6TL0CX0QFJ 25-11321

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 25-11321				Investigating Officer/Deputy DEPUTY K. MCCARTY				
OCXOQFJ	Crash Date 10/30/2025	Crash Time 09:55 PM		Date Arrived		Time	Time Arrived					
	Date Notified 10/30/2025	Time Notified 09:59 PM		Total Units 01		Total		I Injured Total Killed 00		i		
	On Emergency Hi	and Run Lane Closi		ure	re Work Zone			Trailer or Towed		Reporting Threshold		
6TL	Government Active School Zone			School Bus Related NO			Tag	Tags				
	✓ Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			RYAmended			Secondar Crash	y			
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
i	Location											
į	ON USH12 EB					Latitude Longitude						
	500 FT S					43.313395474		-89.7592				
	OF PRAIRIE RD					X Coordin	ate	Y Coordinate		inate		
	IN THE TOWN OF PRAIRIE	OU SAC				276242.5625			_	4799315		
	IN SAUK COUNTY					Structure			470001			
						Structure	туре					
						ļ						
(Crash Scene											
	First Harmful Event					First Harm	ıful Event L	ocation				
	NON DOMESTICATED ANIM	AL (ALIVE)				ON ROA	DWAY					
	Manner of Collision					Light Condition						
	00 - NO COLLISION W/VEHIC	CLE IN TRANSF	PORT									
	Road Surface Condition(s)					Roadway	Factor(s)					
	F : (F) ()											
	Environment Factor(s)											
	Weather Condition(s)											
	Animal Type				Relation To Trafficway							
	DEER				TRAFFICWAY - ON ROAD							
	Crash Classification - Location				Crash Classification - Jurisdiction							
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION							
	Tribal Land				Access Control Special Study							
ı	Unit Summary											
	Unit Status Vehicle Operating				ting As C	lassification		Unit Type				
	IN TRANSIT			D CLASS			AUTOMOBILE					
_	Vehicle Type					Operating As Endorsements						
5	(SPORT) UTILITY VEHICLE											
	Total Occs Train/Bus # Recorded			Total # Citations Issued		Total Trai		ailers Total Haz		Mat Types		
	1	0				0		0				
	Insurance?	Direction Of Travel		Pre CrashTi		e Speed I		Limit Total Lane		es		
_	YES EASTBOUND			Mark								
UNIT	Most Harmful Event: Collision With			Special Function			1		Emergency Motor Vehicle Use			
⊃	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION			ION NOT APPL		LICABLE	ICABLE		
	Traffic Way			Traffic Control					Traffic Control Inoperative/Missing			
				-								
	Surface Type			Road Curvature			Road Grade					
				-								

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Crash Date 10/30/2025

Crash Time 09:55 PM

	Truc	Truck Bus or HazMat								
	,	Vehicle								
		License Plate Number	Plate Type	St	Country of Issuance					
		AYW6644	AUT	WI	UNITED STATES					
2	_	Vehicle Identification Number	Make	Year	Model					
0	2	JTJAM7BX2P5346718	LEXS	2023	GX					
	VEHICLE	Color GRY - GRAY	Body Style	VEHICLE	Bus Use					
		Initial Contact Point	UT - SPORT UTILITY VEHICLE Vehicle Damage							
 _		12 - FRONT	Verlicie Damage		7 8 9 10 11					
LIND		Extent Of Damage	12 - FRONT		6 Reg 12					
–		DISABLING DAMAGE			5 4 3 2 1					
		Towed Due To Damage	Vehicle Removed By							
		TOWED DUE TO DISABLING DAMAGE	OPERATOR							
		What Driver Was Doing	Vehicle Factors							
		Driver Prior Action Other								
		Driver Actions								
_	VEHICLE	NO CONTRIBUTING ACTION								
LIND	읔									
⊃	世									
	>									
		Owner Name	Owner Address							
_	_									
2	2									
 _		Policy Holder								
LIND		Insurance Company	INDIVIDUAL							
>		AUTO-CLUB-INS-ASSOC	SCOTT HANZ							
		Individual Control of the Control of								
		DRIVER	Citations Issued Sex							
	ب	SCOTT HANZ	0	MALE						
	Š		Date of Birth	Race WHITE						
╘	DIVIDUAL									
Ĭ N	\leq	Address 5501 SEDGEMEADOW RD	Driver License Number							
	Z	MIDDLETON, WI 53562, US	STATE: WISCONSIN COUNTRY: UNITED STATES							
		, , ,								
		On Duty Crash	Safety Equipment							
	Sai	fety Equipment								
		Row Seat Position	SHOULDER & LAP BELT							
		Helmet Use	Helmet Compliance							
		Eye Protection	Tint Compliance							
		Lipiury Sovority	LAirbag							
2	00	Injury Severity NO APPARENT INJURY	Airbag							
		Ejected Ejection Path	Trapped/Extricated							
		,								
		Medical Transport	EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED								
		Hospital	Date of Death		Time of Death					

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		Distracted By Source							
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	Æ								
LNN	M								
	INDIVIDUAL								
		Action Other						To/From School	
	L	Drug & Alcohol NO			Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	I		Alcohol Test Results		
		Drug Test Given		Drug Test Type		Drug Test Results			
		TEST NOT GIVEN				-			
01	001	Drug Type							
		Individual Condition							
		APPEARED NORM	MAL						