

01L0KRB01T

2022-240611

WISCONSIN MOTOR VEHICLE CRASH REPORT

MADISON POLICE DEPARTMENT
211 S CARROLL ST
MADISON, WI 53703
(608) 266-4275

01L0KRB01T

Document Number Override		Primary Crash Document #		Agency Crash Number 604 "MUNI"		Investigating Officer/Deputy OFFICER KEVIN COSTIN	
Crash Date 06/21/2022		Crash Time 08:43 AM		Date Arrived 06/21/2022		Time Arrived 08:45 AM	
Date Notified 06/21/2022		Time Notified 08:44 AM		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
CITY OF MADISON POLICE DEPT

Additional Information
**ECM/EDR DOWNLOAD, PHOTOS,
WITNESS STATEMENTS**

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

UNIT #1 WAS TRAVELING OUTBOUND ON E WASHINGTON AVE APPROACHING THE INTERSECTION WITH RETHKE AVE. UNIT #2 MADE A RIGHT TURN FROM RETHKE AVE ONTO E WASHINGTON AVE INTO THE RIGHT LANE (HEADING OUTBOUND). UNIT #1 WAS TRAVELING AT A HIGH RATE OF SPEED AND TRIED TO PASS UNIT #2 ON THE RIGHT. UNIT #1 STRUCK THE REAR BUMPER ALONG THE PASSENGER SIDE CORNER OF UNIT #2. UNIT #1 LEFT THE ROADWAY, STRUCK A TREE, AND THE DRIVER WAS THROWN FROM THE MOTORCYCLE. DRIVER OF UNIT #1 SUFFERED SIGNIFICANT INJURIES. UNIT #1 SUSTAINED MASSIVE DAMAGE (TOTALED) AND UNIT #2 SUSTAINED MODERATE DAMAGE.

01L0KRB01T

2022-240611

WISCONSIN MOTOR VEHICLE CRASH REPORT

MADISON POLICE DEPARTMENT
211 S CARROLL ST
MADISON, WI 53703
(608) 266-4275

Location

ON E WASHINGTON AVE/ USH151 NB 131 FT N OF RETHKE AVE IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.109393775	Longitude -89.335454182
	X Coordinate 309975.46875	Y Coordinate 4775610.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 03 - FRONT TO REAR		Light Condition DAYLIGHT	
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 PARTIAL CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION-RELATED	Intersection Type FOUR-WAY INTERSECTION	
Closure Type LANE CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 06/21/2022	Time Initial Lane/Rd Closed 08:47 AM	LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date All Lanes Open 06/21/2022	Time All Lanes Open 10:15 AM	Date Scene Cleared 06/21/2022	Time Scene Cleared 10:15 AM

Unit Summary

UNIT 01	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 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 30	Total Lanes 3	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		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 977TJ		Plate Type CYC - CYCLE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number JKAZX4R159A007582		Make KAWASAKI	Year 2009	Model ZX600P		

01L0KRB01T

2022-240611

WISCONSIN MOTOR VEHICLE CRASH REPORT

MADISON POLICE DEPARTMENT
211 S CARROLL ST
MADISON, WI 53703
(608) 266-4275

UNIT VEHICLE	Color BLK - BLACK	Body Style MC - MOTORCYCLE	Bus Use	
	Initial Contact Point 12 - FRONT	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	15 - ALL AREAS		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By SCHMIDTS TOW CO		
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE		
UNIT VEHICLE	Driver Actions EXCEED SPEED LIMIT, FAILURE TO CONTROL, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER			
	Owner Name SHARON A SMITH (608) 239-7399	Owner Address 2313 FISH HATCHERY RD APT B MADISON, WI 53713 , US		
01	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event RUN OFF ROADWAY RIGHT		
	03	Event TREE		
	04	Event		
UNIT INDIVIDUAL	Individual			
	Driver BOBBY PRYOR	Citations Issued 1	Sex MALE	
		Date of Birth 06/12/1967	Race BLACK/AFRICAN AMERICAN	
	Address 2006 PACKERS AVE APT A MADISON, WI 53704 , US	Driver License Number P6600606721203 STATE: WISCONSIN COUNTRY: UNITED STATES		
01	Safety Equipment			
	On Duty Crash		Protective Gear	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	GLOVES	
	Helmet Use NO		Helmet Compliance UNKNOWN	
	Eye Protection YES: WORN		Tint Compliance UNKNOWN	
	Injury	Injury Severity SUSPECTED SERIOUS INJUR	Airbag NOT APPLICABLE	
		Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport EMS GROUND		EMS Agency Identifier 6000358	EMS Run # M10
	Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT		Date of Death	Time of Death

