

6TL0D2XVV5

26-09172

# 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<br><b>26-09172</b>    |  | Investigating Officer/Deputy<br><b>DEPUTY B. GOODREAU</b> |                           |
| Crash Date<br><b>08/23/2026</b>                |                                      | Crash Time<br><b>03:09 AM</b>                |                                    | Date Arrived<br><b>08/23/2026</b>         |  | Time Arrived<br><b>03:23 AM</b>                           |                           |
| Date Notified<br><b>08/23/2026</b>             |                                      | Time Notified<br><b>03:09 AM</b>             |                                    | Total Units<br><b>01</b>                  |  | Total Injured<br><b>00</b>                                | Total Killed<br><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<br><b>NO</b>           |  | Tags                                                      |                           |
| <input checked="" type="checkbox"/> Reportable |                                      | Crash Type<br><b>DT4000 (STANDARD CRASH)</b> |                                    | <input type="checkbox"/> Amended          |  | <input type="checkbox"/> Secondary Crash                  |                           |

## Description

Diagram



Reconstruction By

 Photos By  
**9113**

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

UNIT 1 WAS TRAVELING SB ON HWY 23, WHEN HE ALLEGEDLY SWERVED OUT OF THE WAY FOR A DEER, THOUGH HIS TIRE TRACKS SHOW A GRADUAL DRIFT INTO THE DITCH. UNIT 1 WENT INTO THE WEST DITCH, TRAVELED IN A CIRCLE, EXITED FROM THE WEST DITCH AND BACK ON TO HWY 23. UNIT 1 THEN TRAVELED INTO THE OPPOSITE EAST DITCH IN THE SAME CIRCLE, EXITED FROM THAT EAST DITCH AND BACK ONTO HWY 23. UNIT 1 WOULD THEN AGAIN ENTER THE WEST DITCH AND ATTEMPT TO MANEUVER HIS WAY OUT OF THE DITCH AGAIN. UNIT 1 WOULD GET STUCK IN THE FIELD AND CAUSED HIS VEHICLE TO BECOME FULLY ENGULFED IN FLAMES. DRONE PICTURES WERE TAKEN OF UNIT 1 PATH IN THE FIELD DURING THE DAYLIGHT HOURS. DIAGRAM AND ITEMS NOT TO SCALE.

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**Location**

|                                                                                                                     |                                     |                                   |
|---------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------|
| ON S7499 STH23 EB<br>1055 FT S<br>OF ELI VALLEY RD<br>(FIRE S7499)<br><br>IN THE TOWN OF FRANKLIN<br>IN SAUK COUNTY | Latitude<br><b>43.371543112</b>     | Longitude<br><b>-90.062807804</b> |
|                                                                                                                     | X Coordinate<br><b>251858.15625</b> | Y Coordinate<br><b>4806632</b>    |
|                                                                                                                     | Structure Type<br><b>FIRE</b>       |                                   |

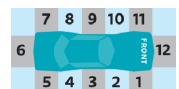
**Crash Scene**

|                                                                        |                                          |                                                                       |               |
|------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------|---------------|
| First Harmful Event<br><b>DITCH</b>                                    |                                          | First Harmful Event Location<br><b>ON ROADWAY</b>                     |               |
| Manner of Collision<br><b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b> |                                          | Light Condition<br><b>DARK/UNLIT</b>                                  |               |
| Road Surface Condition(s)<br><b>DRY</b>                                |                                          | Roadway Factor(s)<br><br><b>NONE</b>                                  |               |
| Environment Factor(s)<br><b>NONE</b>                                   |                                          |                                                                       |               |
| Weather Condition(s)<br><b>CLEAR</b>                                   |                                          |                                                                       |               |
| Animal Type                                                            |                                          | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |               |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>              |                                          | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |               |
| Tribal Land                                                            |                                          | Access Control<br><b>NO CONTROL</b>                                   | Special Study |
| Within Interchange Area<br><b>NO</b>                                   | Junction Location<br><b>NON-JUNCTION</b> | Intersection Type<br><b>NOT AN INTERSECTION</b>                       |               |

