6TL092T5Q6 20-14185

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 12/19/2020

Crash Time 07:57 PM

	Document Number Override	1 -	Agency Crash Number 20-14185			Investigating Officer/Deputy DEPUTY J. KIRKENG				
506	Crash Date Crash Time 12/19/2020 07:57 PM		Date A	Date Arrived		Time	Time Arrived			
Ñ	Date Notified	Time Notified	TotalU	Inits		Total	Injured	Total Killed	l	
7	12/19/2020	07:57 PM	01			00		00		
60-	On Emergency Hit and Run Lane		Closure	Hosure Work 2			☐ Trailer or To		Reporting Threshold	
6TL	Government Property	School NO	School Bus Related NO		Tags	Гags				
	Reportable	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.									
	_ocation									
Ī	ON CTHPF WB				Latitude Longitude					
	0.43 MI E				43.30737	76574	-			
	OF CTHE EB						-89.879045087			
	IN THE TOWN OF HONEY CREEK IN SAUK COUNTY							1	Y Coordinate 4798975	
	IN SAUR COUNTY				Structure Type NO STRUCTURE					
L										
- (Crash Scene									
1	FirstHarmfulEvent					ful Event Lo	cation			
	NON DOMESTICATED ANIM	IAI (ALIVE)			ON ROA					
		AL (ALIVE)								
	Manner of Collision				Light Condition					
	00 - NO COLLISION W/VEHIO	CLE IN TRANSPORT								
	Road Surface Condition(s)				Roadway	Factor(s)				
ľ	Environment Factor(s)									
	, ,									
ľ	Weather Condition(s)				1					
	• •									
ŀ	Animal Type DEER					Relation To Trafficway TRAFFICWAY - ON ROAD				
					Crash Classification - Jurisdiction					
	Crash Classification - Location									
	PUBLIC PROPERTY				NO SPECIAL JURIS		ISDICTION			
	Tribal Land			Access Control				Special Study		
Ī	Jnit Summary									
ì	Unit Status		I Vahiela Ona	rating Ac C	laccification		UnitType			
				ehicle Operating As Classification			AUTOMOBILE			
	IN TRANSIT D CLASS									
01	Vehicle Type					Operating As Endorsements				
0	(SPORT) UTILITY VEHICLE Total Occs Train/Bus#Recorded Total#Citations issued									
	Total Occs	Total#Citations Issued		† TotalTra		illers Total Haz		Mat Types		
	1		0			0		0		
	nsurance? Direction Of Travel Pre Cr		e CrashTire Speed		Speed Lim	d Limit Total Lan		es		
⊢	YES	WESTBOUND								
LIND	Most Harmful Event: Collision With Special Function				I		Emergency Motor Vehicle Use			
-	NON DOMESTICATED ANIM	NO SPECIAL FUNCTION								
	Traffic Way	Traffic Contri	Traffic Control				Traffic Control Inoperative/Missing			
	•		Frame Condu				The Constitution of the Co			
}	Surface Type	Road Curvat	Road Curvature				Road Grade			

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	Truc	uck Bus or HazMat									
		Vehicle									
		License Plate Number 240WTC		Plate Type AUT - AUTOMOBILE	St WI	Country of issuance UNITED STATES					
10	5	Vehicle Identification Numbe MAJ6S3FL5LC313402	r	Make FORD	Year 2020	Model ECOSPORT					
	VEHICLE	Color GRY - GRAY		Body Style UT - SPORT UTILITY VE	HICLE	Bus Use					
UNIT		Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage FUNCTIONAL DAMAGE		Vehicle Damage 10 - LEFT SIDE FRONT, 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		-							
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION									
٦	7 18	Owner Name		Owner Address							
INI		Policy Holder Insurance Company		In dividual							
Ś		PROGRESSIVE-ADVANC		Individual TAYLOR COOK							
		Individual Driver TAYLOR JEAN COOK (608) 377-3969		Citations Issued		Sex					
	_			0		FEMALE					
5	INDIVIDUA			Date of Birth	WHITE						
TNU		Address S9913 COUNTY ROAD E SAUK CITY, WI 53583 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sa	On Duty Crash Safety Equipment		Safety Equipment							
		Row	Seat Position	SHOULDER & LAP BELT							
		Helmet Use		Heimet Compliance							
		Eye Protection		Tint Compliance							
10	S	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					

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		Distracted By Source							
		Distracted By Action							
		Non Motorist Striking	g Unit#	Location					
		Prior Action							
LIND	INDIVIDUAL	Action Action Other						To/From School	
	<u> </u>	Drug & Alcohol NO			Suspected Drug Use				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN Drug Test Type		Drug Test Type		Drug Test Results			
2	001	Drug Type	•						
		Individual Condition APPEARED NORMAL							
0									