6TL0BGSFF0

19-14891

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Ī	Document Number Overrid	е	Primary Crash Document # Agency Crash				umber		estigating Officer/Deputy				
					19-14891			DEPUTY B. LUBER					
	Crash Date 12/03/2019	Crash Time 04:49 PM		Date Arrived Total Units 01			Time Arrived						
GSF	Date Notified 12/03/2019	Time Notified 04:50 PM	Total 00			I Injured Total Killed 00							
6TL0BGSFF	On Emergency	On Emergency Hit and Run Lane		Lane Clos	osure 🗌 Wo		ork Zone	k Zone		owed	Reporting Threshold		
6TL	Government Property			hool Zone	I Zone School Bus Relat			ed Tags			-		
	Reportable Crash Type NON-DOMESTICATED A				IAL W/ N	IO INJU	Amended		Amended	Secondary			
	✓ I, a sworn law enfo	orceme	nt officer, agre	e that I have n	not added any CJIS data in this report.								
	Location	cation											
ſ	ON S6763 STH23 EB						Latitude 43.39965105		Longitud -90.034				
	0.30 MI N OF CTHW NB										807334		
	(FIRE S6763) IN THE TOWN OF WESTFIELD IN SAUK COUNTY						X Coordinate 254240.5			Y Coordinate 4809671			
							Structure -	Structure Type FIRE					
(Crash Scene												
Ĩ	First Harmful Event						First Harmful Event Location						
	NON DOMESTICATED		AL (ALIVE)				ON ROADWAY						
ľ	Manner of Collision						Light Cond	Light Condition					
	NO COLLISION W/VEH	ICLE I	N TRANSPOR	Г									
ľ	Road Surface Condition(s)						Roadway Factor(s)						
ŀ	Environment Factor(s)						-						
-	Weather Condition(s)												
-							Relation To Trafficway						
	Animal Type DEER Crash Classification - Location PUBLIC PROPERTY Tribal Land						TRAFFICWAY - ON ROAD Crash Classification - Jurisdiction						
-													
									ISDICTION				
ŀ							Access Control				Special Study		
Ī	Unit Summary										•		
[hicle Operating As Classification			Unit Type				
	IN TRANSIT				CLASS				AUTOMOBILE				
7	Vehicle Type						Operating As Endorsements						
6	PASSENGER CAR												
_	Total Occs	Т	rain/Bus # Record		al # Citatio	ons Issue	d	Total Trail	ers		Mat Types		
	1 Insurance?		Virection Of Travel	0				0 Speed Lim	nit	0 Total Lan	05		
	YES					rashTir Iark	9	Speed Lin	in	TUlai Laii	5		
	Most Harmful Event: Collision With			Special Function			I		Emergency Motor Vehicle Use				
⊃	NON DOMESTICATED ANIMAL (ALIVE)				SPECI/		TION		NOT APPLICABLE				
ľ	Traffic Way			Tra	Traffic Control					Traffic Control Inoperative/Missing			
ŀ	Surface Type			Rox	Road Curvature					Road Grade			
	···												

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WISCONSIN MOTOR VEHICLE **CRASH REPORT**

	Truck Bus or HazMat									
		Vehicle								
01		License Plate Number ABE2605		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
	6	Vehicle Identification Number 2T1BU4EE0DC945552		Make TOYOTA	Year 2013	Model COROLLA/S/				
	VEHICLE	Color RED - RED		Body Style 4D - 4DR		Bus Use NOT A BUS				
UNIT		Initial Contact Point 12FRONT Extent Of Damage DISABLING DAMAGE		Vehicle Damage 1RIGHT FRONT CORNER, 11LEFT FRONT CORNER, 12FRONT						
		Towed Due To Damage TOWED DUE TO DISABL	ING DAMAGE	Vehicle Removed By GEORGES AUTO BODY						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other								
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
		Owner Name		Owner Address	Owner Address					
6	0									
UNIT		Policy Holder								
S		Insurance Company STATE-FARM-GENERAL	-INS-CO	Individual BENJAMIN LIMMEX						
		Individual								
	INDIVIDUAL	Driver NATALIE MICHELLE LIM (608) 588-5316	IMEX	Citations Issued 0		Sex FEMALE				
E		(000) 300-3310		Date of Birth	Race WHITE					
UNIT		Address 1125 SPRUCE ST PLAIN, WI 53577 , US		Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sa	On Dut	y Crash	Safety Equipment	Safety Equipment					
	Seat Position			SHOULDER & LAP B	SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance	Helmet Compliance					
		Eye Protection		Tint Compliance	Tint Compliance					
2	001	Injury S Injury NO AF	everity PPARENT INJURY	Airbag						
		Ejected	Ejection Path	Trapped/Extricated						
		Medical Transport	•	EMS Agency Identifier	EMS Agency Identifier EMS Run #					
		NOT TRANSPORTED								

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			Distracted By Source	<u></u>							
		Distracted By	Distracted by Source	5							
		Distracted By Action									
		Non Motorist	Striking Unit #	Location							
		Prior Action		1							
		Action									
	Ļ										
⊢	INDIVIDUAL										
UNIT	Ξ										
_	DN										
	-										
		Action Other						To/From School			
		Drug & Alcohol	Suspected Alcohol U	lse	Suspected Drug Use						
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN	g Test Given Drug Test Type ST NOT GIVEN			Drug Test Results	3				
6	001	Drug Type									
		Individual Condition									
		APPEARED NORM	APPEARED NORMAL								