

6TL0F1BQB7  
26-02749

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>26-02749</b>		Investigating Officer/Deputy <b>DEPUTY D. KROLIKOWSKI</b>	
Crash Date <b>03/20/2026</b>		Crash Time <b>12:07 PM</b>		Date Arrived <b>03/20/2026</b>		Time Arrived <b>12:20 PM</b>	
Date Notified <b>03/20/2026</b>		Time Notified <b>12:07 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>PRIVATE PROPERTY/PARKING LOT</b>		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
		Photos By <b>D KROLIKOWSKI</b>	
		Additional Information <b>NONE, PHOTOS</b>	

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

UNIT 2 WAS PARKED AND UNOCCUPIED. UNIT 1 BEGAN ENTERING A PARKING SPOT TO THE LEFT OF UNIT 2, AND WHILE DOING TO, MAKE CONTACT WITH THE PASSENGER DOOR OF UNIT 2 WITH THE FRONT RIGHT CORNER OF UNIT 1.

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Location

PARKING LOT CTHBD WB LOT IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.529162979</b>	Longitude <b>-89.775216037</b>
	X Coordinate <b>275742.90625</b>	Y Coordinate <b>4823322</b>
	Structure Type	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>01 - ANGLE</b>	Light Condition <b>DAYLIGHT</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 - PARKING LOT</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</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	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>	Operating As Endorsements			
	Total Occs <b>1</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>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>1</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>				
	UNIT  VEHICLE	<b>Vehicle</b>			
		License Plate Number <b>AMP7229</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
Vehicle Identification Number <b>JA4ARUAU0MU029977</b>		Make <b>MIT</b>	Year <b>2021</b>	Model <b>OUTLANDER</b>	
Color <b>RED - RED</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use	
Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>		Vehicle Damage <b>01 - RIGHT FRONT CORNER</b>			



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By	
	What Driver Was Doing <b>PARK MANEUVER</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>UNKNOWN</b>			
01 01	Owner Name <b>LUCINDA ANNE STOLL (608) 247-1351</b>		Owner Address <b>27 MILDRED AVE EDGERTON, WI 53534 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event <b>PARKED MOTOR VEHICLE</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>STATE-FARM-CLASSIC-INS-CO</b>		INDIVIDUAL <b>LUCINDA STOLL</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>LUCINDA STOLL (608) 247-1351</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>27 MILDRED AVE EDGERTON, WI 53534 , US</b>		Date of Birth	Race
			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>RESTRAINT USE UNKNOWN</b>	
	Eye Protection		Helmet Compliance	
	<b>Injury</b>		Airbag	
	Injury Severity <b>NO APPARENT INJURY</b>		<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 #		
		Date of Death		
		Time of Death		
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

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UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					
		To/From School					
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO		Suspected Drug Use NO	
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					

Unit Summary

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>EASTBOUND</b>		<input type="checkbox"/> Pre Crash Tire Mark	
		Speed Limit <b>N/A</b>		Total Lanes <b>1</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>	

UNIT	VEHICLE	<b>Vehicle</b>						
		License Plate Number <b>XE88425</b>		Plate Type <b>LTK</b>		St <b>WI</b>		
		Country of Issuance <b>UNITED STATES</b>		Vehicle Identification Number <b>3C6UR5FJ6SG528183</b>		Make <b>RAM</b>		
		Year <b>2025</b>		Model <b>2500</b>		Color <b>GRY - GRAY</b>		
		Body Style <b>PK - PICKUP</b>		Bus Use		Initial Contact Point <b>03 - RIGHT SIDE MIDDLE</b>		
		Vehicle Damage <b>03 - RIGHT SIDE MIDDLE</b>		Extent Of Damage <b>MINOR DAMAGE</b>				
		Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By				

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UNIT	VEHICLE	What Driver Was Doing <b>LEGALLY PARKED</b>	Vehicle Factors
		Driver Prior Action Other	<b>NOT APPLICABLE</b>
		Driver Actions <b>NO CONTRIBUTING ACTION</b>	
		Owner Name <b>KRISTOPHER POPKE</b> (608) 225-8987	Owner Address <b>1368 TROON DR</b> <b>SUN PRAIRIE, WI 53590 , US</b>
UNIT	02	<b>Sequence Of Events</b>	
		01	Event <b>MOTOR VEH IN TRANSPORT</b>
		02	Event
		03	Event
		04	Event
UNIT	02	<b>Policy Holder</b>	
		Insurance Company <b>ERIE-INS-CO</b>	INDIVIDUAL <b>KRISTOPHER POPKE</b>