6TL0B655MS

18-10357

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #		Agency Crash Number 18-10357			Investigating Officer/Deputy DEPUTY W. NEUBAUER				
-											
S	Crash Date Crash Time			Date Ar	rivea	Time Arri		Arrivea			
Σ	09/17/2018	09:50 PM									
5	Date Notified	Time Notified		Total U	nits		Total	Injured	Total Killed	d	
65	09/17/2018	10:15 PM		01	01		00		00	00	
6TL0B655MS	On Emergency	it and Run	and Run Lane Cle		losure Wo		rk Zone		owed	Reporting Threshold	
ᆸ	Government	nool Zone	School Bus Related			Tags					
9	Property	IOOI ZOIIE	NO								
	Crash Type NON-DOMESTICATED 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.										
	Location										
-	ON STH78 SB					Latitude Longitude					
	197 FT N					43.32620	04006	-89.726		6962766	
	OF GRUBERS GROVE RD					X Coordinate		Y Coordi		linate	
	IN THE TOWN OF SUMPTER IN SAUK COUNTY	₹				278904.1875				4800652	
	IN SAUK COUNTY					Structure	Туре				
							UCTURE				
(Crash Scene										
ì	First Harmful Event					Firet Harm	oful Event Lo	cation			
	NON DOMESTICATED ANIMAL (ALIVE)				First Harmful Event Location ON ROADWAY						
	Manner of Collision	IAL (ALIVL)									
	NO COLLISION W/VEHICLE	IN TRANSPORT	-			Light Condition					
-	Road Surface Condition(s)		'			Roadway	Factor(s)				
	ricad Carlace Cornalism(c)					rioddiray	1 40101(0)				
	Environment Factor(s)										
	W # 0 W ()										
	Weather Condition(s)										
-	Animal Type					Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD						
ŀ	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
ŀ	Tribal Land				Access Control					Special Study	
Ī	Jnit Summary										
Ì	Unit Status Vehicle Operating As 0				ating As C	lassification Unit Type					
				D CLASS				AUTOMOBILE			
ŀ	Vehicle Type				Operating As Endorsements						
01	PASSENGER CAR										
ŀ	Total Occs Train/Bus # Injured			Total # Citations Issued		Total Trai		ilers Total Ha:		Mat Types	
	1			0		0		0		,,	
-		Di ci O(T			rachTira			-		es	
_	YES SOUTHBOUND			Pre CrashTire Mark		, -,					
LINO	Most Harmful Event: Collision With Sp			Special Function					y Motor Vehicle Use		
)	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION					NOT APPLICABLE		
}	Traffic Way			Traffic Contro	I			Traffic Control Inoperative/Missing			
	-									-	
ŀ	Surface Type			Road Curvature		Road Grade		е			

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	-	I.D. II. M.								
	NO	ick Bus or HazMat								
		V-1 '-1-								
	,	Vehicle								
		License Plate Number 593ZTA	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES					
2	5	Vehicle Identification Number 5NPEC4AB7DH789986	Make HYUNDAI	Year 2013	Model SONATA SE/					
		Color GRY - GRAY	Body Style 4D - 4DR		Bus Use NOT A BUS					
LIND	VEHICLE	Initial Contact Point 11LEFT FRONT CORNER		Vehicle Damage						
5		Extent Of Damage DISABLING DAMAGE	10LEFT SIDE FRONT, 11LEFT FRONT CORNER, 12FRONT							
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By	ehicle Removed By						
		What Driver Was Doing	Vehicle Factors	Vehicle Factors						
		Driver Prior Action Other								
LINI	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
_	_	Driver Distractions NOT DISTRACTED								
9	2									
		Owner Name	Owner Address							
_	ı	Policy Holder								
		Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual KEVIN MCCOY							
	ı	Individual								
		Driver	Citations Issued		Sex					
	4	KEVIN MICHAEL MCCOY (608) 383-3400	0		MALE					
LINO	INDIVIDUAL		Date of Birth Driver License Number		Race WHITE					
		Address 706 FOREST GLEN CIR PRAIRIE DU SAC, WI 53578, US	STATE: WISCONSIN COUNTRY: UNITED STATES							
		Equipment On Duty Crash	Safety Equipment							
		Seat Position	SHOULDER & LAP BE	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance	Helmet Compliance						
		Eye Protection	Tint Compliance							

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Crash Date 09/17/2018

Crash Time 09:50 PM

01	00	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	1	Location		To/From School		
		Action								
	INDIVIDUAL									
UNIT	ום									
5	<u> </u>									
	N									
		Action Other								
		Suspected Alcohol Use			Suspected Drug Use					
	E	Orug & Alcohol	NO		NO					
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results			
	TEST NOT GIVEN		Davis Took Time		D. T. ID. II					
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
10	2	Drug Type						•		
)	0									
		Individual Condition								
		APPEARED NORMAL								