

6TL0F2KRF4  
25-10435

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>25-10435</b>	Investigating Officer/Deputy <b>DEPUTY I. GALVAN</b>	
Crash Date <b>10/04/2025</b>		Crash Time <b>99:99</b>	Date Arrived <b>10/04/2025</b>	Time Arrived <b>04:30 PM</b>	
Date Notified <b>10/04/2025</b>		Time Notified <b>04:05 PM</b>	Total Units <b>02</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>PRIVATE PROPERTY/PARKING LOT</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p>PARKING LOT/ZONE OF S6330 BLUFF ROAD MERIMAC, WI</p> <p>NOT TO SCALE</p>	Reconstruction By
	Photos By <b>I GALVAN</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 2 WAS LEGALLY PARKED. UNIT 1 STRUCK UNIT 2 WHILE BACKING OUT OF PARKING STALL. PROPERTY OF S6330 HAS NO RECORDING CAMERAS. UNIT 1 IS UNKNOWN. UNIT 2 REMOVED BY OWNER.

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Location

<b>PARKING LOT</b> <b>BLUFF RD LOT S6330</b> <b>(FIRE S6330)</b>  <b>IN THE TOWN OF MERRIMAC</b> <b>IN SAUK COUNTY</b>	Latitude <b>43.416020054</b>	Longitude <b>-89.626313221</b>
	X Coordinate <b>287379.1875</b>	Y Coordinate <b>4810365</b>
	Structure Type <b>FIRE</b>	

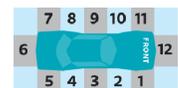
Crash Scene

First Harmful Event <b>PARKED MOTOR VEHICLE</b>	First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>01 - ANGLE</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>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

<b>UNIT</b>	Unit Status <b>HIT AND RUN</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>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>UNKNOWN</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>N/A</b>	Total Lanes <b>1</b>	
	Most Harmful Event: Collision With <b>PARKED MOTOR VEHICLE</b>		Special Function <b>UNKNOWN</b>	Emergency Motor Vehicle Use <b>UNKNOWN</b>		
	Traffic Way <b>UNKNOWN</b>		Traffic Control <b>UNKNOWN</b>	Traffic Control Inoperative/Missing <b>UNKNOWN</b>		
	Surface Type <b>UNKNOWN</b>		Road Curvature <b>UNKNOWN</b>	Road Grade <b>UNKNOWN</b>		
	Truck Bus or HazMat <b>NO</b>					

<b>UNIT</b>	<b>Vehicle</b>				
	<b>01</b>	License Plate Number	Plate Type	St	Country of Issuance
		Vehicle Identification Number	Make	Year	Model
		Color	Body Style	Bus Use	
	<b>VEHICLE</b>	Initial Contact Point <b>99 - UNKNOWN</b>	Vehicle Damage		
		Extent Of Damage <b>VEHICLE NOT AT SCENE</b>	<b>16 - VEHICLE NOT AT SCENE</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		Vehicle Factors		
	Driver Prior Action Other		<b>UNKNOWN</b>		
	Driver Actions <b>UNKNOWN</b>				
01 01	Owner Name		Owner Address , ,		
	<b>Sequence Of Events</b>				
01 02 03 04	Event <b>PARKED MOTOR VEHICLE</b>				
	Event				
	Event				
	Event				
UNIT INDIVIDUAL	DRIVER		Citations Issued <b>0</b>	Sex	
			Date of Birth	Race	
	Address , ,		Driver License Number		
	<b>Safety Equipment</b>				
01 001	On Duty Crash		Safety Equipment		
	Row <b>99 - UNKNOWN</b>	Seat Position	<b>RESTRAINT USE UNKNOWN</b>		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	<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		
<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	
		Action Other	
		To/From School	
		<b>Drug &amp; Alcohol</b>	
		Suspected Alcohol Use	
		Suspected Drug Use	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	
		Alcohol Test Type	
		Alcohol Test Results	
01	001	Drug Test Given <b>TEST NOT GIVEN</b>	
		Drug Test Type	
		Drug Test Results	
		Drug Type	
		Individual Condition <b>NOT OBSERVED</b>	

**Unit Summary**

UNIT	02	Unit Status <b>LEGALLY PARKED</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>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>NOT ON ROADWAY</b>		<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	
		Speed Limit <b>N/A</b>		Total Lanes <b>1</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>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>							

**Vehicle**

UNIT	VEHICLE	02	02	License Plate Number <b>AVH3904</b>		Plate Type <b>AUT</b>		St <b>WI</b>		Country of Issuance <b>UNITED STATES</b>			
				Vehicle Identification Number <b>KMHG34JA0HU033231</b>		Make <b>GNSS</b>		Year <b>2017</b>		Model <b>G90</b>			
				Color <b>BLK - BLACK</b>		Body Style <b>SD - SEDAN</b>				Bus Use			
				Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>				Vehicle Damage <b>01 - RIGHT FRONT CORNER, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR</b>					
				Extent Of Damage <b>FUNCTIONAL DAMAGE</b>									
				Towed Due To Damage <b>NOT TOWED</b>				Vehicle Removed By <b>OWNER</b>					
				What Driver Was Doing <b>LEGALLY PARKED</b>									

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UNIT VEHICLE	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
02 02	Owner Name TROY JOHNSON (414) 380-8021	Owner Address 7704 W DENVER AVE MILWAUKEE, WI 53223 , US
	<b>Sequence Of Events</b>	
01 02 03 04	Event	MOTOR VEH IN TRANSPORT
	Event	
	Event	
	Event	
UNIT	<b>Policy Holder</b>	
	Insurance Company GEICO-GENERAL-INS-CO	INDIVIDUAL TROY JOHNSON
UNIT INDIVIDUAL	<b>Individual</b>	
	OCCUPANT TROY JOHNSON (414) 380-8021	Citations Issued 0
		Sex MALE
		Date of Birth
	Address 7704 W DENVER AVE MILWAUKEE, WI 53223 , US	Race BLACK/AFRICAN AMERICAN
	Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES
02 002	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment
	Row 98 - NOT APPLICABLE	Seat Position
	NOT APPLICABLE	
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
	<b>Injury</b>	Injury Severity NO APPARENT INJURY
Ejected UNKNOWN	Ejection Path UNKNOWN	Trapped/Extricated UNKNOWN
Medical Transport NOT TRANSPORTED	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          02 002	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>		