

TRAFFIC CRASH REPORT



Metropolitan Police Department, Washington, DC

*Record N/A in any field that does not apply to this event. For yes/no questions, circle one.
All dates should be formatted as mm/dd/yyyy.
Explain any "other" response in narrative.*

Preliminary Public MPD Document

1 Date of Crash 11/04/2011	2 Time of Crash (Use military) 03:41	3 Day of Week Friday	4 Date of Report 11/04/2011	5 Complaint Number (CCN) 11162206	6 UCC Number I20110574085
7 Type of Crash (Check all that apply) <input type="radio"/> 01 Fatality <input checked="" type="radio"/> 03 Property Damage Only <input type="radio"/> 02 Injury <input checked="" type="radio"/> 04 Hit & Run <input type="radio"/> 05 Pedestrian <input type="radio"/> 06 D.C Prop <input type="radio"/> 07 Non-Collision <input type="radio"/> 08 Comm.Veh <input type="radio"/> 09 Other			8 Location (Street/dridge/tunnel name/ & quadrant) 1000 EUCLID ST NW		9 District 3
10 PSA 304					
Enter the number of feet, in whatever direction, from the nearest intersection or block (0 feet if at an exact location). On freeways, enter the number of feet from the nearest mile post or PEPCO pole no., etc. Indicate if accident occurred on exit ramp, bridge, tunnel or other. Finally, circle the city quadrant.					
11 Location Type and Name 30 Feet from Intersection/Block: 11th and Sherman Ave NW					
Freeway Mile Post: PEPCO Pole No: Exit Ramp:					
Bridge: Tunnel:					
Other: Circle Quadrant: NW					
12 Contruction Zone? No	13. On-Street Location <input type="radio"/> 01 At Intersection <input checked="" type="radio"/> 02 Within 100' of Intersection <input type="radio"/> 03 Not at Intersection <input type="radio"/> 04 Private Property <input type="radio"/> 97 N/A <input type="radio"/> 99 Other		14. Off-Street Location <input type="radio"/> 01 Public Space <input type="radio"/> 02 Private Property <input checked="" type="radio"/> 97 N/A <input type="radio"/> 99 Other: _____		15 Report taken on Scene? Yes
16 Photos taken? Yes	17 If yes, # Photos	17 # vehicles Involved 11	18 # Injured Persons 0	20 # Fatalities 0	
189 (Type of Crash) Side Swiped	190 (Road Surface) Asphalt	191 (Road Type) Straight	192 (Road Condition) Dry	193 (Street Lighting) Street Lights On	194 (Light Condition) Dark (Lighted)
195 (Weather) Clear or No Adverse Condition	196 (Traffic Condition) Light	197 (Roadway Type) Two-Way, Not Divided	198 (Traffic Controls)	199 (Pedestrian Action) N/A	

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STRIKING VEHICLE[STRIKING OBJECT(TYPE,CONTACT INFO,INSURANCE,ETC)]							Associated Vehicle #: 1
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle	23 Sex	24 DOB	25 Street Address		26 City,State,Zip	
Car	Rollins Brandon	1	07/14/1990	236 Ingraham St NW		Washington DC	
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	
			DC	3		Unknown	
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		
Jeep	Cherokee		SUV	Black	Unknown		
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address		
DC	2011			No			
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	
			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
210a-d Cell Phone/Other Electronic Device Present(Y/N)	Electronic Device Present						
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private		215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	
Unknown	Speed	Going Straight	Passenger Auto				
19a-d # Occupants (Incl Driver)	2						
ADDITIONAL VEHICLE							Associated Vehicle #: 2
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle	23 Sex	24 DOB	25 Street Address		26 City,State,Zip	
Parked Vehicle							
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	
			DC	0			
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		
BMW	X5	11	SUV	Black	5UXZV8C52BLL67920		
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address		
DC	2013	Taylor Gourmet		No	475 K ST NW		
47 City,State,Zip	Washington, DC						
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	
			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
210a-d Cell Phone/Other Electronic Device Present(Y/N)							

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211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private	215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
	No Violation	Stopped/Standing: Traffic Lane	SUV			0
ADDITIONAL VEHICLE					Associated Vehicle #: 3	
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle	23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle						
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name
			DC	3	12/11	Geico
34 Policy #	4167436353					
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)	
MAZD	MWG	02	Other		JM3LW28A220300251	
41 Tag Number	DH0866					
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address	
DC	2012	Williams Dorothy		Yes	1034 Euclid St NW	
47 City,State,Zip	Washington, DC ,					
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d
			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle
210a-d Cell Phone/Other Electronic Device Present(Y/N)						
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private	215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
			Minivan			0
ADDITIONAL VEHICLE					Associated Vehicle #: 4	
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle	23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle						
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name
			DC	3		
34 Policy #						
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)	
CHEV	Caprice	94	Sedan (4-door)		1G1BL52P3RR132789	
41 Tag Number	BX4915					
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address	
DC	2011	Wimple Betty		No	1025 Euclid St NW	
47 City,State,Zip	Washington, DC ,					
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d
210a-d Cell Phone/Other Electronic Device Present(Y/N)						

