

6TL0F51TKQ

24-12329

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 24-12329, Investigating Officer/Deputy SERGEANT E. KNULL, Crash Date 11/05/2024, Crash Time 11:10 AM, Date Arrived, Time Arrived, Date Notified 11/05/2024, Time Notified 12:00 PM, Total Units 01, Total Injured 00, Total Killed 00, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related NO, Tags, Reportable, Crash Type NON-DOMESTICATED 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 STH23 WB 404 FT E OF COPPER SPRINGS RD IN THE TOWN OF EXCELSIOR IN SAUK COUNTY, Latitude 43.532799033, Longitude -89.948698791, X Coordinate 261737.96875, Y Coordinate 4824209, 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 Status IN TRANSIT, Vehicle Operating As Classification D CLASS, Unit Type TRUCK, Vehicle Type UTILITY TRUCK/PICKUP TRUCK, 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 WESTBOUND, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With IMMERSION, FULL OR PARTIAL, 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

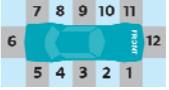
NO

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		Truck Bus or HazMat					
01	UNIT	VEHICLE	<b>Vehicle</b>				
			License Plate Number <b>TY3556</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
			Vehicle Identification Number <b>1FTRX17L7YNA41765</b>	Make <b>FORD</b>	Year <b>2000</b>	Model <b>F150</b>	
			Color <b>WHI - WHITE</b>	Body Style <b>PK - PICKUP</b>	Bus Use		
			Initial Contact Point <b>02 - RIGHT SIDE FRONT</b>	Vehicle Damage <b>02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR</b>			
			Extent Of Damage <b>MINOR DAMAGE</b>				
			Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>			
			What Driver Was Doing	Vehicle Factors			
			Driver Prior Action Other				
			01	UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
Owner Name	Owner Address						
<b>Policy Holder</b>							
01	UNIT	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>		Individual <b>DARRELL KLICKO</b>			
		<b>Individual</b>					
		Driver <b>DARRELL KLICKO</b> <b>(608) 434-1066</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>			
01	UNIT	INDIVIDUAL	Date of Birth	Race <b>WHITE</b>			
			Address <b>2240 MYRTLE ST</b> <b>REEDSBURG, WI 53959 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
			<b>Safety Equipment</b>		On Duty Crash		
01	UNIT	001	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>				
			Row	Seat Position			
			Helmet Use		Helmet Compliance		
			Eye Protection		Tint Compliance		
			<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag	
			Ejected	Ejection Path		Trapped/Extricated	
			Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death			

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<b>UNIT</b>	<b>Distracted By</b>		Distracted By Source		
	Distracted By Action				
	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
	Drug Type				
<b>01</b>	<b>001</b>	Individual Condition			
		<b>APPEARED NORMAL</b>			