

6TL0DQPGHT  
SC25-08327

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>SC25-08327</b>		Investigating Officer/Deputy <b>DEPUTY B. SONN</b>	
Crash Date <b>08/09/2025</b>		Crash Time <b>99:99</b>		Date Arrived <b>08/09/2025</b>		Time Arrived <b>01:33 AM</b>	
Date Notified <b>08/09/2025</b>		Time Notified <b>12:14 AM</b>		Total Units <b>01</b>		Total Injured <b>01</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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>9104</b>
	Additional Information <b>PHOTOS, DASH CAMERA VIDEO, BODY CAMERA VIDEO</b>

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

I RESPONDED TO A SINGLE VEHICLE ROLLOVER CRASH AT STH 58, EAST OF QUAKER VALLEY RD. CONTACT WAS MADE WITH THE SINGLE OCCUPANT AND OPERATOR/DRIVER. DRIVER SHOWED SIGNS OF IMPAIRMENT AND ADMITTED TO CONSUMING INTOXICATED BEVERAGES BEFORE DRIVING. DRIVER DENIED ANY INJURY, BUT DID HAVE SOME CUTS AND SCRAPES ON HER ARMS. DRIVER SAID SHE HAD HER SEAT BELT ON AND WAS NOT EJECTED. DRIVER SAID NOBODY ELSE WAS IN THE VEHICLE WITH HER. DRIVER SAID SHE WAS DRIVING FROM BREWSTER'S LANES (BAR/BOWLING ALLEY). DRIVER SAID SHE WAS TRAVELING SOUTHBOUND FROM REEDSBURG TO CAZENOVIA. DRIVER PERFORMED SFST AND FURTHER SIGNS OF IMPAIRMENT OBSERVED. DRIVER ARRESTED FOR OWI 1ST, AND DRIVING TOO FAST FOR CONDITIONS. OWNER OF VEHICLE ARRIVED ON SCENE AND PROVIDED INSURANCE INFORMATION. VEHICLE WAS REMOVED FROM THE SCENE BY SHIELD'S TOWING. DRIVER RELEASED TO SOBER RESPONSIBLE PARTY.

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Location

ON STH58 SB 0.34 MI E OF QUAKER VALLEY DR IN THE TOWN OF IRONTON IN SAUK COUNTY	Latitude 43.536037326	Longitude -90.186446579
	X Coordinate 242540.171875	Y Coordinate 4825277.5
	Structure Type	

Crash Scene

First Harmful Event DITCH		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) NONE			
Weather Condition(s) CLEAR			
Animal Type		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	
Closure Type FULL CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 08/09/2025	Time Initial Lane/Rd Closed 01:00 AM	LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date All Lanes Open 08/09/2025	Time All Lanes Open 01:13 AM	Date Scene Cleared 08/09/2025	Time Scene Cleared 01:13 AM

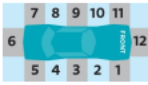
Unit Summary

UNIT 01	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 2	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With DITCH		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 CONCRETE		Road Curvature CURVE LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	VEHICLE 01	Vehicle				
		License Plate Number UW7743	Plate Type LTK	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 1D7HU16N75J566471		Make DODG	Year 2005	Model RAM 1500		

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UNIT	VEHICLE	Color <b>BLK - BLACK</b>	Body Style <b>PK - PICKUP</b>	Bus Use
		Initial Contact Point <b>02 - RIGHT SIDE FRONT</b>	Vehicle Damage	
		Extent Of Damage <b>DISABLING DAMAGE</b>	<b>15 - ALL AREAS</b>	
		Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>SHIELDS TOWING</b>	
		What Driver Was Doing <b>NEGOTIATING CURVE</b>	Vehicle Factors	
		Driver Prior Action Other	<b>NOT APPLICABLE</b>	
UNIT	VEHICLE	Driver Actions <b>SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY, OVER-CORRECTING/OVER-STEERING</b>		
		Owner Name <b>BRENT ASTLE (608) 415-7024</b>	Owner Address <b>32104 SAINT BRIDGETS RD CAZENOVIA, WI 53924 , US</b>	
		<b>Sequence Of Events</b>		
		Event <b>DITCH</b>		
		Event <b>OVERTURN/ROLLOVER</b>		
		Event		
UNIT	VEHICLE	Event		
		<b>Policy Holder</b>		
		Insurance Company <b>PROGRESSIVE-UNIVERSAL-INSURANCE-COMP</b>	INDIVIDUAL <b>BRENT ASTLE</b>	
		<b>Individual</b>		
		DRIVER <b>AUBRIANA KOCH (608) 415-7024</b>	Citations Issued <b>2</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>	
UNIT	INDIVIDUAL	Address <b>32104 SAINT BRIDGETS RD CAZENOVIA, WI 53924 , US</b>		Driver License Number
		<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	
UNIT	INDIVIDUAL	<b>Injury</b>		
		Injury Severity <b>SUSPECTED MINOR 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 #

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UNIT INDIVIDUAL 01 001 02 01	Hospital		Date of Death		Time of Death	
	<b>Distracted By</b>		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED					
	<b>Non Motorist</b>		Striking Unit #		Location	
	Prior Action					
	Action					
	Action Other					
	To/From School					
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use YES		Suspected Drug Use NO	
	Alcohol Test Given TEST GIVEN		Alcohol Test Type BLOOD		Alcohol Test Results PENDING	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL					
	<b>Violations</b>					
	UTC Number BJ679145		Issue To? 001		Statute Number 346.63(1)(a)	
UTC Number BJ679146		Issue To? 001		Statute Number 346.57(3)		
				Description OPERATING WHILE UNDER THE INFLUENCE		
				Description DRIVING TOO FAST FOR CONDITIONS		