### 6TL0B7D6Q7

18-11592

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/19/2018

Crash Time 06:33 AM

	Document Number Override Primary Crash Document #			Agency Crash Number 18-11592				Investigating Officer/Deputy DEPUTY A. SUKOWATEY			
	Crash Date Crash Time			Date Arrived			Time	Time Arrived			
<b>Q</b>	10/19/2018 06:33 AM										
9	Date Notified	Time Notified		Total Ur	nite		Total	Injured	Total Killon	ı	_
<u>Q</u>	10/19/2018 1/me Notified 06:36 AM			<b>01</b>	TIILS		00	injureu	Total Killed <b>00</b>		
6TL0B7D	On Emergency Hi	it and Run	and Run Lane Clos		sure Work		1	railer or T	owed	Reporting Threshold	
-1	Government Action Calman			School Bus Related			Tags				
<u>6</u> 1	Property	ool Zone	NO								
	<b>∨</b> Reportable	ICATED AN	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										
ŀ	ON CTHB EB					Latitude Longitude					_
	0.40 MI W					43.250780222			-89.921221853		
	OF FOX RD					X Coordinate			Y Coordinate		
	IN THE TOWN OF TROY IN SAUK COUNTY					262860.2	1875	479280		08	
	IN SAUK COUNT I					Structure Type					
						NO STRI	JCTURE				
L	Creak Coops										_
'	Crash Scene					1					
	First Harmful Event	(41.0/=)					ful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)				ON ROADWAY					
	Manner of Collision					Light Condition					
	NO COLLISION W/VEHICLE	IN TRANSPORT									
	Road Surface Condition(s)					Roadway Factor(s)					
ŀ	Environment Factor(s)										
	Ziviroimoni r dotor(o)										
	Weather Condition(s)										
-	A : 17										
	Animal Type <b>DEER</b>					Relation To Trafficway					
-						TRAFFICWAY - ON ROAD					
	Crash Classification - Location					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
-	PUBLIC PROPERTY									To : 10: 1	
	Tribal Land					Access Control				Special Study	
L											
Į.	Unit Summary										
	Unit Status			ehicle Opera	ating As Cl	71					
	IN TRANSIT D CLASS				TRUCK						
01	Vehicle Type							Operating A	As Endorser	ments	
0	UTILITY TRUCK/PICKUP TRUCK										
	Total Occs Train/Bus # Injured		Т	Total # Citations Issued						Mat Types	
	1		0	0			0			0	
		Direction Of Travel		Pre CrashTire		e Speed L		Limit To		Total Lanes	
⊨ ا	YES EASTBOUND				/lark						
LIND	Most Harmful Event: Collision With			Special Function		TION		Emergency Motor Vehicle Use			
ا ر	HOR DOMEOTION ED ARMINE (ALIVE)			NO SPECIAL FUNCTION		IION		NOT APPLICABLE			
Ī	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			_

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	_								
	NO	ck Bus or HazMat							
		Vehicle	Tay : =	Lo					
		License Plate Number EC57979	Plate Type  LTK - LIGHT TRUCK	St <b>WI</b>	Country of Issuance UNITED STATES				
UNIT 01		Vehicle Identification Number	Make	Year	Model				
	6	1FDWW36P55EC45980	FORD	2005	F350 SUPER				
		Color WHI - WHITE	Body Style CB - CAB CHASSIS		Bus Use NOT A BUS				
	Щ	Initial Contact Point	Vehicle Damage						
	⊇	12FRONT	12FRONT						
	VEHICL	Extent Of Damage DISABLING DAMAGE	12TRON1						
	>	Towed Due To Damage	Vehicle Removed By						
		TOWED DUE TO DISABLING DAMAGE	OPERATOR						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
		Driver Actions							
_	VEHICLE	NO CONTRIBUTING ACTION							
LNO	$\frac{1}{2}$								
ر	Ę								
		Driver Distractions NOT DISTRACTED							
_	_								
2	9								
		Owner Name	Owner Address	Owner Address					
H	ı	Policy Holder							
5		Insurance Company UNITED-FIRE-&-CASUALTY-CO	Organization/Company MEISE CONSTRUCTION						
		Individual							
		Driver	Citations Issued		Sex				
	_	ANTHONY GREGARY WIPPERFURTH	0		MALE				
	Š		Date of Birth		Race WHITE				
L	INDIVIDUAL	A 1.1	Di di Nata		VVIIIC				
		Address S10906 WILSON CREEK RD	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
		SPRING GREEN, WI 53588 , US							
		Equipment On Duty Crash	Safety Equipment						
		Seat Position	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance						
		Eye Protection	Tint Compliance						

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					1						
10	001	Injury	Injury Severity NO APPARENT	INJURY	Airbag						
		Ejected			Ejection Path		Trapped/Extricated				
		Medical Transport			EMS Agency Ident	ifier	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	₽										
<b></b>	$\geq$										
	닐										
	=										
		Action Other									
			Suspected Alcohol	Use	Suspected Drug U						
	E	Drug & Alcohol	NO		NO						
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results				
		TEST NOT GIVEN	I		7						
		Drug Test Given			Drug Test Type		Drug Test Results				
		TEST NOT GIVEN	ST NOT GIVEN				J.ug . cot . toculo				
_	Ξ	Drug Type									
5 Drug Type											
Individual Condition											
		APPEARED NORMAL									

This report does not include any CJIS data.

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