

6TL09PBQCK

19-13522

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 19-13522, Investigating Officer/Deputy DEPUTY B. STODDARD, Crash Date 10/30/2019, Crash Time 03:46 PM, Date Arrived, Time Arrived, Date Notified 10/30/2019, Time Notified 03:46 PM, Total Units 01, Total Injured 00, Total Killed 00, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related NO, Tags, 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.

Location

ON STH33 WB 0.39 MI W OF OLD IRONTON RD IN THE TOWN OF REEDSBURG IN SAUK COUNTY, Latitude 43.541988783, Longitude -90.039871968, X Coordinate 254407.9375, Y Coordinate 4825495, Structure Type

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE), First Harmful Event Location ON ROADWAY, Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT, Light Condition, 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 SPECIAL JURISDICTION, Tribal Land, Access Control, Special Study

Unit Summary

Unit Status IN TRANSIT, Vehicle Operating As Classification D CLASS, Unit Type AUTOMOBILE, Vehicle Type (SPORT) UTILITY VEHICLE, Operating As Endorsements, Total Occs 1, Train/Bus # Recorded, Total # Citations Issued 0, Total Trailers 0, Total HazMat Types 0, Insurance? YES, Direction Of Travel WESTBOUND, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE), Special Function NO SPECIAL FUNCTION, Emergency Motor Vehicle Use NOT APPLICABLE, Traffic Way, Traffic Control, Traffic Control Inoperative/Missing, Surface Type, Road Curvature, Road Grade, Truck Bus or HazMat NO

Vehicle

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01 UNIT VEHICLE	01 VEHICLE	License Plate Number <b>EBK5447</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>MI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>1FMCU0JX4FUB69822</b>	Make <b>FORD</b>	Year <b>2015</b>	Model <b>ESCAPE</b>	
		Color <b>WHI - WHITE</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use <b>NOT A BUS</b>		
		Initial Contact Point <b>12--FRONT</b>	Vehicle Damage			
		Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	<b>1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT</b>			
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>			
		What Driver Was Doing	Vehicle Factors			
01 UNIT VEHICLE	01 VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>				
		Owner Name		Owner Address		
01 UNIT INDIVIDUAL	01 INDIVIDUAL	<b>Policy Holder</b>				
		Insurance Company <b>PROGRESSIVE-ADVANCED-INSURANCE-CO</b>		Individual <b>JACQUELINE FROILAND</b>		
		<b>Individual</b>				
01 UNIT INDIVIDUAL	001 INDIVIDUAL	Driver <b>JACQUELINE HELEN FROILAND (906) 231-3487</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
		Date of Birth		Race <b>WHITE</b>		
		Address <b>1217 EMERY ST HANCOCK, MI 49930 , US</b>		Driver License Number <b>STATE: MICHIGAN COUNTRY: UNITED STATES</b>		
		<b>Safety Equipment</b>		On Duty Crash		
01 UNIT INDIVIDUAL	001 INDIVIDUAL	Seat Position		<b>SHOULDER &amp; LAP BELT</b>		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>		Airbag
		Ejected		Ejection Path		Trapped/Extricated
		Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
		Hospital		Date of Death		Time of Death
01 UNIT INDIVIDUAL	001 INDIVIDUAL	<b>Distracted By</b>				
		Distracted By Source				
Distracted By Action		Striking Unit #				
<b>Non Motorist</b>		Location				

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<b>UNIT</b>	Prior Action		
	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>01</b>	<b>001</b>	