6TL0CL4FB1 21-05124

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/08/2021

Crash Time 10:33 PM

	Document Number Override Primary Crash I		Agency Crash Nu 21-05124				stigating Officer/Deputy GEANT S. SCHRAM				
B 1	Crash Date Crash Time 06/08/2021 10:33 PM			Date Arrived		Time	Time Arrived				
6TL0CL4F	Date Notified 06/08/2021	Time Notified 10:33 PM			Total Units 01		Total	1 1		Total Killed 00	
၁၀	On Emergency Hit and Run Lane		Lane Clos	osure Work Zor				Trailer or To		Reporting Threshold	
6TI	Government Property	Active School	Zone	School NO	Bus Relat	ed	Tags				
	∨ Reportable	Crash Type NON-DOMESTICA	TED ANIM	IAL W/ N	O INJUR	Υ		∖mended		Secondary Crash	
	i, a sworn law enforcement	at I have n	ve not added any CJIS data in this report.								
i	ocation ————————————————————————————————————										
i									T. 5. 5		
1	ON SHADY LANE RD				Latitude		Longitu				
	525 FT N					43.547032017 X Coordinate				788659107 ordinate	
	OF USH53 SB										
	IN THE TOWN OF DELTON					274723.1		4825			
	IN SAUK COUNTY					214123.1	3023	46233		.5	
						Structure Type					
l											
•	Crash Scene										
1	First Harmful Event					FirstHarm	fulEventLo	cation			
	NON DOMESTICATED ANIM	AL (ALIVE)				l					
		AL (ALIVE)				ON ROADWAY Light Condition					
	Manner of Collision		_								
	00 - NO COLLISION W/VEHIO	CLE IN TRANSPORT									
	Road Surface Condition(s)					Roadway	Factor(s)				
	Environment Factor(s)					1					
	Weather Condition(s)				1						
	AnimalType										
						Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD						
İ	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPEC	CIAL JURI	SDICTION				
	Tribal Land					Access Control				Special Study	
l I	In it Common and					l					
	Unit Summary										
	Unit Status		Vel	hicle Opera	Operating As Classification			UnitType			
	ON EMERGENCY			D CLASS				AUTOMOBILE			
-	Vehicle Type							Operating As Endorsements			
5	POLICE EMERGENCY				operating to Endorsonions			lielite			
_						1 - 1 - 1 - 1		I Total HazMot Tunco			
	Total Occs	Train/Bus#Recorded	- 1	Total # Citations Issued 0 Pre CrashTire			lotal Iraile 0			Total HazMat Types 0	
		Direction Of Travel	- •			- - , , ,				es	
ь		EASTBOUND		Pre Crash i Ire		'					
LIND	Most Harmful Event: Collision With			Special Function		•		Emergency Motor Vehicle Use			
ر	NON DOMESTICATED ANIMAL (ALIVE)			LICE				EMERGENCY OPERATION, EMERGEN			
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			
	Синцов Туре			Road Curvature				stoad Glade			

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	Truc	Truck Bus or HazMat							
		License Plate Number	Plate Type	St	Country of Issuance				
2	VEHICLE 01	Vehicle Identification Number	GOV - U S GOVERNMENT Make	Year 2040	UNITED STATES Model				
		1M5K8AR3KGB23437 Color BLK - BLACK	FORD 2019 Body Style UT - SPORT UTILITY VEHICLE		EXPLORER Bus Use				
UNIT		Initial Contact Point 01 - RIGHT FRONT CORNER Extent Of Damage	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 12 - FRONT						
_		FUNCTIONAL DAMAGE Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION							
٦	5	Owner Name	Owner Address						
TINO		Policy Holder Insurance Company	Government						
		WISCONSIN-COUNTY-MUTUAL-INS-CORP SAUK COUNTY SHERIFF ndividual							
	IDUAL	Driver JONATHON MACASKILL	Citations issued 0		Sex MALE				
5			Date of Birth	Race WHITE					
TNO	2	Address 1300 LANGE COURT BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash Tety Equipment POLICE	Safety Equipment						
		Row Seat Position	SHOULDER & LAP BELT						
		Heimet Use	Helmet Compliance						
		Eye Protection	Tint Compliance						
2	100	Injury No APPARENT INJURY	Airbag						
		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 Distracted	By Source				
	Distracted By Action					
	Non Motorist Striking Un	it# Location				
	Prior Action	•				
_	Action					
UNIT						
	Action Other					To/From School
	Drug & Alcohol 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 Resu			
<u>ه</u>	Drug Type			•		
	Individual Condition					
	APPEARED NORMAL					