

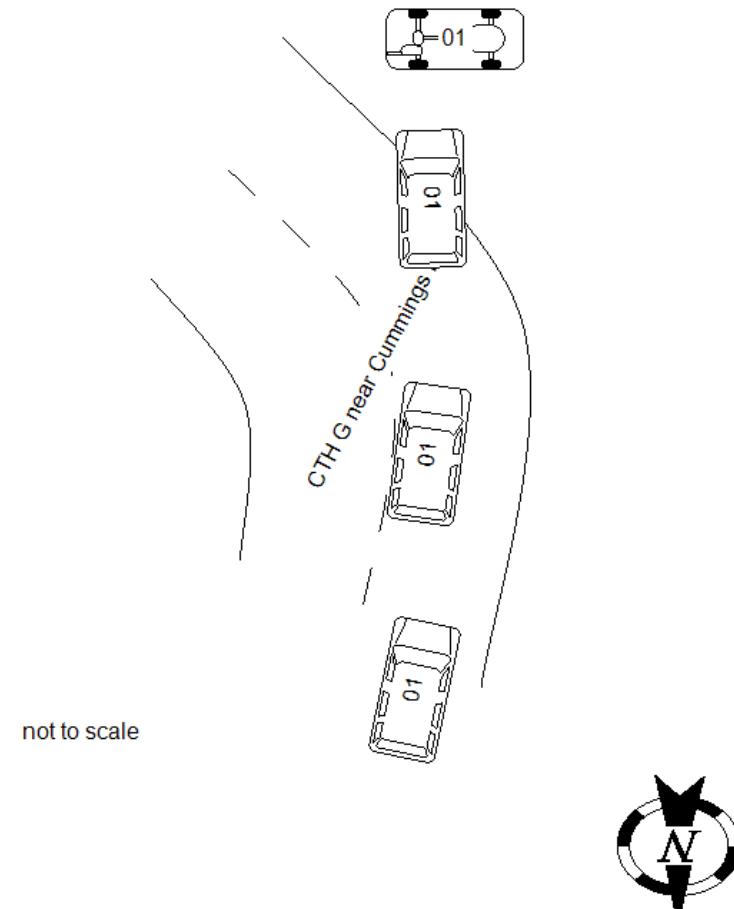
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26-00909

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash Document #	Agency Crash Number 26-00909	Investigating Officer/Deputy DEPUTY K. MCCARTY		
Crash Date 01/26/2026	Crash Time 08:33 PM	Date Arrived 01/26/2026	Time Arrived 08:45 PM		
Date Notified 01/26/2026	Time Notified 08:35 PM	Total Units 01	Total Injured 01	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 TRAVELING SB ON CTH G WHEN THEY APPROACHED A SLIGHT CURVATURE IN THE ROAD. DRIVER 1 ADVISED HE WAS REACHING DOWN TO GRAB A PHONE CHARGING CORD AND WAS NOT FAMILIAR WITH THE ROADWAY. UNIT 1 LOST CONTROL, ENTERED THE SB DITCH WHERE IT STRUCK AND EMBANKMENT AND CAME TO A REST ON ITS SIDE/TOP. DRIVER 1 CLAIMED NO INJURIES. PASSENGER 1 HAD SUSPECTED MINOR INJURIES AND WAS LATER TRANSPORTED TO A HOSPITAL BY HIS MOTHER. NACHRIENERS TOWING REMOVED THE VEHICLE.

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Location

ON CTHG SB 344 FT N OF CUMMINGS RD IN THE TOWN OF BEAR CREEK IN SAUK COUNTY	Latitude 43.286712372	Longitude -90.110618723
	X Coordinate 247633.0625	Y Coordinate 4797354
	Structure Type	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ROADSIDE
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT
Road Surface Condition(s) DRY	Roadway Factor(s)
Environment Factor(s) NONE	NONE
Weather Condition(s) CLEAR	
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

01 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
	Insurance? NO	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55
	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 DOWNHILL
	Truck Bus or HazMat			
	NO			

Vehicle

01 UNIT 01 VEHICLE	License Plate Number 402YFD	Plate Type AUT	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FMCU031X7KA62294	Make FORD	Year 2007	Model ESCAPE
	Color SIL - SILVER (ALUMINUM)	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 12 - FRONT	Vehicle Damage		
Extent Of Damage DISABLING DAMAGE		15 - ALL AREAS		

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UNIT 01 01	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By NACHREINER'S TOWING
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors
	Driver Prior Action Other		NOT APPLICABLE
VEHICLE 01 01	Driver Actions EXCEED SPEED LIMIT, FAILURE TO CONTROL		
	Owner Name LUCAS STOWELL		Owner Address 3721 E KARSTENS DR APT 2 MADISON, WI 53704 , US
Sequence Of Events			
01	Event RUN OFF ROADWAY RIGHT		
02	Event DITCH		
03	Event EMBANKMENT		
04	Event		
Individual			
INDIVIDUAL 01 01	DRIVER ETHAN STOWELL		Citations Issued 0 Sex MALE
			Date of Birth Race WHITE
Address 28461 CLARY LN RICHLAND CENTER, WI 53581 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
Safety Equipment		Safety Equipment	
Row 01 - FRONT ROW		Seat Position 07 - LEFT	
Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance	
01	Injury	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-COMBINATION
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death
Distracted By		Distracted By Source UNKNOWN	
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)			
Non Motorist		Striking Unit #	Location

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UNIT INDIVIDUAL	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		
	Drug Type				
	Individual Condition				
	APPEARED NORMAL				
	Individual				
UNIT INDIVIDUAL	PASSENGER HUNTER MOE		Citations Issued 0	Sex MALE	
			Date of Birth	Race WHITE	
	Address 31293 COUNTY HWY D CAZENOVIA, WI 53924 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment	On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 09 - RIGHT	NONE USED - VEHICLE OCCUPANT		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	Injury	Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-COMBINATION		
	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				
Distracted By Action					
Non Motorist	Striking Unit #	Location			
Prior Action					

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UNIT 01 002			
	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
	Drug Type		
Individual Condition			
APPEARED NORMAL			