# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override  Crash Date 11/01/2025  Date Notified 11/01/2025		Primary Crash Document #  Crash Time 03:21 AM  Time Notified 03:21 AM		25-11370 DEPUTY Date Arrived Time Arrive			ng Officer/Deputy A. KULAS		
<b>Y</b>								Time Arrived 03:21 AM		
OTKKD/K								njured	Total Killed <b>00</b>	
F	On Emergency	Hit	and Run	Lane Clos	ure	Work Zone	☐ Tr	ailer or	Towed	Reporting Threshold
<u> </u>	Government Property		Active Sc	hool Zone	School <b>NO</b>	Bus Related	Tags			
	<b>✓</b> Reportable		Crash Type DT4000 (STA	NDARD CRASH	H)		An	nended		Secondary Crash
	Description <b>=</b>									
	Diagram		not t	o scale				Ph	otos By	n By
		s		ngs rd	01		01	CF DA		NCIDENT, PHOTOS, ERA VIDEO, BODY
	I, a sworn law enfo	rceme	nt officer, agre	ee that I have n	ot adde	d any CJIS data in	this report.			
	UNIT 1 WAS WEST BOUND UNABLE TO MALE THE TU	ON SHA	ADY LN RD AT A	HIGH RATE OF SP	PEED. THE	OPERATOR OF UNIT	1 TRIED TO T			IASTINGS RD. THE 1 WAS
	GNABLE TO WALE THE TU	IVIN DOE	IO IIO SPEED. (	JINII I EINIERED I	HE NOR	III WEST DITCH AND	JINUUN A IKI	LE NEAU	OIN.	

