

6TL0CCZ7SQ
21-06670

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 21-06670		Investigating Officer/Deputy DEPUTY A. KING	
Crash Date 07/18/2021		Crash Time 01:44 AM		Date Arrived		Time Arrived	
Date Notified 07/18/2021		Time Notified 01:45 AM		Total Units 01		Total Injured 00	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 NON-DOMESTICATED ANIMAL W/ NO INJURY		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

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

Location

ON SUNRISE RD 0.35 MI E OF EAST ST IN THE TOWN OF WESTFIELD IN SAUK COUNTY	Latitude 43.442590375	Longitude -90.028777235
	X Coordinate 254902.296875	Y Coordinate 4814422.5
	Structure Type	

Crash Scene

First Harmful Event OTHER NON-COLLISION	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

01 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 NORTHBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	Most Harmful Event: Collision With OTHER NON-COLLISION		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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Truck Bus or HazMat					
Vehicle					
01 UNIT VEHICLE	License Plate Number 930ZVV		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1G1PC5SB0F7136378		Make CHEVROLET	Year 2015	Model CRUZE
	Color WHI - WHITE		Body Style 4D - 4DR		Bus Use
	Initial Contact Point 01 - RIGHT FRONT CORNER		Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE		01 - RIGHT FRONT CORNER		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By GEORGES AUTO BODY		
	What Driver Was Doing		Vehicle Factors		
	Driver Prior Action Other				
	Driver Actions NO CONTRIBUTING ACTION				
	Owner Name		Owner Address		
Policy Holder					
01 UNIT	Insurance Company AMERICAN-FAMILY-INS-CO		Individual DANIEL KAST		
	Individual				
01 UNIT INDIVIDUAL	Driver DANIEL JACOB DALE KAST (608) 986-3204		Citations Issued 0	Sex MALE	
	Address S7325 STATE ROAD 130 HILLPOINT, WI 53937 , US		Date of Birth [REDACTED]	Race WHITE	
			Driver License Number [REDACTED] 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		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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UNIT INDIVIDUAL 01 001	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		
	Individual Condition APPEARED NORMAL		