6TL09H5JNR

18-12532

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 18-12532			Investigating Officer/Deputy DEPUTY S. MESSNER			
\sim	Crash Date Crash Time		Date Arrived		Time		e Arrived			
Ż	11/09/2018 06:38 PM									
<u> </u>	Date Notified Time Notified		Total l	Jnits			Injured	Total Killed	1	
H5	11/09/2018	06:38 PM	01	01		00		00	D	
60-	On Emergency H	ne Closure	Closure Work Zone			Trailer or Towed		Reporting Threshold		
6TL09H5JNR	Government Property	one Schoo	School Bus Related NO		Tags	Tags				
	Reportable	D ANIMAL W/	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.									
Ĭ	Location									
	ON STH33 EB				Latitude			Longitud	le	
	0.35 MI E				43.53108	32917	-89.884866378		866378	
	OF COUNTY LAND FILL LN IN THE TOWN OF EXCELSION				X Coordinate			Y Coordinate		
	IN SAUK COUNTY	OK			266889.40625			4823837		
					Structure Type NO STRUCTURE					
	Crash Scene				ı					
,	First Harmful Event				I Finat I Iama	f. [t] -				
	NON DOMESTICATED ANIN	AAL (ALIVE)				ful Event Lo	cation			
-	Manner of Collision	MAL (ALIVE)			ON ROADWAY					
	NO COLLISION W/VEHICLE	IN TRANSPORT			Light Condition					
	Road Surface Condition(s)	THE TRANSPORT			Roadway	Factor(s)				
	rroad Gariace Gorialion(3)				Roadway Factor(s)					
	Environment Factor(s)									
	Weether Oraclisis of									
	Weather Condition(s)									
	Animal Type				Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD					
	Crash Classification - Location				Crash Classification - Jurisdiction					
	PUBLIC PROPERTY					NO SPECIAL JURI				
	Tribal Land				Access Control				Special Study	
ı	Unit Summary									
				Vehicle Operating As Classification			Unit Type			
	IN TRANSIT			D CLASS			AUTOMOBILE			
01	Vehicle Type						Operating .	As Endorser	nents	
0	(SPORT) UTILITY VEHICLE									
	Total Occs Train/Bus # Injured			Total # Citations Issued					Mat Types	
				0		0		0		
	Insurance? Direction Of Travel			Mark						
<u></u>	YES EASTBOUND									
LIND	Most Harmful Event: Collision Wit	Special Fun	Special Function				y Motor Vehicle Use			
	NON DOMESTICATED ANIMAL (ALIVE)						NOT APPLICABLE			
	Traffic Way			Traffic Control			Traffic Control Inoperative/Missing		tive/Missing	
ŀ	Surface Type	Road Curva	Road Curvature			Road Grad	е			

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	-	I D II M. (٠			
	NO	uck Bus or HazMat							
		v							
	,	Vehicle		St					
2		License Plate Number 49505E	Plate Type END - ENDANGERED RE		Country of Issuance UNITED STATES				
	5	Vehicle Identification Number 2LMDJ8JK1EBL08667	Make LINCOLN	Year 2014	Model MKX				
		Color ONG - ORANGE	Body Style UT - SPORT UTILITY VEHIC	CLE	Bus Use NOT A BUS				
╘	CLE	Initial Contact Point 12FRONT	Vehicle Damage 1RIGHT FRONT CORNER, 12FRONT, UNDERCARRIAGE						
LIND	VEHICL	Extent Of Damage DISABLING DAMAGE							
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By	Vehicle Removed By					
		What Driver Was Doing	Vehicle Factors	Vehicle Factors					
-		Driver Prior Action Other							
	CLE	Driver Actions NO CONTRIBUTING ACTION							
LINO	VEHICLE								
		Driver Distractions NOT DISTRACTED							
6	5								
		Owner Name	Owner Address	Owner Address					
H	ı	Policy Holder Insurance Company	In dividual						
5		USAA-CASUALTY-INS-CO	ROBERT WADSWORTH	Individual ROBERT WADSWORTH					
	ı	Individual							
	_	Driver ROBERT WADSWORTH III	Citations Issued 0		Sex MALE				
_	INDIVIDUAL	(608) 852-3848	Date of Birth		Race WHITE				
LIND		Address S3688 EVERGREEN RD BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN CO	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
		On Duty Crash	Safety Equipment	Safety Equipment					
		Equipment Seat Position	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance	Helmet Compliance					
		Eye Protection	Tint Compliance			_			
		-	op						

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6	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									
	INDIVIDUAL										
UNIT	2										
5	≥										
	Z										
		Action Other									
	E	Drug & Alcohol	Suspected Alcohol	Use	Suspected Drug U NO	se					
	_	Alcohol Test Given			Alcohol Test Type		Alcohol Test Results				
		TEST NOT GIVEN				Alcohol Tool Type		7.000.100.7000.7000.00			
		Drug Test Given			Drug Test Type		Drug Test Results				
		TEST NOT GIVEN									
7	00	Drug Type									
		Individual Condition									
	APPEARED NORMAL										