

6TL0B8M7TG
18-07995

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 18-07995	Investigating Officer/Deputy DEPUTY B. MEARS	
Crash Date 07/24/2018		Crash Time 06:07 PM	Date Arrived	Time Arrived	
Date Notified 07/24/2018		Time Notified 06:07 PM	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 USH12 WB 1069 FT E OF OLD BLUFF TRL IN THE TOWN OF SUMPTER IN SAUK COUNTY	Latitude 43.352019816	Longitude -89.762588504
	X Coordinate 276110.5625	Y Coordinate 4803614
	Structure Type	

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 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 01	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)	Special Function	Emergency Motor Vehicle Use		
	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	Vehicle	
		License Plate Number 778CWJ	Plate Type AUT - AUTOMOBILE
		Vehicle Identification Number 2G1WT58N589134723	Make CHEVROLET
		Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR
		Initial Contact Point 11--LEFT FRONT CORNER	Vehicle Damage 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT
		Extent Of Damage FUNCTIONAL DAMAGE	
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR
		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	VEHICLE	Policy Holder	
		Insurance Company GEICO-CASUALTY-CO	Individual MARCO RALLY
		Individual	
UNIT 01	INDIVIDUAL	Driver MARCO RALLY BARRANTES (608) 432-8445	Citations Issued 0
			Sex MALE
			Date of Birth
			Race WHITE
		Address 310 DRISCOLL LN PO BOX/175 OXFORD, WI 53952 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY			
Helmet Use	Helmet Compliance		
Eye Protection	Tint Compliance		

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01	001						
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED			
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL		Trapped/Extricated NOT TRAPPED		
		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				
01	001	Drug Type					
		Individual Condition APPEARED NORMAL					