

6TL0F8QZ02
26-00682

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 26-00682		Investigating Officer/Deputy DEPUTY J. GREENWOOD	
Crash Date 01/20/2026		Crash Time 06:35 AM		Date Arrived 01/20/2026		Time Arrived 06:41 AM	
Date Notified 01/20/2026		Time Notified 06:39 AM		Total Units 02		Total Injured 02	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 checked="" 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>	Reconstruction By
	Photos By DEPUTY GREENWOOD
	Additional Information PHOTOS

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

UNIT 1 ENTERED THE USH 12 EB AT THE 218. UNIT 1 ACCELERATED IN TRAFFIC CAUSING IT TO SPIN ON THE ICY BRIDGE. UNIT 1 HIT THE CONCRETE BRIDGE RAIL, SENDING IT ACROSS THE LINE IN FRONT OF UNIT 2. UNIT 2 WAS UNABLE TO AVOID COLLISION. UNIT 2 OVERTURNED AND RESTED IN THE DITCH. BOTH DRIVERS WERE TRANSPORTED TO ST CLAIRE HOSPITAL VIA BARABOO FIRE AND RESCUE FOR SUSPECTED MINOR HEAD WOUNDS. THE SUV, SEMI TRACTOR AND TRAILER WERE REMOVED BY CRAIG'S TOWING.

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Location

INTERSECTION ON USH12 EB AT RAMP USH12 EB IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.470344586	Longitude -89.776156039
	X Coordinate 275448.90625	Y Coordinate 4816792
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event BRIDGE RAIL	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DARK/UNLIT	
Road Surface Condition(s) ICE	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
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 YES	Junction Location EXIT RAMP-RELATED	Intersection Type NOT AN INTERSECTION
Closure Type CLOSURE-ONE DIRECTION	Reasons for Closure LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date Initial Lane/Rd Closed 01/20/2026	Time Initial Lane/Rd Closed 06:52 AM	
Date All Lanes Open 01/20/2026	Time All Lanes Open 09:30 AM	Date Scene Cleared 01/20/2026
		Time Scene Cleared 09:35 AM

Unit Summary

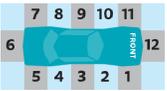
UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 4
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way DIVIDED HWY W/TRAFFIC BARRIER	Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO				
	Vehicle				
		License Plate Number ADY5526	Plate Type AUT	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GKDT13S672305680	Make GMC	Year 2007	Model ENVOY	

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UNIT VEHICLE	Color SIL - SILVER (ALUMINUM)	Body Style LL - CARRYALL	Bus Use
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 15 - ALL AREAS	
	Extent Of Damage DISABLING DAMAGE		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing ENTERING TRAFFIC LANE	Vehicle Factors NOT APPLICABLE	
UNIT VEHICLE	Driver Prior Action Other		
	Driver Actions SPEED TOO FAST/COND		
	Owner Name JOHN FISHER	Owner Address 412 E WALNUT ST NORTH FREEDOM, WI 53951 , US	
Sequence Of Events			
UNIT	01	Event BRIDGE RAIL	
	02	Event MOTOR VEH IN TRANSPORT	
	03	Event DITCH	
	04	Event	
UNIT	Policy Holder		
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO	INDIVIDUAL JOHN FISHER	
UNIT INDIVIDUAL	Individual		
	DRIVER JOHN FISHER	Citations Issued 1	Sex MALE
		Date of Birth	Race HISPANIC
	Address 412 E WALNUT ST NORTH FREEDOM, WI 53951 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT	Safety Equipment		On Duty Crash
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	UNIT 001	Injury	Injury Severity SUSPECTED MINOR INJURY
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated TRAPPED/EXTRICATED
Medical Transport EMS GROUND		EMS Agency Identifier 6000368	EMS Run #

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UNIT	Hospital ST CLARE HOSP		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	Drug Type				
	Individual Condition APPEARED NORMAL				
	Violations				
01	UTC Number BK741559	Issue To? 001	Statute Number 346.57(3)	Description DRIVING TOO FAST FOR CONDITIONS	

Unit Summary

UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification A CLASS		Unit Type TRUCK
	Vehicle Type TRUCK TRACTOR (SEMI ATTACHED)				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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 4
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way DIVIDED HWY W/TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR				
	Vehicle				
	License Plate Number PZA9972		Plate Type APO	St MN	Country of Issuance UNITED STATES

02

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02	UNIT VEHICLE	Vehicle Identification Number 3AKJGLD52ESFK8149	Make FRHT	Year 2014	Model CASCADIA 1	
		Color WHI - WHITE	Body Style DS - TRACTOR-TRUCK DIESEL	Bus Use		
		Initial Contact Point 12 - FRONT	Vehicle Damage 06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT			
		Extent Of Damage DISABLING DAMAGE				
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING			
02	UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors			
		Driver Prior Action Other	NOT APPLICABLE			
		Driver Actions NO CONTRIBUTING ACTION				
		Owner Name MOHAMUD ABDIRIZAK (612) 229-3140	Owner Address 3804 5TH ST NE COLUMBIA HEIGHTS, MN 55421 3702, US			
Sequence Of Events						
02	UNIT	01	Event MOTOR VEH IN TRANSPORT			
		02	Event OVERTURN/ROLLOVER			
		03	Event DITCH			
		04	Event			
02	UNIT	Policy Holder				
		Insurance Company GREAT-AMERICAN-INS-CO	INDIVIDUAL MOHAMUD ABDIRIZAK			
		Individual				
02	UNIT INDIVIDUAL	DRIVER MOHAMUD ABDIRIZAK	Citations Issued 0	Sex MALE		
			Date of Birth	Race		
		Address 3804 5TH ST NE COLUMBIA HEIGHTS, MN 55421 3702, US	Driver License Number STATE: MINNESOTA COUNTRY: UNITED STATES			
02	002	Safety Equipment		On Duty Crash		
				Safety Equipment SHOULDER & LAP BELT		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT			
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
Injury		Injury Severity SUSPECTED MINOR INJURY	Airbag NON DEPLOYED			
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED		

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UNIT	Medical Transport EMS GROUND		EMS Agency Identifier 6000368	EMS Run #	
	Hospital ST CLARE HOSP		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		
Drug Type					
Individual Condition APPEARED NORMAL					
UNIT	Carrier				
	<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source DRIVER		
	Name MOHAMUD ABDIRIZAK USDOT# 978545		Address 3804 5TH ST NE COLUMBIA HEIGHTS, MN 55421 3702, US		
	GVWR MORE THAN 26,000 LB		Vehicle Configuration SINGLE UNIT TRUCK (3 OR MORE AXLES)	Cargo Body Type INTERMODAL CONTAINER CHASSIS	
	US DOT # 978545		Carrier Type INTERSTATE CARRIER	Permitted Load NOT APPLICABLE	
	<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present
	Measured Height	Measured Length	Measured Width	Measured Weight	
	02 002				
	02 01				
	UNIT TRUCK BUS				