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20-05456

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 20-05456	Investigating Officer/Deputy DEPUTY J. MACASKILL	
Crash Date 06/09/2020		Crash Time 01:10 AM	Date Arrived	Time Arrived	
Date Notified 06/09/2020		Time Notified 01:13 AM	Total Units 01	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

Location

ON CTHH WB 929 FT E OF D AND W RD IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.588799671	Longitude -89.951055293
	X Coordinate 261768.515625	Y Coordinate 4830435.5
	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 RACCOON(S)	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	01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
		Vehicle Type PASSENGER CAR			Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> 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	Vehicle		
	License Plate Number 603XZJ	Plate Type AUT - AUTOMOBILE	St WI
	Country of Issuance UNITED STATES	Vehicle Identification Number 1G4ZR5SZ6JU133793	Make BUICK
	Year 2018	Model LACROSSE	Color WHI - WHITE
	Body Style SD - SEDAN	Bus Use	
	Initial Contact Point 12 - FRONT	Vehicle Damage	
	Extent Of Damage MINOR DAMAGE	12 - FRONT	
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing	Vehicle Factors	
	Driver Prior Action Other		
01 UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name	Owner Address	
01 UNIT INDIVIDUAL	Policy Holder		
	Insurance Company AMERICAN-FAMILY-INS-CO	Individual CALEB OBRIEN	
	Individual		
01 UNIT INDIVIDUAL	Driver ASHLEY NICOLE HINZE (608) 495-2537	Citations Issued 0	Sex FEMALE
		Date of Birth	Race WHITE
	Address 123 KELLIE MARIE CT REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01 UNIT 001	Safety Equipment		On Duty Crash
	Safety Equipment		
	Row	Seat Position	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity NO APPARENT INJURY	Airbag
Ejected	Ejection Path	Trapped/Extricated	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	Distracted By		Distracted By Source		
	Distracted By Action				
	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	Drug & Alcohol		Suspected Alcohol Use 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	
	Drug Type				
01	001	Individual Condition			
		APPEARED NORMAL			