

OHIO

# TRAFFIC CRASH REPORT

CRASH REPORT # <b>10MPD 0384</b>	CRASH SEVERITY <b>3</b> 1 FATAL ERROR 3 PDR 2 INJURY 4 UNKNOWN	PRIVATE PROPERTY <input checked="" type="checkbox"/> YES	HIT/SKIP <b>1</b> 1 NOT HIT/SKIP 2 SOLVED 3 UNSOLVED	PHOTOS TAKEN <input type="checkbox"/> YES <input type="checkbox"/> NO	OH-2 OH-3 OH-1P OTHER <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
N.C.I.C. # <b>03801</b>	REPORTING AGENCY <b>MILLERSBURG POLICE DEPARTMENT</b>	# UNITS <b>2</b>	UNIT ERROR <b>01</b> 8 ANIMAL 9 UNKNOWN	DATE OF CRASH <b>03/03/2010</b>	

TIME OF CRASH <b>17:10</b>	DAY OF WEEK <b>WED</b>	CITY/VILLAGE/TOWNSHIP <b>VILLAGE</b>	NAME (OF CITY, VILLAGE OR TOWNSHIP) <b>MILLERSBURG</b>	COUNTY # <b>38</b>	LATITUDE <b>40320803</b>	LONGITUDE <b>081550302</b>
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CRASH OCCURRED ON	TYPE LOCATION POINT USED	LOCAL INFORMATION
PREFIX <b>CRASH LOCATION</b> <b>PRIVATE PROPERTY</b>	TYPE LOC <b>1</b>	<b>WAL-MART NORTH DRIVE</b>

AT REFERENCE	REFERENCE POINT USED
DIST. REF. <b>S</b>	DR <b>001492 WASHINGTON</b>
DR	REF POINT <b>04</b>

<b>A</b>	UNIT # <b>01</b>	# OF OCC <b>1</b>	NAME (LAST, FIRST, MIDDLE) <b>WILSON ROBERTA L</b>
ADDRESS (STREET, CITY, STATE, ZIP-CODE) <b>10672 SR 520 KILLBUCK OH 44637</b>			
SOCIAL SECURITY NUMBER	DATE OF BIRTH <b>09/28/1950</b>	AGE <b>59</b>	SEX <b>F</b>
HOME PHONE # <b>(330)276-6422</b>	WORK PHONE #		
DL STATE <b>OH</b>	DL # <b>RP096638</b>	LP STATE <b>OH</b>	LP # <b>ENG9700</b>
INJURED TAKEN BY <b>1</b> 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE		TRANSPORTED BY	INJURED TAKEN TO
OWNER NAME (IF SAME, WRITE 'SAME') <b>WOODROW E WILSON</b>		OWNER ADDRESS (STREET, CITY, STATE, ZIP-CODE) <b>10672 SR 520 KILLBUCK OH 44637</b>	
YEAR <b>2008</b>	MAKE <b>HONDA</b>	MODEL <b>OTHER</b>	COLOR <b>BROWN</b>
INSURANCE COMPANY <b>GRANGE</b>	TOWING SERVICE	OWNER PHONE # <b>(330)276-6422</b>	
OFFENSE CHARGED	OFFENSE DESCRIPTION	CITATION #	LOCAL CODE <input type="checkbox"/> YES <input type="checkbox"/> NO

