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19-09238

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Overri	de	Primary Crash	Document #	Agency 19-092	Crash Numl	ber		estigating Officer/Deputy PUTY E. KNULL			
Crash Date	Crash Time Date Arrived					Time Arrived					
07/26/2019		05:16 AM 07/26/2019				05:36 AM			1		
Date Notified 07/26/2019		Time Notified 05:16 AM		Total U	nits	Total Injured 01			Total Killed 00		
07/26/2019 Date Notified 07/26/2019 On Emergency Government Property	Hit	and Run	Lane Closu		Work		Trailer	or To	owed	Reporting Threshold	
Government Property			chool Zone	NO School	Bus Related		Tags			Г	
✓ Reportable		Crash Type DT4000 (STA	NDARD CRASH	l)			Amend	led		Secondary Crash	
Description Diagram									onstruction		
	,	/ /				(os By		
	(2)**					not to scal	e	Addit NON	tional Inforr VE	nation	
		golf co	urse rd								
		Ò									
Marian Company											
)	·									
I, a sworn law enf								וב ריבי	ED TUEN (
UNIT 1 SB ON GOLF CO ENTERED WEST DITCH OPERATOR SUSTAINED	. VEHICL	E SKIDDED IN I	DITCH AND CAME	TO RES	T PARTIALL	Y IN THE DITC	H AND PART	TALLY	IN ROAD	FACING EB.	
Location											
ON GOLF COURSE R	D					atitude			Longitud		
0.70 MI N OF SKI HILL RD IN THE TOWN OF RE	FDSRIII	RG			>	13.513772411 Coordinate			Y Coord		
IN SAUK COUNTY						260399.70312 Structure Type	25		482214	0.5	
						NO STRUCTURE					

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Crash Scene

First Harmful Event		First Harmful Event Location				
NON DOMESTICATED A	NIMAL (ALIVE)	ON ROADWAY				
Manner of Collision		Light Condition				
NO COLLISION W/VEHIC	LE IN TRANSPORT	DARK/UNLIT				
Road Surface Condition(s)		Roadway Factor(s)				
WET						
Environment Factor(s)						
ANIMAL (S) IN ROADWA	Υ	NONE				
Weather Condition(s)						
CLOUDY, RAIN						
Animal Type			Relation To Trafficway			
DEER			TRAFFICWAY - ON ROAD			
Crash Classification - Location			Crash Classification - Jurisdiction			
PUBLIC PROPERTY		NO SPECIAL JURISDICTION				
Tribal Land			Access Control	Special Study		
			NO CONTROL			
Within Interchange Area	Junction Location	Intersection	n Type			
NO	NON-JUNCTION	NOT AN	OT AN INTERSECTION			

Un	it	Sı	ım	m	ary	
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	Unit Status		Vehicle Operating As Classification	nn .	Unit Type	Ī
	IN TRANSIT		D CLASS	J11	AUTOMO	BILE
٦	Vehicle Type		- 1		Operating A	As Endorsements
	PASSENGER CAR					
İ	Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trail	ers	Total HazMat Types
	1		0	0		0
İ	Insurance?	Direction Of Travel	Pre CrashTire	Speed Lim	nit	Total Lanes
⊢	YES	SOUTHBOUND	Mark 45			2
FIND	Most Harmful Event: Collision W	ith	Special Function		Emergency Motor Vehicle Use	
_ ا	NON DOMESTICATED ANI	MAL (ALIVE)	NO SPECIAL FUNCTION		NOT APPLICABLE	
İ	Traffic Way		Traffic Control		Traffic Control Inoperative/Missing	
	TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS)		NO CONTROL		NO Road Grade	
İ			Road Curvature			
			STRAIGHT		LEVEL	
İ	Truck Bus or HazMat					
	NO					

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	License Plate Number	Plate Type	St	Country of Issuance		
	487ZNH	AUT - AUTOMOBILE	WI	UNITED STATES		
	Vehicle Identification Number	Make Year		Model		
01	1FAFP53U65A280564	FORD	2005	TAURUS SE		
	Color	Body Style		Bus Use		
	RED - RED	4D - 4DR		NOT A BUS		
щ	Initial Contact Point	Vehicle Damage				
C	NON-COLLISION	6REAR, 12FRONT				
포	Extent Of Damage					
VE	DISABLING DAMAGE					
	Towed Due To Damage	Vehicle Removed By				
	TOWED DUE TO DISABLING DAMAGE	STEVES AUTO SERVICE				
	What Driver Was Doing	Vehicle Factors				
	GOING STRAIGHT					
	Driver Prior Action Other	NOT APPLICABLE				

Crash Date 07/26/2019
Crash Time 05:16 AM

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LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION									
10	01	Owner Name ELIZABETH A HEISER (608) 219-9737			Owner Address E3676 MEIXELSPERGER RD PLAIN, WI 53577, US						
		Sequence Of Events									
	01	NON DOMESTICATED AN	NIMAL (ALI	/E)							
	05	Event DITCH									
	03	Event									
	04	Event									
⊢	ı	Policy Holder									
LIND		Insurance Company RURAL-MUTUAL-INS-CO	-(ATTN:-CL	AIMS-DEPT)	Individual BRANDON KOZIOL						
	ı	ndividual									
		Driver			Citations Issued		Sex				
	BRANDON MICHAEL KOZIOL		0		MALE						
╘	INDIVIDUAL				Date of Birth		Race VHITE				
	≥	Address WI			Driver License Number						
	Z	•••			STATE: WISCONSIN COUNTRY: UNITED STATES						
	Saf	On Duty ety Equipment	Crash		Safety Equipment						
		Seat Position 1FRONT SEAT-LEFT SI	DE (DRIVEF	R/MOTORCY	SHOULDER & LAP BELT						
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
5	001	Injury So Injury SUSPE	everity ECTED MIN	OR INJURY	Airbag NON DEPLOYED						
		Ejected	Ejection Patl	า			rapped/Extricated				
		NOT EJECTED Medical Transport	NOT EJEC	TED/NOT APPL	EMS Agency Identifier		NOT TRAPPED MS Run #				
		NOT TRANSPORTED			EWS Agency Identifier		INIS Ruit #				
		Hospital			Date of Death	Т	ime of Death				
		Distracted By NOT A	ed By Source PPLICABLI	E (NOT DISTRA	CTED)						
		Distracted By Action NOT DISTRACTED									
		Non Motorist Striking	Unit #	Location							
		Prior Action	•								

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	Action						
UNIT							
트립							
UNIT							
9							
=							
	Action Other					To/From School	
	Drug & Alcohol NO	Use	Suspected Drug Use NO				
	Alcohol Test Given	Alcohol Test Type			Alcohol Test Results		
	TEST NOT GIVEN						
	Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	3		
2 5	Drug Type						
0							
	Individual Condition						
	APPEADED NORMAL						
	AT LAKED NORWAL						
001							