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Crash Date 11/01/2025

Crash Time 03:21 AM

Location										
	ON SHADY LANE RD				Latitude	Latitude L			ongitude	
0	0.29 MI E								2261527	
	F HASTINGS RD	X Coordinate Y			Y Coord	dinate				
	IN THE TOWN OF DELTON IN SAUK COUNTY					28125		_	4825381	
l II						Structure Type				
						UCTURE				
С	rash Scene									
F	irst Harmful Event				First Harm	nful Event L	ocation			
Т	REE	ON ROA	DWAY							
N	lanner of Collision	Light Cond	dition							
0						NLIT				
R	toad Surface Condition(s)				Roadway	Factor(s)				
D	PRY									
Е	nvironment Factor(s)									
N	IONE				NONE					
٧	Veather Condition(s)				1					
	LEAR									
Α	nimal Type				Relation T	o Trafficwa	ay			
						CWAY - O				
	rash Classification - Locatio	n					- Jurisdiction			
	PUBLIC PROPERTY			NO SPECIAL JURISDICTION						
T	ribal Land				Access Control NO CONTROL				Special Study	
1/1	Vithin Interchange Area		Intersection							
	IO	Junction Location INTERSECTION			RSECTION					
Ш	nit Cummon.			l .						
	nii Siimimarv									
	nit Summary Init Status		Vehicle Ope	erating As C	Classification		Unit Type			
U			Vehicle Ope	erating As C	Classification		Unit Type AUTOMO	BILE		
U II	nit Status		·	erating As C	Classification	1			ements	
II V	nit Status N TRANSIT		·	erating As C	Classification		AUTOMO		ements	
∪   •   ∨   P	Init Status  N TRANSIT  Vehicle Type	Train/Bus # Recorded	·			Total Tra	AUTOMO Operating A	s Endorse	ements zMat Types	
∪   •   ∨   P	Init Status N TRANSIT ehicle Type PASSENGER CAR otal Occs	Train/Bus # Recorded	D CLASS				AUTOMO Operating A	s Endorse		
U   II     V   P   T   2	Init Status N TRANSIT ehicle Type PASSENGER CAR otal Occs	Train/Bus # Recorded  Direction Of Travel	D CLASS  Total # Cita 3	tions Issued	1	Total Tra	AUTOMO Operating A	s Endorse Total Haz	zMat Types	
U	Init Status N TRANSIT ehicle Type PASSENGER CAR otal Occs		D CLASS  Total # Cita 3		1	Total Tra	AUTOMO Operating A	s Endorse Total Haz	zMat Types	
IN V P T 2 Irr U	Init Status N TRANSIT Sehicle Type PASSENGER CAR Otal Occs DISURANCE? UNKNOWN Host Harmful Event: Collision	Direction Of Travel WESTBOUND	Total # Cita 3 Pre Special Fun	tions Issued  CrashTire  Mark  action	i •	Total Tra  0  Speed Lii	AUTOMO Operating A illers  mit  Emergency	Total Haz  0  Total Lar  2  Motor Veh	zMat Types nes	
III V P T 2 Irr U M T	Init Status  N TRANSIT  Sehicle Type  PASSENGER CAR  otal Occs  INKNOWN  Iost Harmful Event: Collision  REE	Direction Of Travel WESTBOUND	Total # Cita 3  Pre  Special Fun NO SPEC	CrashTire Mark Inction	i •	Total Tra  0  Speed Lii	AUTOMO Operating A illers mit Emergency NOT APP	Total Haz 0 Total Lar 2 Motor Veh	zMat Types nes nicle Use	
U   M   T   T	Init Status N TRANSIT Sehicle Type PASSENGER CAR Otal Occs Survance? INKNOWN Stost Harmful Event: Collision REE raffic Way	Direction Of Travel WESTBOUND  With	Total # Cita 3 Pre Special Fun NO SPEC Traffic Cont	CrashTire Mark Inction	i •	Total Tra  0  Speed Lii	AUTOMO Operating A illers mit Emergency NOT APP	Total Haz 0 Total Lar 2 Motor Veh	zMat Types nes	
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III	Init Status  N TRANSIT  Tehicle Type  PASSENGER CAR  Otal Occs  INKNOWN  Tost Harmful Event: Collision  REE  Traffic Way  WO-WAY, NOT DIVIDER  Turface Type	Direction Of Travel WESTBOUND  With	Total # Cita 3 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark Inction IAL FUNC	i •	Total Tra  0  Speed Lii	AUTOMO Operating A illers  mit  Emergency NOT APP Traffic Cont NO Road Grade	Total Haz  0 Total Lar  2 Motor Veh LICABLE	zMat Types nes nicle Use	
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	Init Status N TRANSIT Sehicle Type PASSENGER CAR Otal Occs  INKNOWN Stost Harmful Event: Collision REE FRAMER WAY WO-WAY, NOT DIVIDES FUNCTION OF THE BUS OF HAZMAT IO  Vehicle	Direction Of Travel WESTBOUND  With	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	CrashTire Mark Inction IAL FUNC ITOI TROL Inture T	i •	Total Tra 0 Speed Lii 45	AUTOMO Operating A illers mit  Emergency NOT APP Traffic Cont NO Road Grade LEVEL	Total Haz  0  Total Lar  2  Motor Ven LICABLE  rol Inopera	zMat Types nes nicle Use	
