

6TL0F8QXZZ
25-12995

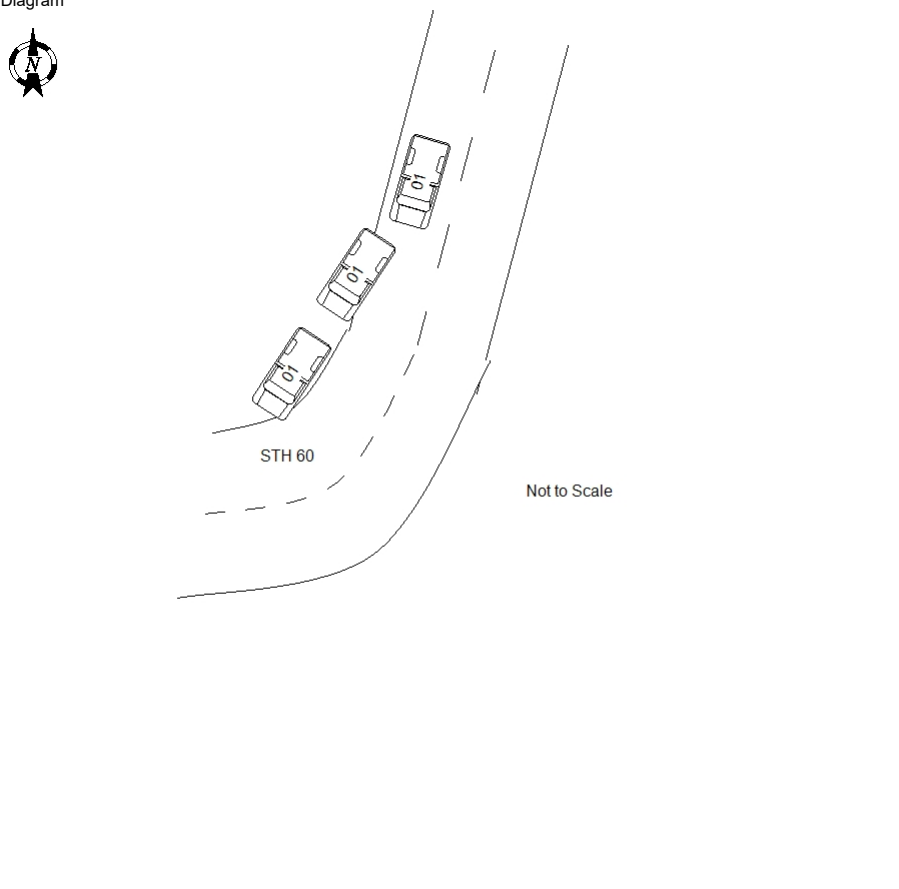
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 SC25-12995 | | Investigating Officer/Deputy DEPUTY J. GREENWOOD | |
| Crash Date 12/18/2025 | | Crash Time 03:35 PM | | Date Arrived 12/18/2025 | | Time Arrived 04:08 PM | |
| Date Notified 12/18/2025 | | Time Notified 03:48 PM | | Total Units 01 | | 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 |
|  | | Photos By |
| | | Additional Information NONE |

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

UNIT 1 WAS SB ON STH 60. OPERATOR OF UNIT 1 ADVISED HIS FRONT TIRE BEGAN TO SHAKE. ONCE HE PULLED OVER UNIT 1 WHEN INTO THE DITCH AND LOST TIRE.

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Location

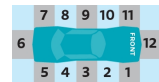
| | | |
|---|---------------------------------------|-----------------------------------|
| ON STH60 WB 347 FT N OF SEITZ RD IN THE TOWN OF TROY IN SAUK COUNTY | Latitude 43.241310236 | Longitude -89.842742409 |
| | X Coordinate 269195.59375 | Y Coordinate 4791536.5 |
| | Structure Type NO STRUCTURE | |

Crash Scene

| | | |
|--|---|---|
| First Harmful Event DITCH | First Harmful Event Location ON ROADWAY | |
| Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT | Light Condition DAYLIGHT | |
| Road Surface Condition(s) DRY | NONE | |
| Environment Factor(s) NONE | | |
| Weather Condition(s) CLOUDY | | |
| Animal Type | Relation To Trafficway TRAFFICWAY - ON ROAD | |
| Crash Classification - Location PUBLIC PROPERTY | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | |
| 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 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 0 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? YES | Direction Of Travel WESTBOUND | <input type="checkbox"/> Pre CrashTire Mark | Speed Limit 55 | Total Lanes 2 | |
| | Most Harmful Event: Collision With DITCH | | Special Function NO SPECIAL FUNCTION | | Emergency Motor Vehicle Use NOT APPLICABLE | |
| | Traffic Way TWO-WAY, NOT DIVIDED | | Traffic Control NO CONTROL | | Traffic Control Inoperative/Missing NO | |
| | Surface Type BLACKTOP (BITUMINOUS) | | Road Curvature CURVE LEFT | | Road Grade LEVEL | |
| | Truck Bus or HazMat NO | | | | | |
| | UNIT VEHICLE 01 | Vehicle | | | | |
| | | License Plate Number SZ3233 | | Plate Type LTK | St WI | Country of Issuance UNITED STATES |
| Vehicle Identification Number 1GCEK19CX8Z128613 | | Make CHEV | Year 2008 | Model SILVERADO | | |
| Color WHI - WHITE | | Body Style PK - PICKUP | | Bus Use | | |
| Initial Contact Point 01 - RIGHT FRONT CORNER | | Vehicle Damage | | | | |
| Extent Of Damage DISABLING DAMAGE | | 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER | | | | |



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|------|----|------------|---|--|---|-------------------------------|
| UNIT | 01 | VEHICLE | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | | Vehicle Removed By | |
| | | | What Driver Was Doing NEGOTIATING CURVE | | Vehicle Factors | |
| | | | Driver Prior Action Other | | TIRES | |
| | | | Driver Actions NO CONTRIBUTING ACTION | | | |
| UNIT | 01 | INDIVIDUAL | Owner Name DANIEL NOFSINGER | | Owner Address 19801 STATE HWY 80 RICHLAND CENTER, WI 53581 , US | |
| | | | Sequence Of Events | | | |
| | | | Event DITCH | | | |
| | | | Event | | | |
| UNIT | 01 | INDIVIDUAL | Event | | | |
| | | | Event | | | |
| | | | Event | | | |
| | | | Event | | | |
| UNIT | 01 | INDIVIDUAL | Policy Holder | | | |
| | | | Insurance Company STATE-FARM-CLASSIC-INS-CO | | INDIVIDUAL DANIEL NOFSINGER | |
| | | | Individual | | | |
| | | | DRIVER DANIEL NOFSINGER | | Citations Issued 0 | Sex MALE |
| UNIT | 01 | INDIVIDUAL | Date of Birth | | Race | |
| | | | Address 19801 STATE HWY 80 RICHLAND CENTER, WI 53581 , US | | Driver License Number | |
| | | | On Duty Crash | | Safety Equipment | |
| | | | Safety Equipment | | SHOULDER & LAP BELT | |
| UNIT | 01 | INDIVIDUAL | Row 01 - FRONT ROW | Seat Position 07 - LEFT | Helmet Use | |
| | | | Helmet Compliance | | | |
| | | | Eye Protection | | Tint Compliance | |
| | | | Injury | | Injury Severity NO APPARENT INJURY | Airbag NON DEPLOYED |
| UNIT | 01 | INDIVIDUAL | 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 | | | |
| UNIT | 01 | INDIVIDUAL | Distracted By Source NOT APPLICABLE (NOT DISTRACTED) | | | |
| | | | Distracted By Action NOT DISTRACTED | | | |

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| | | | | | | |
|------|------------|---|--|---------------------------------|----------------------|----------------|
| UNIT | INDIVIDUAL | Non Motorist | | Striking Unit # | Location | |
| | | Prior Action | | | | |
| | | Action | | | | |
| | | Action Other | | | | To/From School |
| | | Suspected Alcohol Use NO | | Suspected Drug Use NO | | |
| 01 | 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 | | | | |