6TL0B4X4MT 20-00759

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	Primary Crash Document #		Agency Crash Number 29-00759			Investigating Officer/Deputy DEPUTY E. KNULL			
M	Crash Date 01/20/2020	Crash Time 05:26 PM			Date Arrived		Time	Time Arrived			
6TL0B4X4M	Date Notified 01/20/2020	Time Notified 05:26 PM			Total Units 01		Total 00		Injured Total Killed 00		
0B/	On Emergency	lit and Run	Lane Closu		Ш	k Zone		Trailer or T	owed	Reporting Threshold	
6TL	Government Property		hool Zone	School B NO	sus Relate	ed	Tag	S			
	✓ Reportable	Crash Type NON-DOMES	TICATED ANIM	AL W/ No	O INJUF	RY		Amended		Secondary Crash	
	✓ I, a sworn law enforcem	ent officer, agre	e that I have no	ot added	any CJI	S data in	this repo	rt.			
I	Location										
·	ON CTHG SB					Latitude Longitude					
	111 FT N					43.52033	8742	-90.1637		768425	
	OF GLASSBURN LN	_				X Coordinate			Y Coordinate		
	IN THE TOWN OF IRONTON	ı				244306.25				4823464	
	IN SAUK COUNTY										
				Structure Type NO STRUCTURE							
(Crash Scene										
Ī	First Harmful Event					First Harm	ıful Event L	ocation			
	NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision					ON ROADWAY					
ŀ						Light Condition					
	00 - NO COLLISION W/VEH	ICLE IN TRANSI	PORT			J					
ŀ	Road Surface Condition(s)					Roadway	Factor(s)				
	,					,	()				
İ	Environment Factor(s)										
	Weather Condition(s)										
ŀ	Animal Type					Relation To Trafficway					
	DEER Crash Classification - Location PUBLIC PROPERTY Tribal Land					TRAFFICWAY - ON ROAD					
ŀ						Crash Classification - Jurisdiction					
							NO SPECIAL JURISDICTION				
-								ISDICTION		Special Study	
	Tibal Land					Access Co	JIIIOI			Special Study	
Į											
	Unit Summary ====										
				Vehicle Operating As Classification				Unit Type			
	IN TRANSIT D CLASS				ASS			TRUCK			
5	Vehicle Type							Operating .	As Endorser	ments	
0	UTILITY TRUCK/PICKUP TRUCK										
	Total Occs Train/Bus # Recorded			Total # Citations Issued						Mat Types	
	2		0				0	0			
	Insurance?	Direction Of Trave	Pre CrashTire		Speed Lim		mit Total Lane		es		
╘	YES SOUTHBOUND			☐ Mark							
LNO	Most Harmful Event: Collision With			Special Function			TION		Emergency Motor Vehicle Use		
_	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTI			TION		NOT APPLICABLE		
	Traffic Way			Traffic Control			Т		Traffic Control Inoperative/Missing		
	0.4										
	Surface Type			Road Curvature				Road Grade			

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	Truc	k Bus or HazMat							
	,	Vehicle							
UNIT 01		License Plate Number PZ9042	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES				
	VEHICLE 01	Vehicle Identification Number 1GCVKREH2GZ114672	Make CHEVROLET	Year 2016	Model SILVERADO				
		Color BLK - BLACK	Body Style PK - PICKUP	"	Bus Use				
		Initial Contact Point 12 - FRONT Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage 12 - FRONT						
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
LNO	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	BUTING ACTION						
		Owner Name	Owner Address	Owner Address					
5	5								
⊨		Policy Holder							
LNO		Insurance Company WEST-BEND-MUTUAL-INS-CO	Organization/Company SERVICE ELECTRIC						
	DIVIDUAL	Individual Property of the Individual Property o							
		Driver MELISSA L BRANDT	Citations Issued 0	Sex FEMALE					
–		(608) 393-3741	Date of Birth	Date of Birth Race WHITE					
LINO		Address S3174 CTH G LAVALLE, WI 53941 , US	Driver License Number STATE: WISCONSIN C	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash fety Equipment	Safety Equipment	Safety Equipment					
		Row Seat Position	SHOULDER & LAP BE	SHOULDER & LAP BELT					
		Helmet Use	Helmet Compliance						
01		Eye Protection	Tint Compliance						
	00	Injury Severity NO APPARENT INJURY	Airbag						
		Ejection Path			Trapped/Extricated				
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #				
		Hospital	Date of Death		Time of Death				

Form DT4000

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Distracted By Source								
		Distracted By Action						
	,	Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
_	UAL							
UNIT	INDIVIDUAL							
	IND							
		Action Other						To/From School
		Action Other						10/110m School
	L	Drug & Alcohol 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		
01	001	Drug Type				1		
		Individual Condition						
		APPEARED NOR	MAL					