U III V P T 2 Ir U M T T T S B T N	Init Status IN TRANSIT Sehicle Type PASSENGER CAR Otal Occs  INKNOWN Iost Harmful Event: Collision REE raffic Way WO-WAY, NOT DIVIDE Furface Type SLACKTOP (BITUMINOU ruck Bus or HazMat IO  Vehicle License Plate Number BBS1628 Vehicle Identification No	Direction Of Travel WESTBOUND  With  D  JS)	Total # Cita 3 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH  Plate Type AUT Make	CrashTire Mark Inction IAL FUNC ITOI TROL Inture T	i •	Total Tra 0 Speed Lii 45 St WI Year	AUTOMO Operating A illers mit  Emergency NOT APP Traffic Cont NO Road Grade LEVEL  Country of Is UNITED S	Total Haz  0  Total Lar  2  Motor Ven LICABLE  rol Inopera	zMat Types nes nicle Use	
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P T 2 IF U M T T T S B T N	Init Status N TRANSIT Schicle Type PASSENGER CAR Otal Occs  INKNOWN Instruction Way WO-WAY, NOT DIVIDED OUTFACE Type BLACKTOP (BITUMINOUT TUCK Bus or HazMat IO)  Vehicle License Plate Number BBS1628  Vehicle Identification Not XXGU4L36GG09386  Color SIL - SILVER (ALUM	Direction Of Travel WESTBOUND  With  D  JS)	Total # Cita 3 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH  Plate Type AUT Make KIA Body Style SD - SED	CrashTire Mark Inction IAL FUNC ITOL IATURE T	i •	Total Tra 0 Speed Lii 45 St WI Year	AUTOMO Operating A illers  mit  Emergency NOT APP Traffic Cont NO Road Grade LEVEL  Country of Is UNITED ST Model OPTIMA	Total Haz  0  Total Lar  2  Motor Ven LICABLE  rol Inopera	zMat Types nes nicle Use	
P T 2 In U N T T T S B T N	Init Status IN TRANSIT Sehicle Type PASSENGER CAR Otal Occs  INKNOWN Sost Harmful Event: Collision REE Fraffic Way WO-WAY, NOT DIVIDED Furface Type BLACKTOP (BITUMINOUT Fuck Bus or HazMat IO  Vehicle License Plate Number BBS1628 Vehicle Identification Not XXGU4L36GG0938 Color SIL - SILVER (ALUM Initial Contact Point	Direction Of Travel WESTBOUND  With  D  JS)	Total # Cita 3 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH  Plate Type AUT Make KIA Body Style	CrashTire Mark Inction IAL FUNC ITOL IATURE T	i •	Total Tra 0 Speed Lii 45 St WI Year	AUTOMO Operating A illers  mit  Emergency NOT APP Traffic Cont NO Road Grade LEVEL  Country of Is UNITED ST Model OPTIMA	Total Haz  0  Total Lar  2  Motor Ven LICABLE  rol Inopera	zMat Types  nes  nicle Use  ative/Missing	
III V P T 2 Irr U M T T T S B T N	Init Status IN TRANSIT Sehicle Type PASSENGER CAR Otal Occs  INKNOWN Sost Harmful Event: Collision REE Fraffic Way WO-WAY, NOT DIVIDED Furface Type BLACKTOP (BITUMINOUT Fuck Bus or HazMat IO  Vehicle License Plate Number BBS1628 Vehicle Identification Not XXGU4L36GG0938 Color SIL - SILVER (ALUM Initial Contact Point	Direction Of Travel WESTBOUND  With  D  JS)	Total # Cita 3 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH  Plate Type AUT Make KIA Body Style SD - SED Vehicle Da	CrashTire Mark action IIAL FUNC TO	i •	Total Tra 0 Speed Lii 45 St WI Year	AUTOMO Operating A illers  mit  Emergency NOT APP Traffic Cont NO Road Grade LEVEL  Country of Is UNITED ST Model OPTIMA	Total Haz  0  Total Lar  2  Motor Ven LICABLE  rol Inopera	zMat Types nes nicle Use	
III V PP T 22 Irr T T S B T N	Init Status N TRANSIT ehicle Type PASSENGER CAR otal Occs  INKNOWN Instruction Way WO-WAY, NOT DIVIDED INTERE FACKTOP (BITUMINOUT Truck Bus or HazMat IO  Vehicle License Plate Number BBS1628  Vehicle Identification Not XXGU4L36GG0938  Color SIL - SILVER (ALUN Initial Contact Point	Direction Of Travel WESTBOUND  With  D  US)  With  D  Umber  12  MINUM)	Total # Cita 3 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH  Plate Type AUT Make KIA Body Style SD - SED	CrashTire Mark action IIAL FUNC TO	i •	Total Tra 0 Speed Lii 45 St WI Year	AUTOMO Operating A illers  mit  Emergency NOT APP Traffic Cont NO Road Grade LEVEL  Country of Is UNITED ST Model OPTIMA	Total Haz  0  Total Lar  2  Motor Ven LICABLE  rol Inopera	zMat Types  nes  nicle Use  ative/Missing	

