## WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash Document #	# Agency (	Crash Number	Investigating C		EL
Crash Date 02/09/2024	Crash Time 08:40 AM	Date Arri <b>02/09/2</b>		Time Arrived 08:43 AM		
Date Notified <b>02/09/2024</b>	Time Notified 08:40 AM	Total Un <b>03</b>	its	Total Injured <b>01</b>	Total Kille	d
02/09/2024  Date Notified 02/09/2024  On Emergency Hit  Government Property	and Run Lan	e Closure	Work Zone	Trailer o	r Towed	Reporting Threshold
Government Property	Active School Zor	School E NO	Bus Related	Tags		
Reportable	Crash Type DT4000 (STANDARD 0	CRASH)		Amende	d	Secondary Crash
Description				· · · · · · · · · · · · · · · · · · ·		
Diagram			<b>(</b>		Reconstruction Photos By	ьу
		1	_	i	T WEITZEL	
02 0			=	í	Additional Infor	mation TOS
			_			
I, a sworn law enforceme	nt officer, agree that I h	nave not added	any CJIS data in t	his report.		
U#2 WAS STOPPED AT THE RED L BEHIND BY U#1. U#1 THEN BACKE PREGNANT AND WANTED TO BE ( VIA PHONE.U#1 STATED SHE WAS HAPPENED, SHE BACKED UP AND COULDN'T BACK UP IN TIME. #1 H. DAMAGE CONSISTING OF DAMAG BUMPER. U#1 ISSUED CITATIONS	D UP AFTER STRIKING U#2 CHECKED OUT BY A DOCTO APPROACHING U#2 WHICH DID NOT SEE U#3 AND HIT AD DAMAGE TO THE FRONT E TO THE LEFT FRONT FEN	PAND THEN STRU DR. U#1 AND #3 CO H WAS STOPPED A THIS VEHICLE. U TAND REAR BUMF IDER, CONSISTING	CK #3. U#2 LEFT PRIC DMPLAINED OF NO IN AT THE LIGHT AND TA #3 STATED HE WAS S PER CONSISTING OF	OR TO MY ARRIVAL A JURIES. U#2 HAD NO APPED HER REAR BI STOPPED BEHIND U# MINOR PAINT SCRA	AS THE DRIVE D DAMAGE, PE JMPER, ONCE 11 AND SAW H FCHES/SCUFF	R WAS 36 WEEKS ER CONVO WITH DRIVER S SHE REALIZED WHAT ER REVERSE, BUT S. U#3 HAD MINOR

