## 6TL09KMM0V 19-14540

## **WISCONSIN MOTOR VEHICLE CRASH REPORT**

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

	Document Number Override	Primary Crash	Primary Crash Document # Agency 19-145		,		stigating Officer/Deputy					
>	Crash Date	Crash Time					ne Arrived					
10	11/24/2019	05:55 AM										
Σ	Date Notified <b>11/24/2019</b>		Total Units <b>01</b>			Total Inju		Total Killed				
99K	On Emergency	Hit and Run	and Run Lane Closu		ure Work Z		Trailer or To		owed		Reporting Threshold	
JTL(	Government Active School Zone			School Bus Related			Tags	Tags				
U	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJ					RY	Amended	ended		Secondary Crash	у	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
ĺ	Location											
6TL09KMM	ON STH23 WB					Latitude				Longitude		
	0.31 MI W OF OPEN VIEW RD					43.46529		-90.024475176				
	IN THE TOWN OF WESTFIELD				X Coordinate 255342.078125			Y Coordinate <b>4816931</b>				
	IN SAUK COUNTY				Structure Type NO STRUCTURE							
	Crash Scene											
	First Harmful Event					First Harm	ful Event Lo	cation				
	NON DOMESTICATED A	NIMAL (ALIVE)				ON ROA	DWAY					
	Manner of Collision					Light Cond	dition					
N N R		NO COLLISION W/VEHICLE IN TRANSPORT										
	Road Surface Condition(s)					Roadway F	Factor(s)					
	Environment Factor(s)											
	Weather Condition(s)											
	Animal Type					Relation To Trafficway						
	DEER					TRAFFICWAY - ON ROAD						
	Crash Classification - Location					Crash Classification - Jurisdiction						
	PUBLIC PROPERTY Tribal Land					NO SPECIAL JURISDICTION  Access Control Special Study						
	THIDAI EATO					Special diddy						
į	Unit Summary											
	Unit Status		Veh	icle Opera	ating As C	lassification		Unit Type				
				D CLASS				TRUCK				
7	Vehicle Type UTILITY TRUCK/PICKUP TRUCK					Operating As Endorsements						
	Total Occs Train/Bus # Recorded Total # Citations Issued						Total Trail	ers Total Hazi		Mat Type	ıs.	
	2		0				0	0		0		
	Insurance?	Direction Of Trave				rashTire		Speed Limit		Total Lanes		
UNIT	YES	SOUTHBOUND			/lark			Emorgono	Motor Vohi	olo I loo		
5	Most Harmful Event: Collision With  NON DOMESTICATED ANIMAL (ALIVE)  Special Function  NO SPECIAL FUNC				TION		Emergency Motor Vehicle Use NOT APPLICABLE					
	Traffic Way Traffic Control						Traffic Control Inoperative/Missing					
	Surface Type Road Curvature				ıre			Road Grade				
	Tarak Dua as UsaMat											
	Truck Bus or HazMat  NO											
	Vahiala											

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Crash Time 05:55 AM

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		License Plate Number		ate Type	St	Country of Issuance				
		KA3143		K - LIGHT TRUCK	WI	UNITED STATES				
7	01	Vehicle Identification Number  1GCEK19R1VE109536	Ma	HEVROLET	Year <b>1997</b>	Model <b>K1500</b>				
	)	Color		dy Style	1997	Bus Use				
		GRN - GREEN		K - PICKUP		NOT A BUS				
⊨	щ	Initial Contact Point		hicle Damage	l					
	VEHICLE	12FRONT								
LINO	Ξ	Extent Of Damage		12FRONT, UNDERCARRIAGE						
	VE	DISABLING DAMAGE								
		Towed Due To Damage		Vehicle Removed By						
		TOWED DUE TO DISABLING DAMAGE What Driver Was Doing		STEVES AUTO SERVICE						
		what briver was boing	ve	Vehicle Factors						
		Driver Prior Action Other		4						
		Driver Actions	•							
	Щ	NO CONTRIBUTING ACTION								
LINO	<u>⊆</u>									
⋾	VEHICLE									
	>									
		Owner Name		Owner Address						
01	01									
0	0									
LINO		Policy Holder Insurance Company		I. w						
5		FARMERS-INS-CO-INC		Individual  MARK KEICHINGER						
		ndividual								
		Driver		Citations Issued Sex						
	_	MARK J KEICHINGER		0		MALE				
	INDIVIDUAL	(608) 577-3226		Date of Birth		Race				
<b>=</b>	JD.					WHITE				
LNO	5	Address 207 S MAIN ST		Driver License Number						
	Z	PARDEEVILLE, WI 53954 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
	Safety Equipment  On Duty Crash			Safety Equipment						
		Seat Position		SHOULDER & LAP BELT						
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
		Injury Severity		LAirhag						
6	90	Injury NO APPARENT IN	Airbag							
		Ejection Path				Trapped/Extricated				
		Medical Transport	EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED	Date of Death Time of Death							
		Hospital		Date of Death		Time of Death				
		Distracted By Source				<u> </u>				
		Distracted By								
		Distracted By Action								
		Striking Unit #	Location							
		Non Motorist	Location							

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Crash Date 11/24/2019

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I		Prior Action						
		THOI MOUNT						
 		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				Alcohol Test Results		
		TEST NOT GIVEN						
İ		Drug Test Given Drug Test Typ TEST NOT GIVEN			Drug Test Results	is		
		TEST NOT GIVEN						
_	7	Drug Type	•					
2	001							
l								
		Individual Condition						
			DMAI					
		APPEARED NORMAL						