6TL0BC3B9M

25-00165

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 Number 25-00165				DEPUTY W. VERTEIN				
⊠ 6	Crash Date 01/06/2025	Crash Time 07:08 AM			Date Arrived		Tim	Time Arrived				
0BC3B9M	Date NotifiedTime Notifie01/06/202507:10 AM		Total Units 01		Jnits	3		al Injured	Total Killed 00			
OBC	On Emergency	Hit and Run	Lane Close	osure 🗌 Wo		rk Zone		Trailer or Towed		Reporting Threshold		
6TL	Government Property Active School Zone			School Bus Related NO			Тад	Tags				
	Reportable	STICATED ANIM	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 STH78 SB 633 FT N	N STH78 SB					Latitude 43.366880591			de I813525		
	OF WIGANDS BAY RD N IN THE TOWN OF MERRIN IN SAUK COUNTY	NC				X Coordina 281656.8		Y Coord 480508				
	IN SAUR COUNTY					Structure Type NO STRUCTURE				-		
	Crash Scene										_	
1						Circh I I amo	ful Europe	4'			_	
First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)						First Harmful Event Location ON ROADWAY						
	Manner of Collision											
	00 - NO COLLISION W/VEH		DODT			Light Condition						
	Road Surface Condition(s)					Roadway	Factor(s)				1	
	Road Banade Bonanion(3)					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		Veh	icle Ope	rating As C	lassification		Unit Type			٦	
	IN TRANSIT			D CLASS				AUTOMOBILE				
_	Vehicle Type							Operating	As Endorsei	ments		
01	PASSENGER CAR											
	otal Occs Train/Bus # Recorded Total # Citations Issue				ons Issued	d Total T		ilers Total Haz		Mat Types	-	
	1		0				0		0			
	Insurance?	Direction Of Trave			CrashTire	1	Speed Lir	nit	Total Lan	es	٦	
F	YES SOUTHBOUND			Mark								
UNIT	Most Harmful Event: Collision With			Special Function NO SPECIAL FUNCTIO					Emergency Motor Vehicle Use			
_	NON DOMESTICATED ANIMAL (ALIVE)						_					
	Traffic Way			Traffic Control			Traffic Control Inope			uve/wissing		
	Surface Type			Road Curvature				Road Grad	le		_	

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	Truc	k Bus or HazMat									
	,	Vehicle									
		License Plate Number ARA7453		Plate Type AUT	St WI	Country of Issuance					
01	~	Vehicle Identification Number		Make	Year	Model					
0	9	3FA6P0K90FR268773		FORD	2015	FUS					
	VEHICLE	Color BLK - BLACK		Body Style	Bus Use						
		Initial Contact Point		SD - SEDAN Vehicle Damage							
F		11 - LEFT FRONT CORNER		09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT							
UNIT		Extent Of Damage FUNCTIONAL DAMAGE									
	Ň										
	-	Towed Due To Damage		Vehicle Removed By							
		NOT TOWED		OPERATOR							
		What Driver Was Doing		Vehicle Factors							
		Driver Prior Action Other		-							
L	VEHICLE	NO CONTRIBUTING ACTIO	N								
UNIT	₽										
	Ψ										
	-										
		Owner Name		Owner Address							
01	~										
0	5										
_		Policy Holdor	_		_	_					
UNIT		Policy Holder Insurance Company INDIVIDUAL									
5		STATE-FARM-GENERAL-IN	S-CO	LINDA BOLISH							
		Individual									
				Citations Issued							
	DIVIDUAL	LINDA BOLISH (248) 227-6731		0	FEMALE						
		(, , , , , , , , , , , , , , , , , , ,		Date of Birth	Race WHITE						
UNIT	Ξ	Address S7612A W GRANDVIEW AVE MERRIMAC, WI 53561 , US On Duty Crash		Driver License Number							
	ND			STATE: WISCONSIN COUNTRY: UNITED STATES							
	=										
	Sa	fety Equipment	asii	Safety Equipment							
		Row	Seat Position	SHOULDER & LA	P BELT						
	001	Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
01		Injury Severity		Airbag							
		Ejected Ejection Path		I		Trapped/Extricated					
		Medical Transport		EMS Agency Identifie	r	EMS Run #					
		NOT TRANSPORTED									
		Hospital		Date of Death		Time of Death					

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	Distracted By								
	Distracted By Action								
	Non Motorist	Striking Unit #	Location						
	Prior Action								
	Action								
JAL									
NDN									
_									
	Action Other						To/From School		
L	Suspected Alcohol Use Drug & Alcohol NO			Suspected Drug Use					
ĺ	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results			
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	L			
001	Drug Туре								
	Individual Condition								
		//AL							
		Distracted By Action Non Motorist Prior Action Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Distracted By Distracted By Action Non Motorist Prior Action Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Type Drug Type	Distracted By Action Non Motorist Prior Action Action Action Action Other Drug & Alcohol No Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Distracted By Distracted By Action Non Motorist Prior Action Action Action Action Other Drug & Alcohol No Actool Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Distracted By Distracted By Action Non Motorist Striking Unit # Prior Action Action Action Action Other Drug & Alcohol No No No Action Other Drug & Alcohol No No No No Drug Test Given TEST NOT GIVEN Given Individual Condition	Distracted By Distracted By Action Non Motorist Striking Unit # Location Prior Action Action Action Action Other Drug & Alcohol No No No No No No Action Other No Drug Test Given Test Re		