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/09/2024

Crash Time 08:40 AM

	Location									
	INTERSECTION					Latitude			Longitu	de
	ON ROSE PLACE									
	AT UNIVERSITY AND IN THE VILLAGE OF			X Coordin	ate		Y Coord	dinate		
	IN DANE COUNTY									
					Structure 1	Туре				
	Crash Scene					ı				
	First Harmful Event					First Harm	nful Event L	ocation		
	MOTOR VEH IN TE	RANSP	ORT			ON ROA	DWAY			
	Manner of Collision					Light Cond				
	03 - FRONT TO RE					DAYLIG				
	Road Surface Condition	on(s)				Roadway	Factor(s)			
	DRY									
	Environment Factor(s)	)				1				
	NONE					NONE				
	Weather Condition(s)					1				
	CLOUDY									
	Animal Type						o Trafficwa	•		
	Crash Classification - I	Location					CWAY - C	Jurisdiction		
	PUBLIC PROPERT									
	Tribal Land					NO SPECIAL JURISDICTION  Access Control			Special Study	
							NO CONTROL			
	Within Interchange Are	ea	Junction Location INTERSECTION		Intersection		PECTIO	NI .		
	NO		INTERSECTION		FOUR-W	/AY INTER	<b>49EC110</b>	IN		
		,	INTERSECTION		FOUR-W	AY INTER	KSEC 110	IN .		
	NO Unit Summary Unit Status	/	INTERGEOTION	Vehicle Ope	erating As C			Unit Type		
	Unit Summary Unit Status IN TRANSIT	/	INTERGEGION	Vehicle Ope	erating As C			Unit Type AUTOMO		
	Unit Summary Unit Status IN TRANSIT Vehicle Type		INTERGEGRION		erating As C			Unit Type		ments
01	Unit Summary Unit Status IN TRANSIT Vehicle Type PASSENGER CAR			D CLASS	erating As C	lassification		Unit Type AUTOMO Operating A	s Endorse	
	Unit Summary Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs		Train/Bus # Recorded	D CLASS  Total # Cita	erating As C	lassification	Total Tra	Unit Type AUTOMO Operating A	s Endorse	ments zMat Types
	Unit Summary Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 1			D CLASS  Total # Cital 2	erating As C	lassification	Total Tra	Unit Type AUTOMO Operating A	s Endorse	zMat Types
01	Unit Summary Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs		Train/Bus # Recorded	D CLASS  Total # Cital 2	erating As C	lassification	Total Tra	Unit Type AUTOMO Operating A	s Endorse Total Haz	zMat Types
01	Unit Summary Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 1 Insurance?	t	Train/Bus # Recorded  Direction Of Travel  SOUTHBOUND	Total # Citar 2 Pre Special Fun	erating As C  tions Issued  CrashTire Mark	lassification	Total Tra  0 Speed Lii	Unit Type AUTOMO Operating A illers mit Emergency	Total Ha:  0 Total Lar 2 Motor Veh	zMat Types nes nicle Use
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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage		Vehicle Removed By						
		NOT TOWED		OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT		NOT APPLICABLE						
		Driver Prior Action Other		NOT APPLICABLE						
		Daire A Africa								
		Driver Actions FOLLOWING TOO CLOS	E LINSAFE BACKING							
_	Ë	022011110 100 0200	L, ONOAL L BAOMING							
LNO	2									
_	VEHICLE									
	>									
		Owner Name		Owner Address						
		owner warne		o www. y tual oos						
6	01									
	Š	Sequence Of Events								
		Event								
	01	MOTOR VEH IN TRANSP	ORT							
	02	Event								
	3	Event								
	03									
	04	Event								
╘	I	Policy Holder								
LIND		Insurance Company		INDIVIDUAL						
_										
_		GEICO-GENERAL-INS-CO	<b>)</b>							
<b>-</b>	İ	GEICO-GENERAL-INS-CO	<b>)</b>							
<b>&gt;</b>			0	Citations Issued	Sex					
<b>D</b>		Individual	0	Citations Issued 2	FEMALE					
<b>D</b>		Individual	0		<b>FEMALE</b> Race					
		<b>ndividual</b> DRIVER	0	2 Date of Birth	Race WHITE					
UNIT		Individual		2	Race WHITE					
		<b>ndividual</b> DRIVER		2 Date of Birth	FEMALE Race WHITE	ITED STATES				
		<b>ndividual</b> DRIVER		Date of Birth Driver License Number	FEMALE Race WHITE	ITED STATES				
	INDIVIDUAL	Address On Duty		Date of Birth  Driver License Number  STATE: WISCONS	FEMALE Race WHITE	ITED STATES				
	INDIVIDUAL	<b>ndividual</b> DRIVER		Date of Birth Driver License Number	FEMALE Race WHITE	ITED STATES				
	INDIVIDUAL	Address On Duty		Date of Birth  Driver License Number  STATE: WISCONS	FEMALE Race WHITE  T IN COUNTRY: UN	ITED STATES				
	INDIVIDUAL	Address  On Duty	/ Crash	Date of Birth Driver License Number STATE: WISCONS	FEMALE Race WHITE  T IN COUNTRY: UN	ITED STATES				
	INDIVIDUAL	Address  On Duty  Row	/ Crash	Date of Birth Driver License Number STATE: WISCONS	FEMALE Race WHITE  T IN COUNTRY: UN	ITED STATES				
	INDIVIDUAL	Address  Fety Equipment  Row 01 - FRONT ROW  Helmet Use	/ Crash	Date of Birth  Driver License Number  STATE: WISCONS  Safety Equipment  SHOULDER & LAF  Helmet Compliance	FEMALE Race WHITE  T IN COUNTRY: UN	ITED STATES				
	INDIVIDUAL	Address  Fety Equipment  Row 01 - FRONT ROW	/ Crash	Date of Birth  Driver License Number  STATE: WISCONS  Safety Equipment  SHOULDER & LAF	FEMALE Race WHITE  T IN COUNTRY: UN	ITED STATES				
