2022-440325

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash Document # Agency MUNI		,			estigating Officer/Deputy FICER MATTHEW ARMBRUSTER			
2	Crash Date 10/27/2022			Date Ai 10/27/			me Arrived 5:38 PM			
ָּ	Date Notified	Time Notified		Total U	nits		otal Injured	Total Kill	ed	
5	10/27/2022	05:38 PM	1	03	1	01	1	00	Departing	
O L I I SON DOD	On Emergency Hi	t and Run	Lane Closu		Work Zone		Trailer o	r Towed	Reporting Threshold	
-	Government Property	Active Sc	hool Zone	School NO	Bus Related	Ta	ags			
	▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)			Amende	d	Secondary Crash	
Ì	Description	•							-	
ſ	Diagram						F	Reconstructio	n By	
	Distances Approximated Drawings Not to Scale				_	(Photos By		
				\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			00			
		01	02	03				Additional Info	ormation	
		<u> </u>	→→		<u>=-</u>)					
	University Ave.									
					Crai					
					Craig Ave					
					•					
	, a sworn law enforceme	ent officer, agre	ee that I have no	ot added	d any CJIS data ir	n this rep	oort.			
ľ	ON 10-27-22 AT APPROXIMATELY 1, 2, AND 3 WERE ALL TRAVELING	EASTBOUND ON	NUNIVERSITY AVE	. IN THE I	LEFT LANE OF TRAF	FIC. UNIT :	3 WAS FIRST	IN LINE AND	SLOWED TO A STOP FOR	
	A RED LIGHT AT THE INTERSECTI ENDED UNIT 2 WHICH PUSHED UI	ION WITH CRAIG	AVE. UNIT 2 WAS S	SECOND	IN LINE AND ALSO B	EGAN TO	SLOW. UNIT	1 WAS UNAB	SLE TO STOP AND REAR	

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WISCONSIN MOTOR VEHICLE CRASH REPORT

_		ation									
		UNIVERSITY AVE/ CT	HMS EB				Latitude			Longitud	de
	88 F						43.07979	1856		-89.472	2319277
		CRAIG AVE					X Coordina	ate		Y Coord	linate
		HE CITY OF MADISON	N				298742			477264	
	ט או	ANE COUNTY					Structure 7	Tyne			
							NO STRI				
L							110 0111	0010112			
(Cras	sh Scene									
Τ	First	Harmful Event					First Harm	ıful Event Lo	ocation		
	MO	OR VEH IN TRANSPO	ORT				ON ROA	DWAY			
F	Manr	ner of Collision					Light Cond	dition			
	03 -	FRONT TO REAR					DAYLIGI				
		Surface Condition(s)					Roadway				
							rtoddiray	1 40101(0)			
	DRY	•									
F	Envir	onment Factor(s)									
		. ,					NONE				
	NON	IC.					NONE				
j	Weat	ther Condition(s)									
	CLE	AR									
	Animal Type							o Trafficway			
	_						TRAFFIC	CWAY - OI	N ROAD		
	Cras	h Classification - Location					Crash Clas	ssification -	Jurisdiction		
	PUB	SLIC PROPERTY					NO SPECIAL JURISDICTION				
f	Triba	l Land					Access Co	ontrol			Special Study
							NO CON	TROL			
	Within Interchange Area Junction Location					Intersection	n Type				
	NO INTERSECTION					T-INTER	SECTION				
F	Closi	ure Type			Reasons for Closure						
		L CLOSURE									
		Initial Lane/Rd Closed	Time Initial Lane/Rd Close	d	LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS						
		7/2022	05:38 PM	u .							
		All Lanes Open	Time All Lanes Open		Date Scene Cleared			Tim	ne Scene Clea	arod	
		7/2022	06:33 PM						6:33 PM		
L			00.33 T W		10/21	12022		00.	.55 1 141		
		: Summary 💳									
	Unit :	Status			•	erating As C	lassification		Unit Type		
	IN T	RANSIT		DC	LASS				AUTOMOBILE		
.	Vehic	cle Type							Operating As Endorsements		ments
	PAS	SENGER CAR									
F	Total	Occs	Train/Bus # Recorded	Tota	I # Citat	tions Issued		Total Trail	ilers Total HazMa		:Mat Types
	1			1				0		0	
F	Insur	ance?	Direction Of Travel		Pre	CrashTire		Speed Lim	nit	Total Lan	es
	YES		EASTBOUND			Mark	'	35		2	
		Harmful Event: Collision V		Spec	cial Fun			1	Emergency		icle Use
		TOR VEH IN TRANSPO		NO	SPEC	IAL FUNC	TION		NOT APP	LICABLE	
	_	c Way		Traff	ic Cont	rol			Traffic Cont	rol Inoperat	tive/Missing
		DED HWY W/O TRAFI	FIC BARRIER			SIGNAL			NO		Ŭ
					d Curva				Road Grade	9	
				RAIGH				DOWNHIL			
L		R Bus or HazMat		311	., ., 011	-			20111111		
	NO	C Dus Of Flazivial									
_											
	1	/ehicle									
		License Plate Number			te Type			St	Country of Is		<u> </u>
		AHJ8244		AU	T - AU	TOMOBIL	.E	WI	UNITED ST	TATES	
	_	Vehicle Identification Nun		Mal		-		Year	Model		
	6	1G11C5SL6FF24603	3	СН	EVRO	LET		2015	MALIBU		
-				_	_		_	_	_	_	

