

5QL30K8HJP  
24-188458

# 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		Investigating Officer/Deputy <b>SERGEANT N. DODSWORTH</b>	
Crash Date <b>05/06/2024</b>		Crash Time <b>06:10 PM</b>		Date Arrived <b>05/07/2024</b>		Time Arrived <b>06:15 PM</b>	
Date Notified <b>05/06/2024</b>		Time Notified <b>06:11 PM</b>		Total Units <b>02</b>		Total Injured <b>00</b>	Total Killed <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 type="checkbox"/> Active School Zone		School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

## Description

Diagram		Reconstruction By
		Photos By <b>DODSWORTH</b>
		Additional Information <b>PHOTOS</b>

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

ON THE ABOVE DATE AND TIME I WAS DISPATCHED TO A TWO VEHICLE ACCIDENT THAT OCCURRED IN THE PARKING LOT OF 4000 UNIVERSITY AVE. BOTH VEHICLES REPORTED NO INJURIES. BOTH VEHICLES DRIVERS STATED THAT THEY WERE BACKING FROM THEIR PARKING STALL AND STRUCK EACH OTHER CAUSING MINOR DAMAGE. THE DRIVERS EXCHANGED INSURANCE INFO AND WERE GIVE THE POLICE NUMBER FOR THIS REPORT. NFA.

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Location

PARKING LOT UNIVERSITY AVE/ CTHMS WB LOT IN THE VILLAGE OF SHOREWOOD HILLS IN DANE COUNTY	Latitude <b>43.075787868</b>	Longitude <b>-89.454236564</b>
	X Coordinate <b>300201.0625</b>	Y Coordinate <b>4772154.5</b>
	Structure Type <b>NO STRUCTURE</b>	

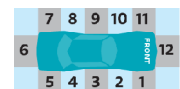
Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>04 - REAR TO REAR</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>NON TRAFFICWAY - PARKING LOT</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>N/A</b>	Total Lanes <b>0</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

UNIT 01 VEHICLE	<b>Vehicle</b>			
	License Plate Number [REDACTED]	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number [REDACTED]	Make <b>FORD</b>	Year <b>2013</b>	Model <b>ESCAPE</b>
	Color <b>BLU - BLUE</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
	Initial Contact Point <b>07 - LEFT REAR CORNER</b>	Vehicle Damage <b>07 - LEFT REAR CORNER</b>		
Extent Of Damage <b>MINOR DAMAGE</b>				



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>			
	What Driver Was Doing <b>BACKING</b>		Vehicle Factors			
	Driver Prior Action Other		<b>NOT APPLICABLE</b>			
	Driver Actions <b>NO CONTRIBUTING ACTION</b>					
01 01	Owner Name [REDACTED]		Owner Address [REDACTED]			
	<b>Sequence Of Events</b>					
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>					
	Event					
	Event					
	Event					
UNIT	<b>Policy Holder</b>					
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>		INDIVIDUAL [REDACTED]			
UNIT INDIVIDUAL	<b>Individual</b>					
	DRIVER [REDACTED]		Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
	Date of Birth [REDACTED]		Race <b>BLACK/AFRICAN AMERICAN</b>			
Address [REDACTED]		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>				
01 001	<b>Safety Equipment</b>		On Duty Crash		Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>			
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>		
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <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						

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

**Unit Summary**

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

UNIT           02 02	<b>Vehicle</b>					
	License Plate Number [REDACTED]		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number [REDACTED]		Make <b>CHEVROLET</b>	Year <b>2022</b>	Model <b>BOLT EUV</b>	
	Color <b>LBL - BLUE, LIGHT</b>		Body Style <b>HB - HATCHBACK</b>		Bus Use	
	Initial Contact Point <b>07 - LEFT REAR CORNER</b>		Vehicle Damage <b>06 - REAR, 07 - LEFT REAR CORNER</b>			
	Extent Of Damage <b>MINOR DAMAGE</b>		Towed Due To Damage <b>NOT TOWED</b>			
Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>				

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UNIT VEHICLE	What Driver Was Doing <b>BACKING</b>	Vehicle Factors		
	Driver Prior Action Other	<b>NOT APPLICABLE</b>		
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name [REDACTED]	Owner Address [REDACTED]		
UNIT INDIVIDUAL	<b>Sequence Of Events</b>			
	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
	<b>Policy Holder</b>			
	Insurance Company <b>USAA-CASUALTY-INS-CO</b>		INDIVIDUAL [REDACTED]	
	<b>Individual</b>			
	DRIVER [REDACTED]		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address [REDACTED]		Date of Birth [REDACTED]	Race <b>ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN</b>
Driver License Number [REDACTED]		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash	Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
	Distracted By Action <b>NOT DISTRACTED</b>			
<b>Non Motorist</b>		Striking Unit #	Location	

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UNIT INDIVIDUAL	Prior Action		
	Action		
	Action Other		To/From School
02 002	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition <b>APPEARED NORMAL</b>		
UNIT INDIVIDUAL	<b>Individual</b>		
	PASSENGER [REDACTED]	Citations Issued <b>0</b>	Sex <b>MALE</b>
	[REDACTED]	Date of Birth [REDACTED]	Race <b>WHITE</b>
	Address [REDACTED]	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
02 003	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <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	
Prior Action			

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UNIT	INDIVIDUAL	Action			
		Action Other		To/From School	
02	003	<b>Drug &amp; Alcohol</b>			
		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
		Drug Type			
Individual Condition <b>APPEARED NORMAL</b>					
UNIT	INDIVIDUAL	<b>Individual</b>			
		PASSENGER [REDACTED]	Citations Issued <b>0</b>	Sex	
			Date of Birth [REDACTED]	Race	
		Address [REDACTED]		Driver License Number	
		<b>Safety Equipment</b>			
02	004	On Duty Crash		Safety Equipment	
		Row <b>02 - SECOND ROW</b>	Seat Position <b>07 - LEFT</b>	<b>CHILD RESTRAINT SYSTEM - FORWARD FACING</b>	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		<b>Injury</b>			
Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>			
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>		
Medical Transport <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			
Prior Action					

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UNIT	INDIVIDUAL	Action			
		Action Other		To/From School	
02	004	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
		Drug Type			
		Individual Condition <b>APPEARED NORMAL</b>			
UNIT	INDIVIDUAL	<b>Individual</b>			
		PASSENGER [REDACTED]	Citations Issued <b>0</b>	Sex	
		[REDACTED]	Date of Birth [REDACTED]	Race	
		Address [REDACTED]	Driver License Number		
		<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
02	005	Row <b>02 - SECOND ROW</b>	Seat Position <b>09 - RIGHT</b>	Helmet Compliance	
		Helmet Use	Tint Compliance		
		Eye Protection	Airbag <b>NON DEPLOYED</b>		
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	EMS Agency Identifier	
Medical Transport <b>NOT TRANSPORTED</b>	Hospital	EMS Run #	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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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action					
		Action Other			To/From School		
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>		
			Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type		Drug Test Results		
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					
		<b>02</b>	<b>005</b>				