### 6TL09426SS

19-10125

## 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 19-10125			Investigating Officer/Deputy DEPUTY A. KULAS					
S	Crash Date Crash Time			Date Arrived		Time	Time Arrived					
Ś	08/13/2019	09:16 PM										
6TL09426S	Date Notified 08/13/2019	Time Notified 09:16 PM		Total Units <b>01</b>		Tota <b>00</b>			Total Killed <b>00</b>			
	On Emergency	t and Run	Lane Closu	Closure Work Zo		k Zone		Trailer or Towe		Reporting Threshold		
6ТІ	Government Property Active School Zone NO					ed Tags						
	Crash Type           NON-DOMESTICATED ANIMAL W/ NO INJUR					RΥ		Amended Secondary Crash				
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
	Location											
	ON STH33 EB 0.41 MI W					Latitude 43.503370139			Longitud	de <b>I340254</b>		
	OF BREEZY HILL RD IN THE TOWN OF FAIRFIELD				X Coordinate			Y Coordinate				
	IN SAUK COUNTY				288653.21875         4820036           Structure Type			00				
							JCTURE					
(	Crash Scene											
		First Harmful Event						ocation				
	NON DOMESTICATED ANIM Manner of Collision	NON DOMESTICATED ANIMAL (ALIVE)					DWAY					
	NO COLLISION W/VEHICLE		Ŧ			Light Conc	aition					
	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					Crash Classification - Jurisdiction						
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION						
	Tribal Land					Access Control Special Study						
l	Jnit Summary											
	Unit Status		Vehi	Vehicle Operating As Classification				Unit Type				
	IN TRANSIT D CLASS						AUTOMOBILE					
01						Operating As Endorsements			ments			
	PASSENGER CAR Total Occs	Train/Bus # Recorded			Total # Citations Issued		Total Trail	otal Trailers		Total HazMat Types		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tail/Bus # Recor		lotal # Citations		0 No				0		
		Direction Of Trave		Pro C			Speed Lim			Total Lanes		
⊢	YES	EASTBOUND		Mark								
UNIT	Most Harmful Event: Collision With Special Function				TION		Emergency Motor Vehicle Use					
	NON DOMESTICATED ANIMAL (ALIVE) NO SPECIAL FU					TION		NOT APPLICABLE				
	Traffic Way Traffic Control				bl			Traffic Control Inoperative/Missing				
	Surface Type Road Curvature				Road Grade							
	Truck Dup or HosMot											
	Truck Bus or HazMat NO											
	Vehicle											

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

		License Plate Number	PI	ate Type	St	Country of Issuance			
		204TGV	Α	UT - AUTOMOBILE	wi	UNITED STATES			
_		Vehicle Identification Number	М	ake	Year	Model			
0	6	19XFB2F51FE005677	н	ONDA	2015	CIVIC LX			
		Color		Body Style Bus Use					
	щ	BLK - BLACK		4D - 4DR NOT A BUS					
		Initial Contact Point		Vehicle Damage					
E	VEHICLE	12FRONT							
UNIT	Ξ	Extent Of Damage		- 1RIGHT FRONT CORNER, 2RIGHT SIDE FRONT, 3RIGHT SIDE MIDDLE, 12- -FRONT					
_	ÿ	FUNCTIONAL DAMAGE							
	-	Towed Due To Damage	Ve	Vehicle Removed By					
		NOT TOWED	0	OPERATOR					
		What Driver Was Doing	Ve	Vehicle Factors					
		Driver Prior Action Other							
	щ	NO CONTRIBUTING ACTION							
Ę	<u></u>								
UNIT	VEHICLE								
_	¥								
		Owner Name		Owner Address					
0	6								
0	0								
H	I	Policy Holder							
UNIT		Insurance Company		Individual					
		PROGRESSIVE-CASUALTY-INS-CO		KYLE WEIS					
	I	Individual							
		Driver		Citations Issued		Sex			
	<b>NDIVIDUAL</b>	KYLE D WEIS		0		MALE			
		(262) 757-3005		Date of Birth		Race			
E						WHITE			
UNIT	N	Address		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Z	W8651 COUNTY ROAD I OXFORD, WI 53952 ,US							
	=	OXFORD, WI 33932 , 03							
	Sat	On Duty Crash		Safety Equipment					
	Gui			SHOULDER & LAP BELT					
		Seat Position							
				Lialmat Compliance					
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
_	~	Injury Severity		Airbag					
0	001	Injury NO APPARENT INJUR	Y						
		Ejected Ejection Path		Trapped/Extricated					
		Medical Transport		EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED							
		Hospital		Date of Death		Time of Death			
		Distracted By Source							
	Distracted By								
		Distracted By Action							
		Ctribing Unit # Legation							
	Striking Unit # Location								

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action					
UNIT	INDIVIDUAL	Action					
	L	Action Other Suspected	Alcohol Use	Suspected Drug Use			To/From School
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	1		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
6	001	Drug Type			•		
		Individual Condition					
		APPEARED NORMAL					