

6TL0B7D6SS

20-06392

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 20-06392, Investigating Officer/Deputy DEPUTY A. SUKOWATEY, Crash Date 07/01/2020, Crash Time 08:53 PM, Date Arrived, Time Arrived, Date Notified 07/01/2020, Time Notified 08:53 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

ON TERRYTOWN RD 0.83 MI E OF CORNFIELD RD IN THE TOWN OF BARABOO IN SAUK COUNTY, Latitude 43.490399584, Longitude -89.791893185, X Coordinate 274250.6875, Y Coordinate 4819062, 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 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, 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 516WBD | Plate Type AUT - AUTOMOBILE | St WI | |
| | Country of Issuance UNITED STATES | Vehicle Identification Number 1G4PP5SK9C4220896 | Make BUICK | |
| | Year 2012 | Model VERANO | Color GRY - GRAY | |
| | Body Style SD - SEDAN | Bus Use | | |
| | Initial Contact Point | | Vehicle Damage | |
| | Extent Of Damage FUNCTIONAL DAMAGE | | 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 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 POLICY HOLDER | Policy Holder | | | |
| | Insurance Company STATE-FARM-GENERAL-INS-CO | | Individual ROBYN BLANKENSHIP | |
| | Individual | | | |
| 01 UNIT INDIVIDUAL | Driver ROBYN LOUISE BLANKENSHIP (608) 577-3304 | | Citations Issued 0 | |
| | | | Sex FEMALE | |
| | | | Date of Birth | |
| | | | Race WHITE | |
| Address 522 CAMP ST BARABOO, WI 53913 , US | | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| 01 UNIT SAFETY EQUIPMENT | On Duty Crash | | Safety Equipment | |
| | Row | Seat Position | SHOULDER & LAP BELT | |
| | Helmet Use | | Helmet Compliance | |
| | Eye Protection | | Tint Compliance | |
| | Injury | | Airbag | |
| | NO APPARENT INJURY | | | |
| 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

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|------|---|------------------------|------------------------------------|---------------------------------|----------------------|
| 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 | | | |