

01L1PZ7RB3

2022-361960

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

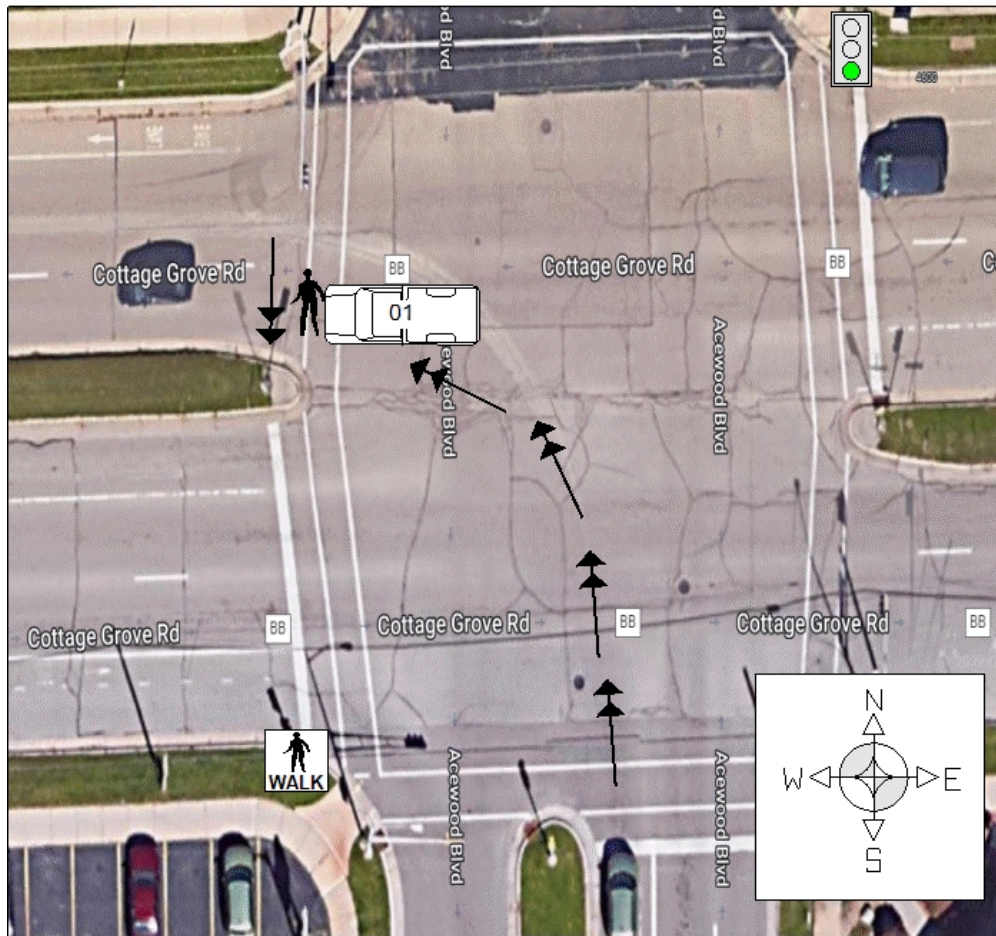
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Document Number Override		Primary Crash Document #		Agency Crash Number <b>CLOSED</b>		Investigating Officer/Deputy <b>OFFICER ASHLEY JACKSON</b>	
Crash Date <b>09/05/2022</b>		Crash Time <b>12:48 PM</b>		Date Arrived <b>09/05/2022</b>		Time Arrived <b>12:50 PM</b>	
Date Notified <b>09/05/2022</b>		Time Notified <b>12:50 PM</b>		Total Units <b>02</b>		Total Injured <b>01</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

**DIAGRAM IS NOT TO SCALE**



Reconstruction By

Photos By

Additional Information  
**TRAFFIC CAMERA VIDEO, OTHER VIDEO**

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

ON 09/05/22 AT APPROXIMATELY 12:48PM, UNIT 1 WAS STOPPED AT A RED TRAFFIC LIGHT AT THE INTERSECTION OF COTTAGE GROVE RD AND ACEWOOD BLVD, IN THE LEFT TURN LANE OF NB ACEWOOD BLVD. UNIT 2 WAS STANDING AT THE NORTHWEST CORNER OF COTTAGE GROVE RD AND ACEWOOD BLVD. IT WAS OBSERVED ON VIDEO FROM CITY CAMERAS AT THAT INTERSECTION THAT UNIT 2 HAD PUSHED THE PEDESTRIAN CROSS BUTTON FOR THE SOUTHBOUND CROSSWALK ON THE WEST SIDE OF THE INTERSECTION. WHEN THE TRAFFIC LIGHT FOR ACEWOOD BLVD TURNED GREEN, UNIT 1 MADE A LEFT TURN TO WESTBOUND COTTAGE GROVE RD. IT WAS OBSERVED ON VIDEO FROM CAPITOL PETRO, LOCATED AT THE SOUTHEAST CORNER OF THE INTERSECTION, THAT UNIT 2 HAD WALKED INTO THE SOUTHBOUND CROSSWALK WHEN THE TRAFFIC LIGHT FOR ACEWOOD BLVD TURNED GREEN. WHILE UNIT 2 WAS NEARING THE CENTER MEDIAN, UNIT 1 STRUCK UNIT 2 WHILE UNIT 2 WAS IN THE CROSSWALK. UNIT 1 CONSENTED TO BLOOD DRAW. UNIT 2 WAS TRANSPORTED TO HOSPITAL FOR INJURIES. NFA. PO A JACKSON, 5780

