

01L0D2XVTQ

2022-374646

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 STEVE MORALES	
Crash Date 09/13/2022		Crash Time 04:27 PM		Date Arrived 09/13/2022		Time Arrived 04:38 PM	
Date Notified 09/13/2022		Time Notified 04:28 PM		Total Units 02		Total Injured 03	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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 DT4000 (STANDARD CRASH)				<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 EXITED FROM WESTBOUND BELT LINE ON THE GAMMON RD EXIT AND UNIT 2 WAS DRIVING NORTHBOUND ON GAMMON RD. THE STOP LIGHT WAS GREEN FOR ALL TRAFFIC GOING SOUTH AND NORTH ON GAMMON RD. THE STOP LIGHT WAS RED FOR ALL OF THE VEHICLES EXITING THE BELT LINE IN ORDER TO TURN ONTO GAMMON RD. ACCORDING TO A WITNESS, UNIT 2 DROVE THROUGH THEIR GREEN LIGHT AT NORMAL SPEED AND AT THE SAME TIME UNIT 1 WENT THROUGH THE RED LIGHT AND TURNED RIGHT IN ORDER TO GO NORTHBOUND ON GAMMON RD. THIS CAUSED UNIT 1 TO STRIKE UNIT 2 WHO COULD NOT STOP IN TIME WHEN THEY SAW UNIT 1 APPROACHING. CITY CAMERAS CAPTURED THE EVENT AND CONFIRMED THAT UNIT 1 DROVE THROUGH THE RED LIGHT. UNIT 1 WAS CITED FOR VIOLATING THE RED TRAFFIC LIGHT. NFA PO MORALES 5983

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Location

ON S GAMMON RD 565 FT N OF USH12 WB IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.054868008	Longitude -89.503009941
	X Coordinate 296160.90625	Y Coordinate 4769948.5
	Structure Type NO STRUCTURE	

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) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control FULL CONTROL	Special Study
Within Interchange Area YES	Junction Location EXIT RAMP-RELATED	Intersection Type NOT AN INTERSECTION	
Closure Type LANE CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 09/13/2022	Time Initial Lane/Rd Closed 04:27 PM	LAW ENFORCEMENT	
Date All Lanes Open 09/13/2022	Time All Lanes Open 05:55 PM	Date Scene Cleared 09/13/2022	Time Scene Cleared 05:55 PM

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? UNKNOWN	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	Total Lanes 6	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, DIVIDED, UNPROTECTED (PAINTED > 4		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	01	License Plate Number 772PLK		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
Vehicle Identification Number 5J6RM4H36CL064638		Make HONDA	Year 2012	Model CR-V LX		

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UNIT VEHICLE	Color WHI - WHITE	Body Style 4D - 4DR	Bus Use
	Initial Contact Point 10 - LEFT SIDE FRONT	Vehicle Damage 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT	
	Extent Of Damage DISABLING DAMAGE		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By	
	What Driver Was Doing RIGHT TURN	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
UNIT VEHICLE	Driver Actions DISREGARDED RED LIGHT		
	Owner Name CATHERINE L BARRANCE	Owner Address 713 CRESTHAVEN DR COTTAGE GROVE, WI 53527 , US	
01 01	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
UNIT INDIVIDUAL	Individual		
	Driver CATHERINE L BARRANCE	Citations Issued 1	Sex FEMALE
		Date of Birth 05/08/1972	Race WHITE
	Address 713 CRESTHAVEN DR COTTAGE GROVE, WI 53527 , US	Driver License Number B6521327266800 STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity SUSPECTED SERIOUS INJUR	Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated TRAPPED/EXTRICATED
	Medical Transport EMS GROUND		EMS Agency Identifier 7
	Hospital UW HEALTH-AMERICAN CENTER		EMS Run #
	Date of Death		Time of Death

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UNIT INDIVIDUAL 01 001	Distracted By		Distracted By Source UNKNOWN	
	Distracted By Action UNKNOWN			
	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 NOT OBSERVED				
Violations				
01	UTC Number BF452850	Issue To? 001	Statute Number 346.37(1)(c)1	Description OPERATOR VIOLATE RED TRAFFIC LIGHT

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	Total Lanes 6	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, DIVIDED, UNPROTECTED (PAINTED > 4		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	02	License Plate Number 161525H		Plate Type GOV - U S GOVERNMENT	St IL	Country of Issuance UNITED STATES
Vehicle Identification Number 2NPNHM6X3JM319156		Make PETERBILT MOTORS CO	Year 2018	Model TRUCK		

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UNIT	VEHICLE	Color AME - AMETHYST	Body Style AR - ARMORED TRUCK	Bus Use
		Initial Contact Point 02 - RIGHT SIDE FRONT	Vehicle Damage	
		Extent Of Damage FUNCTIONAL DAMAGE	02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE	
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By SCHMITS	
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE	
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
		Owner Name THILLENS LEASING COMPANY Owner Address 4242 N ELSTON AVE CHICAGO, IL 60618 , US		
UNIT	VEHICLE	Sequence Of Events		
		01	Event MOTOR VEH IN TRANSPORT	
		02	Event	
		03	Event	
		04	Event	
UNIT	VEHICLE	Policy Holder		
		Insurance Company CINCINNATI-INS-CO,-THE	Government THILLENS LEASING COMPANY	
		Individual		
UNIT	INDIVIDUAL	Driver BRANDON M SEVERSON	Citations Issued 0	Sex MALE
			Date of Birth 09/23/1991	Race WHITE
		Address 1614 FORDEM MADISON, WI 53704 , US	Driver License Number S1620739134302 STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT	VEHICLE	Safety Equipment		
		On Duty Crash	Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
UNIT	VEHICLE	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #

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UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED					
	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	
02 002	Drug Type					
	Individual Condition APPEARED NORMAL					
	Individual					
	Passenger PRINCESS C LOVE		Citations Issued 0		Sex FEMALE	
			Date of Birth 11/12/1994		Race BLACK/AFRICAN AMERICAN	
	Address 2450 OLD CAMDEN SQ MADISON, WI 53718 , US		Driver License Number L1006639491208 STATE: WISCONSIN COUNTRY: UNITED STATES			
	Safety Equipment		On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW		Seat Position 08 - MIDDLE		SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
02 003	Injury		Injury Severity SUSPECTED MINOR INJURY		Airbag NON DEPLOYED	
	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	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						
UNIT	INDIVIDUAL	Individual				
		Passenger SHIANA SHENELL VAUGHN		Citations Issued 0	Sex FEMALE	
				Date of Birth 09/15/1992	Race BLACK/AFRICAN AMERICAN	
		Address 951 ACEWOOD BLVD APT 104 MADISON, WI 53714 , US		Driver License Number V2507979283505 STATE: WISCONSIN COUNTRY: UNITED STATES		
		Safety Equipment	On Duty Crash		Safety Equipment	
			Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		Injury	Injury Severity SUSPECTED MINOR INJURY		Airbag NON DEPLOYED	
			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		
UNIT	INDIVIDUAL	Distracted By		Distracted By Source		

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UNIT INDIVIDUAL 02 004	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		