WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash I	Document #	Agency	Crash Number	Investigating O		EL	
_	Crash Date 04/29/2024	Crash Time 12:19 PM		Date Ai		Time Arrived			
OCCUINCOD	Date Notified 04/29/2024	Time Notified 12:20 PM		Total Units 02		Total Injured Total Kill 00 00		led	
.4	On Emergency H	it and Run	Lane Clos	ure	₩ork Zone	Trailer or	· Towed	Reporting Threshold	
Z L	Government Property	Active So	chool Zone	School NO	Bus Related	Tags		•	
•	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	1)		Amended	i	Secondary Crash	
	Description Diagram	•					econstruction	•	
	E	**************************************	↑ 1	r _A		L	hotos By T WEITZEI	rmation	
	EAST BOUNI DIAGRAM NOT LT. JAIME WEIT	D UNIVERSIT	Y AT MIDVALE						
	, a sworn law enforceme	ent officer. agr	ee that I have n	ot adde	d anv CJIS data in th	nis report.			
	U#1 WAS STOPPED BEHIND A BU						#1 ATTEMPTF	ED TO GO AROUND THE	
	BUS AND STRUCK U#2. U#1 HAD THE HOOD PARTIALLY CRUMPLE CITATIONS ISSUED AND NO INJU	FUNCTIONAL DAI D. U#2 HAD MINC	MAGE TO THE FRO OR DAMAGE TO TH	ONT BUMF	PER AREA THAT CONSIS	STED OF THE BUMP	ER FALLING	OFF, FLUID LEAKING AND	

WISCONSIN MOTOR VEHICLE CRASH REPORT

Lo	ocation										
	N UNIVERSITY AVE/ CT	THMS EB				Latitude			Longitud	le	
	8 FT E					43.0753	05876		-89.451	006232	
_	F N MIDVALE BLVD	N.				X Coordin	nate		Y Coord	inate	
	N THE CITY OF MADISC N DANE COUNTY)N				300462.	300462.5 4772093		3		
	I DANE GOONTI					Structure	Туре		I		
						NO STR	RUCTURE				
)r	rash Scene										
Fir	rst Harmful Event					First Harr	mful Event Lo	ocation			
M	IOTOR VEH IN TRANSP	PORT				ON ROA	ADWAY				
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s)						Light Cor					
						DAYLIG					
						Roadway	Factor(s)				
DI	RY										
Er	nvironment Factor(s)					+					
	ONE									TION, WORK ZONE	
						(CONST	RUCTION	/MAINTENAI	NCE/UTI	LITY)	
W	eather Condition(s)										
CI	LEAR										
Ar	nimal Type					Relation	To Trafficway	y			
							CWAY - O				
Cr	rash Classification - Location	า				Crash Cla	assification -	Jurisdiction			
Ρl	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
Tr	ribal Land					Access Control Special Study			Special Study		
								NO CONTROL			
	/ithin Interchange Area	Junction Location			Intersection						
NO INTERSECTION			1	FOUR-WAY INTERSECTION							
	ork Zone Crash Location				Work Zone Crash Type WORK ON SHOULDER OR MEDIAN Law Enforcement Present						
	CTIVITY AREA										
	orkers Present			NO	ement Prese	Normal Posted Speed Limit					
	ork Zone Speed Limit		Advisory/Regulat	_	mit						
30	·		REGULATOR		y Speed Limit Normal Posted Speed Limit 35						
			JOLATOR	-							
	nit Summary nit Status			Vehicle Ope	erating $\Delta \in C$	lassification	n	Unit Type			
	TRANSIT			D CLASS	namy As C	Classification		AUTOMOBILE			
	IN TRANSIT Vehicle Type							Operating As Endorsements			
	SPORT) UTILITY VEHIC	LE									
_	otal Occs	Train/Bus # R	Recorded	Total # Citations Issued			Total Trail	lers Total HazMat Types		Mat Types	
1				0		0			0		
Ins	surance?	Direction Of T	ravel	Pre CrashTir		e Speed Lin		nit	Total Lan	es	
ΥI	ES	EASTBOU	ND	Mark		30		2			
М	ost Harmful Event: Collision	With		Special Fun			•	Emergency Motor Vehicle Use			
	IOTOR VEH IN TRANSP	PORT		NO SPEC	IAL FUNC	TION		NOT APPL			
	Traffic Way				rol			Traffic Control Inoperative/Missing			
	DIVIDED HWY MEDIAN W/BARRIER			TRAFFIC SIGNAL			NO				
CONCRETE			Road Curva			Road Grade					
			STRAIGH	I			LEVEL				
Tr N(ruck Bus or HazMat										
141											
	Vehicle License Plate Number			Plate Type			I St	Country of loc	uance		
	Licerise Plate Number				TOMOBIL	St Country of Issuance UNITED STATES					
	Vehicle Identification Nu	ımber		Make		-	Year Model				
5				TOYOTA			2014	RAV4			
							i	I			

