

KRL0M2T5KS

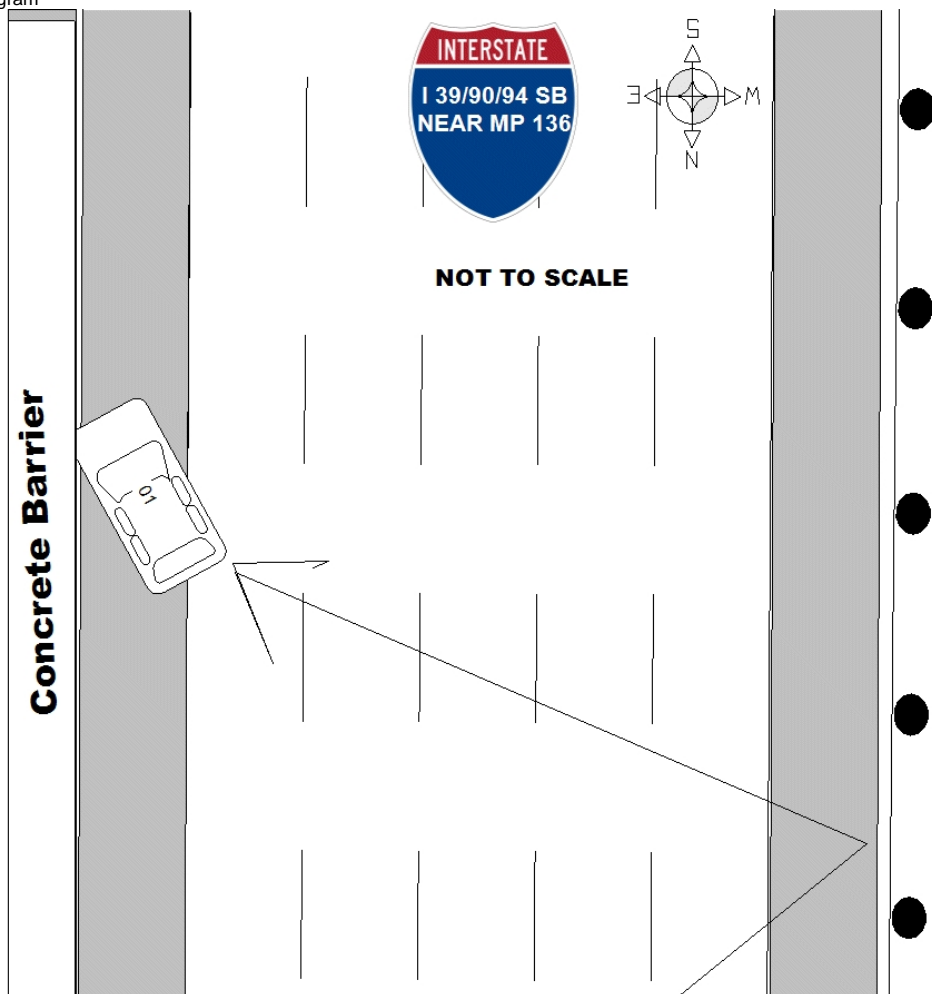
000222-1261

WISCONSIN MOTOR VEHICLE
CRASH REPORTWI STATE PATROL SWR/DEF
911 W NORTH ST
DE FOREST, WI 53532 1971
(608) 846-8500

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Document Number Override		Primary Crash Document #		Agency Crash Number 000222-1261		Investigating Officer/Deputy TROOPER H. BROWN	
Crash Date 07/30/2022		Crash Time 06:01 PM		Date Arrived 07/30/2022		Time Arrived 06:10 PM	
Date Notified 07/30/2022		Time Notified 06:02 PM		Total Units 01		Total Injured 01	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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 TROOPER J. SALAMONSKI
		Additional Information PHOTOS, WITNESS STATEMENTS

