

5QL2HNC3BN  
24-136790

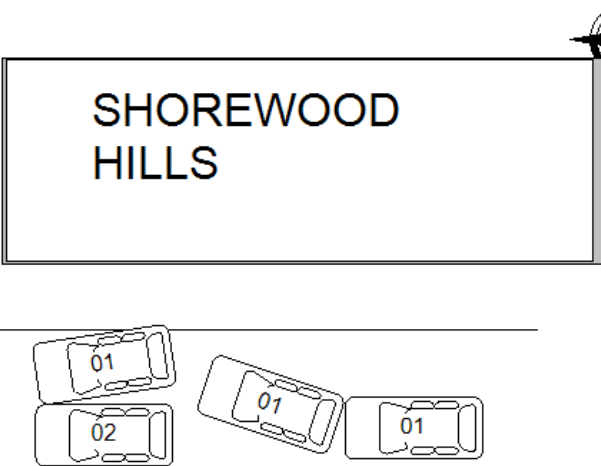
# WISCONSIN MOTOR VEHICLE CRASH REPORT

SHOREWOOD HILLS POLICE DEPARTM  
810 SHOREWOOD BOULEVARD  
MADISON, WI 53705  
(608) 267-1110

5QL2HNC3BN

|  |                                      |  |                                    |                                   |   |  |  |
|--|--------------------------------------|--|------------------------------------|-----------------------------------|---|--|--|
| Document Number Override                       |                                      | Primary Crash Document #                               |                                    | Agency Crash Number               |   | Investigating Officer/Deputy<br><b>LIEUTENANT J. WEITZEL</b> |  |
| Crash Date<br><b>04/03/2024</b>                |                                      | Crash Time<br><b>08:36 AM</b>                          |                                    | Date Arrived<br><b>04/03/2024</b> |   | Time Arrived<br><b>08:38 AM</b>                              |  |
| Date Notified<br><b>04/03/2024</b>             |                                      | Time Notified<br><b>08:36 AM</b>                       |                                    | Total Units<br><b>02</b>          |   | Total Injured<br><b>00</b>                                   | Total Killed<br><b>00</b>                |
| <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 checked="" type="checkbox"/> Active School Zone |                                    | School Bus Related<br><b>NO</b>   |   | Tags   |  |
| <input checked="" type="checkbox"/> Reportable |                                      | Crash Type<br><b>PRIVATE PROPERTY/PARKING LOT</b>      |                                    |                                   |   | <input type="checkbox"/> Amended                             | <input type="checkbox"/> Secondary Crash |

## Description

|  |   |
|--|---|
| Diagram<br><br><br><br>DIAGRAM NOT TO SCALE<br>LT. JAIME WEITZEL | Reconstruction By                             |
|  | Photos By<br><b>LT WEITZEL</b>                |
|  | Additional Information<br><b>NONE, PHOTOS</b> |

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

U/#2 WAS PARKED IN A LEGAL PARKING STALL IN THE HORSESHOE PARKING LOT AT THE SHOREWOOD ELEMENTARY SCHOOL. U/#1 WAS LEAVING A PARKED POSITION AND ATTEMPTED TO PULL AROUND THE RIGHT SIDE OF #2. U#1 STRUCK THE RIGHT FRONT BUMPER AND WHEEL WELL OF U#2. U#1 THOUGHT HE HAD ENOUGH ROOM TO GET AROUND U#2, WHO WAS LEGALLY PARKED U#2 HAD MINOR DAMAGE TO THE RIGHT WHEEL WELL, RIGHT FRONT WHEEL, BUMPER AND SCRATCHES ON PASSENGER SIDE DOOR. U#1 HAD DAMAGE TO THE FRONT LEFT FENDER, CONSISTING OF DENTING/SCRAPES AND BUMPER DETACHED FROM VEHICLE. NO CITATIONS ISSUED

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Location

|   |   |              |
|---|---|--------------|
| PRIVATE PROPERTY<br>1105 SHOREWOOD BLVD<br>(HOUSE/BUILDING 1105)<br><br>IN THE VILLAGE OF SHOREWOOD HILLS<br>IN DANE COUNTY | Latitude                                | Longitude    |
|   | X Coordinate                            | Y Coordinate |
|   | Structure Type<br><b>HOUSE/BUILDING</b> |              |