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style		Bus Use					
		SIL - SILVER (ALUMINUM)	UT - SPORT UTILITY	VEHICI E							
	ш	Initial Contact Point		Vehicle Damage							
l <u>⊢</u> ∣	Ä	12 - FRONT			7 8 9 10 11						
UNIT	≌	-	01 - RIGHT FRONT (FRONT, 10 - LEFT S			6 2 12					
ן ⊃	VEHICL	Extent Of Damage FUNCTIONAL DAMAGE	CORNER, 12 - FROM		LEFFERUNT	5 4 3 2 1					
	>			,							
		Towed Due To Damage TOWED BUT NOT DUE TO I	DISABI ING DAMAG	Vehicle Removed By OPERATOR							
			JISADLING DAWAG								
		What Driver Was Doing		venicle Factors	Vehicle Factors						
		CHANGING LANES		NOT APPLICABLE							
		Driver Prior Action Other	INOT ALL LIGABLE								
		Driver Actions	Driver Actions								
		LOOKED BUT DID NOT SEE									
	VEHICLE	LOOKED BOT DID NOT SEE	-								
UNIT	<u>≌</u>										
5	픕										
	>										
				To							
		Owner Name		Owner Address							
01	7			MADISON, WI 53	705 . US						
_	_										
	;	Sequence Of Events									
	2	Event MOTOR VEH IN TRANSPOR	эт								
	0	MOTOR VEH IN TRANSPOR	<u> </u>								
	05	Event									
	0										
	03	Event									
	0										
	4	Event									
	04										
		Policy Holder									
UNIT		Insurance Company		INDIVIDUAL							
I		STATE-FARM-GENERAL-IN	s-co								
		Individual									
		DRIVER		Citations Issued	Sex						
		DRIVER	0	FEMALE							
	Ą			Date of Birth	Race						
.	DUAL		Date of Birtin	WHITE							
늘	=	Address	Driver License Number								
N O	INDIN	Address	Direct Electibe Nullipel								
	Z			STATE: WISCONS	IN COUNTRY: UN	IITED STATES					
		On Duty Cr	rash	Safety Equipment							
	Sat	fety Equipment	uon								
				SHOULDER & LAP BELT							
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	OHOOLDER & LAI	DELI						
		Helmet Use	07 - LL1 1	Helmet Compliance							
		Tiolinot Ooc		Tromist Compliance							
		Eye Protection		Tint Compliance							
				Till Compliance							
_	_	Injury Seve	rity	Airbag							
01	00	Injury NO APPA	NON DEPLOYED								
			ection Path			Trapped/Extricated					
		l '	OT EJECTED/NOT API	PLICABLE		NOT TRAPPED					
		Medical Transport		EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED		Livio Null #							
		MOT HUMBO CHIED									