<b>B</b>	UNIT # <b>02</b>	# OF OCC <b>1</b>	NAME (LAST, FIRST, MIDDLE) <b>SCHMIDT ROBERT E</b>
ADDRESS (STREET, CITY, STATE, ZIP-CODE) <b>685 WOOSTER RD MILLERSBURG OH 44654</b>			
SOCIAL SECURITY NUMBER	DATE OF BIRTH <b>12/26/1985</b>	AGE <b>24</b>	SEX <b>M</b>
HOME PHONE # <b>(330)231-9626</b>	WORK PHONE #		
DL STATE <b>OH</b>	DL # <b>SP109042</b>	LP STATE <b>OH</b>	LP # <b>EPL5178</b>
INJURED TAKEN BY <b>1</b> 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE		TRANSPORTED BY	INJURED TAKEN TO
OWNER NAME (IF SAME, WRITE 'SAME') <b>SCHMIDT, ROBERT E</b>		OWNER ADDRESS (STREET, CITY, STATE, ZIP-CODE) <b>685 WOOSTER RD MILLERSBURG OH 44654</b>	
YEAR <b>2000</b>	MAKE <b>DODGE</b>	MODEL <b>OTHER</b>	COLOR <b>MAROON</b>
INSURANCE COMPANY <b>SAFE AUTO</b>	TOWING SERVICE	OWNER PHONE #	
OFFENSE CHARGED	OFFENSE DESCRIPTION	CITATION #	LOCAL CODE <input type="checkbox"/> YES <input type="checkbox"/> NO

<b>C</b>	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP-CODE)			INJURED TAKEN BY <input type="checkbox"/> 1 NONE 4 OTHER <input type="checkbox"/> 2 EMS 5 UNKNOWN <input type="checkbox"/> 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	
<b>D</b>	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP-CODE)			INJURED TAKEN BY <input type="checkbox"/> 1 NONE 4 OTHER <input type="checkbox"/> 2 EMS 5 UNKNOWN <input type="checkbox"/> 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	

SEATING POSITION	SAFETY EQUIPMENT	AIR BAG	AIR BAG SWITCH	EJECTION	TRAPPED	INJURIES
<b>A 01</b> 01 FRONT - LEFT (MC DRIVER) 02 FRONT - MIDDLE 03 FRONT - RIGHT 04 SECOND - LEFT (MC PASS) 05 SECOND - MIDDLE 06 SECOND - RIGHT 07 THIRD - LEFT (MC PASSENGER SIDE CAR) 08 THIRD - MIDDLE 09 THIRD - RIGHT 10 SLEEPER SECTION OF CAB 11 ENCLOSED CARGO AREA 12 UNCLOSED CARGO AREA 13 TRAILING UNIT 14 EXTERIOR 15 OTHER 16 NON-MOTORIST 17 UNKNOWN	<b>A 04</b> 01 MANDATORY SEATBELT USED 02 SHOULDER BELT ONLY USED 03 LAP BELT ONLY USED 04 SHOULDER AND LAP BELT USED 05 CHILD SAFETY SEAT USED 06 HELMET USED 07 RESTRAINT USE UNKNOWN 08 NON-RESTRAINT 09 HELMET USED 10 PROTECTIVE PADS 11 RESTRICTIVE CLOTHING 12 LIGHTING 13 OTHER 14 UNKNOWN	<b>A 1</b> 1 NOT DEPLOYED 2 DEPLOYED - FRONT 3 DEPLOYED - SIDE 4 DEPLOYED BOTH FRONT SIDE 5 NOT APPLICABLE 6 DEPLOYMENT UNKNOWN	<b>A 1</b> 1 ON-OFF SWITCH NOT PRESENT 2 SWITCH IN ON POSITION 3 SWITCH IN OFF POSITION 4 UNKNOWN POSITION	<b>A 1</b> 1 NOT EJECTED 2 TOTALLY EJECTED 3 PARTIALLY EJECTED 4 NOT APPLICABLE 5 UNKNOWN	<b>A 1</b> 1 NOT TRAPPED 2 EXTRICATED BY MECHANICAL MEANS 3 FREED BY NON-MECHANICAL MEANS 4 UNKNOWN	<b>A 1</b> 1 NO INJURY 2 POSSIBLE 3 NON-INCAPACITATING 4 INCAPACITATING 5 FATAL INJURY 6 UNKNOWN
BLANK FOR WITNESS						<input type="checkbox"/> SUPPLEMENT <input checked="" type="checkbox"/> YES

