#### 6TL0BGSFF3 20-03246

## 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 20-03246			Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI				
F3	Crash Date <b>03/31/2020</b>	Crash Time 07:54 PM			Date Arrived		Tim	Time Arrived				
GSF	Date Notified <b>03/31/2020</b>	Time Notified 07:54 PM			Total Units 01		Tota 00	Total Killed 00		1		
.0B(	On Emergency	lit and Run	Lane Closu	ure	☐ Wo	rk Zone		Trailer or T	owed	Reporting Threshold		
6TL0B	Government Property	Active Sc	hool Zone	School B NO	lus Relate	ed	Tag	S				
	Crash Type			ANIMAL W/ NO INJURY				Amended		Secondary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
Ī	Location											
F	ON STH33 WB					Latitude Longitude						
	1110 FT W						43.503522535			-89.610266897		
	OF BREEZY HILL RD					X Coordin	ate		Y Coordinate			
	IN THE TOWN OF FAIRFIEL	.D				288983.0625				4820042.5		
	IN SAUK COUNTY					Structure						
_							UCTURE					
(	Crash Scene											
Ī	First Harmful Event	First Harm	nful Event L	ocation			_					
	NON DOMESTICATED ANII				ON ROADWAY							
ŀ	Manner of Collision				Light Condition							
	00 - NO COLLISION W/VEH	ICLE IN TRANSI	PORT			3						
	Road Surface Condition(s)					Roadway	Factor(s)					
	(-,					riodana) i dolor(o)						
	Environment Factor(s)											
	Weather Condition(s)											
-	Apimal Type					Deleties Te Teettiesses						
	Animal Type DEER					Relation To Trafficway TRAFFICWAY - ON ROAD						
	Crash Classification - Location					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION						
	PUBLIC PROPERTY									10 101		
	Tribal Land					Access Control Special Study						
Į.	Unit Summary											
					hicle Operating As Classification			Unit Type				
	IN TRANSIT D CLA				CLASS			TRUCK				
_	Vehicle Type							Operating	As Endorser	ments		
01	UTILITY TRUCK/PICKUP TRUCK											
	Total Occs Train/Bus # Recorded			al # Citation	ns Issued	Total Trail		illers Total Haz		Mat Types		
	1				0		0	0				
	Insurance?	urance? Direction Of Travel			ashTire	Speed Lim		mit Total Lane:		es		
<b>-</b>	YES WESTBOUND				ark							
LINO	Most Harmful Event: Collision With			Special Function			<u> </u>		Emergency Motor Vehicle Use		_	
<b>→</b>	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCT			TION		NOT APPLICABLE			
-	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing				
ŀ	Surface Type			Road Curvature			Road Grade				_	

This report does not include 1 of 3

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	-	ruck Bus or HazMat								
	Truc	K Bus or Hazmat								
	,	Vahiala								
		Vehicle       License Plate Number     Plate Type     St     Country of Issuance								
		FE2078		LTK - LIGHT TRUCK	WI	UNITED STATES				
		Vehicle Identification Number		Make	Year	Model				
01	2	1N6BA0EC2EN502573		NISSAN	2014	TITAN S/SV				
_		Color		Body Style	2017	Bus Use				
		BLK - BLACK		PK - PICKUP		Dus Ose				
	ш	Initial Contact Point		Vehicle Damage						
_		12 - FRONT		Volliolo Dalliago						
LINO	¥	Extent Of Damage		01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT  Vehicle Removed By						
)	VEHICL	DISABLING DAMAGE								
		Towed Due To Damage								
		TOWED DUE TO DISABLING DA		THROUGH INSURANCE COMPANY						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other								
		Driver Actions								
	Щ	NO CONTRIBUTING ACTION								
╘	VEHICLE									
UNIT	Ĭ									
_	Æ									
		Owner Name		Owner Address						
_	_									
01	6									
_		Policy Holder								
LNO		Insurance Company Individual								
<b> </b>		STATE-FARM-GENERAL-INS-CO	)	ANTHONY HESSLI	NG					
		Individual								
		Driver		Citations Issued		Sex				
		ANTHONY JOHN HESSLING		0		MALE				
	4	(608) 379-0465		Date of Birth		Race				
l <u>∟</u>	$\geq$			Date of Dirtin		WHITE				
E S	DIVIDUAL	Address		Driver License Number						
n	ቯ	173 CARRIAGE RD MONTELLO, WI 53949 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
	<b>Z</b>									
		On Duty Crash		Safety Equipment						
	Sa	fety Equipment								
		Row Seat Position		SHOULDER & LAP BELT						
		Helmet Use		Helmet Compliance						
		Eye Protection  Injury Severity		Tint Compliance						
01	001			Airbag						
0	ŏ	Injury NO APPAREN				T				
		Ejection Ejection	Path			Trapped/Extricated				
		Medical Transport		EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED								
		Hospital		Date of Death		Time of Death				
		1								

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		Distracted By	Distracted By Source	1					
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	UAL								
LIND	INDIVIDUAL								
	N D								
		Action Other						To/From School	
		Action Other						TO/FIGHT SCHOOL	
	ı	Drug & Alcohol	Suspected Alcohol U NO	se	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			
10	00	Drug Type							
		Individual Condition							
		APPEARED NORI	MAL						