

6TL0F1BQBL

26-07437

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 26-07437		Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI	
Crash Date 07/11/2026		Crash Time 04:27 PM		Date Arrived 07/11/2026		Time Arrived 04:49 PM	
Date Notified 07/11/2026		Time Notified 04:27 PM		Total Units 01		Total Injured 00	Total Killed 00
☐ On Emergency	☐ Hit and Run	☐ Lane Closure	☐ Work Zone	☐ Trailer or Towed		☐ Reporting Threshold	
☐ Government Property		☐ Active School Zone		School Bus Related NO		Tags	
☒ Reportable		Crash Type DT4000 (STANDARD CRASH)		☐ Amended		☐ 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.			
DRIVER WAS DRIVING SOUTH ON WEST DUTCH HOLLOW ROAD WHEN HIS ATTENTION WAS DIVERTED TO A DEER THAT WAS NOT ON THE ROADWAY. DRIVER LEFT THE ROAD TO HIS LEFT, CROSSED THE ROADWAY, THEN LEFT THE ROAD TO IT'S RIGHT, WHERE HE STRUCK A TREE, CAUSING THE VAN TO TIP ONTO IT'S LEFT SIDE.			

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Location

ON S DUTCH HOLLOW RD 0.30 MI S OF DUTCH HOLLOW DR IN THE TOWN OF WOODLAND IN SAUK COUNTY	Latitude 43.587695509	Longitude -90.214616789
	X Coordinate 240486.015625	Y Coordinate 4831103
	Structure Type	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) OTHER		
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 NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type CARGO VAN (10,000 LBS OR LESS)				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 SOUTHBOUND	☐ Pre CrashTire Mark	Speed Limit 45	Total Lanes 2	
	Most Harmful Event: Collision With TREE		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE 01	Vehicle				
	License Plate Number TE2389	Plate Type LTK	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1GCFH154391129927	Make CHEV	Year 2009	Model EXPRESS G1	
	Color WHI - WHITE	Body Style VN - VAN		Bus Use	
	Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT			
	Extent Of Damage DISABLING DAMAGE				

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By SHIELDS TOWING	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01	Owner Name CORY MAXEY (608) 425-9678		Owner Address 1910 CRESTWOOD DR PLAIN, WI 53577 , US	
	Sequence Of Events			
01	01	Event DITCH		
	02	Event TREE		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		INDIVIDUAL CORY MAXEY	
UNIT INDIVIDUAL	Individual			
	DRIVER CORY MAXEY (608) 425-9678		Citations Issued 0	Sex MALE
			Date of Birth	Race WHITE
	Address 1910 CRESTWOOD DR PLAIN, WI 53577 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance		
001	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	
Distracted By		Distracted By Source EXTERNAL (TO VEHICLE/NON-MOTORIST AREA)		
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)				

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UNIT INDIVIDUAL 01 001	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					