TINO	INDIVIDUAL	Address  Address  On Duty  Row 01 - FRONT ROW  Helmet Use  Eye Protection	Crash  Seat Position  07 - LEFT	Date of Birth  Driver License Number  STATE: WISCONS  Safety Equipment  SHOULDER & LAF  Helmet Compliance	FEMALE Race WHITE  T IN COUNTRY: UN	ITED STATES				
	INDIVIDUAL	Address  Address  On Duty  Row 01 - FRONT ROW  Helmet Use  Eye Protection	Crash  Seat Position  07 - LEFT	Date of Birth Driver License Number STATE: WISCONS  Safety Equipment SHOULDER & LAF  Helmet Compliance  Tint Compliance	FEMALE Race WHITE  T IN COUNTRY: UN	ITED STATES				
TINO	INDIVIDUAL	Address  Address  On Duty  Row 01 - FRONT ROW  Helmet Use  Eye Protection	/ Crash Seat Position 07 - LEFT	Date of Birth Driver License Number STATE: WISCONS  Safety Equipment SHOULDER & LAF  Helmet Compliance  Tint Compliance	FEMALE Race WHITE  T IN COUNTRY: UN	ITED STATES  Trapped/Extricated				
TINO	INDIVIDUAL	Address  Address  On Duty  Fety Equipment  Row 01 - FRONT ROW  Helmet Use  Eye Protection  Injury NO AP  Ejected NOT EJECTED	Crash  Seat Position 07 - LEFT  everity PARENT INJURY	2 Date of Birth Driver License Number STATE: WISCONS Safety Equipment SHOULDER & LAF Helmet Compliance Tint Compliance Airbag NON DEPLOYED	FEMALE Race WHITE  T IN COUNTRY: UN					
TINO	INDIVIDUAL	Address  Address  On Duty  Fety Equipment  Row 01 - FRONT ROW  Helmet Use  Eye Protection  Injury Se NO AP  Ejected NOT EJECTED  Medical Transport	Seat Position 07 - LEFT  everity PARENT INJURY Ejection Path	2 Date of Birth Driver License Number STATE: WISCONS Safety Equipment SHOULDER & LAF Helmet Compliance Tint Compliance Airbag NON DEPLOYED	FEMALE Race WHITE  IN COUNTRY: UN	Trapped/Extricated				
TINO	INDIVIDUAL	Address  Address  Fety Equipment  Row 01 - FRONT ROW  Helmet Use  Eye Protection  Injury  NO AP  Ejected  NOT EJECTED  Medical Transport  NOT TRANSPORTED	Seat Position 07 - LEFT  everity PARENT INJURY Ejection Path	2 Date of Birth Driver License Number STATE: WISCONS  Safety Equipment SHOULDER & LAF  Helmet Compliance Tint Compliance Airbag NON DEPLOYED  PLICABLE EMS Agency Identifier	FEMALE Race WHITE  IN COUNTRY: UN	Trapped/Extricated NOT TRAPPED EMS Run #				
TINO	INDIVIDUAL	Address  Address  On Duty  Fety Equipment  Row 01 - FRONT ROW  Helmet Use  Eye Protection  Injury Se NO AP  Ejected NOT EJECTED  Medical Transport	Seat Position 07 - LEFT  everity PARENT INJURY Ejection Path	2 Date of Birth Driver License Number STATE: WISCONS  Safety Equipment  SHOULDER & LAF  Helmet Compliance  Tint Compliance  Airbag NON DEPLOYED	FEMALE Race WHITE  IN COUNTRY: UN	Trapped/Extricated NOT TRAPPED				
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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist	Striking Unit #	Location							
		Prior Action									
		Action									
	_										
	UA										
L NO	/ID										
<b>-</b>	INDIVIDUAL										
	Z										
		Action Other									To/From School
			Suspected Alco	hal I laa		Cuspested Days Hee					
	L	Orug & Alcohol	NO	noi Use		Suspected Drug Use NO					
		Alcohol Test Given		Alcohol Test T	уре				Alcohol Test	Results	
		<b>TEST NOT GIVEN</b>									
		Drug Test Given TEST NOT GIVEN		Drug Test Typ	е		Drug 1	Test Results			
	1	Drug Type									
2	001	0 71									
		Individual Condition									
		APPEARED NORM	//AL								
	ţ	<b>Violations</b>									
	01	UTC Number	Issue To?	Statute Number <b>343.44(1)(B)</b>		Description OPERATING WHILE	RFVC	KED (FO	RFFITURF)		
	0	BK9105445 UTC Number	Issue To?	Statute Number		Description		(, 0,			
	02	BK9105456	001	346.14(1M)		AUTOMOBILE FOLL	OWIN	G TOO CI	OSELY		
Į		Summary •									
		Status				ehicle Operating As Classi CLASS	fication		Unit Type  AUTOMOE	DII =	
		RANSIT cle Type			טן	CLASS			Operating As		ents
02		SENGER CAR									
		Occs	Train/Bus	# Recorded		otal # Citations Issued		Total Traile	ers	Total HazN	Mat Types
	1 Incur	ance?	Direction (	of Travel	0	IT		O Speed Lim	it	Total Lane	s
_	YES		SOUTHE			Pre CrashTire Mark		20		2	9
UNIT		Harmful Event: Collision				pecial Function			Emergency I		le Use
		TOR VEH IN TRANS	SPORT			O SPECIAL FUNCTIO	N		NOT APPLICABLE  Traffic Control Inoperative/Missing		
		D-WAY, DIVIDED, U	NPROTECTE	) (PAINTED > 4		affic Control  RAFFIC SIGNAL			NO	oi inoperativ	ve/iviissii ig
		асе Туре		•		oad Curvature			Road Grade		
		CKTOP (BITUMING	OUS)		S	TRAIGHT			LEVEL		
	Trucl	k Bus or HazMat									
		Vehicle									
		License Plate Number	r		ΙP	Plate Type		St	Country of Iss	suance	
						AUT - AUTOMOBILE		WI	UNITED ST	ATES	
07	02	Vehicle Identification N	Number			Make		Year	Model		
	٦	Color				IYUNDAI Body Style		2017	SANTA FE Bus Use		
		GRY - GRAY				JT - SPORT UTILITY V	/EHICI	LE			