MOTORIST / NON-MOTORIST

OCCUPANT

**UNIT NUMBERS**  
A **01** B **02**

**NON-MOTORIST LOCATION**  
A  B

01 MARKED CROSSWALK AT INTERSECTION  
02 AT INTERSECTION BUT NO CROSSWALK  
03 NON-INTERSECTION CROSSWALK  
04 DRIVEWAY ACCESS CROSSWALK  
05 IN ROADWAY  
06 NOT IN ROADWAY  
07 MEDIAN (BUT NOT ON SHOULDER)  
08 ISLAND  
09 SHOULDER  
10 SIDEWALK  
11 WITHIN 10 FEET OF ROADWAY (BUT NO SHOULDER, MEDIAN, SIDEWALK OR ISLAND)  
12 BEYOND 10 FEET OF ROADWAY (WITHIN TRAFFICWAY)  
13 OFFSIDE TRAFFICWAY  
14 SHARED USE PATHS OR TRAILS  
15 UNKNOWN

**TYPE OF UNIT**  
A **06** B **04**

**MOTORIST**  
01 SUBCOMPACT  
02 COMPACT  
03 MID-SIZED  
04 FULL-SIZE  
05 MINIVAN  
06 SPORT UTILITY VEHICLE  
07 PICKUP  
08 PASSENGER  
09 SINGLE UNIT TRUCK, 2 AXLES, 6 TIRES  
10 SINGLE UNIT TRUCK, 3 OR MORE AXLES  
11 TRUCK TRAILER  
12 TRUCK TRACTOR (BOBTAIL)  
13 TRACTOR SEMI TRAILER  
14 TRACTOR TRAILER - SHORT  
15 TRACTOR DOUBLE-LONG  
16 FIFTH WHEEL OR CONVERTER DOLLY  
17 TRACTOR TRIPLES  
18 MOTORCYCLE  
19 MOTORCYCLE  
20 SCHOOL BUS  
21 CITY BUS  
22 PUBLIC BUS  
23 OTHER BUS  
24 POLICE VEHICLE  
25 FIRE TRUCK  
26 AMBULANCE/RESCUE  
27 TAXI  
28 MOTOR HOME  
29 TRAIN  
30 FARM VEHICLE  
31 FARM EQUIPMENT  
32 SNOWMOBILE  
33 CONSTRUCTION EQUIPMENT  
34 ALL OTHERS

**NON-MOTORIST**  
35 ANIMAL WALKER  
36 ANIMAL W/BUCKY  
37 BICYCLE  
38 PEDESTRIAN  
39 PEDAL CYCLIST (BICYCLE, TRICYCLE, UNICYCLE, PEGAL CAR)  
40 SKATER  
41 OTHER-NON MOTORIST (WHEELCHAIR, ETC.)  
42 UNKNOWN

**IN EMERGENCY RESPONSE**  
A **1** B **1**

1 NO  
2 YES  
3 UNKNOWN

**DAMAGE SCALE**  
A **2** B **3**

1 NONE  
2 NON-FUNCTIONAL  
3 FUNCTIONAL DAMAGE  
4 DISABLING DAMAGE  
5 SEVERE  
6 UNKNOWN

**DAMAGE AREA**

**A**

**B**

**MOST DAMAGED AREA**  
A **02** B **04**

01 NONE  
02 CENTER FRONT  
03 RIGHT FRONT  
04 RIGHT SIDE  
05 RIGHT REAR  
06 REAR CENTER  
07 LEFT REAR  
08 LEFT SIDE  
09 LEFT FRONT  
10 TOP AND WINDOWS  
11 UNDERCARRIAGE  
12 LOAD TRAILER  
13 TOTAL (ALL AREAS)  
14 OTHER  
15 UNKNOWN

**POINT OF IMPACT**  
A **02** B **04**

01 NONE  
02 CENTER FRONT  
03 RIGHT FRONT  
04 RIGHT SIDE  
05 RIGHT REAR  
06 REAR CENTER  
07 LEFT REAR  
08 LEFT SIDE  
09 LEFT FRONT  
10 TOP AND WINDOWS  
11 UNDERCARRIAGE  
12 LOAD TRAILER  
13 TOTAL (ALL AREAS)  
14 OTHER  
15 UNKNOWN

