

6TL0FV1GFH
25-01319

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 25-01319		Investigating Officer/Deputy DEPUTY W. VERTEIN	
Crash Date 02/12/2025		Crash Time 03:41 PM		Date Arrived 02/12/2025		Time Arrived 03:49 PM	
Date Notified 02/12/2025		Time Notified 03:43 PM		Total Units 02		Total Injured 01	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" 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 checked="" type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram		Reconstruction By
		Photos By W. VERTEIN #9122
		Additional Information PHOTOS
<p>Not to scale</p>		

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

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING WESTBOUND AND UNIT 2 WAS TRAVELING EASTBOUND ON A DIVIDED HIGHWAY. THE OPERATOR OF UNIT 1 LOST CONTROL DUE TO SPEED AND SLIPPERY ROAD CONDITIONS. UNIT 1 CROSSED THE MEDIAN AND STRUCK UNIT 2. UNIT 2 SLID INTO THE DITCH AND THE OPERATOR OF UNIT 1 LEFT THE SCENE. THE OPERATOR OF UNIT 2 COMPLAINED OF LEFT SIDE PAIN.

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Location

INTERSECTION ON USH12 EB AT RAMP USH12 EB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.5288287	Longitude -89.787340145
	X Coordinate 274761.90625	Y Coordinate 4823318
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 06 - SIDESWIPE/OPPOSITE DIRECTION	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW, SLUSH	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW		
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	Unit Status HIT AND RUN	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? UNKNOWN	Direction Of Travel WESTBOUND	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit 65	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number	Plate Type	St	Country of Issuance
		Vehicle Identification Number	Make	Year	Model
		Color BLK - BLACK	Body Style SD - SEDAN		Bus Use
		Initial Contact Point 09 - LEFT SIDE MIDDLE	Vehicle Damage		
		Extent Of Damage VEHICLE NOT AT SCENE	16 - VEHICLE NOT AT SCENE		



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UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
		Driver Prior Action Other		NOT APPLICABLE		
		Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE				
01	01	Owner Name		Owner Address		
Sequence Of Events						
UNIT	INDIVIDUAL	01	Event RUN OFF ROADWAY LEFT			
			02	Event DITCH		
				Event REENTERING ROADWAY		
			04	Event MOTOR VEH IN TRANSPORT		
Individual						
UNIT	INDIVIDUAL	01	DRIVER	Citations Issued 0	Sex	
				Date of Birth	Race	
			Address		Driver License Number	
Safety Equipment						
UNIT	INDIVIDUAL	01	On Duty Crash		Safety Equipment	
			Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
			Helmet Use		Helmet Compliance	
			Eye Protection		Tint Compliance	
UNIT	INDIVIDUAL	001	Injury Injury Severity NO APPARENT INJURY		Airbag NOT APPLICABLE	
			Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT APPLICABLE	
			Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
			Hospital		Date of Death	Time of Death
Distracted By						
		Distracted By Source				
Distracted By Action						
Non Motorist						
		Striking Unit #	Location			

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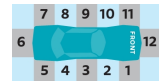
UNIT	INDIVIDUAL	Prior Action		
		Action		
		Action Other		To/From School
		Drug & Alcohol		
		Suspected Alcohol Use		Suspected Drug Use
		Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
		TEST NOT GIVEN		
		Drug Test Given	Drug Test Type	Drug Test Results
		TEST NOT GIVEN		
		Drug Type		
Individual Condition				
NOT OBSERVED				

Unit Summary

UNIT	02	Unit Status	Vehicle Operating As Classification	Unit Type		
		IN TRANSIT	D CLASS	AUTOMOBILE		
		Vehicle Type	Operating As Endorsements			
		(SPORT) UTILITY VEHICLE				
		Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types
		1		0	0	0
		Insurance?	Direction Of Travel	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit	Total Lanes
		YES	EASTBOUND		65	2
		Most Harmful Event: Collision With	Special Function	Emergency Motor Vehicle Use		
		MOTOR VEH IN TRANSPORT	NO SPECIAL FUNCTION	NOT APPLICABLE		
Traffic Way	Traffic Control	Traffic Control Inoperative/Missing				
DIVIDED HWY W/O TRAFFIC BARRIER	NO CONTROL	NO				
Surface Type	Road Curvature	Road Grade				
BLACKTOP (BITUMINOUS)	STRAIGHT	LEVEL				
Truck Bus or HazMat						
NO						

Vehicle

UNIT	VEHICLE	02	02	License Plate Number	Plate Type	St	Country of Issuance
				665XZS	AUT	WI	UNITED STATES
				Vehicle Identification Number	Make	Year	Model
				KNDPM3AC6L7773600	KIA	2020	SPORTAGE
				Color	Body Style	Bus Use	
				BLK - BLACK	UT - SPORT UTILITY VEHICLE		
				Initial Contact Point	Vehicle Damage		
				09 - LEFT SIDE MIDDLE	07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE		
Extent Of Damage							
DISABLING DAMAGE							
Towed Due To Damage	Vehicle Removed By						
TOWED DUE TO DISABLING DAMAGE	CRAIGS TOWING						
What Driver Was Doing							
GOING STRAIGHT							



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UNIT	Vehicle Factors		NOT APPLICABLE	
	Driver Prior Action Other			
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name STEPHANIE WENZEL (608) 432-3687		Owner Address 501 11TH ST BARABOO, WI 53913 , US	
02	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event RUN OFF ROADWAY RIGHT		
	03	Event DITCH		
04	Event			
	Policy Holder			
	Insurance Company AMERICAN-FAMILY-INS-CO		INDIVIDUAL STEPHANIE WENZEL	
	Individual			
UNIT	DRIVER STEPHANIE WENZEL (608) 432-3687		Citations Issued 0	Sex FEMALE
	Address 501 11TH ST BARABOO, WI 53913 , US		Date of Birth	Race WHITE
	Driver License Number			
	Safety Equipment			
002	On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
Injury		Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-CURTAIN	
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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	

Wisconsin Motor Vehicle Crash
Form DT4000

This report does not include any CJIS data.
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Crash Date 02/12/2025
Crash Time 03:41 PM

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UNIT	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		

Property Owner

PROP OWNER 01	GOVERNMENT SAUK COUNTY HWY DEPT (608) 356-3855		Address 620 STH 136 PO BOX 26 BARABOO, WI 53913 , US	
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Fixed Objects Struck

01	Striking Unit 01	Struck Object DITCH	Structure Number	Damage Tag Number NA
	Striking Unit 02	Struck Object DITCH	Structure Number	Damage Tag Number NA

Witness

WITN ESS 01	Individual TODD BARTON (608) 393-2771		Address 904 MOORE ST # 459 BARABOO, WI 53913 , US		Date of Birth
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