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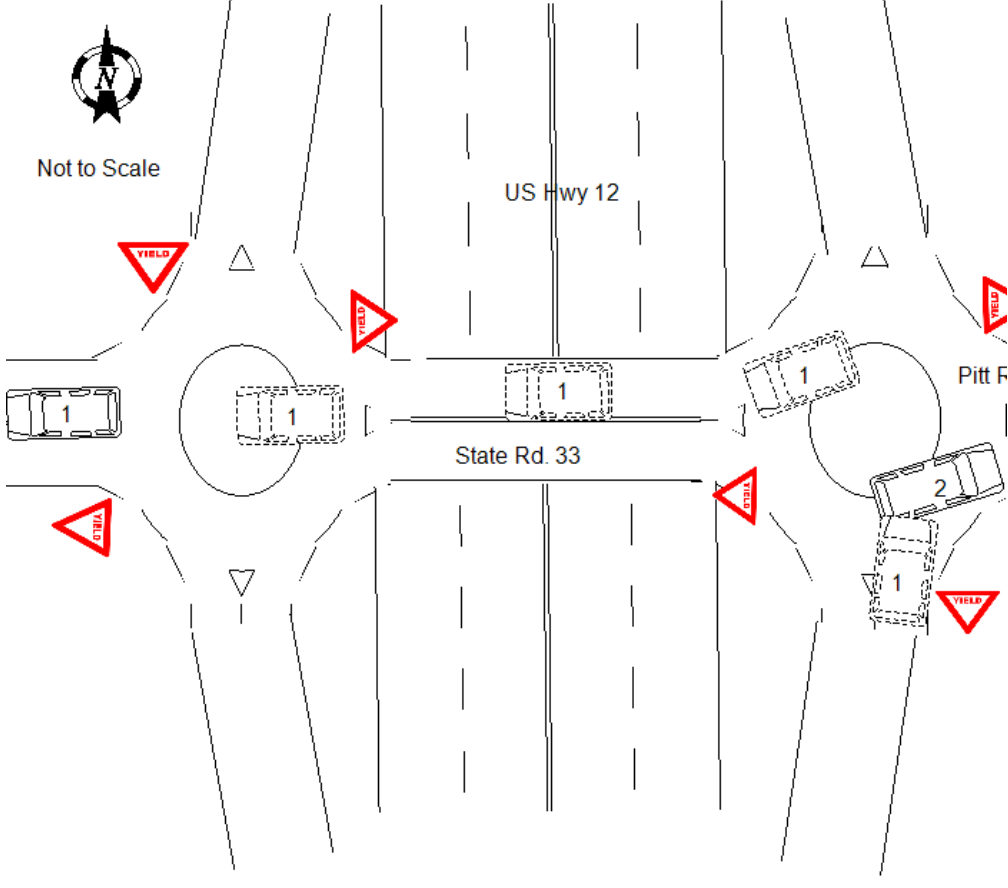
26-07364

WISCONSIN MOTOR VEHICLE
CRASH REPORTSAUK 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 26-07364		Investigating Officer/Deputy DEPUTY B. TRAGER	
Crash Date 07/10/2026		Crash Time 11:18 AM		Date Arrived 07/10/2026		Time Arrived 11:28 AM	
Date Notified 07/10/2026		Time Notified 11:19 AM		Total Units 02		Total Injured 02	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 SGT. CLAUSER, DET. HANSON
	Additional Information PHOTOS

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

ON JULY 10, 2026 AT APPROXIMATELY 11:18AM UNIT 1 WAS TRAVELING NORTH ON US HWY 12 AND TOOK THE OFF RAMP AT STATE RD. 33. UNIT 2 ENTERED THE ROUND ABOUT AND WAS STRUCK BY UNIT 1 WHO FAILED TO YIELD TO UNIT 2 IN THE ROUND ABOUT. UNIT 1 CONTINUED OVER THE OVERPASS WHERE IT WENT UP AND OVER THE WEST SIDE ROUND ABOUT COMING TO A STOP ON THE WEST SIDE OF THAT ROUND ABOUT. BOTH OPERATORS WERE INJURED AND TRANSPORTED BY DELLS DELTON EMS TO ST. CLARE. AUTO MEDIC RESPONDED FOR THE TOW OF UNIT 1 AND CRAIGS TOWING FOR UNIT 2. THE OPERATOR OF UNIT 1 WAS CITED FOR FAILURE TO YIELD RIGHT OF WAY.

