

5QL2VDKRC1
24-170388

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

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Document Number Override		Primary Crash Document #		Agency Crash Number 24-170388		Investigating Officer/Deputy DETECTIVE A. DOSTALEK	
Crash Date 04/25/2024		Crash Time 09:34 AM		Date Arrived 04/25/2024		Time Arrived 09:38 AM	
Date Notified 04/25/2024		Time Notified 09:36 AM		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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type PRIVATE PROPERTY/PARKING LOT				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram		Reconstruction By	
<p>Diagram not to scale.</p>		<p>Photos By DOSTALEK</p>	
		Additional Information PHOTOS	

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

VEHICLE 1 WAS BACKING UP TO THE REAR OF THE BUILDING TO PREFORM A SERVICE FOR THE BUSINESS [REDACTED] WHILE VEHICLE 1 WAS BACKING UP, THE DRIVER COLLIDED WITH THE LIGHT POLE THAT WAS NEXT TO THE BUILDING. THE LIGHT POLE FELL OVER, AND WIRES WERE LEFT EXPOSED. THE DRIVER REPORTED NO INJURIES. THE BUILDING OWNER WAS CONTACTED AND NOTIFIED REGARDING THE DAMAGE. THE BUILDING OWNER STATED THEY WOULD NOTIFY AN ELECTRICIAN REGARDING THE EXPOSED WIRES.

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Location

PARKING LOT UNIVERSITY AVE/ CTHMS NB LOT 3416 (HOUSE/BUILDING 3416) IN THE VILLAGE OF SHOREWOOD HILLS IN DANE COUNTY	Latitude 43.076057511	Longitude -89.445304115
	X Coordinate 300929.15625	Y Coordinate 4772163
	Structure Type HOUSE/BUILDING	

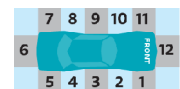
Crash Scene

First Harmful Event LUM LIGHT SUPPORT	First Harmful Event Location IN PARKING LANE OR ZONE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	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 NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location PRIVATE PROPERTY	Crash Classification - Jurisdiction PRIVATE PROPERTY	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification B CLASS		Unit Type TRUCK	
	Vehicle Type STRAIGHT TRUCK (INSERT TRUCK)	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit N/A	Total Lanes 0
	Most Harmful Event: Collision With LUM LIGHT SUPPORT	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way PARKING LOT OR PRIVATE PROPERTY	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR				

UNIT	VEHICLE	Vehicle			
		License Plate Number [REDACTED]	Plate Type HTK - HEAVY TRUCK	St TX	Country of Issuance UNITED STATES
		Vehicle Identification Number [REDACTED]	Make INTERNATIONAL	Year 2004	Model 4300
		Color BLU - BLUE	Body Style TK - TRUCK		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 BACKING		Vehicle Factors			
	Driver Prior Action Other		NOT APPLICABLE			
	Driver Actions UNSAFE BACKING					
01 01	Owner Name [REDACTED]		Owner Address [REDACTED]			
	Sequence Of Events					
01 02 03 04	Event MOTOR VEH IN TRANSPORT					
	Event					
	Event					
	Event					
UNIT	Policy Holder					
	Insurance Company ARCH-INSURANCE-CO		ORGANIZATION/COMPANY [REDACTED]			
UNIT INDIVIDUAL	Individual					
	DRIVER [REDACTED]		Citations Issued 0	Sex MALE		
	Address [REDACTED]		Date of Birth [REDACTED]	Race WHITE		
[REDACTED]		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 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						

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UNIT INDIVIDUAL	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
	Action Other				To/From School	
01 001	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					
	Carrier					
01 01	<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier			Source DRIVER		
	Name [REDACTED]			Address [REDACTED]		
UNIT TRUCK BUS	GVWR MORE THAN 26,000 LB		Vehicle Configuration SINGLE-UNIT TRUCK (2-AXLE AND GVWR MORE THA		Cargo Body Type	
	US DOT # [REDACTED]		Carrier Type OTHER OPERATION/NOT SPECIFIED		Permitted Load NOT APPLICABLE	
	<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present	
	Measured Height		Measured Length	Measured Width	Measured Weight	
Property Owner [REDACTED]						
PROP OWNER 01	[REDACTED] NY		[REDACTED]			
Fixed Objects Struck						
01	Striking Unit 01	Struck Object LUM LIGHT SUPPORT			Structure Number	Damage Tag Number