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color	E	Body Style		Bus Use					
		WHI - WHITE		SD - SEDAN							
	ш	Initial Contact Point		Vehicle Damage		<u> </u>					
╘	님	12 - FRONT		01 - RIGHT FRONT C	ORNER. 02 - RIG	HT SIDE	7 8 9 10 11				
UNIT	VEHICL	Extent Of Damage		FRONT, 10 - LEFT SI	DE FRONT, 11 - L		6 g 12				
	7	DISABLING DAMAGE		CORNER, 12 - FRON	Т		5 4 3 2 1				
		Towed Due To Damage		Vehicle Removed By							
		TOWED DUE TO DISABLING		SCHMIDTS							
		What Driver Was Doing	\	Vehicle Factors							
		SLOW/STOPPING		NOT ADDITION DI E							
		Driver Prior Action Other	'	NOT APPLICABLE							
		Driver Actions									
	ш	FOLLOWING TOO CLOSE									
-											
UNIT	VEHICL										
ر	Ē										
		Owner Name		Owner Address							
_	_	ABDELKADER BENSAHNO	UNE	2301 S PARK ST							
0	2	(608) 692-6513		MADISON, WI 537	13,05						
	,	Sequence Of Events									
	5	Event MOTOR VEH IN TRANSPOR	rT								
			··-								
	07	Event									
	03	Event									
		Event									
	9	LVOIN									
_	1	Policy Holder									
UNIT		Insurance Company Individual									
ر		INSURED-LLOYDS		ABDELKADER BEI	NSAHNOUNE						
	I	Individual									
		Driver		Citations Issued	Sex						
	Ļ	ABDELKADER BENSAHNO (608) 692-6513	UNE	1	MALE						
	DOA	(000) 002 0010		Date of Birth	Race WHITE						
ş	₽			09/22/1993							
N	INDIN	Address 2301 S PARK ST # 7		Driver License Number B5250009334204							
	Z	MADISON, WI 53713, US		STATE: WISCONSIN COUNTRY: UNITED STATES							
		On Duty Cr	rash	Safety Equipment							
	Sai	fety Equipment									
		Row	Seat Position	SHOULDER & LAP	BELT						
		01 - FRONT ROW	07 - LEFT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
		Lyc i lotocuon		Till Compliance							
_	Ξ	Injury Seve	rity	Airbag							
01	90	Injury SUSPEC	TED SERIOUS INJUR	DEPLOYED-FRON	Г						
		'	ection Path			Trapped/Extricated					
			OT EJECTED/NOT APPI			NOT TRAPPED					
		Medical Transport		EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED									

