

CFBatch-Cover-w10

Type of Report: AUTO ACCIDENT

PayorID: WI00000069 Entity: Wisc. Div. Motor Vehicles

State: WI

DATE OF LOSS: 11/18/21

LOSS STREET : YELLOWSTONE DR AND MINERAL POINT RD

LOSS CITY : MADISON

POLICE DEPT.: MADISON PD

REPORT NUM. : 21462941

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2021-462941

WISCONSIN MOTOR VEHICLE CRASH REPORT

MADISON POLICE DEPARTMENT
211 S CARROLL ST
MADISON, WI 53703
(608) 266-4275

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Document Number Override		Primary Crash Document #		Agency Crash Number M219-MUNI		Investigating Officer/Deputy OFFICER S. OLSON	
Crash Date 11/18/2021		Crash Time 01:40 PM		Date Arrived 11/18/2021		Time Arrived 01:40 PM	
Date Notified 11/18/2021		Time Notified 01:40 PM		Total Units 02		Total Injured 01	Total Killed 00
<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 NO		Tags		
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> 	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WAS WB ON MINERAL POINT RD TURNING LEFT ONTO SB YELLOWSTONE DR WHEN IT COLLIDED WITH UNIT 2 WHICH WAS EB ON MINERAL POINT RD GOING STRAIGHT THROUGH THE INTERSECTION.

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Location

INTERSECTION ON MINERAL POINT RD AT S YELLOWSTONE DR IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.060725691	Longitude -89.492011274
	X Coordinate 297075.96875	Y Coordinate 4770572.5
	Structure Type	

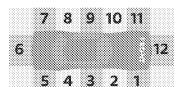
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLOUDY			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE	Vehicle					
	License Plate Number 39142D		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 3CZRE4H51AG704327		Make HONDA	Year 2010	Model CR-V EX	
	Color BLU - BLUE		Body Style LL - CARRYALL		Bus Use	
	Initial Contact Point 03 - RIGHT SIDE MIDDLE		Vehicle Damage 03 - RIGHT SIDE MIDDLE			
Extent Of Damage DISABLING DAMAGE						



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By	
	What Driver Was Doing LEFT TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY			
01	Owner Name JOAN K BROOKS (608) 271-0727		Owner Address 2217 RAVENSWOOD RD MADISON, WI 53711 , US	
	Sequence Of Events			
01	Event	LEFT TURN		
	Event			
	Event			
	Event			
01	Policy Holder			
	Insurance Company HORACE-MANN-INS-CO		Individual JOAN BROOKS	
01	Individual			
	Driver JOAN K BROOKS (608) 271-0727		Citations Issued 1	Sex FEMALE
	Date of Birth 05/12/1935		Race BLACK/AFRICAN AMERICAN	
	Address 2217 RAVENSWOOD RD MADISON, WI 53711 , US		Driver License Number B6204913567200 STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
01	Injury Severity NO APPARENT INJURY		Airbag DEPLOYED-SIDE	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
01	Distracted By			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED				

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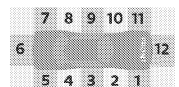
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UNIT INDIVIDUAL	01	001	Non Motorist		Striking Unit #	Location	
			Prior Action				
			Action				
			Action Other				
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
	Drug Type						
	Individual Condition APPEARED NORMAL						
	Violations						
01	UTC Number BF8084403		Issue To? 001	Statute Number 346.18(2)	Description FAIL/YIELD WHILE MAKING LEFT TURN		

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
		Vehicle Type PASSENGER CAR				Operating As Endorsements	
		Total Occs 01	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
		Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	Total Lanes 4	
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
		Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
		Truck Bus or HazMat NO					

02	02	Vehicle				
		License Plate Number P900		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 3LN6L2LUXFR606244		Make LINCOLN	Year 2015	Model MKZ
		Color BLK - BLACK		Body Style SD - SEDAN		Bus Use
		Initial Contact Point 12 - FRONT				



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UNIT	VEHICLE	Vehicle Damage		
		Extent Of Damage DISABLING DAMAGE	12 - FRONT	
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By SCHMIDT'S	
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
UNIT	VEHICLE	Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions NO CONTRIBUTING ACTION		
		Owner Name JOHN LUTHER BAILEY (608) 278-1882	Owner Address 5402 DENTON PL MADISON, WI 53711 , US	
		Sequence Of Events		
UNIT	VEHICLE	Event MOTOR VEH IN TRANSPORT		
		Event		
		Event		
		Event		
UNIT	VEHICLE	Policy Holder		
		Insurance Company USAA-CASUALTY-INS-CO	Individual JOHN BAILEY	
		Individual		
		Driver JOHN LUTHER BAILEY (608) 278-1882	Citations Issued 0	Sex MALE
UNIT	INDIVIDUAL	Date of Birth 11/09/1941	Race WHITE	
		Address 5402 DENTON PL MADISON, WI 53711 , US		
		Driver License Number B4004724140904 STATE: WISCONSIN COUNTRY: UNITED STATES		
		Safety Equipment		
UNIT	INDIVIDUAL	On Duty Crash	Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
UNIT	INDIVIDUAL	Injury SUSPECTED MINOR INJURY	Airbag DEPLOYED-FRONT	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
		Hospital	Date of Death	Time of Death

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UNIT INDIVIDUAL 02 002	Distracted By		Distracted By Source	
	Distracted By Action			
	Non Motorist		Striking Unit #	Location
	Prior Action			
	Action			
	Action Other			To/From School
	Drug & Alcohol		Suspected Alcohol Use NO	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
	Drug Type			
Individual Condition APPEARED NORMAL				