6TL0FV1GGH 25-11375

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	Primary Crash Document #		Agency Crash Number 25-11375			Investigating Officer/Deputy DEPUTY W. VERTEIN				
GH	Crash Date 11/01/2025	Crash Time 06:08 AM			Date Arrived		Tin	Time Arrived				
6TL0FV1GGH	Date Notified 11/01/2025	Time Notified 06:11 AM			Total Units 01		To:	tal Injured	njured Total Killed 00			
₽	On Emergency	lit and Run	Lane Clos	ure Work Zone				Trailer or Towed			Reporting Threshold	
eTL	Government Active School Zone Crash Type			School Bus Related NO			Ta	Tags				
	✓ Reportable	TICATED ANIM	ANIMAL W/ NO INJURY				Amended			Secondary Crash		
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
	Location											
	ON STH23 EB					Latitude Longitude						
	907 FT N					43.37637	2458		-90.059		4	
	OF ELI VALLEY RD					X Coordina	ate		V Coord	linate		
	IN THE TOWN OF FRANKL	IN				252119.875			l l	Y Coordinate 4807159.5		
	IN SAUK COUNTY								400713	39.3		
						Structure Type NO STRUCTURE						
	Crash Scene											
	First Harmful Event					First Harm	ful Event	Location				
		MAL (ALIVE)				ON ROA		Location				
	NON DOMESTICATED ANII Manner of Collision	VIAL (ALIVE)										
						Light Condition						
	00 - NO COLLISION W/VEH	ICLE IN TRANSI	PORT			_						
	Road Surface Condition(s)					Roadway Factor(s)						
	Environment Factor(s)											
	2											
•	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			ontrol	1			al Study	
	Unit Summary											
	Unit Status Vehicle Operating As C					Classification Unit Type						
	IN TRANSIT		D	CLASS				AUTOMO	AUTOMOBILE			
•	Vehicle Type							Operating	As Endorse	ments		
2	PASSENGER CAR											
	Total Occs				Total # Citations Issued		Total Trailers		Total HazMat Types		es	
	1		0			0				0		
	Insurance?	Direction Of Trave		0-		-	-		otal Lanes			
_	YES	SOUTHBOUND		Pre CrashTire Mark								
	Most Harmful Event: Collision With			ecial Funct		<u> </u>		Emergenc	Emergency Motor Vehicle Use			
5	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCT			TION		NOT APPLICABLE			
	Traffic Way			Traffic Control					Traffic Control Inoperative/Missing			
	Traine way			Hailic Control			Traine Control moperative/Missing			-···a		
	Surface Type			Road Curvature				Road Grade				
	Canado Typo			Noau Curvature				Noau Graue				

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 3

Crash Date 11/01/2025
Crash Time 06:08 AM

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	Truc	k Bus or HazMat					`			
	Vehicle									
10	10	License Plate Number ZSA3EV		Plate Type AUT	St AZ	Country of Issuance UNITED STATES				
		Vehicle Identification Number 19XFL1H88RE007431		Make HOND	Year 2024	Model CIVIC				
		Color BLK - BLACK Initial Contact Point		Body Style 4D - 4DR Bus Use						
TIND	VEHICLE	12 - FRONT Extent Of Damage FUNCTIONAL DAMAGE		Vehicle Damage 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT						
		Towed Due To Damage NOT TOWED What Driver Was Doing	Vehicle Removed By OPERATOR Vehicle Factors							
		Driver Prior Action Other								
LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
5	10	Owner Name		Owner Address						
Ŀ	Policy Holder									
FIND	Insurance Company PROGRESSIVE-CLASSIC-INS-CO			INDIVIDUAL GARRET RICHMOND						
	- 1	Individual								
	INDIMDUAL	DRIVER GARRET RICHMOND (520) 506-6570		0 Date of Birth	Sex MALE Race	ALE				
5					WHITE					
LNO		Address 530 DELANEY ST HIGHLAND, WI 53543, US		Driver License Number						
	On Duty Crash Safety Equipment			Safety Equipment						
		Row	Seat Position	SHOULDER & LAP BELT						
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
٤	00	Injury Seventy NO APPARENT INJURY		Airbag						
		Ejected Eje	ection Path			Trapped/Extricated				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #				
		Hospital	Date of Death		Time of Death					

Wisconsin Motor Vehicle Crash Form DT4000

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	Distracted By Distracted By Source								
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	₽								
LIND	JDU								
n	INDIVIDUAL								
	=								
		Action Other						To/From School	
		Drug & Alcohol NO			Suspected Drug Use			<u> </u>	
	L				NO				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	<u> </u>		
10	00	Drug Type		1					
		Individual Condition							
		APPEARED NORI	MAL						