

6TL0B4X4JL
18-10540

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 18-10540 | Investigating Officer/Deputy DEPUTY E. KNULL | |
| Crash Date 09/22/2018 | | Crash Time 10:10 AM | Date Arrived | Time Arrived | |
| Date Notified 09/22/2018 | | Time Notified 10:10 AM | 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 STH33 WB 489 FT W OF WILKINSON RD IN THE TOWN OF LA VALLE IN SAUK COUNTY | Latitude 43.618213743 | Longitude -90.149322544 |
| | X Coordinate 245886.0625 | Y Coordinate 4834290.5 |
| | Structure Type NO STRUCTURE | |

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 | Unit Status IN TRANSIT | Vehicle Operating As Classification D CLASS | Unit Type AUTOMOBILE | | | |
| | Vehicle Type PASSENGER CAR | Operating As Endorsements | | | | |
| | Total Occs 1 | 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 NO SPECIAL FUNCTION | Emergency Motor Vehicle Use NOT APPLICABLE | | |
| | 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 01 | Vehicle | |
| | | License Plate Number 123YGN | Plate Type AUT - AUTOMOBILE |
| | | Vehicle Identification Number 4T1BK1FK7CU017355 | Make TOYOTA |
| | | Color SIL - SILVER (ALUMINUM) | Year 2012 |
| | | Initial Contact Point 12--FRONT | Country of Issuance UNITED STATES |
| | | Extent Of Damage FUNCTIONAL DAMAGE | Model CAMRY |
| | | Towed Due To Damage NOT TOWED | Body Style SD - SEDAN |
| | | What Driver Was Doing | Bus Use NOT A BUS |
| | | Driver Prior Action Other | Vehicle Damage 12--FRONT |
| | | Driver Actions NO CONTRIBUTING ACTION | Vehicle Removed By OWNER |
| Driver Distractions NOT DISTRACTED | Vehicle Factors | | |
| Owner Name | Owner Address | | |
| UNIT 01 | VEHICLE 01 | Policy Holder | |
| | | Insurance Company NATIONWIDE-INSURANCE-COMPANY-OF-AMERI | Individual DAVID RING |
| | | Individual | |
| UNIT 01 | INDIVIDUAL 01 | Driver DAVID V RING (608) 576-4888 | Citations Issued 0 |
| | | | Sex MALE |
| | | | Date of Birth [REDACTED] |
| | | | Race WHITE |
| | | Address 6375 IRVING DR SUN PRAIRIE, WI 53590 , US | Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES |
| Equipment | On Duty Crash | Safety Equipment SHOULDER & LAP BELT | |
| Seat Position | Helmet Compliance | | |
| Helmet Use | Eye Protection | | |
| | Tint Compliance | | |

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| | | | | | | |
|--|-----|--|--|-----------------------|---------------------------------|----------------|
| 01 | 001 | | | | | |
| | | Injury | Injury Severity NO APPARENT INJURY | Airbag | | |
| | | Ejected | | Ejection Path | Trapped/Extricated | |
| | | 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 | | | | |