#### 6TL09CGFCP

19-13332

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Crash Document #			· ·g····, ········			Investigating Officer/Deputy DEPUTY K. MUELLER				
٩				Date Arrived			Time Arrived				
0	10/26/2019	08:19 PM									
GF	Date Notified 10/26/2019	Time Notified 08:19 PM		Total Units 01		Total <b>00</b>			Total Killed		
6TL09CGFC	On Emergency	t and Run	Lane Clos				Trailer or Towed Reporting Threshold				
6TL	Government Property Active School Zone NO				ted Tags						
	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR				ΥY		Amended Secondary Crash				
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
	Location										
	ON CTHPF SB 0.44 MI S				Latitude 43.325893472			Longitude -89.947329745			
	OF CTHC EB				43.323893472 X Coordinate			-89.94/329/45 Y Coordinate			
	IN THE TOWN OF HONEY CREEK IN SAUK COUNTY				261035.234375		480122				
						Structure Type					
1	Crash Scene										
	First Harmful Event NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision					First Harm ON ROA	ful Event Lo	ocation			
						Light Cond					
	NO COLLISION W/VEHICLE	IN TRANSPOR	т			-					
	Road Surface Condition(s)					Roadway I	Factor(s)				
	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type	Animal Type				Relation To Trafficway					
	DEER	DEER Crash Classification - Location PUBLIC PROPERTY				TRAFFICWAY - ON ROAD					
	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY Tribal Land					NO SPECIAL JURISDICTION           Access Control         Sp.			Special Study		
						AUCESS 00	niu UI			Special Sludy	
	Unit Summary										
	Unit Status		Veh	icle Opera	ating As C	lassification		Unit Type			
	IN TRANSIT D CLASS						TRUCK	TRUCK			
01	Vehicle Type Operating As Endo							s Endorse	ments		
	UTILITY TRUCK/PICKUP TRUCK Total Occs Train/Bus # Recorded Total # Citations Issue			ons Issued	Total Trailers Total HazMat Types			Mat Types			
	1		0				0			0	
		Direction Of Trave		Fie Glashille		Speed Lin	ed Limit Total		Lanes		
UNIT		SOUTHBOUND		Mark Special Euroption			Emergency Motor Vahiala Llas				
۱ <u>۶</u>	Most Harmful Event: Collision With Special Function NON DOMESTICATED ANIMAL (ALIVE) NO SPECIAL FUNC				Emergency Motor Vehicle Use           TION         NOT APPLICABLE						
	Traffic Way Traffic Control						Traffic Control Inoperative/Missing				
	Surface Type Road Curvature				Road Grade						
	Truck Bus or HazMat						Į				
	NO										
	Vehicle										

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

		License Plate Number	Plate Type	St	Country of Issuance			
		818356	LTK - LIGHT TRUCK WI		UNITED STATES			
-	_	Vehicle Identification Number	Make	Year	Model			
6	01	1GCGK24U2YE341030	CHEVROLET	2000	SILVERADO			
			Body Style Bus Use NOT A BUS					
F		SIL - SILVER (ALUMINUM) Initial Contact Point	PK - PICKUP         NOT A BUS           Vehicle Damage         Vehicle Tamage					
	VEHICLE	12FRONT	Venice Banage					
UNIT		Extent Of Damage	ALL AREAS					
		DISABLING DAMAGE						
		Towed Due To Damage	Vehicle Removed By					
		TOWED DUE TO DISABLING DAMAGE	EVERETTS TOWING					
		What Driver Was Doing	Vehicle Factors					
		Driver Prior Action Other	_					
		Driver Phot Action Other						
		Driver Actions						
	щ	NO CONTRIBUTING ACTION						
L	CL							
UNIT	VEHICLE							
	K							
		Owner Name	Owner Address					
	_							
2	01							
Ŀ	I	Policy Holder						
UNIT		Insurance Company	Individual					
		ALLSTATE-INS-CO	SCOTT HAGER					
		Individual						
		Driver SCOTT R HAGER	Citations Issued Sex					
	AL	(608) 370-2884	0 Date of Birth		MALE Race			
┝┍	INDIVIDUAL		Bate of Birth		WHITE			
UNIT	N	Address	Driver License Number					
	ND	E5484 JONES RD SPRING GREEN, WI 53588 , US	STATE: WISCONSIN COUNTRY: UNITED STATES					
	-	SI KING GREEN, WI 33300 , 05	STATE. WISCONSIN COUNTRY. UNITED STATES					
	_	On Duty Crash	Safety Equipment					
	Saf	ety Equipment	SHOULDER & LAP BELT Helmet Compliance Tint Compliance					
	1	Seat Position						
		Helmet Use						
		Eye Protection						
5	001	Injury Severity	Airbag					
	õ	Injury NO APPARENT INJURY						
		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 Action						
		Striking Unit #         Location						

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		Prior Action					
		Action					
UNIT	INDIVIDUAL						
		Action Other					To/From School
	L	Drug & Alcohol 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		
0	001	Drug Type			•		
		Individual Condition					
		APPEARED NORMAL					