**Unit Summary**

|            |                                                    |                                          |                                                               |                            |                                                      |  |
|------------|----------------------------------------------------|------------------------------------------|---------------------------------------------------------------|----------------------------|------------------------------------------------------|--|
| UNIT<br>01 | Unit Status<br><b>IN TRANSIT</b>                   |                                          | Vehicle Operating As Classification<br><b>D CLASS</b>         |                            | Unit Type<br><b>AUTOMOBILE</b>                       |  |
|            | Vehicle Type<br><b>PASSENGER CAR</b>               |                                          |                                                               |                            | Operating As Endorsements                            |  |
|            | Total Occs<br><b>1</b>                             | Train/Bus # Recorded                     | Total # Citations Issued<br><b>2</b>                          | Total Trailers<br><b>0</b> | Total HazMat Types<br><b>0</b>                       |  |
|            | Insurance?<br><b>YES</b>                           | Direction Of Travel<br><b>SOUTHBOUND</b> | <input checked="" type="checkbox"/> <b>Pre CrashTire Mark</b> | Speed Limit<br><b>55</b>   | Total Lanes<br><b>2</b>                              |  |
|            | Most Harmful Event: Collision With<br><b>DITCH</b> |                                          | Special Function<br><b>NO SPECIAL FUNCTION</b>                |                            | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |  |
|            | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>         |                                          | Traffic Control<br><b>NO CONTROL</b>                          |                            | Traffic Control Inoperative/Missing<br><b>NO</b>     |  |
|            | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>       |                                          | Road Curvature<br><b>STRAIGHT</b>                             |                            | Road Grade<br><b>LEVEL</b>                           |  |
|            | Truck Bus or HazMat<br><b>NO</b>                   |                                          |                                                               |                            |                                                      |  |

|                             |                                                           |  |                                 |                     |                                             |
|-----------------------------|-----------------------------------------------------------|--|---------------------------------|---------------------|---------------------------------------------|
| UNIT<br>01<br>VEHICLE<br>01 | <b>Vehicle</b>                                            |  |                                 |                     |                                             |
|                             | License Plate Number<br><b>BAB4271</b>                    |  | Plate Type<br><b>AUT</b>        | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|                             | Vehicle Identification Number<br><b>5NPD74LF7KH493072</b> |  | Make<br><b>HYUN</b>             | Year<br><b>2019</b> | Model<br><b>ELANTRA</b>                     |
|                             | Color<br><b>SIL - SILVER (ALUMINUM)</b>                   |  | Body Style<br><b>SD - SEDAN</b> |                     | Bus Use                                     |
|                             | Initial Contact Point<br><b>12 - FRONT</b>                |  | Vehicle Damage                  |                     |                                             |
|                             | Extent Of Damage<br><b>DISABLING DAMAGE</b>               |  | <b>15 - ALL AREAS</b>           |                     |                                             |



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|                 |                                                                                                 |                                   |                                                                         |                    |
|-----------------|-------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------------|--------------------|
| UNIT<br>VEHICLE | Towed Due To Damage<br><b>TOWED DUE TO DISABLING DAMAGE</b>                                     |                                   | Vehicle Removed By<br><b>NACHREINER'S TOWING</b>                        |                    |
|                 | What Driver Was Doing<br><b>GOING STRAIGHT</b>                                                  |                                   | Vehicle Factors                                                         |                    |
|                 | Driver Prior Action Other                                                                       |                                   | <b>NOT APPLICABLE</b>                                                   |                    |
|                 | Driver Actions<br><b>FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE</b> |                                   |                                                                         |                    |
| 01              | Owner Name<br><b>NICHOLAS HARPER</b>                                                            |                                   | Owner Address<br><b>206 4TH ST<br/>PRAIRIE DU SAC, WI 53578 , US</b>    |                    |
|                 | <b>Sequence Of Events</b>                                                                       |                                   |                                                                         |                    |
| 01              | Event<br><b>DITCH</b>                                                                           |                                   |                                                                         |                    |
|                 | Event                                                                                           |                                   |                                                                         |                    |
|                 | Event                                                                                           |                                   |                                                                         |                    |
|                 | Event                                                                                           |                                   |                                                                         |                    |
| 02              | Event                                                                                           |                                   |                                                                         |                    |
|                 | Event                                                                                           |                                   |                                                                         |                    |
| 03              | Event                                                                                           |                                   |                                                                         |                    |
|                 | Event                                                                                           |                                   |                                                                         |                    |
| 04              | Event                                                                                           |                                   |                                                                         |                    |
|                 | Event                                                                                           |                                   |                                                                         |                    |
| UNIT            | <b>Policy Holder</b>                                                                            |                                   |                                                                         |                    |
|                 | Insurance Company<br><b>PROGRESSIVE-CLASSIC-INS-CO</b>                                          |                                   | INDIVIDUAL<br><b>NICHOLAS HARPER</b>                                    |                    |
| UNIT            | <b>Individual</b>                                                                               |                                   |                                                                         |                    |
|                 | DRIVER<br><b>NICHOLAS HARPER</b>                                                                |                                   | Citations Issued<br><b>2</b>                                            | Sex<br><b>MALE</b> |
| INDIVIDUAL      | Date of Birth                                                                                   |                                   | Race<br><b>WHITE</b>                                                    |                    |
|                 | Address<br><b>206 4TH ST<br/>PRAIRIE DU SAC, WI 53578 , US</b>                                  |                                   | Driver License Number<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |                    |
| 01              | <b>Safety Equipment</b>                                                                         |                                   | On Duty Crash                                                           |                    |
|                 | Safety Equipment                                                                                |                                   | <b>SHOULDER &amp; LAP BELT</b>                                          |                    |
| 001             | Row<br><b>01 - FRONT ROW</b>                                                                    | Seat Position<br><b>07 - LEFT</b> | Helmet Compliance                                                       |                    |
|                 | Helmet Use                                                                                      |                                   | Tint Compliance                                                         |                    |
| 001             | Eye Protection                                                                                  |                                   | Airbag<br><b>NON DEPLOYED</b>                                           |                    |
|                 | <b>Injury</b>                                                                                   |                                   | Injury Severity<br><b>NO APPARENT INJURY</b>                            |                    |
| 001             | Ejected<br><b>NOT EJECTED</b>                                                                   |                                   | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                      |                    |
|                 | Trapped/Extricated<br><b>NOT TRAPPED</b>                                                        |                                   | Medical Transport<br><b>NOT TRANSPORTED</b>                             |                    |
| 001             | EMS Agency Identifier                                                                           |                                   | EMS Run #                                                               |                    |
|                 | Hospital                                                                                        |                                   | Date of Death                                                           |                    |
| 001             | Time of Death                                                                                   |                                   | Distracted By Source<br><b>EXTERNAL (TO VEHICLE/NON-MOTORIST AREA)</b>  |                    |
|                 | Distracted By Action<br><b>OTHER ACTION (LOOKING AWAY FROM TASK ETC)</b>                        |                                   |                                                                         |                    |