**ACTION**  
A **3** B **4**

1 NON-CONTACT  
2 NON-COLLISION  
3 STRUCK  
4 STRUCK  
5 BOTH STRUCK AND STRUCK  
6 UNKNOWN

**STRIKING VEHICLE OVERRIDE/UNDERIDE**  
A **1** B **1**

1 NO UNDERIDE OR OVERRIDE  
2 UNDERIDE, COMPARTMENT INTRUSION  
3 UNDERIDE, NO COMPARTMENT INTRUSION  
4 UNDERIDE, COMPARTMENT INTRUSION UNKNOWN  
5 OVERRIDE, MOTOR VEHICLE IN TRANSPORT  
6 OVERRIDE, OTHER VEHICLE  
7 UNKNOWN IF UNDERIDE OR OVERRIDE

**PRE-CRASH ACTIONS**  
A **06** B **01**

**MOTORIST**  
01 MOVEMENTS ESSENTIALLY STRAIGHT AHEAD  
02 BACKING  
03 CHANGING LANES  
04 OVERTAKING/PASSING  
05 TURNING RIGHT  
06 TURNING LEFT  
07 MAKING U-TURN  
08 ENTERING TRAFFIC LANE  
09 LEAVING TRAFFIC LANE  
10 PARKED  
11 SLOWING OR STOPPED IN TRAFFIC  
12 DRIVERLESS  
13 OTHER  
14 UNKNOWN

**NON-MOTORIST**  
15 ENTERING OR CROSSING SPECIFIED LOCATION  
16 WALKING, RUNNING, JOGGING, PLAYING, CYCLING  
17 WORKING  
18 PUSHING VEHICLE  
19 APPROXIMATING OR LEAVING VEHICLE  
20 PLAYING OR WORKING ON VEHICLE  
21 STANDING  
22 OTHER  
23 UNKNOWN

**CONTRIBUTING CIRCUMSTANCES**  
A **02** B **01**

**MOTORIST**  
01 NONE  
02 FAILURE TO YIELD  
03 RAN RED LIGHT, OR STOP SIGN  
04 EXCEEDED SPEED LIMIT  
05 UNSAFE SPEED  
06 IMPROPER TURN  
07 LEFT OF CENTER  
08 FOLLOWED TOO CLOSELY (ACCA)  
09 IMPROPER LANE CHANGE (DROVE OFF ROAD/IMPROPER PASSING)  
10 IMPROPER BACKING  
11 IMPROPER START FROM PARKED POSITION  
12 STOPPED OR PARKED ILLEGALLY  
13 OPERATING VEHICLE IN ERRATIC, RECKLESS, CARELESS, NEGLIGENT OR AGGRESSIVE MANNER  
14 SWERVING TO AVOID (DUE TO ROAD, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC.)  
15 FAILURE TO CONTROL  
16 VISION OBSTRUCTION  
17 DRIVER INATTENTION  
18 FATIGUE/ASLEEP  
19 OPERATING DEFECTIVE EQUIPMENT  
20 LOAD SHIFTING/FALLING/SPILLING  
21 OTHER IMPROPER ACTION  
22 UNKNOWN

**NON-MOTORIST**  
23 NONE  
24 IMPROPER CROSSING  
25 DARTING  
26 LYING AND/OR ILLEGALLY IN ROADWAY  
27 FAILURE TO YIELD RIGHT OF WAY  
28 NOT VISIBLE (DARK CLOTHING)  
29 INATTENTIVE  
30 FAILURE TO OBEY TRAFFIC SIGNS, SIGNALS OR OFFICER  
31 WRONG SIDE OF THE ROAD  
32 OTHER  
33 UNKNOWN