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/29/2024

Crash Time 12:19 PM

		Hospital			Date of Death	Time of Dea	Time of Death				
		Distracted By NO	racted By Source T APPLICABL	E (NOT DISTRAC	CTED)						
		Distracted By Action NOT DISTRACTED									
	ļ	Non Motorist	king Unit #	Location							
		Prior Action									
		Action									
	JAL										
UNIT	INDIVIDUAL										
	INDI										
		Action Other							To/From School		
	L	Orug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	9		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN	Drug Test Typ			lts	<u>T</u> S				
01	001	Drug Type									
	•	Individual Condition									
		APPEARED NORMAL									
	Unit	t Summary ===									
		Status		Ve	ehicle Operating As Classit	fication	Unit Type				
		RANSIT			D CLASS			AUTOMOBILE			
		ele Type			OLAGO		Operating As Endorsements				
02		SENGER CAR				operag					
	Total	al Occs Train/Bus # Recorded			otal # Citations Issued	illers Total HazMat Types 0		/lat Types			
	Insur	ance?	Direction Of Tra	ivel	_ Pre CrashTire	Speed L	Speed Limit Total Lan		S		
⊢	YES	}	EASTBOUND) [Mark 30			2			
UNIT		Harmful Event: Collision W TOR VEH IN TRANSPO			pecial Function O SPECIAL FUNCTIO	Emergency Motor Vehicle Use NOT APPLICABLE					
		ic Way	101	Tr	affic Control	Traffic Control Inoperative/Missing					
		•	•			TRAFFIC SIGNAL			NO		
	Surface Type			Ro	oad Curvature	Road Grade					
		NCRETE		S	STRAIGHT			LEVEL			
	Truci NO	k Bus or HazMat									
	,	Vehicle									
		License Plate Number			Plate Type	St	Country of Issuance				
					AUT - AUTOMOBILE	T - AUTOMOBILE WI UNITED STATES		TATES			
02	02	Vehicle Identification Numb	oer •		lake OYOTA	Year 2015	Model PRIUS				
	5	Color			Body Style	2015	Bus Use				
				H - HATCHBACK 4 D	220 000						

WISCONSIN MOTOR VEHICLE CRASH REPORT

LINO	VEHICLE	Initial Contact Point 05 - RIGHT REAR CORNER Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage					
		Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG	Vehicle OPER	Removed By ATOR				
		What Driver Was Doing SLOW/STOPPING Driver Prior Action Other		Factors APPLICABLE				
TINO	VEHICLE	Driver Actions NO CONTRIBUTING ACTION						
02	02	Owner Name		vner Address ADISON, WI 5370	95 , US			
	;	Sequence Of Events						
	6	Event MOTOR VEH IN TRANSPORT						
	02	Event						
	03	Event						
	4	Event						
_		Policy Holder						
LNU		Insurance Company ALLSTATE-INS-CO	INDI	VIDUAL				
		Individual						
		DRIVER	Citat	ions Issued	Sex			
	_		0		FEMALE			
-	DIVIDUAL		Date	of Birth	Race WHITE			
L	≥	Address	Drive	er License Number				
	Ĭ		STA	TE: WISCONSIN	COUNTRY: UNIT	ED STATES		
	Sat	On Duty Crash fety Equipment	Safety Equipment					
	Sai		- SHC	OULDER & LAP E	DEI T			
		Row Seat Position 07 - LEFT			DELI			
		Helmet Use		Helmet Compliance				
		Eye Protection	Tint Compliance					
02	002	Injury Severity NO APPARENT INJURY	Airba NON	ng N DEPLOYED				
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT A	· ·	Trapped/l				
		Medical Transport		Agency Identifier		NOT TRAPPED EMS Run #		
		NOT TRANSPORTED		2.70 / igono, identified				
		Hospital	Date	Date of Death		Time of Death		

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/29/2024

Crash Time 12:19 PM

		District of D	Distracted By Source)						
		Distracted By	NOT APPLICABL	E (NOT DISTRA	CTED)					
		Distracted By Action NOT DISTRACTED)							
		Non Motorist	Striking Unit #	Location						
		Prior Action		!						
İ		Action								
	JAL									
LNO	INDIVIDUAL									
	<u>N</u>									
		Action Other						To/From School		
ŀ		Drug ⁹ Alcohol	Suspected Alcohol U	lse	Suspected Drug Use					
	-	Drug & Alcohol	NO	TAL	NO		I			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
05	005	Drug Type								
		Individual Condition								
		APPEARED NORM	MAL							
	Wit	ness								
					Address			Date of Birth		
10					, ,					
WITN					•					
5										