

6TL092T5NT

19-12311

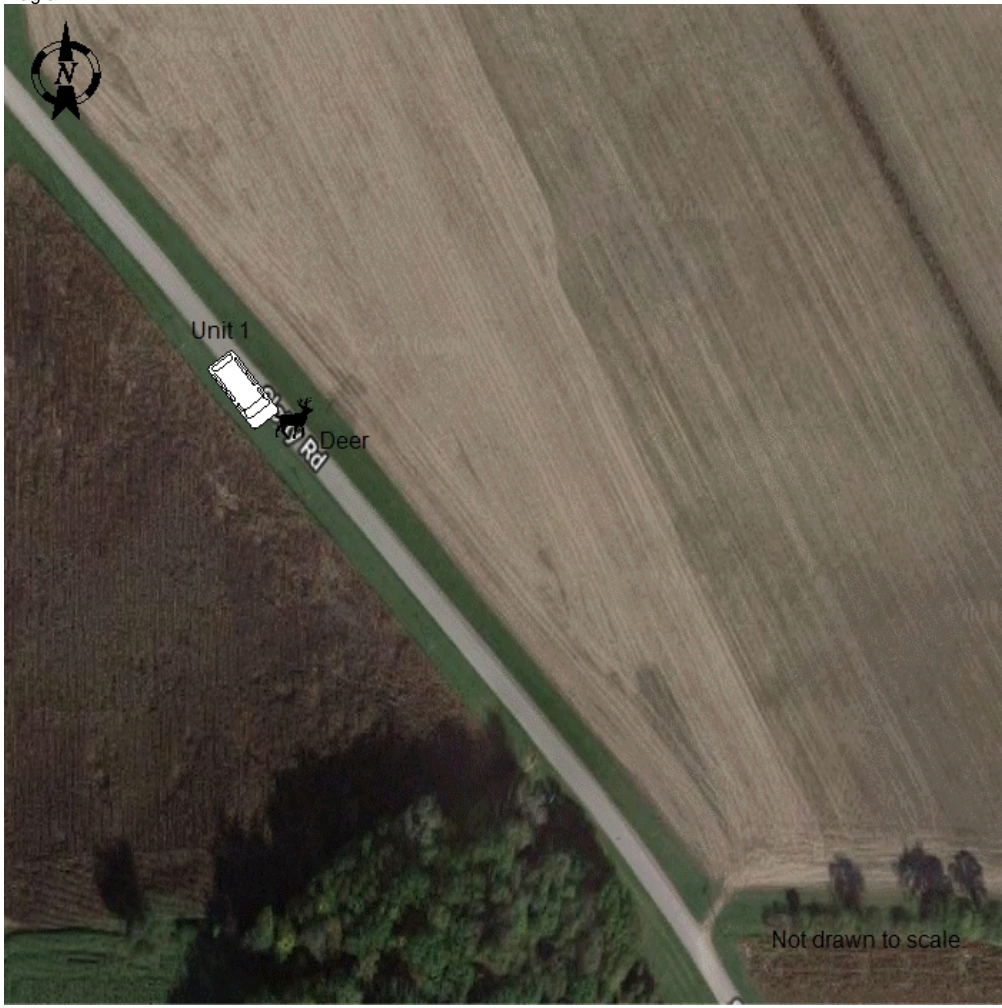
# WISCONSIN MOTOR VEHICLE CRASH REPORT

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>19-12311</b>	Investigating Officer/Deputy <b>DEPUTY J. KIRKENG</b>	
Crash Date <b>10/03/2019</b>		Crash Time <b>07:20 PM</b>	Date Arrived <b>10/03/2019</b>	Time Arrived <b>07:42 PM</b>	
Date Notified <b>10/03/2019</b>		Time Notified <b>07:20 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 	Reconstruction By
	Photos By <b>KIRKENG</b>
	Additional Information <b>NONE, PHOTOS</b>

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

UNIT 1 WAS TRAVELING E/B ON SLOTTY RD. UNIT 1 STRUCK A DEER IN THE DRIVER SIDE HEADLIGHT CAUSING THE DRIVER SIDE CURTAIN AIRBAGS TO DEPLOY. THE OPERATOR SUSTAINED NON LIFE THREATENING INJURIES AND WAS TRANSPORTED BY EMS. THE THREE JUVENILE PASSENGERS WERE UNINJURED.

