

01L0F2KRF6

2022-390770

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 SEBASTIAN SO	
Crash Date 09/23/2022		Crash Time 11:23 PM		Date Arrived 09/23/2022		Time Arrived 11:26 PM	
Date Notified 09/23/2022		Time Notified 11:24 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
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☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

ON 9/23/22 I WAS DISPATCHED TO THE INTERSECTION OF REGENT ST. AND MONROE ST. FOR A CAR VERSUS MOPED, WITH INJURIES. UPON REVIEWING VIDEO FOOTAGE, I OBSERVED CORRIN J. HARRINGTON'S (F/W 1/9/02) SILVER CHEVROLET IMPALA (WI PLATE 802WNV) TRAVEL WESTBOUND ON REGENT ST. AND ATTEMPT A LEFT TURN FROM THE LEFT TURN LANE ONTO SOUTHBOUND MONROE ST. AT THE SAME TIME, OWEN D. MULTER (M/W 8/7/03) WAS TRAVELING EASTBOUND ON REGENT STREET, IN THE LEFTMOST LANE, ON HIS MOPED (WI PLATE B574J.) THE LIGHT HAD JUST TURNED YELLOW UPON BOTH VEHICLES' MOVEMENT INTO THE INTERSECTION. I OBSERVED HARRINGTON ATTEMPT THE LEFT TURN ONTO MONROE STREET, MAKING CONTACT WITH MULTER'S MOPED, WHICH LEAD TO MULTER EJECTING FROM THE MOPED AND COMING TO A REST A FEW FEET AWAY. MULTER WOULD LATER BE TRANSPORTED TO UW HOSPITAL FOR SIGNIFICANT LEG INJURIES. HARRINGTON WAS CONTACTED BY POLICE, AND STATED SHE WAS DRIVING AND WAS ATTEMPTING TO TURN LEFT ONTO SOUTHBOUND MONROE STREET AFTER PICKING HER FRIENDS UP FROM THE SCONNIE BAR ON 1421 REGENT ST. HARRINGTON STATED SHE WAS A DESIGNATED DRIVER, AND DID NOT CONSUME ANY ALCOHOL OR OTHER IMPAIRING SUBSTANCE. HARRINGTON DID NOT APPEAR IMPAIRED. HARRINGTON WAS THEN CITED FOR FAILURE TO YIELD ON A LEFT TURN (CITATION #BG447312-5.) NFI PO S. SO #5847 PLEASE SEE ORIGINAL AND SUPPLEMENTAL CASE REPORTS FOR MORE SPECIFIC DETAILS.

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Location

INTERSECTION ON REGENT ST AT MONROE ST IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.067784391	Longitude -89.412770019
	X Coordinate 303551.40625	Y Coordinate 4771167.5
	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 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 FULL CONTROL	Special Study
Within Interchange Area YES	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION	
Closure Type CLOSURE-ONE DIRECTION		Reasons for Closure	
Date Initial Lane/Rd Closed 09/23/2022	Time Initial Lane/Rd Closed 11:30 PM	LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date All Lanes Open 09/24/2022	Time All Lanes Open 12:53 AM	Date Scene Cleared 09/24/2022	Time Scene Cleared 12:57 AM

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 3	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 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, WITH A CONTINUOUS L		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 802WNV		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
Vehicle Identification Number 2G1WT58K981256604		Make CHEVROLET	Year 2008	Model IMPALA LT		

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UNIT	VEHICLE	Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR	Bus Use	
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage		
		Extent Of Damage FUNCTIONAL DAMAGE	11 - LEFT FRONT CORNER		
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
		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 TODD MICHAEL HARRINGTON	Owner Address 134 FRAME AVE WAUKESHA, WI 53186 , US		
		Sequence Of Events			
		01	01	Event MOTOR VEH IN TRANSPORT	
UNIT	VEHICLE	02	02	Event	
		03	03	Event	
		04	04	Event	
		Policy Holder			
		Insurance Company ALLSTATE-INS-CO	Individual TODD HARRINGTON		
UNIT	INDIVIDUAL	Individual			
		Driver CORRIN JESSEY HARRINGTON (262) 765-3854	Citations Issued 1	Sex FEMALE	
			Date of Birth 01/09/2002	Race WHITE	
		Address 1918 MADISON ST #1 MADISON, WI 53711 , US	Driver License Number H6521100250903 STATE: WISCONSIN COUNTRY: UNITED STATES		
		Safety Equipment			
UNIT	INDIVIDUAL	On Duty Crash	Safety Equipment		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		01	001	Injury	Injury Severity NO APPARENT INJURY
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	
01 001	Drug Type					
	Individual Condition APPEARED NORMAL					
	Individual					
	Passenger ROSE L PHILIPS (818) 304-1390		Citations Issued 0		Sex FEMALE	
			Date of Birth 09/23/1999		Race WHITE	
	Address 1918 MADISON ST #1 MADISON, WI 53711 , US		Driver License Number UNKNOWN STATE: CALIFORNIA 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			
01 002	Injury		Injury Severity NO APPARENT 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 ROSE E DECAMARA (818) 585-5301		Citations Issued 0	Sex FEMALE
			Date of Birth 08/11/1999	Race WHITE
	Address 1010 E. WASHINGTON AVE. #514 MADISON, WI 53703 , US		Driver License Number Y2225174 STATE: CALIFORNIA COUNTRY: UNITED STATES	
	Safety Equipment		On Duty Crash	
			Safety Equipment SHOULDER & LAP BELT	
	Row 06 -UNKNOWN ROW	Seat Position 09 - RIGHT		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	UNIT INDIVIDUAL	Injury		Injury Severity NO APPARENT INJURY
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	
Distracted By		Distracted By Source		

