6TL09PBQDB 20-02599

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 Crash Number 20-02599		l l	Investigating Officer/Deputy DEPUTY B. STODDARD				
DB	Crash Date 03/09/2020	Crash Time 06:59 AM			Date Arrived		Time	Time Arrived				
Q	Date Notified 03/09/2020	Time Notified 06:59 AM			Total Units 01		Total 00		Total Killed 00			
.09PB	On Emergency	Hit and Run	Lane Close	ure	Wo	rk Zone		Trailer or T	owed	Re Thi	porting reshold	
6TL	Government Property		hool Zone	NO School B	Bus Relat	ed	Tag	S				
	✓ Reportable	Crash Type NON-DOMES	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			RY Amended					condary Crash	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
Ī	Location											
F	ON STH33 EB					Latitude			Longitud	le		
	908 FT S					43.63650)5411	-90.1802				
	OF BYINGTON RD					X Coordin	ate		Y Coordinate			
	IN THE TOWN OF LA VALL	.E				243465.046875				4836417.5		
	IN SAUK COUNTY									400417.0		
_				Structure Type NO STRUCTURE								
(Crash Scene											
Ī							ıful Event L	ocation				
	NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision					ON ROADWAY						
						Light Condition						
	00 - NO COLLISION W/VEH	IICI E IN TRANS	PORT			Ligiti Cont						
	Road Surface Condition(s)	HOLL IN TRANS	- OKI			Roadway	Factor(s)					
	read Surface Solidition(3)					rtoaaway	1 40101(3)					
	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 JURISDICT						
				Access Contro		ontrol	l		Special Study			
Ī	Unit Summary											
	Unit Status		Veh	icle Operat	ting As C	lassification		Unit Type				
				D CLASS			AUTOMOB		BILE	ILE		
ŀ	Vehicle Type				Operating As Endorsements							
01	PASSENGER CAR							, ,				
				Total # Citations Issued		Total Tra		ailers Total Haz		Mat Types		
				0		0		0		71		
	Insurance?				Pre CrashTire		0 11:					
_	YES EASTBOUND				asn i ire ark	,						
LINO	Most Harmful Event: Collision With			cial Function		<u> </u>		Emergency Motor Vehicle Use				
–	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNC			TION		NOT APPLICABLE			
-	Traffic Way			Traffic Control						ol Inoperative/Missing		
	Traine tray							Control moperative/missing				
ŀ	Surface Type			Road Curvature				Road Grade				
				Trodu Guivaluic								

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l	Truc	uck Bus or HazMat							
	Tiuc	N Dus of Flaziviat							
		Mahiala							
		Vehicle License Plate Number Plate Type St Country of Issuance							
			Plate Type		-				
		AFT2861	AUT - AUTOMOBILE	WI	UNITED STATES				
01	2	Vehicle Identification Number	Make	Year	Model				
0	0	1G1ZD5ST9KF176070	CHEVROLET	2019	MALIBU				
		Color	Body Style		Bus Use				
		GRY - GRAY	SD - SEDAN						
	쁘	Initial Contact Point	Vehicle Damage						
UNIT	VEHICL	12 - FRONT							
5	프	Extent Of Damage	01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT						
	5	DISABLING DAMAGE							
		Towed Due To Damage		Vehicle Removed By					
		TOWED DUE TO DISABLING DAMAGE		PETERSON'S					
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
		Driver Actions NO CONTRIBUTING ACTION							
	VEHICLE	NO CONTRIBUTING ACTION							
UNIT	\overline{c}								
5	픖								
	5								
		-							
		Owner Name	Owner Address	Owner Address					
10	5								
0	0								
_		Policy Holder							
UNIT		Insurance Company	Individual						
>		PROGRESSIVE-CASUALTY-INS-CO	JOHNATHAN TAYLO	R					
		Individual							
		Driver	Citations Issued	Citations Issued Sex					
	_	JOHNATHAN DUANE TAYLOR	0	MALE					
	₹	(608) 604-2468	Date of Birth		Race				
 	7			WHITE					
E S	DIVIDUA	Address	Driver License Number	Driver License Number					
>		513 DARCY DR APT E							
	=	HILLSBORO, WI 54634 , US	STATE: WISCONSIN O	STATE: WISCONSIN COUNTRY: UNITED STATES					
		On Duty Crash	Safety Equipment	Safety Equipment					
	Sai	fety Equipment							
		Row Seat Position	SHOULDER & LAP BI	ELT					
İ		Helmet Use	Helmet Compliance	Helmet Compliance					
		Eye Protection	Tint Compliance						
2	90	Injury Severity Injury NO APPARENT INJURY	Airbag	Airbag					
٥	Ó	1 10 711 1711 2111 1110 1111		The state of the s					
		Ejection Path		Trapped/Extricated					
			1						
		Medical Transport	EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED							
		Hospital	Date of Death		Time of Death				

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I			Distracted By Source						
Distracted By									
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
İ		Action							
	INDIVIDUAL								
ı	\mathbf{Z}								
LIND	₹								
_ ا	ā								
	Z								
		Action Other						To/From School	
		Action Other						TO/FIGHT SCHOOL	
ŀ	Suspected Alcohol Use Su			Suspected Drug Use			<u> </u>		
	1	Drug & Alcohol	NO		NO				
İ		Alcohol Test Given Alcohol Test					Alcohol Test Results	Test Results	
		TEST NOT GIVEN							
İ				Drug Test Type		Drug Test Results			
		TEST NOT GIVEN							
5	90	Drug Type							
0	8								
		Individual Condition							
		marriada Condition							
		APPEARED NORI	MAL						
ı									