### WISCONSIN MOTOR VEHICLE CRASH REPORT

							(000) 20: 1110	
	Щ	Initial Contact Point		Vehicle Damage			7 8 9 10 11	
⊨	S	06 - REAR Extent Of Damage						
LNO	Ĭ			00 - NO DAMAGE	00 - NO DAMAGE			
ر	VEHICLE	NO DAMAGE					5 4 3 2 1	
		Towed Due To Damage		Vehicle Removed By				
		NOT TOWED		OPERATOR				
		What Driver Was Doing		Vehicle Factors				
		SLOW/STOPPING		Vollidio I dotoro				
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Prior Action Other		NOT ALL EIGABLE				
		Daissan Alatiana						
		Driver Actions  NO CONTRIBUTING ACT	TION					
	LE	NO CONTRIBOTING AC	IION					
LNO	VEHICL							
5	표							
	VE							
		Owner Name		Owner Address				
~	2							
02	02							
		Sequence Of Events						
		Event						
	01	MOTOR VEH IN TRANSF	PORT					
		Event						
	02	Lvont						
		Event						
	03	Eveni						
		Firm						
	04	Event						
⊨	ı	Policy Holder						
UNIT		Insurance Company		INDIVIDUAL	_			
ر		USAA-CASUALTY-INS-C	0					
	ĺ	Individual						
		DRIVER		Citations Issued	Sex			
				0	FEMALE			
	AL			Date of Birth	Race			
	JU			Bute of Birth	WHITE			
	DIVIDUAL	Address		Driver License Number	ar .			
5		Address		Driver License Number	<b>5</b> 1			
	Z			STATE: WISCONS	SIN COUNTRY: UN	TED STATES		
		On Dut	ty Crash	0.61.5				
	Sat	fety Equipment	ty Clasii	Safety Equipment				
	- Cu.		1		D DEL T			
		Row	Seat Position	SHOULDER & LA	PBELI			
		01 - FRONT ROW	07 - LEFT					
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
02	002	Injury S	Severity	Airbag			<del></del>	
J	0	Injury POSS		NON DEPLOYED				
		Ejected	Ejection Path			Trapped/Extricated		
		NOT EJECTED	NOT EJECTED/NOT APP			NOT TRAPPED		
				EMS Agency Identifier	r	EMS Run #	·	
		Medical Transport		LIVIS Agency Identilie	•	2		
		NOT TRANSPORTED						
				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 02/09/2024

