER					
		Color BGE - BEIGE	Body Style UT - SPORT UTILITY VEH	ICLE	Bus Use NOT A BUS					
UNIT	CLE	Initial Contact Point 12FRONT	Vehicle Damage 12FRONT							
	VEHICL	Extent Of Damage FUNCTIONAL DAMAGE								
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By OPERATOR							
		What Driver Was Doing	Vehicle Factors							
		Driver Prior Action Other								
	ш	Driver Actions NO CONTRIBUTING ACTION								
UNIT	VEHICLE									
	Κ									
		Driver Distractions NOT DISTRACTED								
01	0	6								
		Owner Name	Owner Address	Owner Address						
JNIT	I	Policy Holder								
5		Insurance Company WEST-BEND-MUTUAL-INS-CO	Individual CHRISTOPHER LEMKE	CHRISTOPHER LEMKE						
		Individual	Oitetians Is							
	Ļ	Driver JACKALYNN ROSE LEMKE (608) 393-0533	Citations Issued 0		Sex FEMALE					
F	INDIVIDUAL		Date of Birth		Race WHITE					
UNIT		Address S3702 W BENT TREE DR BABABOO WI 53913 US		Driver License Number						
		BARABOO, WI 53913 , US								
		Equipment On Duty Crash	Safety Equipment							
		Seat Position		SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance	Helmet Compliance						
•		Eye Protection	Tint Compliance							

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6	001	Injury	Injury Severity NO APPARENT	INJURY	Airbag					
		Ejected			Ejection Path		Trapped/Extricated			
		Medical Transport NOT TRANSPOR	TED		EMS Agency Identifier		EMS Run #			
		Hospital			Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School		
		Action				•				
⊢	UAL									
UNIT	INDIVIDUAL									
	Ĭ									
		Action Other	Dther							
	Ľ	Drug & Alcohol	Suspected Alcohol	Use	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Given			Alcohol Test Type		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
9	001	Drug Type								
		Individual Condition								
APPEARED NORMAL										