

6TL097RB56
20-11556

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 20-11556		Investigating Officer/Deputy DEPUTY L. GJORGJIEV	
Crash Date 09/26/2020		Crash Time 06:55 PM		Date Arrived 09/26/2020		Time Arrived 07:08 PM	
Date Notified 09/26/2020		Time Notified 06:58 PM		Total Units 02		Total Injured 04	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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 checked="" 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 9188
		Additional Information PHOTOS

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

UNIT 1 AND UNIT 2 WERE DRIVING WESTBOUND ON HWY 60 APPROACHING THE INTERSECTION WITH PORTER RD. BOTH WERE BEHIND A SLOW MOVING FARM EQUIPMENT. THERE WAS ANOTHER VEHICLE BETWEEN UNIT 1 AND UNIT 2. AS THEY WERE COMING TO THE INTERSECTION UNIT 1 PROCEEDED TO PASS THE VEHICLES IN FRONT OF HIM. AS SOON AS HE STARTED PASSING, UNIT 2 PROCEEDED TO TURN LEFT ONTO PORTER RD. UNIT 1 THEN STRUCK UNIT 2, CAUSING IT TO ROLL ON ITS SIDE. BOTH VEHICLES SUSTAINED DISABLING DAMAGE. THE DRIVER OF UNIT 2 STATED HE HAD HIS LEFT TURN SIGNAL ON BEFORE HE PROCEEDED TO MAKE THE TURN. THE DRIVER OF UNIT 1 STATED HE DID NOT SEE THAT UNIT 2 WAS PREPARING TO TURN LEFT. ALL OCCUPANTS WERE CHECKED OUT BY EMS AND REFUSED TRANSPORT. VEHICLES WERE REMOVED BY GEORGES TOWING.

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Location

Table with location details: ON USH14 WB 35 FT E OF PORTER RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY. Includes Latitude (43.191032833), Longitude (-90.172865955), X Coordinate (242179.046875), Y Coordinate (4786917.5), and Structure Type (NO STRUCTURE).

Crash Scene

Table with crash scene details: First Harmful Event (MOTOR VEH IN TRANSPORT), Manner of Collision (01 - ANGLE), Road Surface Condition (DRY), Environment Factor (NONE), Weather Condition (CLEAR), Animal Type, Crash Classification (PUBLIC PROPERTY), Intersection Type (FOUR-WAY INTERSECTION), Closure Type (FULL CLOSURE), Date Initial Lane/Rd Closed (09/26/2020), Date All Lanes Open (09/26/2020), Time Initial Lane/Rd Closed (06:55 PM), Time All Lanes Open (08:10 PM), Date Scene Cleared (09/26/2020), Time Scene Cleared (08:10 PM).

Unit Summary

Table with unit summary details: Unit Status (IN TRANSIT), Vehicle Type (PASSENGER VAN), Total Occs (1), Insurance? (YES), Most Harmful Event (MOTOR VEH IN TRANSPORT), Traffic Way (TWO-WAY, NOT DIVIDED), Surface Type (BLACKTOP (BITUMINOUS)), Vehicle (145VPD, 5FNRL38768B412941), License Plate Number (145VPD), Plate Type (AUT - AUTOMOBILE), St (WI), Country of Issuance (UNITED STATES), Make (HONDA), Year (2008), Model (ODISSEY).

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UNIT VEHICLE	Color PLE - PURPLE	Body Style VN - VAN	Bus Use
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT	
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By GEORGES AUTO BODY	
	What Driver Was Doing OVERTAKE LEFT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
UNIT VEHICLE	Driver Actions IMPROPER OVERTAKING / PASSING LEFT		
	Owner Name DANIEL KANE (920) 650-5205	Owner Address 1121 AMERICAN WAY LAKE MILLS, WI 53551 , US	
UNIT 01	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
UNIT	Policy Holder		
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual DANIEL KANE	
	Individual		
UNIT INDIVIDUAL	Driver DANIEL KANE (920) 650-5205	Citations Issued 1	Sex MALE
		Date of Birth	Race WHITE
	Address 1121 AMERICAN WAY LAKE MILLS, WI 53551 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		
	On Duty Crash	Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
UNIT 01	Injury	Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-COMBINATION
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier

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UNIT	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	
	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						
Violations						
01	001	01	UTC Number BB957511	Issue To? 001	Statute Number 346.10(2)	Description PASSING AT INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With OVERTURN/ROLLOVER		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	License Plate Number AFC4928		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	

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02 UNIT VEHICLE	Vehicle Identification Number 1J8HG58N26C289068		Make JEEP	Year 2006	Model CMD	
	Color BLK - BLACK		Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
	Initial Contact Point 09 - LEFT SIDE MIDDLE		Vehicle Damage			
	Extent Of Damage DISABLING DAMAGE		15 - ALL AREAS			
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By GEORGES AUTO BODY			
	What Driver Was Doing LEFT TURN		Vehicle Factors			
	Driver Prior Action Other		NOT APPLICABLE			
02 UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION					
	Owner Name ZANE WOODS (608) 479-0661		Owner Address E9340 DELLWOOD RD # 104 REEDSBURG, WI 53959 , US			
Sequence Of Events						
02 UNIT VEHICLE	01	Event LEFT TURN				
	02	Event MOTOR VEH IN TRANSPORT				
	03	Event OVERTURN/ROLLOVER				
	04	Event				
02 UNIT VEHICLE	Policy Holder					
	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual ZANE WOODS			
02 UNIT INDIVIDUAL	Individual					
	Driver ZANE WOODS (608) 479-0661		Citations Issued 0	Sex MALE		
	Date of Birth		Race WHITE			
	Address E9340 DELLWOOD RD # 104 REEDSBURG, WI 53959 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
02 UNIT INDIVIDUAL	Safety Equipment		On Duty Crash			
	Safety Equipment		SHOULDER & LAP BELT			
	Row 01 - FRONT ROW	Seat Position 07 - LEFT				
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
02 UNIT INDIVIDUAL	Injury		Injury Severity POSSIBLE INJURY		Airbag NON DEPLOYED	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED		

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UNIT	INDIVIDUAL	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		
		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				
02	002	Drug Type				
Individual Condition APPEARED NORMAL						
UNIT	INDIVIDUAL	Individual				
		Passenger JACOB SAYLOR	Citations Issued 0	Sex MALE		
			Date of Birth	Race WHITE		
		Address 821 BIRCH ST BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
		Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
		Row 02 - SECOND ROW	Seat Position 07 - LEFT			
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		02	003	Injury	Injury Severity POSSIBLE INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #			

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UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	Distracted By		Distracted By Source			
	Distracted By Action					
	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	
02 003	Drug Type					
	Individual Condition APPEARED NORMAL					
	Individual					
	Passenger KAYLA SAYLOR (608) 495-4224			Citations Issued 0		Sex FEMALE
	Address 821 BIRCH ST BARABOO, WI 53913 , US			Date of Birth		
				Race WHITE		
	Driver License Number			STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment		On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW		Seat Position 09 - RIGHT		SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance			
Eye Protection		Tint Compliance				
02 004	Injury		Injury Severity POSSIBLE INJURY		Airbag NON DEPLOYED	
	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	

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UNIT	Distracted By		Distracted By Source		
	Distracted By Action				
	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				
02	004	Individual Condition			
		APPEARED NORMAL			