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			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private		215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
	No Violation	Stopped/Standing: Traffic Lane	Passenger Auto				
ADDITIONAL VEHICLE						Associated Vehicle #: 5	
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle		23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle							
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	34.Policy #
			DC	0			
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		41 Tag Number
VOLV	S4A	07	Sedan (4-door)		YV1MH682272262811		DB8519
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address		47 City,State,Zip
DC	2017	Hagerty Daniel		No	2608 Sherman Ave NW		Washington, DC
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	210a-d Cell Phone/Other Electronic Device Present(Y/N)
			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private		215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
	No Violation	Stopped/Standing: Traffic Lane	Passenger Auto				0
ADDITIONAL VEHICLE						Associated Vehicle #: 6	
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle		23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle							
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	34.Policy #
			DC	0			
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		41 Tag Number
Volvo	XC90		SUV	Red	YV1CM592651143274		369M300
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address		47 City,State,Zip

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	2012	Davis Rita		No	3555 Elsa Ave		Waldorf, MD ,
48 Owner's Telephone #	49 Veh. Insurance Co (If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	210a-d Cell Phone/Other Electronic Device Present(Y/N)
			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private		215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
	No Violation	Stopped/Standing: Traffic Lane	SUV				0
ADDITIONAL VEHICLE						Associated Vehicle #: 7	
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle		23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle							
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	34.Policy #
			DC	0	02/12	ERIE	Q020510026M
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		41 Tag Number
NISS	MGS	99	Sedan (4-door)	Tan	JN1CA21A6XT706009		DF3851
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address		47 City,State,Zip
DC	2013	Ja Kim Yong		Yes	1004 Euclid St NW		Washington, DC ,
48 Owner's Telephone #	49 Veh. Insurance Co (If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	210a-d Cell Phone/Other Electronic Device Present(Y/N)
3014373164			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private		215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
	No Violation	Stopped/Standing: Traffic Lane	Passenger Auto				0
ADDITIONAL VEHICLE						Associated Vehicle #: 8	
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle		23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle							
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	34.Policy #
			DC	0			
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		41 Tag Number

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JEEP	LRO	00	SUV		1J4G248SXYC125310	DA2166	
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address	47 City,State,Zip	
DC	2012	Shuler Ernest		No	2608 Sherman Ave NW	Washington, DC	
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	210a-d Cell Phone/Other Electronic Device Present(Y/N)
			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private	215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)	
	No Violation	Stopped/Standing: Traffic Lane	SUV			0	
ADDITIONAL VEHICLE					Associated Vehicle #: 9		
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle		23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle							
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	34.Policy #
			DC	0			
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		41 Tag Number
ACUR	TSX	08		Blue	JH4CL96828C018028		CZ7598
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address	47 City,State,Zip	
DC	2012	Welch Rita		Yes	1006 Euclid St NW	Washington, DC	
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	210a-d Cell Phone/Other Electronic Device Present(Y/N)
2027448714			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private	215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)	
	No Violation	Stopped/Standing: Traffic Lane	Passenger Auto			0	
ADDITIONAL VEHICLE					Associated Vehicle #: 10		
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle		23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle							

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27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	34.Policy #
			DC	0			
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		41 Tag Number
HOND	UAX	05	Sedan (4-door)	Tan	2HGES26765H566426		DJ3393
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address		47 City,State,Zip
DC	2012	Hall-Dietrich Kara		No	2608 Sherman Ave NW		Washington, DC ,
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	210a-d Cell Phone/Other Electronic Device Present(Y/N)
			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private		215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
	No Violation	Stopped/Standing: Traffic Lane	Passenger Auto				0
ADDITIONAL VEHICLE						Associated Vehicle #: 11	
21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle		23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Car	Tucker Angela		2	07/23/1969	1000 Euclid St NW		Washington DC
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	34.Policy #
		212083600	DC	3	10/11	Progressive	
35 MAKE	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		41 Tag Number
JEEP	SPO	08			1J8FT28W58D520729		DD5540
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address		47 City,State,Zip
DC	2012	Tucker Angela		Yes	1000 Euclid St NW		Washington, DC ,
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	210a-d Cell Phone/Other Electronic Device Present(Y/N)
			Collision: Hit & Run	Collision with moving vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private		215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
	No Violation	Turning Left	SUV				1
ADDITIONAL VEHICLE						Associated Vehicle #: 12	

