6TL0D942BZ

SC24-11323

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	Primary Crash Document #		Agency Crash Number SC24-11323			Investigating Officer/Deputy DEPUTY M. PETERSON				
BZ	Crash Date 10/10/2024	Crash Time 06:40 PM			Date Arrived		Tir	Time Arrived				
9421	Date Notified 10/10/2024	Time Notified 06:45 PM			Total Units 01		To 00	tal Injured	Total Killed 00			
6TL0D942B	On Emergency	Hit and Run	Lane Closu			rk Zone		Trailer or	Towed		Reporting Threshold	
eTI	Government Property	Crash Type	nool Zone	NO School	Bus Relate	ed	Та	gs				
	✓ Reportable	TICATED ANIM	ANIMAL W/ NO INJURY				Amended			Secondary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
	Location											
	ON STH154 EB					Latitude Longitude						
	0.31 MI W				43.416957531					119540138		
	OF HILLPOINT RD											_
	IN THE TOWN OF WASHIN	IGTON				X Coordin			Y Coordinate			
	IN SAUK COUNTY					247450.4	121875		481184	4811846.5		
	IN OACK COCKIT					Structure	Type		I			_
						NO STR		:				
(Crash Scene											
1	First Harmful Event					First Harm	nful Event	Location				_
	NON DOMESTICATED AN	IMAL (DEAD)				ON ROADWAY						
	Manner of Collision	(2 = 1 12)				Light Condition						
	00 - NO COLLISION W/VEI	HICLE IN TRANSP	ORT			Eight Condition						
	Road Surface Condition(s)					Roadway Factor(s)						
	Environment Factor(s)											
	Weather Condition(s)											
	Animal Type					Relation To Trafficway						
	DEER					TRAFFICWAY - ON ROAD						
	Crash Classification - Location PUBLIC PROPERTY					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION						
	Tribal Land					Access Control Special Study				al Study	_	
1	Unit Summary											
	Unit Status Vehicle Operating As C						Classification Unit Type					_
						ļ		AUTOM	AUTOMOBILE			
	IN TRANSIT D CLASS Vehicle Type							Operating	As Endorse	ments		_
01	PASSENGER CAR											
	Train/Bus # Recorded			Total # Citations Issued			Total Traile		Total HazMat Types		oes	_
	1		0				0		0			
	Insurance?	Direction Of Travel		Pre CrashTire		Speed Limit		Total Lan	Total Lanes		_	
⊢	YES EASTBOUND				/lark							
UNIT	Most Harmful Event: Collision With			Special Function			<u> </u>		Emergency Motor Vehicle Use)	_
\neg	NON DOMESTICATED ANIMAL (DEAD)			NO SPECIAL FUNCTIO			TION		NOT APPLICABLE			
٠	Traffic Way			Traffic Control			Traffic Control Inoperative/Missing			sing	_	
	Surface Type			David Compating				Pood Crado				
	Surface Type			Road Curvature				Road Grade				
		l l									_	

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date 10/10/2024
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	Truc	k Bus or HazMat								
	Vehicle									
10	2	License Plate Number AVL4173		Plate Type AUT - AUTOMOBILE Make						
		Vehicle Identification Number 1FAHP3K29CL461480		FORD	Year 2012	Model FOCUS				
		Color RED - RED		Body Style HB - HATCHBACK Bus Use						
TINO	VEHICLE	Initial Contact Point 14 - UNDERCARRIAGE Extent Of Damage DISABLING DAMAGE		Vehicle Damage 7 8 9 10 11 6 5 4 3 2 1						
		Towed Due To Damage TOWED DUE TO DISABLING DAI What Driver Was Doing	MAGE	Vehicle Removed By SHIELDS TOWING Vehicle Factors						
		Driver Prior Action Other								
TIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
10	5	Owner Name		Owner Address						
Ŀ	Policy Holder									
FNS	Insurance Company STATE-FARM-GENERAL-INS-CO			Individual TIANNA PIWONSKI						
		Individual								
	INDIVIDUAL	Driver TIANNA PIWONSKI (608) 963-2551		Citations Issued O Date of Birth	FEMALE Race	!				
FNO		Address			WHITE Driver License Number					
5		555 REED ST REEDSBURG, WI 53959 , US								
	Sa	fety Equipment		Safety Equipment						
		Row Seat	t Position	SHOULDER & LAP BELT						
	001	Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
2		Injury Seventy 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	ime of Death			

Wisconsin Motor Vehicle Crash Form DT4000

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Distracted By Source								
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
		Action						
	7							
_	Ž							
LIND	=							
_ر	INDIVIDUAL							
	Z							
		Action Other						To/From School
		Suspected Alcohol Use Drug & Alcohol NO			Suspected Drug Use NO		•	
		_	NO					
		Alcohol Test Given Alcohol Tes					Alcohol Test Results	
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
2	00	Drug Type		I.				
	5							
		Individual Condition						
		APPEARED NORI	маг					
		AFFLAKED NOKI	VIAL					
		·						