

6TL0FZQKS0

26-00580

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 26-00580 | Investigating Officer/Deputy DEPUTY S. MESSNER | |
| Crash Date 01/17/2026 | | Crash Time 11:25 AM | Date Arrived 01/17/2026 | Time Arrived 11:27 AM | |
| Date Notified 01/17/2026 | | Time Notified 11:27 AM | Total Units 01 | Total Injured 00 | Total Killed 00 |
| <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 NO | | Tags | |
| <input checked="" type="checkbox"/> Reportable | | Crash Type DT4000 (STANDARD CRASH) | | <input type="checkbox"/> Amended | <input type="checkbox"/> Secondary Crash |

Description

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| <p>Diagram</p> <p>Not to scale</p> <p>Unit 1 slides across roadway</p> <p>Unit 1 enters ditch and the front driver's corner hits the ditch, making unit 1 turn in a 180 degrees</p> <p>Unit 1 comes to rest against a field fence</p> <p>STH 23</p> | Reconstruction By |
| | Photos By DEP. S. MESSNER #9134 |
| | Additional Information PHOTOS |

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

ON 1/17/2026, AT APPROXIMATELY 11:25 AM, UNIT 1, A WHITE 2018 DODGE JOURNEY BEARING WI AYY2997, WAS WESTBOUND ON STH 23. UNIT 1 WAS TRAVELING TOO FAST FOR CONDITIONS, IT WAS SNOWING, ROADWAY WAS SLICK AND THE SPEED LIMIT WAS 55 MPH, WHEN UNIT 1 SLID ACROSS THE HIGHWAY INTO THE ONCOMING LANE OF TRAFFIC AND INTO THE DITCH. AT THE BOTTOM OF THE DITCH, UNIT 1'S BUMPER STRUCK THE GROUND CAUSING DAMAGE TO THE VEHICLE. UNIT 1 SPUN IN A 180 DEGREES AND CAME TO REST. THE DRIVER AND PASSENGER WERE UNINJURED. UNIT 1 WAS REMOVED BY STEVE'S TOWING. WHILE BEING REMOVED, THE REAR BUMPER AND BUMPER COVER DRAGGED AGAINST THE GROUND CAUSING DAMAGE. THE OCCUPANTS OF THE VEHICLE WERE REMOVED BY A RESCUE PARTY.

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Location

| | | |
|---------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------|
| ON STH23 WB 0.30 MI N OF ELDER RIDGE RD IN THE TOWN OF WESTFIELD IN SAUK COUNTY | Latitude 43.420858413 | Longitude -90.035242792 |
| | X Coordinate 254291.0625 | Y Coordinate 4812027.5 |
| | Structure Type | |

Crash Scene

| | | |
|------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------|
| First Harmful Event DITCH | First Harmful Event Location SHOULDER LEFT | |
| Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT | Light Condition DAYLIGHT | |
| Road Surface Condition(s) SNOW | Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC) | |
| Environment Factor(s) NONE | | |
| Weather Condition(s) SNOW | | |
| 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 |
| Closure Type LANE CLOSURE | Reasons for Closure TOW TRUCK | |
| Date Initial Lane/Rd Closed 01/17/2026 | Time Initial Lane/Rd Closed 12:04 PM | |
| Date All Lanes Open 01/17/2026 | Time All Lanes Open 12:20 PM | Date Scene Cleared 01/17/2026 |
| | | Time Scene Cleared 12:20 PM |

Unit Summary

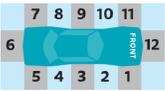
| | | | | | | |
|-------------|-----------------------------------------------------------|-------------------------------------------------------|------------------------------------------------|--------------------------------|------------------------------------------------------|---------------------------------------------|
| UNIT | Unit Status IN TRANSIT | Vehicle Operating As Classification D CLASS | | Unit Type AUTOMOBILE | | |
| | Vehicle Type (SPORT) UTILITY VEHICLE | | | Operating As Endorsements | | |
| | Total Occs 2 | 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 STRAIGHT | | Road Grade LEVEL | |
| | Truck Bus or HazMat NO | | | | | |
| | 01 | Vehicle | | | | |
| | | License Plate Number AYY2997 | | Plate Type AUT | St WI | Country of Issuance UNITED STATES |
| 01 | Vehicle Identification Number 3C4PDCAB4JT196503 | | Make DODG | Year 2018 | Model JOURNEY | |

