

6TL0DKRB38

25-12371

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		Investigating Officer/Deputy DEPUTY M. DUNSE	
Crash Date 11/30/2025		Crash Time 01:50 AM		Date Arrived 11/30/2025		Time Arrived 02:24 AM	
Date Notified 12/01/2025		Time Notified 01:59 AM		Total Units 01		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold		
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related NO		Tags			
<input type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash		

Description

Diagram	Reconstruction By
	Photos By
	Additional Information
Non-Reportable	
<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.	
UNIT 1 WAS TRAVELING EB ON STH 60. UNIT 1 GOT CAUGHT IN SOME DEEP SNOW AND GOT PULLED INTO THE DITCH. UNIT 1 HAD SELF HELP ON THE WAY AND WAS PULLED OUT BY ROB'S TOWING. UNIT 1 WAS DRIVEN FROM THE SCENE.	

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Location

ON STH60 EB 592 FT E OF TROY VILLAGE RD IN THE TOWN OF TROY IN SAUK COUNTY	Latitude 43.201337695	Longitude -89.936701386
	X Coordinate 261410.640625	Y Coordinate 4787361
	Structure Type	

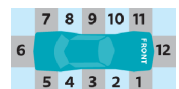
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DARK/UNLIT	
Road Surface Condition(s) SNOW		ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) WEATHER CONDITIONS			
Weather Condition(s) SNOW			
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 D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				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 EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With		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 RIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT VEHICLE 01	Vehicle				
	License Plate Number 534BFVJ		Plate Type	St TN	Country of Issuance UNITED STATES
	Vehicle Identification Number KL77LHEP7SC121813		Make CHEV	Year 2025	Model TRX
	Color GRY - GRAY		Body Style 4D - 4DR		Bus Use
	Initial Contact Point 00 - NON-COLLISION		Vehicle Damage		
	Extent Of Damage NO DAMAGE		00 - NO DAMAGE		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	Owner Name DESTINY GREENEISEN		Owner Address 1013 WISCONSIN AVE FORT CAMPBELL, TN 42223 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company FARMERS-AUTOMOBILE-INS-ASSOC,-THE		INDIVIDUAL DESTINY GREENEISEN	
UNIT INDIVIDUAL	Individual			
	DRIVER SHELBY INGRAM		Citations Issued 0	Sex MALE
			Date of Birth	Race WHITE
	Address 1013 WISCONSIN AVE FORT CAMPBELL, TN 42223 , US		Driver License Number STATE: TENNESSEE COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	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	
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					
		To/From School					
		Drug & Alcohol		Suspected Alcohol Use		Suspected Drug Use	
				NO		NO	
		Alcohol Test Given		Alcohol Test Type		Alcohol Test Results	
		TEST NOT GIVEN					
		Drug Test Given		Drug Test Type		Drug Test Results	
TEST NOT GIVEN							
Drug Type							
Individual Condition							
APPEARED NORMAL							