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21 OBJECT TYPE (Describe fixed object and damage in narrative)	22 LastName First Middle		23 Sex	24 DOB	25 Street Address		26 City,State,Zip
Parked Vehicle							
27 Home/Cell/ Number	28 Work Number	29 License Number	30 State	31 Class	32 Ins Exp Date	33 Driver Insurance Co.Name	34.Policy #
			DC	0			
35 Make	36 Model	37 Year	38 Body	39 Color	40 Vehicle ID Number (VIN)		41 Tag Number
HOND	AXL	08			1HGCP26808A134127		DU5967
42 State	43 Year	44 Owner's Last Name First Middle		45 Owner Notified ?	46 Owner's Street Address		47 City,State,Zip
DC	2012	Jones Denise		Yes	2600 Sherman Ave NW		Washington, DC ,
48 Owner's Telephone #	49 Veh.Insurance Co(If different from #133)		VehSeq 200 a	VehSeq 200 b	VehSeq 200 c	Veh Seq 200 d	210a-d Cell Phone/Other Electronic Device Present(Y/N)
2022773539			Collision: Hit & Run	Collision Involving Parked Motor Vehicle	Not applicable, no more vehicles or event sequences for this vehicle	Not applicable, no more vehicles or event sequences for this vehicle	N/A
211a-d Driver/Pedestrian Distraction	212a-d Primary Contributing Circumstance	213a-d Driver Action	214a-d Vehicle Type:Private		215 a-d Vehicle Type Govt	216a-d Vehicle type:Comm	19a-d # Occupants (Incl Driver)
Unknown	No Violation	Stopped/Standing: Traffic Lane	Passenger Auto				0
PRIVATE,GOVERNMENT & COMMERCIAL VEHICLE INFORMATION							Associated Vehicle #: 1
217a-d Bus Type		218a-d Cargo Body Type		219a-d US DOT#		220a-d MC #/MX #	
221a-d State #		222a-d Issuing State		223a-d Gros Vehicle/Combination Weight Rating		224a-d Interstate Vehicle Type	
225a-d Carrier Name		226a-d Carrier Address(Street # and Name,Quadrant,Apt.#, City,State & Zip)		227a-z haz Mat Placard?(yes/no)		228a-d If Yes,4 digit Placard Number	
229a-d Haz Mat Class Number		230a-d Hazardous Cargo Materials Released?(yes/no)					
INVOLVED PERSONS:					Associated Vehicle #: 1		
137a-c Assoc. W/Vehicle#	138a-c Last Name,First Name			139a-c Street Address,City,State,Zip		140a-c Home/Cell/Work#	
1	Frazier, Tamika			3023 14th St NW ,Washington, DC ,		2023321626	
141a-c Sex	142a- c Age	143a-c Empl. by DC Govt		144a-cTaken to hosp?	146a-c Where Taken (Hospital)	147a-c By Whom(Last Name,First Name)	
F	21	No		No			

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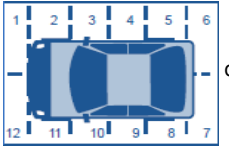
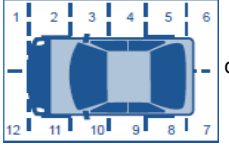
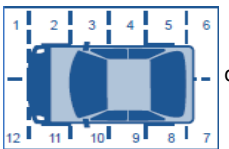
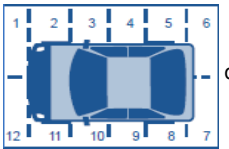


