

6TL0D6N07G

25-12426


# 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		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy <b>DEPUTY B. BRUNKEN</b>	
Crash Date <b>12/01/2025</b>		Crash Time <b>05:00 PM</b>		Date Arrived <b>12/01/2025</b>		Time Arrived <b>05:11 PM</b>	
Date Notified <b>12/01/2025</b>		Time Notified <b>05:00 PM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram 12/02/2025 HY 23-33 / Wakerly Road, Reedsburg, Wisconsin SC25-12426		Reconstruction By  Photos By <b>DEPUTY TROTH</b>
		Additional Information <b>PHOTOS</b>
<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.		
UNIT ONE WAS TRAVELING EASTBOUND ON HY 23-33, NEAR WAKERLY ROAD, REEDSBURG, DURING A LIGHT SNOW. ROADWAY HAD LIGHT SNOW COVERAGE. UNIT ONE LOST TRACTION ON THE ROADWAY, LEFT THE ROADWAY AT THE INTERSECTION ABOVE, TRAVELING INTO THE DITCH ON THE SOUTHEAST SIDE OF THE INTERSECTION. UNIT ONE STRUCK A STOP SIGN, A UTILITY BOX, AND A UTILITY POLE AS IT SKID TO A STOP IN THE DITCH. END OF REPORT. 9106		

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## Location

INTERSECTION ON STH23 EB AT WAKERLY LN IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude <b>43.53302396</b>	Longitude <b>-89.930095974</b>
	X Coordinate <b>263242.0625</b>	Y Coordinate <b>4824180.5</b>
	Structure Type	

## Crash Scene

First Harmful Event <b>DITCH</b>		First Harmful Event Location <b>ROADSIDE</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>SNOW</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>			
Weather Condition(s) <b>CLOUDY, SNOW</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>	
Closure Type <b>FULL CLOSURE</b>		Reasons for Closure	
Date Initial Lane/Rd Closed <b>12/01/2025</b>	Time Initial Lane/Rd Closed <b>05:11 PM</b>	<b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date All Lanes Open <b>12/01/2025</b>	Time All Lanes Open <b>06:00 PM</b>	Date Scene Cleared <b>12/01/2025</b>	Time Scene Cleared <b>06:03 PM</b>

## Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements	
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>UTILITY POLE</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					
	<b>Vehicle</b>					
	01	License Plate Number <b>BCC9164</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
Vehicle Identification Number <b>4T3ZA3BB1EU083560</b>		Make <b>TOYT</b>	Year <b>2014</b>	Model <b>VENZA</b>		

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UNIT	VEHICLE	Color <b>WHI - WHITE</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use	
		Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage		
		Extent Of Damage <b>DISABLING DAMAGE</b>	<b>12 - FRONT</b>		
		Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>STEVES AUTO SERVICE</b>		
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
UNIT	VEHICLE	Driver Prior Action Other	<b>NOT APPLICABLE</b>		
		Driver Actions <b>SPEED TOO FAST/COND</b>			
		Owner Name <b>EMMANUEL OLAITAN OLANIYAN</b>	Owner Address <b>200 W HIAWATHA DR # 6107-B WISCONSIN DELLS, WI 53965 , US</b>		
		<b>Sequence Of Events</b>			
		01	Event <b>MOTOR VEH IN TRANSPORT</b>		
UNIT	VEHICLE	02	Event <b>DITCH</b>		
		03	Event <b>TRAFFIC SIGN POST</b>		
		04	Event <b>UTILITY POLE</b>		
		<b>Policy Holder</b>			
UNIT	INDIVIDUAL	Insurance Company <b>PROGRESSIVE-MUTUAL-INS-CO-(ATTN:-AUTO-U</b>	INDIVIDUAL <b>EMMANUEL OLANIYAN</b>		
		<b>Individual</b>			
		DRIVER <b>EMMANUEL OLANIYAN</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Date of Birth	Race		
UNIT	INDIVIDUAL	Address <b>200 W HIAWATHA DR # 6107-B WISCONSIN DELLS, WI 53965 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
		<b>Safety Equipment</b>			
		On Duty Crash	Safety Equipment		
		Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
UNIT	INDIVIDUAL	Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>DEPLOYED-COMBINATION</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
UNIT	INDIVIDUAL	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #	

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UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <b>NOT DISTRACTED</b>					
	<b>Non Motorist</b>		Striking Unit #		Location	
	Prior Action					
	Action					
	Action Other					To/From School
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
01 001	Drug Type					
	Individual Condition <b>APPEARED NORMAL</b>					
	<b>Individual</b>					
	PASSENGER IFEANYICHUKWU ODITA		Citations Issued <b>0</b>		Sex <b>MALE</b>	
			Date of Birth		Race <b>BLACK/AFRICAN AMERICAN</b>	
	Address <b>200 W HIAWATHA DR # 6103 WISCONSIN DELLS, WI 53965 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
	<b>Safety Equipment</b>		On Duty Crash		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>09 - RIGHT</b>			
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
01 002	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>	
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #	
	Hospital		Date of Death		Time of Death	

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UNIT INDIVIDUAL	<b>Distracted By</b>	Distracted By Source							
	Distracted By Action								
	<b>Non Motorist</b>	Striking Unit #		Location					
	Prior Action								
	Action								
	Action Other						To/From School		
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>			Suspected Drug Use <b>NO</b>				
01 002	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type			Alcohol Test Results			
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type			Drug Test Results			
	Drug Type								
	Individual Condition <b>APPEARED NORMAL</b>								