

6TL0F2KRFC  
25-12339

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

Document Number Override	Primary Crash Document #	Agency Crash Number <b>12339</b>	Investigating Officer/Deputy <b>DEPUTY I. GALVAN</b>		
Crash Date <b>11/29/2025</b>	Crash Time <b>12:25 PM</b>	Date Arrived <b>11/29/2025</b>	Time Arrived <b>12:42 PM</b>		
Date Notified <b>11/29/2025</b>	Time Notified <b>12:27 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	Reconstruction By  	Photos By <b>I GALVAN</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 1 TRAVELING EASTBOUND ON SNOW COVERED USH 12 BETWEEN S GASSER ROAD AND LEHMAN ROAD. UNIT 1 BEGAN TO FISHTAIL DUE TO ROAD CONDITIONS. UNIT 1 SLID INTO GUARDRAIL FACE CAUSING DISABLING DAMAGE. NO DAMAGE TO THE GUARD RAIL. PLATT'S GARAGE REMOVED UNIT 1. NO INJURIES REPORTED.			

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**Location**

ON USH12 EB 0.41 MI N OF LEHMAN RD IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude <b>43.429717781</b>	Longitude <b>-89.77383916</b>
	X Coordinate <b>275485.9375</b>	Y Coordinate <b>4812273.5</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>GUARDRAIL FACE</b>	First Harmful Event Location <b>ON ROADWAY</b>		
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>		
Road Surface Condition(s) <b>WET, SNOW, SLUSH, ICE</b>	Roadway Factor(s)		
Environment Factor(s) <b>WEATHER CONDITIONS</b>	ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)		
Weather Condition(s) <b>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>		
Within Interchange Area <b>NO</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>11/29/2025</b>	Time Initial Lane/Rd Closed <b>12:42 PM</b>	<b>LAW ENFORCEMENT, TOW TRUCK</b>	
Date All Lanes Open <b>11/29/2025</b>	Time All Lanes Open <b>01:30 PM</b>	Date Scene Cleared <b>11/29/2025</b>	Time Scene Cleared <b>01:30 PM</b>

**Unit Summary**

01  UNIT	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>5</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>65</b>
	Most Harmful Event: Collision With <b>GUARDRAIL FACE</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/TRAFFIC BARRIER</b>	Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>CURVE RIGHT</b>	Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>			
	<b>Vehicle</b>			
	License Plate Number <b>AXF3901</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>

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UNIT VEHICLE	Color <b>BLU - BLUE</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use		
	Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>			
	Extent Of Damage <b>DISABLING DAMAGE</b>		Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>			
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Removed By <b>PLATTS WRECKER</b>	Vehicle Factors <b>NOT APPLICABLE</b>		
	Driver Prior Action Other					
	Driver Actions <b>NO CONTRIBUTING ACTION</b>					
	UNIT VEHICLE	Owner Name <b>KRISHNA PATEL (848) 213-7470</b>		Owner Address <b>9454 BRIAR HAVEN DR VERONA, WI 53593 , US</b>		
		<b>Sequence Of Events</b>				
		01	Event <b>GUARDRAIL FACE</b>			
		02	Event			
		03	Event			
	04	Event				
INDIVIDUAL UNIT	<b>Individual</b>					
	DRIVER <b>NGHI PHAN (224) 578-0823</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
			Date of Birth	Race <b>ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER</b>		
	Address <b>102 N BEDFORD ST # 515 MADISON, WI 53703 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
	<b>Safety Equipment</b>		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>				
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
	<b>Injury</b>	<b>Injury Severity</b> <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 <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
	Drug Type				
Individual Condition					
<b>APPEARED NORMAL</b>					
UNIT INDIVIDUAL	<b>Individual</b>				
	PASSENGER <b>DUY TRAN</b> (608) 335-5673		Citations Issued <b>0</b>	Sex <b>MALE</b>	
			Date of Birth	Race <b>ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN</b>	
	Address <b>111 N MILLS ST # D</b> <b>MADISON, WI 53715 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
	<b>Safety Equipment</b>		Safety Equipment		
	Row <b>01 - FRONT ROW</b>		Seat Position <b>09 - RIGHT</b>		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>		
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Medical Transport <b>NOT TRANSPORTED</b>			EMS Agency Identifier	EMS Run #	
Hospital			Date of Death	Time of Death	
<b>Distracted By</b>		Distracted By Source			

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Distracted By Action											
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Action Other		To/From School									
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Individual Condition											
<b>APPEARED NORMAL</b>											
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<b>UNIT</b>  <b>INDIVIDUAL</b>		<b>Non Motorist</b>				
		Striking Unit #	Location			
		Prior Action				
		Action				
<b>Action Other</b>		To/From School				
<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use	Suspected Drug Use			
<b>NO</b>		<b>NO</b>	<b>Alcohol Test Given</b> <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results	
<b>Drug Test Given</b> <b>TEST NOT GIVEN</b>		<b>Drug Test Type</b>	<b>Drug Test Results</b>			
<b>Drug Type</b>						
<b>Individual Condition</b>		<b>APPEARED NORMAL</b>				
<b>Individual</b>						
<b>PASSENGER</b> <b>CHI DINH</b> <b>(312) 900-6999</b>		Citations Issued	Sex			
<b>0</b>		<b>FEMALE</b>				
<b>Date of Birth</b>		<b>Race</b> <b>ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN</b>				
<b>Address</b> <b>430 W DAYTON ST</b> <b>MADISON, WI 53703 , US</b>		<b>Driver License Number</b>				
<b>Safety Equipment</b>		<b>Safety Equipment</b>				
<b>Row</b> <b>02 - SECOND ROW</b>		<b>Seat Position</b> <b>09 - RIGHT</b>		<b>SHOULDER &amp; LAP BELT</b>		
<b>Helmet Use</b>		<b>Helmet Compliance</b>				
<b>Eye Protection</b>		<b>Tint Compliance</b>				
<b>Injury</b>		<b>Injury Severity</b> <b>NO APPARENT INJURY</b>		<b>Airbag</b> <b>NON DEPLOYED</b>		
<b>Ejected</b> <b>NOT EJECTED</b>		<b>Ejection Path</b> <b>NOT EJECTED/NOT APPLICABLE</b>			<b>Trapped/Extricated</b> <b>NOT TRAPPED</b>	
<b>Medical Transport</b> <b>NOT TRANSPORTED</b>		<b>EMS Agency Identifier</b>			<b>EMS Run #</b>	
<b>Hospital</b>		<b>Date of Death</b>			<b>Time of Death</b>	
<b>Distracted By</b>		<b>Distracted By Source</b>				
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UNIT		Prior Action		
INDIVIDUAL		Action		
		Action Other		To/From School
01		Drug & Alcohol	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
004		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		Drug Type		
004		Individual Condition		
		<b>APPEARED NORMAL</b>		
UNIT		Individual		
INDIVIDUAL		PASSENGER <b>MAI NGUYEN</b> (608) 292-0732	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
			Date of Birth	Race <b>ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN</b>
01		Address <b>424 W MIFFLIN ST #202 MADISON, WI 53703 , US</b>	Driver License Number	
005		Safety Equipment	On Duty Crash	
			Safety Equipment	
		Row <b>02 - SECOND ROW</b>	Seat Position <b>08 - MIDDLE</b>	<b>SHOULDER &amp; LAP BELT</b>
		Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance
01		Injury	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
005		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
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		Non Motorist	Striking Unit #	Location
UNIT		Prior Action		

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UNIT 01 005			
	Action		
	Action Other		To/From School
	Drug & Alcohol	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
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