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148 a-c Major Crash Notified?	149 a-c Teletype Notified ?	150a-c Relative Notified? (If Yes,Last & First Name & Relationship)		151 a-c Status (Admitted,Released, UnKnown)	201a-c(Seat Location Code)	202a-c(Seat belt code)
No	No			None	Front Passenger Seat	Use Driver
203a-c(Air Bag Code)	204a-c (Ejection Code)	205a-c (Injury Code)	206a-c Driver/Pedestrian Condition	207a-c Impairment	208 a-c Type of Test Conducted	209a-c Blood Alcohol Content)
	None	No Injury	Unknown	Impairment Unknown	N/A	
INVOLVED PERSONS:					Associated Vehicle #: 1	
137a-c Assoc. W/Vehicle#	138a-c Last Name,First Name		139a-c Street Address,City,State,Zip		140a-c Home/Cell/Work#	
1	Rollins, Brandon		236 Ingraham St NW ,Washington, ,			
141a-c Sex	142a- c Age	143a-c Empl. by DC Govt	144a-cTaken to hosp?	146a-c Where Taken (Hospital)	147a-c By Whom(Last Name,First Name)	
M		No	No			
148 a-c Major Crash Notified?	149 a-c Teletype Notified ?	150a-c Relative Notified? (If Yes,Last & First Name & Relationship)		151 a-c Status (Admitted,Released, UnKnown)	201a-c(Seat Location Code)	202a-c(Seat belt code)
No	No			None	Driver	Use Driver
203a-c(Air Bag Code)	204a-c (Ejection Code)	205a-c (Injury Code)	206a-c Driver/Pedestrian Condition	207a-c Impairment	208 a-c Type of Test Conducted	209a-c Blood Alcohol Content)
	None	Unknown	Unknown	Impairment Unknown	N/A	
INVOLVED PERSONS:					Associated Vehicle #: 11	
137a-c Assoc. W/Vehicle#	138a-c Last Name,First Name		139a-c Street Address,City,State,Zip		140a-c Home/Cell/Work#	
11	Tucker, Angela		1000 Euclid St NW ,Washington, ,			
141a-c Sex	142a- c Age	143a-c Empl. by DC Govt	144a-cTaken to hosp?	146a-c Where Taken (Hospital)	147a-c By Whom(Last Name,First Name)	
F		No	No			
148 a-c Major Crash Notified?	149 a-c Teletype Notified ?	150a-c Relative Notified? (If Yes,Last & First Name & Relationship)		151 a-c Status (Admitted,Released, UnKnown)	201a-c(Seat Location Code)	202a-c(Seat belt code)
No	No			None	Driver	Use Driver
203a-c(Air Bag Code)	204a-c (Ejection Code)	205a-c (Injury Code)	206a-c Driver/Pedestrian Condition	207a-c Impairment	208 a-c Type of Test Conducted	209a-c Blood Alcohol Content)
N/A	None	No Injury	Normal	Had not been drinking	N/A	
NON-INVOLVED WITNESSES						
152a-c Last Name, First Middle		153a-c Street Address,City,State,Zip			154a-c Telephone #	
None,		,, ,				
VEHICLE CONDITION					Associated Vehicle #: 1	



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<p>158 Striking Object/Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input checked="" type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? Yes</p>	<p>160 Skid Marks To Impact: 50 After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>X X X X X X  X 13 Hood X 16 Undercarriage <input type="radio"/> 14 Roof X 17 Overturned X 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input checked="" type="radio"/> 02 Towed By: Alex Towing Towed to: 916 Taylor St NW Towing Control # 0005 <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>
<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? No</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>O O O O O O  <input type="radio"/> 13 Hood <input type="radio"/> 16 Undercarriage <input type="radio"/> 14 Roof <input type="radio"/> 17 Overturned <input type="radio"/> 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>
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<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? Yes</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>O O O O O O  <input type="radio"/> 13 Hood <input type="radio"/> 16 Undercarriage <input type="radio"/> 14 Roof <input type="radio"/> 17 Overturned <input type="radio"/> 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>

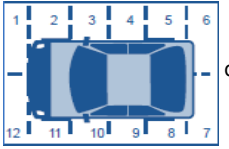
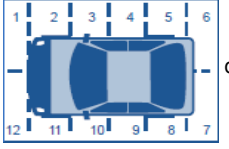
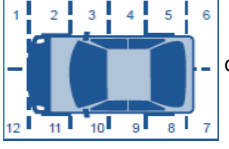
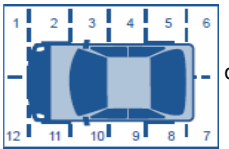


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<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? No</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>o o o o o o 1 2 3 4 5 6 o [Car Diagram] o 12 11 10 9 8 7 o x x x x o</p> <p><input type="radio"/> 13 Hood <input type="radio"/> 16 Undercarriage <input type="radio"/> 14 Roof <input type="radio"/> 17 Overturned <input type="radio"/> 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>
<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? No</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>o o o o o o 1 2 3 4 5 6 o [Car Diagram] o 12 11 10 9 8 7 x x x x x o</p> <p><input type="radio"/> 13 Hood <input type="radio"/> 16 Undercarriage <input type="radio"/> 14 Roof <input type="radio"/> 17 Overturned <input type="radio"/> 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>
<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? No</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>x x x x x x 1 2 3 4 5 6 o [Car Diagram] o 12 11 10 9 8 7 o o o o o o</p> <p><input type="radio"/> 13 Hood <input type="radio"/> 16 Undercarriage <input type="radio"/> 14 Roof <input type="radio"/> 17 Overturned <input type="radio"/> 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>
<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? No</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>x x x x x x 1 2 3 4 5 6 x [Car Diagram] x 12 11 10 9 8 7 x x x x x x</p> <p>x <input type="radio"/> 13 Hood x <input type="radio"/> 16 Undercarriage x <input type="radio"/> 14 Roof o <input type="radio"/> 17 Overturned x <input type="radio"/> 15 Trunk o <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>



