WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash D	ocument #	Agency	Crash Number	Investigating Officer/Deputy LIEUTENANT J. WEITZEL				
Crash Date 01/29/2024	Crash Time		Date Ar		Time Arrived 12:15 PM				
Date Notified 01/29/2024	Time Notified 12:11 PM		Total Ui		Total Injured Total Kille		ed		
On Emergency	Hit and Run	✓ Lane Clos	sure	₩ Work Zone	Trailer or	Towed	Reporting Threshold		
Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags				
✓ Reportable	Crash Type DT4000 (STA	NDARD CRASI	H)		Amended		Secondary Crash		
Description Diagram					1-	construction	_		
West bou	u#2 u#2 u#1 u#2 uma uma uma uma uma uma uma um				Ad	otos By WEITZEL	rmation		

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location										
ON UNIVERSITY AVE 200 FT W						Latitude			Longitud	e
OF MARSHALL CT IN THE VILLAGE OF SHOREWOOD HILLS IN DANE COUNTY						X Coordin	ate		Y Coord	inate
						Structure NO STR	Type UCTURE		1	
Crash Scene										
First Harmful Event						First Harm	ıful Event Lo	ocation		
MOTOR VEH IN TRANSPO	RT					ON ROA	DWAY			
Manner of Collision						Light Cond	dition			
03 - FRONT TO REAR						DAYLIG				
Road Surface Condition(s)						Roadway	Factor(s)			
DRY										
Environment Factor(s)										
NONE						NONE				
Weather Condition(s)										
CLEAR										
Animal Type							o Trafficway			
							WAY - O			
Crash Classification - Location PUBLIC PROPERTY							ssification -			
Tribal Land						NO SPECIAL JURISDICTION Access Control			Special Study	
						NO CONTROL				
3	Junction Location				Intersection		071011			
NO Closure Type	NON-JUNCTI	ON		D	NOT AN		CHON			
LANE CLOSURE				Reaso	ns for Closu	uie				
Date Initial Lane/Rd Closed 01/29/2024	Time Initial	Lane/Rd Closed	LAW ENFORCEN			EMENT				
Date All Lanes Open	Time All La		Date Scene Cleared			ed	Tin	ne Scene Clear	ed	
01/29/2024	12:40 PM		01/29/2024				12	:40 PM		
Work Zone Crash Location	<u>l</u>		Work Zone Crash Type							
ADVANCE WARNING ARE	Α		LANE SHIFT/CROSS			SOVER				
Workers Present NO			Law E	Enforce	ment Preser	sent				
Work Zone Speed Limit		Advisory/Regulat	tory Speed Limit			Normal Posted Speed Limit				
30		ADVISORY				35				
Unit Summary -						•				
Unit Status			Vehic	le Ope	rating As Cla	assification		Unit Type		
IN TRANSIT			D CL	ASS				AUTOMOE		
Vehicle Type								Operating As	Endorsen	nents
PASSENGER CAR	Train/Bus # R	agardad	I T -4 -1	# 0:1-1	ions Issued		Total Trail	oro	Total Haz	Mat Types
Total Occs 2	Halli/Dus # IN	ecorded	0	# Citat	ions issued		0	CIS	0	wat Types
Insurance? Direction Of Travel				Dro (CrashTire		Speed Lin	nit	Total Lane	es
YES WESTBOUND					Mark		30		2	
Most Harmful Event: Collision W	ith			ial Fund				Emergency I	Notor Vehi	cle Use
MOTOR VEH IN TRANSPO	RT		NO S	SPEC	IAL FUNC	TION		NOT APPL		
Traffic Way DIVIDED HWY MEDIAN W/	BARRIER			c Contr	ol SIGNAL			Traffic Contr	ol Inoperat	ive/Missing
Surface Type				Curvat				Road Grade		
BLACKTOP (BITUMINOUS) STRAI										

Form DT4000

Wisconsin Motor Vehicle Crash

6

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Truc	k Bus or HazMat							
		Vehicle							
		License Plate Number	Plate Type	St	Country of Issuance				
		Vehicle Identification Number	AUT - AUTOMOBILE Make	WI Year	Model				
2	2	venicle identification Number	HONDA	2012	ODYSSEY				
l		Color	Body Style	2012	Bus Use				
		WHI - WHITE	MV - MINI VAN						
	щ	Initial Contact Point	Vehicle Damage			7 0 0 10 11			
LNO	VEHICLE	11 - LEFT FRONT CORNER	01 - RIGHT FRONT CO	ORNER 10 - I I	FET SIDE FRONT	7 8 9 10 11 6 3 12			
5	표	Extent Of Damage	O1 - RIGHT FRONT CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT						
	>	FUNCTIONAL DAMAGE Towed Due To Damage	Vahiala Damayad Dy						
		TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By SCHMIDTS TOWING						
		What Driver Was Doing	Vehicle Factors						
		GOING STRAIGHT							
		Driver Prior Action Other	NOT APPLICABLE						
		Driver Actions	•						
ᆫ	VEHICLE	FOLLOWING TOO CLOSE							
L N	≌								
⊃	卣								
	>								
		Owner Name	Owner Address						
_	7								
2	0								
		Sequence Of Events Event							
	2	MOTOR VEH IN TRANSPORT							
	•	Event							
	02								
	03	Event							
	0								
	9	Event							
I≡		Policy Holder							
		Insurance Company USAA-CASUALTY-INS-CO	INDIVIDUAL						
		Individual DRIVER	Citations Issued	Cav					
		DRIVER	Citations Issued 0	Sex MALE					
	¥		Date of Birth	Race					
 	INDIVIDUAL			WHITE					
FIN	Σ	Addrace	Driver License Number	Driver License Number					
_			STATE: WISCONSIN	COUNTRY: U	NITED STATES				
	_								
		On Duty Crash	Safety Equipment						
	Sa	fety Equipment	Jaiety Equipment						
		Row Seat Position	SHOULDER & LAP I	BELT					
		01 - FRONT ROW 07 - LEFT							
		Helmet Use	Helmet Compliance						
1									

