6TL0F51TLJ 25-09076

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Crash Document #			Agency Crash Number 25-09076			Investigating Officer/Deputy SERGEANT E. KNULL				
6TL0F51TLJ	Crash Date Crash Time 08/29/2025 07:19 AM			Date Arrived		Tim	Time Arrived				
	Date Notified Time Notified 08/29/2025 07:19 AM		Total Units 01		its	Total 00		al Injured	Total Killed 00		
	On Emergency Hi	it and Run	Lane Closu	Lane Closure Work Zone			Trailer or Towed		Reporting Threshold		
	Government Property Active School Zone				School Bus Related NO		Tag	Tags			
					RY		Amended Secondary Crash				
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
	Location										
:	ON LINN ST/ STH136 WB					Latitude Longitude					
	0.62 MI W				ı			_	104069		
	OF STH33 EB IN THE TOWN OF BARABOO				X Coordinate 274506.6875				Y Coordinate 4817549		
	IN SAUK COUNTY					Structure Type NO STRUCTURE					
	Crash Scene										
	First Harmful Event					Firet Harm	ful Event I	ocation			
	NON DOMESTICATED ANIMAL (ALIVE)						First Harmful Event Location ON ROADWAY				
	Manner of Collision 00 - NO COLLISION W/VEHI	CLE IN TRANS	PORT			Light Condition					
	Road Surface Condition(s)					Roadway	Factor(s)				
	Environment Factor(s) Weather Condition(s)										
	Animal Type DEER				Relation To Trafficway TRAFFICWAY - ON ROAD						
	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
	Tribal Land				Access Control Special Study						
Ì	Unit Summary			· · · · ·			· · · · ·				
	Unit Status Vehicle Operating As C					assification Unit Type					
	IN TRANSIT D CLASS						TRUCK				
10	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				Operating As Endorsements						
				al # Citation	# Citations Issued To		Total Tra	tal Trailers		Mat Types	
	1		0			0			0		
UNIT	Insurance?	Direction Of Trave	l e	Pre CrashTire		C				es	
		WESTBOUND		Mark		'					
				Special Function			Emergency Motor Vehic				
)	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION		TION	NOT APP		PLICABLE	LICABLE	
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
,	Surface Type			Road Curvature				Road Grade			
				Road Curvature				Trodu Glauc			
							_	· <u> </u>	_		

NO

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date 08/29/2025
Crash Time 07:19 AM

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	Truck Bus or HazMat								
	Vehicle								
UNIT 01		License Plate Number UF9224	Plate Type LTK	St WI	Country of Issuance UNITED STATES				
	VEHICLE 01	Vehicle Identification Number 3TYSX5EN6NT012037	Make TOYT	Year 2022	Model TACOMA				
		Color GRY - GRAY	PK - PICKUP	Body Style PK - PICKUP Bus Use					
		Initial Contact Point 12 - FRONT Extent Of Damage FUNCTIONAL DAMAGE	01 - RIGHT FRONT CORNER, 12 - FRO	Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT 5 4 3 2 1					
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	Vehicle Removed By OPERATOR					
		What Driver Was Doing	Vehicle Factors	Vehicle Factors					
		Driver Prior Action Other							
TIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION							
		Owner Name	Owner Address	Owner Address					
2	2								
<u>⊨</u>		Policy Holder							
PIND		Insurance Company GEICO-GENERAL-INS-CO	ROBERT DOYLE						
	- 1	Individual							
	INDIVIDUAL	DRIVER ROBERT DOYLE	Citations Issued 0	Sex MALE	ALE				
Ŀ		(410) 404-3085	Date of Birth	Race WHITE					
LIND		Address 427 MAXWELL ST BARABOO, WI 53913 , US	Driver License Number	Driver License Number					
	Sat	On Duty Crash fety Equipment	Safety Equipment	Safety Equipment					
		Row Seat Position	SHOULDER & LA	SHOULDER & LAP BELT					
		Helmet Use	Helmet Compliance	Helmet Compliance					
		Eye Protection	Tint Compliance	Tint Compliance					
2	00	Injury Seventy NO APPARENT INJURY	Airbag	Airbag					
		Ejected Ejection Path			Trapped/Extricated				
		Medical Transport NOT TRANSPORTED	EMS Agency Identifie	r	EMS Run #				
		Hospital	Date of Death		Time of Death				

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $2 \quad \text{of} \quad 3$

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		Distracted By	Distracted By Source	•				
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	JAL							
UNIT	INDIVIDUAL							
	<u>N</u>							
		Action Other						To/From School
	1	Drug & Alcohol NO			Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	<u> </u>		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
2	00	Drug Type						
		Individual Condition						
		APPEARED NORM	MAL					