

6TL0F3SSK8  
26-00535

# 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 <b>26-00535</b>	Investigating Officer/Deputy <b>DEPUTY A. KING</b>	
Crash Date <b>01/16/2026</b>		Crash Time <b>09:21 AM</b>	Date Arrived <b>01/16/2026</b>	Time Arrived <b>09:24 AM</b>	
Date Notified <b>01/16/2026</b>		Time Notified <b>09:22 AM</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
	Additional Information <b>NONE</b>

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

U1 WAS TRAVELING WESTBOUND ON HY12 WHEN THE OPERATOR STATED HER VEHICLE LOST CONTROL DUE TO THE SNOW/SLUSH ON THE SHOULDER. OPERATOR STATED SHE WAS THEN IN THE DITCH UPSIDE DOWN. OPERATOR DENIED ANY INJURIES AND REFUSED TRANSPORT BY BARABOO EMS TO THE HOSPITAL. THE DRIVER WAS IDENTIFIED BY WI DL AS EMILIA M. TEJADA VARELA. EMILIA ADMITTED TO NOT HAVING A DRIVER'S LICENSE AND NOT HAVING INSURANCE FOR THE VEHICLE. I RETURNED TO MY CAR AND VERIFIED HER DRIVING STATUS. DOT RECORDS INDICATE SHE HAS A SUSPENDED NO LICENSE ISSUED STATUS. I COMPLETED A CITATION FOR OPERATING WITH A SUSPENDED LICENSE. CRAIG'S TOWING RESPONDED AND REMOVED THE VEHICLE FROM THE SCENE. I PROVIDED EMILIA WITH A RIDE BACK TO HER RESIDENCE.

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Location

INTERSECTION ON USH12 WB AT USH12 WB IN THE CITY OF BARABOO IN SAUK COUNTY	Latitude <b>43.465143071</b>	Longitude <b>-89.777318615</b>
	X Coordinate <b>275335.5625</b>	Y Coordinate <b>4816217.5</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>DITCH</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>DRY</b>	Roadway Factor(s) <b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
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>	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 <b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date Initial Lane/Rd Closed <b>01/16/2026</b>	Time Initial Lane/Rd Closed <b>09:27 AM</b>	
Date All Lanes Open <b>01/16/2026</b>	Time All Lanes Open <b>09:56 AM</b>	Date Scene Cleared <b>01/16/2025</b>
		Time Scene Cleared <b>09:56 AM</b>

Unit Summary

<b>UNIT</b>	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>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>NO</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>65</b>	Total Lanes <b>4</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>CONCRETE</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				
	<b>Vehicle</b>				
		License Plate Number <b>AWF1757</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>3N1AB6AP2CL704742</b>	Make <b>NISS</b>	Year <b>2012</b>	Model <b>SENTRA</b>	

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UNIT VEHICLE	Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>SD - SEDAN</b>	Bus Use	
	Initial Contact Point <b>00 - NON-COLLISION</b>	Vehicle Damage		
	Extent Of Damage <b>DISABLING DAMAGE</b>	<b>15 - ALL AREAS</b>		
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>CRAIGS TOWING</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
Driver Prior Action Other	<b>NOT APPLICABLE</b>			
UNIT VEHICLE	Driver Actions <b>FAILURE TO CONTROL</b>			
	Owner Name <b>EMILIA TEJADA VARELA</b>	Owner Address <b>231 N BURRITT AVE # 11 WISCONSIN DELLS, WI 53965 , US</b>		
01 01	<b>Sequence Of Events</b>			
	01	Event <b>DITCH</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>EMILIA TEJADA VARELA</b>	Citations Issued <b>1</b>	Sex <b>FEMALE</b>	
		Date of Birth	Race <b>HISPANIC</b>	
	Address <b>231 N BURRITT AVE # 11 WISCONSIN DELLS, WI 53965 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
01 001	<b>Safety Equipment</b>		On Duty Crash	
			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>	Airbag <b>DEPLOYED-COMBINATION</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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<b>UNIT</b>	<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					
<b>01</b>	<b>001</b>	Individual Condition <b>APPEARED NORMAL</b>				
		<b>Violations</b>				
<b>01</b>	UTC Number <b>BK261690</b>		Issue To? <b>001</b>	Statute Number <b>343.44(1)(a)</b>	Description <b>OPERATING WHILE SUSPENDED</b>	