

6TL0DQPGGC
SC24-11294

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0DQPGGC

| | | | | | | | |
|---|--------------------------------------|---|------------------------------------|---|--|---|---------------------------|
| Document Number Override | | Primary Crash Document # | | Agency Crash Number | | Investigating Officer/Deputy DEPUTY B. SONN | |
| Crash Date 10/09/2024 | | Crash Time 10:37 PM | | Date Arrived | | Time Arrived | |
| Date Notified 10/09/2024 | | Time Notified 10:37 PM | | 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 | |
| <input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. | | | | | | | |

Location

| | | | | | | | |
|--|--|--|-------------------------------------|--|-----------------------------------|--|--|
| ON SHADY LANE RD 1256 FT W OF WHITE EAGLE RD IN THE TOWN OF DELTON IN SAUK COUNTY | | | Latitude 43.546883493 | | Longitude -89.766556997 | | |
| | | | X Coordinate 276508.15625 | | Y Coordinate 4825267 | | |
| | | | Structure Type | | | | |

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 EASTBOUND | <input type="checkbox"/> Pre CrashTire 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 GAT00 | Plate Type AUT - AUTOMOBILE | St WI | |
| | Country of Issuance UNITED STATES | Vehicle Identification Number 2C3CDZC98GH314554 | Make DODGE | |
| | Year 2016 | Model CHALLENGER | Color BLK - BLACK | |
| | Body Style CP - COUPE | Bus Use | Initial Contact Point 01 - RIGHT FRONT CORNER | |
| | Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 12 - FRONT | |  | |
| | Extent Of Damage DISABLING DAMAGE | | | |
| | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | | Vehicle Removed By CRAIGS TOWING | |
| | What Driver Was Doing | | Vehicle Factors | |
| | Driver Prior Action Other | | | |
| Driver Actions NO CONTRIBUTING ACTION | | | | |
| Owner Name | | Owner Address | | |
| 01 UNIT INDIVIDUAL | Policy Holder | | | |
| | Insurance Company PROGRESSIVE-UNIVERSAL-INSURANCE-COMP | | Individual CLAUDIA MEDRANO | |
| | Individual | | | |
| Driver ALEXANDER ROJAS (608) 450-1390 | | Citations Issued 0 | Sex MALE | |
| Address S2715 COUNTY ROAD A BARABOO, WI 53913 , US | | Date of Birth | Race HISPANIC | |
| On Duty Crash | | Safety Equipment SHOULDER & LAP BELT | | |
| Row | | Seat Position | | |
| Helmet Use | | Helmet Compliance | | |
| Eye Protection | | Tint Compliance | | |
| Injury Severity Injury 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 | 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 | | Suspected Drug Use | | |
| | | | NO | | NO | | |
| | | | Alcohol Test Given | Alcohol Test Type | | Alcohol Test Results | |
| | | | TEST NOT GIVEN | | | | |
| Drug Test Given | Drug Test Type | | Drug Test Results | | | | |
| TEST NOT GIVEN | | | | | | | |
| Drug Type | | | | | | | |
| Individual Condition | APPEARED NORMAL | | | | | | |