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25-13091

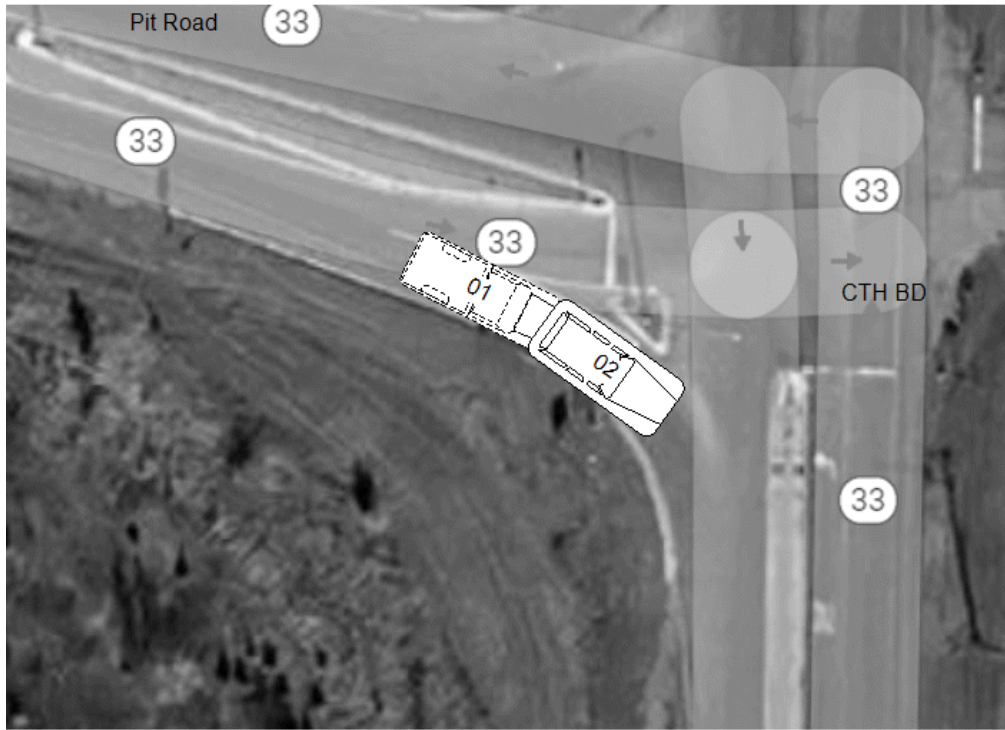
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 25-13091		Investigating Officer/Deputy DEPUTY S. ELLICKSON	
Crash Date 12/21/2025		Crash Time 11:24 AM		Date Arrived 12/21/2025		Time Arrived 11:29 AM	
Date Notified 12/21/2025		Time Notified 11:24 AM		Total Units 02		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 checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash

Description

Diagram		Reconstruction By	
<p>Not to Scale</p> 		<p>Photos By</p>	
		<p>Additional Information PHOTOS</p>	

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

UNIT 1 AND 2 WERE TRAVELING EASTBOUND ON PIT ROAD. BOTH UNIT 1 AND 2 WERE AT THE STOP SIGN TO TURN SOUTHBOUND ONTO CTH BD. UNIT 2 WENT TO PULL OUT SLIGHTLY TO SEE IF HE COULD GO. ONCE UNIT 2 NOTICED HE WAS NOT ABLE TO GO HE STOPPED. UNIT 1 STATED HE WAS LOOKING NORTHBOUND WHEN THIS WAS GOING ON TO DO THE SAME. UNIT 1 DID NOT SEE UNIT 2 STOP AND REAR ENDED HIM DUE TO LOOKING NORTH BOUND AND INSTEAD OF IN FRONT OF HIM.

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Location

ON PIT RD 61 FT W OF CTHBD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.513633046	Longitude -89.778281303
	X Coordinate 275437.5625	Y Coordinate 4821605.5
	Structure Type	

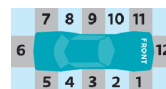
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 03 - FRONT TO REAR		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control PARTIAL CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type T-INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 1	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 MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE 01	Vehicle				
	License Plate Number 80570DS		Plate Type LTK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FT8W2BT6REF23687		Make FORD	Year 2024	Model F250
	Color BLK - BLACK		Body Style PK - PICKUP		Bus Use
	Initial Contact Point 01 - RIGHT FRONT CORNER		Vehicle Damage 01 - RIGHT FRONT CORNER		
	Extent Of Damage MINOR DAMAGE				