2022-440325

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Hospital			Date of Death			Time of Dea	th			
	,	Distracted By	Distracted By S UNKNOWN	Source								
		Distracted By Action UNKNOWN										
		Non Motorist	Striking Unit #	Loca	ation							
		Prior Action										
		Action										
_	UAL											
INO	INDIVIDUAL											
	IND											
		A 5 01									I.T. /5	
		Action Other									To/From School	
	L	Orug & Alcohol	Suspected Alco	ohol Use		Suspected Drug Use NO						
		TEST NOT GIVEN			hol Test Type	/pe Alcohol Te					Fest Results	
		Drug Test Given TEST NOT GIVEN		Dru	g Test Type		Drug T	est Results				
01	001	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
	ļ	/iolations										
	01	UTC Number BI997168	Issue To? 001	Statute N 346.14(Description AUTOMOBILE FOLI	LOWIN	G TOO CL	.OSELY			
		Summary •		•								
		Status RANSIT				ehicle Operating As Class CLASS	ification		Unit Type AUTOMO I	BILE		
02		cle Type ORT) UTILITY VEHI	CLE						Operating As Endorsements			
	Total	Occs		s # Recorde	-	otal # Citations Issued		Total Traile	ers	Total HazN	Mat Types	
		ance?	Direction	Of Travel	0	_ Pre CrashTire		0 Speed Lim	it	Total Lane	S	
UNIT	YES	Harmful Event: Collision	EASTB	OUND	Sı	Mark Decial Function		35	Emergency	2 Motor Vehic	cle Use	
n	MO	TOR VEH IN TRANS			N	O SPECIAL FUNCTION	N		NOT APPLICABLE			
		ic Way DED HWY W/O TR<i>I</i>	AFFIC BARR	IER		raffic Control RAFFIC SIGNAL			Traffic Control Inoperative/Missing NO			
	Surface Type CONCRETE					oad Curvature TRAIGHT		Road Grade DOWNHILL				
		k Bus or HazMat										
		Vehicle										
		License Plate Number	ī			3.			Country of Issuance			
	ALB8472			1	AUT - AUTOMOBILE		WI	UNITED ST	TATES			

Crash Date 10/27/2022 Crash Time 05:38 PM

2022-440325

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Vehicle Identification Number		Mal	ке	Year	Model			
02		JN8AT3DD6MW312132		NIS	SSAN	2021	ROGUE			
						2021				
		Color			ly Style		Bus Use			
		GRY - GRAY		UT	- SPORT UTILITY V	EHICLE				
	Щ	Initial Contact Point		Ver	nicle Damage					
⊢	VEHICL	06 - REAR		01	- RIGHT FRONT CO	RNFR 05 - RIC	SHT REAR	7 8 9 10 11		
LINO	¥	Extent Of Damage		01 - RIGHT FRONT CORNER, 05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER, 11 -						
\supset	亩				FT FRONT CORNE		K OOKINEK, II -	5 4 3 2 1		
	>	DISABLING DAMAGE				X, 12 - 1 KON1				
		Towed Due To Damage		Veh	nicle Removed By					
		TOWED DUE TO DISABL	ING DAMAGE	SC	HMIDTS					
		What Driver Was Doing		Veh	nicle Factors					
		SLOW/STOPPING								
				NO	T APPLICABLE					
		Driver Prior Action Other			TAIT LIOADLL					
		Driver Actions								
	Щ	NO CONTRIBUTING ACT	ION							
╘	VEHICLE									
LNO	¥									
⊃	亩									
	>									
		Owner Name			Owner Address					
<u>~</u>	\sim	ANNE L SOLIE			972 GRIFFIN WAY					
05	02	(608) 234-7337			DEFOREST, WI 53	532 , US				
		0								
	,	Sequence Of Events								
	5	Event MOTOR VEH IN TRANSP	OPT							
	0	MOTOR VEH IN TRANSP	OKI							
	~	Event								
	02									
	•	Event								
	03									
		Event								
	9	Lvoin								
╘		Policy Holder								
		Insurance Company		1	ndividual					
-		HANOVER-INS-CO,-THE		1	ANNE SOLIE					
		Individual		<u> </u>						
					Situation of Lance	0				
		Driver ANNE L SOLIE			Citations Issued	Sex				
	ᆜ	(608) 234-7337		C		FEMALE				
	7	(000) 234-1331			Date of Birth	Race				
⊢	INDIVIDUA			(9/28/1965	WHITE	IITE			
	≥	Address			Oriver License Number					
-	₽	972 GRIFFIN WAY		S4000526584802						
	=	DEFOREST, WI 53532 , U	JS	5	STATE: WISCONSIN	COUNTRY: UN	IITED STATES			
		On Duty	Crook		National Carolina and					
	Sat	fety Equipment	Clasii	3	Safety Equipment					
	Ou.	ety Equipment								
		Row	Seat Position	5	SHOULDER & LAP I	BELT				
		01 - FRONT ROW	07 - LEFT							
		Helmet Use	<u> </u>	F	Helmet Compliance					
					•					
		Eye Protection			int Compliance					
		y 			Joinplialloo					
	C)	Injun/ S	everity	- 1	Airbag					
05	8 Injury No APPARENT INJURY				=					
-				ľ	NON DEPLOYED		Transad/F:-t-:			
		Ejected	Ejection Path				Trapped/Extricated			
	NOT EJECTED NOT EJECTED/NOT A				ARLE		NOT TRAPPED			