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

UNIT 1 WAS TRAVELING SOUTHBOUND ON I-39/90/94 SPEAKING TO HIS GIRLFRIEND ON THE PHONE. DRIVER PASSED OUT AT THE WHEEL DUE TO ALCOHOL CONSUMPTION AT A PARTY IN DEFOREST. UNIT 1 LEFT THE LANE OF TRAFFIC AND CRASHED INTO THE GUARD RAIL ON THE RIGHT SHOULDER BEFORE CUTTING ACROSS ALL LANES OF TRAFFIC AND COLLIDING HEAD ON WITH THE CONCRETE BARRIER ON THE LEFT MEDIAN SHOULDER. UNIT 1 BECAME DISABLED AT THAT POINT DUE TO DAMAGE SUSTAINED FROM CRASH. DRIVER BECAME PINNED AGAINST STEERING WHEEL AND ALL AIRBAGS DEPLOYED. WITNESSES STOPPED AND CLOSED LANE 1 AND ATTEMPTED TO RENDER AID. FIRE/EMS ARRIVED ON SCENE AND CLOSED LANE 1 WITH THEIR TRUCKS. DRIVER OF UNIT 1 WAS NOTICEABLY IMPAIRED FROM ALCOHOL. DRIVER OF UNIT 1 WAS TAKEN TO SSM HEALTH IN DOWNTOWN MADISON FOR CONCERNS OF NECK AND BACK INJURY. SEE FURTHER INFORMATION FOR OWI INVESTIGATION IN REPORT ON OFFENSE INCIDENT MANAGER SP4500. WITNESS STATEMENTS AND PHOTOS WILL ALSO BE UPLOADED TO REPORT.

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Location

ON IH39 SB 0.45 MI N OF LIEN RD IN THE CITY OF MADISON IN DANE COUNTY	Latitude 43.127607345	Longitude -89.291628398
	X Coordinate 313596.8125	Y Coordinate 4777534.5
	Structure Type	

Crash Scene

First Harmful Event GUARDRAIL FACE		First Harmful Event Location SHOULDER RIGHT	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		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	
Closure Type LANE CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 07/30/2022	Time Initial Lane/Rd Closed 06:07 PM	FIRE/EMS	
Date All Lanes Open 07/30/2022	Time All Lanes Open 06:35 PM	Date Scene Cleared 07/30/2022	Time Scene Cleared 06:42 PM

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 4	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel SOUTHBOUND	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit 70	Total Lanes 5	
	Most Harmful Event: Collision With CONCRETE TRAFFIC BARRIER		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
01	Vehicle					
	License Plate Number 919XYU		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1N4AL21E47C157921		Make NISSAN	Year 2007	Model ALTIMA 2.5	

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UNIT VEHICLE	Color BLK - BLACK	Body Style 4D - 4DR	Bus Use
	Initial Contact Point 02 - RIGHT SIDE FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT	
	Extent Of Damage DISABLING DAMAGE		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By UNIVERSITY TOWING	
	What Driver Was Doing LEAVING TRAVEL LANE	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
UNIT VEHICLE	Driver Actions OTHER CONTRIBUTING ACTION		
	Owner Name GREGORIO PRIMITIVO SOTERO	Owner Address 4410 DWIGHT DR. #4 MADISON, WI 53704 , US	
	Sequence Of Events		
01	01	Event GUARDRAIL FACE	
	02	Event CROSS CENTERLINE	
	03	Event CONCRETE TRAFFIC BARRIER	
	04	Event	
UNIT INDIVIDUAL	Individual		
	Driver LEONEL D ALTAMIRANO GUSQUI (608) 573-9449	Citations Issued 4	Sex MALE
		Date of Birth 09/25/1992	Race HISPANIC
	Address 125 E. GOODLAND ST. SUN PRAIRIE, WI 53590 , US	Driver License Number A4355249234503 STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment	On Duty Crash	Safety Equipment
		Row 01 - FRONT ROW	Seat Position 07 - LEFT
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	Injury	Injury Severity SUSPECTED SERIOUS INJUR	Airbag DEPLOYED-COMBINATION
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
	Medical Transport EMS GROUND	EMS Agency Identifier 6000358	EMS Run # 22304724
	Hospital ST MARYS HOSP	Date of Death	Time of Death

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UNIT	INDIVIDUAL	Distracted By		Distracted By Source HAND-HELD MOBILE PHONE		
		Distracted By Action		TALKING/LISTENING		
		Non Motorist	Striking Unit #	Location		
		Prior Action				
		Action				
		Action Other				
		To/From School				
		Drug & Alcohol	Suspected Alcohol Use YES		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	
01	001	Drug Type				
		Individual Condition				
		UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL				
		Violations				
		01	UTC Number B1180972	Issue To? 001	Statute Number 343.44(1)(a)	Description OPERATING WHILE SUSPENDED
		02	UTC Number B1190973	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR VEHICLE W/O INSURANCE
		03	UTC Number B1180974	Issue To? 001	Statute Number 346.57(2)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL
		04	UTC Number B1180975	Issue To? 001	Statute Number 346.63(1)(a)	Description OPERATING WHILE UNDER THE INFLUENCE