# **6TL0BC3B3K** 19-13168

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override				Agency Crash Number 19-13168			Investigating Officer/Deputy DEPUTY W. VERTEIN				
6TL0BC3B3K	Crash Date 10/23/2019		Crash Time 11:10 AM		Date Arrived		Time	Time Arrived				
	Date Notified <b>10/23/2019</b>		Time Notified 11:32 AM		Total Units <b>01</b>		Total <b>00</b>		Injured Total Killed 00			
	On Emergency	Emergency Hit and Run Lane Closure Work Zone		k Zone		Trailer or Towed Reporting Threshold						
6TL	Government Active School Zon				School Bus Related Tag			S				
	✓ 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.											
	_ocation											
	ON CTHA SB 328 FT N					Latitude 43.581696635			Longitude -89.737942991			
	OF SHERRILINN DR IN THE TOWN OF DELTON IN SAUK COUNTY				X Coordinate 278947.21875				Y Coordinate 4829057			
	THE CASE COOK!						Structure Type					
(	Crash Scene											
1	First Harmful Event					First Harmful Event Location						
	NON DOMESTICATED ANIMAL (ALIVE)  Manner of Collision						ON ROADWAY			11		
								Light Condition				
	NO COLLISION W/VEH	IICLE I	N TRANSPOR	Г			Light 55.13.doil					
	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 SPE	CIAL JUR	ISDICTION			
	Tribal Land						Access Control			Special Study		
	Unit Summary Unit Status			137-1	siala Or -	ting A - C	loogificati-		Luce =			
	' °				iling AS C	lassilication		Unit Type AUTOMOBILE				
	IN TRANSIT  Vehicle Type						Operating As Endorsements		nents			
01	(SPORT) UTILITY VEHICLE							oporating / to Endorson				
	Total Occs		rain/Bus # Record	ded Tota	al # Citatio	ns Issued		Total Trail	ers	Total Hazl	Mat Types	
	1			0				0		0	,,	
	Insurance?		Direction Of Trave	<u> </u>	Pre Ci	re CrashTire		Speed Lin	peed Limit		Total Lanes	
⊨	YES	S	OUTHBOUND	OUTHBOUND Mark			•					
UNIT	Most Harmful Event: Collision With Special Function							Emergency Motor Vehicle Use		cle Use		
	NON DOMESTICATED ANIMAL (ALIVE)  NO SPECIAL FUN					TION		NOT APPLICABLE				
	Traffic Way				Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Roa	ad Curvatu	re			Road Grade			
	71 -			1.00		-						
	Truck Bus or HazMat			<u> </u>								
	NO											
	Vehicle											

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SAUK COUNTY SHERIFFS DEPARTMEN **WISCONSIN MOTOR VEHICLE 1300 LANGE COURT CRASH REPORT BARABOO, WI 53913** (608) 356-4895

