## **6TL0D5DZ33** 25-00197

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	Primary Crash Document #		Agency Crash Number 25-00197			Investigating Officer/Deputy  DEPUTY J. HUNTER			
5DZ33	Crash Date <b>01/07/2025</b>	Crash Time 06:20 AM			Date Arrived		Time	Time Arrived			
	Date Notified <b>01/07/2025</b>	Time Notified 06:30 AM			Total Units <b>01</b>		Tota <b>00</b>		Total Killed	i	
0	On Emergency	it and Run	and Run Lane Close		ure Work Z		Trailer or T		owed	Reporting Threshold	
eTL	Government Property	hool Zone	School Bus Related NO			Tag	Tags				
	<b>✓</b> Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			RYAmended			Secondary Crash			
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
ì	Location										
Ī	ON STH78 SB					Latitude Longitude					
	447 FT W					43.372892219				702634	
	OF EAGLE POINT DR					X Coordinate		Y Coordina		inate	
	IN THE TOWN OF MERRIMA	VC .				282497.59375			4805726		
	IN SAUK COUNTY								400012		
						NO STR					
	Crash Scene										
1	First Harmful Event First Harmful Ev							vent Location			
	NON DOMESTICATED ANIM	IAL (ALIVE)				ON ROADWAY					
ŀ	Manner of Collision	, ,				Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSF	PORT			2.9					
ŀ	Road Surface Condition(s)	022				Roadway	Factor(s)				
	Troad Surface Condition(s)										
	Environment Factor(s)										
ĺ	Weather Condition(s)										
	Animal Type  DEER				Relation To Trafficway TRAFFICWAY - ON ROAD						
ŀ	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
	Tribal Land				Access Control Special Study						
L	Unit Summary										
	Unit Status		I Veh	nicle Onerat	ting As C	laccification		Linit Type			_
				/ehicle Operating As Classification				Unit Type AUTOMOBILE			
	IN TRANSIT D CLASS  Vehicle Type					Operating As Endorsements					
0	PASSENGER CAR							Operating A	45 EHUUISEI	nents	
•							Total Trailers   Total HazMat Types			Mot Tymas	
	Total Occs 1	Train/Bus # Recorded Total		Γotal # Citations Issued		0		o lers		iwat Types	
ŀ	Insurance?	Direction Of Travel		Pre CrashTi		e Speed		d Limit Total		es	
⊨	YES SOUTHBOUND			Mark							
LIND	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)			Special Function NO SPECIAL FUNCTION					/ Motor Vehicle Use PLICABLE		
ŀ	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			David Overstone				Road Grade			
	Curiado Typo			Road Curvature				Todu Graue			

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	Truc	ruck Bus or HazMat								
		Vehicle								
		License Plate Number	Plate Type	St	Country of Issuance					
		627MXF	AUT "	wı	UNITED STATES					
		Vehicle Identification Number	Make	Year	Model					
01	2	JN8AS5MV9DW664094	NISS	2013	ROGUE					
		Color	Body Style	1	Bus Use					
		WHI - WHITE	UT - SPORT UTILITY	VEHICLE						
	ш	Initial Contact Point	Vehicle Damage							
╘	VEHICL	12 - FRONT	01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT  Vehicle Removed By							
UNIT		Extent Of Damage								
_	7	DISABLING DAMAGE								
		Towed Due To Damage								
		TOWED DUE TO DISABLING DAMAGE	OWNER							
		What Driver Was Doing	Vehicle Factors	Vehicle Factors						
		Driver Prior Action Other								
		Driver Actions								
١.	VEHICLE	NO CONTRIBUTING ACTION								
LNO	$\overline{c}$									
5	프									
	5									
		Owner Name	Owner Address							
2	6									
_										
				_						
╘		Policy Holder								
LNO		Insurance Company	INDIVIDUAL							
_		BREATHE EASY INSURANCE ERIK WYKO								
		Individual								
		DRIVER ERIK WYKO	Citations Issued	Sex MALE						
	4	(608) 370-4282	0							
	3	,	Date of Birth	WHITE						
Ĭ N N	DIVIDUAL	Address	Driver License Numbe	Driver License Number						
5	ā	S7605 ALLBRITE DR	Driver License Numbe	STATE: WISCONSIN COUNTRY: UNITED STATES						
	Z	MERRIMAC, WI 53561 , US	STATE: WISCONSI							
		On Duty Crash	Safety Equipment	Safety Equipment						
	Sa	fety Equipment								
		Row Seat Position	SHOULDER & LAP BELT							
		Helmet Use	Helmet Compliance							
		Eye Protection	Tint Compliance							
10	001	Injury Severity Injury NO APPARENT INJURY	Airbag							
٦	0	TO ALL AKENT INSORT								
		Ejected Ejection Path			Trapped/Extricated					
		Modical Transport	EMO A 11		EMO Dure #					
		Medical Transport	EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED  Hospital	Date of Death		Time of Dooth					
		η ιουριίαι	Date of Death		Time of Death					
1			1		i					

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Crash Date 01/07/2025

Crash Time 06:20 AM

		Distracted By	Distracted By Source	,					
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
_	UAL								
UNIT	INDIVIDUAL								
	Ξ								
		Action Other						To/From School	
	Ĺ	Drug & Alcohol NO			Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN	1	Alcohol Test Type	l		Alcohol Test Results		
•		Drug Test Given TEST NOT GIVEN	l	Drug Test Type	Drug Test Results		3		
2	001	Drug Type							
		Individual Condition							
		APPEARED NORM	MAL						