

6TL09H5JP5

19-00559

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 19-00559	Investigating Officer/Deputy DEPUTY S. MESSNER	
Crash Date 01/13/2019		Crash Time 08:38 PM	Date Arrived 01/13/2019	Time Arrived 09:35 PM	
Date Notified 01/13/2019		Time Notified 08:59 PM	Total Units 01	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		Tags	
<input type="checkbox"/> Reportable	Crash Type PRIVATE PROPERTY/PARKING LOT		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram 	Shifflet Rd	Reconstruction By
		Photos By DEP. S. MESSNER
		Additional Information PHOTOS

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

UNIT 1 WAS DRIVEN BY KENT E. MCKEOWN. WHILE DRIVING UNIT 1 DOWN A PRIVATE DRIVE OF S13009, UNIT 1 LOST ITS BRAKES. KENT DROVE UNIT 1 OFF THE PRIVATE DRIVE INTO A ROCK TO STOP THE VEHICLE. KENT LEFT THE SCENE WITHOUT NOTIFYING LAW ENFORCEMENT. AFTER LAW ENFORCEMENT ARRIVED ON SCENE, KENT RETURNED WITH SELF HELP TO REMOVE THE VEHICLE. KENT DID NOT HAVE INSURANCE AND WAS BORROWING THE VEHICLE "LONG TERM." KENT NOTIFIED THE OWNER OF UNIT 1 OF THE ACCIDENT VIA SNAPCHAT CALL. KENT REMOVED THE VEHICLE FROM THE SCENE.

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Location

Table with 3 columns: Address (PRIVATE PROPERTY S13009 SHIFFLET RD), Coordinates (Latitude, Longitude, X, Y), and Structure Type (FIRE).

Crash Scene

Table with 3 columns: Event Details (First Harmful Event, Manner of Collision, Road Surface, Environment, Weather, Animal Type, Crash Classification, Tribal Land), Location (First Harmful Event Location, Light Condition, Roadway Factor, Relation To Trafficway, Crash Classification - Jurisdiction, Access Control, Special Study), and Intersection (Within Interchange Area, Junction Location, Intersection Type).

Unit Summary

Table with 3 columns: Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), and various other details like Vehicle Type, Citations, Insurance, and Traffic Control.

Table with 4 columns: License Plate Number (719NYZ), Plate Type (AUT - AUTOMOBILE), St (WI), Country of Issuance (UNITED STATES), and other vehicle details like VIN, Make, Year, Model, Color, Body Style, and Damage.

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By	
	What Driver Was Doing RIGHT TURN		Vehicle Factors	
	Driver Prior Action Other		BRAKES	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name JONATHAN D THORESON		Owner Address 218 11TH ST ROCHESTER, MN 55904 , US	
	Sequence Of Events			
01 02 03 04	Event RIGHT TURN			
	Event OTHER FIXED OBJECT			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver KENT EDWARD MCKEOWN (608) 370-3870		Citations Issued 2	Sex MALE
	Address S12985 SHIFFLET RD # 33 SPRING GREEN, WI 53588 , US		Date of Birth	Race WHITE
			Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES
01 001	Safety Equipment		On Duty Crash	
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment 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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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	01	UTC Number AI389048	Issue To? 001	Statute Number 346.70(1)	Description FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT	
	02	01	UTC Number AI389047	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR VEHICLE W/O INSURANCE
Witness						
WITN ESS	01	Individual BRIANNA LYNN JOHNSON (608) 459-0342			Address S13009 SHIFFLET RD LOT 59 SPRING GREEN, WI 53588 , US	
					Date of Birth	