# 6TL0BC3B2F

18-12799

## 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 18-12799				Investigating Officer/Deputy DEPUTY W. VERTEIN		
2F	Crash Date 11/16/2018	Crash Time 04:52 PM			Date Arrived		Tim	Time Arrived		
33B	Date Notified 11/16/2018	Time Notified 04:54 PM			Total Units 01		Tota <b>00</b>	Total Injured Total Killed <b>00</b>		d
6TL0BC3B2	On Emergency	Hit and Run	Lane Clos	sure	ure Work Zone			Trailer or Towed		Reporting Threshold
6TL	Government Property	chool Zone	School Bus Related NO			Tag	Tags			
	✓ Reportable	STICATED ANI	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									
	ON STH33 EB					Latitude			Longitue	de
	521 FT W			43.623578		79551		-90.163859812		
	OF SPRINGER RD									
	IN THE TOWN OF LA VALLE IN SAUK COUNTY				X Coordinate 244735.734375			Y Coordinate <b>4834931</b>		
					Structure Type NO STRUCTURE					
(	Crash Scene									
	First Harmful Event					First Harm		ocation		
	NON DOMESTICATED AN	IIMAL (ALIVE)				ON ROA	DWAY			
	Manner of Collision			Light Condition			lition			
	NO COLLISION W/VEHIC	E IN TRANSPOR	2T							
	Road Surface Condition(s)					Roadway I				
	Environment Factor(s)									
	Weather Condition(s)									
	Asimal Tuna					Deletion To Tooff own				
	Animal Type DEER				Relation To Trafficway TRAFFICWAY - ON ROAD					
					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
										Special Study
	Tribal Land					Access Control Special Study				
I	Unit Summary 🛛 💻									
	Unit Status Vehicle Operating As (				rating As C	Classification Unit Type				
				DCLASS			AUTOMOBILE			
	Vehicle Type				Operating As Endorsements					
01	PASSENGER CAR				oporating the Endorsoniante					
•										
	Total Occs	Train/Bus # Injure	-	Total # Citations Issued						zMat Types
	1 0		0	0		0		0		
L	Insurance? YES	Direction Of Trave	el	Pre CrashTire Mark		Speed Lir	peed Limit		Total Lanes	
UNIT	Most Harmful Event: Collision With			Special Function			Emeraen		y Motor Vehicle Use	
Б							NOT APPLI			
	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 NO								
	١	Vehicle							
		License Plate Number 129TRA	Plate Type St AUT - AUTOMOBILE WI		Country of Issuance UNITED STATES				
2	01	Vehicle Identification Number 1G1PE5SB7D7192633	Make CHEVROLET	Year 2013	Model CRUZE LT				
	VEHICLE	Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR		Bus Use NOT A BUS				
UNIT		Initial Contact Point 12FRONT Extent Of Damage DISABLING DAMAGE	Vehicle Damage – 1RIGHT FRONT CORNER, 2RIGHT SIDE FRONT, 10LEFT SIDE FRONT, 11 LEFT FRONT CORNER, 12FRONT						
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By SHIELDS TOWING						
		What Driver Was Doing	Vehicle Factors						
	VEHICLE	Driver Prior Action Other							
UNIT		Driver Actions NO CONTRIBUTING ACTION							
		Driver Distractions NOT DISTRACTED							
01	5 5								
	F	Owner Name	Owner Address	Owner Address					
F		Policy Holder							
UNIT		Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO	Individual KAYLYNN DEITELHOFF						
	I	Individual							
	١L	Driver KAYLYNN M DEITELHOFF (608) 495-2227	Citations Issued 0		Sex FEMALE				
F	INDIVIDUAL	(000) 400-2221	Date of Birth		Race WHITE				
UNIT		Address 247 S PARK ST # A REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
		Con Duty Crash	Safety Equipment						
		Seat Position	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance						
•		Eye Protection	Tint Compliance						

Tint Compliance

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

		Injury Severity NO APPARENT INJURY			Airbag					
6	001									
		Ejected			Ejection Path		Trapped/Extricated			
		Medical Transport NOT TRANSPORTED			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									
	Z									
		Action Other								
		Suspected Alcohol Use			Suspected Drug Use					
	Ľ	Drug & Alcohol	NO		NO					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results			
01		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
	001	Drug Type								
		Individual Condition								
		APPEARED NOR	MAL							