6TL0C9H5K0 20-12890

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/06/2020

Crash Time 08:39 PM

	Document Number Override	Primary Crash E	Primary Crash Document#		Agency Crash Number 20-12890			Investigating Officer/Deputy DEPUTY M. TATE			
5	Crash Date 11/06/2020	Crash Time 08:39 PM			Date Arrived		Time	Time Arrived			
0C9H5K0	Date Notified 11/06/2020	Time Notified 08:40 PM			Total Units 01		Total		Total Killed 00		
.0C	On Emergency	lit and Run	Lane Clos			/ork Zone		Trailer or Towed		Reporting Threshold	
eTL	Government Active School Zone			School Bus Related NO			Tags	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 STH23 EB					Latitude			Longitud	e	
	1085 FT W				43.5330732		3277			-89.939557828	
	OF LAKE VIRGINIA RD					X Coordinate		V Coore			
	IN THE TOWN OF EXCELSIOR IN SAUK COUNTY				262477.6875 4824213						
						Structure Type NO STRUCTURE					
(Crash Scene										
1	First Harmful Event					Eiret Harm	ful Eventi	ncation			
		#AL (ALIVE)				First Harmful Event Location					
	NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision					ON ROADWAY					
						Light Condition					
	00 - NO COLLISION W/VEH	ICLE IN TRANSF	ORI								
	Road Surface Condition(s)					Roadway Factor(s)					
	Environment Factor(s)										
	Y .										
	Weather Condition(s)										
-	AnimalType					Dalatin Ta Tartform					
	Animal Type DEER				Relation To Trafficway TRAFFICWAY - ON ROAD						
	Crash Classification - Location PUBLIC PROPERTY				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION						
•	TribalLand				Access Control Special Study						
I	Unit Summary ===										
	Unit Status		LVok	nicle Opera	ting As C	laccification		I I mit Turns			
				/ehicle Operating As Classification			Unit Type				
	IN TRANSIT D CLASS							AUTOMOBILE			
9	Vehicle Type PASSENGER CAR							Operating A	s Endorser	ments	
ŀ	Total Occs Train/Bus#Recorded			Total#Citations Issued		TotalT		Trailers Tota		Vat Types	
	3	D: # 017	0	0		0		0			
	Insurance? YES	Direction Of Trave EASTBOUND		Pre CrashTire Mark		SpeedLi					
UNIT	MostHarmful 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			

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	Truc	ck Bus or HazMat								
	33300	Vehicle								
UNIT 01		License Plate Number 727TKD		Plate Type St		Country of Issuance				
		Vehicle Identification Number	r	Make AUTOMOBILE	Wi Year	UNITED STATES Model				
	5 H	1VWBH7A34DC129928		VOLKSWAGEN	2013	PASSAT				
		Color SIL - SILVER (ALUMINUM)		Body Style SD - SEDAN		Bus Use				
		Initial Contact Point		Vehicle Damage						
	VEHICLE	10 - LEFT SIDE FRONT Extent Of Damage		01 - RIGHT FRONT COR	01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT					
	3	DISABLING DAMAGE		We kinds Description						
		Towed Due To Damage TOWED DUE TO DISABI	LING DAMAGE	Vehicle Removed By BłLLS TOWING						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other								
		Driver Actions								
	щ	NO CONTRIBUTING ACTION								
NS.	VEHICLE									
	Ų									
		Owner Name Owner Address								
2	5									
		Policy Holder								
IN N		Insurance Company ERIE-INS-CO		Individual	Individual CAITLYN ROSENBAUM					
		Driver CAITLYN RAECHEL ROSENBAUM		Citations ssued	Sex					
	쿸	(608) 477-9779	DENBAUM	0 Date of Birth		FEMALE Race				
5	DIVIDUA					WHITE				
Ş		Address E10340 N REEDSBURG RD BARABOO, Wt 53913 , US On Duty Crash		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES Safety Equipment						
	Z									
	Sal	fety Equipment		SHOULDER & LAP BE	CHOSS DED S LAB DEST					
		Row	SeatPosition	Shoulder a LAP BE						
		Helmet Use		Helmet Compliance						
		Eye Protection		TintCompliance						
_	_	injury Severity		Airbag						
2	00	Injury _{NO A}	PPARENT INJURY							
		Ejection Path				Trapped/Extricated				
		Medical Transport		EMS Agency Identifier		EMS Run#				
		NOT TRANSPORTED Hospital		Date of Death		Time of Death				
		· -								

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						, ,
	Distracted By	d By Source				
	Distracted By Action					
	Non Motorist Striking U	nit# Location				
	Prior Action					
	Action					
_ 5						
UNIT						
2						
						T
	Action Other					To/From School
	Drug & Alcohol NO	Suspected Drug Use NO				
	AlcoholTestGiven TEST NOT GIVEN	Alcohol Test Type	•		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results		\$	
و ق	Drug Type					
	Individual Condition					
	APPEARED NORMAL					