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Eye Protection				Tint Compliance						
7	5		Injury Seve	rity		Airbag						
0	00		NO APPA			NON DEPLOYED						
		Ejected		ection Pat		ICADI E		Trapped/Extricated				
		NOT EJECTED Medical Transport	N	OI EJEC	CTED/NOT APPL	EMS Agency Identifie	r	NOT TRAPPED EMS Run #				
		NOT TRANSPORT	ED			Livio Agency identine	•	LIVIO I CUIT #				
		Hospital				Date of Death		Time of Death				
			B:									
		Distracted By	Distracted E	LICABL	E (NOT DISTRAC	CTED)						
		Distracted By Action NOT DISTRACTED)									
		Non Motorist	Striking Uni	it#	Location							
		Prior Action										
		Action										
	¥											
LNO	INDIVIDUAL											
5	<u> </u>											
	Z											
		Action Other							To/From School			
			Suspected .	Alcohol U	se	Suspected Drug Use						
		Drug & Alcohol	NO			NO						
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results				
		Drug Test Given			Drug Test Type		Drug Test Results					
		TEŠT NOT GIVEN					_					
7	001	Drug Type			•		-					
	0											
		Individual Condition										
		APPEARED NORM	IAL									
		Individual				Citations Issued	LCav					
						0	Sex FEMALE					
	¥					Date of Birth	Race	Race				
╘	INDIMIDUAL						WHITE					
LNO	E	Address				Driver License Number	er					
	Z											
	Sat	fety Equipment	On Duty Cr	ash		Safety Equipment						
		Row		Seat Pos	sition	CHILD RESTRAIN	T SYSTEM - FORV	ARD FACING				
		02 - SECOND ROV	v	09 - RI			, , , , , , , , , , , , , , , , , , ,					
		Helmet Use				Helmet Compliance						
		Eye Protection				Tint Compliance						

WISCONSIN MOTOR VEHICLE CRASH REPORT

					LAisbox					
2	002	<i>Injury</i> NO	y Severity APPARENT II	NJURY	Airbag NON DEPLOYED					
		Ejected	Ejection Pa				Trapped/Ex	tricated		
		NOT EJECTED	NOT EJE	CTED/NOT APPI	LICABLE		NOT TRA	NOT TRAPPED		
		Medical Transport	<u> </u>		EMS Agency Identifier		EMS Run #	·		
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of De	ath		
		Distr	acted By Source	:						
		Distracted By								
Distracted By Action										
Non Motorist Location										
		Prior Action								
		T Hol Aloudii								
		Action								
	ب									
_	INDIVIDUAL									
L N	=									
_	5									
	=									
								t		
		Action Other							To/From School	
		Sus	pected Alcohol U	se	Suspected Drug Use					
	L	Drug & Alcohol No			NO					
		Alcohol Test Given		Alcohol Test Type)		Alcohol Tes	st Results		
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results				
		TEŠT NOT GIVEN				J				
2	002	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
l	Uni	t Summary								
		Status		V	ehicle Operating As Classif	ication	Unit Type			
		RANSIT		D	CLASS	AUTOMOBILE				
05		cle Type SSENGER CAR					Operating A	As Endorsem	ents	
		l Occs	Train/Bus # Re	corded	otal # Citations Issued	Total Tra	ilers	Total HazN	Mat Types	
	2			0		0		0		
	Insu	rance?	Direction Of Tra		Pre CrashTire Mark	Speed Li 30	mit	Total Lane	s	
LNO		t Harmful Event: Collision Wi			pecial Function	30	Emergency	Motor Vehic	le Use	
>	MO	TOR VEH IN TRANSPO			O SPECIAL FUNCTIO	N	NOT APP			
		fic Way	DADDIED		raffic Control			trol Inoperativ	/e/Missing	
		IDED HWY W/TRAFFIC ace Type	DARKIEK		RAFFIC SIGNAL Road Curvature			NO Road Grade		
	BLA	ACKTOP (BITUMINOUS))		STRAIGHT		UPHILL			
	Truc NO	k Bus or HazMat								
		Vehicle								
		VEITICIE								

