

6TL0CVRP3C

20-04889

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override, Primary Crash Document #, Agency Crash Number 20-04889, Investigating Officer/Deputy SERGEANT S. SCHRAM, Crash Date 05/25/2020, Crash Time 08:52 PM, Date Arrived, Time Arrived, Date Notified 05/25/2020, Time Notified 08:52 PM, Total Units 01, Total Injured 00, Total Killed 00, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related NO, Tags, Reportable, Crash Type NON-DOMESTICATED 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.

Location

INTERSECTION ON USH12 EB AT STH33 EB IN THE TOWN OF BARABOO IN SAUK COUNTY, Latitude 43.509690587, Longitude -89.782441723, X Coordinate 275086.625, Y Coordinate 4821179, Structure Type

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE), First Harmful Event Location ON ROADWAY, Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT, Light Condition, Road Surface Condition(s), Roadway Factor(s), Environment Factor(s), Weather Condition(s), Animal Type DEER, Relation To Trafficway TRAFFICWAY - ON ROAD, Crash Classification - Location PUBLIC PROPERTY, Crash Classification - Jurisdiction NO SPECIAL JURISDICTION, Tribal Land, Access Control, Special Study

Unit Summary

Unit Status IN TRANSIT, Vehicle Operating As Classification D CLASS, Unit Type AUTOMOBILE, Vehicle Type (SPORT) UTILITY VEHICLE, Operating As Endorsements, Total Occs 03, Train/Bus # Recorded, Total # Citations Issued 0, Total Trailers 0, Total HazMat Types 0, Insurance? YES, Direction Of Travel SOUTHBOUND, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE), Special Function NO SPECIAL FUNCTION, Emergency Motor Vehicle Use NOT APPLICABLE, Traffic Way, Traffic Control, Traffic Control Inoperative/Missing, Surface Type, Road Curvature, Road Grade

NO

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		Truck Bus or HazMat	
01 UNIT VEHICLE	<b>Vehicle</b>		
	License Plate Number <b>656YPP</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>
	Country of Issuance <b>UNITED STATES</b>	Vehicle Identification Number <b>5XYKUDA79FG612085</b>	Make <b>KIA MOTORS CORPORA</b>
	Year <b>2015</b>	Model <b>SORENTO</b>	Bus Use
	Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	
	Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>	
	Extent Of Damage <b>DISABLING DAMAGE</b>		
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>CRAIGS TOWING</b>	
	What Driver Was Doing	Vehicle Factors	
	Driver Prior Action Other		
01 UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
	Owner Name	Owner Address	
01 UNIT INDIVIDUAL	<b>Policy Holder</b>		
	Insurance Company <b>PROGRESSIVE-CASUALTY-INS-CO</b>	Individual <b>KRISTY MICALE</b>	
	<b>Individual</b>		
01 UNIT INDIVIDUAL	Driver <b>KRISTY LEE MICALE (608) 219-4197</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>502 TOPP AVE VERONA, WI 53593 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
	Row	Seat Position	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag
	Ejected	Ejection Path	Trapped/Extricated
Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #	
Hospital	Date of Death	Time of Death	

# WISCONSIN MOTOR VEHICLE CRASH REPORT

<b>UNIT</b>	<b>Distracted By</b>		Distracted By Source		
	Distracted By Action				
	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
	Drug Type				
<b>01</b>	<b>001</b>	Individual Condition			
		<b>APPEARED NORMAL</b>			