

6TL0C713B3

19-08217

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 19-08217, Investigating Officer/Deputy SERGEANT J. SABOL, Crash Date 07/07/2019, Crash Time 05:56 PM, Date Arrived, Time Arrived, Date Notified 07/07/2019, Time Notified 05:56 PM, 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 STH33 WB 0.80 MI W OF CTHX WB IN THE TOWN OF GREENFIELD IN SAUK COUNTY, Latitude 43.47504583, Longitude -89.654634555, X Coordinate 285295.28125, Y Coordinate 4816993.5, 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, 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 (SPORT) UTILITY VEHICLE, 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 WESTBOUND, 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, Truck Bus or HazMat NO

Vehicle

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|----|------|------------|----------------------|--|---|--|---|--|
| 01 | UNIT | VEHICLE | 01 | License Plate Number ADP9781 | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES | |
| | | | 01 | Vehicle Identification Number 1FMZK05145GA26792 | Make FORD | Year 2005 | Model FREESTYLE | |
| | | | 01 | Color SIL - SILVER (ALUMINUM) | Body Style VN - VAN | Bus Use NOT A BUS | | |
| | | | 01 | Initial Contact Point 12--FRONT | Vehicle Damage | | | |
| | | | 01 | Extent Of Damage DISABLING DAMAGE | 12--FRONT | | | |
| | | | 01 | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By CRAIGS TOWING | | | |
| | | | 01 | What Driver Was Doing | Vehicle Factors | | | |
| 01 | UNIT | VEHICLE | 01 | Driver Actions NO CONTRIBUTING ACTION | | | | |
| | | | 01 | Owner Name | Owner Address | | | |
| 01 | UNIT | INDIVIDUAL | Policy Holder | | | | | |
| | | | 01 | Insurance Company RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT) | Individual DAVID SIMS | | | |
| | | | 01 | Individual | | | | |
| 01 | UNIT | INDIVIDUAL | 01 | Driver DAVID E.Z. SIMS SR (608) 800-1858 | Citations Issued 0 | Sex MALE | | |
| | | | 01 | | Date of Birth | Race BLACK | | |
| | | | 01 | Address 1017C PARKSIDE AVE #230 BARABOO, WI 53913 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | | |
| | | | 01 | Safety Equipment | On Duty Crash | Safety Equipment SHOULDER & LAP BELT | | |
| 01 | UNIT | INDIVIDUAL | 01 | Seat Position | SHOULDER & LAP BELT | | | |
| | | | 01 | Helmet Use | Helmet Compliance | | | |
| | | | 01 | Eye Protection | Tint Compliance | | | |
| | | | 01 | Injury | Injury Severity NO APPARENT INJURY | Airbag | | |
| | | | 01 | Ejected | Ejection Path | Trapped/Extricated | | |
| | | | 01 | Medical Transport NOT TRANSPORTED | EMS Agency Identifier | EMS Run # | | |
| | | | 01 | Hospital | Date of Death | Time of Death | | |
| 01 | UNIT | INDIVIDUAL | 01 | Distracted By | | | | |
| | | | 01 | Distracted By Source | Distracted By Action | | | |
| 01 | UNIT | INDIVIDUAL | 01 | Non Motorist | | | | |
| | | | 01 | Striking Unit # | Location | | | |

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|-------------|--|------------------------------------|---------------------------------|--|
| UNIT | 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 | | | |
| | 01 | 001 | | |
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