6TL09T1TMM

19-00298

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override Primary Cra		Crash Document # Agency Crash Nu 19-00298								
Crash Date		Crash Time		Date Arrived		Time	Time Arrived			
				1		T-4-1	la i can d	Tatal Killa	1	
01/07/2019		06:43 PM		Total Units 01		1 otal 00	Injurea	l otal Killed 00		
On Emergency	Hit and Ru	t and Run		osure 🗌 Work Zone			Trailer or Tow		Reporting Threshold	
Crash Date Crash Time 01/07/2019 06:40 PM Date Notified Time Notified 01/07/2019 06:43 PM On Emergency Hit and Run Lane Government Property Active School Zone				School Bus Related NO		Tags	Tags			
✓ Reportable			D ANIMAL W/	NO INJUF	RΥ		mended		Secondary Crash	
✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
Location										
	ON CTHT SB 377 FT S				Latitude 43 502535455		Longitud			
OF TRAP SHOOT RD IN THE TOWN OF FAIRFIELD						X Coordinate		Y Coord	linate	
IN SAUK COUNTY								4820214		
) 0				
Crash Scene										
First Harmful Event			First Harmful Event Location							
NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision					ON ROADWAY					
					Light Condition					
Road Surface Condition(s)					Roadway F	actor(s)				
Environment Factor(s)										
Weather Condition(s)										
Animal Type DEER Crash Classification - Location PUBLIC PROPERTY Tribal Land					Relation To Trafficway TRAFFICWAY - ON ROAD					
									Special Study	
Unit Summary										
-									nonto	
							Operating	AS ENUUISEI	nems	
Total Occs	Train/Bus # Recorded			Total # Citations Issued		Total Traile			Total HazMat Types	
1				0		0	0			
Insurance? YES				Pre CrashTire Mark		Speed Limit		Total Lanes		
Most Harmful Event: Collision With				Special Function NO SPECIAL FUNCTION						
Traffic Way				Traffic Control			Traffic Control Inoperative/Missing			
Conferent Turne			Decilo				Prod Orada			
Surrace Type			Road Curvat	Road Curvature			Koad Grade			
	Crash Date 01/07/2019 Date Notified 01/07/2019 On Emergency Covernment Property Reportable I a sworn law enfor Location ON CTHT SB 377 FT S OF TRAP SHOOT RD IN THE TOWN OF FAIF IN SAUK COUNTY Crash Scene First Harmful Event NON DOMESTICATED Manner of Collision NO COLLISION W/VEH Road Surface Condition(s) Environment Factor(s) Environment Factor(s) Weather Condition(s) Environment Factor(s) Weather Condition(s) Environment Factor(s) Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEH Total Occs 1 Insurance? YES Most Harmful Event: Collisi NON DOMESTICATED	Crash Date Crash Ti 01/07/2019 06:40 P Date Notified Time No 01/07/2019 06:43 P On Emergency Hit and Rut Government Property Reportable Crash Ty NON-D Crash Ty Reportable Crash Ty NON-D Crash Ty NON CHT SB S77 FT S OF TRAP SHOOT RD IN THE TOWN OF FAIRFIELD IN THE TOWN OF FAIRFIELD IN TRAN Road Surface Condition(s) Crash Classification NW/VEHICLE IN TRAN Road Surface Condition(s) Crash Classification - Location PUBLIC PROPERTY Tribal Land Unit Status Insurance? Insurance? Direction O SOUTHB Most Harmful Event: Collision With <th>Crash Date Crash Time 01/07/2019 06:40 PM Date Notified Time Notified 01/07/2019 06:43 PM On Emergency Hit and Run Lar Government Active School Zo Property Crash Type NON-DOMESTICATEI I, a sworn law enforcement officer, agree that I Location ON CTHT SB 377 FT S OF TRAP SHOOT RD IN THE TOWN OF FAIRFIELD IN SAUK COUNTY Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Environment Factor(s) Weather Condition(s) Environment Factor(s) Weather Condition(s) Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHICLE Total Occs Train/Bus # Recorded 1 Insurance? Direction Of Travel YES SOUTHBOUND Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE) Traffic Way</th> <th>19-00 Crash Date Crash Time Date A 01/07/2019 06:40 PM Total U Date Notified Total U 01 01/07/2019 Ide Active School Zone Schoo NO Property Active School Zone NO Property Crash Type NO NO Image: Property NO NO Addition NO Image: Property NO NO Addition NO Image: Property Image: Property Image: Property Image: Property Image: Property Image: Property Image: