WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #			ing Officer/Deputy Y W. NEUBAUER		
23	Crash Date 03/19/2025	Crash Time 09:00 PM	Date Arrived Time A 10:13				
8	Date Notified	Time Notified	Total Units	Total Injured Total Kill		d	
Ä	03/19/2025	09:59 PM	01	00	00	Poporting	
Ö	On Emergency Hi	t and Run Lane Close	ure Work Zone	Trailer o	r Towed	Reporting Threshold	
6TL0FB0023	Government Property	Active School Zone	School Bus Related NO	Tags			
	Reportable	Crash Type DT4000 (STANDARD CRASH	1)	Amende	d	Secondary Crash	
	Description						
	Diagram	TY G	OT TO SCA	F	Photos By Additional Infor		
	, a sworn law enforceme	ent officer, agree that I have no	ot added any CJIS data in this	s report.			
	UNIT 1 WAS TRAVELING N/B ON C	CTY G. UNIT 1 LOST CONTROL, RAN	OFF ROADWAY RIGHT AND ENTER	RED DITCH.			

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date 03/19/2025
Crash Time 09:00 PM

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LO	cation								
	CTHG NB			Latitude			Longitude	1	
	7 MI N			43.356125189			-90.1173	27347	
_	MC CARVILLE RD			X Coordinate			Y Coordin	ate	
	THE TOWN OF BEAR (CREEK			247376.8125 Structure Type		4805083		
IIN :	SAUK COUNTY			Structure ⁻					
					71 -				
Cra	ash Scene								
Firs	t Harmful Event			First Harm	ıful Event L	ocation			
DIT	ГСН			ROADSI	DE				
Mai	nner of Collision			Light Cond	Light Condition DARK/UNLIT Roadway Factor(s)				
00	- NO COLLISION W/VE	HICLE IN TRANSPORT		DARK/U					
Roa	ad Surface Condition(s)			Roadway					
WE	ET, SNOW, SLUSH, ICE								
Env	vironment Factor(s)								
WE	EATHER CONDITIONS			ROAD S ETC)			CONDITION (WET, ICY, SNOW, SLUSH,		
We	ather Condition(s)			-	,				
	OUDY, SNOW								
Anii	mal Type			Relation T	Relation To Trafficway				
			TRAFFICWAY - ON ROAD						
	sh Classification - Location BLIC PROPERTY			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
Trib	oal Land			Access Co	Access Control Special Study			Special Study	
			NO CON	NO CONTROL					
Witl	hin Interchange Area	Intersect							
NO		NON-JUNCTION	NOT AN	NOT AN INTERSECTION					
	it Summary ==			0		1			
Uni	t Status		Vehicle Operating As	Classification		Unit Type	DII E		
Uni	t Status TRANSIT		Vehicle Operating As of D CLASS	Classification		AUTOMOE			
Unit	t Status TRANSIT nicle Type		·	Classification				ents	
Unit IN Veh PA	t Status TRANSIT nicle Type SSENGER CAR	Taris (Done # December)	D CLASS			AUTOMOE Operating A	s Endorsem		
Unit IN Veh PA Tota	t Status TRANSIT nicle Type	Train/Bus # Recorded	D CLASS Total # Citations Issue		Total Tra	AUTOMOE Operating A	s Endorsem Total HazN		
Unit IN Ver PA Tota 1	t Status TRANSIT sicle Type SSENGER CAR al Occs		D CLASS		Total Tra	AUTOMOR Operating A	s Endorsem Total HazM 0	lat Types	
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Wisconsin Motor Vehicle Crash Form DT4000

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Crash Date 03/19/2025
Crash Time 09:00 PM

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

		Towed Due To Damage NOT TOWED			nicle Removed By			
		What Driver Was Doing			nicle Factors			
		GOING STRAIGHT						
		Driver Prior Action Other		NO	T APPLICABLE			
		Driver Actions NO CONTRIBUTING ACT	ION					
╘	7							
FIN O	VEHICLE							
-	7							
		O No			0			
		Owner Name JUSTIN GIBSON			Owner Address S7163 COUNTY R	OAD G		
6	2	(414) 839-3850			HILLPOINT, WI 53	937 , US		
	;	Sequence Of Events						
	2	RUN OFF ROADWAY RIG	БНТ					
	05	Event DITCH						
	03	Event						
		Event						
	9							
╘	- 1	Policy Holder						
LIND		Insurance Company SOCIETY-INS-A-MUTUAL-CO			INDIVIDUAL JUSTIN GIBSON			
		Individual						
		DRIVER		T	Citations Issued Sex			
		Address S7163 COUNTY ROAD G HILLPOINT, WI 53937 , US			0 MALE			
 	NDIVIDUAL				Date of Birth Race WHITE			
TNO TNO	፷				Driver License Number			
-	Ĭ							
	0-4	On Duty	Crash	S	Safety Equipment			
	Sai	fety Equipment		Ш.				
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	S	SHOULDER & LAP	BELT		
		Helmet Use	U7 - LEFT	Helmet Compliance				
	001	Eye Protection		T	Tint Compliance			
10		Injury Severity			Airbag			
٦	0	Injury NO APPARENT INJURY Ejected Ejection Path		N	NON DEPLOYED Trapped/Extricated		I Transad/Eutriantad	
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT A		PPLIC	PLICABLE		NOT TRAPPED	
		Medical Transport			EMS Agency Identifier		EMS Run #	
		NOT TRANSPORTED						
		Hospital			Date of Death Time of Death			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)							
	Distracted By Action							
		NOT DISTRACTED						

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 4 \end{tabular}$

Crash Date 03/19/2025
Crash Time 09:00 PM

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		Non Motorist	Striking Unit #	Location				
		Prior Action		1				
UNIT	INDIVIDUAL	Action Other						To/From School
			Suspected Alcohol U	Jse	Suspected Drug Use			To/Tioni School
	L	Orug & Alcohol	NO		NO			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN		Drug Test Type		I Davis Tank Daniska		
		Drug Test Given TEST NOT GIVEN		Diug Test Type		Drug Test Results		
2	001	Drug Type		1		1		
		Individual Condition						
		NOT OBSERVED						