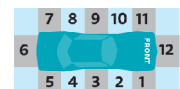
Crash Scene

|   |   |   |
|---|---|---|
| First Harmful Event<br><b>MOTOR VEH IN TRANSPORT</b>      | First Harmful Event Location<br><b>IN PARKING LANE OR ZONE</b>        |   |
| Manner of Collision<br><b>01 - ANGLE</b>                  | Light Condition<br><b>DAYLIGHT</b>                                    |   |
| Road Surface Condition(s)<br><b>WET, SNOW, SLUSH</b>      | Roadway Factor(s)<br><br><b>NONE</b>                                  |   |
| Environment Factor(s)<br><b>NONE</b>                      |   |   |
| Weather Condition(s)<br><b>RAIN, SNOW, SLEET/HAIL</b>     |   |   |
| Animal Type   | Relation To Trafficway<br><b>NON TRAFFICWAY - PARKING LOT</b>         |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b> | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |   |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>                                   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                      | Junction Location<br><b>NON-JUNCTION</b>                              | Intersection Type<br><b>NOT AN INTERSECTION</b> |

Unit Summary

|             |   |   |   |  |                                |
|-------------|---|---|---|--|--------------------------------|
| <b>UNIT</b> | Unit Status<br><b>IN TRANSIT</b>                                    | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>AUTOMOBILE</b>                      |  |                                |
|             | Vehicle Type<br><b>PASSENGER CAR</b>                                | Operating As Endorsements                             |   |  |                                |
|             | Total Occs<br><b>1</b>  | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>0</b>                | Total Trailers<br><b>0</b>                           | Total HazMat Types<br><b>0</b> |
|             | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>NORTHBOUND</b>              | <input type="checkbox"/> <b>Pre Crash Tire Mark</b> | Speed Limit<br><b>N/A</b>                            | Total Lanes<br><b>1</b>        |
|             | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> | Special Function<br><b>NO SPECIAL FUNCTION</b>        |   | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |
|             | Traffic Way<br><b>PARKING LOT OR PRIVATE PROPERTY</b>               | Traffic Control<br><b>NO CONTROL</b>                  |   | Traffic Control Inoperative/Missing<br><b>NO</b>     |                                |
|             | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                        | Road Curvature<br><b>STRAIGHT</b>                     |   | Road Grade<br><b>LEVEL</b>                           |                                |
|             | Truck Bus or HazMat<br><b>NO</b>                                    |   |   |  |                                |

|             |                |  |   |                     |   |
|-------------|----------------|--|---|---------------------|---|
| <b>UNIT</b> | <b>VEHICLE</b> | <b>Vehicle</b>   |   |                     |   |
|             |                | License Plate Number<br>[REDACTED]                     | Plate Type<br><b>AUT - AUTOMOBILE</b>   | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|             |                | Vehicle Identification Number<br>[REDACTED]            | Make<br><b>TOYOTA</b>   | Year<br><b>2006</b> | Model<br><b>CAMRY</b>                       |
|             |                | Color<br><b>SIL - SILVER (ALUMINUM)</b>                | Body Style<br><b>4D - 4DR</b>   |                     | Bus Use                                     |
|             |                | Initial Contact Point<br><b>11 - LEFT FRONT CORNER</b> | Vehicle Damage<br><b>10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b> |                     |   |
|             |                | Extent Of Damage<br><b>MINOR DAMAGE</b>                |   |                     |   |



