## 6TL0F1BQ9Q

25-12338

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash [	Document #	25-12		DEPUTY D	ng Officer/Deputy  D. KROLIKOWSKI		
が で で で で で に に に に に に に に に に に に に	Crash Date         Crash Time           11/29/2025         12:52 PM		Date Arrived 11/29/2025		Time Arrived 12:59 PM				
סו בטרום המאת	Date Notified 11/29/2025	Time Notified 12:52 PM		Total Units <b>01</b>		Total Injured Total 00 00		Killed	
_ 	On Emergency Him	t and Run	Lane Closi		Work Zone		or Towed	Reporting Threshold	
	Government Property		hool Zone	School <b>NO</b>	Bus Related	Tags			
	<b>✓</b> Reportable	Crash Type DT4000 (STA	NDARD CRASH	I)		Amend	Secondary Crash		
	Description  Diagram						Reconstructio	n Bv	
	J.ag.a.n						T COOTION WOULD	2,	
							Dhatas Dv		
							Photos By		
							Additional Info	rmation	
			01						
			(	~					
	a sworn law onforceme	ant officer agre	oo that I have no	ot addo	d any C IIS data in th	is ranort			
	I, a sworn law enforcements		se illai i llave ni	or adde	u any cono data in th	пэ герогі.			

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Crash Date 11/29/2025

Crash Time 12:52 PM

ı	_oc	ation <b>—</b>										
·		STH33 EB				Latitude			Longiti	ude		
	884 FT N						43.511903102			-89.783483278		
		USH12 EB	X Coordin			V Coo	rdinato					
		HE TOWN OF DELTO	275010.65625		Y Coordinate 4821427.5							
	IN S	AUK COUNTY	Structure			.02.						
				Structure	туре							
(	Cras	sh Scene										
T	First	Harmful Event				First Harm	nful Event Lo	ocation				
	DIT	СН	ON ROA	DWAY								
-		ner of Collision		Light Cond								
		NO COLLISION W/VI	DAYLIG									
ŀ		Surface Condition(s)	Roadway									
		OW, SLUSH				Roadway	r actor(s)					
ŀ		ronment Factor(s)				-						
	NON					NONE						
ŀ		ther Condition(s)				-						
	SNC											
ŀ		al Type				Relation T	o Trafficway	/				
	****	· ·					CWAY - OI					
ľ	Cras	h Classification - Locatior	n			Crash Clas	ssification -	Jurisdiction				
	PUBLIC PROPERTY					NO SPE	CIAL JUR	SDICTION				
ŀ	Tribal Land					Access Co	ontrol			Special Study		
L					NO CONTROL							
		n Interchange Area	Junction Location					ction Type				
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION					
Į	Jnit	Summary =										
Т	Unit :	Status		Vehicle Ope	erating As C	Classification Unit Type						
	IN T	IN TRANSIT D CLASS					AUTOMOBILE					
. I	Vehic	cle Type	<b>L</b>	Opera			Operating A	ing As Endorsements				
,	PAS	SENGER CAR										
ŀ	Total	Occs	Train/Bus # Recorded	Total # Cita	tions Issued	d Total Trail		ilers Total H		lazMat Types		
	2			0 Pre CrashTire		0		imit Total		Lanes		
-	Insur	ance?	Direction Of Travel									
	YES		EASTBOUND									
ŀ		Harmful Event: Collision		Special Fur	Special Function		I	Emergency Motor Vehicle Use		hicle Use		
	DITCH				NO SPECIAL FUNCTION		ΓΙΟΝ		NOT APPLICABLE			
ŀ	Traffi	ic Way	Traffic Conf	trol			Traffic Control Inoperative/Missing		ative/Missing			
	DIVI	DED HWY W/O TRAF		NO CONTROL			NO					
		асе Туре	Road Curva				Road Grade					
		ICRETE		CURVE R				DOWNHILL				
ŀ	Trucl	k Bus or HazMat				L						
4	NO											
	\	Vehicle License Plate Number		Diato Turo	Plate Type		St	t Country of Issuance				
		JSTADAD	AUT			WI	UNITED STATES					
		Vehicle Identification Nu	Make			Year	Model Model					
ı	01	KMHCM36C59U128					2009 ACCENT		GS			
		Color	HYUN Body Style	•			Bus Use					
		RED - RED	2H - HATCHBACK 2		2 DOOR		OOOR					
	щ	Initial Contact Point	Vehicle Da	Vehicle Damage					7 0 0 10 11			
	[ ]	Ö │00 - NON-COLLISION		1						7 8 9 10 11 6 \$\frac{3}{2}\$ 12		
	VEHICL	Extent Of Damage		00 - NO DAMAGE						5 4 3 2 1		
	NO DAMAGE			1								
	>	NO BAMAGE										

