

6TL0F3SSJG  
25-09313


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>25-09313</b>		Investigating Officer/Deputy <b>DEPUTY A. KING</b>	
Crash Date <b>09/03/2025</b>		Crash Time <b>09:44 AM</b>		Date Arrived <b>09/03/2025</b>		Time Arrived <b>09:52 AM</b>	
Date Notified <b>09/03/2025</b>		Time Notified <b>09:45 AM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input checked="" 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>A. KING</b>
		Additional Information <b>PHOTOS</b>

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

U1 WAS TRAVELING SOUTHBOUND FROM A 4-UNIT APARTMENT COMPLEX WHEN THE OPERATOR STATED SHE WAS ON HER PHONE AND STRUCK THE POLE PROTECTING THE ATM OF PREVAIL BANK. OPERATOR OF U1 ADMITTED TO NOT HAVING INSURANCE FOR THE VEHICLE. OPERATOR OF U1 DENIED ANY INJURIES. OPERATOR RECEIVED CITATION NOTICE OF COURT APPEARANCE FOR FELONY BAIL JUMP, AND OPERATING AFTER REVOCATION CRIMINAL AND TRAFFIC CITATIONS FOR NOT HAVING AUTOMOBILE INSURANCE AND FAILURE TO NOTIFY LAW ENFORCEMENT OF CRASH. CRAIG'S TOWING RESPONDED FOR THE VEHICLE.



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**Location**

PARKING LOT 8TH AVE/ STH33 WB LOT IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude <b>43.475682164</b>	Longitude <b>-89.759257379</b>
	X Coordinate <b>276835.46875</b>	Y Coordinate <b>4817339.5</b>
	Structure Type	

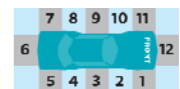
**Crash Scene**

First Harmful Event <b>OTHER POST, POLE OR SUPPORT</b>		First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>WET</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLOUDY</b>			
Animal Type		Relation To Trafficway <b>NON TRAFFICWAY - PARKING LOT</b>	
Crash Classification - Location <b>PRIVATE PROPERTY</b>		Crash Classification - Jurisdiction <b>PRIVATE PROPERTY</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

**Unit Summary**

UNIT 01	Unit Status <b>HIT AND RUN</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>3</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>0</b>	
	Most Harmful Event: Collision With <b>OTHER POST, POLE OR SUPPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</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>AGN2832</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>JA4AD2A31HZ059704</b>		Make <b>MIT</b>	Year <b>2017</b>	Model <b>OUTLANDER</b>
	Color <b>BLK - BLACK</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
	Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage  <b>12 - FRONT</b>		
	Extent Of Damage <b>DISABLING DAMAGE</b>				





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UNIT	VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>CRAIGS TOWING</b>		
		What Driver Was Doing		Vehicle Factors		
		Driver Prior Action Other		<b>NOT APPLICABLE</b>		
		Driver Actions <b>OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>				
01	01	Owner Name <b>SARAH LEWIS</b>		Owner Address <b>N6548 HY51 PORTAGE, WI 53901 , US</b>		
		<b>Sequence Of Events</b>				
01	01	Event <b>OTHER POST, POLE OR SUPPORT</b>				
		Event				
		Event				
		Event				
04	03	Event				
		Event				
		Event				
		Event				
UNIT	INDIVIDUAL	<b>Individual</b>				
		DRIVER <b>SARAH LEWIS</b>		Citations Issued <b>3</b>	Sex <b>FEMALE</b>	
		Address <b>N6548 HY51 PORTAGE, WI 53901 , US</b>		Date of Birth	Race <b>WHITE</b>	
		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>				
01	001	<b>Safety Equipment</b>		On Duty Crash		
		Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	<b>RESTRAINT USE UNKNOWN</b>	
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
01	001	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NOT APPLICABLE</b>	
		Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT APPLICABLE</b>	
		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>				
01	001	Distracted By Action <b>NOT DISTRACTED</b>				
		<b>Non Motorist</b>				
01	001	Striking Unit #		Location		



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**WITN 01**