

01L17BZLWC

2022-315284

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 119/WEST MUNI		Investigating Officer/Deputy OFFICER WILLIAM NEEDELMAN	
Crash Date 08/06/2022		Crash Time 11:13 AM		Date Arrived 08/06/2022		Time Arrived 11:20 AM	
Date Notified 08/06/2022		Time Notified 11:13 AM		Total Units 02		Total Injured 01	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input 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.

UNIT 1 WAS WB ON MCKEE PREPARING TO TURN SOUTHBOUND ONTO MAPLE GROVE. AS THE LIGHT TURNED YELLOW, UNIT 1 STARTED TO TURN SOUTHBOUND ONTO MAPLE GROVE AND COLLIDED WITH UNIT 2 THAT WAS EB ON MCKEE. UNIT 1 CAR HAD DISABLING DAMAGE AND WAS TOWED, DRIVER WAS NOT INJURED, AND THEY WILL BE CITED FOR NOT MAKING THE LEFT HAND TURN SAFELY. UNIT 2 DRIVER WAS INJURED, TRANSPORTED BY EMS AND UNIT 2 WAS TOWED DUE TO DAMAGE.NFA

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Location

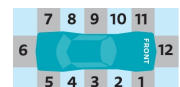
ON MAPLE GROVE DR 36 FT S OF MCKEE RD/ CTHPD SB IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.01560398	Longitude -89.498945346
	X Coordinate 296362.0625	Y Coordinate 4765578
	Structure Type NO STRUCTURE	

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 NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

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 1	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0		
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	Total Lanes 4		
	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 TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL		
	Truck Bus or HazMat NO						
	UNIT 01 VEHICLE	Vehicle					
		License Plate Number 306WVK		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 1FAHP3K21CL275254		Make FORD	Year 2012	Model FOCUS SE			
Color GRY - GRAY		Body Style 4H - HATCHBACK 4 DOOR		Bus Use			
Initial Contact Point 12 - FRONT		Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT					



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By SCHMIDTS	
	What Driver Was Doing LEFT TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY			
01	Owner Name CHRISTINE ANN LARSON (920) 527-0427		Owner Address 1106 E IRVING AVE OSHKOSH, WI 54901 , US	
	Sequence Of Events			
01	Event	MOTOR VEH IN TRANSPORT		
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company ALLSTATE		Individual CHRISTINE LARSON	
UNIT INDIVIDUAL	Individual			
	Driver CHRISTINE ANN LARSON (920) 527-0427		Citations Issued 1	Sex FEMALE
			Date of Birth 12/20/1995	Race WHITE
	Address 1106 E IRVING AVE OSHKOSH, WI 54901 , US		Driver License Number L6251019596003 STATE: WISCONSIN COUNTRY: UNITED STATES	
01	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 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	
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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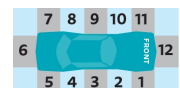
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UNIT INDIVIDUAL	01	001	Non Motorist		Striking Unit #	Location	
			Prior Action				
			Action				
	Action Other					To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		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 BG243474	Issue To? 001	Statute Number 346.31(3)(b)	Description IMPROPER LEFT TURN/INTERSECTION		

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type MOTORCYCLE	
	Vehicle Type AUTOCYCLE				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	Total Lanes 4	
	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 TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

02	Vehicle				
	License Plate Number 403UM		Plate Type CYC - CYCLE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number JKABRRJ17NDA24660		Make KAWASAKI	Year 2022	Model BR125
	Color YEL - YELLOW		Body Style MC - MOTORCYCLE		Bus Use
	Initial Contact Point 12 - FRONT				



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UNIT VEHICLE	Extent Of Damage DISABLING DAMAGE		Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By SCHMIDTS		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
	Owner Name ROWAN ST CLAIRE REID (608) 209-1767		Owner Address 7118 RAYMOND RD APT 5 MADISON, WI 53719 , US		
UNIT VEHICLE	Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT INDIVIDUAL	Individual				
	Driver ROWAN ST CLAIRE REID (608) 209-1767		Citations Issued 0	Sex MALE	
			Date of Birth 09/02/1965	Race BLACK/AFRICAN AMERICAN	
	Address 7118 RAYMOND RD APT 5 MADISON, WI 53719 , US		Driver License Number R3007376532209 STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	Protective Gear UNKNOWN	
	Helmet Use FULL-FACE		Helmet Compliance APPROVED		
	Eye Protection UNKNOWN		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 7	EMS Run #	
	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 02 002	Distracted By Action NOT DISTRACTED		
	<i>Non Motorist</i>	Striking Unit #	Location
	Prior Action		
	Action		
	Action Other		
	To/From School		
	<i>Drug & Alcohol</i>	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		