

01L0X1Z80L

2022-178903

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 403-MUN		Investigating Officer/Deputy OFFICER MICHAEL FRANKLIN	
Crash Date 05/13/2022		Crash Time 06:29 AM		Date Arrived 05/13/2022		Time Arrived 06:35 AM	
Date Notified 05/13/2022		Time Notified 06:30 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

<p>Diagram</p>	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 2 WAS TRAVELING SOUTH ON BASSETT ST WITH A GREEN LIGHT, WHEN UNIT 1 WAS TRAVELING EAST ON E. JOHNSON ST WITH A RED LIGHT. UNIT 1 COLLIDED WITH UNIT 1 DID NOT STOP FOR HIS RED SIGNAL AND COLLIDED WITH UNIT 2 PASSENGER SIDE OF THE VEHICLE. OWNER OF THE MOPED STATED THAT THE DRIVER OF THE MOPED HAS IN THE PAST HAD PERMISSION TO OPERATE IT, BUT HE DID NOT KNOW THAT HE WAS OPERATING IT ON 05-13-22.

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Location

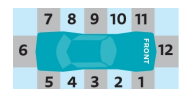
INTERSECTION ON W JOHNSON ST AT N BASSETT ST IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.072253841	Longitude -89.393572683
	X Coordinate 305128.6875	Y Coordinate 4771619
	Structure Type NO STRUCTURE	

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 INTERSECTION	Intersection Type FOUR-WAY INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type MOTORCYCLE		
	Vehicle Type MOPED				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 EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	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 ONE-WAY TRAFFIC		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing YES		
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL		
	Truck Bus or HazMat NO						
	UNIT 01 VEHICLE 01	Vehicle					
		License Plate Number C567M		Plate Type MPD - MOPED	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number L9NTEACB9G1001980		Make TAOTAO GROUP CO LTD	Year 2017	Model ATM			
Color BLK - BLACK		Body Style MP - MOPED		Bus Use			
Initial Contact Point 12 - FRONT		Vehicle Damage					
Extent Of Damage FUNCTIONAL DAMAGE		12 - FRONT					



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	Owner Name NICHOLAS STEVEN BIMMEL (920) 917-5995		Owner Address 1228 CHANDLER ST MADISON, WI 53703 , US	
	Sequence Of Events			
01	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
02				
03				
04				
UNIT	Policy Holder			
	Insurance Company SAFECO-INS-CO-OF-AMERICA		Individual NICHOLAS BIMMEL	
	Individual			
	Driver KORY KOHLER TETSCHLAG (920) 208-8813		Citations Issued 1	Sex MALE
UNIT	Date of Birth 06/08/2000		Race WHITE	
	Address 141 E. GORHAM ST #2 MADISON, WI 53704 , US		Driver License Number T3245110020809 STATE: WASHINGTON COUNTRY: UNITED STATES	
	On Duty Crash		Protective Gear	
	Safety Equipment		NONE	
01	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	Helmet Use NO		Helmet Compliance UNKNOWN	
	Eye Protection NO		Tint Compliance UNKNOWN	
	Injury		Airbag NON DEPLOYED	
001	Injury Severity SUSPECTED SERIOUS INJUR			
	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
	Medical Transport EMS GROUND		EMS Agency Identifier 1	EMS Run # 1
	Hospital UW HEALTH-AMERICAN CENTER		Date of Death	Time of Death
01	Distracted By		Distracted By Source UNKNOWN	
	Distracted By Action UNKNOWN			

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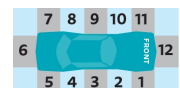
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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
	Action Other						
	To/From School						
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
	Drug Type						
	Individual Condition APPEARED NORMAL						
01	001	Violations					
		UTC Number BF817121	Issue To? 001	Statute Number 346.37(1)(c)1	Description OPERATOR VIOLATE RED TRAFFIC LIGHT		

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 SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire 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 ONE-WAY TRAFFIC		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	02	Vehicle				
		License Plate Number BLU072		Plate Type AUT - AUTOMOBILE	St MN	Country of Issuance UNITED STATES
		Vehicle Identification Number WVWBP7AN3DE569473		Make VOLKSWAGEN	Year 2015	Model CC
		Color BRZ - BRONZE		Body Style 4D - 4DR		Bus Use
		Initial Contact Point 03 - RIGHT SIDE MIDDLE				



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UNIT	VEHICLE	Vehicle Damage	
		Extent Of Damage FUNCTIONAL DAMAGE	03 - RIGHT SIDE MIDDLE
		Towed Due To Damage NOT TOWED	Vehicle Removed By DRIVER
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE
UNIT	VEHICLE	Driver Prior Action Other	
		Driver Actions NO CONTRIBUTING ACTION	
02	02	Owner Name CRAIG A HOLSCHLAG (507) 884-5033	Owner Address 818 SCENARIO LN SW ROCHESTER, MN 55902 , US
		Sequence Of Events	
02	01	Event MOTOR VEH IN TRANSPORT	
		Event	
		Event	
		Event	
UNIT	INDIVIDUAL	Policy Holder	
		Insurance Company STATE-FARM-GENERAL-INS-CO	Individual CRAIG HOLSCHLAG
02	002	Individual	
		Driver BRADON T HOLSCHLAG (507) 884-5033	Citations Issued 0
		Sex MALE	Date of Birth 10/14/2001
		Race WHITE	Address 409 W GORHAM ST #706 MADISON, WI 53704 , US
02	002	Driver License Number P766138799619 STATE: MINNESOTA COUNTRY: UNITED STATES	
		Safety Equipment	
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT
		Row 01 - FRONT ROW	Seat Position 07 - LEFT
02	002	Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		Injury	Injury Severity NO APPARENT INJURY
		Airbag NON DEPLOYED	
02	002	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	

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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 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	002	Drug Type				
		Individual Condition APPEARED NORMAL				
		Individual				
		Passenger KAILEE A MALONE (763) 267-8149		Citations Issued 0	Sex FEMALE	
		Date of Birth 05/01/2002		Race WHITE		
		Address 507 10TH ST SYEWARTVILLIE, MN 55976 , US		Driver License Number T460253612410 STATE: MINNESOTA COUNTRY: UNITED STATES		
		Safety Equipment	On Duty Crash		Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT		
		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	
		Distracted By		Distracted By Source		

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UNIT INDIVIDUAL 02 003	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
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition APPEARED NORMAL		