CFBatch-Cover-w10

Type of Report: AUTO ACCIDENT

PayorID: WI00001554 Entity: Brown County

State: WI

DATE OF LOSS: 11/18/21

LOSS STREET: WOODDALE AND ROCKWETT ST

LOSS CITY : HOWARD

POLICE DEPT.: BROWN COUNTY

REPORT NUM. : 21-037776

Image Name: WI00001554_3331085003_211215_2185037.tif



3331085003

OGLOFRKG6B

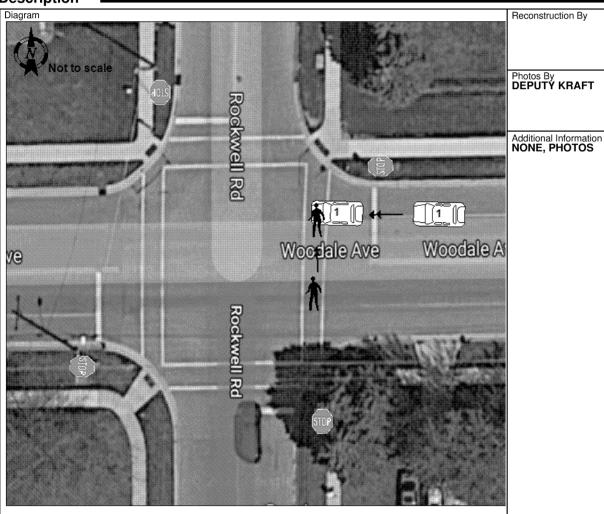
21-037776

WISCONSIN MOTOR VEHICLE CRASH REPORT

BROWN COUNTY SHERIFFS OFFICE 2684 DEVELOPMENT DRIVE GREEN BAY, WI 54311 (920) 448-4200

	Document Number Override	Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy DEPUTY J KRAFT			
36B	Crash Date 11/18/2021	Crash Time 05:03 PM Time Notified 05:05 PM		Date Arrived 11/18/2021 Total Units 02		Time Arrived 05:08 PM			
RKG	Date Notified 11/18/2021					Total Injured Total Killed 00			
.0FF	On Emergency Hit	t and Run Lane Closu		work Zone		Trailer or Towed Reporting Threshold			
OGL	Government Property Active		School Bus Related NO		Tags				
	Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amended			Secondary Crash

Description



Reconstruction By

Photos By **DEPUTY KRAFT**

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

VEH 1 (AMV-7545) WAS TRAVELING WEST ON WOODALE AVENUE APPROACHING THE INTERSECTION AT ROCKWELL ROAD. WHEN VEH 1 GOT TO INTERSECTION, VEH 1 STOPPED AT STOP SIGN. VEH 1 THEN PROCEEDED INTO INTERSECTION (WEST) ON WOODALE AVENUE. WHILE ENTERING INTERSECTION, VEH 1 COLLIDED WITH A PEDESTRIAN CROSSING WOODALE AVENUE, DEPUTIES ARRIVED ON SCENE, I MADE CONTACT WITH PEDESTRIAN WHO WAS WEARING REFLECTIVE CLOTHING AND LIGHT UP CLOTHING. PEDESTRIAN REFUSED RESCUE BUT LOOKED TO HAVE INJURED HIS BODY. PEDESTRIAN WAS GRABBING HIS HIP. PEDESTRIAN (ID'D VERBALLY) ADVISED THAT HE OBSERVED VEH 1 STOP AT STOP SIGN. PEDESTRIAN THEN BEGAN TO CROSS WOODALE AVENUE TO THE NORTH ON CROSSWALK THAT WAS ON THE EAST SIDE OF INTERSECTION. PEDESTRIAN STATED THAT VEH 1 THEN BEGAN TO ACCELERATE HIS DIRECTION AND COLLIDED W/ HIS BODY. DRIVER OF VEH 1 (ID'D W/ WI DL) ADVISED THAT SHE STOPPED AT STOP SIGN (FACING WEST) AND OBSERVED PEDESTRIAN STOPPED AT CORNER. DRIVER OF VEH 1 WAS NOT FULLY SURE WHERE OR HOW COLLISION OCCURRED. DRIVER OF VEH 1 WAS NOT ABLE TO CONFIRM EXACTLY WHERE COLLISION OCCURRED. DRIVER OF VEH 1 WAS ISSUED AND EXPLAINED CITATION FOR FAILURE TO YIELD TO PEDESTRIAN. DRIVER OF VEH 1 WAS A MINOR SO HER FATHER WAS ALSO ON SCENE WHEN CITATION WAS ISSUED. BOTH PARTIES WERE ISSUED AND EXPLAINED CRASH FORMS. PEDESTRIAN WAS TRANSPORTED AWAY FROM SCENE BY HIS CHILD. VEH 1 WAS OCCUPIED BY 1. DAMAGE TO VEH 1 INCLUDED BROKEN WINDSHIELD WHERE PEDESTRIAN HIT. SEE PHOTOGRAPHS ATTACHED TO CASE FILE.