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|------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| UNIT VEHICLE | Color WHI - WHITE | Body Style UT - SPORT UTILITY VEHICLE | Bus Use |
| | Initial Contact Point 11 - LEFT FRONT CORNER | Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT |  |
| | Extent Of Damage DISABLING DAMAGE | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By STEVES AUTO SERVICE |
| | What Driver Was Doing GOING STRAIGHT | Driver Prior Action Other | Vehicle Factors NOT APPLICABLE |
| | Driver Actions SPEED TOO FAST/COND | Owner Name HEATHER CRIDELICH (608) 632-2013 | |
| UNIT VEHICLE | Owner Address S7105 SUNRISE RD LOGANVILLE, WI 53943 , US | | |
| | Sequence Of Events | | |
| | 01 | Event CROSS CENTERLINE | |
| | 02 | Event RUN OFF ROADWAY LEFT | |
| | 03 | Event DITCH | |
| UNIT INDIVIDUAL | 04 | Event | |
| | Policy Holder | | |
| | Insurance Company PROGRESSIVE-UNIVERSAL-INSURANCE-COMP | INDIVIDUAL HEATHER CRIDELICH | |
| | Individual | | |
| | DRIVER HEATHER CRIDELICH (608) 632-2013 | Citations Issued 0 | Sex FEMALE |
| | Date of Birth | Race WHITE | |
| Address S7105 SUNRISE RD LOGANVILLE, WI 53943 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| UNIT INDIVIDUAL | Safety Equipment | On Duty Crash | Safety Equipment |
| | 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 |
| 01 | Ejected NOT EJECTED | Ejection Path NOT EJECTED/NOT APPLICABLE | Trapped/Extricated NOT TRAPPED |
| 001 | Medical Transport NOT TRANSPORTED | EMS Agency Identifier | EMS Run # |

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|---------------------------------|------------------------------------------------------------------------|------------------------------------|----------------------------------------------------------------|------------------------------------------------|------------------------------------------|----------------|
| UNIT INDIVIDUAL | Hospital | | Date of Death | | Time of Death | |
| | 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 | |
| 01 001 UNIT INDIVIDUAL | Drug Type | | | | | |
| | Individual Condition APPEARED NORMAL | | | | | |
| | Individual | | | | | |
| | PASSENGER BRAYDEN HART (608) 632-2013 | | | Citations Issued 0 | Sex MALE | |
| | Address S7105 SUNRISE RD LOGANVILLE, WI 53943 , US | | | Date of Birth | Race WHITE | |
| | Driver License Number | | | STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| | Safety Equipment | | On Duty Crash | | Safety Equipment | |
| | Row 01 - FRONT ROW | Seat Position 09 - RIGHT | SHOULDER & LAP BELT | | | |
| | Helmet Use | | | Helmet Compliance | | |
| | Eye Protection | | | Tint Compliance | | |
| 01 002 UNIT INDIVIDUAL | 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 | |

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| | | | | |
|------------------------------------------------|----------------------|---------------------------------------------|------------------------------------|---------------------------------|
| UNIT | Distracted By | Distracted By Source | | |
| | | Distracted By Action | | |
| | Non Motorist | Striking Unit # | Location | |
| | | Prior Action | | |
| | INDIVIDUAL | 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 |
| | 01 | 002 | Drug Type | |
| Individual Condition APPEARED NORMAL | | | | |

Property Owner

| | | | |
|-------------------|-----------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| PROP OWNER | 01 | ORGANIZATION/COMPANY HERSHBERGER FAMILY IRREVOCABLE TRUST (608) 727-2904 | Address S6145 STH 23 LOGANVILLE, WI 53943 , US |
|-------------------|-----------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------|

Fixed Objects Struck

| | | | | |
|-----------|----------------------------|-------------------------------|------------------|--------------------------------|
| 01 | Striking Unit 01 | Struck Object FENCE | Structure Number | Damage Tag Number NA |
|-----------|----------------------------|-------------------------------|------------------|--------------------------------|