

6TL0FRKD7S
25-11431

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 6TL0FRKD7N		Primary Crash Document #		Agency Crash Number 25-11431		Investigating Officer/Deputy DEPUTY A. KULAS	
Crash Date 11/02/2025		Crash Time 06:31 PM		Date Arrived 11/02/2025		Time Arrived 06:40 PM	
Date Notified 11/02/2025		Time Notified 06:31 PM		Total Units 02		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

Additional Information
**DASH CAMERA VIDEO, BODY
CAMERA VIDEO, WITNESS VIDEO**

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

UNIT 1 WAS WEST BOUND ON STH 23 WHERE IT MERGED FROM 4 LANES TO TWO LANES. UNIT 2 PASSED UNIT 1 ON THE SHOULDER AND STRUCK UNIT 1 WHEN IT MERGED INTO UNIT 1S LANE OF TRAVEL. UNIT 1 HAD DASH CAMERA FOOTAGE OF THE CRASH.

FIX CRASH DIAGRAM.

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Location ON STH23 WB 768 FT W OF COMMERCE ST IN THE TOWN OF DELTON IN SAUK COUNTY			Latitude 43.587177901	Longitude -89.816993084
			X Coordinate 272585.375	Y Coordinate 4829879.5
			Structure Type NO STRUCTURE	

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DARK/LIGHTED	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - 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	

01 UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type CARGO VAN (10,000 LBS OR LESS)				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	☐ Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		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 STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

01	01	Vehicle			
		License Plate Number LZ3623	Plate Type LTK	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1FTYR1ZM7GKB04603	Make FORD	Year 2016	Model TRANSIT
		Color WHI - WHITE	Body Style VN - VAN		Bus Use
		Initial Contact Point 02 - RIGHT SIDE FRONT			

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UNIT	VEHICLE	Vehicle Damage		
		Extent Of Damage FUNCTIONAL DAMAGE	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT	
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
UNIT	VEHICLE	Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions NO CONTRIBUTING ACTION		
		Owner Name BRIAN VAN COULTER (608) 617-5523	Owner Address S4869 PRAIRIEVIEW DR REEDSBURG, WI 53959 , US	
		Sequence Of Events		
UNIT	VEHICLE	Event MOTOR VEH IN TRANSPORT		
		Event		
		Event		
		Event		
UNIT	VEHICLE	Policy Holder		
		Insurance Company RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)	INDIVIDUAL BRIAN VAN COULTER	
		Individual		
		DRIVER BRIAN VAN COULTER (608) 617-5523	Citations Issued 0	Sex MALE
UNIT	INDIVIDUAL	Date of Birth	Race WHITE	
		Address S4869 PRAIRIEVIEW DR REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
		Safety Equipment		
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
UNIT	INDIVIDUAL	Row 01 - FRONT ROW	Seat Position 07 - LEFT	
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
UNIT	INDIVIDUAL	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

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UNIT INDIVIDUAL 01 001	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED			
	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				

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				Operating As Endorsements	
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	☐ Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		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 STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

02 02	Vehicle				
	License Plate Number TL5001		Plate Type LTK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GCHK29U24E132765		Make CHEV	Year 2004	Model SILVERADO
	Color BLK - BLACK		Body Style PK - PICKUP		Bus Use
	Initial Contact Point 08 - LEFT SIDE REAR				

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UNIT	VEHICLE	Vehicle Damage		
		Extent Of Damage MINOR DAMAGE	07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR	
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
		What Driver Was Doing OVERTAKE RIGHT	Vehicle Factors NOT APPLICABLE	
UNIT	VEHICLE	Driver Prior Action Other		
		Driver Actions IMPROPER OVERTAKING / PASSING RIGHT, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER		
02	02	Owner Name BERTRON PARRISH (608) 963-2924	Owner Address S3004 N REEDSBURG RD BARABOO, WI 53913 , US	
		Sequence Of Events Event MOTOR VEH IN TRANSPORT Event Event Event		
UNIT	INDIVIDUAL	Policy Holder Insurance Company WISCONSIN-MUTUAL-INS-CO INDIVIDUAL BERTRON PARRISH		
		Individual DRIVER BERTRON PARRISH (608) 963-2924 Citations Issued 1 Sex MALE Date of Birth Race WHITE Address S3004 N REEDSBURG RD BARABOO, WI 53913 , US Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
02	002	Safety Equipment On Duty Crash Safety Equipment SHOULDER & LAP BELT Row 01 - FRONT ROW Seat Position 07 - LEFT Helmet Use Helmet Compliance Eye Protection Tint Compliance		
		Injury Injury Severity NO APPARENT INJURY Airbag NON DEPLOYED 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		

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UNIT INDIVIDUAL	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED			
	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
02 002	Drug Type			
	Individual Condition APPEARED NORMAL			
	Individual			
	PASSENGER DARLENE CHAPIN PARRISH (608) 963-2924		Citations Issued 0	Sex FEMALE
			Date of Birth	Race WHITE
	Address S3004 N REEDSBURG RD BARABOO, WI 53913 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 09 - RIGHT		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
02 003	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	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 02 003 01	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	UTC Number BM653609	Issue To? 002	Statute Number 346.08	Description UNSAFE PASSING ON RIGHT