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|   |  |  |   |  |
|---|--|--|---|--|
| UNIT<br>VEHICLE                               | Towed Due To Damage<br><b>NOT TOWED</b>                      |  | Vehicle Removed By<br><b>OPERATOR</b>   |  |
|   | What Driver Was Doing<br><b>LEAVING A PARKED POSITION</b>    |  | Vehicle Factors   |  |
|   | Driver Prior Action Other                                    |  | <b>NOT APPLICABLE</b>   |  |
|   | Driver Actions<br><b>IMPROPER OVERTAKING / PASSING RIGHT</b> |  |   |  |
| 01<br>01                                      | Owner Name<br>[REDACTED]                                     |  | Owner Address<br>[REDACTED]   |  |
|   | <b>Sequence Of Events</b>                                    |  |   |  |
| 01<br>02<br>03<br>04                          | Event<br><b>MOTOR VEH IN TRANSPORT</b>                       |  |   |  |
|   | Event  |  |   |  |
|   | Event  |  |   |  |
|   | Event  |  |   |  |
| UNIT  | <b>Policy Holder</b>   |  |   |  |
|   | Insurance Company<br><b>STATE-FARM-CLASSIC-INS-CO</b>        |  | INDIVIDUAL<br>[REDACTED]  |  |
| UNIT<br>INDIVIDUAL                            | <b>Individual</b>  |  |   |  |
|   | DRIVER<br>[REDACTED]   |  | Citations Issued<br><b>0</b>  | Sex<br><b>MALE</b>                       |
|   | Date of Birth<br>[REDACTED]                                  |  | Race<br><b>ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN</b>                        |  |
|   | Address<br>[REDACTED]  |  | Driver License Number<br>[REDACTED]<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |
| 01<br>001                                     | <b>Safety Equipment</b>                                      |  | On Duty Crash   |  |
|   | Safety Equipment   |  | <b>SHOULDER &amp; LAP BELT</b>  |  |
|   | Row<br><b>01 - FRONT ROW</b>                                 | Seat Position<br><b>07 - LEFT</b>                              | Helmet Compliance   |  |
|   | Helmet Use   |  | Tint Compliance   |  |
|   | Eye Protection   |  | Airbag<br><b>NON DEPLOYED</b>   |  |
|   | <b>Injury</b>  |  | Injury Severity<br><b>NO APPARENT INJURY</b>  |  |
|   | Ejected<br><b>NOT EJECTED</b>                                |  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                                    | Trapped/Extricated<br><b>NOT TRAPPED</b> |
| Medical Transport<br><b>NOT TRANSPORTED</b>   |  | EMS Agency Identifier  | EMS Run #   |  |
| Hospital                                      |  | Date of Death  | Time of Death   |  |
| <b>Distracted By</b>                          |  | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |   |  |
| Distracted By Action<br><b>NOT DISTRACTED</b> |  |  |   |  |

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|   |  |  |                             |                          |                      |  |
|---|--|--|-----------------------------|--------------------------|----------------------|--|
| UNIT<br><br>INDIVIDUAL<br><br><br><br><br><br><br><br>01<br>001 | <b>Non Motorist</b>                            |  | Striking Unit #             | Location                 |                      |  |
|   | Prior Action                                   |  |                             |                          |                      |  |
|   | Action   |  |                             |                          |                      |  |
|   | Action Other                                   |  |                             |                          | To/From School       |  |
|   | <b>Drug &amp; Alcohol</b>                      |  | Suspected Alcohol Use<br>NO | Suspected Drug Use<br>NO |                      |  |
|   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    |  | Alcohol Test Type           |                          | Alcohol Test Results |  |
|   | Drug Test Given<br><b>TEST NOT GIVEN</b>       |  | Drug Test Type              |                          | Drug Test Results    |  |
|   | Drug Type                                      |  |                             |                          |                      |  |
|   | Individual Condition<br><b>APPEARED NORMAL</b> |  |                             |                          |                      |  |

**Unit Summary**

|                |   |  |   |                            |  |  |
|----------------|---|--|---|----------------------------|--|--|
| UNIT<br><br>02 | Unit Status<br><b>LEGALLY PARKED</b>                                |  | Vehicle Operating As Classification<br><b>D CLASS</b> |                            | Unit Type<br><b>AUTOMOBILE</b>                       |  |
|                | Vehicle Type<br><b>PASSENGER CAR</b>                                |  |   |                            | Operating As Endorsements                            |  |
|                | Total Occs<br><b>1</b>  | Train/Bus # Recorded                     | Total # Citations Issued<br><b>0</b>                  | Total Trailers<br><b>0</b> | Total HazMat Types<br><b>0</b>                       |  |
|                | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>NORTHBOUND</b> | <input type="checkbox"/> <b>Pre Crash Tire Mark</b>   | Speed Limit<br><b>N/A</b>  | Total Lanes<br><b>1</b>                              |  |
|                | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> |  | Special Function<br><b>NO SPECIAL FUNCTION</b>        |                            | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |  |
|                | Traffic Way<br><b>PARKING LOT OR PRIVATE PROPERTY</b>               |  | Traffic Control<br><b>NO CONTROL</b>                  |                            | Traffic Control Inoperative/Missing<br><b>NO</b>     |  |
|                | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                        |  | Road Curvature<br><b>STRAIGHT</b>                     |                            | Road Grade<br><b>LEVEL</b>                           |  |
|                | Truck Bus or HazMat<br><b>NO</b>                                    |  |   |                            |  |  |