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**Location**

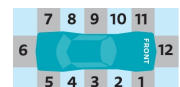
ON COTTAGE GROVE RD 27 FT W OF ACEWOOD BLVD IN THE CITY OF MADISON IN DANE COUNTY	Latitude <b>43.084189678</b>	Longitude <b>-89.303163805</b>
	X Coordinate <b>312525.96875</b>	Y Coordinate <b>4772738.5</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>PEDESTRIAN</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</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>CLOUDY</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</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>INTERSECTION</b>	Intersection Type <b>FOUR-WAY 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>PASSENGER CAR</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>UNKNOWN</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>30</b>	Total Lanes <b>2</b>		
	Most Harmful Event: Collision With <b>PEDESTRIAN</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>TWO-WAY, DIVIDED, UNPROTECTED (PAINTED &gt; 4</b>		Traffic Control <b>TRAFFIC SIGNAL</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 <b>TD9301</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>1FTFX1EF8HKC02772</b>		Make <b>FORD</b>	Year <b>2017</b>	Model <b>F150</b>			
Color <b>BLU - BLUE</b>		Body Style <b>TK - TRUCK</b>		Bus Use			
Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage					
Extent Of Damage <b>NO DAMAGE</b>		<b>00 - NO DAMAGE</b>					



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>UNKNOWN</b>			
01 01	Owner Name <b>JORGE D ROMERO (608) 640-1515</b>		Owner Address <b>310 S IOWA ST DODGEVILLE, WI 53533 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event <b>PEDESTRIAN</b>			
	Event			
	Event			
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>JORGE D ROMERO (608) 640-1515</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
			Date of Birth <b>03/19/1972</b>	Race <b>WHITE</b>
	Address <b>310 S IOWA ST DODGEVILLE, WI 53533 , US</b>		Driver License Number <b>R5604247209906 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>RESTRAINT USE UNKNOWN</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 <b>UNKNOWN</b>	
Distracted By Action <b>UNKNOWN</b>				
<b>Non Motorist</b>		Striking Unit #	Location	

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UNIT	INDIVIDUAL	Prior Action			
		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 GIVEN</b>		Alcohol Test Type <b>BLOOD</b>	Alcohol Test Results <b>PENDING</b>
		Drug Test Given <b>TEST GIVEN</b>		Drug Test Type <b>BLOOD</b>	Drug Test Results <b>PENDING</b>
		Drug Type			
		Individual Condition <b>APPEARED NORMAL</b>			

## Unit Summary

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>O CLASS</b>		Unit Type <b>PEDESTRIAN</b>	
		Vehicle Type <b>PEDESTRIAN</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>UNKNOWN</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>30</b>	Total Lanes <b>2</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>TWO-WAY, DIVIDED, UNPROTECTED (PAINTED &gt; 4</b>		Traffic Control <b>TRAFFIC SIGNAL</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>					

## Sequence Of Events

UNIT	01	Event <b>MOTOR VEH IN TRANSPORT</b>	
		Event <b>PEDESTRIAN</b>	
		Event	
		Event	
		Event	
INDIVIDUAL	04	<b>Individual</b>	
		Pedestrian <b>MEREDITH ANN JONES (608) 208-3116</b>	
		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth <b>08/30/1975</b>	Race <b>WHITE</b>

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UN	INDIV	Address <b>1001 S THOMPSON DR MADISON, WI 53716 , US</b>		Driver License Number <b>J5205417581004</b> STATE: WISCONSIN COUNTRY: UNITED STATES		
		Safety Equipment		Safety Equipment		
02	002	Row <b>98 - NOT APPLICABLE</b>	Seat Position	REFLECTIVE CLOTHING (JACKET, BACKPACK, ETC)		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		Injury	Injury Severity <b>SUSPECTED SERIOUS INJUR</b>	Airbag <b>NOT APPLICABLE</b>		
		Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>		
		Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6000358</b>	EMS Run # <b>M5</b>	
		Hospital <b>UNIVERSITY OF WI HOSPITALS &amp; CLINICS AUT</b>		Date of Death	Time of Death	
		Distracted By	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
		Distracted By Action <b>NOT DISTRACTED</b>				
		Non Motorist	Striking Unit # <b>01</b>	Location <b>AT INTERSECTION-IN MARKED CROSSWALK</b>		
UNIT	INDIVIDUAL	Prior Action <b>CROSSING ROADWAY</b>				
		Action <b>NO IMPROPER ACTION</b>				
		Action Other			To/From School <b>NO</b>	
		Drug & Alcohol	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>				