

01L1N17148

2022-473789

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

01L1N17148

Document Number Override		Primary Crash Document #		Agency Crash Number <b>MUNI</b>		Investigating Officer/Deputy <b>OFFICER MITCHELL FAVOR</b>	
Crash Date <b>11/20/2022</b>		Crash Time <b>05:32 PM</b>		Date Arrived <b>11/20/2022</b>		Time Arrived <b>05:42 PM</b>	
Date Notified <b>11/20/2022</b>		Time Notified <b>05:37 PM</b>		Total Units <b>02</b>		Total Injured <b>02</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags		
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>			<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash

## Description

<p>Diagram</p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

ON THE DATE TIME AND LOCATION ABOVE I ARRIVED TO AN ACCIDENT WITH INJURIES. ONCE ON SCENE I CONDUCTED AN INVESTIGATION WHERE BOTH PARTIES STATEMENTS CONCLUDED THAT WHITEHORSE HAD ENTERED THE INTERSECTION ATTEMPTING TO TURN LEFT. BOTH STATEMENTS FROM INVOLVED PARTIES SAID THE LIGHT WAS GREEN AND BECAUSE OF THIS I FOUND PROBABLE CAUSE TO CITE WHITEHORSE FOR FAILURE TO YIELD RIGHT OF WAY. I EXPLAINED THE TICKET TO HER IN PERSON. NFA M.FAVOR, 5913

01L1N17148

2022-473789

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

**Location**

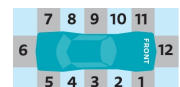
INTERSECTION ON JOHN NOLEN DR AT E LAKESIDE ST IN THE CITY OF MADISON IN DANE COUNTY	Latitude <b>43.055991471</b>	Longitude <b>-89.381824914</b>
	X Coordinate <b>306033.875</b>	Y Coordinate <b>4769786</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</b>		Light Condition <b>DARK/LIGHTED</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>	

**Unit Summary**

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements		
	Total Occs <b>3</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>		
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>35</b>	Total Lanes <b>2</b>		
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>TRAFFIC SIGNAL</b>		Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>						
	UNIT 01 VEHICLE	<b>Vehicle</b>					
		License Plate Number <b>993NEX</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>1FMCU9HD4JUB99038</b>		Make <b>FORD</b>	Year <b>2018</b>	Model <b>ESCAPE</b>			
Color <b>RED - RED</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use			
Initial Contact Point <b>04 - RIGHT SIDE REAR</b>		Vehicle Damage  <b>04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER</b>					
Extent Of Damage <b>DISABLING DAMAGE</b>							



01L1N17148

2022-473789

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>FAILED TO YIELD RIGHT-OF-WAY</b>			
01 01	Owner Name <b>PAUL W SPRING</b>		Owner Address <b>5132 TURNER AVE MADISON, WI 53716 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>KALIE LANE WHITEHORSE (608) 335-3018</b>		Citations Issued <b>1</b>	Sex <b>FEMALE</b>
			Date of Birth <b>10/13/1999</b>	Race <b>WHITE</b>
	Address <b>4018 STEINIES DR MADISON, WI 53714 , US</b>		Driver License Number <b>W3625129987309</b> STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance		
<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				
<b>Non Motorist</b>		Striking Unit #	Location	

01L1N17148

2022-473789

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other			To/From School
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results
		Drug Type			
		Individual Condition <b>APPEARED NORMAL</b>			
		<b>Individual</b>			
		Passenger <b>CINDY H WHITEHORSE</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth <b>11/02/1979</b>	Race <b>WHITE</b>		
Address , ,		Driver License Number			
UNIT	INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash	Safety Equipment
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>	<b>SHOULDER &amp; LAP BELT</b>	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		<b>Injury</b>	Injury Severity <b>SUSPECTED SERIOUS INJUR</b>	Airbag <b>DEPLOYED-SIDE</b>	
			Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>TRAPPED/EXTRICATED</b>
			Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6000358</b>
			Hospital <b>UW HEALTH-AMERICAN CENTER</b>		EMS Run #
			Date of Death		Time of Death
		<b>Distracted By</b>	Distracted By Source		
Distracted By Action					
<b>Non Motorist</b>					
Striking Unit #		Location			
Prior Action					

