6TL0B8M7TN

18-10721

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D			5			vestigating Officer/Deputy EPUTY B. MEARS			
6TL0B8M7TN	Crash Date 09/27/2018	Crash Time 06:35 AM		Date Arrived		Time	Time Arrived				
	Date Notified 09/27/2018	Time Notified 07:19 AM		Total Units 01		Tota 00		Injured	Injured Total Killed 00		
-0B	On Emergency	t and Run	Lane Clos			Work Zone		Trailer or 1	Fowed Reporting Threshold		
6TL	Government Property	hool Zone	School Bus Related			Tags	Tags				
	Reportable Crash Type NON-DOMESTICATED			ANIMAL W/ NO INJURY						Secondary Crash	
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
-	ON CTHF SB					Latitude			Longitud	de	
	0.51 MI N OF CHURCHILL RD					43.582191309 X Coordinate		-90.004 Y Coord		04639481	
	IN THE TOWN OF WINFIELD				257416.03125		482985				
	IN SAUK COUNTY				Structure Type						
						Olivoluio	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
(Crash Scene										
	First Harmful Event					First Harm	iful Event Lo	ocation			
	NON DOMESTICATED ANIM	AL (ALIVE)				ON ROA	ON ROADWAY				
	Manner of Collision			Light Condition			dition				
	NO COLLISION W/VEHICLE	IN TRANSPOR	т								
	Road Surface Condition(s)					Roadway	Factor(s)				
	Environment Factor(s)										
	Manthan One dition (a)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location PUBLIC PROPERTY					-	-	ion - Jurisdiction			
								SDICTION			
	Tribal Land					Access Control				Special Study	
										opeoial olduy	
	Unit Summary										
	Unit Status Vehicle Operating As				ting As C						
	IN TRANSIT D CLASS					AUTOMOBILE					
01								Operating	As Endorser	ments	
0	(SPORT) UTILITY VEHICLE										
	Total Occs Train/Bus # Injured			Total # Citations Issued		-				Mat Types	
	01	0		0					0		
н		Direction Of Travel		Pre CrashTire Sp Mark		Speed Lim	ed Limit Total Lane		es		
UNIT	Most Harmful Event: Collision With			Special Function					Emergency Motor Vehicle Use		
	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION			NOT APPLICABLE				
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	NO	uck Bus or HazMat O							
		Vehicle							
		License Plate Number 385YNC	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
UNIT 01	VEHICLE 01	Vehicle Identification Number 5N1DR2MNXHC645754	Make NISSAN	Year 2017	Model PATHFINDER				
		Color BLK - BLACK	Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS				
		Initial Contact Point 12FRONT	Vehicle Damage						
		Extent Of Damage FUNCTIONAL DAMAGE	11LEFT FRONT CORNER, 12FRONT						
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	DPERATOR					
		What Driver Was Doing	Vehicle Factors	hicle Factors					
		Driver Prior Action Other							
	щ	Driver Actions NO CONTRIBUTING ACTION							
UNIT	VEHICLE								
	Z								
		Driver Distractions NOT DISTRACTED							
01	01								
0	0								
		Owner Name	Owner Address	Owner Address					
UNIT	I	Policy Holder							
S		Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual DANIELLE BERNING						
	I	Individual							
	Ļ	Driver DANIELLE SHAWN BERNING (608) 495-1115	Citations Issued 0		Sex FEMALE				
F	INDIVIDUAL	(000) 435-1115	Date of Birth		Race WHITE				
UNIT		Address S104 LAVALLE RD	Driver License Number						
		LA VALLE, WI 53941 , US		STATE: WISCONSIN COUNTRY: UNITED STATES					
		Con Duty Crash	Safety Equipment	Safety Equipment					
		Seat Position	SHOULDER & LAP BE	SHOULDER & LAP BELT					
		Helmet Use	Helmet Compliance	Helmet Compliance					
		Eye Protection	Tint Compliance						

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WISCONSIN MOTOR VEHICLE **CRASH REPORT**

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

0	001	Injury	Injury Severity NO APPARENT	NJURY	Airbag						
		Ejected			Ejection Path		Trapped/Extricated				
		Medical Transport	TED		EMS Agency Identifier		EMS Run #				
		Hospital			Date of Death		Time of Death				
		Non Motorist Striking Unit # Prior Action		Prior Action	Location			To/From School			
		Action		·							
⊢	UAL										
UNIT	INDIVIDUAL										
	Z										
		Action Other									
	Ľ	Drug & Alcohol	Suspected Alcohol I NO	Jse	Suspected Drug Us	50					
	Alcohol Test Give TEST NOT GIV				Alcohol Test Type		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results				
9	5 5 Drug Type										
		Individual Condition									