

19-05883

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

Document Number Override		Primary Crash Document #		Agency Crash Number 19-05883		Investigating Officer/Deputy DEPUTY I. HANSON	
Crash Date 05/21/2019		Crash Time 11:55 AM		Date Arrived		Time Arrived	
Date Notified 05/21/2019		Time Notified 12:00 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 NON-DOMESTICATED ANIMAL W/ NO INJURY				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Location

Crash Scene

Unit Summary

Wisconsin Motor Vehicle Crash
Form DT4000

This report does not include any CJIS data.

1 of 3

Crash Date **05/21/2019**
Crash Time **11:55 AM**

6TL0B1716H

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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		Truck Bus or HazMat NO					
01	UNIT	01	VEHICLE	Vehicle			
				License Plate Number 719PKD	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
				Vehicle Identification Number JN8AS5MV7BW255539	Make NISSAN	Year 2011	Model ROGUE S/SV
				Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE	Bus Use NOT A BUS	
				Initial Contact Point 12--FRONT	Vehicle Damage		
				Extent Of Damage FUNCTIONAL DAMAGE	1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT		
				Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By EVERETTS TOWING		
				What Driver Was Doing	Vehicle Factors		
				Driver Prior Action Other			
				01	UNIT	01	VEHICLE
Owner Name	Owner Address						
01	UNIT	01	Policy Holder				
			Insurance Company GEICO-ADVANTAGE-INSURANCE-CO	Individual YESLY JIMINEZ			
			Individual				
01	UNIT	001	INDIVIDUAL	Driver SIMENTAL ANA BURCIAGA (608) 520-9343	Citations Issued 0	Sex FEMALE	
					Date of Birth	Race HISPANIC	
				Address 1117 OKEEFFE AVE SUN PRAIRIE, WI 53590 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
				Safety Equipment			
				On Duty Crash	Safety Equipment		
				Seat Position	SHOULDER & LAP BELT		
				Helmet Use	Helmet Compliance		
				Eye Protection	Tint Compliance		
				Injury	Injury Severity NO APPARENT INJURY	Airbag	
				Ejected	Ejection Path	Trapped/Extricated	
Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #					
Hospital	Date of Death	Time of Death					

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UNIT INDIVIDUAL 01 001	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			
Individual Condition APPEARED NORMAL				