6TL09426S3

18-14323

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 18-14323				DEPUTY A. KULAS				
ო	Crash Date	Crash Time			Date Arrived		Time	Time Arrived				
S S	12/26/2018	05:10 PM Time Notified		Tetel			Tatal	<u> </u>				
426	Date Notified Time Notified 12/26/2018 05:21 Pl				otal Units I		1 otal 00	Injured	Total Killed			
L09426S3	On Emergency	Hit and Run				k Zone		「railer or ٦	owed		porting reshold	
6TI	Government Property	hool Zone	School Bus Related NO			Tags	Tags					
	Reportable	TICATED ANIM	ANIMAL W/ NO INJURY							condary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
I	Location											
	ON BLUFF RD 0.55 MI N					Latitude Longitude 43,402997623 -89,63050904						
	OF REUSCH RD IN THE TOWN OF MER	OF REUSCH RD				X Coordinate			Y Coordinate			
	IN SAUK COUNTY						286993.84375			4808929.5		
						Structure Type NO STRUCTURE						
(Crash Scene 🛛 🗖											
Ī	First Harmful Event						First Harmful Event Location					
	NON DOMESTICATED	ANIMAL (ALIVE)				ON ROADWAY						
	Manner of Collision NO COLLISION W/VEH		-			Light Condition						
	Road Surface Condition(s)	ICLE IN TRANSPOR	1			Roadway I	Factor(s)					
	Environment Factor(s)											
	Weather Condition(s)	Weather Condition(s)										
	Animal Type					Relation To Trafficway						
	DEER				TRAFFICWAY - ON ROAD							
	Crash Classification - Location				Crash Classification - Jurisdiction							
	PUBLIC PROPERTY				NO SPECIAL JURI		asdiction		Special St	udu.		
Tribal Land						Access Control				opeolar olddy		
ļ	Unit Summary											
	Unit Status Vehicle Operating As C				Classification Unit Type							
	IN TRANSIT D CLASS							TRUCK				
2								Operating	As Endorser	ments		
0	UTILITY TRUCK/PICKUP TRUCK Total Occs Train/Bus # Injured Total # Citations Issue				one lecuod		Total Trailers Total HazMat Types					
	1		0 0				0		0	wat Types		
	Insurance?	Direction Of Trave		Pre CrashTire		Speed Lim		it Total Land		les		
UNIT	YES NORTHBOUND Most Harmful Event: Collision With			Special Function			Emergency		Motor Vob	Motor Vehicle Lise		
5	NOST Harmful Event: Collision with NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTIO					Emergency Motor Vehicle Use NOT APPLICABLE			
	Traffic Way			Traffic Control			Traffic Co		ntrol Inoperative/Missing			
	Curface Turne											
	Surface Type			Road Curvature				Road Grade				

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		ruck Bus or HazMat								
	NO									
		Vehicle		1.0:						
		License Plate Number	Plate Type	St	Country of Issuance UNITED STATES					
		KZ9547 Vehicle Identification Number	LTK - LIGHT TRUCK Make	WI Year	Model					
2	2	1FT8W3B63FED25600	FORD	2015	F350 SUPER					
-	VEHICLE	Color	Body Style	2013	Bus Use					
		WHI - WHITE	PK - PICKUP		NOT A BUS					
		Initial Contact Point	Vehicle Damage							
F		12FRONT								
UNIT		Extent Of Damage	2FRONT							
		FUNCTIONAL DAMAGE								
		Towed Due To Damage	/ehicle Removed By							
		NOT TOWED		DPERATOR						
		What Driver Was Doing	Vehicle Factors							
		Driver Dries Action Other								
		Driver Prior Action Other								
		Driver Actions								
	ш	NO CONTRIBUTING ACTION								
E	VEHICLE									
UNIT	Ī									
	ž									
		Driver Distractions NOT DISTRACTED								
5	0									
		Owner Name	Owner Address	Owner Address						
╘	l	Policy Holder								
UNIT		Insurance Company FLORISTS-MUTUAL-INS-CO	Organization/Company PUSH UNDERGOUND CONSTRUCTION LLC							
		Individual Driver	Citations Issued		Sex					
		ANDREW B WILLIAMS	0		MALE					
	AL	(608) 477-1322	Date of Birth		Race					
┝┍╴│	Ы				WHITE					
UNIT	INDIVIDUAL	Address	Driver License Number							
		715 12TH ST APT 2 BARABOO, WI 53913 ,US	STATE: FLORIDA COUNTRY: UNITED STATES							
	=	BARABOO, WI 53915 , 05								
		Or Dut Co.	Safety Equipment							
		On Duty Crash Equipment								
		Seat Position	SHOULDER & LAP BELT							
				SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance							
		Eye Protection	Tint Compliance							

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-	001	Injury Severity			Airbag					
9		Injury	NO APPARENT INJURY							
		Ejected			Ejection Path		Trapped/Extricated			
	Medical Transport				EMS Agency Ident	ifier	EMS Run #			
		NOT TRANSPOR	TED							
	Hospital				Date of Death		Time of Death			
		Striking Unit # Prior Action			Location			To/From School		
		Non Motorist				Loodion				
		Action								
	INDIVIDUAL									
∣⊑	DC									
UNIT	Ξ									
	Ę									
	Action Other									
	,	Suspected Alcohol Use Drug & Alcohol NO			Suspected Drug Use NO					
	-	Alcohol Test Given					Alcohol Test Results			
		TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results			
		Drug Test Given			Drug Test Type		Drug Test Results			
		TEST NOT GIVEN								
0	Ξ	Drug Type								
P	001									
Individual Condition										
APPEARED NORMAL										