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		Towed Due To Damage		Vehicle Removed By							
		NOT TOWED		CRAIGS TOWING							
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors TIRES							
		Driver Prior Action Other									
		Driver Actions									
	Ш	SPEED TOO FAST/COND									
LNI	⊒ C										
⊃	VEHICLE										
	_										
		Owner Name		Owner Address							
2	0	JOHN MILLER (608) 402-5144		1023 4TH ST BARABOO, WI 53	913 . US						
٥	•	,			, , , ,						
		Sequence Of Events									
	01	Event									
	0	DITCH									
	02	Event									
	03	Event									
		Event									
	04	LVent									
╘	ı	Policy Holder									
LIND		Insurance Company AUTO-CLUB-INS-ASSOC		INDIVIDUAL JOHN MILLER							
		ndividual									
		DRIVER		Citations Issued	Sex						
	INDIVIDUAL	JOHN MILLER		0	MALE						
		(608) 402-5144		Date of Birth	Race						
L N		Address		Driver License Number							
5	Ū	1023 4TH ST		STATE: WISCONSIN COUNTRY: UNITED STATES							
	=	BARABOO, WI 53913 , US									
	Saf	On Duty (	Crash	Safety Equipment							
		Row	Seat Position	SHOULDER & LAP	BELT						
		01 - FRONT ROW	07 - LEFT								
		Helmet Use	•	Helmet Compliance							
		Eye Protection		Tint Compliance							
		<b>-</b> ,		Till Compilation							
5	001	Injury Sev	•	Airbag							
	0		ARENT INJURY Ejection Path	NON DEPLOYED							
		= '	NOT EJECTED/NOT APP	LICABLE		Trapped/Extricated NOT TRAPPED					
	Medical Transport			EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED									
		Hospital		Date of Death Time of Death							
		Distracted President	By Source			l					
		Distracted By NOT AP  Distracted By Action	PLICABLE (NOT DISTRA	CTED)							
		NOT DISTRACTED									

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		<u>_</u>											
		Non Motorist	Striking Ur	nit#	Location								
		Prior Action											
LINI	INDIVIDUAL	Action											
	=												
		Action Other								To/From School			
	L	Orug & Alcohol	Suspected <b>NO</b>	Alcohol U	se	Suspected Drug NO	Use			•			
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Typ	ne			Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN			Drug Test Type			Drug Test Results					
٦	001	Drug Type											
		Individual Condition	Individual Condition										
		APPEARED NORMAL											
	l	Individual											
		PASSENGER DAVID MILLER (608) 717-8728			Citations Issued	Citations Issued Sex  0 MALE							
	UAL				Date of Birth		Race WHITE						
LNO	INDIVIDUAL	Address 1023 4TH ST BARABOO, WI 53913 , US			Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sat	On Duty Crash  afety Equipment				Safety Equipment							
		Row 01 - FRONT ROW	Row Seat Position			SHOULDER &	LAP E	BELT					
		Helmet Use		Helmet Compliance									
		Eye Protection			Tint Compliance								
2	005	Injury					Airbag NON DEPLOYED						
		NOT EJECTED		jection Pa I <b>OT EJE</b>	th CTED/NOT APP			Trapped/Extricated NOT TRAPPED					
		Medical Transport NOT TRANSPORT	ED			EMS Agency Identifier		EMS Run #					
		Hospital				Date of Death			Time of Death				
	Distracted By Source												
		Distracted By Action											
		Non Motorist	Striking Ur	nit#	Location								

Crash Time 12:52 PM

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Crash Date 11/29/2025

Crash Time 12:52 PM

Action					
Action Other					To/From School
		· -			
Suspected Alcohol I Drua & Alcohol NO	Jse				
	Alcohol Test Type			Alcohol Test Results	
TEST NOT GIVEN					
Drug Test Given	Drug Test Type		Drug Test Results		
Drug Type					
Individual Condition					
ADDEADED NODMAL					
AFFEARED NORMAL					
	Action Other  Suspected Alcohol NO  Alcohol Test Given TEST NOT GIVEN  Drug Test Given TEST NOT GIVEN  Drug Type	Action Other  Suspected Alcohol Use NO  Alcohol Test Given TEST NOT GIVEN  Drug Test Given TEST NOT GIVEN  Drug Type  Individual Condition	Action Other    Drug & Alcohol	Action Other    Drug & Alcohol	Action Other    Drug & Alcohol   Suspected Alcohol Use   NO