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25-07403

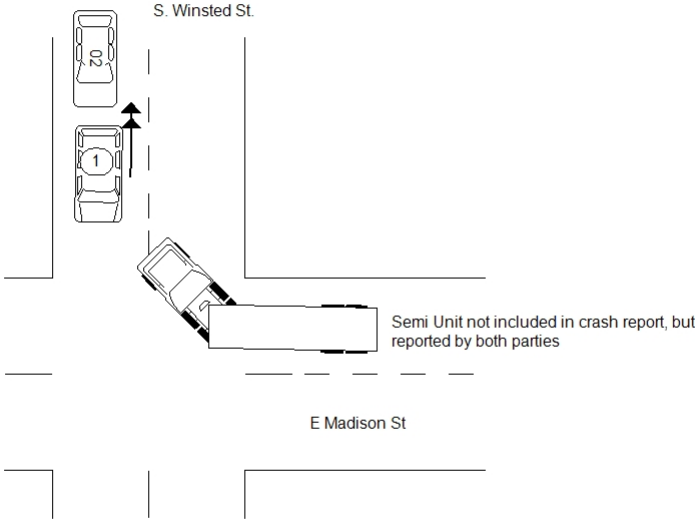
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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 <b>25-07403</b>		Investigating Officer/Deputy <b>DEPUTY J. HUNTER</b>	
Crash Date <b>07/16/2025</b>		Crash Time <b>05:10 PM</b>		Date Arrived <b>07/16/2025</b>		Time Arrived <b>05:28 PM</b>	
Date Notified <b>07/16/2025</b>		Time Notified <b>05:14 PM</b>		Total Units <b>02</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags			
<input checked="" type="checkbox"/> Reportable	Crash Type <b>DT4000 (STANDARD CRASH)</b>			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash		

Description

Diagram		Reconstruction By
 <p>S. Winsted St.</p> <p>E Madison St</p> <p>Semi Unit not included in crash report, but reported by both parties</p>		Photos By <b>DEPUTY HUNTER</b>
		Additional Information <b>NONE, PHOTOS</b>

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

UNITS 1 AND 2 WERE S/B ON S WINSTED ST. IN THE VILLAGE OF SPRING GREEN. UNIT 1 WAS IN FRONT OF UNIT 2. BOTH UNITS CAME TO A STOP BECAUSE A SEMI-TRUCK AND TRAILER WAS MAKING A WIDE RIGHT TURN OFF OF MADISON ST. ONTO S. WINSTED (TO TRAVEL N/B.) OPERATOR OF UNIT 1 PUT HIS VEHICLE IN REVERSE AND BACKED UP. OPERATOR OF UNIT 2 SAW UNIT 1 BACKING, BUT SAW A VEHICLE BEHIND HIM AND WAS NOT ABLE TO BACK UP HIMSELF. UNIT 1 STRUCK UNIT 2 BY BACKING INTO IT. UNIT 2 FOLLOWED UNIT 1 TO A PARKING LOT AND BOTH AWAITED A LAW ENFORCEMENT RESPONSE.

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Location

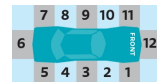
ON STH23 WB 147 FT N OF E MADISON ST IN THE VILLAGE OF SPRING GREEN IN SAUK COUNTY	Latitude <b>43.175705227</b>	Longitude <b>-90.064011424</b>
	X Coordinate <b>250962.546875</b>	Y Coordinate <b>4784885.5</b>
	Structure Type	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>03 - FRONT TO REAR</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>BACKUP DUE TO REGULAR CONGESTION</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLOUDY</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>			Operating As Endorsements		
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>2</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>NO</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>35</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>					
	UNIT 01 VEHICLE 01	<b>Vehicle</b>				
		License Plate Number <b>AXA8669</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>2GKALMEK8F6287279</b>		Make <b>GMC</b>	Year <b>2015</b>	Model <b>TERRAIN</b>		
Color <b>GRY - GRAY</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use		
Initial Contact Point <b>06 - REAR</b>		Vehicle Damage  <b>00 - NO DAMAGE</b>				
Extent Of Damage <b>NO DAMAGE</b>						



