6TL0BJ1GJB

19-13617

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash			.9,			nvestigating Officer/Deputy DEPUTY J. MACASKILL				
JB	Crash Date 11/01/2019	Crash Time 05:45 PM	Crash Time		Date Arrived		Time	Time Arrived				
J1G,	Date Notified Time No 11/01/2019 05:50 P		tified Total Units		nits	Total		I Injured Total Killed 00		I		
0B	On Emergency	Hit and Run	and Run Lane Closu		Work Zone			Trailer or Towed			Reporting Threshold	
6TL	Government Active School Zone				chool Bus Related Tag			js				
	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR					RY	I Amended I I			Secondary Crash	,	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
i	Location											
İ	ON STH23 WB					Latitude 43.533379196			Longitude -89.905625927			
	OF ABLEMAN RD IN THE TOWN OF EXCEL	SIOR				X Coordinate 265220.78125				Y Coordinate		
	IN SAUK COUNTY				Structure			402413	0.5			
(Crash Scene											
1	First Harmful Event					Firet Harm	ful Event L	ocation				
	NON DOMESTICATED AN	NON DOMESTICATED ANIMAL (ALIVE)				First Harmful Event Location ON ROADWAY						
	Manner of Collision					Light Cond	dition					
	NO COLLISION W/VEHIC	LE IN TRANSPOR	RT .									
	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 PUBLIC PROPERTY				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION							
	Tribal Land					Access Control Special Study						
ļ	Unit Summary											
	Unit Status		Veh	icle Opera	ating As C	lassification		Unit Type				
				D CLASS			Т					
	Vehicle Type							Operating As Endorsements				
01	UTILITY TRUCK/PICKUP TRUCK					operating the Endordermento						
	Total Occs Train/Bus # Recorded Total # Citations Issued						Total Trail	lers Total Hazl		Mat Type	25	
	1	114.11,240 11 110001	0	ai # Oitatic	(0			0		
_	Insurance? YES	Direction Of Trave			re CrashTire Mark		Speed Lin	ed Limit Total La		nes		
Ξ	Most Harmful Event: Collision With Special Function					Emergency Motor Vehicle Use						
L N O	NON DOMESTICATED ANIMAL (ALIVE) NO SPECIAL FUNC				TION		NOT APP	NOT APPLICABLE				
	Traffic Way Traffic Control						Traffic Control Inoperative/Missing					
ſ	Surface Type Road Curv				ature			Road Grade				
	Truck Bus or HazMat NO											
	Vahiala											

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		License Plate Number		te Type	St	Country of Issuance				
		646978	LT	K - LIGHT TRUCK	WI	UNITED STATES				
_	1	Vehicle Identification Number	Ma		Year	Model				
5	01	1FTPW14V79FA52874		ORD	2009	F150				
		Color		dy Style		Bus Use				
		RED - RED		(- PICKUP		NOT A BUS				
LIND	Щ	Initial Contact Point		hicle Damage						
	VEHICLE	12FRONT								
5	H	Extent Of Damage		1RIGHT FRONT CORNER, 11LEFT FRONT CORNER, 12FRONT						
	VE	DISABLING DAMAGE								
		Towed Due To Damage		Vehicle Removed By						
		TOWED DUE TO DISABLING DAMAGE		CRAIGS TOWING						
		What Driver Was Doing	Ve	Vehicle Factors						
				_						
		Driver Prior Action Other								
		Driver Actions								
_		NO CONTRIBUTING ACTION								
	ij	NO CONTRIBUTINO ACTION								
LINO	윽									
\supset	VEHICLE									
	>									
		Owner Name		Owner Address						
_										
6	01									
LIND	i	Policy Holder								
		Insurance Company	T	Individual						
_		STATE-FARM-GENERAL-INS-CO		STEVEN NAATZ						
		Individual								
		Driver	-	Citations Issued	Sex					
	_	STEVEN JAMES NAATZ	4	0		MALE				
	JA	(920) 918-0578		Date of Birth		Race				
⊨	INDIVIDUAL					WHITE				
	\leq	Address	1	Driver License Number						
	Z	1401 MEADOWBROOK DR WATERTOWN, WI 53098 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
		,,								
		On Duty Crash		Safety Equipment						
	Safety Equipment Seat Position			Salety Equipment						
				SHOULDER & LAP BELT						
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
		Clarican Consorting		Airbag						
6	90	Injury Severity NO APPARENT INJUR	ov ľ	Alibay						
		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 # Loca	ation							
		Non Motorist								

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Crash Date 11/01/2019
Crash Time 05:45 PM

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I		Prior Action						
		THOI NOTION						
 		Action						
		ACTION						
	- 1							
	Ζ							
l⊨	\supset							
LNO	INDIVIDUAL							
_								
	Z							
1								
		Action Other		To/From School				
	,	Orug & Alcohol NO	nol Use	Suspected Drug Use				
				NO				
ĺ	Alcohol Test Given		Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN						
İ		Drug Test Given Drug Test Typ		Drug Test Resi		sults		
		TEST NOT GIVEN						
_	7	Drug Type	•					
2	001							
l								
		Individual Condition						
		ADDEADED NORMAL						
		APPEARED NORMAL						