

6TL0B4X4L2

19-04930

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 19-04930, Investigating Officer/Deputy DEPUTY E. KNULL, Crash Date 04/30/2019, Crash Time 05:04 AM, Date Arrived, Time Arrived, Date Notified 04/30/2019, Time Notified 05:04 AM, Total Units 01, Total Injured 00, Total Killed 00, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related NO, Tags, Reportable, Crash Type NON-DOMESTICATED 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 USH14 EB 0.61 MI S OF RAINBOW RD IN THE VILLAGE OF SPRING GREEN IN SAUK COUNTY, Latitude 43.173241931, Longitude -90.047380796, X Coordinate 252304.375, Y Coordinate 4784562.5, Structure Type NO STRUCTURE

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, Road Surface Condition(s), Roadway Factor(s), Environment Factor(s), Weather Condition(s), Animal Type DEER, Relation To Trafficway TRAFFICWAY - ON ROAD, Crash Classification - Location PUBLIC PROPERTY, Crash Classification - Jurisdiction NO SPECIAL JURISDICTION, Tribal Land, Access Control, Special Study

Unit Summary

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 EASTBOUND, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE), Special Function NO SPECIAL FUNCTION, Emergency Motor Vehicle Use NOT APPLICABLE, Traffic Way, Traffic Control, Traffic Control Inoperative/Missing, Surface Type, Road Curvature, Road Grade

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		Truck Bus or HazMat NO	
01	01	Vehicle	
		License Plate Number 5319AC	Plate Type MBN - MILWAUKEE BRE
		Vehicle Identification Number 3FADP4AJ4HM169593	Make FORD
		Color SIL - SILVER (ALUMINUM)	Year 2017
		Initial Contact Point 12--FRONT	Country of Issuance UNITED STATES
		Extent Of Damage DISABLING DAMAGE	Model FIESTA
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Body Style SD - SEDAN
		What Driver Was Doing	Bus Use NOT A BUS
		Driver Prior Action Other	Vehicle Damage 12--FRONT
		Driver Actions NO CONTRIBUTING ACTION	Vehicle Removed By GEORGES AUTO BODY
Owner Name	Owner Address		
01	01	Policy Holder	
		Insurance Company ACUITY,-A-MUTUAL-INSURANCE-CO	Individual JEFFREY HARRISON
		Individual	
01	001	Driver JEFFREY C HARRISON (608) 475-1495	Citations Issued 0
		Address 669 E KINDER ST RICHLAND CENTER, WI 53581 , US	Date of Birth
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	Sex MALE
			Race WHITE
01	001	Safety Equipment	On Duty Crash
		Seat Position	Safety Equipment SHOULDER & LAP BELT
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		Injury	Injury Severity NO APPARENT INJURY
		Ejected	Airbag
		Ejection Path	Trapped/Extricated
Medical Transport NOT TRANSPORTED	EMS Agency Identifier		
Hospital	EMS Run #		
	Date of Death		
	Time of Death		

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	Distracted By		Distracted By Source		
	Distracted By Action				
	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	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				
01	001	Individual Condition			
		APPEARED NORMAL			