

6TL0BC3B3C  
19-09509

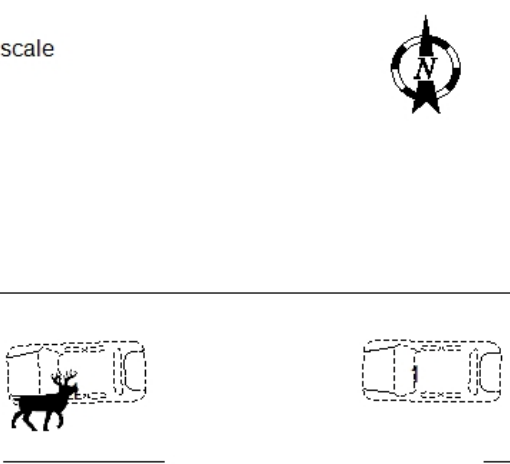
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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 <b>19-09509</b>	Investigating Officer/Deputy <b>DEPUTY W. VERTEIN</b>	
Crash Date <b>08/01/2019</b>		Crash Time <b>03:27 PM</b>	Date Arrived <b>08/01/2019</b>	Time Arrived <b>03:44 PM</b>	
Date Notified <b>08/01/2019</b>		Time Notified <b>03:29 PM</b>	Total Units <b>01</b>	Total Injured <b>01</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram  Not to scale  	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING WESTBOUND. WHILE TRAVELING WESTBOUND, A DEER RAN INTO THE DRIVER'S SIDE OF UNIT 1 CAUSING THE CURTAIN AIRBAGS TO DEPLOY. THE OPERATOR HAD A SMALL LACERATION ON HER LEFT HAND, BUT REFUSED MEDICAL TREATMENT.

Location

<b>ON CTHO WB 0.37 MI E OF CTHC WB IN THE TOWN OF TROY IN SAUK COUNTY</b>	Latitude <b>43.277926889</b>	Longitude <b>-89.920025177</b>
	X Coordinate <b>263062.78125</b>	Y Coordinate <b>4795819.5</b>
	Structure Type	

Crash Scene

First Harmful Event <b>NON DOMESTICATED ANIMAL (ALIVE)</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type <b>DEER</b>		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

Unit Summary

<b>UNIT 01</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>DOMESTICATED ANIMAL - ALIVE</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

Vehicle

<b>UNIT 01 VEHICLE</b>	License Plate Number <b>37968D</b>		Plate Type <b>DIS - DISABLED</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>2GNFLGEK8E6365522</b>		Make <b>CHEVROLET</b>	Year <b>2014</b>	Model <b>EQUINOX LT</b>	
	Color <b>GRY - GRAY</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>11--LEFT FRONT CORNER</b>		Vehicle Damage			
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>		<b>9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER</b>			
	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>			
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors			
	Driver Prior Action Other		<b>NOT APPLICABLE</b>			

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UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
		Owner Name <b>EUNICE PHILOMENIA YANKE (608) 643-8289</b>	Owner Address <b>S8651 OLD BLUFF TR PRAIRIE DU SAC, WI 53578 , US</b>
UNIT	01	<b>Sequence Of Events</b>	
		01	Event <b>DOMESTICATED ANIMAL - ALIVE</b>
		02	Event
		03	Event
UNIT	01	<b>Policy Holder</b>	
		Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>	Individual <b>EUNICE YANKE</b>
UNIT	INDIVIDUAL	<b>Individual</b>	
		Driver <b>EUNICE PHILOMENIA YANKE (608) 643-8289</b>	Citations Issued <b>0</b>
		Date of Birth	Sex <b>FEMALE</b>
UNIT	001	Address <b>S8651 OLD BLUFF TR PRAIRIE DU SAC, WI 53578 , US</b>	
		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
		<b>Safety Equipment</b>	
		On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		<b>Injury</b>	Injury Severity <b>SUSPECTED MINOR INJURY</b>
			Airbag <b>DEPLOYED-CURTAIN</b>
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	
Hospital		EMS Run #	
Date of Death		Time of Death	
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACED)</b>	
Distracted By Action <b>NOT DISTRACED</b>			
<b>Non Motorist</b>		Striking Unit #	
Location			
Prior Action			

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action			
		Action Other		To/From School	
<b>01</b>	<b>001</b>	<b>Drug &amp; Alcohol</b>			
		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
		Drug Type			
Individual Condition <b>APPEARED NORMAL</b>					