WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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	Document Number Override		Primary Crash Document #		Agency Crash Number 25-10930		Investigating Officer/Deputy DEPUTY I. GALVAN		
F6	Crash Date 10/19/2025		Crash Time 99:99		Date Arrived 10/19/2025		Time Arrived 08:37 AM		
2KR	Date Notified 10/19/2025		Time Notified 08:01 AM		Total Units 01		Total Injured Total Killed 00		
.0F	On Emergency Hit		and Run Lane Closu		re	Work Zone	Trailer or 1	Towed	Reporting Threshold
6TL	Government Property		Active School Zone		School Bus Related NO		Tags		
			Crash Type DT4000 (STANDARD CRASH))		Amended		Secondary Crash

Description



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

UNIT 1 TRAVELING EASTBOUND ON CTH B. UNIT 1 FAILED TO NEGOTIATE CURVE AND LEFT ROADWAY. UNIT 1 STRUCK A CULVERT AND A DITCH CAUSING DISABLING DAMAGE TO THE FRONT AND FRONT AIR BAG DEPLOYMENT. OPERATOR OF UNIT 1 WAS LEFT SCENE. AFTER SPEAKING TO REGISTERED OWNER OF THE UNIT 1 HE STATED OPERATOR HAD FELL ASLEEP AND LEFT ROADWAY. UNIT 1 OPERATOR CONTACTED REGISTERED OWNER TO PICK UP AND TAKE HIM TO HIS APPOINTMENT IN MADISON, WI. EVERETT'S TOWING REMOVED UNIT 1. OPERATOR OF UNIT 1 LATER RECEIVED A CITATION FOR FAILURE TO NOTIFY POLICE OF AN ACCIDENT. DAMAGE TO THE CULVERT WAS VERY MINOR

Location

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Crash Date 10/19/2025

Crash Time 99:99

	ON CTHB 144 FT N OF STH60 EB				43.247055427			Longitude -89.839403325		
	IN T	THE TOWN OF TROY SAUK COUNTY			X Coordinate Y Coordinate 269488.40625 4792165.5					
					Structure Type NO STRUCTUR	RE				
(Cra	sh Scene								
1	First	Harmful Event			First Harmful Eve	nt Location				
	CUL	_VERT			ON ROADWAY	•				
	Man	ner of Collision			Light Condition					
	00 -	NO COLLISION W/VEH	IICLE IN TRANSPORT		UNKNOWN					
	Roa	d Surface Condition(s)			Roadway Factor(s	s)				
	DR	ľ								
	Envi	ronment Factor(s)								
	NOI	NF			NONE					
		ther Condition(s)								
	CLE	EAR								
	Anin	nal Type			Relation To Traffic	cway				
					TRAFFICWAY	- ON ROAD				
		sh Classification - Location				Crash Classification - Jurisdiction				
		BLIC PROPERTY				PECIAL JURISDICTION				
	Triba	al Land			Access Control			Special Study		
	1000			T	NO CONTROL					
	NO NO	•	Junction Location NON-JUNCTION		ction Type AN INTERSECTION	1				
			1011-3011011011	NOTA	AN INTERSECTION					
		t Summary ===								
	Unit Status									
	_			Vehicle Operating As	s Classification	Unit Type	RII F			
	ніт	AND RUN		D CLASS	s Classification	AUTOMO		ments		
01	HIT Vehi			, ,	s Classification			ments		
01	HIT Vehi PAS	AND RUN	Train/Bus # Recorded	, ,		AUTOMO	As Endorser	ments Mat Types		
01	HIT Vehi PAS	AND RUN cle Type SSENGER CAR	Train/Bus # Recorded	D CLASS		AUTOMO Operating A	As Endorser			
01	Vehi PAS Tota 1	AND RUN cle Type SSENGER CAR	Train/Bus # Recorded Direction Of Travel	D CLASS Total # Citations Issue	ued Total o	AUTOMO Operating A	As Endorser	Mat Types		
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Crash Date 10/19/2025

Crash Time 99:99

		Towed Due To Damage		Vehicle Removed By				
		TOWED DUE TO DISABLI	NG DAMAGE	EVERETTS TOWING				
		What Driver Was Doing		Vehicle Factors				
		D: D: A // O//		NOT APPLICABLE				
		Driver Prior Action Other		NOT AFFLICABLE				
		Driver Actions						
	Щ		CLE IN INATTENTIVE, O	CARELESS OR ERRAT	IC MANNER, OTH	ER CONTRIBUTING ACTION		
╘	SL							
UNIT	VEHICL							
_	VE							
		Owner Name		Owner Address	-V DD			
DAVID BOCK S7147 ELI VALLEY RD LOGANVILLE, WI 53943 , US								
0	0	(000) 100 0200		,	, , , , ,			
		0						
		Sequence Of Events Event						
	01	CULVERT						
	02	Event DITCH						
		Event						
	03							
	04	Event						
_	ľ	Policy Holder						
UNIT		Insurance Company		INDIVIDUAL				
\supset		LICTHE INSURANCE AGE	NCY INC	DAVID BOCK				
		Individual						
	Ī	DRIVER		Citations Issued Sex				
	_	JOSHUA BOCK		1 MALE				
	A	(608) 495-5205		Date of Birth	Race			
╘	INDIVIDUAL			WHITE				
L	\geq	Address S7147 ELI VALLEY RD		Driver License Number	er			
	Ξ	LOGANVILLE, WI 53943	US	STATE: WISCONSIN COUNTRY: UNITED STATES				
		On Duty	Crash	Safety Equipment				
	Saf	ety Equipment	nent		Carety Equipment			
		Row	Seat Position	RESTRAINT USE UNKNOWN				
		01 - FRONT ROW	07 - LEFT	Helmet Compliance				
		Helmet Use						
		Eye Protection		Tint Compliance				
		Lyc i lotodion		Tint Compliance				
2	001		Injury Severity Airbag					
	0	2 2 110 7 ti	PARENT INJURY Ejection Path	NOT APPLICABLE	I Transad/Futricated			
		NOT APPLICABLE	PLICABLE		Trapped/Extricated NOT APPLICABLE			
		Medical Transport	EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED						
		Hospital		Date of Death Time of Death				
		,						
		Distracted By OTHER	ed By Source R DISTRACTION (ANIMA	L, FOOD, GROOMING)				
		Distracted By Action						
		OTHER ACTION (LOOKING AWAY FROM TASK ETC)						

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Prior Action					
Action					
ا ا					
 					
IND					
INDIVIDUAL					
 -					
Action Other	To/From School				
	1.5/1.15111.2511551				
Suspected Alcohol Use Suspected Drug Use	·				
	Alcohol Test Results				
TEST NOT GIVEN	, 180, 180, 180, 180, 180, 180, 180, 180				
Drug Test Given TEST NOT GIVEN Drug Test Type Drug Test Results					
5 Drug Type					
Individual Condition					
NOT OBSERVED					
Violations					
UTC Number Issue To? Statute Number 346.70(1) Description FAILURE OF OPERATOR TO NOTIFY I	POLICE OF ACCIDENT				
Property Owner					
GOVERNMENT Address 620 STH 136					
	PO BOX 26				
(608) 356-3855 PO BOX 26 BARABOO, WI 53913 , US					
Fixed Objects Struck					
Striking Unit Struck Object CULVERT	Damage Tag Number 000				