**VEHICLE DEFECT CODE ONLY IF '9' SELECTED ABOVE**  
A  B

01 TURN SIGNALS  
02 HEAD LAMPS  
03 TAIL LAMPS  
04 BRAKES  
05 STEERING  
06 TIRE BLOWOUT  
07 WORN OR SLICK TIRES  
08 TRAILER EQUIPMENT DEFECTIVE  
09 MOTOR TROUBLE  
10 DISABLED FROM PRIOR ACCIDENT  
11 OTHER DEFECTS  
12 NO DEFECTS

**SEQUENCE OF EVENTS**

**A**

1	<b>20</b>
2	
3	
4	

**B**

1	<b>20</b>
2	
3	
4	

**NON-COLLISION**  
01 OVERTURN ROLL-OVER  
02 FIRE/EXPLOSION  
03 TIME/RISK  
04 JACKKNIFE  
05 CARGO EQUIPMENT LOSS OR SHIFT  
06 EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC.)  
07 SEPARATION OF UNIT  
08 RAN OFF ROAD RIGHT  
09 RAN OFF ROAD LEFT  
10 CROSS-MEDIAN CENTERLINE  
11 DOWN HILL RUNAWAY  
12 OTHER NON-COLLISION  
13 UNKNOWN NON-COLLISION  
14 COLLISION WITH PERMANENTLY OBJECT, NOT HILM  
15 PEDESTRIAN  
16 RAILWAY VEHICLE (E.G. TRAIN, ENGINE)  
17 ANIMAL - FARM  
18 ANIMAL - DEER  
19 ANIMAL - OTHER  
20 MOTOR VEHICLE IN TRANSPORT  
21 PARKED MOTOR VEHICLE  
22 WORK ZONE MAINTENANCE EQUIPMENT  
23 OTHER MOVABLE OBJECT  
24 UNKNOWN MOVABLE OBJECT  
25 COLLISION WITH FIXED OBJECT  
26 IMPACT ATTENUATOR/CRASH CUSHION  
27 BRIDGE OVERHEAD STRUCTURE  
28 BRIDGE PIER OR ABUTMENT  
29 BRIDGE RAIL  
30 GI/GRADUAL FACE  
31 GI/GRADUAL END  
32 MEDIAN BARRIER  
33 HIGHWAY TRAFFIC SIGN POST  
34 OVERHEAD SIGN POST  
35 LIGHT TOWER/MAINTENANCE SUPPORT  
36 UTILITY POLE  
37 OTHER POST, POLE OR SUPPORT  
38 CULVERT  
39 CURB  
40 UTILITY  
41 EMBANKMENT  
42 FENCE  
43 MAIL BOX  
44 TREE  
45 OTHER FIXED OBJECT/WALL (BUILDING, TUNNEL, ETC.)  
46 WORK ZONE MAINTENANCE EQUIPMENT  
47 UNKNOWN FIXED OBJECT  
48 OTHER  
49 UNKNOWN

**CONTRIBUTING CIRCUMSTANCES**  
A **02** B **01**

**MOTORIST**  
01 NONE  
02 FAILURE TO YIELD  
03 RAN RED LIGHT, OR STOP SIGN  
04 EXCEEDED SPEED LIMIT  
05 UNSAFE SPEED  
06 IMPROPER TURN  
07 LEFT OF CENTER  
08 FOLLOWED TOO CLOSELY (ACCA)  
09 IMPROPER LANE CHANGE (DROVE OFF ROAD/IMPROPER PASSING)  
10 IMPROPER BACKING  
11 IMPROPER START FROM PARKED POSITION  
12 STOPPED OR PARKED ILLEGALLY  
13 OPERATING VEHICLE IN ERRATIC, RECKLESS, CARELESS, NEGLIGENT OR AGGRESSIVE MANNER  
14 SWERVING TO AVOID (DUE TO ROAD, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC.)  
15 FAILURE TO CONTROL  
16 VISION OBSTRUCTION  
17 DRIVER INATTENTION  
18 FATIGUE/ASLEEP  
19 OPERATING DEFECTIVE EQUIPMENT  
20 LOAD SHIFTING/FALLING/SPILLING  
21 OTHER IMPROPER ACTION  
22 UNKNOWN

