

01L01Z7RDV

2022-267792

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 07/07/2022		Crash Time 03:30 PM		Date Arrived 07/07/2022		Time Arrived 03:37 PM	
Date Notified 07/07/2022		Time Notified 03:32 PM		Total Units 02		Total Injured 02	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 JULY 7, 2022 UNIT 1 WAS TRAVELING WESTBOUND ON ELDERBERRY RD. UNIT 1 WAS STOPPED AT THE INTERSECTION OF ELDERBERRY RD. AND N. PLEASANT VIEW RD. UNIT 1 THEN ENTERED INTO TRAFFIC WITHOUT SEEING UNIT 2 TRAVELING SOUTH ON PLEASANT VIEW RD. UNIT 1 AND UNIT 2 COLLIDED RESULTING IN DISABLING DAMAGE TO BOTH UNITS AS WELL AS A POSSIBLE BROKEN ARM FOR THE DRIVER OF UNIT 2. UNIT 2 CONTINUED ON KNOCKING DOWN A STREET SIGN AND STOP SIGN ON THE SOUTHWEST CORNER OF ELDERBERRY RD. AND N. PLEASANT VIEW RD. BEFORE COMING TO REST IN THE GRASS TERRACE. UNIT 1 ENDED UP FACING NORTHWEST IN THE SOUTHBOUND LANE OF N. PLEASANT VIEW RD. DRIVER OF UNIT 1 WAS CITED FOR FAILURE TO YIELD FROM A STOP SIGN.

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Location

INTERSECTION ON N PLEASANT VIEW RD AT ELDERBERRY RD IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.067649333	Longitude -89.537128033
	X Coordinate 293425.21875	Y Coordinate 4771451.5
	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	Intersection Type FOUR-WAY INTERSECTION	
Closure Type LANE CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 07/07/2022	Time Initial Lane/Rd Closed 03:31 PM	LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date All Lanes Open 07/07/2022	Time All Lanes Open 04:21 PM	Date Scene Cleared 07/07/2022	Time Scene Cleared 04:27 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 35	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 STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	License Plate Number 333ZRT		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number JTMDJREV9HD104434		Make TOYOTA	Year 2017	Model RAV4 HV		

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UNIT VEHICLE	Color WHI - WHITE		Body Style UT - SPORT UTILITY VEHICLE	Bus Use	
	Initial Contact Point 01 - RIGHT FRONT CORNER		Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 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 GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
UNIT VEHICLE	Driver Actions FAILED TO YIELD RIGHT-OF-WAY				
01	01	Owner Name THOMAS JOSEPH YOSICK (608) 572-5159		Owner Address 9426 LOST MEADOW RD MIDDLETON, WI 53562 , US	
Sequence Of Events					
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company AMICA-MUTUAL-INS-CO		Individual SYDNEY YOSICK		
UNIT INDIVIDUAL	Individual				
	Driver SYDNEY ANN YOSICK (608) 572-5159		Citations Issued 1	Sex FEMALE	
			Date of Birth 07/15/2002	Race WHITE	
	Address 9426 LOST MEADOW RD MIDDLETON, WI 53562 , US		Driver License Number Y2207810275505 STATE: WISCONSIN COUNTRY: UNITED STATES		
01	001	Safety Equipment		On Duty Crash	
				Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		Injury		Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-CURTAIN
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				
		Violations				
		UTC Number BE797983	Issue To? 001	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN	

Unit Summary

UNIT 02	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 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	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 229FDB		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	

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02	UNIT VEHICLE	Vehicle Identification Number 5J8TC2H52KL038235	Make ACURA	Year 2019	Model RDX
		Color SIL - SILVER (ALUMINUM)	Body Style UT - SPORT UTILITY VEHICLE	Bus Use	
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 05 - RIGHT REAR CORNER, 08 - LEFT SIDE REAR, 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 OPERATOR		
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE		
02	UNIT VEHICLE	Driver Prior Action Other			
		Driver Actions NO CONTRIBUTING ACTION			
02	02	Owner Name JESSAMYN ELIZABETH CUNNINGHAM (608) 225-2350	Owner Address 3767 COUNTY ROAD P CROSS PLAINS, WI 53528 , US		
Sequence Of Events					
01	UNIT	Event MOTOR VEH IN TRANSPORT			
		Event TRAFFIC SIGN POST			
		Event			
		Event			
Policy Holder					
02	UNIT	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual JESSAMYN CUNNINGHAM		
		Individual			
02	UNIT INDIVIDUAL	Driver JESSAMYN ELIZABETH CUNNINGHAM	Citations Issued 0	Sex FEMALE	
			Date of Birth 09/02/1972	Race WHITE	
		Address 3767 COUNTY ROAD P CROSS PLAINS, WI 53528 , US	Driver License Number C5524257282200 STATE: WISCONSIN COUNTRY: UNITED STATES		
Safety Equipment					
02	002	On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
02	002	Injury	Injury Severity SUSPECTED SERIOUS INJUR	Airbag DEPLOYED-CURTAIN	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	