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BROWN COUNTY SHERIFFS OFFICE 2684 DEVELOPMENT DRIVE GREEN BAY, WI 54311 (920) 448-4200

Crash Date 11/18/2021

Crash Time 05:03 PM

	Location I										
•	ON WOODALE AVE					Latitude			Longitud	de	
	5 FT E						17609		-88.089	-88.089602572	
	OF ROCKWELL RD IN THE VILLAGE OF		ADD			X Coordin	nate		Y Coordinate 4936075		
	IN THE VILLAGE OF		AND			413486.8	84375				
						Structure					
						NO STRUCTURE					
-	Crash Scene										
1	First Harmful Event					First Harn	nful Event I	Location			
	PEDESTRIAN	ON ROADWAY									
	Manner of Collision			Light Con	dition						
	00 - NO COLLISION		DARK/LIGHTED								
	Road Surface Condition	(s)				Roadway	Factor(s)				
	DRY										
	Environment Factor(s)					1					
	NONE					NONE					
						INONE					
	Weather Condition(s)										
	CLOUDY										
	Animal Type					Relation 7	To Trafficwa	ay			
						TRAFFIC	CWAY - C	ON ROAD			
	Crash Classification - Lo					1		- Jurisdiction			
	PUBLIC PROPERTY	<u> </u>						RISDICTION			
	Tribal Land					Access Control				Special Study	
	Mithin Interchange Area		lunction Location		Intersection Type		IO CONTROL				
	Within Interchange Area Junction Location INTERSECTION				1						
	NO		INTERSECTION		I FOUR-W	VAY INTFI	RSECTIO	N			
	NO		INTERSECTION		FOUR-W	VAY INTE	RSECTIO	PN			
	Unit Summary		INTERSECTION	I Vehicle One							
	Unit Summary Unit Status		INTERSECTION		erating As C			Unit Type	BILE		
	Unit Summary		INTERSECTION	Vehicle Ope	erating As C					ments	
01	Unit Summary Unit Status IN TRANSIT		INTERSECTION		erating As C			Unit Type		ments	
	Unit Summary Unit Status IN TRANSIT Vehicle Type		Train/Bus # Recorded	D CLASS	erating As C	Classification		Unit Type AUTOMO Operating A	As Endorsei	ments Mat Types	
	Unit Summary Unit Status IN TRANSIT Vehicle Type PASSENGER CAR		Train/Bus # Recorded	D CLASS	erating As C	Classification	Total Tra	Unit Type AUTOMO Operating A	As Endorsei Total Haz 0	Mat Types	
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21-037776

WISCONSIN MOTOR VEHICLE CRASH REPORT

BROWN COUNTY SHERIFFS OFFICE 2684 DEVELOPMENT DRIVE GREEN BAY, WI 54311 (920) 448-4200

		Towed Due To Damage NOT TOWED		Vehicle Removed By				
		What Driver Was Doing		OPERATOR Vehicle Factors				
		GOING STRAIGHT		Venicle Factors				
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Actions						
	щ		HICLE IN INATTENTIVE,	CARELESS OR ERRATIC MANI	NER			
≒	2							
UNIT	VEHICL							
	>							
		Owner Name		Owner Address				
_	—	JASON M TOTZKE		2930 NIKKI LEE CT				
9	5	(920) 615-6528		GREEN BAY, WI 54313 ,	US			
		Sequence Of Events						
		Event						
	5	PEDESTRIAN						
	02	Event						
		Event						
	93							
	04	Event						
		Policy Holder						
UNIT		Insurance Company		Individual				
–		OWNERS-INS-CO		JASON TOTZKE				
		Individual						
		Driver MADELYN RAE TOTZKE		Citations Issued	Sex			
	AL	(920) 241-5676		Date of Birth	FEMALE Race			
<u> </u>	INDIVIDUAL			08/14/2005	WHITE			
LIND	\geq	Address 2930 NIKKI LEE CT		Driver License Number				
_	Z	GREEN BAY, WI 54313	US	T3205560579407 STATE: WISCONSIN COUN	ITRY: UNITED STATES			
	Co.	On Duty	y Crash	Safety Equipment				
	Sai	fety Equipment						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT				
		Helmet Use	U/ - LEF I	Helmet Compliance				
				Tremet compliance				
		Eye Protection		Tint Compliance				
_	Ξ	Injury So	everity	Airbag				
6	9	Injury NO AP	PPARENT INJURY	NON DEPLOYED				
		Ejected	Ejection Path		Trapped/Extricated			
		NOT EJECTED Medical Transport	NOT EJECTED/NOT AF	PPLICABLE EMS Agency Identifier	NOT TRAPPED			
		NOT TRANSPORTED		EMS Agency Identine	EMS Run #			
		Hospital		Date of Death	Time of Death			
		Dietroet						
		Distracted By NOT A	ted By Source APPLICABLE (NOT DISTE	RACTED)				
		Distracted By Action						
		NOT DISTRACTED						