**NON-MOTORIST**  
23 NONE  
24 IMPROPER CROSSING  
25 DARTING  
26 LYING AND/OR ILLEGALLY IN ROADWAY  
27 FAILURE TO YIELD RIGHT OF WAY  
28 NOT VISIBLE (DARK CLOTHING)  
29 INATTENTIVE  
30 FAILURE TO OBEY TRAFFIC SIGNS, SIGNALS OR OFFICER  
31 WRONG SIDE OF THE ROAD  
32 OTHER  
33 UNKNOWN

**FIRST HARMFUL EVENT**  
A **1** B **1**

OF THE SEQUENCE OF EVENTS, WHICH ONE IS THE FIRST HARMFUL EVENT (1-4)

**MOST HARMFUL EVENT**  
A **1** B **1**

OF THE SEQUENCE OF EVENTS, WHICH ONE IS THE MOST HARMFUL EVENT (1-4)

**SPEED DETECTED**  
A  B **1**

1 STATED  
2 ESTIMATED

**SPEED**  
A **0**  
B **5**

**POSTED SPEED**  
A **0** B **0**

**TRAFFIC CONTROL**  
A **02** B **01**

01 NO CONTROLS  
02 STOP SIGN  
03 YIELD SIGN  
04 TRAFFIC SIGNAL  
05 TRAFFIC FLASHERS  
06 SCHOOL ZONE  
07 RAILROAD CROSSINGS  
08 RAILROAD GATES  
09 RAILROAD GATES  
10 CONSTRUCTION BARRICADE  
11 POLICE OFFICER  
12 PAVEMENT MARKINGS  
13 CROSSWALK LINES  
14 WALK DON'T WALK  
15 TRAFFIC CONTROL DEVICE (IMPROPERLY MISSING, OBJECT RED)  
16 OTHER  
17 NOT REPORTED

**DIRECTION**  
FROM TO FROM TO  
A **1 3** B **3 4**

1 NORTH  
2 SOUTH  
3 EAST  
4 WEST  
5 NORTHWEST  
6 NORTHWEST  
7 SOUTHWEST  
8 SOUTHWEST  
9 UNKNOWN

**CONDITION**  
A **1** B **1**

1 APPARENTLY NORMAL  
2 PHYSICAL IMPAIRMENT  
3 EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)  
4 ILLNESS  
5 FELL ASLEEP, FAINTED, FATIGUED, ETC.  
6 UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ALCOHOL  
7 OTHER  
8 UNKNOWN

**ALCOHOL/DRUG SUSPECTED**  
A **1** B **1**

1 NONE  
2 YES ALCOHOL SUSPECTED  
3 YES - HIB NOT IMPAIRED  
4 YES - DRUGS SUSPECTED  
5 YES - ALCOHOL AND DRUGS SUSPECTED  
6 UNKNOWN

**ALCOHOL TEST STATUS**  
A **1** B **1**

1 NONE GIVEN  
2 TEST REFUSED  
3 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE  
4 TEST GIVEN, RESULTS KNOWN  
5 TEST GIVEN, RESULTS UNKNOWN  
6 UNKNOWN

**ALCOHOL TEST TYPE**  
A **1** B **1**

1 NONE  
2 BREATH  
3 BLOOD  
4 OTHER  
5 UNKNOWN

**ALCOHOL TEST RESULT**  
A  B

**SUPPLEMENT 'X' IF YES**

**LOCAL REPORT #**  
**10MPD 0384**

**DRUG TEST STATUS**  
A **1** B **1**

1 NONE GIVEN  
2 TEST REFUSED  
3 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE  
4 TEST GIVEN, RESULTS KNOWN  
5 TEST GIVEN, RESULTS UNKNOWN  
6 UNKNOWN

