

6TL0FZQKRR  
25-12000

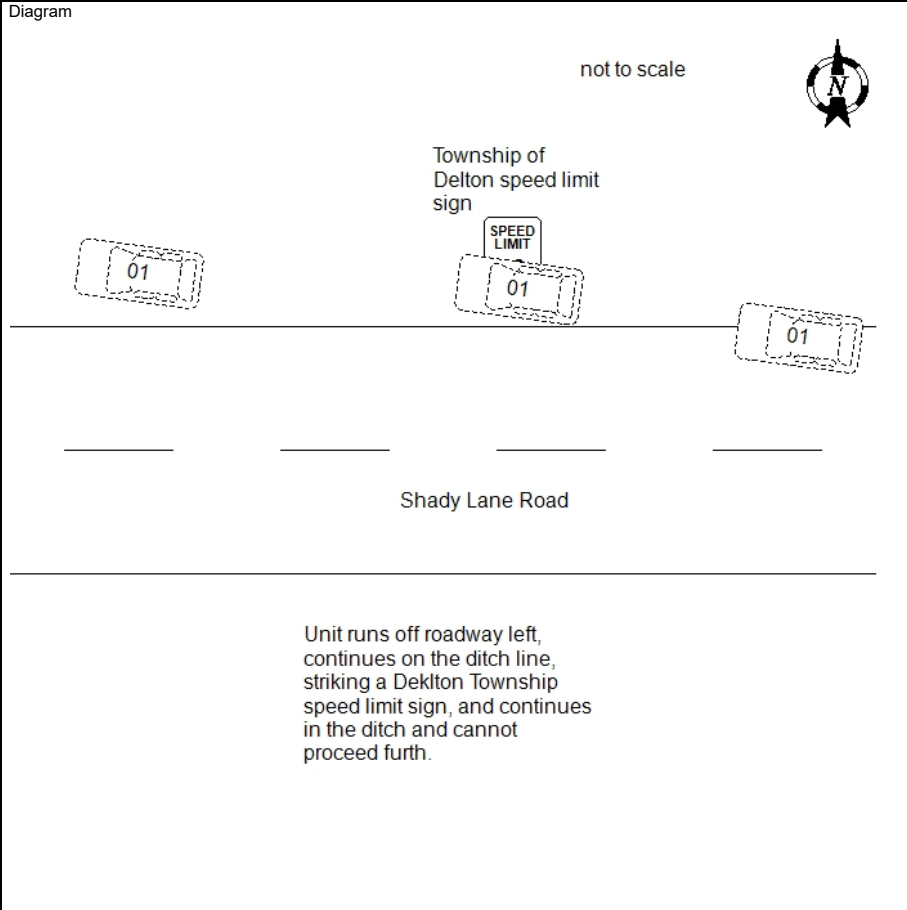
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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 <b>25-1200</b>		Investigating Officer/Deputy <b>DEPUTY S. MESSNER</b>	
Crash Date <b>11/18/2025</b>		Crash Time <b>03:09 PM</b>		Date Arrived <b>11/18/2025</b>		Time Arrived <b>03:19 PM</b>	
Date Notified <b>11/18/2025</b>		Time Notified <b>03:09 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 checked="" 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	Reconstruction By
<p>not to scale</p>  <p>Township of Delton speed limit sign</p> <p>Shady Lane Road</p> <p>Unit runs off roadway left, continues on the ditch line, striking a Deklton Township speed limit sign, and continues in the ditch and cannot proceed furth.</p>	<p>Photos By <b>DEP. S. MESSNER #9134</b></p> <p>Additional Information <b>PHOTOS</b></p>

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

ON 11/18/2025, AT APPROXIMATELY 3:09 PM, UNIT 1, A 2008 GRAY PONTIAC GRAND PRIX, BEARING WI# BBS9116, WAS WESTBOUND ON SHADY LANE ROAD, TOWNSHIP OF DELTON, SAUK COUNTY, WI. UNIT 1 RAN OFF THE ROADWAY LEFT AND PROCEEDED WESTBOUND, STRIKING A SPEED LIMIT SIGN OWNED BY THE TOWNSHIP OF DELTON. UNIT 1 PROCEEDED WESTBOUND IN THE DITCH UNTIL IT BECAME STUCK. THE DRIVER GOT OUT OF THE VEHICLE, WALKED AWAY, AND UPON ARRIVAL OF LAW ENFORCEMENT, FLED THE SCENE. DRIVER'S IDENTITY WAS CONFIRMED BY DOT PHOTOGRAPH, WITNESS STATEMENTS AND DRIVER ADMITTING TO OPERATING THE VEHICLE ON 11/19/2025 TO LAW ENFORCEMENT. THE VEHICLE WAS REMOVED BY CRAIG'S TOWING.

