## 6TL0CBQ6T7 24-11497

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Docume		Agency Crash Nui 24-11497				stigating Officer/Deputy PUTY A. JAHNKE			
.	Crash Date	Crash Time	D	Date Arrived				ne Arrived			
T7	10/15/2024	06:35 PM	Date Arrived		veu	Time Arriv		Anved	ırrıvea		
8	Date Notified Time Notified			otal Uni	ts	Total		Injured	Total Killed	otal Killed	
<b>B</b>	10/15/2024	06:40 PM	0	1			00		00	1	
.0CBQ6	On Emergency Hit and Run Lane			losure Work Zone			Trailer or Towed		Reporting Threshold		
6TL	Government Active School Zone			School Bus Related T			Tags	ags			
	Reportable	Crash Type NON-DOMESTICAT	ED ANIMAL	W/ NC	INJUR	Y		Amended		Secondary Crash	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
Ì	Location										
i	ON OLD LOGANVILLE RD					Latitude Longitude					
	472 FT S					43.52399	14696	-90.016363			
	OF GRANITE AVE										
	IN THE TOWN OF REEDSBU	JRG				X Coordin			II .	Y Coordinate	
	IN SAUK COUNTY					256234.7	1875		482342	27	
						Structure :	Туре				
						NO STR	UCTURE				
	Creek Coons										
	Crash Scene										
	First Harmful Event					First Harm	nful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)				ON ROA	DWAY				
ı	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT									
ŀ	Road Surface Condition(s)					Roadway	Factor(s)				
	` '					•	. ,				
ı	Environment Factor(s)										
ı	Weather Condition(s)										
ı	Animal Type					Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD						
Ì	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
ŀ	Tribal Land						ontrol			Special Study	
L											
l	Jnit Summary ————————————————————————————————————										
	Unit Status Vehicle Opera				ing As Cl	assification	l	Unit Type			
	IN TRANSIT D.C.			D CLASS			TRUCK				
_	Vehicle Type				Operating As Endorsements						
01	UTILITY TRUCK/PICKUP TRUCK										
ı	Total Occs Train/Bus # Recorded			Total # Citations Issued		Total Tra		ilers Total Haz		Mat Types	
	1		0			0		0			
}		Direction Of Travel					0 11:		Total Lane	es	
. !		SOUTHBOUND	Fie Clasiiiii			e   Open Lilli		1			
LIND								Emergency Motor Vehicle Use			
5				Special Function NO SPECIAL FUNC			TION		Emergency Motor Vehicle Use  NOT APPLICABLE		
	NON DOMESTICATED ANIMAL (ALIVE)						TION				
	Traffic Way			Traffic Control					Traffic Control Inoperative/Missing		
İ	Surface Type			Curvature	е			Road Grade			

Wisconsin Motor Vehicle Crash Form DT4000

Crash Date 10/15/2024
Crash Time 06:35 PM

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	Truc	k Bus or HazMat						
	,	Vehicle						
		License Plate Number	Plate Type  LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES			
2	2	Vehicle Identification Number 1C6RR7NT5HS780545	Make <b>RAM</b>	Year <b>2017</b>	Model 1500			
	VEHICLE	Color RED - RED	Body Style Bus Use PK - PICKUP					
UNIT		Initial Contact Point 01 - RIGHT FRONT CORNER  Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage  7 8 9 10 11  10 11 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT  6 1 2 12 5 4 3 2 1					
		Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER					
		What Driver Was Doing	Vehicle Factors					
		Driver Prior Action Other						
LIND	Driver Actions NO CONTRIBUTING ACTION							
		Owner Name	Owner Address					
2	5							
╘		Policy Holder						
LIND		Insurance Company AUTO-OWNERS-INS-CO	Individual JENNIFER TRAEDE	R				
	DIVIDUAL	Individual Driver	Citations Issued	I 0				
		JENNIFER TRAEDER	Citations Issued  0	Sex FEMALE				
_		(608) 393-9928	Date of Birth	Race WHITE				
LIND		Address 722 N WALNUT ST REEDSBURG, WI 53959 , US	Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash fety Equipment	Safety Equipment					
		Row Seat Position	SHOULDER & LAP BELT					
	100	Helmet Use	Helmet Compliance					
		Eye Protection	Tint Compliance					
5		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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ı			D:-ttd D C					
Distracted By Source								
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	INDIVIDUAL							
LNO	<u>ا</u>							
5	≥							
	9							
	=							
		Action Other						To/From School
		Suspected Alcohol Use Suspected Drug Use						
	L	Orug & Alcohol	Suspected Alcohol Use NO NO					
	Alcohol Test Given Alcohol Test Ty			Alcohol Test Type	e Alcohol Test Resul			
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results			
10	001	Drug Type				<u> </u>		
	0							
		Individual Condition						
		APPEARED NORM	//AL					