Crash Time 08:40 AM

		Distracted By NO	racted By Source T APPLICABL	E (NOT DISTR	RAC	TED)					
	Distracted By Action NOT DISTRACTED										
	,	Non Motorist Strik	ing Unit #	Location							
		Prior Action									
		Action									
	JAL										
LNN	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 Ty	/ре				Alcohol Tes	Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type	)		Drug T	est Results			
05	002	Drug Type		<u>l</u>							
		Individual Condition									
		NOT OBSERVED									
	Uni	t Summary									
		Status				nicle Operating As Classif	ication		Unit Type		
		RANSIT			D (	CLASS			AUTOMOI		
03	PAS	cle Type SSENGER CAR							Operating As Endorsements		
	Total	l Occs	Train/Bus # Re	corded	Tot	al # Citations Issued		Total Traile	rs	Total HazN  0	lat Types
		rance?	Direction Of Tra		FIE CIASITITE		Speed Limit			3	
EN S	YES	i Harmful Event: Collision Wi	SOUTHBOUND			Mark 20			Emergency Motor Vehicle Use		
5	MO.	TOR VEH IN TRANSPO			Special Function NO SPECIAL FUNCTION				NOT APPLICABLE		
		ic Way <b>D-WAY, DIVIDED, UNPR</b>	OTECTED (D	NINTED > 4		ffic Control			Traffic Control Inoperative/Missing		
		ace Type	OTECTED (F)	AINTED > 4		ad Curvature			NO Road Grade		
		ACKTOP (BITUMINOUS)	)		STRAIGHT LEVEL						
	Truc <b>NO</b>	k Bus or HazMat									
	7	Vehicle									
		License Plate Number				ate Type			Country of Is:		
						UT - AUTOMOBILE			UNITED ST	TATES	
03	03	Vehicle Identification Numb	er			ake OYOTA			Model CAMRY		
-	•	Color				ody Style	ı		Bus Use		
		BLK - BLACK				D - SEDAN					
		Initial Contact Point						J			
		12 - FRONT									

### WISCONSIN MOTOR VEHICLE CRASH REPORT

							(000, 20	
	Щ			∕ehicle Damage			7 0 0 10 11	
⊨	딩						7 8 9 10 11	
LNO	Ť	Extent Of Damage		11 - LEFT FRONT C	6 2 12			
_	VEHICLE	MINOR DAMAGE					5 4 3 2 1	
		Towed Due To Damage	1	Vehicle Removed By				
		NOT TOWED		OPERATOR				
		What Driver Was Doing		Vehicle Factors				
		_		verlicie Factors				
		SLOW/STOPPING		NOT APPLICABLE				
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Actions						
	щ	NO CONTRIBUTING ACT	IION					
╘	ರ							
LNO	王							
_	VEHICL							
		Owner Name		Owner Address				
03	03							
	_							
	,	Sequence Of Events						
	2	Event MOTOR VEH IN TRANSF	OORT					
	0	MOTOR VEH IN TRANSP	OKI					
	7	Event						
	05	MOTOR VEH IN TRANSF	PORT					
	•	Event						
	03							
		Event						
	8	Lvent						
⊨		Policy Holder						
LNN		Insurance Company		INDIVIDUAL				
ر		STATE-FARM-GENERAL	INS-CO					
		Individual						
		DRIVER		Citations Issued	Sex			
		BRIVER		0	MALE			
	4			-	Race			
	Ş			Date of Birth	BLACK/AFRICA	N AMERICAN		
	DIVIDUAL					at American		
5	$\leq$	Address		Driver License Numbe	r			
_	Ĭ			STATE: ILLINOIS	COUNTRY: UNITED	STATES		
	_			O IATE: IEEINOIO	OCHINI. ONLIE	OTALLO		
	0-4	On Dut	y Crash	Safety Equipment				
	Sai	fety Equipment						
		Row	Seat Position	SHOULDER & LAF	PBELT			
		01 - FRONT ROW	07 - LEFT					
		Helmet Use	L	Helmet Compliance				
		Eye Protection		Tint Compliance				
		,		Compilation				
	m	I Iniury S	Severity	Airbag				
03	003	Injury NO AL	PPARENT INJURY	NON DEPLOYED				
		Ejected NO A	Ejection Path	HOR DEFECTED	1	Trapped/Extricated		
				ICADI E		* *		
		NOT EJECTED	NOT EJECTED/NOT APPI			NOT TRAPPED		
		Medical Transport		EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED						
		I Hoonital		Date of Death		Time of Death		
		Hospital		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 02/09/2024

Crash Time 08:40 AM

		Distracted By Son NOT APPLIC	ource ABLE (NOT DISTRA	CTED)			
		Distracted By Action NOT DISTRACTED					
		Non Motorist Striking Unit #	Location				
		Prior Action					
		Action					
	Æ						
LNO	INDIVIDUAL						
_							
		Action Other					To/From School
	1	Drug & Alcohol NO	hol Use	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		
03	003	Drug Type					
		Individual Condition					
		APPEARED NORMAL					
		A I LANED HOMBIAL					