## 6TL0D2XVS2

24-05487

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Crash Document #			Agency Crash Number 24-05487			Investigating Officer/Deputy DEPUTY B. GOODREAU				
2	Crash Date Crash Time			Date Arrived			Time	Time Arrived			
/S	05/29/2024	01:27 AM							-		
6TL0D2XVS	Date Notified 05/29/2024	Time Notified 01:30 AM		Total Units <b>01</b>		Tot: <b>00</b>		l Injured	Total Killed <b>00</b>		
	On Emergency	n Emergency Hit and Run Lane C		sure Work Zone			Trailer or Towed		Reporting Threshold		
6TL	Government Property	Active Sc	hool Zone	School Bus Related <b>NO</b>		ed	Tags	Tags			
	Reportable		ANIMAL W/ NO INJURY					Secondary Crash			
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
	Location										
	ON CTHPF NB 157 FT W					Latitude Longitude					
	OF HEMLOCK RD				43.353156964 X Coordinate					-89.971012665 Y Coordinate	
	IN THE TOWN OF HONEY CREEK IN SAUK COUNTY				259222.8125			4804321			
			Structure Type NO STRUCTURE				E				
	Crash Scene										
	First Harmful Event					First Harm	iful Event Lo	ocation			
	NON DOMESTICATED ANIMAL (ALIVE)					ON ROADWAY					
	Manner of Collision 00 - NO COLLISION W/VEHI0				Light Condition						
	Road Surface Condition(s)	SLE IN TRANS	PORT			Roadway Factor(s)					
	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	PUBLIC PROPERTY Tribal Land						ccess Control			Special Study	
	Unit Summary										
	Unit Status Vehicle Operating As C					- 51					
	IN TRANSIT D CLASS					AUTOMOBILE Operating As Endorsements					
01	Vehicle Type PASSENGER CAR							Operating A	As Endorser	nents	
				otal # Citations Issued		Total Trail	tal Trailers		Total HazMat Types		
	1		0				0	0			
		Direction Of Trave		Pre CrashTire Spe		Speed Lin	ed Limit Total Lanes		es		
UNIT	Most Harmful Event: Collision With			Special Function		I		Emergency Motor Vehicle Use			
בן	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION		TION	NOT APPLICABLE				
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			

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	Truc	Truck Bus or HazMat									
		Vehicle									
		License Plate Number AEZ8693		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance					
6	VEHICLE 01	Vehicle Identification Number		Make	Year	Model					
0		5NPET46C38H379676		HYUNDAI	2008	SONATA					
		Color WHI - WHITE		Body Style SD - SEDAN		Bus Use					
		Initial Contact Point		Vehicle Damage							
E		01 - RIGHT FRONT CORNER		7 8 9 10 11							
UNIT		Extent Of Damage		01 - RIGHT FRONT CORNER, 12 - FRONT							
	ž	FUNCTIONAL DAMAGE									
		Towed Due To Damage NOT TOWED									
		What Driver Was Doing		OPERATOR Vehicle Factors							
		· · · · · · · · · · · · · · · · · · ·									
		Driver Prior Action Other									
		Driver Actions NO CONTRIBUTING ACTION									
⊢	VEHICLE										
UNIT	₽										
	é										
	_										
		Owner Name	Owner Address	Owner Address							
5	0										
	U										
		Policy Holdor									
UNIT		Policy Holder Insurance Company Individual									
5		GEICO-GENERAL-INS-CO		DAVID EKDAHL							
		Individual									
	۹L		Citations Issued	Sex							
		DAVID EKDAHL	<b>0</b> Date of Birth	MALE Race							
	NDIVIDUAL			Date of Birth	TACE						
UNIT	Σ	Address	Driver License Number								
	2 Z	209 S PRESTON AVE # 4 REEDSBURG, WI 53959, US			STATE: WISCONSIN COUNTRY: UNITED STATES						
	=			STALE. WISCONSIN COUNTRY, UNITED STALES							
				Safety Equipment							
	Sa	fety Equipment									
		Row	Seat Position	SHOULDER & LAP	BELT						
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
		,									
6	001	Injury Severity NO APPARENT INJURY		Airbag							
-		Ejected Ejection Path				Trapped/Extricated	Trapped/Extricated				
						EMO Dum #					
		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 Unit #	Location						
		Prior Action								
		Action								
	AL									
	INDIVIDUAL									
5	N									
	Z									
		Action Other						To/From School		
	L	Suspected Alcohol Use Drug & Alcohol NO			Suspected Drug Use					
		Alcohol Test Given Alcohol Test Type TEST NOT GIVEN		I		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
5	001	Drug Type								
		Individual Condition								
		APPEARED NORMAL								