

01L1LF2KRH

2022-95243

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 MUNI		Investigating Officer/Deputy OFFICER BARRY DOERFER	
Crash Date 03/14/2022		Crash Time 04:00 PM		Date Arrived 03/14/2022		Time Arrived 04:08 PM	
Date Notified 03/14/2022		Time Notified 04:01 PM		Total Units 01		Total Injured 02	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 checked="" 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 PRIVATE PROPERTY/PARKING LOT				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram		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 LEFT THE PARKING LOT FROM THE APPROX ADDRESS OF 2004 COHO ST. WHILE UNIT 1 WAS MAKING A LEFT HAND TURN ONTO COHO ST, UNIT 1 DRIVER STATED HIS SHOULD BECAME DISLOCATED BY TURNING THE STEERING WHEEL. I OBSERVED TIRE MARKS FROM UNIT 1 LEAVING THE ROADWAY ON COHO AND PROCEEDING ONTO THE SIDEWALK NORTHBOUND ALONG SIDE COHO ST. I OBSERVED TIRE TRACKS ON THE GRASS AND THE PAVEMENT OF THE SIDEWALK. I ALSO OBSERVED THAT UNIT 1 WAS ABLE TO NAVIGATE BETWEEN TWO TREES WITHOUT HITTING THEM. I ALSO OBSERVED TIRE MARKS PROCEEDING ONTO PRIVATE PROPERTY. UNIT 1 EVENTUALLY STARTED TO TURN SIDEWAYS BASED ON THE TIRE MARKS IN THE GRASS, PRIOR TO HITTING THE TREE. BASED ON OBSERVATION OF THE DAMAGE, IT APPEARED THAT THE VEHICLE WAS TRAVELING FAST ENOUGH THAT IT BROKE THE FRONT RIGHT AXLE AND WHEEL ASSEMBLY. VEHICLE WAS TOWED BY SCHMIDTS AND THE VEHICLE WAS NOT DRIVEABLE. NFA

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Location

ON COHO ST 213 FT S OF LUANN LN IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.032148855	Longitude -89.414883846
	X Coordinate 303265.34375	Y Coordinate 4767215
	Structure Type NO STRUCTURE	

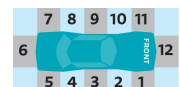
Crash Scene

First Harmful Event CURB		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		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 NON TRAFFICWAY - OTHER	
Crash Classification - Location PRIVATE PROPERTY		Crash Classification - Jurisdiction PRIVATE PROPERTY	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN 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 2	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade UPHILL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE	Vehicle				
	License Plate Number AND9409		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FAHP2JWXBG122989		Make FORD	Year 2011	Model TAURUS
	Color WHI - WHITE		Body Style SD - SEDAN		Bus Use
	Initial Contact Point 02 - RIGHT SIDE FRONT		Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 12 - FRONT		
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 LEAVING TRAVEL LANE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILURE TO CONTROL			
01	Owner Name BRANDON L CROCKETT (608) 440-3947		Owner Address 2301 BADGER PKWY #15 MADISON, WI 53713 , US	
	Sequence Of Events			
01	Event	MOTOR VEH IN TRANSPORT		
	Event	CURB		
	Event			
	Event			
04	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual BRANDON CROCKETT	
UNIT INDIVIDUAL	Individual			
	Driver BRANDON L CROCKETT (608) 440-3947		Citations Issued 1	Sex MALE
			Date of Birth 08/07/1989	Race BLACK/AFRICAN AMERICAN
	Address 2301 BADGER PKWY #15 MADISON, WI 53713 , US		Driver License Number C6230608928710 STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity SUSPECTED SERIOUS INJUR	Airbag NON DEPLOYED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport EMS GROUND		EMS Agency Identifier 6000358		EMS Run #
Hospital ST MARYS HOSPITAL MED CTR		Date of Death		Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action UNKNOWN				

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UNIT INDIVIDUAL	01	001	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					
UNIT INDIVIDUAL	01	002	Individual					
			Passenger PRECIOUS C GOLDEN (608) 213-4311		Citations Issued 0	Sex FEMALE		
					Date of Birth 11/01/1993	Race BLACK/AFRICAN AMERICAN		
			Address 1618 FORDEM AVE #204 MADISON, WI 53704 , US		Driver License Number G4356639390100 STATE: WISCONSIN COUNTRY: UNITED STATES			
			Safety Equipment	On Duty Crash		Safety Equipment		
			Row 02 - SECOND ROW	Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT			
			Helmet Use		Helmet Compliance			
			Eye Protection		Tint Compliance			
			Injury	Injury Severity POSSIBLE INJURY		Airbag NON DEPLOYED		
			Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
Medical Transport EMS GROUND		EMS Agency Identifier 6000358		EMS Run #				
Hospital ST MARYS HOSPITAL MED CTR		Date of Death		Time of Death				
Distracted By	Distracted By Source							
Distracted By Action								
UNIT INDIVIDUAL	01	003	Non Motorist	Striking Unit #	Location			

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UNIT INDIVIDUAL	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			
	Violations			
	01	UTC Number BI332933	Issue To? 001	Statute Number 346.34(1)(a)3