

6TL0F8QXX4

24-08061

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 24-08061	Investigating Officer/Deputy DEPUTY J. GREENWOOD	
Crash Date 07/23/2024		Crash Time 06:56 AM	Date Arrived	Time Arrived	
Date Notified 07/23/2024		Time Notified 06:56 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 CTHG SB 0.67 MI S OF CUMMINGS RD IN THE TOWN OF BEAR CREEK IN SAUK COUNTY	Latitude 43.278719255	Longitude -90.101258723
	X Coordinate 248359.515625	Y Coordinate 4796438
	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	
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

UNIT 01	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 SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		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				
01	UNIT	VEHICLE	Vehicle			
			License Plate Number 750YFN	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
			Vehicle Identification Number 3C4FY58B85T558159	Make CHRYSLER	Year 2005	Model PT CRUISER
			Color WHI - WHITE	Body Style VN - VAN	Bus Use	
			Initial Contact Point 13 - TOP	Vehicle Damage 13 - TOP		
			Extent Of Damage DISABLING DAMAGE			
			Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By		
			What Driver Was Doing	Vehicle Factors		
			Driver Prior Action Other			
			01	UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION
Owner Name	Owner Address					
Policy Holder						
01	UNIT	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual DOUGLAS JESSE			
		Individual				
01	UNIT	INDIVIDUAL	Driver DOUGLAS JESSE (608) 434-3808	Citations Issued 0	Sex MALE	
				Date of Birth	Race WHITE	
			Address 302 OAK ST ROCK SPRINGS, WI 53961 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	UNIT	001	Safety Equipment		On Duty Crash	
					Safety Equipment SHOULDER & LAP BELT	
			Row	Seat Position		
			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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CRASH REPORT

UNIT	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				
01	001	Individual Condition			
		APPEARED NORMAL			