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

				Vehicle Removed By					
					CRAIGS TOWING				
		What Driver Was Doing			Vehicle Factors				
		RIGHT TURN		NO	NOT APPLICABLE				
		Driver Prior Action Other			TAIT LIOABLE				
LIND	Driver Actions  EXCEED SPEED LIMIT, FAILURE TO CONTROL, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER								
01	01	Owner Name LARA MISAEL MATEO			Owner Address 1204 OAK ST WISCONSIN DELLS, WI 53965, US				
		Sequence Of Events							
	01	Event TREE							
	02	Event							
	03	Event							
	04	Event							
		Individual							
		DRIVER MICHAEL ANDALUZ CORDOVA			Citations Issued Sex				
	Ļ				3 MALE				
⊢	INDIMIDUAL				Date of Birth	Race HISPANIC			
N	<u> </u>	Address			Driver License Number				
	Z	214 N BURRITT AVE # 301 WISCONSIN DELLS, WI 53965 , US			STATE: WISCONSIN COUNTRY: UNITED STATES				
	Saf	On Duty	Crash	S	Safety Equipment				
		Row 01 - FRONT ROW	Seat Position  07 - LEFT		SHOULDER & LAP BELT				
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
5	001	Injury Se	•						
	0	2 2 110 7 11	PARENT INJURY Ejection Path		DEPLOYED-COMBIN	NATION	Trapped/Extricated		
		- I	NOT EJECTED/NOT	APPLIC	CABLE		NOT TRAPPED		
		Medical Transport			EMS Agency Identifier		EMS Run #		
	LAW ENFORCEMENT Hospital			Date of Death		Time of Death			
		ST CLARE'S HOSPITAL							
	Distracted By Source								
		Distracted By Action UNKNOWN							
		Non Motorist	Jnit # Location						

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Crash Date 11/01/2025

Crash Time 03:21 AM

ı											
		Prior Action									
UNIT	INDIVIDUAL	Action  Action  To/From School									
		Suspecte  Orug & Alcohol YES	ed Alcohol Use	Suspected Drug Use							
	-	_	Alcohol Test Type								
		TEST GIVEN BLOOD		9		Alcohol Test Results PENDING					
		Drug Test Given TEST GIVEN	Drug Test Type BLOOD		Drug Test Results PENDING						
2	001	Drug Type									
		Individual Condition									
		UNDER THE INFLUENCE	OF MEDICATIONS/DRUG	S/ ALCOHOL							
		Individual									
		PASSENGER		Citations Issued Sex							
	AL	SHEYNA CASAN ANDRAE	DE	<b>0</b> Date of Birth	FEMALE Race						
E	IDO				HISPANIC						
LINO	INDIVIDUAL	Address 730 E HIAWATHA DR WISCONSIN DELLS, WI 53	3965 , US	Driver License Number							
	Saf	fety Equipment	Crash	Safety Equipment							
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP	BELT						
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
2	005	Injury Se	•	Airbag							
	0	, ito 7th 1	PARENT INJURY Ejection Path	DEPLOYED-COMBI	NATION	Trapped/Extricated					
			NOT EJECTED/NOT APPI	LICABLE		NOT TRAPPED					
		Medical Transport		EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED  Hospital		Date of Death Time of Death							
		Distracted By	d By Source								
		Distracted By Action									
		Non Motorist Striking L	Jnit # Location								
		Prior Action									

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		Action									
	AL.										
LIND	INDIVIDUAL										
⊃	ND.										
	=										
		Action Other						To/From School			
			Suspected Alcol		Suspected Drug Use						
	L	Orug & Alcohol									
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results				
		Drug Test Given		Drug Test Type		Drug Test Results					
		TEST NOT GIVEN		3 31		9					
2	002	Drug Type									
		Individual Condition									
		UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL									
	1	<b>Violations</b>									
	01	UTC Number <b>BM653605</b>	Issue To? 001	Statute Number 346.63(1)(a)	Description OPERATING WHILE	UNDER THE IN	FLUENCE				
	02	UTC Number BM653607	Issue To? 001	Statute Number 346.62(2)	Description RECKLESS DRIVING	G-ENDANGER S	AFETY				
	03	UTC Number BM653608	Issue To? 001	Statute Number <b>343.44(1)(a)</b>	Description OPERATING WHILE	SUSPENDED					