01L1N17148

2022-473789

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT	INDIVIDUAL	Action					
		Action Other			To/From School		
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>			
				Suspected Drug Use <b>NO</b>			
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results		
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results		
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					
		<b>Individual</b>					
		UNIT	INDIVIDUAL	Passenger <b>JOHANNA SPRING</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
				Date of Birth <b>08/09/1949</b>	Race		
Address , ,				Driver License Number			
<b>Safety Equipment</b>				On Duty Crash			
				Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>						
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
UNIT	INDIVIDUAL			<b>Injury</b>		Injury Severity <b>SUSPECTED SERIOUS INJUR</b>	Airbag <b>DEPLOYED-FRONT</b>
				Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
		Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6000358</b>	EMS Run #		
		Hospital <b>UW HEALTH-AMERICAN CENTER</b>		Date of Death	Time of Death		
		<b>Distracted By</b>					
		Distracted By Source					
		Distracted By Action					
		<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					

01L1N17148

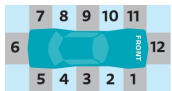
2022-473789

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT	INDIVIDUAL	Action			
		Action Other			
		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	
		Alcohol Test Results			
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	
		Drug Test Results			
		Drug Type			
		Individual Condition <b>APPEARED NORMAL</b>			
		<b>Violations</b>			
01	003	UTC Number <b>B1812932</b>	Issue To? <b>001</b>	Statute Number <b>346.06</b>	Description <b>FAILURE TO YIELD RIGHT OF WAY</b>

## Unit Summary

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
		Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements		
		Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>		
		Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>35</b>	Total Lanes <b>2</b>		
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
		Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>TRAFFIC SIGNAL</b>		Traffic Control Inoperative/Missing <b>NO</b>		
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>		
		Truck Bus or HazMat <b>NO</b>						
		<b>Vehicle</b>						
		UNIT	02	License Plate Number <b>V1892F</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
Vehicle Identification Number <b>2FMDK38C18BA35163</b>				Make <b>FORD</b>	Year <b>2008</b>	Model <b>EDGE</b>		
Color <b>ONG - ORANGE</b>				Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use		
Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>				Vehicle Damage <b>01 - RIGHT FRONT CORNER</b>				
Extent Of Damage <b>DISABLING DAMAGE</b>								
Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>				Vehicle Removed By <b>OPERATOR</b>				

01L1N17148

2022-473789

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
	Owner Name <b>ANDREA LATISHA HAZLEY (608) 772-5927</b>	Owner Address <b>101 DEER VALLEY RD MADISON, WI 53711 , US</b>	
02	<b>Sequence Of Events</b>		
	01	Event <b>MOTOR VEH IN TRANSPORT</b>	
	02	Event	
	03	Event	
	04	Event	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>MARSHAUD JARELL BAKER</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth <b>10/19/1995</b>	Race <b>BLACK/AFRICAN AMERICAN</b>
	Address <b>101 DEER VALLEY MADISON, WI 53711 , US</b>	Driver License Number <b>B2605509537908</b> STATE: WISCONSIN COUNTRY: UNITED STATES	
02	<b>Safety Equipment</b>		On Duty Crash
			Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>		Airbag
	Injury Severity <b>NO APPARENT INJURY</b>		<b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier
	Hospital		EMS Run #
Date of Death		Time of Death	
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
Distracted By Action <b>NOT DISTRACTED</b>			
<b>Non Motorist</b>		Striking Unit #	
Location			
Prior Action			

01L1N17148

2022-473789

WISCONSIN MOTOR VEHICLE  
CRASH REPORTMADISON POLICE DEPARTMENT  
211 S CARROLL ST  
MADISON, WI 53703  
(608) 266-4275

UNIT	INDIVIDUAL	Action					
		Action Other			To/From School		
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					