6TL0FRKD7J 25-11362

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 Nur 25-11362				stigating Officer/Deputy			
ŀ	0 1 5 1	0 1 7									
)7J	Crash Date 10/31/2025	Crash Time 11:18 PM		Date Arrived			TIME	Time Arrived			
\Box	Date Notified	Time Notified		Total Ur	nits		Tota	l Injured	Total Killed	1	
준	10/31/2025	11:18 PM		01	Ī		00		00	1	
OFRKD	On Emergency Hit and Run		Lane Clos	ane Closure		rk Zone		Trailer or T	owed	Reporting Threshold	
eTL	Government Active School Zon			School Bus Related NO			Tags	Tags			
	Reportable	CATED ANIN	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.										
ì	ocation										
Ī	ON USH12 WB					Latitude Longitude					
	392 FT S						43.484472962		_	5686888	
	OF TERRYTOWN RD										
	IN THE TOWN OF BARABOO)				X Coordinate				Y Coordinate	
	IN SAUK COUNTY					275539.1			481836	<u> </u>	
					Structure						
						NO STR	UCTURE				
	Crash Scene										
1	First Harmful Event					Firet Harm	oful Event L	ocation			
	NON DOMESTICATED ANIMAL (ALIVE)				First Harmful Event Location ON ROADWAY						
	Manner of Collision	AL (ALIVE)	- (ALIVE)								
		OL E IN TRANSPO	NDT.			Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPO)KI								
	Road Surface Condition(s)					Roadway	Factor(s)				
ŀ	Environment Factor(s)										
	Environment Factor(s)										
ŀ	Weather Condition(s)										
	weather Condition(s)										
ı	Animal Type					Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD						
ŀ	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
- 1	Tribal Land					Access Co				Special Study	
	THIDAI LAND					7.00033 001101				Special Study	
L											
Į.	Unit Summary 💳										
	Unit Status Vehicle Op			hicle Opera	Operating As Classification			Unit Type			
	IN TRANSIT			D CLASS				AUTOMOBILE			
_	Vehicle Type				Operating As Endorsements						
01	(SPORT) UTILITY VEHICLE										
	Total Occs Train/Bus # Recorded			Total # Citations Issued		Total Tra		ailers Total Haz		Mat Types	
	1		0			0		0			
ŀ	Insurance?	Direction Of Travel		Pre CrashTir		Speed Li		imit Total Lane		es	
ᅵ		NORTHBOUND			Mark		·				
L	Most Harmful Event: Collision With Special Function							Emergency Motor Vehicle Use			
5	NON DOMESTICATED ANIMAL (ALIVE)			O SPECIA		TION		NOT APPLICABLE			
ļ	Traffic Way			affic Contro				Traffic Control Inoperative/Missing			
	Traino way			anio CON10	•			Traine Control moperative/ivitssifig			
ŀ	Surface Type			Road Curvature			Road Grade				
	Carraco Typo			Noau Curvatule					Node State		
			1								

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	Truc	k Bus or HazMat						
	,	Vehicle						
		License Plate Number ALE8174	Plate Type AUT	St WI	Country of Issuance UNITED STATES			
2	VEHICLE 01	Vehicle Identification Number 1C4RJFAG5CC316080	Make JEEP	Year 2012	Model GRAND CHER			
		Color GRY - GRAY	Body Style UT - SPORT UTILITY VEHICLE Bus Use					
LINI		Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage DISABLING DAMAGE	Vehicle Damage 01 - RIGHT FRONT CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT 5 4 3 2 1					
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By					
		What Driver Was Doing	Vehicle Factors					
		Driver Prior Action Other						
LINI	Driver Actions NO CONTRIBUTING ACTION							
		Owner Name	Owner Address					
2	6							
╘		Policy Holder						
LIND		Insurance Company ALLSTATE-INS-CO	CHARLES HUFFS	UTLER				
	INDIVIDUAL	Individual						
		DRIVER CHARLES HUFFSTUTLER	Citations Issued 0	Sex MALE				
_		(608) 495-3740	Date of Birth	Race WHITE	_			
LINO		Address 1130 HIGH ST REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	On Duty Crash fety Equipment	Safety Equipment					
		Row Seat Position	SHOULDER & LAP BELT					
	001	Helmet Use	Helmet Compliance					
		Eye Protection	Tint Compliance					
01		Injury Severity NO APPARENT INJURY	Airbag					
		Ejected Ejection Path			Trapped/Extricated			
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #			
		Hospital	Date of Death		Time of Death			

Crash Date 10/31/2025
Crash Time 11:18 PM

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ı			D:-441 D C						
Distracted By Source									
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action	<u>I</u>						
İ		Action							
	4								
 	INDIVIDUAL								
LND	9								
⊃	\leq								
	Z								
		Action Other						To/From School	
ŀ	Suspected Alcohol Use Suspected Drug Use								
	L	Suspected Alcohol Use Drug & Alcohol NO			NO				
ŀ		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results		
		Drug Test Given Drug Test Type		Drug Toot Type	Drug Test Results				
		TEST NOT GIVEN		Drug Test Type	Drug Test Res				
_	_	Drug Type							
2	001	Brug Typo							
		Individual Condition							
		ADDEADED NODE							
		APPEARED NORI	VIAL						
l									