6TL0B8M7TS

18-11857

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/25/2018

Crash Time 07:15 AM

	Document Number Override	Primary Crash Document #		Agency Crash Number 18-11857		mber	Investigating Officer/Deputy DEPUTY B. MEARS				
LS	Crash Date Crash Time			Date Arrived			Time	Time Arrived			
	10/25/2018 07:15 AM										
1	Date Notified	Time Notified		Total Ur	nits		Total	Injured	Total Killed	t	
88	10/25/2018	08:01 AM		01			00		00		
-0B	On Emergency	lit and Run	and Run Lane Closure		ure Work Zone			Trailer or Towed		Reporting Threshold	
6TL0B8M7T	Government Property Active School Zone			School Bus Related NO		Tags	Tags				
	∨ Reportable	CATED ANIM	NIMAL 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 STH23 EB				Latitude Longitude						
	0.60 MI N					43.509426065		-90.018		8637577	
	OF CTHS WB IN THE TOWN OF REEDSBURG				X Coordinate			Y Coordinate			
	IN SAUK COUNTY	OKG				255992.203125 4821815.5			5.5		
	IN OACK COCKTT				Structure Type						
(Crash Scene										
Ī	First Harmful Event					First Harm	ful Event Lo	cation			
	NON DOMESTICATED ANII	MAL (ALIVE)				ON ROA	DWAY				
	Manner of Collision					Light Condition					
	NO COLLISION W/VEHICLE	IN TRANSPORT									
•	Road Surface Condition(s)					Roadway	Factor(s)				
-	Environment Factor(s)										
	Liviloriment ractor(s)										
-	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY						CIAL JURI				
-	Tribal Land					Access Control				Special Study	
ı	Unit Summary										
ì	Unit Status		Ve	hicle Opera	atina As C	lassification		Unit Type			
	IN TRANSIT			D CLASS			AUTOMOBILE				
	Vehicle Type							Operating As Endorsements		ments	
01	PASSENGER CAR										
	Total Occs Train/Bus # Injured			Total # Citations Issued		Total Traile		ers Total HazMat 1		Mat Types	
	01		0			0		0			
	Insurance?	Direction Of Travel Pre Crash			rashTire	e Speed Lim		it Total Lanes		es	
⊢	YES EASTBOUND			Mark							
LINO	Most Harmful Event: Collision With			Special Function		TION			Emergency Motor Vehicle Use		
)	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION						LICABLE	
	Traffic Way			Traffic Control			Traffic Control Inoperative/Missing		tive/Missing		
ŀ	Surface Type			Road Curvature			Road Grade				
				Toda Odivataro							

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	Truc NO	uck Bus or HazMat								
		V-1 *-1-								
	`	/ehicle								
۶		License Plate Number 109YRC	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES					
	5	Vehicle Identification Number 1FADP3F26GL292923	Make FORD	Year 2016	Model FOCUS					
		Color BLU - BLUE	Body Style SD - SEDAN	'	Bus Use NOT A BUS					
LIND	VEHICLE	Initial Contact Point 2RIGHT SIDE FRONT	Vehicle Damage 1RIGHT FRONT CORNER, 2RIGHT SIDE FRONT, 3RIGHT SIDE MIDDLE, 12FRONT							
		Extent Of Damage FUNCTIONAL DAMAGE								
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR							
		What Driver Was Doing	Vehicle Factors							
		Driver Prior Action Other								
	щ	Driver Actions NO CONTRIBUTING ACTION								
LNO	VEHICLE									
_	N N									
		Driver Distractions NOT DISTRACTED								
5	6									
		Owner Name	Owner Address	Owner Address						
Ė	ı	Policy Holder								
LNO		Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual MIKAL JOHNSON							
	ı	Individual								
		Driver MIKAL J JOHNSON	Citations Issued		Sex					
	AL.	(608) 566-9548	O Date of Birth		MALE Race					
LIND	INDIVIDUAL	Address	Driver License Number		WHITE					
		2880 COUNTRY COURT DR REEDSBURG, WI 53959, US		STATE: WISCONSIN COUNTRY: UNITED STATES						
		Equipment On 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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i										
10	00	Injury	Injury Severity NO APPARENT	INJURY	Airbag					
		Ejected			Ejection Path		Trapped/Extricated			
		Medical Transport NOT TRANSPOR	TED		EMS Agency Identifier		EMS Run #			
		Hospital			Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School		
		Action	•	- 1		•				
_	NAL									
UNIT	INDIVIDUAL									
Action Other										
	E	Drug & Alcohol	Suspected Alcohol NO	Use	Suspected Drug Us	se				
		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	00	Drug Type								
Individual Condition										
APPEARED NORMAL										