Property Image: Property Image: Property Image: Property Image: Pro</th> <th>Crash Date Crash Time Date Arrived 01/07/2019 06:40 PM Date Arrived Date Notified Time Notified Total Units 01/07/2019 06:43 PM 01 On Emergency Hit and Run Lane Closure Wor Government Property Crash Type NO NO Reportable Crash Type NO NON-DOMESTICATED ANIMAL W/ NO INJUF I, a sworn law enforcement officer, agree that I have not added any CJI Location OO Crash Type NO NON DOMESTICATED ANIMAL (ALIVE) Maner of Collision NO NON COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Environment Factor(s) Environment Factor(s) Weather Condition(s) Environment Factor(s) Weather Condition(s) Train/Bus # Recorded Total # Clasion Content PubLic Properating As C D CLASS Unit Satus Vehicle Operating As C D CLASS Direction Of Travel Pre CrashTire Mark Mark Proceed 1 Direction Of Travel Pre CrashTire Mark Proceed Total # Clations Issued Insurance? Vehicle Type Direction Of Travel Special Function NO Special Function</th> <th>Crash Date Crash Time Date Arrived O1/07/2019 06:40 PM Total Units Date Notified Time Notified Ot On Emergency Hit and Run Lane Closure Work Zone Government Property Active School Zone School Bus Related NO Crash Type School Bus Related NO Image: Reportable Crash Type Image: Reportable School Bus Related Image: Reportable Crash Type Reportable Latitude Image: Reportable Crash Type Image: Reportable School Bus Related Image: Reportable Crash Type Image: Reportable School Bus Related NO Image: Reportable Crash School RD Image: Reportable Image: Report</th> <th>19-00298 DEP Crash Date Crash Time Date Artived Time 01/07/2019 06:43 PM Total Units Total 01/07/2019 06:43 PM 01 00 0 Date Notified Time Notified Total Units Total 01/07/2019 06:43 PM 01 00 0 On Emergency Hit and Run Lane Closure Work Zone 17ag 0 Property Active School Zone School Bus Related Trags V Reportable Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY ////////////////////////////////////</th> <th>Crash Date 0:crash Time 0:c</th> <th>19-00283 DEPUTY J. BODDEN Crash Date Crash Time Date Arrived Time Arrived Of/07/2019 06:40 PM Date Arrived Total Units Total Injured Total Killed Of/07/2019 06:43 PM Of 00 0 0 00 0 00 00 0 0 0 0 0 0 0 0 0 0</th>	Crash Date Crash Time 01/07/2019 06:40 PM Date Notified Time Notified 01/07/2019 06:43 PM On Emergency Hit and Run Lar Government Active School Zo Property Crash Type NON-DOMESTICATEI I, a sworn law enforcement officer, agree that I Location ON CTHT SB 377 FT S OF TRAP SHOOT RD IN THE TOWN OF FAIRFIELD IN SAUK COUNTY Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Environment Factor(s) Weather Condition(s) Environment Factor(s) Weather Condition(s) Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHICLE Total Occs Train/Bus # Recorded 1 Insurance? 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WISCONSIN MOTOR VEHICLE CRASH REPORT

	NO	ruck Bus or HazMat							
		Vehicle							
		License Plate Number	Plate Type	St	Country of Issuance				
		NAYMC	PAK - PACKER	wi	UNITED STATES				
01	~	Vehicle Identification Number	Make Year		Model				
	6	2T3DF4DV5AW049432	ΤΟΥΟΤΑ	2010	RAV4 LTD Bus Use				
		Color GRN - GREEN		Body Style UT - SPORT UTILITY VEHICLE					
	ш	Initial Contact Point	Vehicle Damage		NOT A BUS				
		12FRONT	Volitolo Banago						
	VEHICL	Extent Of Damage	1RIGHT FRONT CORNER, 12FRONT						
	N N	DISABLING DAMAGE							
		Towed Due To Damage	Vehicle Removed By						
		TOWED DUE TO DISABLING DAMAGE		MIKES TOWING					
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
		Driver Actions							
	щ	NO CONTRIBUTING ACTION							
UNIT	VEHICLE								
Б	H								
	>								
		Owner Name	Owner Address						
			Owner Address						
01	0								
F		Policy Holder							
Ī	Insurance Company		Individual						
Z		Insurance Company							
UNIT			Individual MARY MC GANN						
NN	I	Insurance Company GEICO-CASUALTY-CO Individual	MARY MC GANN						
NN	I	Insurance Company GEICO-CASUALTY-CO Individual Driver	Citations Issued		Sex				
