6TL0D1PTQN 25-02042

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Document Number Overrio	le Primary (Primary Crash Document # Crash Time 08:08 AM		Crash Number 42	Investigating Officer/Deputy DEPUTY S. MESSNER Time Arrived 08:26 AM			
Crash Date 03/05/2025	08:08 A			rived 2 025				
Date Notified 03/05/2025	Time Not 08:08 A		Total Ur 01	nits	Total Injured Total Kille 00 00			
On Emergency	Hit and Ru	and Run		Work Zone	Trailer or Towed		red Reporting Threshold	
Government Property	Acti	Active School Zone		Bus Related	Tags			
Reportable	Crash Ty DT4000	rpe (STANDARD CRA	SH)		Amend	ded	Secondary Crash	
Description 								
Diagram Unit 1 slide off th	e	CTH BD		Not to scale		Photos	struction By	
roadway left and came to rest in th mud of the ditch	e d			7	*	DEP. S	S. MESSNER #9134	
	/		N. R	Reedsburg Rd				
					>—			

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		Color		Body Style Bus U			Bus Use	is Use		
		BLU - BLUE			SD - SEDAN		- 			
					cle Damage		ı			
_	쁘				cie Damage			7 8 9 10 11		
ş١	<u>၁</u>	00 - NON-COLLISION						6 2 12		
L N	VEHICL	Extent Of Damage			NO DAMAGE			5 4 3 2 1		
	Z	NO DAMAGE						3 4 3 2 1		
		Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG What Driver Was Doing			cle Removed By					
					CRAIGS TOWING					
					Vehicle Factors					
		GOING STRAIGHT			NOT APPLICABLE					
		Driver Prior Action Other								
		Driver Actions								
	ш	SPEED TOO FAST/COND								
-										
LIND	VEHICL									
\supset	山									
	>									
		Owner Name LANCE CROWDER (608) 393-6681			Owner Address					
	01				S3219 COUNTY ROAD BD					
	0				BARABOO, WI 53913 , US					
Sequence Of Events										
	01	Event								
	0									
	02	Event DITCH								
	~	Event								
	03									
	04	Event								
		Individual								
		DRIVER Citations Issued Sex								
		LANCE CROWDER (608) 393-6681			0 MALE					
	A				Date of Birth Race					
.)			0	ate of birtin	race				
ᇦᅵ		0.11								
E I		Address S3219 COUNTY ROAD BD BARABOO, WI 53913 , US			Driver License Number					
	INDIVIDUAL				STATE: WISCONSIN COUNTRY: UNITED STATES					
	Saf	On Duty Crash afety Equipment			Safety Equipment					
	Oui		OUGUI DED A LAD DEL T							
		Row	Seat Position	S	HOULDER & LAP E	BELT				
		01 - FRONT ROW	07 - LEFT							
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
	_	Injury Severity			Airbag					
2	NO APPARENT INJURY			NON DEPLOYED						
		Ejected Eje	ection Path	Tr			Trapped/Extricated			
		NOT EJECTED NO	OT EJECTED/NOT APP				NOT TRAPPED			
		Medical Transport		EMS Agency Identifier			EMS Run #			
		NOT TRANSPORTED			,					
		Hospital			Date of Death		Time of Death			

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Crash Time 08:08 AM

		Distracted By	Distracted By Source UNKNOWN	•				
		Distracted By Action UNKNOWN						
	·	Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
_	UAL							
L	INDIVIDUAL							
	IND							
•		Action Other						To/From School
		Action Other						TO/FIGHT SCHOOL
	L	Drug & Alcohol	Suspected Alcohol U 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		
5	001	Drug Type		l				
		Individual Condition						
		NOT OBSERVED						