

01L1MRSSFF
2022-156600

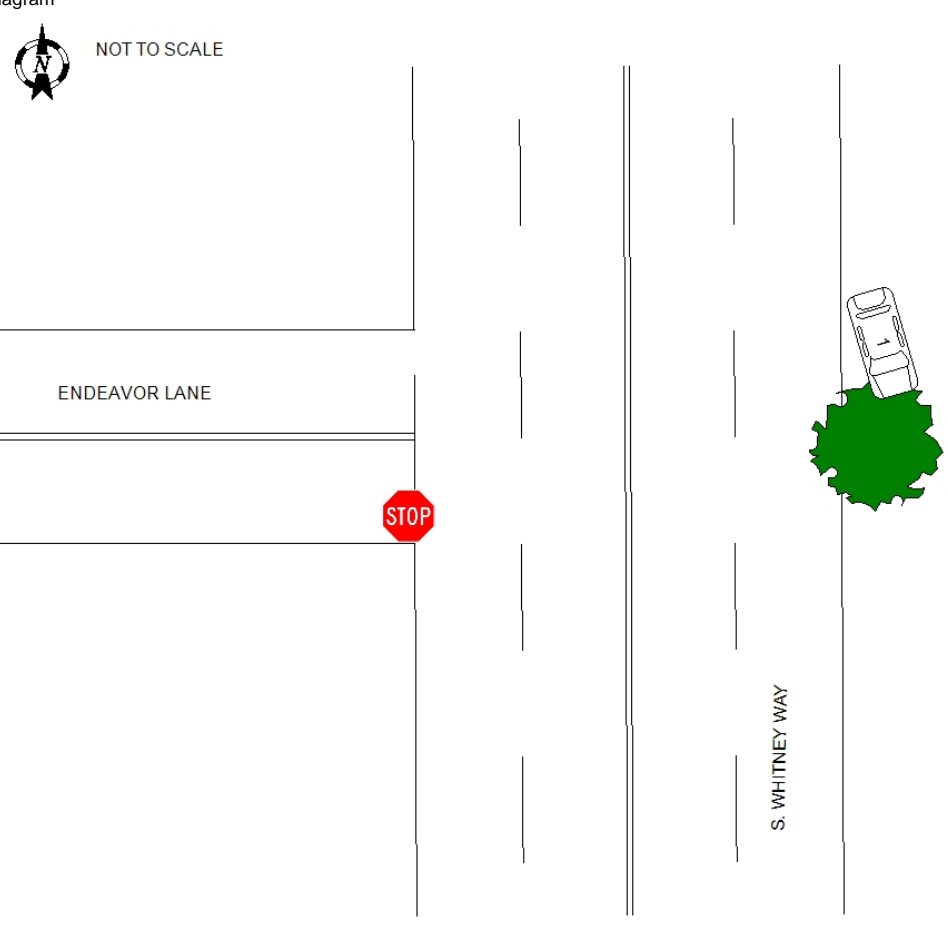
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 CRIM		Investigating Officer/Deputy OFFICER BRITTNEY LATHROP	
Crash Date 04/28/2022		Crash Time 02:13 AM		Date Arrived 04/28/2022		Time Arrived 02:22 AM	
Date Notified 04/28/2022		Time Notified 02:14 AM		Total Units 01		Total Injured 01	Total Killed 01
<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 NONE
		Photos By MAGSAMAN
		Additional Information PHOTOS, RECONSTRUCTION, FATAL CRASH SUPPLEMENT

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

UNIT 1 WAS TRAVELING EASTBOUND ON ENDEAVOR LANE. UNIT 1 FAILED TO STOP AT A STOP SIGN CROSSING S. WHITNEY WAY AND STRIKING A TREE ON THE EAST SIDE OF WHITNEY WAY. REFER TO WRITTEN REPORTS UNDER CASE NUMBER 22-156600 FOR ADDITIONAL INFORMATION

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Location

INTERSECTION ON S WHITNEY WAY AT ENDEAVOR LN IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.057794885	Longitude -89.47212228
	X Coordinate 298686	Y Coordinate 4770199
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event TREE		First Harmful Event Location SHOULDER RIGHT	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DARK/LIGHTED	
Road Surface Condition(s) DRY		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 NO	Junction Location INTERSECTION	Intersection Type T-INTERSECTION	
Closure Type LANE CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 04/28/2022	Time Initial Lane/Rd Closed 02:30 AM	LAW ENFORCEMENT, FIRE/EMS	
Date All Lanes Open 04/28/2022	Time All Lanes Open 03:00 AM	Date Scene Cleared 04/28/2022	Time Scene Cleared 09:00 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 2	Train/Bus # Recorded	Total # Citations Issued 3	Total Trailers 0	Total HazMat Types 0		
	Insurance? UNKNOWN	Direction Of Travel EASTBOUND	<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 DIVIDED HWY MEDIAN W/BARRIER		Traffic Control STOP SIGN		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 124ZGH		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 5Y2SL62864Z419560		Make PONTIAC	Year 2004	Model VIBE			

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UNIT VEHICLE	Color BLK - BLACK	Body Style 4D - 4DR	Bus Use		
	Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 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 SCHMIDTS TOWING			
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors			
	Driver Prior Action Other	NOT APPLICABLE			
UNIT VEHICLE	Driver Actions EXCEED SPEED LIMIT, FAILURE TO CONTROL, DISREGARDED STOP SIGN				
	Owner Name THOMAS G MONSON	Owner Address 105 BEACH AVE EDGERTON, WI 53534 , US			
	Sequence Of Events				
UNIT VEHICLE	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT INDIVIDUAL	Individual				
	Driver THOMAS G MONSON	Citations Issued 3	Sex MALE		
		Date of Birth 09/20/1964	Race WHITE		
	Address 105 BEACH AVE EDGERTON, WI 53534 , US	Driver License Number M5258276434009 STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	01	001	Injury SUSPECTED MINOR INJURY	Airbag DEPLOYED-COMBINATION	
			Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
			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 YES	Suspected Drug Use NO
	Alcohol Test Given TEST GIVEN		Alcohol Test Type BLOOD	Alcohol Test Results PENDING
	Drug Test Given TEST GIVEN		Drug Test Type BLOOD	Drug Test Results PENDING
01 001	Drug Type			
	Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL			
	Individual			
	Passenger BONNIE JEAN MONSON		Citations Issued 0	Sex FEMALE
			Date of Birth 02/11/1938	Race WHITE
	Address 111 BEACH AVE EDGERTON, WI 53534 , US		Driver License Number M5250703855104 STATE: WISCONSIN COUNTRY: UNITED STATES	
	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	
01 002	Injury		Injury Severity FATAL INJURY	Airbag DEPLOYED-COMBINATION
	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 04/28/2022	Time of Death 04:17
	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 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				
01	002	Violations				
		UTC Number BF045538	Issue To? 001	Statute Number 346.63(1)(A)	Description OWI (7th, 8th or 9th)	
		UTC Number BF045539	Issue To? 001	Statute Number 343.44(1)(A)	Description OPERATING WHILE SUSPENDED-CAUSE DEATH	
03	02	01	UTC Number BF045540	Issue To? 001	Statute Number 346.57(2)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL