WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/26/2025

Document Number Override	Primary Crash D	ocument #	25-10°		DEPUTY	g Officer/Depu S. ELLICKSO	
Crash Date 09/26/2025	Crash Time 07:51 AM		Date Ai 09/26/		Time Arrive 08:05 AM		
Crash Date 09/26/2025 Date Notified 09/26/2025 On Emergency Hit Government Property	Time Notified 07:51 AM		Total U 02	nits	Total Injure	d Total Ki	
On Emergency Hit	and Run	Lane Closu		Work Zone		r or Towed	Reporting Threshold
Government Property		hool Zone	NO School	Bus Related	Tags		
▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amen	ded	Secondary Crash
Description Diagram						Is , ,	
Not to Scale					M⊲∰ÇE	Reconstruction Photos By	оп ву
		STH	I 136				
						Additional In PHOTOS	formation
01		2					
✓ I, a sworn law enforceme	nt officer, agre	e that I have no	ot added	d any CJIS data in ti	nis report.		
UNIT 1 AND 2 WERE TRAVELING E DRIVE WAY. UNIT 1 WAS COMING							

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La	ocation =									
	N E BROADWAY/ ST	TH136	6 EB			Latitude			Longit	ude
	.29 MI E					43.47674	49771		-89.903003742	
	F SMYTHE ST		·			X Coordin	ate		Y Coo	rdinate
	N THE VILLAGE OF F N SAUK COUNTY	ROCE	SPRINGS			265213.09375 4817853.5				
"	TOAGIT GOOTTI					Structure	Туре			-
						NO STR	UCTURE			
Cı	rash Scene									
Fi	irst Harmful Event					First Harm	nful Event Lo	ocation		
	IOTOR VEH IN TRAN	RT		ON ROADWAY						
	lanner of Collision					Light Con				
	3 - FRONT TO REAR				DAYLIG Roadway					
	Road Surface Condition(s) DRY						racioi(s)			
E	nvironment Factor(s)					4				
	BLARE					NONE				
	Veather Condition(s)					-				
	LEAR									
A	nimal Type					Relation T	o Trafficwa	N/		
	a. 1 yps					TRAFFIC	•			
С	rash Classification - Loca	ation				Crash Classification - Jurisdiction				
PUBLIC PROPERTY						NO SPECIAL JURISDICTION				
Tı	ribal Land		Access Control NO CONTROL					Special Study		
W	/ithin Interchange Area	1,	Junction Location		Intersection Type					
N	10		NON-JUNCTION		NOT AN	INTERSE	CTION			
Uı	nit Summary									
U	nit Status				erating As 0	Classification Unit Type				
	IN TRANSIT D CLASS					AUTOMOBILE				
	ehicle Type ASSENGER CAR					Operating As Endorsements				
	otal Occs		Train/Bus # Recorded	Total # Cita	d Total Traile		ilers Total HazMat 1		azMat Types	
1				0			0		0	
	surance?		Direction Of Travel	Pre CrashTir Mark		ire Speed Lim 55		2		ines
Υ	ES		EASTBOUND							
	lost Harmful Event: Collis IOTOR VEH IN TRAN	ful Event: Collision With /EH IN TRANSPORT			nction CIAL FUNC	CTION		Emergency Motor Vehicle Use NOT APPLICABLE		
Tı	raffic Way	Traffic Cont	Traffic Control			Traffic Control Inoperative/Missing				
	WO-WAY, NOT DIVID	DED		NO CONT				NO Road Grade		
	urface Type			Road Curva						
	SLACKTOP (BITUMIN	lous)	STRAIGH	I			UPHILL		
	IO									
	Vehicle									
	License Plate Number AYB6612 Vahiela Identification Number			Plate Type)	St		Country of Issuance UNITED STATES		
				AUT			WI Year			
5	Vehicle Identification Number 3FA6P0H77ER131317			FORD	Make			Model FUSION		
	3FA6P0H77ER131317 Color			FORD Body Style		2014		Bus Use		
	BLU - BLUE				SD - SEDAN			240 000		
Ц	☐ Initial Contact Point			Vehicle Da				1		
٥	12 - FRONT Extent Of Damage									7 8 9 10 11 6
	Extent Of Damage				DNT	5 4 3 2 1				
	DISABLING DAM	1								

