6TL0CTJN5H 24-12442

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document	Agency Crash Nur 24-12442			mber		tigating Officer/Deputy UTY A. KULAS			
5H	Crash Date 11/07/2024	Crash Time 09:32 PM		Date Arrived		Time	Time Arrived				
TJN5H	Date Notified 11/07/2024	Time Notified 09:33 PM	Total Units				Tota 00	I Injured Total Killed 00		İ	
0C	On Emergency Hi	t and Run Lar	ne Closure			k Zone		Trailer or T	owed	Reporting Threshold	
6TL	Government Property	20	School Bus Related NO			Tags	Tags				
	Crash Type			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.										
Ī	Location										
ł	ON CTHBD SB					Latitude Longitude			le		
	245 FT S					43.546243984 X Coordinate				78066212 ordinate	
	OF SHADY LANE RD IN THE TOWN OF DELTON										
	IN SAUK COUNTY			275			275576			4825227	
						Structure 7	Гуре				
						NO STR	JCTURE				
	Crash Scene										
i	First Harmful Event					Firet Harm	ıful Event I.a	cation			
	NON DOMESTICATED ANIM					First Harmful Event Location ON ROADWAY					
	Manner of Collision	AL (ALIVL)					Light Condition				
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT				Light Cont	andorr				
	Road Surface Condition(s)					Roadway	Factor(s)				
						rioddindy'r dolor(o)					
	Environment Factor(s)										
	Weather Condition(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY					NO SPECIAL JURISDIC					
	Tribal Land					Access Control Special Study					
	Unit Summary				4 0			. .			
	Unit Status Vehicle Operating				ig As Ci	Classification		Unit Type			
	IN TRANSIT D CLASS Vehicle Type					AUTOMOBILE Operating As Endorsements					
01	PASSENGER CAR							Operating A	AS EHUUISEI	nents	
					# Citations Issued Tota		Total Trail	al Trailers T		Mat Types	
_	1	Train/Dus # Necorded	0	ilalions	issucu		0	515	0	wat Types	
		Direction Of Travel		0	. I. T'		Speed Lin	nit	Total Lane	es	
		SOUTHBOUND		Pre CrashTire		,					
UNIT	Most Harmful Event: Collision With			Special Function			<u> </u>		Emergency Motor Vehicle Use		
\supset	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCT			TION		NOT APPLICABLE		
	Traffic Way			Traffic Control					Traffic Control Inoperative/Missing		
											
	Surface Type		Road Cu	Road Curvature				Road Grade			

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	Truc	k Bus or HazMat							
	,	Vehicle							
01		License Plate Number 718ZWY	Plate Type AUT	St WI	Country of Issuance UNITED STATES				
	VEHICLE 01	Vehicle Identification Number 5XYKW4A20CG298014	Make KIA	Year 2012	Model SORENTO				
		Color MAR - MAROON (BURGUNDY)	Body Style Bus Use UT - SPORT UTILITY VEHICLE						
UNIT		Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage 7 8 9 10 11 11 - LEFT FRONT CORNER, 12 - FRONT 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							
LIND	VEHICLE	Driver Actions 123							
		Owner Name	Owner Address						
0	6								
LIND		Policy Holder Insurance Company	Livenger						
5		AMERICAN-FAMILY-INS-CO	RUTH KRUEGER						
		Individual DRIVER	Citations Issued Sex						
		RUTH KRUEGER	0	FEMALE					
⊢	DIVIDUAL	(608) 617-7634	Date of Birth	Race WHITE					
LIND	INDIV	Address 913 DE WITT ST PORTAGE, WI 53901 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sa	On Duty Crash fety Equipment	Safety Equipment						
		Row Seat Position	SHOULDER & LAP BELT						
	100	Helmet Use	Helmet Compliance						
		Eye Protection	Tint Compliance						
01		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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		Distracted By	istracted By Source					
		Distracted By Action						
	,	Non Motorist S	triking Unit #	Location				
		Prior Action						
		Action						
_	UAL							
UNIT	INDIVIDUAL							
	Z							
		Action Other						To/From School
	L	Drug & Alcohol	uspected Alcohol Us I O	se	Suspected Drug Use NO			
		Alcohol Test Given Alcohol Test Type TEST NOT GIVEN			Alcohol Test Result			
		Drug Test Given Drug Test Type TEST NOT GIVEN		Drug Test Type		Drug Test Results		
2	001	Drug Type						
		Individual Condition						
		APPEARED NORMA	NL					