

6TL0BGSFDH

19-06084

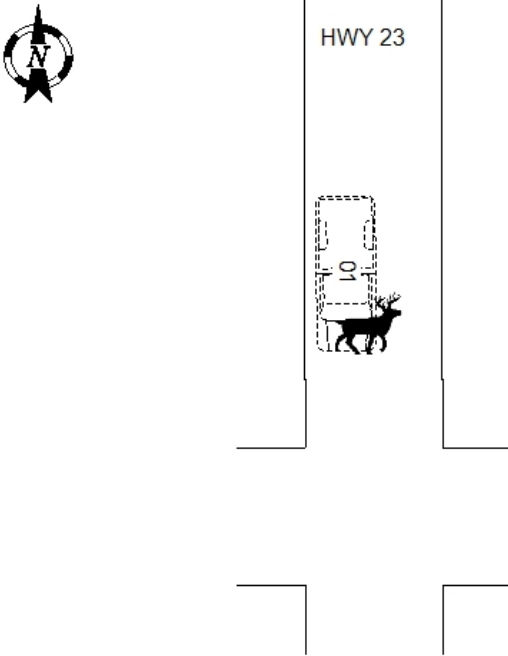
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 19-06084		Investigating Officer/Deputy DEPUTY B. LUBER	
Crash Date 05/25/2019		Crash Time 03:33 PM		Date Arrived 05/25/2019		Time Arrived 03:36 PM	
Date Notified 05/25/2019		Time Notified 03:33 PM		Total Units 01		Total Injured 01	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
 <p>HWY 23</p> <p>10</p> <p>NOT TO SCALE</p>		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 SOUTH ON HWY 23 AND STRUCK A DEER. OPERATOR OF UNIT 1 SUSTAINED MINOR INJURY FROM GLASS FROM WINDSHIELD. DISPATCH RECIEVED INITIAL INFORMATION ANOTHER PASSENGER WAS INJURED, HOWEVER, WHILE BEING CHECKED IN AMBULANCE NO OTHER INJURIES WERE REPORTED. ALL OCCUPANTS OF VEHICLE REFUSED TRANSPORT TO THE HOSPITAL, HOWEVER, WERE TRANSPORTED BY AMBULANCE TO THE REEDSBURG POLICE DEPARTMENT.

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Location

ON STH23 EB 451 FT N OF HERRITZ RD IN THE TOWN OF REEDSBURG IN SAUK COUNTY	Latitude 43.48504391	Longitude -90.013884399
	X Coordinate 256278.296875	Y Coordinate 4819093.5
	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 DAYLIGHT	
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 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				Operating As Endorsements	
	Total Occs 4	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<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 LEVEL	
	Truck Bus or HazMat NO					
	UNIT 01	Vehicle				
License Plate Number NY3838		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES		
Vehicle Identification Number 1N6AD0EV0JN744387		Make NISSAN	Year 2018	Model FRONTIER		
Color SIL - SILVER (ALUMINUM)		Body Style PK - PICKUP		Bus Use NOT A BUS		
Initial Contact Point 12--FRONT		Vehicle Damage 12--FRONT, TOP				
Extent Of Damage DISABLING DAMAGE						

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By STEVES AUTO SERVICE		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION				
01	01	Owner Name JESUS RODRIGUEZ GOMEZ (608) 415-8665		Owner Address N590 CROWLEY LN LYNDON STATION, WI 53944 , US	
		Sequence Of Events			
01	01	Event NON DOMESTICATED ANIMAL (ALIVE)			
		Event			
		Event			
		Event			
04	03	Event			
		Event			
		Event			
		Event			
UNIT	Policy Holder				
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual JESUS RODRIGUEZ GOMEZ		
UNIT	INDIVIDUAL	Individual			
		Driver GESIA M NAVA GUEVARA (608) 415-8665		Citations Issued 0	Sex FEMALE
		Date of Birth		Race HISPANIC	
		Address 2937 FISH HATCHERY RD MADISON, WI 53713 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01	001	Safety Equipment			
		On Duty Crash		Safety Equipment SHOULDER & LAP BELT	
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY			
		Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance			
Injury		Injury Severity SUSPECTED MINOR INJURY	Airbag NON DEPLOYED		
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 NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED					

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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			
		Individual			
		Passenger MARIA NAVA	Citations Issued 0	Sex FEMALE	
			Date of Birth	Race HISPANIC	
		Address N590 CROWLEY LN LYNDON STATION, WI 53944 , US		Driver License Number	
		01	002	Safety Equipment	On Duty Crash
Seat Position 6--SECOND SEAT-RIGHT SIDE					
Helmet Use	Helmet Compliance				
Eye Protection	Tint Compliance				
Injury	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED	
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					
UNIT	INDIVIDUAL	Non Motorist	Striking Unit #	Location	

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UNIT	INDIVIDUAL	Prior Action		
		Action		
		Action Other		To/From School
		Drug & Alcohol Suspected Alcohol Use NO Suspected Drug Use NO		
01	002	Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
		TEST NOT GIVEN		
		Drug Test Given	Drug Test Type	Drug Test Results
		TEST NOT GIVEN		
		Drug Type		
		Individual Condition		
		APPEARED NORMAL		
UNIT	INDIVIDUAL	Individual		
		Passenger	Citations Issued	Sex
		JESUS GOMEZ	0	MALE
		Date of Birth	Race	
			WHITE	
		Address	Driver License Number	
		N590 CROWLEY LN LYNDON STATION, WI 53944 , US		
01	003	Safety Equipment		Safety Equipment
		On Duty Crash		
		Seat Position	SHOULDER & LAP BELT	
		3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		Injury	Injury Severity	Airbag
			NO APPARENT INJURY	NON DEPLOYED
		Ejected	Ejection Path	Trapped/Extricated
		NOT EJECTED	NOT EJECTED/NOT APPLICABLE	NOT TRAPPED
		Medical Transport	EMS Agency Identifier	EMS Run #
		NOT TRANSPORTED		
		Hospital	Date of Death	Time of Death
		Distracted By		
		Distracted By Source		
		Distracted By Action		
		Non Motorist	Striking Unit #	Location

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UNIT	INDIVIDUAL	Prior Action				
		Action				
		Action Other			To/From School	
01	003	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				
		Individual				
		Passenger JENNIFER GOMEZ		Citations Issued 0	Sex FEMALE	
				Date of Birth	Race HISPANIC	
		Address N590 CROWLEY LN LYNDON STATION, WI 53944 , US		Driver License Number		
		01	004	Safety Equipment		On Duty Crash
Seat Position 4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI						
Helmet Use				Helmet Compliance		
Eye Protection				Tint Compliance		
Injury				Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
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						
01	004	Non Motorist		Striking Unit #	Location	

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Witness		
WITN 01 ESS	Individual RANDY CRAIG MARTEN (708) 921-9871	Address , , US Date of Birth