### 6TL0CBQ6TB

24-12387

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document	5 .	Agency Crash Number 24-12387			Investigating Officer/Deputy  DEPUTY A. JAHNKE			
TB	Crash Date 11/06/2024	Crash Time 05:20 PM	Date A	Date Arrived		Time	Time Arrived			
ОСВОСТВ	Date Notified 11/06/2024	Time Notified 05:37 PM	Total U <b>01</b>	Total Units <b>01</b>		Total <b>00</b>	Total Injured Total Killed 00		i	
100	On Emergency Hi	t and Run	e Closure	re Work Zone			Trailer or Towed		Reporting Threshold	
6TL	Government Property	School NO				Tags				
	<b>✓</b> Reportable	Crash Type NON-DOMESTICATED	D 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									
ł	ON CTHG NB				Latitude Longitude				le	
	728 FT S				43.370924024			-90.119516652		
	OF CHAPEL RD				X Coordina	ate	V Cov		inate	
	IN THE TOWN OF BEAR CRE	EEK		247260.890625						
	IN SAUK COUNTY						400073		· <del>·</del>	
					Structure NO STRI					
					NOSIK	UCTURE				
(	Crash Scene									
1							cation			
	NON DOMESTICATED ANIM	AL (ALIVE)			ON ROA	DWAY				
	Manner of Collision	,			Light Condition					
	00 - NO COLLISION W/VEHIC	CLE IN TRANSPORT			3					
	Road Surface Condition(s)				Roadway	Factor(s)				
					ouumuy	. 4010.(0)				
	Environment Factor(s)									
	Weather Condition(s)									
	A : 17									
	Animal Type				Relation To Trafficway					
DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location PUBLIC PROPERTY				Crash Classification - Jurisdiction					
				NO SPECIA			SDICTION		-	
	Tribal Land			Access Control		ontrol			Special Study	
Į	Unit Summary									
	Unit Status Vehicle Operating As				Classification Unit Type					
	IN TRANSIT D C			CLASS			TRUCK			
_	Vehicle Type						Operating /	s Endorser	ments	
01	CARGO VAN (10,000 LBS OR LESS)									
	Total Occs Train/Bus # Recorded		Total # Citati	Total # Citations Issued		Total Traile		Total Haz	Mat Types	
	1		0			0		0		
	Insurance?	Direction Of Travel	Pre C	CrashTire	<u> </u>	Speed Lim	it	Total Lane	es	
$\vdash$	YES	NORTHBOUND	Mark							
UNIT	Most Harmful Event: Collision With	Special Fund		1		Emergency Motor Vehicle Use		icle Use		
⊃	NON DOMESTICATED ANIM	NO SPECI	AL FUNC	TION		NOT APPLICABLE				
	Traffic Way	Traffic Contro	Traffic Control			Traffic Control Inoperative/Missing				
	•							, <del>-</del> 9		
	Surface Type Road Cui				Curvature			Road Grade		
	··									

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Crash Date 11/06/2024

Crash Time 05:20 PM

	Truc	k Bus or HazMat						
	,	Vehicle						
10	VEHICLE 01	License Plate Number XD96066	Plate Type HTK - HEAVY TRUCI	K WI	Country of Issuance UNITED STATES			
		Vehicle Identification Number 1GCWGBFG9K1251022	Make CHEVROLET	Year <b>2019</b>	Model EXPRESS G2			
		Color WHI - WHITE	Body Style VN - VAN		Bus Use			
LINO		Initial Contact Point  12 - FRONT  Extent Of Damage  FUNCTIONAL DAMAGE	Vehicle Damage  01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT  7 8 9 10 11 6 7 8 9 10 11 5 4 3 2 1					
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR					
		What Driver Was Doing	Vehicle Factors					
		Driver Prior Action Other						
LINO	VEHICLE	Driver Actions NO CONTRIBUTING ACTION						
10	7	Owner Name	Owner Address					
LNN		Policy Holder Insurance Company	Organization/Compan	v				
5		SCHWARZ INSURANCE-PRAIRIE RHD PLUMBING INC						
		Individual Driver	Citations Issued Sex					
	_	KANE MORAN	0	MALE				
LIND	INDIVIDUAL	(608) 514-3228	Date of Birth	Race WHITE				
		Address 32881 ROBIN HOLLOW RD CAZENOVIA, WI 53924 , US	Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash fety Equipment	Safety Equipment	Safety Equipment				
		Row Seat Position	SHOULDER & LAP BELT					
	001	Helmet Use	Helmet Compliance					
		Eye Protection	Tint Compliance					
7		Injury Severity NO APPARENT INJURY	Airbag	Airbag				
		Ejected Ejection Path			Trapped/Extricated			
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	г	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						
UAL							
IVID							
N N							
	Action Other						To/From School
						Ton Toni Galleei	
Drug & Alcohol			NO Suspected Drug Use				
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results			
001	Drug Type		<u> </u>		<u> </u>		
Individual Condition							
APPEARED NORMAL							
		Prior Action  Action  Action Other  Drug & Alcohol  Alcohol Test Given TEST NOT GIVEN Drug Type  Individual Condition	Distracted By  Distracted By Action  Non Motorist  Prior Action  Action  Action  Action  Drug & Alcohol  Alcohol Test Given TEST NOT GIVEN  Drug Type  Individual Condition	Distracted By  Distracted By Action  Striking Unit # Location  Prior Action  Action  Action  Action  Suspected Alcohol Use NO  Alcohol Test Given TEST NOT GIVEN  Drug Type  Individual Condition	Distracted By Distracted By Action  Non Motorist  Prior Action  Action  Action  Action  Suspected Alcohol Use NO  Alcohol Test Given TEST NOT GIVEN  Drug Test Given TEST NOT GIVEN  Drug Type  Individual Condition	Distracted By Action  Non Motorist  Prior Action  Action  Action Other  Drug & Alcohol  Alcohol Test Given TEST NOT GIVEN Drug Type  Individual Condition  Drug Type  Striking Unit # Location  Striking Unit # Location  Suspected No  Suspected Drug Use NO  Alcohol Test Type Test Type Drug Test Results Drug Type  Individual Condition	Distracted By  Action  Prior Action  Action  Action Other  Drug & Alcohol  Alcohol Test Given TEST NOT GIVEN  Drug Test Given TEST NOT GIVEN  Drug Type  Individual Condition  Drug Type  Drug Test Grove Individual Condition