## Location

<b>ON SLOTTY RD 1257 FT N OF WENZEL RD IN THE TOWN OF HONEY CREEK IN SAUK COUNTY</b>	Latitude <b>43.3119049</b>	Longitude <b>-89.860497806</b>
	X Coordinate <b>268022.53125</b>	Y Coordinate <b>4799426</b>
	Structure Type <b>NO STRUCTURE</b>	

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## 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>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>ANIMAL (S) IN ROADWAY</b>			
Weather Condition(s) <b>CLOUDY</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>PASSENGER VAN</b>				Operating As Endorsements	
	Total Occs <b>4</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>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>NON 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>CONCRETE</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

## Vehicle

<b>UNIT 01</b>	<b>VEHICLE 01</b>	License Plate Number <b>AGJ1188</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>2C4RDGCG9DR611623</b>	Make <b>DODGE</b>	Year <b>2013</b>	Model <b>GRAND CARA</b>	
		Color <b>GLD - GOLD</b>	Body Style <b>VN - VAN</b>	Bus Use <b>NOT A BUS</b>		
		Initial Contact Point <b>11--LEFT FRONT CORNER</b>	Vehicle Damage			
		Extent Of Damage <b>MINOR DAMAGE</b>	<b>10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT</b>			
		Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>EVERETTS TOWING</b>			
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors			
		Driver Prior Action Other	<b>NOT APPLICABLE</b>			

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
		Owner Name <b>JENNIFER L GILBREATH (229) 429-5395</b>	Owner Address <b>S8338 DENZER RD NORTH FREEDOM, WI 53951 , US</b>
UNIT	01	<b>Sequence Of Events</b>	
		01	Event <b>NON DOMESTICATED ANIMAL (ALIVE)</b>
		02	Event
		03	Event
UNIT	04	Event	
		<b>Policy Holder</b>	
UNIT	INDIVIDUAL	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>	Individual <b>JENNIFER GILBREATH</b>
		<b>Individual</b>	
UNIT	INDIVIDUAL	Driver <b>BILLY J GILBREATH (229) 429-5395</b>	Citations Issued <b>0</b>
			Sex <b>MALE</b>
UNIT	INDIVIDUAL	Date of Birth	Race <b>WHITE</b>
		Address <b>S8338 DENZER RD NORTH FREEDOM, WI 53951 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
UNIT	001	<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
UNIT	001	Eye Protection	Tint Compliance
		<b>Injury</b>	Injury Severity <b>SUSPECTED MINOR INJURY</b>
UNIT	001	Airbag <b>DEPLOYED-CURTAIN</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
UNIT	001	Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>EMS GROUND</b>	EMS Agency Identifier <b>6000555</b>
UNIT	001	EMS Run # <b>509</b>	
		Hospital <b>SAUK PRAIRIE HOSP</b>	Date of Death
UNIT	001	Time of Death	
		<b>Distracted By</b>	Distracted By Source <b>UNKNOWN</b>
UNIT	001	Distracted By Action <b>UNKNOWN</b>	
		<b>Non Motorist</b>	Striking Unit #
UNIT	001	Location	
		Prior Action	

UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<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>		
	<b>Individual</b>		
	Passenger <b>RIVER K GILBREATH (229) 429-5395</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>S8338 DENZER RD NORTH FREEDOM, WI 53951 , US</b>		Date of Birth <b>WHITE</b>
Driver License Number			
UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
	Seat Position <b>4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI</b>	<b>CHILD RESTRAINT SYSTEM - REAR FACING</b>	
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>DEPLOYED-CURTAIN</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>	Distracted By Source	
	Distracted By Action		
UNIT INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location
	Prior Action		

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<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>		
	<b>Individual</b>		
	Passenger <b>KADINCE D GILBREATH (229) 429-5395</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>S8338 DENZER RD NORTH FREEDOM, WI 53951 , US</b>		Date of Birth Race <b>WHITE</b>
Driver License Number			
UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>CHILD RESTRAINT SYSTEM - FORWARD FACING</b>
	Seat Position <b>9--THIRD SEAT-RIGHT SIDE</b>		
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>	Distracted By Source	
	Distracted By Action		
<b>Non Motorist</b>	Striking Unit #	Location	
Prior Action			

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<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>		
	<b>Individual</b>		
	Passenger <b>LYRIK A GILBREATH (229) 429-5395</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>S8338 DENZER RD NORTH FREEDOM, WI 53951 , US</b>	Date of Birth	Race <b>WHITE</b>
UNIT INDIVIDUAL	Driver License Number		
	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>CHILD RESTRAINT SYSTEM - FORWARD FACING</b>
	Seat Position <b>7--THIRD SEAT-LEFT SIDE (SIDECAR: MOTORC</b>		
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>DEPLOYED-CURTAIN</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>	Distracted By Source	
Distracted By Action			
<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>004</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>			