

6TL0F2KRF1  
25-07398


# 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>25-07398</b>		Investigating Officer/Deputy <b>DEPUTY I. GALVAN</b>	
Crash Date <b>07/16/2025</b>		Crash Time <b>12:12 PM</b>		Date Arrived <b>07/16/2025</b>		Time Arrived <b>12:30 PM</b>	
Date Notified <b>07/16/2025</b>		Time Notified <b>12:14 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
	Photos By <b>I GALVAN</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 1 WAS TRAVELING EASTBOUND ON LINN ST APPROACHING THE INTERSECTION WITH W PINE ST. UNIT 1 IS ADAMANT HER STOP LIGHT WAS GREEN. UNIT 1 CONTINUED EASTBOUND AND STRUCK UNIT 2 WHO WAS TURNING LEFT FROM LINN STREET ONTO SOUTHBOUND W PINE ST. UNIT 2 ALSO CLAIMS HE HAD A GREEN ARROW TO TURN. THERE WAS A WITNESS TO THE INCIDENT WHO SEVERAL CARS BEHIND THE INCIDENT. THE WITNESS STATES SHE BELIEVES UNIT 2 HAD A GREEN ARROW TO TURN. SEVERAL BUSINESS SURROUND THE INTERSECTION BUT NONE HAVE CAMERAS THAT WOULD HAVE VIEW OF THE INTERSECTION TO VERIFY. NO INJURIES WERE REPORTED. UNIT 2 WAS REMOVED BY CRAIG'S TOWING.

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Location

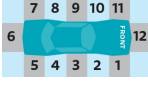
INTERSECTION ON STH33 EB AT CTHBD SB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude <b>43.47473432</b>	Longitude <b>-89.768917263</b>
	X Coordinate <b>276050.65625</b>	Y Coordinate <b>4817260</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</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>FOUR-WAY 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>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>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>35</b>	Total Lanes <b>5</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>DIVIDED HWY W/TRAFFIC BARRIER</b>		Traffic Control <b>TRAFFIC SIGNAL</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>923WMX</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>1GNKRFKD5FJ223307</b>		Make <b>CHEV</b>	Year <b>2015</b>	Model <b>TRAVERSE L</b>			
Color <b>BLU - BLUE</b>		Body Style <b>LL - CARRYALL</b>		Bus Use			
Initial Contact Point <b>12 - FRONT</b>		<b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT</b>					
Extent Of Damage <b>FUNCTIONAL DAMAGE</b>							



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UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>	
		What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
		Driver Prior Action Other		<b>NOT APPLICABLE</b>	
		Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01	01	Owner Name <b>BRIAN KIERZEK</b> (608) 963-7912		Owner Address <b>1118 19TH ST</b> <b>BARABOO, WI 53913 , US</b>	
		<b>Sequence Of Events</b>			
01	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
	02	Event			
	03	Event			
	04	Event			
UNIT	INDIVIDUAL	<b>Policy Holder</b>			
		Insurance Company <b>STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO</b>		INDIVIDUAL <b>LEAH KIERZEK</b>	
01	001	DRIVER <b>LEAH KIERZEK</b> (608) 393-8694		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Address <b>1118 19TH ST</b> <b>BARABOO, WI 53913 , US</b>		Date of Birth	Race <b>WHITE</b>
01	001	On Duty Crash		Safety Equipment	
		Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
01	001	Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
01	001	Injury <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>	
01	001	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
		Hospital		Date of Death	Time of Death
01	001	<b>Distracted By</b> Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
		Distracted By Action <b>NOT DISTRACTED</b>			

Wisconsin Motor Vehicle Crash  
Form DT4000

This report does not include any CJIS data.  
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Crash Date **07/16/2025**  
Crash Time **12:12 PM**

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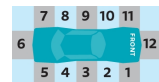
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UNIT 01	INDIVIDUAL 001	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				
		Action				
		Action Other				
		To/From School				
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO		Suspected Drug Use NO
		Alcohol Test Given TEST NOT 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				

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				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 SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	Total Lanes 5	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/TRAFFIC BARRIER		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 02	VEHICLE 02	<b>Vehicle</b>				
		License Plate Number VM4705		Plate Type LTK	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1GCEK14KXPZ232788		Make CHEV	Year 1993	Model GMT-400
		Color DBL - BLUE, DARK		Body Style PK - PICKUP		Bus Use
		Initial Contact Point 04 - RIGHT SIDE REAR		Vehicle Damage		
		Extent Of Damage DISABLING DAMAGE		04 - RIGHT SIDE REAR, 14 - UNDERCARRIAGE		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By CRAIGS TOWING		



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UNIT VEHICLE	What Driver Was Doing <b>LEFT TURN</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
	Owner Name <b>JOHN MEARS</b> (608) 495-5388		
02	Owner Address <b>414 W BROADWAY</b> <b>ROCK SPRINGS, WI 53961 , US</b>		
<b>Sequence Of Events</b>			
01	Event <b>MOTOR VEH IN TRANSPORT</b>		
02	Event		
03	Event		
04	Event		
UNIT INDIVIDUAL	<b>Policy Holder</b>		
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>	INDIVIDUAL <b>HUNTER MEARS</b>	
	<b>Individual</b>		
	DRIVER <b>HUNTER MEARS</b> (608) 495-5388	Citations Issued <b>0</b>	Sex <b>MALE</b>
	Date of Birth	Race <b>WHITE</b>	
	Address <b>414 W BROADWAY</b> <b>ROCK SPRINGS, WI 53961 , US</b>		
	Driver License Number		
UNIT 002	<b>Safety Equipment</b>		On Duty Crash
	Safety Equipment		
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<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
	<b>Distractions</b>	Distraction By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
Distraction By Action <b>NOT DISTRACTED</b>			
<b>Non Motorist</b>	Striking Unit #	Location	

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UNIT INDIVIDUAL          02 002	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>Witness</b>				
	WITN ESS 01	Individual <b>HANNAH HAMILTON</b> (608) 940-8937		Address <b>305 LYNN AVE # A201 BARABOO, WI 53913 , US</b>	