WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash	·		Crash Number	Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI Time Arrived 04:59 PM			
Z	Crash Date 11/11/2025				rrived 2025				
<u>B</u>	Date Notified 11/11/2025			Total U 02	nits	Total Injured 00	,		
<u>0</u> F1	On Emergency	Hit and Run	t and Run Lane Closu		Work Zone	Trailer or Towed			Reporting Threshold
eTL	Government Active School Zone		School Bus Related NO		Tags				
	✓ Reportable Crash Type DT4000 (STANDARD CRASH)					Amended Secondar Crash			Secondary Crash
	Description								

Photos By

Additional Information NONE

HWY 136

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

UNIT 2 WAS DRIVING WEST ON HWY 136. THE OPERATOR OF UNIT 1 WAS PREPARING TO ENTER ONTO HWY 136 FROM THE NORTH. THE OPERATOR OF UNIT 1 REPORTED SEEING THE RIGHT TURN SIGNAL ACTIVATED ON UNIT 2, SO ESTIMATED UNIT 2 WAS TURNING INTO THE DRIVE SO IT WOULD BE SAFE FOR UNIT 1 TO PROCEED. UNIT 2 DID NOT TURN IN, RESULTING IN A COLLISION. THE OPERATOR OF UNIT 2 SAID HIS SIGNAL WAS NOT ON AS HE WAS INTENDING ON CONTINUING WEST.

Location

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	199	STH33 WB FT W STH136 WB			,					651619
	IN T	HE VILLAGE OF WES	ST BARABOO			X Coordin 275991.0			Y Coord 481727	
						NO STR	Type UCTURE			
(Cra	sh Scene								
		Harmful Event					nful Event L	ocation		
		TOR VEH IN TRANSP	ORT			ON ROA				
		ner of Collision ANGLE				Light Con				
		d Surface Condition(s)				DARK/L Roadway				
	DRY	. ,				Roadway	i actor(s)			
	Envii	ronment Factor(s)								
	NON	NE				NONE				
	Wea	ther Condition(s)								
	CLE	AR								
	Anim	nal Type				Deletion T	- Trofficus	.,		
	AIIII	iai Type					o Trafficwa CWAY - O	-		
	Cras	h Classification - Location	1					Jurisdiction		
	PUE	BLIC PROPERTY				NO SPE	CIAL JUR	SDICTION		
	Triba	al Land				Access Control Special Study NO CONTROL				
	With	in Interchange Area		Intersection	n Type				<u>I</u>	
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION			
- 1	Unit	t Summary 💻								
		Status		Vehicle Ope	erating As C	lassification		Unit Type		
	IN TRANSIT			D CLASS		AUTOMOE				
01		cle Type					Operating A	ating As Endorsements		
•	•	ORT) UTILITY VEHIC	Train/Bus # Recorded	Total # Cita		Total Trai	lers	Total Haz	Mat Types	
	2	10003	Train/Bus // Nosorasa	0		0	1010	0	Mat Typoo	
	Insur	rance?	Direction Of Travel	Pre	CrashTire	e Speed Lim		imit Total Lanes		es
⊥	YES	3	SOUTHBOUND		Mark	N/A		1		
LNU		t Harmful Event: Collision		Special Fun	STION		Emergency Motor Vehicle Use NOT APPLICABLE			
		TOR VEH IN TRANSP	ORT	NO SPEC	TION					
		ic Way I DED HWY W/O TRAF	EIC DADDIED	Traffic Cont				Traffic Control Inoperative/Missing NO		
		ace Type	TIC BARRIER	Road Curva				Road Grade		
		ACKTOP (BITUMINOU	JS)	STRAIGH				LEVEL		
	Truc	k Bus or HazMat	<u> </u>							
	NO									
	,	Vehicle								
		License Plate Number		Plate Type			St	Country of Is	suance	
		ANY6212		AUT			WI	UNITED STATES		
5	01	Vehicle Identification Nu		Make			Year	Model	UED	
٦	0	1C4RJFBG5FC1660 Color	<i>/</i> 1	JEEP Pody Stylo			2015 GRAND CHER			
		SIL - SILVER (ALUM	Body Style		ITY VEHICLE		Bus Use			
	Е	Initial Contact Point		Vehicle Da				1	I	
╘	CL	11 - LEFT FRONT C	ORNER		-					7 8 9 10 11
L N N	EHICL	Extent Of Damage		11 - LEF	T FRONT	CORNER				6 12 2 12
_	VE	FUNCTIONAL DAMA	AGE							5 4 3 2 1

