

6TL0D2XVTS  
26-01299A

# 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>26-01299A</b>		Investigating Officer/Deputy <b>DEPUTY B. GOODREAU</b>	
Crash Date <b>02/06/2026</b>		Crash Time <b>10:21 PM</b>		Date Arrived <b>02/06/2026</b>		Time Arrived <b>10:59 PM</b>	
Date Notified <b>02/06/2026</b>		Time Notified <b>10:22 PM</b>		Total Units <b>02</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 <b>SAUK COUNTY SHERIFFS DEPARTMENT</b>
	Photos By <b>9113</b>
	Additional Information <b>PHOTOS, RECONSTRUCTION</b>

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

UNIT 1 WAS DRIVING WHAT APPEARED EB ON HWY 33 NEAR CTH BD. UNIT 1 CONTINUED THROUGH THE INTERSECTION TOWARD S3626 CTH BD. I OBSERVED TIRE TRACKS IN THE SNOW THAT TRAVELED THROUGH S3626 CTH BD PROPERTY AND STRUCK UNIT 2 IN THE DRIVEWAY. UNIT 1 THEN FLED FROM THE SCENE WITHOUT REPORTING THE CRASH. BG9113.

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Location

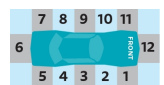
ON S3626 CTHBD NB 45 FT S OF OLD HWY 33 (FIRE S3626)  IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude <b>43.49624529</b>	Longitude <b>-89.778416359</b>
	X Coordinate <b>275362.125</b>	Y Coordinate <b>4819675</b>
	Structure Type <b>FIRE</b>	

Crash Scene

First Harmful Event <b>PARKED MOTOR VEHICLE</b>		First Harmful Event Location <b>OFF ROADWAY, LOCATION UNKNOWN</b>	
Manner of Collision <b>OTHER</b>		Light Condition <b>DARK/LIGHTED</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>NON TRAFFICWAY - OTHER</b>	
Crash Classification - Location <b>PRIVATE PROPERTY</b>		Crash Classification - Jurisdiction <b>PRIVATE PROPERTY</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>	

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>	
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>4</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>PARKED MOTOR VEHICLE</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					
	UNIT VEHICLE 01	<b>Vehicle</b>				
		License Plate Number <b>WF4982</b>		Plate Type <b>LTK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
Vehicle Identification Number <b>1FTPX14V59FA19904</b>		Make <b>FORD</b>	Year <b>2009</b>	Model <b>F150</b>		
Color <b>RED - RED</b>		Body Style <b>PK - PICKUP</b>		Bus Use		
Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage <b>07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 10 - LEFT SIDE FRONT, 12 - FRONT</b>				
Extent Of Damage <b>FUNCTIONAL DAMAGE</b>						



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UNIT VEHICLE	Towed Due To Damage <b>TOWED BUT NOT DUE TO DISABLING DAMAG</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>	
	Driver Actions <b>UNSAFE BACKING, FAILURE TO CONTROL, RAN OFF ROADWAY, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>			
01 01	Owner Name <b>TREVOR POOLE</b>		Owner Address <b>1320 CRAWFORD ST BARABOO, WI 53913 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>PARKED MOTOR VEHICLE</b>			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>		INDIVIDUAL <b>TREVOR POOLE</b>	
01 001	<b>Individual</b>			
	DRIVER <b>TREVOR POOLE</b>		Citations Issued <b>4</b>	Sex <b>MALE</b>
	Address <b>1320 CRAWFORD ST BARABOO, WI 53913 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number			
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Helmet Use		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Eye Protection		Helmet Compliance	
01 001	Injury <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>	
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
	Hospital		EMS Agency Identifier	EMS Run #
01 001	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		Date of Death	
	Distracted By Action <b>NOT DISTRACTED</b>		Time of Death	

Wisconsin Motor Vehicle Crash  
Form DT4000

This report does not include any CJIS data.  
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Crash Date **02/06/2026**  
Crash Time **10:21 PM**

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UNIT INDIVIDUAL	01	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				
		Action				
		Action Other				
		To/From School				
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>YES</b>	Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST GIVEN</b>		Alcohol Test Type <b>BLOOD</b>		Alcohol Test Results <b>PENDING</b>
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results
		Drug Type				
		Individual Condition  <b>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL</b>				
<b>Violations</b>						
01 02 03 04	01	UTC Number <b>BL507139</b>	Issue To? <b>001</b>	Statute Number <b>346.63(1)(a)</b>	Description <b>OPERATING WHILE UNDER THE INFLUENCE(2ND)</b>	
	02	UTC Number <b>BL507142</b>	Issue To? <b>001</b>	Statute Number <b>346.935(2)</b>	Description <b>POSSESS OPEN INTOXICANTS IN MV-DRIVER</b>	
	03	UTC Number <b>BL507141</b>	Issue To? <b>001</b>	Statute Number <b>346.70(1)</b>	Description <b>FAILURE OF OCCUPANT TO NOTIFY POLICE OF ACCIDENT</b>	
	04	UTC Number <b>BL507140</b>	Issue To? <b>001</b>	Statute Number <b>346.68</b>	Description <b>HIT AND RUN-UNATTENDED VEHICLE</b>	
<b>Unit Summary</b>						
UNIT 02	Unit Status <b>LEGALLY PARKED</b>			Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>			Operating As Endorsements		
	Total Occs <b>0</b>	Train/Bus # Recorded		Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>NOT ON ROADWAY</b>		<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>			Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>			Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>
	Surface Type <b>BLACKTOP (BITUMINOUS)</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>XE21198</b>			Plate Type <b>LTK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>

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UNIT	02	VEHICLE	Vehicle Identification Number <b>1FT8W3BTXMEC09135</b>	Make <b>FORD</b>	Year <b>2021</b>	Model <b>F350</b>
			Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>PK - PICKUP</b>	Bus Use	
			Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>	Vehicle Damage		
			Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	<b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT</b>		
			Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>		
			What Driver Was Doing <b>LEGALLY PARKED</b>	Vehicle Factors		
			Driver Prior Action Other	<b>NOT APPLICABLE</b>		
UNIT	02	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
			Owner Name <b>JO ANN TRAGER</b>	Owner Address <b>S3626 HWY 12/BD BARABOO, WI 53913 , US</b>		
UNIT	01	<b>Sequence Of Events</b>				
		Event <b>MOTOR VEH IN TRANSPORT</b>				
		Event				
		Event				
		Event				
UNIT	04	<b>Policy Holder</b>				
		Insurance Company <b>FEDERATED-MUTUAL-INS-CO</b>	INDIVIDUAL <b>JO ANN TRAGER</b>			