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25-04252

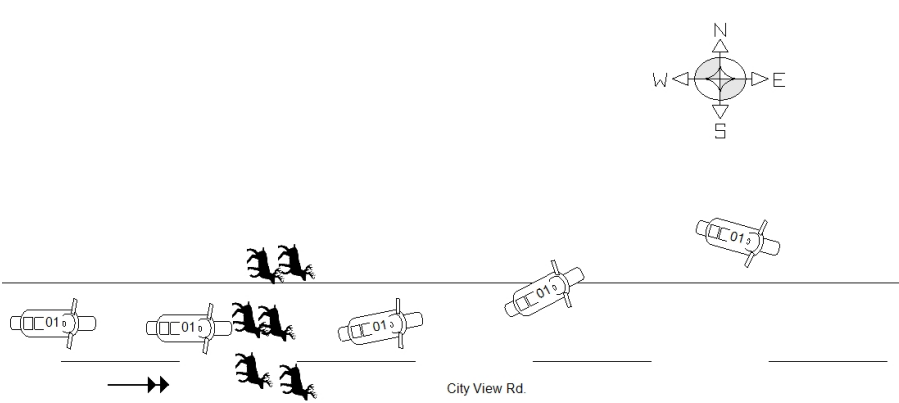
WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override 6TL0D2XVT6		Primary Crash Document #		Agency Crash Number 25-04252		Investigating Officer/Deputy DEPUTY B. GOODREAU	
Crash Date 05/04/2025		Crash Time 08:19 PM		Date Arrived 05/04/2025		Time Arrived 08:40 PM	
Date Notified 05/04/2025		Time Notified 08:19 PM		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 checked="" type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash		

Description

Diagram	Reconstruction By SAUK COUNTY SHERIFFS DEPARTMENT
	Photos By
	Additional Information RECONSTRUCTION

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

UNIT 1 WAS TRAVELING EB ON CITY VIEW RD. WHEN HE STRUCK TWO DEER IN THE ROADWAY. UNIT 1 WAS UNABLE TO STABILIZE THE BIKE AND CRASH IN THE NB DITCH. THE BIKE WAS RECENTLY PURCHASED AND NO INSURANCE WAS PROVIDED FOR THE BIKE. BG9113.

EMERGENCY RESPONSE SUMMARY

CHANGE VEHICLE OPERATING CLASSIFICATION

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Location

ON CITY VIEW RD 463 FT E OF ELIZABETH ST IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.489151339	Longitude -89.732024503
	X Coordinate 279087.21875	Y Coordinate 4818762.5
	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 DUSK	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
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	

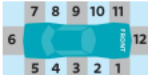
Unit Summary

UNIT	01	Unit Status IN TRANSIT	Vehicle Operating As Classification M CLASS		Unit Type MOTORCYCLE			
		Vehicle Type MOTORCYCLE			Operating As Endorsements			
		Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
		Insurance? NO	Direction Of Travel EASTBOUND	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2		
		Most Harmful Event: Collision With 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 LEVEL		
		Truck Bus or HazMat NO						
		Vehicle						
		License Plate Number 320TP	Plate Type CYC	St WI	Country of Issuance UNITED STATES			
01	01	Vehicle Identification Number 1HD1FCW423Y628080	Make HD	Year 2003	Model UKN			
		Color GRY - GRAY	Body Style MC - MOTORCYCLE		Bus Use			
		Initial Contact Point 12 - FRONT						

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UNIT VEHICLE	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	15 - ALL AREAS	
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name TOBY ADAMS	Owner Address 221 1/2 4TH ST BARABOO, WI 53913 , US	
	Sequence Of Events		
UNIT VEHICLE	Event NON DOMESTICATED ANIMAL (ALIVE)		
	Event		
	Event		
	Event		
UNIT VEHICLE	Individual		
	DRIVER TOBY ADAMS	Citations Issued 0	Sex MALE
		Date of Birth	Race WHITE
	Address 221 1/2 4TH ST BARABOO, WI 53913 , US	Driver License Number	
UNIT VEHICLE	Safety Equipment		
	On Duty Crash	Protective Gear	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE
	Helmet Use NO	Helmet Compliance UNKNOWN	
UNIT VEHICLE	Eye Protection NO	Tint Compliance UNKNOWN	
	Injury	Injury Severity SUSPECTED MINOR INJURY	Airbag NON DEPLOYED
	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport EMS GROUND	EMS Agency Identifier 6000368	EMS Run #
UNIT VEHICLE	Hospital ST CLARE HOSP	Date of Death	Time of Death
	Distracted By		
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		

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UNIT INDIVIDUAL 01 001	Distracted By Action NOT DISTRACTED					
	<i>Non Motorist</i>	Striking Unit #		Location		
	Prior Action					
	Action					
	Action Other					
						To/From School
	<i>Drug & Alcohol</i>	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						
Individual Condition APPEARED NORMAL						