**DRUG TEST TYPE**  
A **1** B **1**

1 NONE  
2 BLOOD  
3 URINE  
4 OTHER

**DRUG TEST 1 & 2 RESULT**  
A **1 1** B **1 1**

1 NONE  
2 MARIJUANA  
3 COCAINE  
4 OPIATES  
5 AMPHETAMINES  
6 PCP  
7 OTHER  
8 UNKNOWN AT TIME OF REPORTING

**TYPE OF INTERSECTION**  
**03**

01 NOT AN INTERSECTION  
02 FOUR-WAY INTERSECTION  
03 T-INTERSECTION  
04 Y-INTERSECTION  
05 TRAFFIC CIRCLE/ROUNDABOUT  
06 FIVE-POINT, OR MORE  
07 OR RAMP  
08 OFF RAMP  
09 CROSSOVER  
10 DRIVEWAY  
11 RAILWAY GRADE CROSSING  
12 SHARED-USE PATHS OR TRAILS  
13 UNKNOWN

**OCCURRENCE**  
**1**

1 ON ROADWAY  
2 ON SHOULDER  
3 IN MEDIAN  
4 ON ROADSIDE  
5 ON GORE  
6 OFFSIDE TRAFFICWAY  
7 UNKNOWN

**ROAD CONTOUR**  
**3**

1 STRAIGHT LEVEL  
2 STRAIGHT GRADE  
3 CURVE LEVEL  
4 CURVE GRADE  
5 UNKNOWN

**ROAD CONDITIONS**  
**01**

01 DRY  
02 WET  
03 SNOW  
04 ICE  
05 SAND/MUD/DIRT/OIL/GRAVEL  
06 WATER (STANDING, MOVING)  
07 SLUSH  
08 DEBRIS  
09 RUT, HOLES, BUMPS, UNEVEN PAVEMENT  
10 OTHER  
11 UNKNOWN

**ALCOHOL TEST RESULT**  
A  B

**NARRATIVE**

UNIT # 1 WAS PULLING OUT INTO WAL-MART'S NORTH DRIVE FROM HOLMES RENTAL UNIT # 2 WAS WESTBOUND ON WAL-MART'S DRIVE. UNIT # 1 DID NOT SEE UNIT # 2 COMING. UNIT # 1 PULLED OUT AND STRUCK THE SIDE OF UNIT # 2

**MANNER OF COLLISION OR IMPACT**

**6**  
 1 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT  
 2 REAR-END  
 3 HEAD-ON  
 4 REAR-TO-REAR  
 5 BACKING  
 6 ANGLE  
 7 SIDE-SWIPE SAME DIRECTION  
 8 SIDE-SWIPE OPPOSITE DIRECTION  
 9 UNKNOWN

**SCHOOL BUS RELATED**

**1**  
 1 NO  
 2 YES, DIRECTLY INVOLVED  
 3 YES, INDIRECTLY INVOLVED  
 4 UNKNOWN

**WORK ZONE RELATED**

**1**  
 1 NO  
 2 YES  
 3 UNKNOWN

**WEATHER**

**01**  
 01 CLEAR  
 02 CLOUDY  
 03 FOG/SMOG/SMOKE  
 04 RAIN  
 05 LEFT-HAIL (FREEZING RAIN OR DRIZZLE)  
 06 SNOW  
 07 SEVERE CROSSWINDS  
 08 BLOWING SAND/SOIL/DIRT/SNOW  
 09 OTHER  
 10 UNKNOWN