Crash Date 11/18/2021
Crash Time 05:03 PM

21-037776

WISCONSIN MOTOR VEHICLE CRASH REPORT

BROWN COUNTY SHERIFFS OFFICE 2684 DEVELOPMENT DRIVE GREEN BAY, WI 54311 (920) 448-4200

								_		
1		Non Motorist	king Unit #	Location						
		Prior Action								_
		1 1101 7 1011011								
İ		Action								-
ĺ										
	INDIVIDUAL									
I≡	3									
LIND	Σ									
	2									
		Action Other							To/From School	
		I Sus	pected Alcohol	llse	Suspected Drug Use					_
		Drug & Alcohol NO		030	NO					
		Alcohol Test Given		Alcohol Test Typ				Alcohol Tes	t Results	_
		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Tes	st Results			
	_	Drug Type		_		<u> </u>				_
0	00	Diag Type								
		Individual Condition								
		APPEARED NORMAL								
		Violations UTC Number Issu	ue To? St	atute Number	Description					
	5	BE542059 00	ن م ا	46.38(1)	Description FAIL/YIELD TO PED	ESTRIA	N/BICYC	LIST		
	Uni	t Summary								_
		Status			Vehicle Operating As Classi	ification		Unit Type		-
	ד או	TRANSIT			O CLASS			PEDESTRIAN		
l a l	l				O CLASS					
ıöı	Vehi	icle Type			O CLASS				s Endorsements	
05	Vehi PE [icle Type DESTRIAN	Train/Bus # R				otal Traile	Operating A	s Endorsements	_
0	Vehi PE [icle Type	Train/Bus # R		Fotal # Citations Issued		otal Traile	Operating A	s Endorsements Total HazMat Types	_
0	Vehi PEC Tota 1	icle Type DESTRIAN	Train/Bus # R	lecorded 7	Fotal # Citations Issued	0		Operating A	s Endorsements	
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21-037776

WISCONSIN MOTOR VEHICLE CRASH REPORT

BROWN COUNTY SHERIFFS OFFICE 2684 DEVELOPMENT DRIVE GREEN BAY, WI 54311 (920) 448-4200

Crash Date 11/18/2021

Crash Time 05:03 PM

									
	7	Pedestrian THOMAS ROBERT SCHLUETER (920) 362-0900 Address 1537 BELLE PLANE CIR GREEN BAY, WI 54313 , US			Citations Issued 0		Sex MALE		
_	DUA				Date of Birth 02/08/1966		Race		
LINO	INDIVIDUAL				Driver License Number S436836604802 STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sai	On Duty	Crash		Safety Equipment				
		Row 98 - NOT APPLICABLE	98 - NOT APPLICABLE		REFLECTIVE CLOTHING (JACKET, BACKPACK, ETC), LIGHTING				
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
05	002	Injury Severity SUSPECTED MINOR INJURY			Airbag NOT APPLICABLE				
		Ejected	Ejection Path NOT EJECTED/NOT		-L		Trapped/Extricated NOT TRAPPED		
		Medical Transport	NOT EULCTED/NOT	AFF	EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED							
		Hospital			Date of Death		Time of Death		
		Distracted By NOT AF	d By Source PPLICABLE (NOT DIS	STRA	CTED)				
		Distracted By Action NOT DISTRACTED	1.5.0						
		Non Motorist Striking Unit # Location AT INTERSEC			TION-IN MARKED CR	OSSWALK			
		WALKING/CYCLING ON SIDEWALK							
		Action							
TINO	INDIVIDUAL	NO IMPROPER ACTION							
		Action Other						To/From School	
		Suspecte	ed Alcohol Use		Suspected Drug Use			NO	
	L	Drug & Alcohol NO			NO				
		Alcohol Test Given TEST NOT GIVEN	Alcohol Tes	st Type	•		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN Drug Test Type			Drug Test Results				
05	005	Drug Type					-		
		Individual Condition					-		
		APPEARED NORMAL							
8	L								