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UNIT	INDIVIDUAL	Distracted By Action				
		Non Motorist	Striking Unit #	Location		
			Prior Action			
		Action				
		Action Other			To/From School	
		Drug & Alcohol	Suspected Alcohol Use		Suspected Drug Use	
			NO		NO	
		Alcohol Test Given		Alcohol Test Type	Alcohol Test Results	
		TEST NOT GIVEN				
		Drug Test Given		Drug Test Type	Drug Test Results	
TEST NOT GIVEN						
01	003	Drug Type				
		Individual Condition				
		APPEARED NORMAL				
Violations						
01	UTC Number		Issue To?	Statute Number	Description	
	BG447312		001	346.18(2)	FAIL/YIELD WHILE MAKING LEFT TURN	

Unit Summary

UNIT	02	Unit Status		Vehicle Operating As Classification		Unit Type	
		IN TRANSIT		D CLASS		MOTORCYCLE	
		Vehicle Type				Operating As Endorsements	
		MOPED					
		Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types	
		1		0	0	0	
		Insurance?	Direction Of Travel	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit	Total Lanes	
		UNKNOWN	EASTBOUND		25	2	
		Most Harmful Event: Collision With		Special Function		Emergency Motor Vehicle Use	
		MOTOR VEH IN TRANSPORT		NO SPECIAL FUNCTION		NOT APPLICABLE	
Traffic Way		Traffic Control		Traffic Control Inoperative/Missing			
TWO-WAY, NOT DIVIDED		TRAFFIC SIGNAL		NO			
Surface Type		Road Curvature		Road Grade			
BLACKTOP (BITUMINOUS)		STRAIGHT		LEVEL			
Truck Bus or HazMat							
NO							
02	02	Vehicle					
		License Plate Number		Plate Type	St	Country of Issuance	
		B574J		MPD - MOPED	WI	UNITED STATES	
		Vehicle Identification Number		Make	Year	Model	
RFVPM206G1011667		GENUINE SCOOTER CO	2016	UNKNOWN			
Color		Body Style		Bus Use			
WHI - WHITE		MP - MOPED					

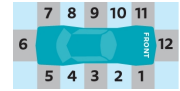
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UNIT	VEHICLE	Initial Contact Point 10 - LEFT SIDE FRONT		Vehicle Damage 15 - ALL AREAS	
		Extent Of Damage DISABLING DAMAGE			
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By	
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
		Driver Prior Action Other		NOT APPLICABLE	
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION			
02	02	Owner Name OWEN DENNIS MULTER (920) 912-4411		Owner Address 155 LANGDON ST MADISON, WI 53703 , US	
Sequence Of Events					
01	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
02	02	Event			
		Event			
03	03	Event			
		Event			
04	04	Event			
		Event			
Individual					
UNIT	INDIVIDUAL	Driver OWEN DENNIS MULTER (920) 912-4411		Citations Issued 0	Sex MALE
				Date of Birth 08/07/2003	Race WHITE
		Address 155 LANGDON ST MADISON, WI 53703 , US		Driver License Number M4366440328709 STATE: WISCONSIN COUNTRY: UNITED STATES	
02	004	Safety Equipment		On Duty Crash	
				Protective Gear	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE	
		Helmet Use NO		Helmet Compliance UNKNOWN	
		Eye Protection NO		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	
		Medical Transport EMS GROUND		EMS Agency Identifier 6000358	EMS Run # M4
		Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT		Date of Death	Time of Death
		Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	



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UNIT INDIVIDUAL 02 004	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			