

6TL0F68VPF

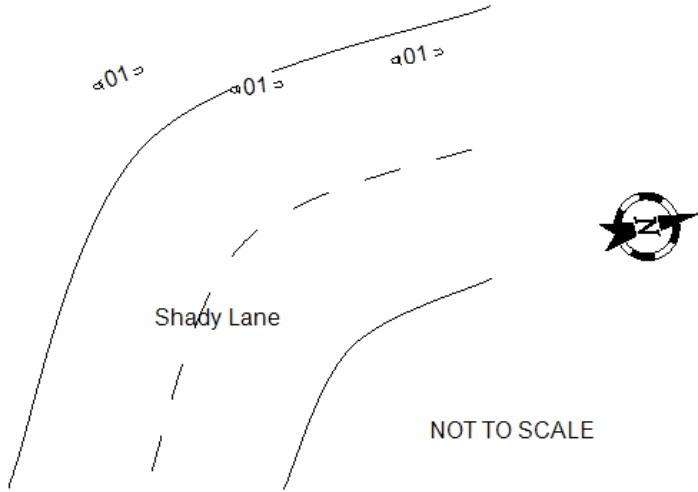
25-11896

WISCONSIN MOTOR VEHICLE
CRASH REPORTSAUK 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 25-11896		Investigating Officer/Deputy SERGEANT T. CLAUER	
Crash Date 11/15/2025		Crash Time 04:10 PM		Date Arrived 11/15/2025		Time Arrived 04:19 PM	
Date Notified 11/15/2025		Time Notified 04:12 PM		Total Units 01		Total Injured 01	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 VERTEIN
	Additional Information PHOTOS

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

ON 11/15/25 I RESPONDED TO A MOTORCYCLE CRASH ON SHADY LANE ROAD. I ARRIVED ON SCENE AND OBSERVED THE MOTORCYCLE WAS TRAVELING EAST ON SHADY LANE ROAD. THE MOTORCYCLE ENTERED THE SOUTH DITCH WHERE IT CAME TO REST AFTER BEING LAID DOWN. OPERATOR HAD NON LIFE THREATENING INJURIES. OPERATOR WAS UNSURE WHAT WAS IN THE ROADWAY TO CAUSE THE BIKE TO GET LAID DOWN. OPERATOR WAS TRANSPORTED TO THE HOSPITAL BY BARABOO AMBULANCE.

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Location

ON SHADY LANE RD 0.33 MI W OF CHTH EB IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude 43.546959516	Longitude -89.689832993
	X Coordinate 282706.6875	Y Coordinate 4825072
	Structure Type NO STRUCTURE	

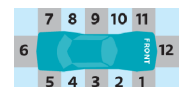
Crash Scene

First Harmful Event DITCH		First Harmful Event Location SHOULDER RIGHT	
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 - 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	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification M CLASS		Unit Type MOTORCYCLE	
	Vehicle Type MOTORCYCLE				Operating As Endorsements	
	Total Occs 01	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	☐ Pre CrashTire Mark	Speed Limit 45	Total Lanes 02	
	Most Harmful Event: Collision With DITCH		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 LEVEL	
	Truck Bus or HazMat NO					

UNIT 01	Vehicle				
	License Plate Number 701XF		Plate Type CYC	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1HD1BHY18YY076989		Make HD	Year 2000	Model HD
	Color BLK - BLACK		Body Style MC - MOTORCYCLE		Bus Use
	Initial Contact Point 09 - LEFT SIDE MIDDLE		Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE		15 - ALL AREAS		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILURE TO CONTROL			
01	Owner Name NICHOLAS PAVLOSKI (608) 617-6495		Owner Address 233 HOMETOWN AVE FALL RIVER, WI 53932 , US	
	Sequence Of Events			
01	Event DITCH			
	Event			
	Event			
	Event			
02	Event			
	Event			
03	Event			
	Event			
04	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		INDIVIDUAL NICHOLAS PAVLOSKI	
UNIT	Individual			
	DRIVER NICHOLAS PAVLOSKI (608) 617-6495		Citations Issued 0	Sex MALE
INDIVIDUAL	Date of Birth		Race WHITE	
	Address 233 HOMETOWN AVE FALL RIVER, WI 53932 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment		On Duty Crash	
	Protective Gear		BOOTS, JACKET, LONG PANTS	
001	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Compliance UNKNOWN	
	Helmet Use NO		Tint Compliance YES	
001	Eye Protection YES: WORN		Airbag NON DEPLOYED	
	Injury		Injury Severity SUSPECTED MINOR INJURY	
001	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
001	Hospital		Date of Death	Time of Death
	Distracted By			
001	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED			

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UNIT INDIVIDUAL 01 001	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					