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|---------------------------------|--------------------------------------------------------------------------------------|-------------------------------|-------------------------------------|---------------------------------------|--------------------------------------------------------------------|-------------------------------|
| UNIT<br>INDIVIDUAL<br>01<br>001 | <b>Non Motorist</b>                                                                  |                               | Striking Unit #                     | Location                              |                                                                    |                               |
|                                 | Prior Action                                                                         |                               |                                     |                                       |                                                                    |                               |
|                                 | Action                                                                               |                               |                                     |                                       |                                                                    |                               |
|                                 | Action Other                                                                         |                               |                                     |                                       |                                                                    |                               |
|                                 | To/From School                                                                       |                               |                                     |                                       |                                                                    |                               |
|                                 | <b>Drug &amp; Alcohol</b>                                                            |                               | Suspected Alcohol Use<br><b>YES</b> | Suspected Drug Use<br><b>NO</b>       |                                                                    |                               |
|                                 | Alcohol Test Given<br><b>TEST GIVEN</b>                                              |                               | Alcohol Test Type<br><b>BLOOD</b>   |                                       | Alcohol Test Results<br><b>PENDING</b>                             |                               |
|                                 | Drug Test Given<br><b>TEST NOT GIVEN</b>                                             |                               | Drug Test Type                      | Drug Test Results                     |                                                                    |                               |
|                                 | Drug Type                                                                            |                               |                                     |                                       |                                                                    |                               |
|                                 | Individual Condition<br><br><b>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL</b> |                               |                                     |                                       |                                                                    |                               |
| <b>Violations</b>               |                                                                                      |                               |                                     |                                       |                                                                    |                               |
| 01<br>02                        | 01                                                                                   | UTC Number<br><b>BL504778</b> | Issue To?<br><b>001</b>             | Statute Number<br><b>346.63(1)(a)</b> | Description<br><b>OPERATING WHILE UNDER THE INFLUENCE</b>          |                               |
|                                 | 02                                                                                   | UTC Number<br><b>BL504777</b> | Issue To?<br><b>001</b>             | Statute Number<br><b>346.57(2)</b>    | Description<br><b>FAILURE TO KEEP VEHICLE UNDER CONTROL</b>        |                               |
| <b>Property Owner</b>           |                                                                                      |                               |                                     |                                       |                                                                    |                               |
| PROP<br>OWNER<br>01             | INDIVIDUAL<br><b>ROBERT SCHLIECKAU</b><br>(608) 345-3618                             |                               |                                     |                                       | Address<br><b>S7185 HWY 23</b><br><b>LOGANVILLE, WI 53943 , US</b> |                               |
|                                 | <b>Fixed Objects Struck</b>                                                          |                               |                                     |                                       |                                                                    |                               |
| 01                              | Striking Unit<br><b>01</b>                                                           | Struck Object<br><b>DITCH</b> |                                     |                                       | Structure Number                                                   | Damage Tag Number<br><b>X</b> |