

6TL0FSSFBN

25-11391

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override		Primary Crash Document #		Agency Crash Number 25-11391		Investigating Officer/Deputy DEPUTY Z. DRILL	
Crash Date 11/01/2025		Crash Time 03:45 PM		Date Arrived 11/01/2025		Time Arrived 03:59 PM	
Date Notified 11/01/2025		Time Notified 03:46 PM		Total Units 01		Total Injured 00	Total Killed 00
☐ On Emergency	☐ Hit and Run	☒ Lane Closure	☐ Work Zone		☐ Trailer or Towed		☐ Reporting Threshold
☐ Government Property		☐ Active School Zone		School Bus Related NO		Tags	
☒ Reportable		Crash Type DT4000 (STANDARD CRASH)				☐ Amended	☐ Secondary Crash

Description

Diagram 	Reconstruction By
	Photos By DEPUTY DRILL
	Additional Information PHOTOS

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

UNIT 1 TRAVELING SOUTH ON COUNTY RD WD. DRIVER WAS TAKING PASSENGER ON A TEST DRIVE BEFORE PURCHASE. DRIVER SPEAKING WITH PASSENGER AS THEY CAME INTO THE TURN, ENTERED THE SHOULDER AND LOST CONTROL OF THE VEHICLE. UNIT 1 ENTERED THE WEST SIDE DITCH STRIKING A TELEPHONE POLE, SNAPPING THE POLE AND DROPPING ACTIVE LINES INTO THE ROADWAY. NO INJURIES TO DRIVER OR PASSENGER. AFTER THE INITIAL ACCIDENT, A SECOND VEHICLE DROVE THROUGH THE ROADWAY AND STRUCK THE WIRE, RESULTING IN MINOR FUNCTIONAL DAMAGE TO THE VEHICLES PASSENGER SIDE MIRROR, AND RESULTED IN NO INJURIES. DRIVER OF UNIT 1 RECEIVED THREE CITATIONS, FAIL TO KEEP VEHICLE UNDER CONTROL, OPERATE MV WITHOUT INSURANCE, AND NON REGISTRATION OF AUTO.

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Location

ON CTHWD SB 817 FT N OF FULLER RD IN THE TOWN OF WINFIELD IN SAUK COUNTY	Latitude 43.599707775	Longitude -89.960064562
	X Coordinate 261084.375	Y Coordinate 4831673
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event OTHER POST, POLE OR SUPPORT		First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - NOT ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	
Closure Type FULL CLOSURE		Reasons for Closure OTHER	
Date Initial Lane/Rd Closed 11/01/2025	Time Initial Lane/Rd Closed 03:59 PM		
Date All Lanes Open 11/01/2025	Time All Lanes Open 09:00 PM	Date Scene Cleared 11/01/2025	Time Scene Cleared 09:35 PM

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 3	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel SOUTHBOUND	☒ Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With OTHER POST, POLE OR SUPPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE LEFT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					
	Vehicle					
	License Plate Number		Plate Type	St	Country of Issuance	
Vehicle Identification Number 2MEFM75W95X643619		Make MERC	Year 2005	Model GRAND MARQ		

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UNIT	VEHICLE	Color GRN - GREEN	Body Style 4D - 4DR	Bus Use	
		Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 -		
		Extent Of Damage DISABLING DAMAGE			
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING		
		What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors NOT APPLICABLE		
UNIT	VEHICLE	Driver Prior Action Other			
		Driver Actions FAILURE TO CONTROL			
01	01	Owner Name KIMBERLY CUSACK (608) 524-3080	Owner Address S1875 DROVER PASS REEDSBURG, WI 53959 , US		
		Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT			
	02	Event OTHER POST, POLE OR SUPPORT			
	03	Event			
	04	Event			
UNIT	INDIVIDUAL	Individual			
		DRIVER GERALD CUSACK (608) 524-3080	Citations Issued 3	Sex MALE	
			Date of Birth	Race WHITE	
		Address S1875 DROVER PASS REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	001	Safety Equipment		On Duty Crash	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		Injury NO APPARENT INJURY		Airbag DEPLOYED-FRONT	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	
		Hospital		Date of Death	

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UNIT INDIVIDUAL	Distracted By		Distracted By Source PASSENGER/OTHER NON-MOTORIST	
	Distracted By Action TALKING/LISTENING			
	Non Motorist		Striking Unit #	Location
	Prior Action			
	Action			
	Action Other			
	To/From School			
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use 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
UNIT INDIVIDUAL	Drug Type			
	Individual Condition APPEARED NORMAL			
	Individual			
	PASSENGER JAKE BURRIS (608) 393-9805		Citations Issued 0	Sex MALE
	Date of Birth		Race WHITE	
	Address S7069 COUNTY RD D LOGANVILLE, WI 53943 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 09 - RIGHT	
	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
UNIT INDIVIDUAL	Tint Compliance		Airbag DEPLOYED-FRONT	
	Injury		Injury Severity NO APPARENT INJURY	
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	
	Trapped/Extricated NOT TRAPPED		Medical Transport NOT TRANSPORTED	
	EMS Agency Identifier		EMS Run #	
	Hospital		Date of Death	
	Time of Death		Distracted By	
	Distracted By Source			

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UNIT	INDIVIDUAL	Distracted By Action				
		Non Motorist	Striking Unit #	Location		
			Prior Action			
		Action				
		Action Other			To/From School	
		Drug & Alcohol	Suspected Alcohol Use NO		Suspected Drug Use 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		
		Drug Type				
		Individual Condition APPEARED NORMAL				
Violations						
01	01	UTC Number BM655559	Issue To? 001	Statute Number 346.57(2)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL	
02	01	UTC Number BM655560	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR VEHICLE W/O INSURANCE	
03	01	UTC Number BM655561	Issue To? 001	Statute Number 341.04(1)	Description NON-REGISTRATION OF AUTO, ETC	