

6TL0CTJN5K
24-12745

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 24-12745		Investigating Officer/Deputy DEPUTY A. KULAS	
Crash Date 11/15/2024		Crash Time 07:40 PM		Date Arrived		Time Arrived	
Date Notified 11/15/2024		Time Notified 07:43 PM		Total Units 01		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

Location

ON CTHH EB 0.40 MI W OF LYNDON RD IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.618467823	Longitude -89.856917749
	X Coordinate 269481.75	Y Coordinate 4833464.5
	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 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE			
	Vehicle Type (SPORT) UTILITY VEHICLE		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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		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		

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		Truck Bus or HazMat						
01	UNIT	01	VEHICLE	Vehicle				
				License Plate Number AXJ2141	Plate Type	St WI	Country of Issuance UNITED STATES	
				Vehicle Identification Number JTML6RFV4MD021600	Make TOYT	Year 2021	Model RAV4	
				Color GRY - GRAY	Body Style UT - SPORT UTILITY VEHICLE	Bus Use		
				Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT			
				Extent Of Damage FUNCTIONAL DAMAGE				
				Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR			
				What Driver Was Doing	Vehicle Factors			
				Driver Prior Action Other				
				Driver Actions 123				
Owner Name	Owner Address							
01	UNIT	01	Policy Holder					
			Insurance Company ACE-AMERICAN-INS-CO	ORGANIZATION/COMPANY CHRISTMAS MOUNTAIN				
			Individual					
01	UNIT	INDIVIDUAL	DRIVER RALPH SOLCHENBERGER (608) 415-0206	Citations Issued 0	Sex MALE			
				Date of Birth	Race WHITE			
			Address 103 CLARK ST REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
			Safety Equipment		On Duty Crash			
01	UNIT	001	Row	Seat Position	SHOULDER & LAP BELT			
			Helmet Use	Helmet Compliance				
			Eye Protection	Tint Compliance				
			Injury	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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UNIT	Distracted By		Distracted By Source		
	Distracted By Action				
	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results	
	Drug Type				
01	001	Individual Condition			
		APPEARED NORMAL			