6TL0F51TLN 25-11123

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 25-11123			Investigating Officer/Deputy SERGEANT E. KNULL				
-0F51TLN	Crash Date 10/25/2025	Crash Time 09:17 AM		Date Arrived		Tim	Time Arrived				
	Date Notified 10/25/2025	Time Notified 09:17 AM		Total Units 01		Total 00		al Injured	Total Killed	i	
	On Emergency Hi	and Run Lane Close		ure Work Zone				Trailer or Towed		Reporting Threshold	
6TL	Government Property	nool Zone	School Bus Related NO			Tag	Tags				
	✓ Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			Amended			Secondary Crash			
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
i	Location										
ł	INTERSECTION					Latitude Longitude					
	ON CTHB EB					43.256661028		-89.90		7434208	
	AT GUHL RD					X Coordin	ate		Y Coordinate		
	IN THE TOWN OF TROY IN SAUK COUNTY					264002.28125 47			479342	793422.5	
	IN SAUK COUNT					Structure	Туре		1		
					NO STRUCTURE						
	Crash Scene										
i	First Harmful Event					Firet Harm	ıful Event I	ocation			
	NON DOMESTICATED ANIM				First Harmful Event Location ON ROADWAY						
	Manner of Collision						Light Condition				
	00 - NO COLLISION W/VEHIC	CLE IN TRANSF	PORT			Light Condition					
	Road Surface Condition(s)					Roadway	Factor(s)				
	Environment Factor(s)										
	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type					Deletion To Toeff					
	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	
i	Unit Summary										
Ì	Unit Status Vehicle Operating As 0					lassification Unit Type					
	IN TRANSIT D CLASS				_ASS			AUTOMOBILE			
_	Vehicle Type					Operating As Endorsements					
01	(SPORT) UTILITY VEHICLE										
	Total Occs Train/Bus # Recorded			Total # Citations Issued		Total Trail		ilers Total Haz		Mat Types	
	1	0				0		0			
	Insurance?	Direction Of Travel		Pre CrashTir			Speed Lir	Limit Total Lan		es	
╘	YES EASTBOUND				ark						
UNIT	Most Harmful Event: Collision With			cial Function		TION		Emergency Motor Vehicle Use			
_	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCT			HUN		NOT APPLICABLE		
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			
		1									

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	Truc	k Bus or HazMat						
	,	Vehicle						
		License Plate Number ASD4032	Plate Type AUT	St WI	Country of Issuance UNITED STATES			
5	VEHICLE 01	Vehicle Identification Number 2T3A1RFV6LC070774	Make TOYT	Year 2020	Model RAV4			
		Color GRY - GRAY	Body Style UT - SPORT UTILITY VEHICLE Bus Use					
UNIT		Initial Contact Point 12 - FRONT Extent Of Damage FUNCTIONAL DAMAGE	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					
		What Driver Was Doing	Vehicle Factors					
		Driver Prior Action Other Driver Actions						
UNIT								
		Owner Name	Owner Address					
2	5							
⊨	ı	Policy Holder						
LIND		Insurance Company SAFECO-NATIONAL-INS-CO	ELIZABETH LINS					
	INDIVIDUAL	Individual Edriver	Citations Issued	Sex				
		ELIZABETH LINS	Citations Issued 0	FEMALE				
_		(608) 393-9256	Date of Birth	Race WHITE				
LINO		Address E3846 CTY RD B SPRING GREEN, WI 53588 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	On Duty Crash fety Equipment	Safety Equipment					
	Row Seat Position		SHOULDER & LAP BELT					
	100	Helmet Use	Helmet Compliance					
		Eye Protection	Tint Compliance					
2		Injury Severity NO APPARENT INJURY	Airbag					
		Ejection Path			Trapped/Extricated			
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #			
		Hospital	Date of Death		Time of Death			

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Crash Date 10/25/2025

Crash Time 09:17 AM

		Distracted By	Distracted By Source					
		Distracted By Action						
		Non Motorist	Striking Unit#	Location				
		Prior Action						
		Action						
_	UAL							
L	INDIVIDUAL							
	IN							
		Action Other						To/From School
			Corrected Alachalli		I Constant Description			
	Drug & Alcohol NO			se	Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN Alcohol Test Ty						
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results			
7	001	Drug Type						
		Individual Condition						
APPEARED NORMAL								
		APPEARED NORM	VIAL					