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2022-444569

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 JEFFREY HAYES	
Crash Date 10/30/2022		Crash Time 04:49 PM		Date Arrived 10/30/2022		Time Arrived 04:58 PM	
Date Notified 10/30/2022		Time Notified 04:51 PM		Total Units 02		Total Injured 01	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 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.

ON 10/30/22 UNIT 2 WAS TRAVELING NORTHBOUND ON JUNCTION RD IN THE SECOND LANE (ADJACENT THE DEDICATED RIGHT TURN ONLY). UNIT 1 WAS STOPPED AT THE PARKING LOT ENTRANCE PREPARING TO MAKE A LEFT TURN ONTO JUNCTION RD. UNIT 1 DRIVER STATED THAT SHE WAS UNABLE TO OBSERVE UNIT 2 DUE TO UNIT 2'S BEING OBSCURED BY ANOTHER VEHICLE OCCUPYING THE RIGHT TURN ONLY LANE. UNIT 1 PROCEEDED WITH THE TURN RESULTING IN UNIT 2 COLLIDING WITH UNIT 1'S DRIVER'S SIDE REAR DOOR. UNIT 2 OPERATOR SUFFERED FACIAL INJURIES REQUIRING MEDICAL ATTENTION. WITNESS STATED THAT UNIT 2 WAS NOT SPEEDING AND INDICATED THAT UNIT 2 WAS LOCATED TO THE DRIVER'S SIDE REAR OF THE WITNESS' VEHICLE CORROBORATING UNIT 1 DRIVER'S STATEMENT THAT UNIT 2 WAS OBSCURED. UNIT 1 DRIVER WAS CITED FOR FAILURE TO YIELD FROM A STOP SIGN RESULTING IN BODILY HARM.

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Location

INTERSECTION ON JUNCTION RD AT ISAAC DR IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.062384092	Longitude -89.52738131
	X Coordinate 294201.21875	Y Coordinate 4770842.5
	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 NO CONTROL	Special Study
Within Interchange Area YES	Junction Location INTERSECTION-RELATED	Intersection Type FOUR-WAY INTERSECTION	
Closure Type LANE CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 10/30/2022	Time Initial Lane/Rd Closed 04:58 PM	LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date All Lanes Open 10/30/2022	Time All Lanes Open 05:54 PM		
Date Scene Cleared 10/30/2022		Time Scene Cleared 05:54 PM	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				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 CrashTire Mark	Speed Limit 30	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 TWO-WAY, NOT DIVIDED, WITH A CONTINUOUS L		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
01	Vehicle					
	License Plate Number APN4650		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 5J6RT6H97NL038457		Make HONDA	Year 2022	Model CR-V	

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UNIT	VEHICLE	Color GRY - GRAY	Body Style UT - SPORT UTILITY VEHICLE	Bus Use
		Initial Contact Point 09 - LEFT SIDE MIDDLE	Vehicle Damage	
		Extent Of Damage DISABLING DAMAGE	08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE	
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By	
		What Driver Was Doing LEFT TURN	Vehicle Factors	
UNIT	VEHICLE	Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions FAILED TO YIELD RIGHT-OF-WAY		
		Owner Name KARON M PETERSON (608) 845-6468	Owner Address 7904 RITZ DR MADISON, WI 53719 , US	
		Sequence Of Events		
		Event MOTOR VEH IN TRANSPORT		
UNIT	VEHICLE	Event		
		Event		
		Event		
		Event		
		Event		
UNIT	VEHICLE	Policy Holder		
		Insurance Company AMERICAN-FAMILY-INS-CO	Individual KARON PETERSON	
		Individual		
		Driver KARON M PETERSON (608) 845-6468	Citations Issued 1	Sex FEMALE
		Date of Birth 12/07/1950	Race WHITE	
UNIT	INDIVIDUAL	Address 7904 RITZ DR MADISON, WI 53719 , US	Driver License Number P3625135094700 STATE: WISCONSIN COUNTRY: UNITED STATES	
		Safety Equipment		
		On Duty Crash	Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
		Helmet Use	Helmet Compliance	
UNIT	INDIVIDUAL	Eye Protection	Tint Compliance	
		Injury	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 #

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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		
Drug Type						
Individual Condition APPEARED NORMAL						
Violations						
01	UTC Number BG445404	Issue To? 001	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN (RESULTING BODILY HARM)		

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification M CLASS		Unit Type MOTORCYCLE	
	Vehicle Type MOTORCYCLE				Operating As Endorsements	
	Total Occs 1	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 30	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 TWO-WAY, NOT DIVIDED, WITH A CONTINUOUS L		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	License Plate Number 908VK		Plate Type CYC - CYCLE	St WI	Country of Issuance UNITED STATES	

02

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02	UNIT VEHICLE	Vehicle Identification Number 1HFSC1468GA203748		Make HONDA	Year 1986	Model GL12	
		Color WHI - WHITE		Body Style MC - MOTORCYCLE		Bus Use	
		Initial Contact Point 12 - FRONT		Vehicle Damage			
		Extent Of Damage DISABLING DAMAGE		08 - LEFT SIDE REAR, 12 - FRONT			
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By			
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors			
Driver Prior Action Other		NOT APPLICABLE					
02	UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION					
		Owner Name STACY JOHN FAGEN (360) 601-2398		Owner Address 2934 MAPLE GROVE DR MADISON, WI 53719 , US			
Sequence Of Events							
01	UNIT	Event MOTOR VEH IN TRANSPORT					
		Event					
		Event					
		Event					
02	UNIT	Policy Holder					
		Insurance Company GEICO-CASUALTY-CO		Individual STACY FAGEN			
		Individual					
02	UNIT INDIVIDUAL	Driver STACY JOHN FAGEN (360) 601-2398		Citations Issued 0	Sex MALE		
				Date of Birth 11/08/1962	Race WHITE		
		Address 2934 MAPLE GROVE DR MADISON, WI 53719 , US		Driver License Number F2507906240808 STATE: WISCONSIN COUNTRY: UNITED STATES			
02	UNIT	Safety Equipment		On Duty Crash			Protective Gear
		Row 01 - FRONT ROW		Seat Position 07 - LEFT		LONG PANTS	
		Helmet Use THREE-QUARTER		Helmet Compliance UNKNOWN			
		Eye Protection UNKNOWN		Tint Compliance UNKNOWN			
		Injury		Injury Severity SUSPECTED SERIOUS INJUR		Airbag NON DEPLOYED	
		Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	