WISCONSIN MOTOR VEHICLE CRASH REPORT

		License Plate Number			Plate Type	St	Country of Issuance			
					AUT - AUTOMOBILE	WI	UNITED STATES			
02	05	Vehicle Identification Nur	mber		Make	Year	Model			
0	0	Calan			TOYOTA	2016	SIENNA			
		Color MAR - MAROON (BL	IRGUND	V)	Body Style MV - MINI VAN		Bus Use			
	ш	Initial Contact Point	SICOUILD	1)	Vehicle Damage					
╘	VEHICLE	05 - RIGHT REAR CO	ORNER		_			7 8 9 10 11		
UNIT	Ĭ	Extent Of Damage			04 - RIGHT SIDE REA	AR, 05 - RIGHT	REAR CORNER,	6 g 12		
	7	MINOR DAMAGE			OU REAR			5 4 3 2 1		
		Towed Due To Damage			Vehicle Removed By					
		NOT TOWED			OPERATOR					
		What Driver Was Doing GOING STRAIGHT			Vehicle Factors					
		Driver Prior Action Other	r		NOT APPLICABLE					
		Briver i noi Action Care								
		Driver Actions								
	щ	NO CONTRIBUTING	ACTION							
UNIT	걸									
5	VEHICLE									
	>									
		Owner Name			Owner Address					
	~ !	owner rame			o mier y tuar ees					
02	05									
	;	Sequence Of Eve	ents							
	5	Event MOTOR VEH IN TRA	ANSPOR	г						
		Event		-						
	02									
	03	Event								
	40	Event								
		Policy Holder								
UNIT		Insurance Company			INDIVIDUAL					
-		TRAVELERS-CASUA	ALTY-&-	SURETY-CO						
	1	Individual								
		DRIVER			Citations Issued	Sex				
	Ļ				0	MALE				
	INDIMIDUAL				Date of Birth	Race WHITE				
UNIT	=	Address			Driver License Number	1				
5	₫									
	=				STATE: WISCONSII	N COUNTRY: U	JNITED STATES			
	Sat	ety Equipment	n Duty Cra	sh	Safety Equipment					
		Row	-	Seat Position	SHOULDER & LAP	BFLT				
		01 - FRONT ROW		07 - LEFT	0.10025211 0.271					
		Helmet Use	i		Helmet Compliance					
		Eye Protection			Tint Compliance					
02	33		ijury Sever	•	Airbag					
0	003	Injury _N	IO APPA	RENT INJURY	NON DEPLOYED					

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Ejected		Ejection Pat				Trapped/Extricated		
		NOT EJECTED		NOT EJE	CTED/NOT APPL	ICABLE		NOT TRAPPED		
		Medical Transport				EMS Agency Identifier		EMS Run #	EMS Run #	
		NOT TRANSPORTE	RTED							
		Hospital				Date of Death		Time of Death		
		Distracted By	Distracte	ed By Source	F (NOT DISTRAC	CTED)				
		Distracted By Action		1 LIOADL	L (NOT DIOTION	3123)				
		NOT DISTRACTED	Striking	Unit #	Location					
	ı	Non Motorist Prior Action								
		PHOI Action								
		Action								
	JAL									
LNO	/IDL									
-	INDIVIDUAL									
	=									
		Action Other							To/From School	
		1.0	Suspecti	ed Alcohol U	se	Suspected Drug Use				
	L	Drug & Alcohol	NO			NO				
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results	Icohol Test Results	
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
05	003	Drug Type			1					
		Individual Condition								
		APPEARED NORM	AL							
		la de da la la								
		Individual PASSENGER				Citations Issued	Leov			
	_	PASSENGER				0	Sex FEMALE			
⊢	INDIVIDUA					Date of Birth	Race BLACK/AFRICAN AMERICAN			
LNO	DIV	Address				Driver License Number				
	Z									
		10	On Duty	Crash		Safety Equipment				
	Saf	fety Equipment	,			Galety Equipment				
		Row 02 - SECOND ROW	,	Seat Pos 09 - RI		SHOULDER & LAP	BELT			
		Helmet Use		1		Helmet Compliance				
		Eye Protection				Tint Compliance				
7	4		njury Se	verity		Airbag				
02	90		NO AP	PARENT IN	JURY	NON DEPLOYED		Transad/Fyt-it		
Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT AP						Trapped/Extricated NOT TRAPPED				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/29/2024

Crash Time 12:11 PM

l		Medical Transport			EMS Agency Identifier		EMS Run #	
		NOT TRANSPORTED)					
		Hospital			Date of Death	Time of Death		
		Distracted By Di	stracted By Source					
		Distracted By Action						
		Non Motorist	riking Unit #	Location				
		Prior Action						
		Action						
	INDIVIDUAL							
UNIT	7							
5	≥							
	9							
	=							
		Action Other						To/From School
	,	Drug & Alcohol No	uspected Alcohol Us	se	Suspected Drug Use NO			
		Alcohol Test Given		A	110		AL	
		TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given		Drug Test Type		Drug Test Results		
		TEST NOT GIVEN		Diag root type		Drug Test Nesulis		
2	4	Drug Type						
02	004							
		Individual Condition						
		APPEARED NORMA	ı					
		AFFEARED NORWA	L					
ı								