

6TL097RB2P
19-00799

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

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Document Number Override		Primary Crash Document #	Agency Crash Number 19-00799	Investigating Officer/Deputy DEPUTY J. EYALIS	
Crash Date 01/19/2019		Crash Time 06:25 PM	Date Arrived 01/19/2019	Time Arrived 06:57 PM	
Date Notified 01/19/2019		Time Notified 06:35 PM	Total Units 01	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram 	Reconstruction By
	Photos By
	Additional Information NONE

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS TRAVELING N/B ON HWY 154. UNIT 1 STRUCK A DEER IN THE ROADWAY. UNIT 1'S AIRBAG DEPLOYED WITH NO INJURIES. UNIT 1 BECAME DISABLED ON THE EAST SIDE OF THE ROADWAY.

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Location

ON STH23 EB 0.26 MI W OF OPEN VIEW RD IN THE TOWN OF WESTFIELD IN SAUK COUNTY	Latitude 43.465663691	Longitude -90.023535149
	X Coordinate 255419.609375	Y Coordinate 4816969.5
	Structure Type	

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)		First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type DEER		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT	Vehicle					
	01	License Plate Number ABA2011		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number JTDKT903695228339		Make TOYOTA	Year 2009	Model YARIS
	VEHICLE	Color BLU - BLUE		Body Style HB - HATCHBACK		Bus Use NOT A BUS
		Initial Contact Point 1--RIGHT FRONT CORNER		Vehicle Damage		
Extent Of Damage DISABLING DAMAGE		1--RIGHT FRONT CORNER, 12--FRONT				

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name MARLO JORDAN FIELDS (612) 401-9597		Owner Address 1753 CHURCH ST STEVENS POINT, WI 54481 , US	
	Sequence Of Events			
01 02 03 04	Event NON DOMESTICATED ANIMAL (ALIVE)			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company GEICO-GENERAL-INS-CO		Individual MARLO FIELDS	
UNIT INDIVIDUAL	Individual			
	Driver MARLO JORDAN FIELDS (612) 401-9597		Citations Issued 0	Sex MALE
	Address 1753 CHURCH ST STEVENS POINT, WI 54481 , US		Date of Birth	Race BLACK
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source		
Distracted By Action				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location	
		Prior Action				
	Action					
	Action Other				To/From School	
	01	001	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
			Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition APPEARED NORMAL			