6TL0BFKD8Z

18-12846

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

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

8Z	
FKD	
OBF	
6TL	

	Document Number Override			3,			nvestigating Officer/Deputy DEPUTY H. LARKIN			
N 1	Crash Date	Crash Time		Date Arrived			Time Arrived			
8Z	11/17/2018	07:40 PM								
9	Date Notified	Time Notified	Total Un	its				Total Killed		
Ť	11/17/2018	07:46 PM	01			00		00		
6TL0BFKD8	On Emergency Hit and Run Lane Closure			Wo	/ork Zone				Reporting Threshold	
6TL	Government Property	School E NO				Tags				
•	✓ Reportable	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.										
İ	Location									
-	ON STH33 WB				Latitude Longitude				e	
	0.36 MI E				43.52302	20067		-89.8307	767542	
	OF MIRROR LAKE RD IN THE TOWN OF DELTON				X Coordina			Y Coordi		
	IN SAUK COUNTY				271230.5			482279	1.5	
					Structure Type					
	Crash Scene									
1	First Harmful Event				First Harm	ful Event Lo	cation			
	NON DOMESTICATED ANIN	IAL (ALIVE)			ON ROA		oution			
	Manner of Collision	(<i>/</i>			Light Conc					
	NO COLLISION W/VEHICLE	IN TRANSPORT								
	Road Surface Condition(s)				Roadway I	Factor(s)				
Environment Factor(s)										
					-					
	Weather Condition(s)									
	Animal Type									
	DEER				Relation To Trafficway TRAFFICWAY - ON ROAD					
	Crash Classification - Location				Crash Classification - Jurisdiction					
	PUBLIC PROPERTY						SDICTION			
	Tribal Land				Access Control				Special Study	
l	Unit Summary									
	Unit Status		Vehicle Opera	ting As C	Classification Unit Type					
	IN TRANSIT D CLASS						AUTOMOBILE			
01	Vehicle Type				Operating As Endorsements					
0	PASSENGER CAR				Total Trailers Total HazMat Types			4 · T		
	Total Occs	Train/Bus # Injured	Total # Citatio					vlat Types		
	1	Direction Of Travel	0	0 Speed Lim		nit Total Lane				
		WESTBOUND	Pre CrashTire		3 Speed				5	
UNIT	Most Harmful Event: Collision Wit		Special Functi				Emergency Motor Vehicle Use		cle Use	
Б	NOST Harmini Event: Collision With Special Function NON DOMESTICATED ANIMAL (ALIVE) NO SPECIAL FUN				CTION		NOT APPLICABLE			
	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing				
	·					that estimet inspectation mooning				
	Surface Type	Road Curvature			Road Grade					

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	I ruc	Jock Bus or HazMat							
		Vehicle							
		License Plate Number ABV7715	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
01		Vehicle Identification Number	Make	Year	Model				
	VEHICLE 01	MAJ6P1UL8JC162853	FORD	2018	ECOSPORT				
		Color GRY - GRAY	Body Style UT - SPORT UTILITY VEI		Bus Use NOT A BUS				
UNIT		Initial Contact Point	Vehicle Damage						
		1RIGHT FRONT CORNER		1RIGHT FRONT CORNER, 2RIGHT SIDE FRONT, 12FRONT					
		Extent Of Damage DISABLING DAMAGE	1RIGHT FRONT CORNE						
		Towed Due To Damage	Vehicle Removed By	Vehicle Removed By					
		TOWED DUE TO DISABLING DAMAGE	CRAIGS TOWING						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
		Driver Actions NO CONTRIBUTING ACTION							
F	VEHICLE								
UNIT	Ĩ								
	2								
		Driver Distractions							
		NOT DISTRACTED							
0	6								
		Owner Name	Owner Address	Owner Address					
F	I	Policy Holder							
UNIT		Insurance Company LIBERTY-MUTUAL-INS-CO	Individual AUDREY MCNIGHT	Individual AUDREY MCNIGHT					
	1	Individual							
		Driver	Citations Issued		Sex				
	AL	AUDREY J MCNIGHT (608) 963-9571	0 Date of Birth		FEMALE Race				
⊢	DU		Date of Birth		WHITE				
UNIT	INDIVIDUAL	Address	Driver License Number	Driver License Number					
	Ľ	S3109 BUCKHORN RD REEDSBURG, WI 53959, US	STATE: WISCONSIN C	STATE: WISCONSIN COUNTRY: UNITED STATES					
		Equipment On Duty Crash	Safety Equipment						
		Seat Position	SHOULDER & LAP BE	SHOULDER & LAP BELT					
		Helmet Use	Helmet Compliance	Helmet Compliance					
		Eye Protection	Tint Compliance	Tint Compliance					

Wisconsin Motor Vehicle Crash Form DT4000 6TL0BFKD8Z

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0	001	Injury	Injury Severity NO APPARENT	INJURY	Airbag				
		Ejected			Ejection Path		Trapped/Extricated		
		Medical Transport NOT TRANSPOR	TED		EMS Agency Ident	ifier	EMS Run #		
		Hospital			Date of Death		Time of Death		
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School	
		Action				·			
⊢	INDIVIDUAL								
UNIT	DIVID								
	Z								
		Action Other							
	Drug & Alcohol No				Suspected Drug Use				
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	1		Drug Test Type		Drug Test Results		
6	001	Drug Type							
Individual Condition APPEARED NORMAL									