

6TL0F3SSJN

25-09975


# 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>25-09975</b>		Investigating Officer/Deputy <b>DEPUTY A. KING</b>	
Crash Date <b>09/22/2025</b>		Crash Time <b>07:27 AM</b>		Date Arrived <b>09/22/2025</b>		Time Arrived <b>07:31 AM</b>	
Date Notified <b>09/22/2025</b>		Time Notified <b>07:28 AM</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 type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

## Description

Diagram		Reconstruction By
<p>Not to scale</p> 		Photos By
		Additional Information <b>NONE</b>

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

OPERATOR OF U2 STATED HE WAS STATIONARY ON HY23 WAITING TO TURN WESTBOUND ON HY14 WHEN U1 PULLED UP BEHIND AND STOPPED. OPERATOR OF U2 THEN SAID U1 THEN ROLLED INTO HIM WHILE STILL STOPPED. OPERATOR OF U1 STATED SHE WAS TIRED AND MIGHT HAVE TAKEN HER FOOT OFF THE BRAKE AND ROLLED INTO U2. OPERATOR OF U1 STATED SHE THOUGHT U2 REVERSED INTO HER AS WELL. OPERATOR OF U2 DENIED SHIFTING THE VEHICLE INTO REVERSE AND CLAIMED U1 ROLLED INTO HIM. NO DAMAGE TO U2 AND MINOR DAMAGE TO U1. NO INJURIES REPORTED FROM BOTH VEHICLES AND THE OPERATORS REMOVED THE VEHICLES FROM THE SCENE.

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## Location

INTERSECTION ON USH14 WB AT STH23 EB IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude <b>43.18557279</b>	Longitude <b>-90.064224242</b>
	X Coordinate <b>250985.390625</b>	Y Coordinate <b>4785982</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>03 - FRONT TO REAR</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</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>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>3</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"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>25</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>STOP SIGN</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>AXV7236</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1N4BL4DV3PN342770</b>		Make <b>NISS</b>	Year <b>2023</b>	Model <b>ALTIMA</b>
	Color <b>SIL - SILVER (ALUMINUM)</b>		Body Style <b>SD - SEDAN</b>		Bus Use
	Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage		
	Extent Of Damage <b>MINOR DAMAGE</b>		<b>12 - FRONT</b>		



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UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>	
		What Driver Was Doing <b>STOP IN TRAFFIC</b>	Vehicle Factors	
		Driver Prior Action Other	<b>NOT APPLICABLE</b>	
		Driver Actions <b>FOLLOWING TOO CLOSE, FAILURE TO CONTROL</b>		
01	01	Owner Name <b>BRAYTON PUTZ</b> (608) 393-1652	Owner Address <b>305 LYNN AVE # A106</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	INDIVIDUAL <b>BRAYTON PUTZ</b>	
01	001	<b>Individual</b>		
		DRIVER <b>SARAH JOHNSON</b> (608) 393-1652	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
			Date of Birth	Race <b>WHITE</b>
		Address <b>305 LYNN AVE # A106</b> <b>BARABOO, WI 53913 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	001	<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	
01	001	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 #
01	001	Hospital	Date of Death	Time of Death
		<b>Distracted By</b>		
		Distracted By Source <b>UNKNOWN</b>		
		Distracted By Action <b>UNKNOWN</b>		

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UNIT INDIVIDUAL	01	001	<b>Non Motorist</b>		Striking Unit #	Location		
			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>					
UNIT INDIVIDUAL	01	002	<b>Individual</b>					
			PASSENGER <b>JACOB PUTZ</b> <b>(608) 393-1652</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>		
					Date of Birth	Race <b>WHITE</b>		
			Address <b>305 LYNN AVE # A106</b> <b>BARABOO, WI 53913 , US</b>		Driver License Number			
			<b>Safety Equipment</b>		On Duty Crash		Safety Equipment	
			Row <b>02 - SECOND ROW</b>	Seat Position <b>07 - LEFT</b>	<b>CHILD RESTRAINT SYSTEM - FORWARD FACING</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>Distracted By</b>		Distracted By Source						
Distracted By Action								
<b>Non Motorist</b>		Striking Unit #		Location				

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UNIT	INDIVIDUAL	Prior Action			
		Action			
01	002	Action Other			To/From School
		<b>Drug &amp; Alcohol</b> Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
01	002	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
01	002	Drug Type			
		Individual Condition <b>APPEARED NORMAL</b>			
UNIT	INDIVIDUAL	<b>Individual</b>			
		PASSENGER <b>PIPER CORNWELL</b> (608) 393-1652		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
01	003	Date of Birth <b>WHITE</b>		Race <b>WHITE</b>	
		Address <b>305 LYNN AVE # A106</b> <b>BARABOO, WI 53913 , US</b>		Driver License Number	
01	003	<b>Safety Equipment</b> On Duty Crash		Safety Equipment <b>BOOSTER SEAT</b>	
		Row <b>02 - SECOND ROW</b>	Seat Position <b>09 - RIGHT</b>	Helmet Use	
01	003	Eye Protection		Tint Compliance	
		<b>Injury</b> Injury Severity		Airbag <b>NON DEPLOYED</b>	
01	003	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>	
01	003	EMS Agency Identifier		EMS Run #	
		Hospital		Date of Death	
01	003	Time of Death		<b>Distracted By</b> Distracted By Source	
		Distracted By Action		<b>Non Motorist</b> Striking Unit #	
01	003	Location		Prior Action	

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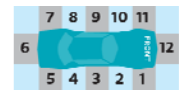
(608) 356-4895

UNIT 01	INDIVIDUAL 003	Action			
		Action Other			
		To/From School			
		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>			

## Unit Summary

UNIT 02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>	
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</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>25</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>STOP SIGN</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 02	VEHICLE 02	<b>Vehicle</b>				
		License Plate Number <b>KZ3109</b>		Plate Type <b>LTK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1GCVKPEC7EZ351924</b>		Make <b>CHEV</b>	Year <b>2014</b>	Model <b>SILVERADO</b>
		Color <b>WHI - WHITE</b>		Body Style <b>PK - PICKUP</b>		Bus Use
		Initial Contact Point <b>06 - REAR</b>		Vehicle Damage		
		Extent Of Damage <b>NO DAMAGE</b>		<b>00 - NO DAMAGE</b>		
		Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>		
		What Driver Was Doing <b>STOP IN TRAFFIC</b>				



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UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors <b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>WISCONSIN POWER AND LIGHT CO</b>		Owner Address <b>4902 N BILTMORE LN MADISON, WI 53718 , US</b>	
	<b>Sequence Of Events</b>			
UNIT 02	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT INDIVIDUAL	<b>Policy Holder</b>			
	Insurance Company <b>WISCONSIN-POWER-&amp;-LIGHT-COMPANY</b>		ORGANIZATION/COMPANY <b>WISCONSIN POWER AND LIGHT CO</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>NATHAN FIEDLER (210) 727-1755</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>870 W MADISON ST PLATTEVILLE, WI 53818 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
UNIT 02	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	Safety Equipment <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>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
	Distracted By Action <b>NOT DISTRACTED</b>			
<b>Non Motorist</b>		Striking Unit #	Location	

UNIT	INDIVIDUAL	Prior Action					
		Action					
		Action Other			To/From School		
		Drug & Alcohol		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					