

6TL0D6N07N
25-13194

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 DEPUTY B. BRUNKEN	
Crash Date 12/24/2025		Crash Time 06:48 PM		Date Arrived 12/24/2025		Time Arrived 07:03 PM	
Date Notified 12/24/2025		Time Notified 06:48 PM		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 PRIVATE PROPERTY/PARKING LOT			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram SC25-13194 12/24/25 E9094 Holly Circle, Wisconsin Dells, Wisconsin	Reconstruction By
	Photos By DEPUTY BRUNKEN 9106
Additional Information PHOTOS	

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

OPERATOR OF UNIT ONE EXITED VEHICLE WHILE THE VEHICLE WAS STILL IN REVERSE WITHOUT KNOWING. UNIT ONE BACKED INTO UNIT TWO WHICH WAS LEGALLY PARKED.

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Location

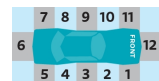
PARKING LOT COON BLUFF RD LOT VILLA 18 (HOUSE/BUILDING VILLA 18) IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.61376364	Longitude -89.866266953
	X Coordinate 268709.28125	Y Coordinate 4832968
	Structure Type HOUSE/BUILDING	

Crash Scene

First Harmful Event PARKED MOTOR VEHICLE		First Harmful Event Location OFF ROADWAY, LOCATION UNKNOWN	
Manner of Collision 04 - REAR TO REAR		Light Condition DARK/LIGHTED	
Road Surface Condition(s) WET		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLOUDY			
Animal Type		Relation To Trafficway NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location PRIVATE PROPERTY		Crash Classification - Jurisdiction PRIVATE PROPERTY	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

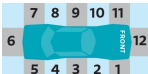
UNIT 01	Unit Status LEGALLY PARKED		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements		
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
	Insurance? YES	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit N/A	Total Lanes		
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way PARKING LOT OR PRIVATE PROPERTY		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade UPHILL		
	Truck Bus or HazMat NO						
	UNIT 01 VEHICLE 01	Vehicle					
		License Plate Number DJ65625		Plate Type AUT	St IL	Country of Issuance UNITED STATES	
Vehicle Identification Number 1FMSK8DH4MGC38265		Make FORD	Year 2021	Model EXPLORER			
Color BLU - BLUE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use			
Initial Contact Point 07 - LEFT REAR CORNER		Vehicle Damage 07 - LEFT REAR CORNER					
Extent Of Damage MINOR DAMAGE							



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UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER			
		What Driver Was Doing LEGALLY PARKED		Vehicle Factors			
		Driver Prior Action Other		NOT APPLICABLE			
		Driver Actions NO CONTRIBUTING ACTION					
01	01	Owner Name TAWAGA ROBERTS (815) 378-1529		Owner Address 9417 S CHAMPLAIN AVE CHICAGO, IL 60619 7713, US			
Sequence Of Events							
UNIT	VEHICLE	01	Event MOTOR VEH IN TRANSPORT				
		02	Event PARKED MOTOR VEHICLE				
		03	Event				
		04	Event				
Policy Holder							
UNIT	VEHICLE	Insurance Company USAA-CASUALTY-INS-CO		INDIVIDUAL TAWAGA ROBERTS			
Unit Summary							
UNIT	VEHICLE	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
		Vehicle Type PASSENGER VAN				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 NOT ON ROADWAY	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit N/A	Total Lanes	
		Most Harmful Event: Collision With PARKED MOTOR VEHICLE		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way PARKING LOT OR PRIVATE PROPERTY		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
		Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL	
		Truck Bus or HazMat NO					
		Vehicle					
		UNIT	VEHICLE	License Plate Number NX9327		Plate Type LTK	St WI
Vehicle Identification Number NM0LS7F79H1323129				Make FORD	Year 2017	Model TRANSIT CO	
Color SIL - SILVER (ALUMINUM)				Body Style VN - VAN		Bus Use	
Initial Contact Point 07 - LEFT REAR CORNER				Vehicle Damage			
Extent Of Damage MINOR DAMAGE				07 - LEFT REAR CORNER			

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
		What Driver Was Doing BACKING		Vehicle Factors	
		Driver Prior Action Other		NOT APPLICABLE	
		Driver Actions NO CONTRIBUTING ACTION			
02	02	Owner Name CHRISTMAS MOUNTAIN VILLAGE		Owner Address S944 CHRISTMAS MOUNTAIN RD WISCONSIN DELLS, WI 53965 , US	
		Sequence Of Events			
UNIT	INDIVIDUAL	Event MOTOR VEH IN TRANSPORT			
		Event PARKED MOTOR VEHICLE			
		Event			
		Event			
02	001	Policy Holder			
		Insurance Company SEDGWICK INSURANCE		ORGANIZATION/COMPANY CHRISTMAS MOUNTAIN VILLAGE	
		Individual			
		DRIVER DAVID ROBERTSON (516) 615-7451		Citations Issued 0	Sex MALE
Address 701 STONEY ACRES RD # 201 WISCONSIN DELLS, WI 53965 , US		Date of Birth	Race BLACK/AFRICAN AMERICAN	Driver License Number	
Safety Equipment		On Duty Crash	Safety Equipment		
Row 01 - FRONT ROW		Seat Position 07 - LEFT	OTHER		
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					

Wisconsin Motor Vehicle Crash
Form DT4000

This report does not include any CJIS data.
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Crash Date **12/24/2025**
Crash Time **06:48 PM**

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location
		Prior Action			
		Action			
		Action Other			To/From School
		Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
02	001	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			