|   |   |  |   |                     |   |  |
|---|---|--|---|---------------------|---|--|
| UNIT<br><br>VEHICLE<br><br>02<br>02     | <b>Vehicle</b>  |  |   |                     |   |  |
|   | License Plate Number<br>[REDACTED]                    |  | Plate Type<br><b>AUT - AUTOMOBILE</b>                                   | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |  |
|   | Vehicle Identification Number<br>[REDACTED]           |  | Make<br><b>TESLA MOTORS INC</b>   | Year<br><b>2023</b> | Model<br><b>Y</b>                           |  |
|   | Color<br><b>GRY - GRAY</b>                            |  | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b>                         |                     | Bus Use                                     |  |
|   | Initial Contact Point<br><b>02 - RIGHT SIDE FRONT</b> |  | Vehicle Damage<br><b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT</b> |                     |   |  |
|   | Extent Of Damage<br><b>MINOR DAMAGE</b>               |  | Vehicle Removed By<br><b>OPERATOR</b>                                   |                     |   |  |
| Towed Due To Damage<br><b>NOT TOWED</b> |   |  |   |                     |   |  |

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|                     |  |   |  |  |
|---------------------|--|---|--|--|
| UNIT<br>VEHICLE     | What Driver Was Doing<br><b>LEGALLY PARKED</b>           | Vehicle Factors   |  |  |
|                     | Driver Prior Action Other                                | <b>NOT APPLICABLE</b>   |  |  |
|                     | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>          |   |  |  |
|                     | Owner Name<br>[REDACTED]                                 | Owner Address<br>[REDACTED]   |  |  |
| UNIT<br>01          | <b>Sequence Of Events</b>                                |   |  |  |
|                     | Event<br><b>MOTOR VEH IN TRANSPORT</b>                   |   |  |  |
|                     | Event  |   |  |  |
|                     | Event  |   |  |  |
|                     | Event  |   |  |  |
| UNIT<br>02          | <b>Policy Holder</b>                                     |   |  |  |
|                     | Insurance Company<br><b>GEICO-GENERAL-INS-CO</b>         | INDIVIDUAL<br>[REDACTED]  |  |  |
|                     | <b>Individual</b>  |   |  |  |
| UNIT<br>INDIVIDUAL  | OCCUPANT OF MOTOR VEHICLE NOT IN TRANSPORT<br>[REDACTED] | Citations Issued<br><b>0</b>  | Sex<br><b>FEMALE</b>   |  |
|                     |  | Date of Birth<br>[REDACTED]   | Race<br><b>ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN</b> |  |
|                     | Address<br>[REDACTED]                                    | Driver License Number<br>[REDACTED]<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |  |
|                     |  |   |  |  |
| UNIT<br>02          | <b>Safety Equipment</b>                                  |   | Safety Equipment   |  |
|                     | On Duty Crash  | <b>NONE USED - VEHICLE OCCUPANT</b>   |  |  |
|                     | Row<br><b>01 - FRONT ROW</b>                             | Seat Position<br><b>07 - LEFT</b>   |  |  |
|                     | Helmet Use   | Helmet Compliance   |  |  |
|                     | Eye Protection   | Tint Compliance   |  |  |
|                     | <b>Injury</b>  | Injury Severity<br><b>NO APPARENT INJURY</b>  | Airbag<br><b>UNKNOWN</b>                                       |  |
|                     | Ejected<br><b>UNKNOWN</b>                                | Ejection Path<br><b>UNKNOWN</b>   | Trapped/Extricated<br><b>UNKNOWN</b>                           |  |
|                     | Medical Transport<br><b>NOT TRANSPORTED</b>              | EMS Agency Identifier   | EMS Run #  |  |
|                     | Hospital   | Date of Death   | Time of Death  |  |
|                     | <b>Distracted By</b>                                     | Distracted By Source  |  |  |
|                     | Distracted By Action                                     |   |  |  |
| <b>Non Motorist</b> | Striking Unit #  | Location  |  |  |

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CRASH REPORT

|      |  |     |                                    |                                 |
|------|--|-----|------------------------------------|---------------------------------|
| UNIT | INDIVIDUAL                                     |     |                                    |                                 |
|      | Prior Action                                   |     |                                    |                                 |
|      | Action   |     |                                    |                                 |
|      | Action Other                                   |     |                                    | To/From School                  |
|      | <b>Drug &amp; Alcohol</b>                      |     | Suspected Alcohol Use<br><b>NO</b> | Suspected Drug Use<br><b>NO</b> |
|      | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    |     | Alcohol Test Type                  | Alcohol Test Results            |
|      | Drug Test Given<br><b>TEST NOT GIVEN</b>       |     | Drug Test Type                     | Drug Test Results               |
|      | Drug Type                                      |     |                                    |                                 |
|      | Individual Condition<br><b>APPEARED NORMAL</b> |     |                                    |                                 |
|      | 02   | 002 |                                    |                                 |