6TL0CTJN06

25-06150

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override Crash Date 06/18/2025		Primary Crash Document # Crash Time 99:99		DEP Date Arrived Time					
06							Time Arrived			
6TL0CTJN06	Date Notified 06/18/2025		Time Notified 06:35 PM		Total Units 02		Total Injured	Total Kill 00	ed	
-0C	On Emergency	∨ Hit	and Run	Lane Close		Work Zone	Trailer	or Towed	Reporting Threshold	
6TL	Government Property		Active Sc	hool Zone	School NO	Bus Related	Tags			
	✓ Reportable		Crash Type PRIVATE PR	OPERTY/PARK	NG LO	r	Ameno	led	Secondary Crash	
	Description Diagram		-						•	
		HO-Cŀ	IUNK CASIN	0				Photos By TM 9108		
						6/18/2025 @ 6:35PM HO-CHUNK CASIN LOT SOUTH, S3214 CTY BD, BAI 53913 DEPUTY T.MOSLEY ***NOT TO SCALE	O PARKING RABOO WI	Additional Info	prmation DTOS	
	▼ I, a sworn law enfo									
	UNIT 1 WAS LEGALLY PAR THE OWNER OF UNIT 1 CA									

25-06150

6

UNIT

5

UNIT

WISCONSIN MOTOR VEHICLE CRASH REPORT

Loc	ation									
PARKING LOT					Latitude		Ű	Longitude		
CTHBD EB LOT IN THE TOWN OF DELTON IN SAUK COUNTY				43.529101896			-89.774535828			
				X Coordin				Coordinate		
					275797.65625 4823313.5			313.5		
						Structure Type NO STRUCTURE				
					NUSIR	UCTURE				
-	sh Scene									
	Harmful Event					nful Event				
PARKED MOTOR VEHICLE						-	IE OR ZONE			
Manner of Collision					Light Con DAYLIG					
	03 - FRONT TO REAR									
	d Surface Condition(s)				Roadway	Factor(s)				
DR۱	(
Envi	ronment Factor(s)									
NO	NE				NONE					
Wea	ther Condition(s)				_					
CLE										
Anin	nal Type					o Trafficw	^{ay} AY - PARKIN	GLOT		
Cras	h Classification - Location						- Jurisdiction			
	VATE PROPERTY				PRIVATI	E PROPE	RTY			
Triba	al Land				Access Control Special Study			Special Study		
					NO CON	ITROL				
With	in Interchange Area	Junction Location		Intersectio						
NO		NON-JUNCTION		NOT AN	INTERSE					
				NUTAN	INTERSE					
	t Summary									
Unit	Status		Vehicle Ope				Unit Type			
Unit LEG	Status		Vehicle Ope				AUTOMO			
Unit LEC Vehi	Status SALLY PARKED cle Type								ements	
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WISCONSIN MOTOR VEHICLE CRASH REPORT

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		Towed Due To Damage			hicle Removed By					
		NOT TOWED			VNER					
		What Driver Was Doing		Ve	hicle Factors					
	LEGALLY PARKED									
		Driver Prior Action Other		NC						
		Driver Actions								
		NO CONTRIBUTING A	CTION							
Ŀ	Ë									
UNIT	₽									
	VEHICLE									
	>									
		Owner Name			Owner Address					
		COLE TROXEL		417 1/2 MADISON ST						
2	6	(608) 963-6731		SAUK CITY, WI 53583 , US						
	ļ	Sequence Of Even	Its							
		Event								
	0	PARKED MOTOR VEH	HICLE							
	02	Event								
	03	Event								
	-	Front								
	04	Event								
E	I	Policy Holder								
UNIT	Insurance Company PROGRESSIVE-CASUALTY-INS-CO									
		PROGRESSIVE-CASE								
			JALTT-INS-CO							
		t Summary	JALTY-INS-CO							
	Unit	t Summary	JALTY-INS-CO	Veh	icle Operating As Classificati	on	Unit Type			
	Unit HIT	t Summary	ALTT-INS-CO	Veh		on	AUTOMO			
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6TL0CTJN06

25-06150

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage		Vehicle Removed By						
	NOT TOWED			OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other		UNKNOWN						
		Driver Fridi Action Other								
		Driver Actions								
	щ	UNKNOWN								
UNIT	VEHICLE									
5	EH									
	2									
		Owner Name		Owner Address						
	•									
02	02			, ,						
	ę	Sequence Of Events								
	01	Event PARKED MOTOR VEHICLE								
	02	Event								
	03	Event								
	0	-								
	04	Event								
	l	Individual								
		DRIVER		Citations Issued	Sex					
	Ľ			0						
⊢	INDIVIDUAL		Date of Birth	Race						
UNIT	N	Address		Driver License Number						
	IN	3 3								
		On Duty Cr	ash	Safety Equipment						
	Sat	fety Equipment								
		Row	Seat Position	RESTRAINT USE	UNKNOWN					
		99 - UNKNOWN								
		Helmet Use	Helmet Compliance							
		Eye Protection	Tint Compliance							
07	001	Injury Seve	-	Airbag						
	õ			NOT APPLICABLE						
			ection Path OT EJECTED/NOT APF	Trapped/Extricated PPLICABLE NOT APPLICABLE						
		Medical Transport	OT EJECTED/NOT APP	EMS Agency Identifier	r	EMS Run #				
		NOT TRANSPORTED			•					
		Hospital	Date of Death Time of Death		Time of Death					
		Distracted By	By Source			I				
		Distracted By Action								
	Non Motorist Striking Unit # Location									

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action						
UNIT	INDIVIDUAL	Action						
		Action Other S Drug & Alcohol	Suspected Alcohol Us	se	Suspected Drug Use			To/From School
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	1	
02	001	Drug Type	·			•		
		Individual Condition NOT OBSERVED						