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Location

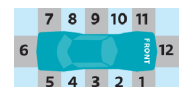
INTERSECTION ON PIT RD AT STH33 WB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.514350709	Longitude -89.782803586
	X Coordinate 275074.6875	Y Coordinate 4821697.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	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 FULL CONTROL	Special Study
Within Interchange Area YES	Junction Location INTERSECTION	Intersection Type ROUNDBOUT

Unit Summary

UNIT 01	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 1	Total Trailers 0	Total HazMat Types 0		
	Insurance? YES	Direction Of Travel NORTHBOUND	☐ Pre CrashTire Mark	Speed Limit 55	Total Lanes 1		
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way ONE-WAY TRAFFIC		Traffic Control YIELD SIGN		Traffic Control Inoperative/Missing NO		
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade UPHILL		
	Truck Bus or HazMat NO						
	UNIT 01 VEHICLE 01	Vehicle					
		License Plate Number AKX2149		Plate Type AUT	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 1FM5K8D83GGD34471		Make FORD	Year 2016	Model EXPLORER			
Color WHI - WHITE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use			
Initial Contact Point 12 - FRONT		Vehicle Damage 15 - ALL AREAS					
Extent Of Damage FUNCTIONAL DAMAGE							



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		UNKNOWN	
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY			
01	Owner Name DYLAN FREDERICKS (608) 573-0600		Owner Address 105 LODI ST # B LODI, WI 53555 , US	
	Sequence Of Events			
01	Event MOTOR VEH IN TRANSPORT			
	Event RUN OFF ROADWAY LEFT			
	Event REENTERING ROADWAY			
	Event CURB			
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		INDIVIDUAL DYLAN FREDERICKS	
UNIT INDIVIDUAL	Individual			
	DRIVER DYLAN FREDERICKS (608) 573-0600		Citations Issued 1	Sex MALE
	Address 105 LODI ST # B LODI, WI 53555 , US		Date of Birth	Race WHITE
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
001	Injury SUSPECTED MINOR INJURY		Airbag DEPLOYED-COMBINATION	
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	
	Medical Transport EMS GROUND		Trapped/Extricated NOT TRAPPED	
	Hospital ST CLARE HOSP		EMS Agency Identifier 6000123	EMS Run #
01	Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		Date of Death	
	Distracted By Action NOT DISTRACTED		Time of Death	

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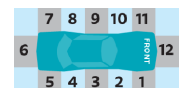
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UNIT INDIVIDUAL	01	001	Non Motorist		Striking Unit #	Location	
			Prior Action				
			Action				
	Action Other					To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
	Drug Type						
	Individual Condition CONFUSED OR DISORIENTED (NON LUCID)						
	Violations						
01	UTC Number BL507719		Issue To? 001	Statute Number 346.06	Description FAILURE TO YIELD RIGHT OF WAY		

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 EASTBOUND	☐ Pre Crash Tire Mark	Speed Limit 55	Total Lanes 1		
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE		
		Traffic Way ONE-WAY TRAFFIC		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						

02	02	Vehicle					
		License Plate Number IMPORT		Plate Type END	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 2LMPJ8K93PBL22470		Make LINC	Year 2023	Model NAUTILUS	
		Color MAR - MAROON (BURGUNDY)		Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
		Initial Contact Point 04 - RIGHT SIDE REAR					



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UNIT	VEHICLE	Vehicle Damage			
		03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR			
		Extent Of Damage DISABLING DAMAGE			
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE			
UNIT	VEHICLE	Vehicle Removed By CRAIGS TOWING			
		What Driver Was Doing NEGOTIATING CURVE			
		Driver Prior Action Other NOT APPLICABLE			
		Driver Actions NO CONTRIBUTING ACTION			
02	02	Owner Name CHRISTINE BASILE (414) 477-1367	Owner Address 4955 S DESOTO LN NEW BERLIN, WI 53151 , US		
		Sequence Of Events			
02	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
02	03	Event			
		Event			
		Event			
		Event			
UNIT	INDIVIDUAL	Policy Holder			
		Insurance Company LIBERTY-MUTUAL-INS-CO	INDIVIDUAL CHRISTINE BASILE		
		Individual			
		DRIVER CHRISTINE BASILE (414) 477-1367	Citations Issued 0	Sex FEMALE	
02	002	Date of Birth	Race WHITE		
		Address 4955 S DESOTO LN NEW BERLIN, WI 53151 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
		Safety Equipment			
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
02	002	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use			Helmet Compliance
		Eye Protection			Tint Compliance
		Injury			Airbag DEPLOYED-CURTAIN
02	002	Injury Severity SUSPECTED MINOR INJURY			
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport EMS GROUND	EMS Agency Identifier 6000123	EMS Run #	
		Hospital ST CLARE HOSP	Date of Death	Time of Death	

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UNIT INDIVIDUAL 02 002	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED			
	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				
Witness				
WITN 01 ESS	Individual STEPHANIE BALDWIN-CURTIS (608) 501-8620		Address 417 N PARK ST REEDSBURG, WI 53959 , US	
			Date of Birth	