

6TL0B8M7ZK
21-12528

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 21-12528		Investigating Officer/Deputy SERGEANT T. CLAUER	
Crash Date 12/30/2021		Crash Time 05:15 PM		Date Arrived 12/30/2021		Time Arrived 05:22 PM	
Date Notified 12/30/2021		Time Notified 05:17 PM		Total Units 02		Total Injured 01	Total Killed 00
<input type="checkbox"/> On Emergency	<input 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 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 DEPUTY FRANK
	Additional Information PHOTOS

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

UNIT ONE WAS TRAVELING NORTH ON WEST PINE STREET. UNIT ONE HAD A GREEN LIGHT AND WAS CONTINUING THROUGH THE INTERSECTION WITH LINN STREET. UNIT TWO WAS TRAVELING SOUTH ON WEST PINE STREET. UNIT TWO HAD A FLASHING YELLOW TURN ARROW SIGNAL TO TURN EAST ONTO LINN STREET. UNIT TWO FAILED TO YIELD TO UNIT ONE SUBSEQUENTLY GETTING STRUCK IN THE FRONT PASSENGER DOOR. UNIT ONE OPERATOR HAD MINOR INJURIES. UNIT TWO OPERATOR WAS UNINJURED. BOTH VEHICLES REMOVED BY OPERATORS.

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Location

Table with location details: ON STH33 EB 18 FT W OF STH136 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY. Includes Latitude (43.474781974), Longitude (-89.768816831), X Coordinate (276058.9375), Y Coordinate (4817265), 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(s) (WET), Environment Factor(s) (NONE), Weather Condition(s) (CLOUDY), Animal Type, Crash Classification - Location (PUBLIC PROPERTY), Access Control (NO CONTROL), and Intersection Type (NOT AN INTERSECTION).

Unit Summary

Table with unit summary details: Unit Status (IN TRANSIT), Vehicle Type ((SPORT) UTILITY VEHICLE), Total Occs (01), Direction Of Travel (NORTHBOUND), Most Harmful Event (MOTOR VEH IN TRANSPORT), Traffic Way (DIVIDED HWY W/O TRAFFIC BARRIER), Surface Type (CONCRETE), and Truck Bus or HazMat (NO).

Vehicle

Table with vehicle details: License Plate Number (806ZHP), Vehicle Identification Number (JHLRE48508C011772), Color (GRN - GREEN), Initial Contact Point (01 - RIGHT FRONT CORNER), and Extent Of Damage (FUNCTIONAL DAMAGE). Includes a damage diagram grid.

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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 NO CONTRIBUTING ACTION			
01 01	Owner Name ALLISON MARIE BARSNESS (608) 287-6645	Owner Address 5900 DERBY RD MAZOMANIE, WI 53560 , US		
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company INTEGRITY-INS-CO	Individual ALLISON BARSNESS		
UNIT INDIVIDUAL	Individual			
	Driver ALLISON MARIE BARSNESS (608) 287-6645	Citations Issued 0	Sex FEMALE	
		Date of Birth [REDACTED]	Race WHITE	
	Address 5900 DERBY RD MAZOMANIE, WI 53560 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
01 001	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	
	Injury		Injury Severity SUSPECTED MINOR 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	
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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Form section for Unit Individual, including fields for Striking Unit #, Location, Prior Action, Action, Action Other, To/From School, Suspected Alcohol Use, Suspected Drug Use, Alcohol Test Given, Alcohol Test Type, Alcohol Test Results, Drug Test Given, Drug Test Type, Drug Test Results, Drug Type, and Individual Condition.

Unit Summary

Unit Summary table with fields: Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), Vehicle Type ((SPORT) UTILITY VEHICLE), Operating As Endorsements, Total Occs (01), Train/Bus # Recorded, Total # Citations Issued (01), Total Trailers (0), Total HazMat Types (0), Insurance? (YES), Direction Of Travel (SOUTHBOUND), Pre Crash Tire Mark, Speed Limit (30), Total Lanes (05), Most Harmful Event (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 (TRAFFIC SIGNAL), Traffic Control Inoperative/Missing (NO), Surface Type (CONCRETE), Road Curvature (STRAIGHT), Road Grade (LEVEL), Truck Bus or HazMat (NO).

Vehicle section table with fields: License Plate Number (AFK3264), Plate Type (AUT - AUTOMOBILE), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (JA4AP3AU5KU025209), Make (MITSUBISHI), Year (2019), Model (OUTLANDER), Color (BLU - BLUE), Body Style (4D - 4DR), Bus Use, Initial Contact Point (03 - RIGHT SIDE MIDDLE), Vehicle Damage (02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR), Extent Of Damage (FUNCTIONAL DAMAGE), Towed Due To Damage (NOT TOWED), Vehicle Removed By (OPERATOR).

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UNIT	What Driver Was Doing LEFT TURN	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
VEHICLE	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, DISREGARDED OTHER TRAFFIC CONTROL		
	Owner Name ANTONIO CASTILLO PRADO (608) 393-9056	Owner Address 503 7TH ST # 4 BARABOO, WI 53913 , US	
Sequence Of Events			
UNIT	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
	Event		
Policy Holder			
UNIT	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual ANTONIO PRADO	
	Individual		
UNIT	Driver ANTONIO CASTILLO PRADO (608) 393-9056	Citations Issued 01	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
INDIVIDUAL	Address 503 7TH ST # 4 BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		
UNIT	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	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
UNIT	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
UNIT	Distracted By	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action	NOT DISTRACTED	
UNIT	Non Motorist	Striking Unit #	Location

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UNIT INDIVIDUAL 02 002 01	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			
	UTC Number BC938168		Issue To? 002	Statute Number 346.37(1)(c)3

Witness

WITN ESS 01	Individual ADAM C SCHENK (608) 459-5899		Address 200 CAMPUS VIEW DRIVE APT 310 BARABOO, WI 53913 , US	Date of Birth [REDACTED]