01L0KRB01T

2022-240611

WISCONSIN MOTOR VEHICLE CRASH REPORT

MADISON POLICE DEPARTMENT
211 S CARROLL ST
MADISON, WI 53703
(608) 266-4275

UNIT INDIVIDUAL 01 001	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 BI342511	Issue To? 001	Statute Number 346.57(2)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL

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 2	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 3	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		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					
	02	License Plate Number ACW8904		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
Vehicle Identification Number 2T1BURHE8EC057335		Make TOYOTA	Year 2014	Model COROLLA		

01L0KRB01T

2022-240611

WISCONSIN MOTOR VEHICLE CRASH REPORT

MADISON POLICE DEPARTMENT
211 S CARROLL ST
MADISON, WI 53703
(608) 266-4275

UNIT VEHICLE	Color RED - RED	Body Style SD - SEDAN	Bus Use
	Initial Contact Point 05 - RIGHT REAR CORNER	Vehicle Damage 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR	
	Extent Of Damage FUNCTIONAL DAMAGE		
	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG	Vehicle Removed By SCHMIDTS TOW CO	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE	
UNIT VEHICLE	Driver Prior Action Other		
	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name LORRAINE DAVIS (608) 669-1807	Owner Address 49 STONEHAVEN DR # 2 SUN PRAIRIE, WI 53590 , US	
UNIT 02	Sequence Of Events		
	Event RIGHT TURN		
	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
UNIT 04	Policy Holder		
	Insurance Company STATE-FARM-GENERAL-INS-CO	Individual LORRAINE DAVIS	
	Individual		
UNIT INDIVIDUAL	Driver LORRAINE DAVIS (608) 669-1807	Citations Issued 0	Sex FEMALE
		Date of Birth 09/05/1957	Race BLACK/AFRICAN AMERICAN
	Address 49 STONEHAVEN DR # 2 SUN PRAIRIE, WI 53590 , US	Driver License Number D1205205782507 STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		
	On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
UNIT 02	Row 01 - FRONT ROW	Seat Position 07 - LEFT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	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 #

01L0KRB01T

2022-240611

WISCONSIN MOTOR VEHICLE CRASH REPORT

MADISON POLICE DEPARTMENT
211 S CARROLL ST
MADISON, WI 53703
(608) 266-4275

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 GIVEN		Alcohol Test Type BLOOD		Alcohol Test Results PENDING	
	Drug Test Given TEST GIVEN		Drug Test Type BLOOD		Drug Test Results PENDING	
02 002	Drug Type					
	Individual Condition APPEARED NORMAL, OTHER					
	Individual					
	Passenger RAYMOND DAVIS (608) 669-1807		Citations Issued 0		Sex MALE	
			Date of Birth 07/01/1957		Race BLACK/AFRICAN AMERICAN	
	Address 49 STONEHAVEN DR # 2 SUN PRAIRIE, WI 53590 , US		Driver License Number			
	Safety Equipment		On Duty Crash		Safety Equipment SHOULDER & LAP BELT	
	Row 01 - FRONT ROW		Seat Position 09 - RIGHT			
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
02 003	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	

2022-240611

**MADISON POLICE DEPARTMENT
211 S CARROLL ST
MADISON, WI 53703
(608) 266-4275**

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		
02 003	Drug Type						
	Individual Condition APPEARED NORMAL						

WITN 01 ESS	Individual	Address	Date of Birth
	ROBERT JOHN KASTORFF (608) 279-1333	3356 BASIL DR MADISON, WI 53704 , US	04/04/1988

WITN 02 ESS	Individual JEFFERY BOYCE	Address 7850 MORRISON ST #3 MORRISONVILLE, WI 53571 , US	Date of Birth 04/26/1974
----------------	------------------------------------	--	------------------------------------