Crash Date 10/27/2022
Crash Time 05:38 PM

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Medical Transport			EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED									
		Hospital			Date of Death		Time of Death				
		Distrac	ted By Source	ee .							
		Distracted By UNKN	OWN								
		Distracted By Action UNKNOWN									
		Non Motorist Striking	J Unit #	Location							
		Prior Action									
		Action									
	ᆛ										
╘	INDIVIDUAL										
LIND	$\overline{\geq}$										
	Z										
		Action Other						To/From School			
		Suspec	ted Alcohol	Use	Suspected Drug Use						
		Drug & Alcohol No			NO						
		Alcohol Test Given		Alcohol Test Type	1		Alcohol Test Results				
		TEST NOT GIVEN		Drug Toot Type		TD T (D)					
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
05	002	Drug Type									
		1 F : 1 10 Fc									
		Individual Condition									
		APPEARED NORMAL									
	- 1	Individual									
		Passenger			Citations Issued	Sex					
	ب	KATHRYN MARY SOLIE (608) 630-2253			0	FEMALE					
	Ā	(606) 630-2253			Date of Birth	Race					
╘	INDIVIDUAL				09/22/1998	WHITE					
	\geq	Address 972 GRIFFIN WAY			Driver License Number \$4005139884200						
	Z	DEFOREST, WI 53532 ,	JS		STATE: WISCONSII	N COUNTRY: UNI	ITED STATES				
	0-4	On Dut	y Crash		Safety Equipment						
	Sai	fety Equipment									
		Row 01 - FRONT ROW	Seat P 09 - R		SHOULDER & LAP	BELT					
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
٠.	c	Iniury S	Severity		Airbag						
05	003	Inc.:	PPARENT		NON DEPLOYED						
		Ejected	Ejection Pa				Trapped/Extricated				
		NOT EJECTED	NOT EJE	CTED/NOT APPL			NOT TRAPPED				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #					