Wisconsin Motor Vehicle Crash Form DT4000

s report does not include any CJIS 2 of 7

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Towed Due To Damage NOT TOWED		Vehicle Removed By							
		What Driver Was Doing		Vehicle Factors							
		ENTERING TRAFFIC LAN	NE								
		Driver Prior Action Other		NOT APPLICABLE							
		Driver Actions									
	щ	FAILED TO YIELD RIGHT	-OF-WAY								
╘	占										
NN N	VEHICLE										
-	7										
		Owner Name		Owner Address	_						
2	5	BLAKE HOFFM	AN	503 7TH ST APT							
0	0	(608) 548-0968		BARABOO, WI 5	3913 , US						
		Sequence Of Events Event									
	01	MOTOR VEH IN TRANSP	ORT								
	02	Event									
	_	Event									
	03										
	04	Event									
_	ı	Policy Holder									
FIND	Ī	Insurance Company		INDIVIDUAL							
5		PROGRESSIVE-CASUAL	TY-INS-CO	BLAKE HOFFMAN	l						
		ndividual									
		DRIVER		Citations Issued	Sex						
		BLAKE HOFFM	AN	0 MALE							
	¥	(608) 548-0968		Date of Birth Race							
	NDIVIDUAL				WHITE						
Ĭ.	≥	Address		Driver License Number							
>	9	503 7TH ST APT 6	-								
	=	BARABOO, WI 53913 , U	S								
	Cod	On Duty	/ Crash	Safety Equipment							
	Sai	ety Equipment									
		Row	Seat Position	SHOULDER & LAP BELT							
		01 - FRONT ROW	07 - LEFT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
		Halium C		Airb							
2	9	Injury S	PPARENT INJURY	Airbag NON DEPLOYED							
	Ŭ	Ejected	Ejection Path	NON DEFECTED		Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT APF	PLICABLE		NOT TRAPPED					
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	,	EMS Run #						
		Hospital		Date of Death		Time of Death					
1		1		1		1					
		Dieterat	ad By Course								
		Distracted By NOT A	ed By Source PPLICABLE (NOT DISTRA	ACTED)							
		Distracted By NOT A Distracted By Action NOT DISTRACTED	ed By Source PPLICABLE (NOT DISTRA	ACTED)		1					

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This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 7 \end{tabular}$

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

		Non Motorist	Striking	Unit #	Location						
		Prior Action			•						
		Action									
	IAL										
F	INDIVIDUAL										
-	NDI										
		Action Other							To/From School		
	ı	Drug & Alcohol	Suspect	ed Alcohol U	lse	Suspected Drug Use					
	_	Alcohol Test Given			Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN Drug Test Given			Drug Test Type		Drug Test Results	<u> </u>			
	_	TEŠT NOT GIVEN Drug Type									
2	001	Diag Type									
		Individual Condition									
		APPEARED NORM	MAL								
	ı	Individual									
	_	PASSENGER KAREN	ORDON	IEZ CADE	NA	Citations Issued 0	Sex FEMALE				
L	DUA					Date of Birth	Race HISPANIC				
Ĭ.	INDIVIDUAL	Address 503 7TH ST APT 6	;			Driver License Number					
	Z	BARABOO, WI 53	913 , U	S							
	Sat	fety Equipment	On Duty	Crash		Safety Equipment					
	-	Row		Seat Po		SHOULDER & LAP BELT					
		01 - FRONT ROW Helmet Use		09 - RI	GHT	Helmet Compliance					
		Eye Protection				Tint Compliance					
	2		Injury Se	everity		Airbag					
2	005	Injury		PARENT II		NON DEPLOYED		1			
		NOT EJECTED		NOT EJE	tn CTED/NOT APPI			Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORTED				EMS Agency Identifier		EMS Run #			
		Hospital				Date of Death		Time of Death			
		Distracted By	Distracte	ed By Source)	L		1			
		Distracted By Action	<u> </u>								
		Non Motoriot	Striking	Unit #	Location						
		Non Motorist			1						

