6TL0F2KRCX 24-12162

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Crash Documen			# Agency Crash Number 24-12162				Investigating Officer/Deputy DEPUTY I. GALVAN			
6TL0F2KRCX	Crash Date 11/01/2024	Crash Time 06:56 AM		Date Arrived		Time	Time Arrived				
	Date Notified 11/01/2024	Time Notified 06:58 AM		Total Units 01			Tota	Total Injured 00		Total Killed 00	
	On Emergency	Hit and Run	Lane Clos	osure Wor		k Zone	Trailer or		owed	Reporting Threshold	
	Government Property		Active School Zone		School Bus Related NO		Tags	Tags		_	
	Reportable Crash Type NON-DOMESTICAT			ED 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 FREEDOM RD				Latitude				_	Longitude	
	397 FT W OF SEELEY LN						43.441748493			5749008	
	IN THE TOWN OF FREEDOM IN SAUK COUNTY					X Coordinate 268092.4375			Y Coordinate 4813862		
						Structure Type NO STRUCTURE					
	Crash Scene										
•	First Harmful Event					First Harmful Event Location					
	NON DOMESTICATED	ANIMAL (ALIVE)				ON ROADWAY					
•	Manner of Collision					Light Condition					
	00 - NO COLLISION W	VEHICLE IN TRANS	PORT								
	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					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
•	Tribal Land					Access Control Special Study					
	Unit Summary										
	Unit Status Vehicle Operating					Classification Unit Type					
	IN TRANSIT			D CLASS		AUTOMOE		3ILE			
7	Vehicle Type							Operating /	As Endorse	ments	
0	PASSENGER CAR			I.T. 1 # 0% # 1		Total Trail	atal Tasilasa		Total HayMat Tunes		
	Total Occs	Occs Train/Bus # Recorded Total # (otal # Citations Issued		Total Trailers 0		Total HazMat Types 0			
	Insurance?	Direction Of Trave		Pre CrashTire			Speed Limit		Total Lanes		
_	YES	NORTHBOUND			lasiiiile Iark						
LIND	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)			Special Function NO SPECIAL FUNCTION				Emergency Motor Vehicle Use NOT APPLICABLE			
	Traffic Way UNKNOWN			Traffic Control UNKNOWN				Traffic Control Inoperative/Missing UNKNOWN			
•	Surface Type UNKNOWN			Road Curvature UNKNOWN				Road Grade UNKNOWN			

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This report does not include any CJIS data.

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Crash Date 11/01/2024
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	Truck Bus or HazMat									
	Vehicle									
5	VEHICLE 01	License Plate Number AYA9303 Vehicle Identification Number 1G4HP52K6WH415937	Plate Type AUT - AUTOMOBILE Make BUICK	St WI Year 1998	Country of Issuance UNITED STATES Model LESABRE					
TIND		Color GRY - GRAY Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage DISABLING DAMAGE Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Body Style 4D - 4DR Vehicle Damage 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 14 - UNDERCARRIAGE Vehicle Removed By MOOSE TOWING							
TINO	VEHICLE	What Driver Was Doing GOING STRAIGHT Driver Prior Action Other Driver Actions NO CONTRIBUTING ACTION, UNKNOWN								
5	10	Owner Name	Owner Address							
LIND		Insurance Company PROGRESSIVE-UNIVERSAL-INSURANCE-COMP	Individual DENNIS PAGEL							
TINO	INDIVIDUAL	Driver DENNIS PAGEL (608) 434-0556	Citations Issued 0 Date of Birth	Sex MALE Race WHITE	MALE Race					
		Address 102 S OAK ST NORTH FREEDOM, WI 53951 , US	Driver License Number							
	Sat	Row Seat Position	SAIGHT Equipment SHOULDER & LAP BELT							
		Helmet Use	Helmet Compliance							
		Eye Protection	Tint Compliance							
2	00	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					

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		Distracted By	Distracted By Source	•						
		Distracted By Action								
		Non Motorist	Striking Unit #	Location						
		Prior Action								
		Action								
	JAL									
UNIT	INDIVIDUAL									
	<u>N</u>									
		Action Other						To/From School		
	1	Drug & Alcohol	Suspected Alcohol Use NO			Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	<u> </u>		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
2	00	Drug Type								
		Individual Condition								
		APPEARED NORM	MAL							