

6TL09XQZ3W
22-04106

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 22-04106		Investigating Officer/Deputy DEPUTY I. GALVAN	
Crash Date 05/06/2022		Crash Time 01:29 PM		Date Arrived 05/06/2022		Time Arrived 01:40 PM	
Date Notified 05/06/2022		Time Notified 01:31 PM		Total Units 02		Total Injured 00	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

Diagram		Reconstruction By	
		Photos By	
		Additional Information NONE	

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

UNIT 2 WAITING ON COUNTY ROAD P TO TURN NORTH BOUND ONTO COON BLUFF ROAD FACING EASTBOUND. UNIT 1 TRAVELING EASTBOUND LOOKED AWAY AND SWERVED TO MISS STRIKING UNIT 2. UNIT 1 STRUCK UNIT 2 AND MADE MINOR DAMAGE. UNIT 2 CITED FOR OPERATE A MOTOR VEHICLE WITH NO INSURANCE. A WRITTEN WARNING ISSUED AND EXPLAINED FOR INATTENTIVE DRIVING. UNITS WERE BOTH REMOVED BY OPERATORS. NO INJURIES REPORTED.

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Location

ON CTHP EB 12 FT W OF COON BLUFF RD IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.590952741	Longitude -89.867327473
	X Coordinate 268536.1875	Y Coordinate 4830437.5
	Structure Type NO STRUCTURE	

Crash Scene

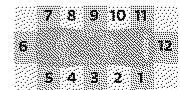
First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 03 - FRONT TO REAR	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? NO	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01	License Plate Number RW5124	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GC1KWE84FF521132	Make CHEVROLET	Year 2015	Model SILVERADO
	Color BLK - BLACK	Body Style PK - PICKUP	Bus Use	
	Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage		
	Extent Of Damage NO DAMAGE	00 - NO DAMAGE		



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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 OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01 01	Owner Name COLE THOMAS MITTLESTEADT (608) 495-4395		Owner Address 1525 HUNTINGTON PARK DR REEDSBURG, WI 53959 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver COLE THOMAS MITTLESTEADT (608) 495-4395		Citations Issued 1	Sex MALE
	Address 1525 HUNTINGTON PARK DR REEDSBURG, WI 53959 , US		Date of Birth [REDACTED]	Race WHITE
	Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
01 001	Injury		Airbag	
	Injury Severity NO APPARENT INJURY		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	
01 001	Distracted By			
	Distracted By Source OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)			
	Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)			
01 001	Non Motorist		Striking Unit #	
	Location			

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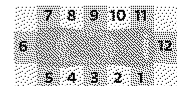
UNIT INDIVIDUAL	Prior Action					
	Action					
	Action Other			To/From School		
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results		
	Drug Type					
	Individual Condition APPEARED NORMAL					
	Violations					
	01	001	01	AE757819	Issue To? 001	Statute Number 344.62(1)

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 4		Train/Bus # Recorded		Total # Citations Issued 0	
	Total Trailers 0		Total HazMat Types 0			
	Insurance? YES		Direction Of Travel EASTBOUND		<input type="checkbox"/> Pre Crash Tire Mark	
	Speed Limit 55		Total Lanes 2			
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way TWO-WAY, NOT DIVIDED			Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)			Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO					

Vehicle

UNIT VEHICLE 02	License Plate Number AFL2670		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 5J6RE4H37AL083418		Make HONDA	Year 2010	Model CRV	
	Color RED - RED		Body Style 4D - 4DR		Bus Use	
	Initial Contact Point 05 - RIGHT REAR CORNER		Vehicle Damage 05 - RIGHT REAR CORNER			
	Extent Of Damage MINOR DAMAGE					



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing LEFT TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
02	Owner Name MAHAYLA ORION SWANSON (608) 495-7069		Owner Address E8869 COUNTY ROAD P WISCONSIN DELLS, WI 53965 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company NATIONAL-GENERAL-INS-CO		Individual MAHAYLA SWANSON	
UNIT INDIVIDUAL	Individual			
	Driver MAHAYLA ORION SWANSON (608) 495-7069		Citations Issued 0	Sex FEMALE
	Address E8869 COUNTY ROAD P WISCONSIN DELLS, WI 53965 , US		Date of Birth [REDACTED]	Race WHITE
	Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES	
02 002	Safety Equipment		On Duty Crash	
	Safety Equipment		SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Compliance	
	Helmet Use		Tint Compliance	
	Eye Protection		Airbag NON DEPLOYED	
	Injury		Injury Severity NO APPARENT INJURY	Trapped/Extricated NOT TRAPPED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		EMS Agency Identifier
Medical Transport NOT TRANSPORTED		Hospital		EMS Run #
Date of Death		Time of Death		
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
02	002	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					
		Individual					
UNIT	INDIVIDUAL	Passenger DAVID ALEXANDER JACOBS (608) 393-9693		Citations Issued 0	Sex MALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address E8869 COUNTY ROAD P WISCONSIN DELLS, WI 53965 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
02	003	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			
		Injury		Injury Severity NO APPARENT 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					
Distracted By Action							
Non Motorist		Striking Unit #	Location				

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UNIT INDIVIDUAL	Prior Action		
	Action		
	Action Other		To/From School
02 003	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 ALaura ERIDANUS SWANSON (608) 495-3033	Citations Issued 0	Sex FEMALE
	Date of Birth [REDACTED]	Race WHITE	
	Address E5476 FARBER RD REEDSBURG, WI 53959 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
02 004	Safety Equipment	On Duty Crash	Safety Equipment
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity NO APPARENT 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		
Distracted By Action			
Non Motorist	Striking Unit #	Location	
Prior Action			

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UNIT	INDIVIDUAL	Action				
		Action Other	To/From School			
02	004	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			
		Individual				
		UNIT	INDIVIDUAL	Passenger ROMYN F D SWANSON (608) 495-7069	Citations Issued 0	Sex MALE
	Date of Birth [REDACTED]			Race WHITE		
UNIT	INDIVIDUAL	Address E8869 COUNTY ROAD P WISCONSIN DELLS, WI 53965 , US	Driver License Number			
		Safety Equipment				
02	005	On Duty Crash	Safety Equipment			
		Row 02 - SECOND ROW	Seat Position 07 - LEFT	CHILD RESTRAINT SYSTEM - REAR FACING		
		Helmet Use	Helmet Compliance			
		Eye Protection	Tint Compliance			
		Injury	Injury Severity NO APPARENT 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		
		Distracted By Action				
Non Motorist		Striking Unit #	Location			
Prior Action						

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UNIT INDIVIDUAL	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			
	02 005			