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

1												
		Prior Action										
		Action										
		Action										
	Ļ											
┕	INDIVIDUAL											
UNIT	/ID											
>												
	Z											
		Action Other To/										
	,	Orug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO							
	-							T A1	4 D l4-			
		Alcohol Test Given TEST NOT GIVEN Alcohol Tes		Alcohol Test Type				Alcohol Tes	st Results			
		Drug Test Given		Drug Test Type		Drug	Test Results	<u> </u> 				
		TEŠT NOT GIVEN										
5	002	Drug Type				1						
٦	Ŏ											
		Individual Condition										
		ADDEADED MODMAN										
		APPEARED NORMAL										
·	Unii	Summary										
		Status		Ve	ehicle Operating As Class	sification		Unit Type				
		RANSIT		D	CLASS			AUTOMO				
05	Vehicle Type						Operating A	As Endors	ements			
	(SPORT) UTILITY VEHICLE Total Occs Train/Bus # Recorded			corded IT	otal # Citations Issued	Total Trail	ers	Total H	azMat Types			
	1	Occs	Train/Bas // Tto	0					0			
ŀ	Insurance? Direction Of Travel		avel	Pre CrashTire		Speed Lin	mit Total Lane		ines			
╘	YES WESTBOUND		_			35		4				
IN I	Most Harmful Event: Collision With				pecial Function IO SPECIAL FUNCTIO	ON		NOT APP				
	MOTOR VEH IN TRANSPORT Traffic Way				raffic Control					rative/Missing		
	TWO-WAY, NOT DIVIDED				NO CONTROL			NO	aoi mopo	davo/ivilosing		
	Surface Type				Road Curvature			Road Grade	е			
	BLACKTOP (BITUMINOUS)				STRAIGHT			LEVEL				
	Trucl	k Bus or HazMat										
		/. I. T. I.										
		Vehicle License Plate Number		To	Plata Type	St	Country of Issuance					
		WF6175			Plate Type L TK		WI	UNITED S				
		Vehicle Identification Numb	per		Make		Year	Model				
05	02	1GNDT13S782184808		C	CHEV		2008	TRAILBLA	ZE			
		Color			Body Style			Bus Use				
		BLK - BLACK			JT - SPORT UTILITY	VEHIC	LE					
 	ΊΈ	Initial Contact Point 01 - RIGHT FRONT CO	RNER	\	/ehicle Damage					7 8 9 10 11		
LIND	VEHICL	Extent Of Damage			02 - RIGHT SIDE FRO	NT				6 Pg 12		
_	VE	DISABLING DAMAGE								5 4 3 2 1		
		Towed Due To Damage		V	/ehicle Removed By							
		NOT TOWED										
		What Driver Was Doing GOING STRAIGHT										
		James Grandom										

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									(000) 330-4693
					Veł	nicle Factors			
					١				
		Driver Prior Action Other			NO	T APPLICABLE			
		Driver Actions NO CONTRIBUTING ACT	ION						
L	쁘	NO CONTRIBUTING ACT	ION						
ş	VEHICLE								
5	픕								
	>								
		Owner Name				Owner Address			
l		THOMAS FELLER				1145 COUNTY RD			
05	02	(608) 584-4429				GRAND MARSH, V	VI 53936 , US		
	9	Sequence Of Events							
		Event							
	5	MOTOR VEH IN TRANSP	ORT						
	02	Event							
		Event							
	03								
	94	Event							
ı⊨	-	Policy Holder							
I S	Insurance Company					NDIVIDUAL			
-		HARTFORD-FIRE-INS-CO) 		THOMAS FELLER				
	ı	Individual							
		DRIVER			Citations Issued	Sex			
	7	THOMAS FELLER (608) 584-4429			0 MALE				
١.	INDIVIDUAL				Date of Birth Race WHITE				
Ę	₹	Address			+	Driver License Number			
>	ቯ	1145 COUNTY RD A			Siver Election Manual				
	=	GRAND MARSH, WI 5393	6 , US						
	Saf	On Duty Fety Equipment	Crash		Safety Equipment				
	Sai								
		Row FRONT BOW	Seat Po		SHOULDER & LAP BELT				
		01 - FRONT ROW Helmet Use	07 - LE	:F1					
		Heimet Ose			Helmet Compliance				
		Eye Protection			1	int Compliance			
		- Interest							
02	003	Injury S NO AF	PARFNT I	NIIIRY		Airbag NON DEPLOYED			
		Ejected	Ejection Pa		Т.	1011 021 20120		Trapped/Extricated	
		NOT EJECTED NOT EJECTED/NOT APP			PLIC	ABLE		NOT TRAPPED	
		Medical Transport			E	MS Agency Identifier		EMS Run #	
		NOT TRANSPORTED			\perp				
		Hospital				Date of Death		Time of Death	
		Distract	<u> </u>						
		Distracted By NOT A	PPLICABL	E (NOT DISTR	ACT	ED)			
		NOT DISTRACTED							
		Striking	Unit #	Location					
		Non Motorist							

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		Prior Action					
		Action					
	Ļ						
⊨	ν						
LNU	INDIVIDUAL						
	IND						
		Action Other					To/From School
	L	Drug & Alcohol NO	Use	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	3	
02	003	Drug Type	· L		l		
	0						
		Individual Condition					
		APPEARED NORMAL					