

6TL0F3SSKS

26-02404

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 26-02404	Investigating Officer/Deputy DEPUTY A. KING	
Crash Date 03/10/2026		Crash Time 08:41 AM	Date Arrived 03/10/2026	Time Arrived 09:01 AM	
Date Notified 03/10/2026		Time Notified 08:42 AM	Total Units 02	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" 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.

U2 WAS STATIONARY AT THE INTERSECTION WAITING TO PROCEED WHEN U1 APPROACHED FROM BEHIND AND ATTEMPTED TO TURN NORTHBOUND ON THE RIGHT OF U2. WHEN U1 WAS APPROACHING ON THE RIGHT OF U2, U1 WAS TOO CLOSE AND SIDESWIPE THE PASSENGER SIDE OF U2. U1 THEN PROCEEDED TO TURN NORTHBOUND ON CONNIE AND FLED THE SCENE. U1 WAS DESCRIBED AS A BLACK SEDAN WITH A MISSING DRIVER MIRROR, VEHICLE WAS UNABLE TO BE LOCATED. U2 OPERATOR DENIED ANY INJURIES AND REMOVED THE VEHICLE FROM THE SCENE.

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Location

ON BERKLEY BLVD 41 FT E OF CONNIE RD IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.477071398	Longitude -89.763671064
	X Coordinate 276483.59375	Y Coordinate 4817505.5
	Structure Type	

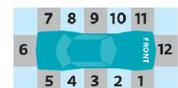
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 07 - SIDESWIPE/SAME DIRECTION	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) 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 INTERSECTION	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT 01	Unit Status HIT AND RUN	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control STOP SIGN	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number	Plate Type	St	Country of Issuance
	Vehicle Identification Number	Make	Year	Model
	Color	Body Style	Bus Use	
	Initial Contact Point 10 - LEFT SIDE FRONT	Vehicle Damage		
	Extent Of Damage VEHICLE NOT AT SCENE	16 - VEHICLE NOT AT SCENE		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing RIGHT TURN		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions FOLLOWING TOO CLOSE				
01	Owner Name		Owner Address		
			, ,		
Sequence Of Events					
01	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
Individual					
UNIT INDIVIDUAL	DRIVER		Citations Issued 0	Sex	
			Date of Birth	Race	
	Address		Driver License Number		
	, ,				
Safety Equipment		On Duty Crash	Safety Equipment		
01	Row 01 - FRONT ROW		Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT	
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE	
	Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT APPLICABLE	
	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		

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UNIT INDIVIDUAL	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use	Suspected Drug Use
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition		
	NOT OBSERVED		
	01	001	

Unit Summary

UNIT 02	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 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use UNKNOWN	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT VEHICLE	02	License Plate Number AKU7567	Plate Type AUT	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1GNEVKKWJK190477	Make CHEV	Year 2019	Model TRAVERSE	
	Color BLK - BLACK	Body Style UT - SPORT UTILITY VEHICLE		Bus Use		
	Initial Contact Point 02 - RIGHT SIDE FRONT		Vehicle Damage			
	Extent Of Damage MINOR DAMAGE		02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE			
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR			
	What Driver Was Doing GOING STRAIGHT					

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT VEHICLE	Vehicle Factors			
	Driver Prior Action Other	UNKNOWN		
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name KRISTY BRESCIA	Owner Address 1429 MARTINY CT BARABOO, WI 53913 , US		
UNIT 02	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
UNIT 04	04	Event		
	Policy Holder			
	Insurance Company USAA-GENERAL-INDEMNITY-CO	INDIVIDUAL KRISTY BRESCIA		
	Individual			
UNIT INDIVIDUAL	DRIVER KRISTY BRESCIA	Citations Issued 0	Sex FEMALE	
		Date of Birth	Race WHITE	
	Address 1429 MARTINY CT BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment			
UNIT 02	On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
UNIT 002	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
UNIT 002	Distracted By			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED			
UNIT 002	Non Motorist			
	Striking Unit #	Location		

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UNIT	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				
	02	002			