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UNIT	01	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>		
			What Driver Was Doing <b>BACKING</b>		Vehicle Factors		
			Driver Prior Action Other		<b>NOT APPLICABLE</b>		
			Driver Actions <b>UNSAFE BACKING, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>				
UNIT	01	01	Owner Name <b>MARCELINO PEREZ GONZALEZ</b> (262) 600-0886		Owner Address <b>E4830 US HY 14 AND 60 #214</b> <b>SPRING GREEN, WI 53588 , US</b>		
			<b>Sequence Of Events</b>				
			Event <b>MOTOR VEH IN TRANSPORT</b>				
			Event				
UNIT	01	02	Event				
			Event				
			Event				
			Event				
UNIT	01	03	<b>Individual</b>				
			DRIVER <b>MARCELINO PEREZ GONZALEZ</b> (262) 600-0886		Citations Issued <b>2</b>	Sex <b>MALE</b>	
			Date of Birth		Race <b>HISPANIC</b>		
			Address <b>E4830 US HY 14 AND 60 #214</b> <b>SPRING GREEN, WI 53588 , US</b>		Driver License Number		
UNIT	01	04	<b>Safety Equipment</b>		On Duty Crash		
			Safety Equipment <b>SHOULDER &amp; LAP BELT</b>				
			Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	Helmet Use		Helmet Compliance
			Eye Protection		Tint Compliance		
UNIT	01	001	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
			Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
			Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	
			Hospital		Date of Death	Time of Death	
UNIT	01	001	<b>Distracted By</b>		Distracted By Source <b>UNKNOWN</b>		
			Distracted By Action <b>UNKNOWN</b>				
			<b>Non Motorist</b>		Striking Unit #	Location	

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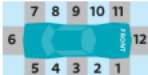
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UNIT	INDIVIDUAL	Prior Action					
		Action					
		Action Other			To/From School		
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results		
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results		
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					
		<b>Violations</b>					
		01	001	UTC Number <b>BG110395</b>	Issue To? <b>001</b>	Statute Number <b>343.05(3)(a)</b>	Description <b>OPERATE W/O VALID LICENSE</b>
02		UTC Number <b>BG110394</b>	Issue To? <b>001</b>	Statute Number <b>344.62(1)</b>	Description <b>OPERATE MOTOR VEHICLE W/O INSURANCE</b>		
<b>Unit Summary</b>							
UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
		Vehicle Type <b>PASSENGER CAR</b>		Operating As Endorsements			
		Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
		Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>35</b>	Total Lanes <b>2</b>	
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
		Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
		Truck Bus or HazMat <b>NO</b>					
		<b>Vehicle</b>					
		02	02	License Plate Number <b>AUA3035</b>		Plate Type <b>AUT</b>	St <b>WI</b>
		Vehicle Identification Number <b>WDDGF8BBXCR228975</b>		Make <b>MERZ</b>	Year <b>2012</b>	Model <b>C</b>	
		Color <b>BLK - BLACK</b>		Body Style <b>SD - SEDAN</b>		Bus Use	
		Initial Contact Point <b>12 - FRONT</b>					

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UNIT VEHICLE	Extent Of Damage <b>MINOR DAMAGE</b>		Vehicle Damage <b>12 - FRONT</b>		
	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>				
	Owner Name <b>TIMOTHY VELTE</b> (608) 219-1548		Owner Address <b>116 N SCHOOL ST</b> <b>CUBA CITY, WI 53807 , US</b>		
UNIT 02	<b>Sequence Of Events</b>				
	Event <b>MOTOR VEH IN TRANSPORT</b>				
	Event				
	Event				
	Event				
UNIT 02	<b>Policy Holder</b>				
	Insurance Company <b>ALLSTATE-INS-CO</b>		INDIVIDUAL <b>TIMOTHY VELTE</b>		
UNIT 02	<b>Individual</b>				
	DRIVER <b>TIMOTHY VELTE</b> (608) 219-1548		Citations Issued <b>0</b>	Sex <b>MALE</b>	
UNIT 02	Address <b>116 N SCHOOL ST</b> <b>CUBA CITY, WI 53807 , US</b>		Date of Birth	Race <b>WHITE</b>	
	Driver License Number				
UNIT 02	<b>Safety Equipment</b>		On Duty Crash		
	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>				
UNIT 02	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>			
	Helmet Use		Helmet Compliance		
UNIT 02	Eye Protection		Tint Compliance		
	Injury <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>		
UNIT 02	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>		
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
UNIT 02	Hospital		Date of Death		Time of Death

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UNIT

02

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