Metropolitan Police Department, Washington, DC

<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? No</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>X X O O O O</p>  <p>X 13 Hood X 16 Undercarriage <input type="radio"/> 14 Roof <input type="radio"/> 17 Overturned <input type="radio"/> 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>
<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? No</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>X O O O O O</p>  <p><input type="radio"/> 13 Hood <input type="radio"/> 16 Undercarriage <input type="radio"/> 14 Roof <input type="radio"/> 17 Overturned <input type="radio"/> 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>
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<p>158 Additional Vehicle Direction of Travel and Street Before Crash (must match narrative and diagram)</p> <p><input type="radio"/> 01 N/B <input type="radio"/> 02 E/B <input type="radio"/> 03 S/B <input type="radio"/> 04 W/B <input type="radio"/> 97 N/A <input type="radio"/> 99 Other 159 Disabled? No</p>	<p>160 Skid Marks To Impact: _____ After Impact: _____ ý N/A</p>	<p>161 Area With Damage:</p> <p>X O O O O X</p>  <p><input type="radio"/> 13 Hood <input type="radio"/> 16 Undercarriage <input type="radio"/> 14 Roof <input type="radio"/> 17 Overturned X 15 Trunk <input type="radio"/> 18 Other(Explain in narrative)</p>	<p>162 Vehicle Was..</p> <p><input type="radio"/> 01 Left on Scene <input type="radio"/> 02 Towed By: Towed to: Towing Control # <input type="radio"/> 03 Driven Away By: _____ <input type="radio"/> 97 N/A 99 Other</p>

TRAFFIC CRASH REPORT



Metropolitan Police Department, Washington, DC

178 Crash Diagram(Not to Scale)(The diagram must correspond to the narrative.If the report is being taken by an officer after the fact,the diagram shall be completed to show the general area in which the crash occurred.Please indicate freeway access ramps,exit ramps and bridges.Indicate type of fixed object(s) ,direction,posted speed and vehicles by number indicated in spaces above)



Location: 1000 EUCLID ST NW

179 Detailed Narrative(Give a concise statement,in your own words,of the facts that are not covered in this report,or clarify any items that are not satisfactorily explained("other" answers).if statements are taken ,use PD118(Defendant/Suspect Statement) or PD119 (Complainant/Witness statement).If accident occurred in a construction zone,describe type of construction zone.Whereever possible ,list the item number of the corresponding section.

On listed date and time, Driver-1(striking vehicle) was travelling eastbound in the 1000 block of Euclid St NW at a high rate of speed lost control of his vehicle and struck Vehicles 2 through 12 as he continued to travel eastbound through the 1000 block of Euclid St NW. Driver-1(striking vehicle) sidwiped vehicles and left heavy skidmarks prior to landing ontop of Vehicle 8 (Jeep Laredo). When the Striking Vehicle landed ontop of Vehicle 8 it landed facing westbound. There was a substancial amount of damage which was listed in the report. There were no injuries on the scene. Alex Towing responded to the scene to tow Striking Vehicle to 916 Taylor St NW. Crime Scene Officer Lyons (9235) responded to the scene for photos. No NOI was issued on scene as Driver of Striking Vehicle fled the scene and his vehicle was towed from scene. Arrest warrant is pending for Driver-1 of Striking Vehicle. Note that Vehicle 10 is not labeled as there is no "0."

TRAFFIC CRASH REPORT



Metropolitan Police Department, Washington, DC

This report is used for statistical analysis of vehicular crashes and the prevention thereof. The data given represents the opinion and conclusion of the reporting officer, based on his/her judgement after considering all the facts disclosed through his/her investigation of this crash.

180 Reporting Member's Name/CAD/Badge#	181 Unit	182 Signature	183 Official's Name/CAD/Badge #	184 Official's Unit
Jared M Rothman/8256/4302	17	Jared M Rothman	S0684	
185 Official's Signature	186 Reviewer	187 Distribution	188 Date	Complaint Number(CCN)
James M Boteler				11162206

Approved by Unit Supervisor: James M Boteler

Approved by Staff Reviewer: