

**6TL0D7W184**

# WISCONSIN MOTOR VEHICLE CRASH REPORT

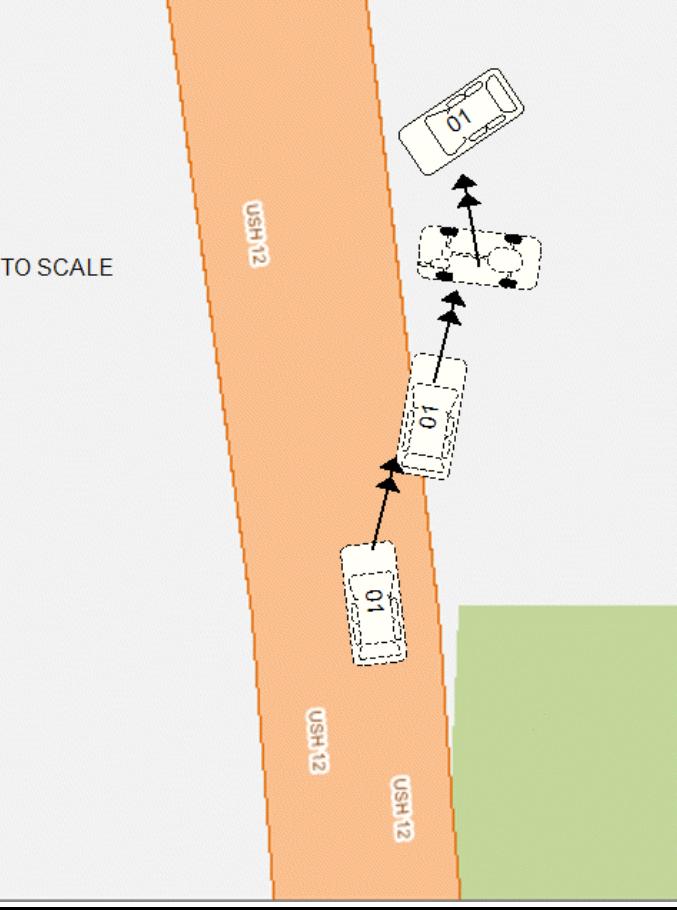
**SAUK COUNTY SHERIFFS DEPARTMENT**  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895

26-00267

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Document Number Override		Primary Crash Document #	Agency Crash Number <b>26-00267</b>	Investigating Officer/Deputy <b>DEPUTY K. MUELLER</b>	
Crash Date <b>01/08/2026</b>		Crash Time <b>03:38 PM</b>	Date Arrived <b>01/08/2026</b>	Time Arrived <b>03:43 PM</b>	
Date Notified <b>01/08/2026</b>		Time Notified <b>03:38 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 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
 <p>NOT TO SCALE</p>	<p>Photos By <b>KMUELLER</b></p> <p>Additional Information <b>PHOTOS</b></p>
<p><input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.</p> <p>UNIT 1 WAS DRIVING NORTH (WEST) ON HWY 12. UNIT 1 WAS DRIVING IN THE LANE CLOSEST TO THE MEDIAN AND BEGAN LOSING CONTROL. UNIT 1 SWERVED AND WENT IN TO THE DITCH ROLLING. THIS WAS CONFIRMED BY AN UNIDENTIFIED WITNESS AS WELL. THERE WAS RAIN AND SLICK ROADS AT THE TIME.</p>	

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## Location

ON USH12 WB 0.73 MI S OF SKIHI RD IN THE TOWN OF SUMPTER IN SAUK COUNTY	Latitude <b>43.409638084</b>	Longitude <b>-89.771977854</b>
	X Coordinate <b>275562.40625</b>	Y Coordinate <b>4810038.5</b>
	Structure Type	

## Crash Scene

First Harmful Event <b>TRAFFIC SIGN POST</b>	First Harmful Event Location <b>ROADSIDE</b>
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)
Environment Factor(s) <b>WEATHER CONDITIONS</b>	<b>NONE</b>
Weather Condition(s) <b>RAIN</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>PARTIAL CONTROL</b>
Special Study	
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>
Intersection Type <b>NOT AN INTERSECTION</b>	

## Unit Summary

01  UNIT  01  VEHICLE	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>0</b>	Total Trailers <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>
	Most Harmful Event: Collision With <b>DITCH</b>		Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>
	Traffic Way <b>DIVIDED HWY W/O 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 LEFT</b>		Road Grade <b>DOWNHILL</b>
	Truck Bus or HazMat <b>NO</b>			
	<b>Vehicle</b>			
	License Plate Number <b>AYT3903</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>

01  01  VEHICLE	Vehicle Identification Number <b>2G4WD532551324030</b>	Make <b>BUIC</b>	Year <b>2005</b>	Model <b>LACROSSE</b>
	Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>SD - SEDAN</b>		Bus Use
	Initial Contact Point <b>10 - LEFT SIDE FRONT</b>	Vehicle Damage		
Extent Of Damage <b>DISABLING DAMAGE</b>		<b>15 - ALL AREAS</b>		

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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>CRAIGS TOWING</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>SPEED TOO FAST/COND</b>			
01	Owner Name <b>TIMOTHY BAUER (608) 548-0557</b>		Owner Address <b>429 W PEARL ST NEW LISBON, WI 53950 , US</b>	
	<b>Sequence Of Events</b>			
01	Event <b>TRAFFIC SIGN POST</b>			
	Event <b>DITCH</b>			
	Event <b>OVERTURN/ROLLOVER</b>			
	Event			
UNIT INDIVIDUAL	<b>Policy Holder</b>			
	Insurance Company <b>MT-MORRIS-MUTUAL-INS-CO</b>		INDIVIDUAL <b>TIMOTHY BAUER</b>	
01	<b>Individual</b>			
	DRIVER <b>TIMOTHY BAUER (608) 548-0557</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
			Date of Birth	Race <b>WHITE</b>
	Address <b>429 W PEARL ST NEW LISBON, WI 53950 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
			On Duty Crash	
	<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>		Injury Severity <b>NO APPARENT INJURY</b>		
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		
Hospital		Date of Death		
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

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UNIT INDIVIDUAL  01 001	<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>		