

01L0KQ2XVR

2022-18399

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 W114 CRIM		Investigating Officer/Deputy OFFICER C. RAMIREZ	
Crash Date 01/15/2022		Crash Time 07:57 PM		Date Arrived 01/15/2022		Time Arrived 08:05 PM	
Date Notified 01/15/2022		Time Notified 07:57 PM		Total Units 02		Total Injured 03	Total Killed 01
<input type="checkbox"/> On Emergency	<input checked="" 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 DANE COUNTY SHERIFF
		Photos By
		Additional Information CRIMINAL INCIDENT, ECM/EDR DOWNLOAD, FATAL CRASH SUPPLEMENT, PHOTOS, RECONSTRUCTION, WITNESS STATEMENTS, SURVEILLANCE VIDEO

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

WHILE ATTEMPTING TO TURN LEFT (NORTH) ONTO ELLIS POTTER CT, #2 WAS STRUCK ON THE PASSENGER SIDE BY #1, WHICH WAS TRAVELING WESTBOUND ON SCHROEDER RD. THE DRIVER OF #1 THEN FLED THE SCENE ON FOOT.

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Location

INTERSECTION ON SCHROEDER RD AT ELLIS POTTER CT IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.046319923	Longitude -89.486650914
	X Coordinate 297465.0625	Y Coordinate 4768959.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DARK/LIGHTED	
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	Intersection Type T-INTERSECTION	
Closure Type OTHER CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 01/15/2022	Time Initial Lane/Rd Closed 08:05 PM	LAW ENFORCEMENT, FIRE/EMS	
Date All Lanes Open 01/16/2022	Time All Lanes Open 03:00 AM	Date Scene Cleared 01/16/2022	Time Scene Cleared 03:05 AM

Unit Summary

UNIT 01	Unit Status HIT AND RUN		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? NO	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 30	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 LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	License Plate Number AMH1423		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 2FAFP74W42X159823		Make FORD	Year 2002	Model CROWN VICT		

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UNIT	VEHICLE	Color RED - RED	Body Style 4D - 4DR	Bus Use
		Initial Contact Point 03 - RIGHT SIDE MIDDLE	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 12 - FRONT	
		Extent Of Damage DISABLING DAMAGE		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By OPERATOR	
		What Driver Was Doing	Vehicle Factors NOT APPLICABLE	
UNIT	VEHICLE	Driver Prior Action Other		
		Driver Actions EXCEED SPEED LIMIT, SPEED TOO FAST/COND, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER		
		Owner Name ARETHA RICHMOND (608) 421-8370	Owner Address 910 LAURIE DR MADISON, WI 53711 , US	
UNIT	VEHICLE	Sequence Of Events		
		Event MOTOR VEH IN TRANSPORT		
		Event		
		Event		
		Event		
UNIT	INDIVIDUAL	Individual		
		Driver SARDARIUS A GOODALL (608) 658-3654	Citations Issued 1	Sex MALE
			Date of Birth 12/03/1980	Race BLACK/AFRICAN AMERICAN
		Address 2001 TRACEWAY DR APT 213 FITCHBURG, WI 53713 , US	Driver License Number G3407818044306 STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT	INDIVIDUAL	Safety Equipment		
		On Duty Crash	Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	RESTRAINT USE UNKNOWN
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		Injury	Injury Severity SUSPECTED MINOR INJURY	Airbag NOT APPLICABLE
		Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT APPLICABLE
		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 UNKNOWN	
	Distracted By Action UNKNOWN			
	Non Motorist	Striking Unit #	Location	
	Prior Action			
	Action			
	Action Other			To/From School
	Drug & Alcohol	Suspected Alcohol Use	Suspected Drug Use	
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type BLOOD		Alcohol Test Results PENDING
	Drug Test Given TEST NOT GIVEN	Drug Test Type BLOOD	Drug Test Results PENDING	
	Drug Type			
Individual Condition NOT OBSERVED				
Violations				
01	UTC Number BF045530	Issue To? 001	Statute Number 346.63(2)(a)1	Description CAUSE INJURY/OPERATE WHILE UNDER INFLUENCE 1ST

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 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 30	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 LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	License Plate Number AGJ1998		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number KMHDN46D54U871460		Make HYUNDAI	Year 2004	Model ELANTRA GL		

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UNIT	VEHICLE	Color BLU - BLUE	Body Style 4D - 4DR	Bus Use	
		Initial Contact Point 03 - RIGHT SIDE MIDDLE	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 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 LEFT TURN	Vehicle Factors		
UNIT	VEHICLE	Driver Prior Action Other	NOT APPLICABLE		
		Driver Actions NO CONTRIBUTING ACTION			
		Owner Name ERICA ANN TRAINOR	Owner Address 117 E MILL ST BEAVER DAM, WI 53916 , US		
		Sequence Of Events			
		01	Event MOTOR VEH IN TRANSPORT		
02	Event				
03	Event				
04	Event				
UNIT	INDIVIDUAL	Individual			
		Driver FREDRICK ARNEL BANKS (608) 345-4603	Citations Issued 0	Sex MALE	
			Date of Birth 07/22/1975	Race BLACK/AFRICAN AMERICAN	
		Address 5126 GREAT GRAY DR MADISON, WI 53718 , US	Driver License Number B5202417526202 STATE: WISCONSIN COUNTRY: UNITED STATES		
		Safety Equipment			
02	002	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 MINOR INJURY	Airbag DEPLOYED-FRONT	
	Ejected PARTIALLY EJECTED	Ejection Path OTHER PATH (E.G., BACK OF PICKUP TRUCK, TRAILER)	Trapped/Extricated NOT APPLICABLE		
	Medical Transport EMS GROUND	EMS Agency Identifier 6000358	EMS Run #		
	Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT	Date of Death	Time of Death		

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UNIT	INDIVIDUAL	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 JEREMIAH K BROOMFIELD		Citations Issued 0	Sex MALE	
		Date of Birth 03/16/2007		Race BLACK/AFRICAN AMERICAN		
		Address 6785 SCHROEDER RD #7 MADISON, WI 53711 , US		Driver License Number		
		Safety Equipment		On Duty Crash		Safety Equipment
		Row 02 - SECOND ROW	Seat Position 10 - UNKNOWN SE	RESTRAINT USE UNKNOWN		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
02	003	Injury	Injury Severity FATAL INJURY		Airbag UNKNOWN	
		Ejected TOTALLY EJECTED	Ejection Path UNKNOWN		Trapped/Extricated NOT TRAPPED	
		Medical Transport EMS GROUND		EMS Agency Identifier 6000358	EMS Run #	
		Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT		Date of Death 01/15/2022	Time of Death 22:04	
		Distracted By				
		Distracted By Source				

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		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		
02	003	Individual Condition APPEARED NORMAL		
		Individual		
		Passenger BENJAMIN A BLUNT JR	Citations Issued 0	Sex MALE
			Date of Birth 10/02/2008	Race BLACK/AFRICAN AMERICAN
		Address 6785 SCHROEDER RD #7 MADISON, WI 53711 , US	Driver License Number	
		Safety Equipment	On Duty Crash	Safety Equipment
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	RESTRAINT USE UNKNOWN
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		02	004	Injury
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated TRAPPED/EXTRICATED
Medical Transport EMS GROUND	EMS Agency Identifier 6000358			EMS Run #
Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT	Date of Death			Time of Death
Distracted By	Distracted By Source			
Distracted By Action				

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		Prior Action			
		Action			
		Action Other			
		To/From School			
02	004	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			