

6TL0D5DXVV
20-11957

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 20-11957	Investigating Officer/Deputy DEPUTY C. FRANK	
Crash Date 10/09/2020		Crash Time 11:52 AM	Date Arrived 10/09/2020	Time Arrived 12:05 PM	
Date Notified 10/09/2020		Time Notified 11:53 AM	Total Units 02	Total Injured 02	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 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

<p>Diagram</p>	Reconstruction By
	Photos By 9198
	Additional Information NONE, PHOTOS

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

ON THE ABOVE DATE AND TIME UNIT 1 WAS EB ON CR Q, WEST OF CR G. UNIT 2 WAS SB ON CR G NORTH OF CR Q. UNIT 1 OPERATOR FAILED TO STOP FOR STOP SIGN, ENTERED THE INTERSECTION AND STRUCK THE LEFT SIDE OF UNIT 2. UNIT 1 SPUN AND CAME TO A REST FACING WEST. UNIT 2 SPUN AND CAME TO A REST FACING NORTH.

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UNIT VEHICLE	Color WHI - WHITE	Body Style 4H - HATCHBACK 4 DOOR	Bus Use
	Initial Contact Point 12 - FRONT	Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE	01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT	
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By SHIELDS TOWING	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
UNIT VEHICLE	Driver Actions FAILURE TO CONTROL, DISREGARDED STOP SIGN		
	Owner Name TEONA MARIE KANGAS (608) 495-1857	Owner Address 323 E COURT ST VIROQUA, WI 54665 , US	
UNIT VEHICLE	Sequence Of Events		
	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company AMERICAN-FAMILY-INS-CO	Individual TEONA KANGAS	
UNIT INDIVIDUAL	Individual		
	Driver TEONA MARIE KANGAS (608) 495-1857	Citations Issued 2	Sex FEMALE
	Address 323 E COURT ST VIROQUA, WI 54665 , US	Date of Birth [REDACTED]	Race WHITE
UNIT INDIVIDUAL	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 INDIVIDUAL	Injury		
	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT	
	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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02 UNIT VEHICLE	License Plate Number	LD2344	Plate Type	LTK - LIGHT TRUCK	St	WI	Country of Issuance	UNITED STATES	
	Vehicle Identification Number	1N6AD07W78C444616	Make	NISSAN	Year	2008	Model	FRONTIER	
	Color	BLK - BLACK	Body Style	PK - PICKUP	Bus Use				
	Initial Contact Point	09 - LEFT SIDE MIDDLE	Vehicle Damage						
	Extent Of Damage	DISABLING DAMAGE	08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE						
	Towed Due To Damage	TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By SHIELDS TOWING						
	What Driver Was Doing	GOING STRAIGHT	Vehicle Factors						
Driver Prior Action Other	NOT APPLICABLE								
02 UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
	Owner Name	RICHARD A MITCHELL (608) 983-2665		Owner Address	29202 MITCHELL LN CAZENOVIA, WI 53924 , US				
Sequence Of Events									
02 UNIT VEHICLE	Event	MOTOR VEH IN TRANSPORT							
	Event								
	Event								
	Event								
02 UNIT INDIVIDUAL	Policy Holder								
	Insurance Company	WISCONSIN-MUTUAL-INS-CO			Individual	RICHARD MITCHELL			
02 UNIT INDIVIDUAL	Individual								
	Driver	RICHARD A MITCHELL (608) 983-2665			Citations Issued	0		Sex	MALE
				Date of Birth	[REDACTED]		Race	WHITE	
	Address	29202 MITCHELL LN CAZENOVIA, WI 53924 , US			Driver License Number	[REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
02 UNIT INDIVIDUAL	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					
02 UNIT INDIVIDUAL	Injury								
	Injury Severity	SUSPECTED MINOR INJURY			Airbag	NON DEPLOYED			

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	Medical Transport EMS GROUND	EMS Agency Identifier 6000820	EMS Run #
	Hospital REEDSBURG AREA MED CTR	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			
UNIT INDIVIDUAL	Individual		
	Passenger JUSTIN DANIEL MITCHELL (608) 393-0802	Citations Issued 0	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
	Address 29614 COUNTY HWY II CAZENOVIA, WI 53924 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
Row 01 - FRONT ROW	Seat Position 09 - RIGHT		
Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance	
UNIT INDIVIDUAL	Injury	Injury Severity SUSPECTED MINOR INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED

