6TL0B655MR 18-10180

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash	rimary Crash Document # Agency Crash Nu								
~	Crash Date	Crash Time	Crash Time		18-10180 Date Arrived			DEPUTY W. NEUBAUER Time Arrived			
M	09/13/2018	08:05 PM									
355M	Date Notified 09/13/2018	Time Notified 09:05 PM			Total Units 01		Total 00	Injured Total Killed 00		d	
.0B65	On Emergency	Hit and Run	and Run Lane Clo		osure Work Zon			Trailer or Towed		Reporting Threshold	
eTL	Government Active School Z			School Bus Related NO			Tags				
	Reportable	STICATED A	ANIMAL W/ NO INJURY				Amended		Secondary Crash		
ļ	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
ļ	Location										
•	ON STH33 EB 0.49 MI W					Latitude Longitude 43.474519908 -89.704999348					
	OF ROCKY POINT RD					43.474519908					
	IN THE TOWN OF GREE	NFIELD								Y Coordinate 4817066.5	
	IN SAUK COUNTY					Structure Type					
							UCTURE				
(Crash Scene										
ì	First Harmful Event					First Harm	nful Event Lo	cation			
	NON DOMESTICATED A	NIMAL (ALIVE)				ON ROADWAY					
	Manner of Collision				Light Condition						
	NO COLLISION W/VEHIC	CLE IN TRANSPOR	RT								
	Road Surface Condition(s)				Roadway Factor(s)						
	Environment Factor(s)										
•	Weather Condition(s)										
	Animal Type				Relation To Trafficway						
	DEER Crash Classification Leastion				TRAFFICWAY - ON ROAD						
	Crash Classification - Location PUBLIC PROPERTY				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION						
	Tribal Land				Access Control Special Study						
Į	Unit Summary										
				Vehicle Operating As Classification D CLASS			Unit Type TRUCK				
_	Vehicle Type				Operating As Endorsements						
6	CARGO VAN (10,000 LBS OR LESS)										
	Total Occs 1	Train/Bus # Injure		Total # Citations Issued 0		0		0		Mat Types	
_	Insurance? YES	Direction Of Trave	el	Pre CrashTire		Speed Lim		it Total Lanes		nes	
LIND	Most Harmful Event: Collision With			Special Function NO SPECIAL FUNCTION		TION			Motor Vehicle Use		
	NON DOMESTICATED ANIMAL (ALIVE) Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
								·			
	Surface Type			Road Curvature				Road Grade			

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	Truc NO	k Bus or HazMat							
		Vehicle							
UNIT 01		License Plate Number GE3832	Plate Type LTK - LIGHT TRUCK						
	5	Vehicle Identification Number 1FTLR4FE1BPA61235	Make Yeal FORD 201		Model RANGER				
		Color SIL - SILVER (ALUMINUM)	Body Style PK - PICKUP		Bus Use NOT A BUS				
	VEHICLE	Initial Contact Point 12FRONT Extent Of Damage MINOR DAMAGE	Vehicle Damage 12FRONT						
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR						
		What Driver Was Doing Vehicle Factors Driver Prior Action Other							
		Driver Actions							
LIND	VEHICLE	NO CONTRIBUTING ACTION							
_	_	Driver Distractions NOT DISTRACTED							
2	01								
		Owner Name	Owner Address						
Ħ	ı	Policy Holder							
S		Insurance Company ACUITY,-A-MUTUAL-INSURANCE-CO	Individual ROGER MILLER						
	ı	Individual Driver Citations Issued Sex							
LINO	AL.	Driver ROGER E MILLER (608) 434-2539	Citations Issued 0 Date of Birth	0					
	INDIVIDUAL	Address	Driver License Number	WHITE					
		S4522 COUNTY RD W BARABOO, WI 53913 , US	STATE: WISCONSIN O	STATE: WISCONSIN COUNTRY: UNITED STATES					
		Equipment On Duty Crash Seat Position	Safety Equipment SHOULDER & LAP BE	Safety Equipment SHOULDER & LAP BELT					
		Helmet Use	Helmet Compliance	Helmet Compliance					
		Eve Protection	Tint Compliance						

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Crash Date 09/13/2018

Crash Time 08:05 PM

					1					
10	001	Injury	Injury Severity NO APPARENT	INJURY	Airbag					
		Ejected			Ejection Path		Trapped/Extricated			
		Medical Transport			EMS Agency Identifier EMS Run #					
		NOT TRANSPOR	TED							
		Hospital			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	se				
	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					J.ug . cot . toculo			
_	Ξ	Drug Type								
10	001									
		Individual Condition								
	APPEARED NORMAL									