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		Towed Due To Damage		Ve	nicle Removed By					
		TOWED DUE TO DISABL	ING DAMAGE		RAIGS TOWING					
		What Driver Was Doing		Ve	nicle Factors					
		GOING STRAIGHT								
		Driver Prior Action Other		NC	T APPLICABLE					
		Driver Actions								
	Щ	OTHER CONTRIBUTING	ACTION							
╘	CL									
LNO	VEHICLE									
_	ΛE									
		Owner Name			Owner Address					
_	1	BRETT WETLEY			28622 CLARY LN					
2	01	(608) 383-9477			RICHLAND CENTE	:R, WI 53581 , U	S			
		Sequence Of Events								
	01	Event MOTOR VEH IN TRANSP	ORT							
	•	Event								
	02									
	03	Event								
		Event								
	04	LVCIII								
—	ı	Policy Holder								
LNO		Insurance Company			NDIVIDUAL					
_	PROGRESSIVE-CLASSIC-INS-CO				BRETT WETLEY					
	ı	ndividual								
		DRIVER		T	Citations Issued	Sex				
	_	BRETT WETLEY		(0 MALE					
	JA	(608) 383-9477		Ī	Date of Birth Race					
╘	INDIVIDUAL				WHITE					
	<u>></u>	Address			Driver License Number					
	N	28622 CLARY LN RICHLAND CENTER, WI	53581 IIS		STATE: WISCONSIN COUNTRY: UNITED STATES					
	_	MOTILAND CLITTER, WI	33301 , 03	'	STATE. WISSONSIN SOSTITION STATES					
	Sat	On Duty fety Equipment	/ Crash	1	Safety Equipment					
	- Cu.				0110111 050 0 1 40 051 7					
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	'	SHOULDER & LAP BELT					
		Helmet Use	07 - 221 1		Helmet Compliance					
		Heimer Ose			Tromat compilation					
		Eye Protection			Tint Compliance					
					,					
_	Ξ	Injury S	everity	,	Airbag					
2	00	Injury NO AP	PARENT INJURY	l	NON DEPLOYED					
		Ejected	Ejection Path				Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT A				NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED			2		T: (B ::			
		Hospital			Date of Death		Time of Death			
		Distract	ed By Source							
		Distracted By NOT A	PPLICABLE (NOT DIST	RAC1	ED)					
		Distracted By Action								
		NOT DISTRACTED								

Crash Date 09/26/2025 Crash Time 07:51 AM

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Crash Date 09/26/2025

		Non Motorist	Striking Unit#	Location							
		Prior Action		•							
TINO	INDIVIDUAL	Action									
	IN	Action Other						To/From School			
	L	Orug & Alcohol	Suspected Alcohol U NO	lse	Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Res	sults			
		Drug Test Given TEST NOT GIVEN				Drug Test Result	5				
6	001	Drug Type									
		Individual Condition									
		APPEARED NORM	AL								
		t Summary $\ lacktriangleq$									
	Unit	Unit Status			ehicle Operating As Classi	fication	Unit Type				
		RANSIT		D	CLASS		TRUCK				
02		cle Type LITY TRUCK/PICKUP TRUCK					Operating As En	dorsements			
	Tota 1	l Occs	Train/Bus # Re	corded To	otal # Citations Issued	Total Trai 0	ers Tota 0	al HazMat Types			
⊢	Insu	rance?	Direction Of Tra		Pre CrashTire Mark	Speed Lir 55	nit Tota	al Lanes			
LINO		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			pecial Function O SPECIAL FUNCTIO	N	NOT APPLICA	ABLE			
		fic Way			affic Control		Traffic Control Inoperative/Missing				
		O-WAY, NOT DIVIDED ace Type			O CONTROL		NO Road Grade				
		ACKTOP (BITUMINO	IIS)		oad Curvature TRAIGHT		UPHILL				
		k Bus or HazMat					OT THEE				
		Vahiala									
		Vehicle License Plate Number		Tp	Plate Type	St	Country of Issuan	nce			
		UU8788			.TK	WI	UNITED STATES				
8	~ 1	Vehicle Identification Number			1ake	Year	Model				
02	02	3B7HF13ZX1G727659			OODG	2001	RAM 1500 Q				
		Color SIL - SILVER (ALUI	MINUM)	F	ody Style PK - PICKUP		Bus Use				
	Щ	Initial Contact Point		٧	ehicle Damage			7 8 9 10 11			
LIND	VEHICLE	06 - REAR Extent Of Damage MINOR DAMAGE		(06 - REAR 6 5 4 3 2						
		Towed Due To Damage	e	V	Vehicle Removed By						
		NOT TOWED			OPERATOR						

