

6TLOBGSFDX
19-14553

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TLOBGSFDX

Document Number Override		Primary Crash Document #	Agency Crash Number 19-14553	Investigating Officer/Deputy DEPUTY B. LUBER	
Crash Date 11/24/2019		Crash Time 02:49 PM	Date Arrived	Time Arrived	
Date Notified 11/24/2019		Time Notified 02:50 PM	Total Units 01	Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

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

Location

ON STH113 SB 0.26 MI N OF HALWEG RD IN THE TOWN OF MERRIMAC IN SAUK COUNTY	Latitude 43.398203321	Longitude -89.675165413
	X Coordinate 283360.53125	Y Coordinate 4808512.5
	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	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR			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 SOUTHBOUND	<input type="checkbox"/> 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

WISCONSIN MOTOR VEHICLE
CRASH REPORT

01 UNIT VEHICLE	License Plate Number 10468H		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1HGCM56896A092824		Make HONDA	Year 2006	Model ACCORD	
	Color SIL - SILVER (ALUMINUM)		Body Style SD - SEDAN		Bus Use NOT A BUS	
	Initial Contact Point 11--LEFT FRONT CORNER		Vehicle Damage 7--LEFT REAR CORNER, 8--LEFT SIDE REAR, 9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER			
	Extent Of Damage FUNCTIONAL DAMAGE					
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR			
	What Driver Was Doing		Vehicle Factors			
01 UNIT VEHICLE	Driver Prior Action Other					
	Driver Actions NO CONTRIBUTING ACTION					
01 UNIT VEHICLE	Owner Name		Owner Address			
	Policy Holder					
01 UNIT VEHICLE	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual JENNIFER FEILER			
	Individual					
01 UNIT INDIVIDUAL	Driver JENNIFER RAE FEILER (608) 438-0074		Citations Issued 0	Sex FEMALE		
			Date of Birth	Race WHITE		
	Address 3533 CROSS ST MADISON, WI 53711 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01 UNIT INDIVIDUAL	Safety Equipment		On Duty Crash			
	Seat Position		Safety Equipment SHOULDER & LAP BELT			
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
01 UNIT INDIVIDUAL	Injury		Injury Severity NO APPARENT INJURY		Airbag	
	Ejected	Ejection Path		Trapped/Extricated		
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	
	Hospital		Date of Death		Time of Death	
	Distracted By		Distracted By Source			
Distracted By Action						
Non Motorist		Striking Unit #		Location		

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	Prior Action		
	Action		
	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
	Drug Type		
	Individual Condition APPEARED NORMAL		
	01	001	