VEHICLE 01	552SEK  Vehicle Identification Number  1FMCU0D74AKB19664  Color  BLU - BLUE  Initial Contact Point  12FRONT  Extent Of Damage	AUT - AUTOMOBILE  Make FORD  Body Style	Year	UNITED STATES  Model				
ш	1FMCU0D74AKB19664  Color BLU - BLUE Initial Contact Point 12—FRONT Extent Of Damage	FORD						
ш	Color BLU - BLUE Initial Contact Point 12FRONT Extent Of Damage		0040					
VEHICLE	BLU - BLUE Initial Contact Point 12FRONT Extent Of Damage	Body Style	2010	ESCAPE XLT				
VEHICLE	Initial Contact Point  12FRONT  Extent Of Damage							
VEHICLE	12FRONT Extent Of Damage	UT - SPORT UTILITY VEI	UT - SPORT UTILITY VEHICLE NOT A BUS					
VEHICL	Extent Of Damage	Vehicle Damage						
VEHIC	Extent Of Damage							
VE		1RIGHT FRONT CORNE	1RIGHT FRONT CORNER, 11LEFT FRONT CORNER, 12FRONT					
,	DISABLING DAMAGE							
	Towed Due To Damage	Vehicle Removed By	Vehicle Removed By					
	TOWED DUE TO DISABLING DAMAGE	BILLS TOWING						
	What Driver Was Doing	Vehicle Factors						
	Think 2000 that 2000g	7 61.116.6 1 4616.76						
	Driver Prior Action Other							
	Driver Actions							
ш	NO CONTRIBUTING ACTION							
$\Xi$								
¥								
直								
>								
	Owner Name	Owner Address						
5								
	Policy Holder							
		I e e e						
	1							
		WARK BAUWUNK						
	Driver			Sex				
۲								
Š	(000) 347-2210	Date of Birth						
₽				WHILE				
$\geq$		Driver License Number	Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES					
Ż		STATE: WISCONSIN C						
Sat	fety Fauinment	Safety Equipment						
- Cu								
	Seat Position	SHOULDER & LAP BE	LI	SHOULDER & LAP BELT				
		11.1						
	Helmet Use	Helmet Compliance						
	Helmet Use  Eye Protection	Helmet Compliance Tint Compliance						
_	Eye Protection	Tint Compliance						
201	Eye Protection  Injury Severity							
001	Eye Protection  Injury Severity NO APPARENT INJURY	Tint Compliance		Trapped/Extricated				
100	Eye Protection  Injury Severity	Tint Compliance		Trapped/Extricated				
001	Injury Severity NO APPARENT INJURY  Ejected Ejection Path	Tint Compliance Airbag						
100	Eye Protection  Injury Severity NO APPARENT INJURY  Ejected Ejection Path  Medical Transport	Tint Compliance		Trapped/Extricated  EMS Run #				
001	Eye Protection  Injury Injury NO APPARENT INJURY Ejected Ejection Path Medical Transport NOT TRANSPORTED	Tint Compliance Airbag  EMS Agency Identifier		EMS Run #				
100	Eye Protection  Injury Severity NO APPARENT INJURY  Ejected Ejection Path  Medical Transport	Tint Compliance Airbag						
001	Eye Protection  Injury NO APPARENT INJURY  Ejected Ejection Path  Medical Transport NOT TRANSPORTED  Hospital  Distracted By Source	Tint Compliance Airbag  EMS Agency Identifier		EMS Run #				
001	Eye Protection  Injury Injury NO APPARENT INJURY Ejected Ejection Path Medical Transport NOT TRANSPORTED	Tint Compliance Airbag  EMS Agency Identifier		EMS Run #				
001	Injury   Injury Severity   NO APPARENT INJURY	Tint Compliance Airbag  EMS Agency Identifier		EMS Run #				
001	Eye Protection  Injury NO APPARENT INJURY  Ejected Ejection Path  Medical Transport NOT TRANSPORTED  Hospital  Distracted By Source	Tint Compliance Airbag  EMS Agency Identifier		EMS Run #				
001	Injury   Injury Severity   NO APPARENT INJURY	Tint Compliance Airbag  EMS Agency Identifier		EMS Run #				
	INDIVIDUAL	NO CONTRIBUTING ACTION  Owner Name  Policy Holder Insurance Company ERIE-INS-CO Individual  Driver MICHAEL CHRISTOPHER BAUMUNK	Owner Name  Owner Address  Policy Holder Insurance Company ERIE-INS-CO Individual MARK BAUMUNK  Individual  Driver MICHAEL CHRISTOPHER BAUMUNK (608) 547-2218  Address 1503 HILLCREST DR BARABOO, WI 53913 , US  Safety Equipment  On Duty Crash Safety Equipment  Safety Equipment  Owner Address Individual MARK BAUMUNK  O Date of Birth  Safety Equipment  On Duty Crash Safety Equipment	Owner Name  Owner Address  Policy Holder Insurance Company ERIE-INS-CO Individual MARK BAUMUNK  Individual  Driver MICHAEL CHRISTOPHER BAUMUNK (608) 547-2218  On Date of Birth  Safety Equipment  On Duty Crash  Safety Equipment  Owner Address Individual Citations Issued 0 Date of Birth  Safety Equipment  On Duty Crash  Safety Equipment	Owner Name  Owner Address  Policy Holder  Insurance Company ERIE-INS-CO Individual ERIE-INS-CO Individual  Individ			

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Crash Date 10/23/2019 Crash Time 11:10 AM

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		Prior Action					
		Action					
LIND	INDIVIDUAL						
		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			
2	001	Drug Type			•		
		Individual Condition  APPEARED NORMAL					