

01L0PGFB1P

2022-66474

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 CLOSED		Investigating Officer/Deputy OFFICER HUNTER TANK	
Crash Date 02/21/2022		Crash Time 03:05 PM		Date Arrived 02/21/2022		Time Arrived 03:17 PM	
Date Notified 02/21/2022		Time Notified 03:11 PM		Total Units 02		Total Injured 01	Total Killed 00
<input checked="" 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 checked="" 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 1 IS A CITY OF MADISON METRO BUS NUMBER 903. UNIT 1 DRIVER WAS ID WITH WI CDL. UNIT 1 WAS DROPPING OFF INDIVIDUALS AT THE BUS STOP IN FRONT OF 1186 MOORLAND RD. ACCORDING TO UNIT 1 DRIVER, NO OTHER INDIVIDUALS WERE SUPPOSED TO GET ON THE BUS, AS UNIT 1 WAS STRICTLY ONLY DROPPING PEOPLE OFF. AS UNIT 1 WAS ATTEMPTING TO LEAVE THE BUS STOP AND ENTER THE WB MOORLAND RD ROADWAY. AS UNIT 1 WAS DRIVING AWAY, AYE H SAYE, F/B., RAN TOWARDS THE BUS ATTEMPTING TO GET ON. AS SAYE APPROACHED, SHE SLIPPED ON MUD NEXT TO THE CURB, AND SLID ON HER BACK UNDERNEATH UNIT 1. UNIT 1 DRIVER DID NOT SEE SAYE SLIP, AND THE FRONT RIGHT TIRE OF UNIT 1 RAN OVER SAYE'S LEG. UNIT 1 IMMEDIATELY STOPPED AFTER HEARING SCREAMING AND THE FEELING OF RUNNING OVER SOMETHING. SAYE WAS TRANSPORTED TO UW HOSPITAL BY MADISON FIRE. PLEASE SEE ORIGINAL REPORT UNDER CITY OF MADISON CASE NUMBER 22-066474 FOR MORE. NFA P.O. H TANK 5948

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Location

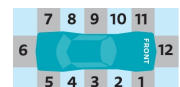
ON MOORLAND RD 111 FT W OF WAYLAND DR IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.033466448	Longitude -89.366278414
	X Coordinate 307229.40625	Y Coordinate 4767248.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event PEDESTRIAN		First Harmful Event Location OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAYLIGHT	
Road Surface Condition(s) WET, MUD/DIRT		Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS			
Weather Condition(s) CLOUDY			
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 B CLASS		Unit Type BUS		
	Vehicle Type PASSENGER BUS/TRANSIT BUS				Operating As Endorsements P - PASSENGER BUS		
	Total Occs 1	Train/Bus # Recorded 1	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 2		
	Most Harmful Event: Collision With PEDESTRIAN		Special Function VEHICLE USED AS OTHER BUS		Emergency Motor Vehicle Use EMERGENCY OPERATION, EMERGEN		
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO		
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL		
	Truck Bus or HazMat VEHICLE DESIGNED TO CARRY 9 OR MORE PPL, INCLUDING DRIVER						
	UNIT 01 VEHICLE 01	Vehicle					
		License Plate Number 67227		Plate Type BUS - BUS	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 15GGD291751074777		Make GILLIG	Year 2005	Model G29D102N4			
Color BLU - BLUE		Body Style BU - BUS		Bus Use TRANSIT/COMMUTER			
Initial Contact Point 00 - NON-COLLISION		Vehicle Damage 00 - NO DAMAGE					
Extent Of Damage NO DAMAGE							



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By	
	What Driver Was Doing ACCELERATING IN ROAD		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions LOOKED BUT DID NOT SEE			
01	Owner Name MADISON CITY (608) 266-4904		Owner Address 1101 E WASHINGTON AVE MADISON, WI 53703 , US	
	Sequence Of Events			
01	Event	PARKED MOTOR VEHICLE		
	Event	MOTOR VEH IN TRANSPORT		
	Event	REENTERING ROADWAY		
	Event	PEDESTRIAN		
UNIT	Policy Holder			
	Insurance Company TRANSIT-MUTUAL-INS-CORP-OF-WISCONSIN		Government MADISON CITY	
UNIT INDIVIDUAL	Individual			
	Driver GUILLERMO A GODOY MEDINA (608) 628-0107		Citations Issued 0	Sex MALE
	Date of Birth 11/11/1977		Race	
	Address 1014 N SUNNYVALE LN #C MADISON, WI 53713 , US		Driver License Number G3532807741107 STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment		On Duty Crash	
	Safety Equipment		SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	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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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 GIVEN		Alcohol Test Type BLOOD		Alcohol Test Results PENDING			
	Drug Test Given TEST GIVEN		Drug Test Type BLOOD		Drug Test Results PENDING			
	Drug Type							
	Individual Condition APPEARED NORMAL							
	UNIT TRUCK BUS	01	001	Carrier				
<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier				Source DRIVER				
Name MADISON CITY				Address 1101 E WASHINGTON AVE MADISON, WI 53703 , US				
GVWR 10,001-26,000 LBS		Vehicle Configuration BUS(SEATS FOR MORE THAN 15 OCCUPANTS, INCL		Cargo Body Type BUS (SEATS FOR MORE THAN 15 OCCUPAN				
US DOT #		Carrier Type NOT IN COMMERCE/GOVERNMENT		Permitted Load NOT APPLICABLE				
<input type="checkbox"/> OS/OW Load		WI Permit Number		<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present		
Measured Height		Measured Length		Measured Width		Measured Weight		

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification O CLASS		Unit Type PEDESTRIAN	
	Vehicle Type PEDESTRIAN				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre CrashTire 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 TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type DIRT		Road Curvature STRAIGHT		Road Grade LEVEL	

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Truck Bus or HazMat NO			
Sequence Of Events			
01	Event PEDESTRIAN		
02	Event REENTERING ROADWAY		
03	Event MOTOR VEH IN TRANSPORT		
04	Event UNKNOWN		
Individual			
UNIT INDIVIDUAL	Pedestrian AYE SAYE (205) 534-0186	Citations Issued 0	Sex FEMALE
		Date of Birth 01/04/2001	Race BLACK/AFRICAN AMERICAN
	Address 1309 DELAWARE BLVD MADISON, WI 53704 , US	Driver License Number S0000000150405 STATE: WISCONSIN COUNTRY: UNITED STATES	
Safety Equipment		On Duty Crash	
		Safety Equipment	
Row 98 - NOT APPLICABLE		Seat Position NONE	
Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance	
02	002	Injury Injury Severity SUSPECTED SERIOUS INJUR	
		Airbag NOT APPLICABLE	
Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport EMS GROUND		EMS Agency Identifier 6000358	EMS Run #
Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT		Date of Death	Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action NOT DISTRACTED			
Non Motorist		Striking Unit # 01	Location SHOULDER / ROADSIDE
Prior Action ENTERING/EXITING PARKED OR STOPPED MOTOR VEHICLE			
Action SUDDEN MOVEMENT INTO TRAFFIC, ENTERING/EXITING PARKED/STANDING VEHICLE, MAKING IMPROPER ENTRY TO OR EXIT FROM TRAFFICWAY			
Action Other		To/From School NO	
Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO

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02	002	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		

Witness

WITN 01 ESS	Individual ALFREDO ALEXANDER BOWEN (608) 710-8092	Address 1016 N SUNNYVALE LN # B MADISON, WI 53713 , US	Date of Birth 04/13/2004