6TL0B1716G

19-05828

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Crash Document #			Agency Crash Number 19-05828				DEPUTY I. HANSON			
G	Crash Date 05/20/2019	Crash Time 08:30 AM			Date Arrived		Time	Time Arrived			
16	Date Notified	Time Notified		Total Units			Tota	Total Injured Total Killed		1	
17	05/20/2019	08:34 AM		01			00	,	00		
0B	On Emergency	lit and Run	Lane Clos			k Zone		Trailer or 1	owed	Reporting Threshold	
6TL	Government Property	hool Zone	School Bus Related NO			Tags	Tags				
	Crash Type NON-DOMESTICATED ANIMAL W/ N				IO INJUF	RΥ		Amended		Secondary Crash	
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
l	Location								_		
	ON STH33 EB 0.45 MI E								Longitud	ongitude 9.625520564	
	OF CTHU EB IN THE TOWN OF FAIRFIELD				X Coordinate				Y Coordinate		
	IN SAUK COUNTY					287754.2	-		482021	9	
						Structure Type					
(Crash Scene										
]	First Harmful Event					First Harmful Event Location					
	NON DOMESTICATED ANI				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				Relation To Trafficway						
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location PUBLIC PROPERTY				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION						
	Tribal Land			Access Con					Special Study		
	Unit Summary							T			
	Unit Status Vehicle Operating As C				Iassification Unit Type AUTOMOBILE						
	IN TRANSIT D CLASS Vehicle Type				Operating As Endorsements						
01	PASSENGER CAR							oporaning			
	Total Occs	Train/Bus # Reco		Total # Citations Issued			Total Trail	ers		Mat Types	
	1	Direction Of Troug	-	0		0 Speed Lin		0 mit Total Land			
⊢	Insurance? YES	Direction Of Trave		Pre CrashTire Mark			Speed Liff	Speed Limit Total Lanes			
UNIT	Most Harmful Event: Collision With			Special Function				Emergency Motor Vehicle Use			
2	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION				NOT APPLICABLE			
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			

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	Truc NO	Fruck Bus or HazMat							
	Vehicle								
		License Plate Number	Plate Type St Country of Issuance						
		606UZN	AUT - AUTOMOBILE	WI	UNITED STATES				
UNIT 01	_	Vehicle Identification Number	Make	Year	Model				
	VEHICLE 01	5FRYD4H48EB013947	ACURA		MDX TECH				
		Color	Body Style		Bus Use NOT A BUS				
		WHI - WHITE Initial Contact Point	UT - SPORT UTILITY VEH Vehicle Damage	NOT A BOS					
		12FRONT	12FRONT						
		Extent Of Damage							
		MINOR DAMAGE							
		Towed Due To Damage	Vehicle Removed By						
		NOT TOWED	OWNER						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other	_						
		Driver Actions							
.	Щ	NO CONTRIBUTING ACTION							
UNIT	VEHICLE								
	μ								
	>								
		Owner Name	Owner Address						
0	0								
	0								
UNIT	Policy Holder								
5		Insurance Company USAA-CASUALTY-INS-CO	Individual MARGARET GREEN						
		Individual							
		Driver	Citations Issued Sex						
		MARGARET E GREEN	0		FEMALE				
	NA		Date of Birth						
UNIT	NDIVIDUAL		WHITE						
5	Б	Address 2703 MORNING GLORY CT	Driver License Number						
	Z	PAYSON, AZ 85541 , US	STATE: ARIZONA COUNTRY: UNITED STATES						
	Sa	On Duty Crash fety Equipment	Safety Equipment	Safety Equipment					
	Ja	Seat Position							
		Sear Fusicion	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance	Helmet Compliance					
			Tint Compliance						
		Eye Protection	Tint Compliance						
	_								
0	001	Injury Severity	Tint Compliance Airbag						
10	001	Injury Severity			Trapped/Extricated				
6	001	Injury Severity NO APPARENT INJURY Ejected Ejection Path	Airbag						
9	001	Injury Severity NO APPARENT INJURY Ejected Ejected Ejection Path Medical Transport Ejection Path			Trapped/Extricated EMS Run #				
01	001	Injury Severity NO APPARENT INJURY Ejected Ejection Path Medical Transport NOT TRANSPORTED	Airbag EMS Agency Identifier		EMS Run #				
10	001	Injury Severity NO APPARENT INJURY Ejected Ejected Ejection Path Medical Transport Ejection Path	Airbag						

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		Distracted By	Distracted By Source	9				
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action		1				
		Action						
	INDIVIDUAL							
UNIT	D							
5	Σ							
	Z							
	=							
		Action Other						To/From School
			Suspected Alcohol U	lse	Suspected Drug Use			
		Drug & Alcohol No			NO			
		Alcohol Test Given Alcohol Test Typ			Alcohol Test Resu			
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Result			
2	001	Drug Type		1				
	U							
		Individual Condition						
		APPEARED NOR	MAL					