

6TL0BFKDL0
25-03166

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 25-03166		Investigating Officer/Deputy DEPUTY B. FISH	
Crash Date 04/05/2025		Crash Time 01:18 AM		Date Arrived 04/05/2025		Time Arrived 01:24 AM	
Date Notified 04/05/2025		Time Notified 01:18 AM		Total Units 01		Total Injured 01	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 DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
		<p>Deputy Fish #9142 Sauk County Sheriff's Office 04/05/2025 Not to Scale</p>	
		Photos By DEPUTY FISH	
		Additional Information NONE, PHOTOS	

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

UNIT 1 WAS TRAVELING NORTH ON HWY A JUST NORTH OF HWY U. A DEER CROSSED THE ROAD GOING FROM WEST TO EAST. UNIT 1 STRUCK THE DEER. UNIT 1 HAD DISABLING DAMAGE TO THE FRONT AND FRONT LEFT OF THE CAR. THERE WAS FULL AIR BAG DEPLOYMENT. THE DRIVER AND OWNER OF UNIT 1 WAS TREATED BY BARABOO EMS BUT WAS NOT TRANSPORTED TO ANY HOSPITALS. THE DRIVER HAD VALID INSURANCE AND WAS PICKED UP BY ANOTHER PERSON. PLATTS TOWING REMOVED THE VEHICLE.

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Location

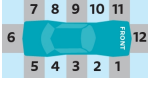
ON CTHA NB 0.34 MI N OF REEDSBURG RD IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude 43.537137135	Longitude -89.738716145
	X Coordinate 278721.65625	Y Coordinate 4824110
	Structure Type NO STRUCTURE	

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 DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) ANIMAL (S) IN ROADWAY		
Weather Condition(s) CLOUDY		
Animal Type DEER	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

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 NORTHBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade UPHILL		
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE	Vehicle				
	License Plate Number 613YHY	Plate Type AUT	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number JTMDFREV2HD203548	Make TOYT	Year 2017	Model RAV4	
	Color WHI - WHITE	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 DISABLING DAMAGE				

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UNIT	VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By PLATTS WRECKER		
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors NOT APPLICABLE		
		Driver Prior Action Other				
		Driver Actions NO CONTRIBUTING ACTION				
01	01	Owner Name MAKAYLA WILSON (608) 434-9222		Owner Address 1707 CRAWFORD ST BARABOO, WI 53913 , US		
		Sequence Of Events				
UNIT	INDIVIDUAL	01	Event NON DOMESTICATED ANIMAL (ALIVE)			
		02	Event			
		03	Event			
		04	Event			
Policy Holder						
UNIT	INDIVIDUAL	Insurance Company PROGRESSIVE-UNIVERSAL-INSURANCE-COMP		INDIVIDUAL MAKAYLA WILSON		
		DRIVER MAKAYLA WILSON (608) 434-9222		Citations Issued 0	Sex FEMALE	
		Address 1707 CRAWFORD ST BARABOO, WI 53913 , US		Date of Birth	Race WHITE	
		Driver License Number				
Safety Equipment						
01	001	On Duty Crash		Safety Equipment SHOULDER & LAP BELT		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT			
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		Injury	Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-COMBINATION		
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
		Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)				
Distracted By Action NOT DISTRACTED						

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UNIT	INDIVIDUAL	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 GIVEN	Alcohol Test Type PRELIMINARY BREATH TEST (PBT)		Alcohol Test Results 00		
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results			
		Drug Type					
		Individual Condition APPEARED NORMAL					
		01	001				