UNI		Insurance Company GEICO-CASUALTY-CO Individual	Citations Issued 0		FEMALE				
		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN	Citations Issued						
		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN	Citations Issued 0		FEMALE Race				
UNIT UNI		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number		FEMALE Race WHITE				
	INDIVIDUAL	Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address	Citations Issued 0 Date of Birth	COUNTRY: U	FEMALE Race WHITE				
		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590, US	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN	COUNTRY: L	FEMALE Race WHITE				
	INDIVIDUAL	Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number	COUNTRY: L	FEMALE Race WHITE				
	INDIVIDUAL	Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590, US	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment		FEMALE Race WHITE				
	INDIVIDUAL	Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US On Duty Crash	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN		FEMALE Race WHITE				
	INDIVIDUAL	Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US On Duty Crash	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment		FEMALE Race WHITE				
	INDIVIDUAL	Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US fety Equipment Seat Position Helmet Use	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance		FEMALE Race WHITE				
	INDIVIDUAL	Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US fety Equipment Seat Position	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E		FEMALE Race WHITE				
UNIT		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US fety Equipment Seat Position Helmet Use Eye Protection	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance Tint Compliance		FEMALE Race WHITE				
UNIT	INDIVIDUAL	Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US fety Equipment Seat Position Helmet Use Eye Protection Injury Severity	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance		FEMALE Race WHITE				
UNIT		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US fety Equipment On Duty Crash Seat Position Helmet Use Eye Protection Injury Severity	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance Tint Compliance		FEMALE Race WHITE				
UNIT		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US fety Equipment On Duty Crash Seat Position Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected Ejection Path	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance Tint Compliance Airbag		FEMALE Race WHITE INITED STATES				
UNIT		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US fety Equipment On Duty Crash Seat Position Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected Ejection Path Medical Transport	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance Tint Compliance		FEMALE Race WHITE INITED STATES				
UNIT		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US On Duty Crash Gety Equipment On Duty Crash Medical Transport NOT TRANSPORTED	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance Tint Compliance Airbag EMS Agency Identifier		FEMALE Race WHITE INITED STATES INITED STATES Trapped/Extricated EMS Run #				
UNIT		Insurance Company GEICO-CASUALTY-CO Individual Driver MARY RENEE MC GANN (630) 849-5849 Address 2560 NEW TOWN DR APT 201 SUN PRAIRIE, WI 53590 , US fety Equipment On Duty Crash Seat Position Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected Ejection Path Medical Transport	MARY MC GANN Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance Tint Compliance Airbag		FEMALE Race WHITE INITED STATES				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Distracted By	Distracted By Source	9				
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	JAL							
UNIT	VIDL							
ر	INDIVIDUAL							
		Action Other						To/From School
	1	Suspected Alcohol Use Drug & Alcohol NO			Suspected Drug Use			<u> </u>
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
6	001	Drug Type						
		Individual Condition						
		APPEARED NOR	MAL					