Crash Date 10/27/2022
Crash Time 05:38 PM

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

Crash Date 10/27/2022

Crash Time 05:38 PM

		Hospital			Date of Death		Time of Dea	ath			
		Distracted By Distr	racted By Source	•							
		Distracted By Action									
		Non Motorist Strik	ing Unit #	Location							
		Prior Action									
		Action									
_	NAL										
UNIT	INDIVIDUAL										
	Z										
,		Action Other							To/From School		
			pected Alcohol U	50	Suspected Drug Use				1.57.15.11.25.11.25.1		
	ı	Drug & Alcohol No	pected Alcohol O		NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Tes	t Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test F	Results				
02	003	Drug Type									
		Individual Condition									
		APPEARED NORMAL									
	Uni	Summary									
		Status		Ve	ehicle Operating As Class	ification	Unit Type	Unit Type			
	IN T	RANSIT		D	CLASS	AUTOMO	AUTOMOBILE				
03		icle Type				Operating A	Operating As Endorsements				
0		ORT) UTILITY VEHICLE									
	Tota 1	Occs	Train/Bus # Re	corded To	otal # Citations Issued	0	al Trailers	lers Total HazMat Types 0			
		rance?	Direction Of Tra		Pre CrashTire		ed Limit	Total Lane	es		
UNIT	YES		EASTBOUND		Mark Decial Function	35	Emergency	2	olo I loo		
5		: Harmful Event: Collision Wi		· ·	O SPECIAL FUNCTION	N	NOT APP		de Ose		
		ic Way		Tr	raffic Control		Traffic Cont	rol Inoperati	ve/Missing		
	DIVI	DED HWY W/O TRAFFI	C BARRIER	T	RAFFIC SIGNAL		NO				
	Surface Type CONCRETE				oad Curvature			Road Grade			
					TRAIGHT		DOWNHIL	DOWNHILL			
	Truc NO	k Bus or HazMat									
	,	Vehicle									
		License Plate Number			Plate Type	St	Country of Is				
		APY9278			AUT - AUTOMOBILE	WI	UNITED S	TATES			
03	03	Vehicle Identification Numb KL7CJPSB5KB917974			Make CHEVROLET	Yea 201					
		Color		E	Body Style		Bus Use				
		WHI - WHITE			JT - SPORT UTILITY \	/EHICLE					

2022-440325

WISCONSIN MOTOR VEHICLE CRASH REPORT

LIND	VEHICLE	Initial Contact Point 06 - REAR Extent Of Damage FUNCTIONAL DAMAGE		/ehicle Damage 05 - RIGHT REAR CO REAR CORNER	RNER, 06 - REAR	, 07 - LEFT	7 8 9 10 11 6 2 2 1 12 5 4 3 2 1					
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR								
		What Driver Was Doing	\	/ehicle Factors								
		SLOW/STOPPING Driver Prior Action Other	1	NOT APPLICABLE								
LINO	VEHICLE	Driver Actions NO CONTRIBUTING ACTI	ON									
03	03	Owner Name BRIAN HERRERA MALDO (608) 888-3414	NADO	Owner Address 3580 BRECKENRI FITCHBURG, WI 5								
	;	Sequence Of Events										
	5	MOTOR VEH IN TRANSPO	ORT									
	02	Event										
	03	Event										
	8	Event										
_		Policy Holder										
UNIT		Insurance Company Individual										
ر		SAFECO-INS-CO-OF-AME	RICA	LIZ GUTIERREZ SA	NDOVAL							
		Individual Driver		Citations Issued	Sex							
		LIZ CAROLINA GUTIERRI	Z SANDOVAL	0	FEMALE							
	DIVIDUAL	(608) 888-3414		Date of Birth	Race							
LINO	€	Addess		09/14/1987								
5	INDI	Address 3580 BRECKENRIDGE CT # 5 FITCHBURG, WI 53713 , US		Driver License Number G3625238783407 STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sai	On Duty fety Equipment	Crash	Safety Equipment								
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP	BELT							
		Helmet Use	•	Helmet Compliance								
		Eye Protection		Tint Compliance								
03	004	Injury Se	verity PARENT INJURY	Airbag NON DEPLOYED								
		Ejected	Ejection Path	<u> </u>		Trapped/Extricated						
			NOT EJECTED/NOT APPL			NOT TRAPPED						
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #						
		Hospital		Date of Death		Time of Death						

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

Crash Date 10/27/2022

Crash Time 05:38 PM

		Distracted By	NOT APPLICABL	E (NOT DISTRAC	CTED)			
		Distracted By Action NOT DISTRACTE						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	JAL							
UNIT	INDIVIDUAL							
	<u>N</u>							
								1
		Action Other						To/From School
	L	Drug & Alcohol	Suspected Alcohol U NO	lse	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		
03	004	Drug Type						
		Individual Condition						
		APPEARED NORI	MAL					