**TYPE OF WORK ZONE**

1 LANE CLOSURE  
 2 LANE SHIFT/CROSSOVER  
 3 WORK ON SHOULDER OR MEDIAN  
 4 INTERMITTENT OR MOVING WORK  
 5 OTHER

**LOCATION OF CRASH IN WORK ZONE**

1 BEFORE THE FIRST WORK ZONE WARNING SIGN  
 2 ADVANCE WARNING AREA  
 3 TRANSITION AREA  
 4 ACTIVITY AREA

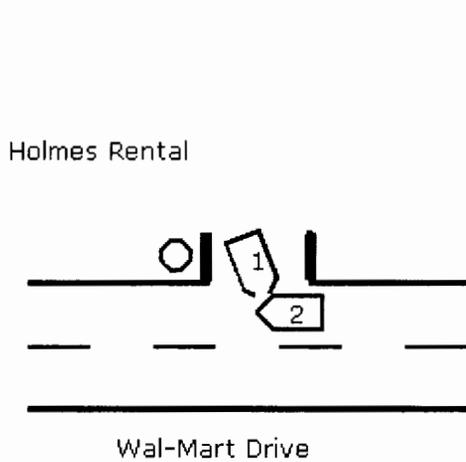
**LIGHT CONDITIONS**

**PRIMARY SECONDARY**  
**1**   
 1 DAYLIGHT  
 2 DAWN  
 3 DUSK  
 4 DARK - LIGHTED ROADWAY  
 5 DARK - ROADWAY NOT LIGHTED  
 6 DARK - UNKNOWN ROADWAY LIGHTING  
 7 GLARE  
 8 OTHER  
 9 UNKNOWN

**WORKERS PRESENT**

1 NO  
 2 YES  
 3 UNKNOWN

**DIAGRAM**



**TRUCK/BUS UNIT #**

THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:  
 A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS, OR  
 A TRUCK (MOTOR VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD, OR  
 A BUS DESIGNED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER

THE CRASH RESULTED IN ONE OF THE FOLLOWING:  
 A FATALITY, OR  
 AN INJURY REQUIRING TRANSPORTATION OR IMMEDIATE MEDICAL TREATMENT, OR  
 AT LEAST ONE VEHICLE WAS TOWED DUE TO DISABLING DAMAGE OR REQUIRED INTERVENING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER

**COMPANY (FROM SHIPPING PAPERS)**

**ADDRESS (STREET, CITY, ST, ZIP CODE)**

US DOT	ICC MC	PUCO	TRAILER LP ST.	TRAILER LP YEAR	TRAILER LP #	PLACARD #	# DIA
<b>CARGO BODY TYPE</b> 01 NOT APPLICABLE 02 HULL (INCLUDING DRIVER) 03 VAN ENCLOSED BOX 04 GRAIN CHIPS/GRAVEL 05 POLE 06 CARGO TANK 07 FLATBED 08 DUMP 09 CONCRETE MIXER 10 AUTO TRANSPORTER 11 GARbage REPTSE 12 OTHER 13 UNKNOWN		<b>WEIGHT (GVWR)</b> 1 LESS EQUAL 10,000 2 10,001 - 26,000 3 MORE THAN 26,000	<b>CDL CLASS</b> <input type="checkbox"/> 1 CLASS A 2 CLASS B 3 CLASS C 4 CLASS D 5 CLASS E	<b>HAZARDOUS MATERIALS</b> <input type="checkbox"/> 1 NO 2 YES 3 UNKNOWN	<b>HAZARDOUS MATERIALS RELEASED</b> <input type="checkbox"/> 1 NO 2 YES 3 NOT APPLICABLE		

**POLICE ACTION**

<b>DATE CRASH REPORTED</b> 03/03/2010	<b>TIME REC CALL</b> 17:12	<b>DISPATCH</b> 17:13	<b>ARRIVED</b> 17:17	<b>CLEARED</b> 17:27	<b>OTHER</b> 0	<b>TOTAL MINUTES</b> 14
<b>OFFICER'S NAME</b> CAPT. SCOTT AKINS		<b>BADGE #</b> 103	<b>CHECKED BY</b>		<b>DATE REPORT FILED</b> 03/04/2010	
<b>REPORT TAKEN BY</b> 1 POLICE AGENCY 2 MOTORIST <b>1</b>	<b>REPORT TAKEN AT</b> 1 SCENE 2 STATION 3 OTHER <b>1</b>	<input type="checkbox"/> <b>SUPPLEMENT 'X' IF YES</b>			<b>LOCAL REPORT #</b> 10MPD 0384	