

6TL0CBQ6NH
20-13021

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 20-13021	Investigating Officer/Deputy DEPUTY B. ZIBELL	
Crash Date 11/11/2020		Crash Time 05:46 AM	Date Arrived 11/11/2020	Time Arrived 06:19 AM	
Date Notified 11/11/2020		Time Notified 05:47 AM	Total Units 02	Total Injured 01	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 DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram <p style="text-align: center;">Highway 33</p> <p style="text-align: center;">UNIT 2</p> <p style="text-align: center;">UNIT 1</p> <p style="text-align: center;">Not to scale</p>	Reconstruction By
	Photos By
	Additional Information NONE

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

ON 11/11/2020 UNIT 1 WAS TRAVELING EASTBOUND ON HY 33 AND UNIT 2 WAS TRAVELING WESTBOUND. UNIT 1 HIT A DEER AND AFTER THE COLLISION, THE DEER HIT UNIT 2. BOTH VEHICLES CAME TO A REST ON THE SHOULDER.

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Location

ON STH33 WB 960 FT E OF EMERALD DR IN THE TOWN OF LA VALLE IN SAUK COUNTY	Latitude 43.562457853	Longitude -90.07696804
	X Coordinate 251494.984375	Y Coordinate 4827878.5
	Structure Type NO STRUCTURE	

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 DAWN	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type DEER	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT	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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	License Plate Number JUH834	Plate Type AUT - AUTOMOBILE	St IA	Country of Issuance UNITED STATES	
		Vehicle Identification Number 4S3BNAF62J3029110	Make SUBARU	Year 2018	Model LEG	
		Color RED - RED	Body Style 4D - 4DR		Bus Use	
		Initial Contact Point 12 - FRONT	Vehicle Damage			
		Extent Of Damage FUNCTIONAL DAMAGE	08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 12 - FRONT			

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By STEVES AUTO SERVICE	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	Owner Name PATIENCE MICHELLE SMITH (256) 244-3984		Owner Address 1820 HUNTINGTON PARK DR PO BOX 1214 REEDSBURG, WI 53959 , US	
	Sequence Of Events			
01	01	Event DOMESTICATED ANIMAL - ALIVE		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO		Individual PATIENCE SMITH	
UNIT INDIVIDUAL	Individual			
	Driver PATIENCE MICHELLE SMITH (256) 244-3984		Citations Issued 0	Sex FEMALE
	Address 1820 HUNTINGTON PARK DR PO BOX 1214 REEDSBURG, WI 53959 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED]	STATE: IOWA COUNTRY: UNITED STATES
01	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
			Tint Compliance	
	Injury		Injury Severity POSSIBLE INJURY	
Ejected NOT EJECTED		Airbag DEPLOYED-COMBINATION		
Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		
Hospital		EMS Run #		
Date of Death		Time of Death		
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT INDIVIDUAL 01 001	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				
	Individual Condition APPEARED NORMAL				

Unit Summary

UNIT 02	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 55	Total Lanes 2	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number AGY3678		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GYFK66837R340215		Make CADILLAC	Year 2007	Model ESCALADE
	Color WHI - WHITE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 12 - FRONT		Vehicle Damage		
	Extent Of Damage MINOR DAMAGE		01 - RIGHT FRONT CORNER, 12 - FRONT		
	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		

WISCONSIN MOTOR VEHICLE
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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		TIRES	
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name GARY P DANIELS (608) 415-9881		Owner Address 145 S DEWEY AVE REEDSBURG, WI 53959 , US	
UNIT VEHICLE	Sequence Of Events			
	01	Event NON DOMESTICATED ANIMAL (ALIVE)		
	02	Event		
	03	Event		
UNIT VEHICLE	04	Event		
	Policy Holder			
	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO		Individual GARY DANIELS	
	Individual			
UNIT INDIVIDUAL	Driver GARY P DANIELS (608) 415-9881		Citations Issued 0	Sex MALE
	Address 145 S DEWEY AVE REEDSBURG, WI 53959 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment			
UNIT INDIVIDUAL	On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
UNIT INDIVIDUAL	Injury		Airbag	
	Injury Severity NO APPARENT INJURY		NON DEPLOYED	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death	
UNIT INDIVIDUAL	Distracted By			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED			
	Non Motorist			
Striking Unit #		Location		

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UNIT	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol		
	Suspected Alcohol Use	Suspected Drug Use	
	NO	NO	
	Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
	TEST NOT GIVEN		
	Drug Test Given	Drug Test Type	Drug Test Results
	TEST NOT GIVEN		
02	Drug Type		
	Individual Condition		
	APPEARED NORMAL		