6TL09N3P5R

18-12477

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/09/2018

Crash Time 06:28 AM

	Document Number Override	Primary Crash Document #		Agency Crash Number 18-12477		mber	Investigating Officer/Deputy DEPUTY C. FRANK				
~	Crash Date Crash Time			Date Arrived			Time Arrived				
5R	11/09/2018 06:28 AM										
	Date Notified	Time Notified		Total Ur	nits		Total	Injured	Total Killed	1	_
.09N3P	11/09/2018	06:35 AM		01			00	, , , , , , , , , , , , , , , , , , ,		1	
60-	On Emergency	it and Run	Lane Clo	ane Closure Wo				Trailer or To		Reporting Threshold	
6TL	Government Active School Zone			School Bus Related NO			Tags	Tags			
	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.										
Ī	Location										
-	ON E7526A STH23 EB					Latitude Longitude					_
	0.33 MI E						43.532951678		_	3732359	
	OF COPPER SPRINGS RD						Coordinate		Y Coordinate		_
	(FIRE E7526A)					262139.8	262139.890625 4824211.5			1.5	
	IN THE TOWN OF EXCELSI	OR				Structure ⁻	Type				_
	IN SAUK COUNTY	OI.				FIRE	71 -				
	Crash Scene										_
ì	First Harmful Event					First Harm	ful Event Le	ootion			_
	NON DOMESTICATED ANIN	AAL (ALIVE)				First Harmful Event Location					
	Manner of Collision	IAL (ALIVL)				ON ROADWAY Light Condition					
	NO COLLISION W/VEHICLE	IN TRANSPORT				Light Cond	IIIOII				
	Road Surface Condition(s)	III TRAITO ORT				Poodway	Factor(c)				_
	Noad Surface Condition(s)					Roadway Factor(s)					
-	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD						
-	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
ŀ	Tribal Land				Access Control				Special Study	-	
į	Jnit Summary										
Ì					ating As C	As Classification Unit Type				-	
	IN TRANSIT			CLASS	Ū			AUTOMOBILE			
	Vehicle Type							Operating As Endorsements			_
0	PASSENGER CAR										
ŀ	Total Occs Train/Bus # Injured			Total # Citations Issued		Total Traile		lers Total HazMat Type		Mat Types	_
	1			0		0		0			
ŀ	nsurance? Direction Of Travel			Pre CrashTire		- 11:				es	_
– l	YES EASTBOUND			Mark							
LINO	Most Harmful Event: Collision With			Special Function		1		Emergency Motor Vehicle Use			_
-	NON DOMESTICATED ANIMAL (ALIVE)			O SPECIA	AL FUNC	TION		NOT APPLICABLE			
ŀ	Traffic Way			raffic Contro	ol			Traffic Control Inoperative/Missing		_	
										-	
	Surface Type			Road Curvature					Road Grade		_

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	Truc NO	k Bus or HazMat							
		Vehicle							
UNIT 01		License Plate Number 668VYC	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
	5	Vehicle Identification Number 1G1PE5SB0E7397213	Make Year CHEVROLET 2014		Model CRUZE				
		Color BLK - BLACK	Body Style SD - SEDAN		Bus Use NOT A BUS				
	VEHICLE	Initial Contact Point 12FRONT Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage 11LEFT FRONT CORNER, 12FRONT						
		Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG	Vehicle Removed By CRAIGS TOWING						
		What Driver Was Doing Vehicle Factors							
		Driver Prior Action Other							
TIND	VEHICLE	NO CONTRIBUTING ACTION							
10	10	Driver Distractions NOT DISTRACTED							
		Owner Name	Owner Address						
H	1	Policy Holder							
S		Insurance Company RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)	Individual ANDREA JONES						
	I	Individual							
LIND	٩L	Driver ANDREA P JONES (608) 415-3842	Citations Issued O Date of Birth		Sex FEMALE Race				
	INDIVIDUAL	Address	Driver License Number		WHITE				
		1701 COTTONTAIL LN APT 12 REEDSBURG, WI 53959 , US	STATE: WISCONSIN COUNTRY: UNITED STATES						
		Equipment On Duty Crash Seat Position	SHOULDER & LAP BE	iLT					
		Helmet Use	Helmet Compliance	Helmet Compliance					
		Eve Protection	Tint Compliance						

Crash Time 06:28 AM

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Wisconsin Motor Vehicle Crash

Form DT4000

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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									
	Z									
		A :: 0:1								
	Action Other									
	L	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										