6TL09H5JNQ

18-12460

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 18-12460			Investigating Officer/Deputy DEPUTY S. MESSNER				
ğ	Crash Date 11/08/2018	Crash Time 06:11 PM		Date Arrived		Tin	Time Arrived				
5	Date Notified	Time Notified	То	tal Units	3		To	tal Injured	Total Killed		
15	11/08/2018	06:11 PM	01	01		00			00		
6TL09H5JNQ	On Emergency Hit and Run		ne Closure	e Work Zone			Trailer or Towed		Reporting Threshold		
6TL	Government Property	ono	School Bus Related NO			Та	Tags				
	✓ Reportable	ED ANIMAL	ANIMAL W/ NO INJURY						Secondary Crash		
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
	Location										
	ON STH33 EB					Latitude 43.47461698			Longitude -89.713784536		
	0.26 MI E OF TAFT AVE/ CTHT IN THE CITY OF BARABOO					43.47461 X Coordina		Y Coordina			
						280509.5			4817100		
	IN SAUK COUNTY					Structure Type					
						NO STRU	JCTURE				
(Crash Scene										
]	First Harmful Event					First Harmful Event Location ON ROADWAY					
	NON DOMESTICATED ANIM	AL (ALIVE)									
		Manner of Collision				Light Condition					
	NO COLLISION W/VEHICLE	IN TRANSPORT				Deadway Faster(a)					
	Road Sunace Condition(3)	Road Surface Condition(s)				Roadway Factor(s)					
	Environment Factor(s)										
	Weather Condition(s)					-					
	Animal Type	Animal Type DEER Crash Classification - Location				Relation To Trafficway					
						TRAFFICWAY - ON ROAD					
	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY Tribal Land				NO SPECIAL JURISDICTION						
				Access Control				Special Study			
	Unit Summary		Vehicle	Oneratir	na As Cl	assification		Unit Type			
	Unit Status Vehicle Operating As C IN TRANSIT D CLASS			ig 7.5 O							
_	Vehicle Type				Operating As Endorsements						
01	PASSENGER CAR										
		Train/Bus # Injured		Total # Citations Issued						Mat Types	
	1	Direction Of Travel		0		0 Speed Li		0 Limit Total La			
L		EASTBOUND	Pre CrashTire Mark			; Speed I				ומו במווכט	
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**

	Truck Bus or HazMat									
	Vehicle									
		License Plate Number	Plate Type St		Country of Issuance					
		699UHK	AUT - AUTOMOBILE	WI	UNITED STATES					
2	0	Vehicle Identification Number JHMGE8G45AS001883	Make HONDA	Year 2010	Model FIT SPORT					
		Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR		Bus Use NOT A BUS					
	VEHICLE	Initial Contact Point	Vehicle Damage	hicle Damage						
UNIT		12FRONT		1LEFT FRONT CORNER, 12FRONT						
Б		Extent Of Damage FUNCTIONAL DAMAGE	11LEFT FRONT CORNE							
		Towed Due To Damage	Vehicle Removed By							
		NOT TOWED	OPERATOR							
		What Driver Was Doing	Vehicle Factors							
		Driver Prior Action Other								
		Driver Actions								
_	VEHICLE	NO CONTRIBUTING ACTION								
UNIT	E E									
5	μ									
	>									
		Driver Distractions								
		NOT DISTRACTED								
0	2									
	U									
		Owner Name	Owner Address	Owner Address						
		Deliev Helder		_						
INIT	l	Policy Holder								
5	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual BLAKE FRANCE							
	I	Individual								
		Driver	Citations Issued		Sex					
	INDIVIDUAL	BLAKE MARCUS FRANCE (608) 214-9557	0		MALE					
		(008) 214-9557	Date of Birth		Race WHITE					
UNIT			Drivers Liesense Number							
5		Address N6614 W LANE RD	Driver License Number	Driver License Number						
	Z	PORTAGE, WI 53901 , US	STATE: WISCONSIN C	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						
		Eve Protection		Tist Compliance						

Eye Protection

Tint Compliance

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6	001	Injury	Injury Severity NO APPARENT	INJURY	Airbag	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					
	UAL										
UNIT	INDIVIDUAL										
	IN										
		Action Other									
	Ľ	Drug & Alcohol	ug & Alcohol 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				
2	5 6 Drug Type										
		Individual Condition									