

6TL0F2KRG9

26-06960

# 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>26-06960</b>	Investigating Officer/Deputy <b>DEPUTY I. GALVAN</b>	
Crash Date <b>07/02/2026</b>		Crash Time <b>07:17 AM</b>	Date Arrived <b>07/02/2026</b>	Time Arrived <b>07:26 AM</b>	
Date Notified <b>07/02/2026</b>		Time Notified <b>07:19 AM</b>	Total Units <b>01</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
	Photos By <b>I GALVAN</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 1 TRAVELING EASTBOUND ON STH 154. DUE TO HEAVY RAIN, UNIT 1 HYDROPLANE 180 DEGREES AS HE WAS NEGOTIATING A CURVE TO THE LEFT. UNIT 1 STRUCK A CULVERT AND A FIRE NUMBER POST AT THE ADDRESS OF S6276 STH 154. UNIT 1 OPERATOR INFORMED ME HE HAD RECENTLY CHANGED SOME OF HIS TIRES BUT STILL HAD ONE LEFT TO CHANGE. NO INJURIES REPORTED. UNIT 1 HAD FUNCTIONAL DAMAGE. AUTOMEDIC TOW RESPONDED TO PULL UNIT 1 OUT. OWNER REMOVED UNIT 1 FROM SCENE.

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Location

ON STH154 EB 0.27 MI W OF LITTLE BROOK DR IN THE TOWN OF WASHINGTON IN SAUK COUNTY	Latitude <b>43.41716244</b>	Longitude <b>-90.118733089</b>
	X Coordinate <b>247516.625</b>	Y Coordinate <b>4811867</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>CULVERT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAWN</b>	
Road Surface Condition(s) <b>WATER (STANDING/MOVING), WET</b>	Roadway Factor(s) <b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>RAIN</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</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 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</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>EASTBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>CULVERT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>HILLCREST</b>	
	Truck Bus or HazMat <b>NO</b>					

UNIT 01 VEHICLE	<b>Vehicle</b>					
	License Plate Number <b>BDN4799</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>2B3KA33V39H573502</b>		Make <b>DODG</b>	Year <b>2009</b>	Model <b>CHARGER</b>	
	Color <b>BLK - BLACK</b>		Body Style <b>SD - SEDAN</b>		Bus Use	
	Initial Contact Point <b>06 - REAR</b>		Vehicle Damage <b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER</b>			
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>					



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>TIRES</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01	Owner Name <b>WESLEY MEYER (608) 604-2511</b>		Owner Address <b>239 N EAST 3RD ST RICHLAND CENTER, WI 53581 , US</b>	
	<b>Sequence Of Events</b>			
01	01	Event <b>CULVERT</b>		
	02	Event <b>OTHER FIXED OBJECT</b>		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		INDIVIDUAL <b>WESLEY MEYER</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>WESLEY MEYER (608) 604-2511</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>239 N EAST 3RD ST RICHLAND CENTER, WI 53581 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
01	<b>Safety Equipment</b>		On Duty Crash	
	Safety Equipment		<b>SHOULDER &amp; LAP BELT</b>	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
Hospital		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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<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				
		Action				
	Action Other					To/From School
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
	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>					

**Property Owner** \_\_\_\_\_

<b>PROP OWNER 01</b>	INDIVIDUAL <b>RHONDA SMITH</b> (608) 393-7055	Address <b>S6276 STATE ROAD 154</b> <b>HILLPOINT, WI 53937 , US</b>
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<b>Fixed Objects Struck</b>				
<b>01</b>	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	<b>01</b>	<b>CULVERT</b>		
<b>02</b>	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	<b>01</b>	<b>OTHER FIXED OBJECT</b>		