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		What Driver Was Doin	ıg			Veh	icle Factors				
		SLOW/STOPPING									
		Driver Prior Action Oth	ner			NO	T APPLICABLE				
		Driver Actions	G ACTI	ON							
_	;LE	NO CONTRIBUTING ACTION									
LNO	VEHICL										
–	Æ										
		Owner Name					Owner Address				
02	BRIAN WESTERWELLE S6186A COUNTY ROAD PF NORTH FREEDOM, WI 53951, US										
0	0	333, 133 233 .					NORTHINEEDON	, 111 00001 , 00	,		
		015	•								
		Sequence Of Ev Event	ents/								
	01	MOTOR VEH IN TRANSPORT									
	02	Event									
	03	Event									
		Event									
	04										
_		Policy Holder									
LNO		Insurance Company			INDIVIDUAL						
\supset		PROGRESSIVE-CLASSIC-INS-CO				BRIAN WESTERWELLE					
	ı										
		DRIVER					itations Issued	Sex			
	Ļ	DYLAN WESTERWELLE (608) 495-2034				0		MALE			
	INDIVIDUAL						ate of Birth	Race WHITE			
	ΝE	Address				Driver License Number					
\supset	Ē	S6186A COUNTY ROAD PF									
	=	NORTH FREEDOM, WI 53951 , US				STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	fety Equipment				S	afety Equipment				
		Row Seat Position				SHOULDER & LAP BELT					
		01 - FRONT ROW									
		Helmet Use	I			Helmet Compliance					
		Eye Protection				Tint Compliance					
02	002	Injury	Injury Se	verity			irbag				
J	0		NO API	PARENT I	NJURY	NON DEPLOYED					
		Ejected NOT EJECTED		Ejection Pa	ith CTED/NOT APP	LIC	ABLE		Trapped/Extricated NOT TRAPPED		
		Medical Transport	1				MS Agency Identifier		EMS Run #		
	NOT TRANSPORTED										
	Hospital Date of Death								Time of Death		
		Distracted By	Distracte	d By Source	e .E (NOT DISTR <i>A</i>	СТ	ED)		ı		
		Distracted By Action			•		·				
		NOT DISTRACTED									
		Non Motorist	Striking l	Jnit#	Location						

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Crash Date 09/26/2025

1							
		Prior Action					
ļ							
		Action					
	A						
⊨	\mathbf{C}						
LNO	INDIVIDUAL						
_							
	Z						
							T= ·
		Action Other					To/From School
				10 (15)			
	L	Orug & Alcohol NO	Jse	Suspected Drug Use NO			
İ		Alcohol Test Given	Alcohol Test Type	•		Alcohol Test Results	
		TEST NOT GIVEN					
İ		Drug Test Given	Drug Test Type		Drug Test Results		
		TEŠT NOT GIVEN					
05	002	Drug Type					
0	ŏ						
		In dividual Condition					
		Individual Condition					
		APPEARED NORMAL					