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Location

ON SHADY LANE RD 624 FT W OF HASTINGS RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.546850969</b>	Longitude <b>-89.810354965</b>
	X Coordinate <b>272969.75</b>	Y Coordinate <b>4825382</b>
	Structure Type	

Crash Scene

First Harmful Event <b>DITCH</b>		First Harmful Event Location <b>SHOULDER RIGHT</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>WET</b>		<b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLOUDY</b>			
Animal Type		Relation To Trafficway <b>NON TRAFFICWAY - OTHER</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>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	
Closure Type <b>LANE CLOSURE</b>		Reasons for Closure	
Date Initial Lane/Rd Closed <b>11/18/2025</b>	Time Initial Lane/Rd Closed <b>04:15 PM</b>	<b>LAW ENFORCEMENT, TOW TRUCK</b>	
Date All Lanes Open <b>11/18/2025</b>	Time All Lanes Open <b>04:27 PM</b>	Date Scene Cleared <b>11/18/2025</b>	Time Scene Cleared <b>04:27 PM</b>

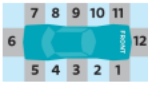
Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>2</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>45</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>TRAFFIC SIGN POST</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>					
	01	Vehicle				
		License Plate Number <b>BBS9116</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
Vehicle Identification Number <b>2G2WP55268115775</b>		Make <b>PONT</b>	Year <b>2008</b>	Model <b>GRAND PRIX</b>		

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UNIT	VEHICLE	Color <b>GRY - GRAY</b>	Body Style <b>SD - SEDAN</b>	Bus Use
		Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE</b>	
		Extent Of Damage <b>DISABLING DAMAGE</b>		
		Towed Due To Damage <b>TOWED BUT NOT DUE TO DISABLING DAMAG</b>	Vehicle Removed By <b>CRAIGS TOWING</b>	
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors <b>NOT APPLICABLE</b>	
UNIT	VEHICLE	Driver Prior Action Other		
		Driver Actions <b>FAILURE TO CONTROL, RAN OFF ROADWAY</b>		
		Owner Name <b>MARK JESSE</b>	Owner Address <b>N874 WIBU RD ARLINGTON, WI 53911 , US</b>	
		Sequence Of Events		
		Event <b>DITCH</b>		
UNIT	VEHICLE	Event <b>TRAFFIC SIGN POST</b>		
		Event		
		Event		
		Event		
		Event		
UNIT	VEHICLE	Policy Holder		
		Insurance Company <b>PROGRESSIVE-UNIVERSAL-INSURANCE-COMP</b>	INDIVIDUAL <b>MARK JESSE</b>	
		Individual		
		DRIVER <b>MARK JESSE</b>	Citations Issued <b>2</b>	Sex <b>MALE</b>
			Date of Birth	Race <b>WHITE</b>
UNIT	INDIVIDUAL	Address <b>N874 WIBU RD ARLINGTON, WI 53911 , US</b>	Driver License Number	
		Safety Equipment		
		On Duty Crash		
		Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>
		Helmet Use	Helmet Compliance	
UNIT	INDIVIDUAL	Eye Protection	Tint Compliance	
		Injury <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 #

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UNIT INDIVIDUAL 01 001	Hospital		Date of Death		Time of Death	
	<b>Distracted By</b>		Distracted By Source UNKNOWN			
	Distracted By Action UNKNOWN					
	<b>Non Motorist</b>		Striking Unit #		Location	
	Prior Action					
	Action					
	Action Other					
	To/From School					
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use YES		Suspected Drug Use YES	
	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  UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL					
	<b>Violations</b>					
	01	UTC Number BN318624	Issue To? 001	Statute Number 346.70(2)	Description FAILURE TO FILE ACCIDENT REPORT	
02	UTC Number BN318625	Issue To? 001	Statute Number 346.69	Description HIT AND RUN-PROPERTY ADJACENT TO HIGHWAY		
<b>Property Owner</b>						
01	GOVERNMENT TOWNSHIP OF DELTON (608) 253-4621			Address 30 S WISCONSIN DELLS PKWY PO BOX 148 LAKE DELTON, WI 53940 , US		
<b>Fixed Objects Struck</b>						
01	Striking Unit 01	Struck Object TRAFFIC SIGN POST			Structure Number	Damage Tag Number NA