6TL0B7D6SR 20-05717

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 20-05717			Investigating Officer/Deputy DEPUTY A. SUKOWATEY			
SR	Crash Date 06/15/2020	Crash Time 04:58 AM			Date Arrived		Time	Time Arrived			
2D6	Date Notified 06/15/2020	Time Notified 04:58 AM			Total Units 01		Tota 00			Total Killed 00	
L0B7D6	On Emergency	it and Run	Lane Closu			rk Zone		Trailer or T	owed	Reporting Threshold	
6T 1	Government Property	hool Zone	School Bus Related NO			Tags	Tags				
	Reportable Crash Type NON-DOMESTICATED A			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										
·	ON CTHH EB					Latitude Longitude			le		
	1083 FT W					43.618823371 X Coordinate		-89.85 Y Coor		3275252	
	OF LYNDON RD										
	IN THE TOWN OF DELLONA	\				269777				4833494	
	IN SAUK COUNTY						Structure Type			1	
							RUCTURE				
- 1	Crash Scene										
,	First Harmful Event					I =:+ ! !	4.1 F 1				
					First Harmful Event Location ON ROADWAY						
-	NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision					Light Condition					
		00 - NO COLLISION W/VEHICLE IN TRANSPORT					Light Condition				
ŀ	Road Surface Condition(s)	OLL III TITAIIOI	O.K.I			Roadway	Factor(s)				
	(-)						(-)				
	Environment Factor(s)										
ŀ	Weather Condition(s)										
	vvediner condition(3)										
l	Animal Type DEER Crash Classification - Location PUBLIC PROPERTY Tribal Land			Relation To T			o Trafficwa	rafficway			
						TRAFFICWAY - ON ROAD					
						Crash Classification - Jurisdiction					
						NO SPECIAL JURIS		ISDICTION			
						Access Co	ess Control			Special Study	
[Init Cummons										
	Unit Summary		I V/ob	iolo Oporo	oting As C	laggification		Hait Tons			
					Vehicle Operating As Classification			Unit Type			
	IN TRANSIT D CLASS Vehicle Type					AUTOMOBILE Operating As Endorsements					
0	(SPORT) UTILITY VEHICLE							Operating /	45 LIIUUISEI	nents	
					otal # Citations Issued		Total Traile		Total Haz	Mat Types	
			0			0		0		mat Typoo	
ŀ	Insurance?	Direction Of Travel		Dro C	rachTira		Speed Lin	nit	Total Lane	es	
_	YES	EASTBOUND		Pre CrashT Mark		e Spoot					
LIND	Most Harmful Event: Collision With			Special Function			<u> </u>		Emergency Motor Vehicle Use		
-	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCT			TION		NOT APPLICABLE		
ŀ				fic Contro	I			Traffic Control Inoperative/Missing			
	-										
	Surface Type			Road Curvature				Road Grade			

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	Truc	ck Bus or HazMat								
	,	Vehicle								
10		icense Plate Number		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
	VEHICLE 01	Vehicle Identification Number 1GNDT13XX4K163490		nake CHEVROLET	Year 2004	Model BLAZER				
		Color TAN - TAN		Body Style JT - SPORT UTILITY VE	HICLE	Bus Use				
LINO		Initial Contact Point 12 - FRONT Extent Of Damage DISABLING DAMAGE		Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT						
		Towed Due To Damage TOWED DUE TO DISABLING DA		Vehicle Removed By						
		What Driver Was Doing	V	Vehicle Factors						
		Driver Prior Action Other								
LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
		Owner Name		Owner Address						
5	2									
⊨		Policy Holder								
LNO		Insurance Company STATE-FARM-GENERAL-INS-CO)	Individual WILLIAM BASS						
	- 1	Individual								
		Driver WILLIAM THOMAS BASS		Citations Issued 0		Sex MALE				
	INDIVIDUAL	(608) 415-2793		Date of Birth		Race				
LINO		Address E6274 BASS RD REEDSBURG, WI 53959 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sa	On Duty Crash fety Equipment		Safety Equipment						
			Position	SHOULDER & LAP BE	ELT					
		Helmet Use		Helmet Compliance						
10		Eye Protection		Tint Compliance						
	00	Injury Severity NO APPARENT INJURY		Airbag						
		Ejected Ejection				Trapped/Extricated				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #				
		Hospital		Date of Death		Time of Death				

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Distracted By Source									
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	¥								
╘	2								
UNIT	≥								
	INDIVIDUAL								
	=								
		Action Other						To/From School	
		Suspected Alcohol Use Suspected Drug Use						<u> </u>	
	L	Drug & Alcohol	NO		NO				
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN							
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
1	Ξ	Drug Type							
01	001								
		Individual Condition							
APPEARED NORMAL									