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UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
		What Driver Was Doing RIGHT TURN		Vehicle Factors NOT APPLICABLE	
		Driver Prior Action Other			
		Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01	01	Owner Name CHARLES SWARTZ		Owner Address 3322 STATE HIGHWAY 13 WISCONSIN DELLS, WI 53965 , US	
		Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT	INDIVIDUAL	Policy Holder			
		Insurance Company WISCONSIN-AUTOMOBILE-INS-PLAN		INDIVIDUAL CHARLES SWARTZ	
01	001	Individual			
		DRIVER CHARLES SWARTZ (608) 844-7728		Citations Issued 1	Sex MALE
		Date of Birth		Race WHITE	
		Address 3916 N POTSDAM AVE SIOUX FALLS, SD 57104 , US		Driver License Number STATE: SOUTH DAKOTA COUNTRY: UNITED STATES	
01	001	Safety Equipment		On Duty Crash	
		Row 01 - FRONT ROW		Seat Position 07 - LEFT	
		Helmet Use		Safety Equipment SHOULDER & LAP BELT	
		Eye Protection		Helmet Compliance	
01	001	Injury		Airbag	
		Injury Severity NO APPARENT INJURY		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 EXTERNAL (TO VEHICLE/NON-MOTORIST AREA)			
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)					

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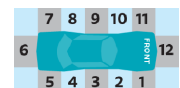
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UNIT INDIVIDUAL	01	001	Non Motorist		Striking Unit #	Location	
			Prior Action				
			Action				
	Action Other					To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
	Drug Type						
	Individual Condition APPEARED NORMAL						
	Violations						
01	UTC Number BJ679462		Issue To? 001	Statute Number 346.89(1)	Description INATTENTIVE DRIVING		

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER VAN				Operating As Endorsements	
	Total Occs 4	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

02	02	Vehicle				
		License Plate Number 468YXP		Plate Type AUT	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 5TDKK3DC6DS393837		Make TOYT	Year 2013	Model SIENNA
		Color SIL - SILVER (ALUMINUM)		Body Style VN - VAN		Bus Use
		Initial Contact Point 06 - REAR				



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UNIT	VEHICLE	Vehicle Damage		
		Extent Of Damage FUNCTIONAL DAMAGE	06 - REAR	
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
		What Driver Was Doing RIGHT TURN	Vehicle Factors	
UNIT	VEHICLE	Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions NO CONTRIBUTING ACTION		
		Owner Name ERIK POFF (715) 441-2230	Owner Address 551 QUARRY ST BARABOO, WI 53913 , US	
		Sequence Of Events		
UNIT	VEHICLE	Event MOTOR VEH IN TRANSPORT		
		Event		
		Event		
		Event		
UNIT	VEHICLE	Policy Holder		
		Insurance Company WEST-BEND-MUTUAL-INS-CO	INDIVIDUAL ERIK POFF	
		Individual		
		DRIVER GLENN POFF (715) 441-2230	Citations Issued 0	Sex MALE
UNIT	INDIVIDUAL	Date of Birth	Race WHITE	
		Address 551 QUARRY ST BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
		Safety Equipment		
		On Duty Crash	Safety Equipment	
UNIT	INDIVIDUAL	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
UNIT	INDIVIDUAL	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier
		Hospital		Date of Death
				Time of Death

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UNIT INDIVIDUAL	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED			
	Non Motorist		Striking Unit #	Location
	Prior Action			
	Action			
	Action Other			
	To/From School			
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
02 002	Drug Type			
	Individual Condition APPEARED NORMAL			
	Individual			
	PASSENGER LAUREL POFF (715) 441-2230		Citations Issued 0	Sex FEMALE
			Date of Birth	Race WHITE
	Address 551 QUARRY ST BARABOO, WI 53913 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 09 - RIGHT	
	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
02 003	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			

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UNIT	INDIVIDUAL	Distracted By Action		
		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			
UNIT	INDIVIDUAL	Individual		
		PASSENGER	Citations Issued	Sex
		JOSEPH POFF	0	MALE
			Date of Birth	Race
				WHITE
		Address	Driver License Number	
		551 QUARRY STREET		
		BARABOO, WI 53913 , US		
		Safety Equipment	On Duty Crash	Safety Equipment
				SHOULDER & LAP BELT
Row	Seat Position			
	02 - SECOND ROW	07 - LEFT		
Helmet Use	Helmet Compliance			
Eye Protection	Tint Compliance			
Injury	Injury Severity	Airbag		
	NO APPARENT INJURY	NON DEPLOYED		
Ejected	Ejection Path	Trapped/Extricated		
NOT EJECTED	NOT EJECTED/NOT APPLICABLE	NOT TRAPPED		
Medical Transport	EMS Agency Identifier	EMS Run #		
NOT TRANSPORTED				
Hospital	Date of Death	Time of Death		
Distracted By	Distracted By Source			
	Distracted By Action			

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					To/From School
02	004	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO	
		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 APPEARED NORMAL					
		Individual					
		PASSENGER HOLLY POFF (715) 441-2230			Citations Issued 0	Sex FEMALE	
					Date of Birth	Race WHITE	
		Address 551 QUARRY ST BARABOO, WI 53913 , US			Driver License Number		
		02	005	Safety Equipment		On Duty Crash	
Row 06 -UNKNOWN ROW	Seat Position 09 - RIGHT						
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			
Distracted By Action							
02	005	Non Motorist		Striking Unit #	Location		

UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other			To/From School
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
		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 APPEARED NORMAL			