



STATE OF LOUISIANA
UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT



5647564

PAGE # 01

TOTAL NUMBER OF VEHICLES INVOLVED

LAT.

LONG.

TIME (0000)

DISTRICT/ZONE

TROOP

DATE OF CRASH 1 0 1 2 2 0 0 3

1 3 3 9

5 1 2 3 5 1

1

IN PARISH OF

A r k a d i a

PARISH CODE

0 2

ON PRIMARY ROADWAY

N M a c A r t h u r D r

MILEPOST

4 3 4 3

CITY OR TOWN

A l e x a n d r i a

DISTANCE

0 0 9 3 3

MILES FEET

NE SW

STREET/HIGHWAY

N M a c A r t h u r D r

AT INTERSECTION

NOT AT INTERSECTION

DISTANCE

0 0 0 4 4

MILES FEET

NE SW

STREET/HIGHWAY

J a c k s o n S t r e e t E x t

AT INTERSECTION

NOT AT INTERSECTION

VEHICLE #01

- A. PASSENGER CAR B. LT. TRUCK (P.U., ETC.) C. VAN D. A, B, OR C WITH TRAILER E. MOTORCYCLE F. PEDALCYCLE G. OFF-ROAD VEHICLE H. EMERGENCY VEHICLE I. SCHOOL BUS J. OTHER BUS K. MOTOR HOME L. SINGLE UNIT TRUCK M. TRUCK WITH TRAILER(S) N. FARM EQUIPMENT O. OTHER

YEAR

2 0 0 3

MAKE

F o r d

MODEL

R a n g e r

# DOORS

2

# AXLES

0 2

# TIRES

0 4

V.I.N.

3 8 5 3 7 2 5 7 6 3 2 5 - 3 9 2 3

VEHICLE TOWED

A YES B. NO C. LEFT AT SCENE

REMOVED BY

Mike towing

YEAR

2 0 0 3

STATE

L A

NUMBER

3 9 5 3 8 n e g o

TYPE

R a n g e r

REASON TOWED

- A. VEHICLE DAMAGE B. DRIVER ARRESTED C. INSURANCE VIOLATION D. OTHER

YEAR

TRAILER DESCRIPTION

MAKE

TYPE

YEAR

LICENSE PLATE

STATE

NUMBER

DRIVER'S NAME (LAST, FIRST, MI)

A l l i s o n C h e r r y

DATE OF BIRTH

1 1 1 3 1 9 5 6

STREET ADDRESS 21 Main Street

293

TELEPHONE # 593 583 3958

CITY Alexandria

STATE

NE

ZIP

4 5 6 3 4

STATE CLASS ENDORSEMENTS DRIVER'S LICENSE NUMBER

L A 4 4 6 3 5 0 8 5 9 3 9 8 4

INSTRUCTED TO EXCHANGE INFORMATION?

YES NO

TRANSPORTED TO MEDICAL FACILITY

A. YES B. NO C. UNKNOWN D. REFUSED AID

OWNER'S NAME (LAST, FIRST, MI OR COMPANY NAME)

STREET ADDRESS

CITY

STATE

ZIP

SAME AS DRIVER?

YES NO

SR-10 FURNISHED?

YES NO

PROOF OF INSURANCE?

YES NO

NOTICE OF VIOLATION ISSUED?

YES NO

OCCUPANT'S NAME (LAST, FIRST, MI)

M i c h e l l e H i l l

STREET ADDRESS

CITY

STATE

ZIP

TRANSPORTED TO MEDICAL FACILITY

A. YES B. NO C. UNKNOWN D. REFUSED AID

NAME OF FACILITY

INVESTIGATING AGENCY

6484384849

NAME OF AGENCY

TIME OF NOTIFICATION

1 2 0 0

TIME OF ARRIVAL

1 2 1 0

TIME ALL LANES OPENED

2 2 0 0

INVESTIGATION COMPLETE

YES NO

INVESTIGATING POLICE AGENCY

A. STATE B. CITY C. PARISH D. OTHER

REPORT COMPLETED

1 2 1 2 1 2 3 4

Mike Kennedy INVESTIGATING OFFICER'S NAME (PRINT)

Mike Kennedy SIGNATURE

6 8 4 5 1 3 / RT BADGE # SUPERVISOR'S INITIALS

VEHICLE #02

- A. PASSENGER CAR
- B. LT. TRUCK (P.U., ETC.)
- C. VAN
- D. A, B, OR C WITH TRAILER
- E. MOTORCYCLE
- F. PEDALCYCLE
- G. OFF-ROAD VEHICLE
- H. EMERGENCY VEHICLE
- I. SCHOOL BUS
- J. OTHER BUS
- K. MOTOR HOME
- L. SINGLE UNIT TRUCK
- M. TRUCK WITH TRAILER(S)
- N. FARM EQUIPMENT
- O. OTHER

PAGE #

02

YEAR: 2 0 0 1    MAKE: F o r d    MODEL: C o n t o u r    # DOORS: 4    # AXLES: 0 2    # TIRES: 0 4

V.I.N.: 3 2 0 5 2 3 4 9 6 2 6 5 - 2 3 6 8    VEHICLE TOWED:  A    A. YES    B. NO    C. LEFT AT SCENE    REMOVED BY: The Towing Specialists

LICENSE PLATE: 2 0 0 3    STATE: L A    NUMBER: 3 8 5 2 9 3 5 8 3    TYPE:    REASON TOWED:  A. VEHICLE DAMAGE    B. DRIVER ARRESTED    C. INSURANCE VIOLATION    D. OTHER

TRAILER DESCRIPTION:    LICENSE PLATE:    YEAR:    MAKE:    TYPE:    YEAR:    STATE:    NUMBER:

DRIVER'S NAME (LAST, FIRST, MI): D o n M o o r e    DATE OF BIRTH: 0 5 0 6 1 9 8 3

STREET ADDRESS: #258 South Main Street    TELEPHONE #: 395-293-4858    POSITION: A D B D E M O    RACE: 20    INJURY: B

CITY: Alexandria    STATE: LA    ZIP: 2 3 5 8 9    TRANSPORTED TO MEDICAL FACILITY:  A. YES    C. UNKNOWN    B. NO    D. REFUSED AID    INSTRUCTED TO EXCHANGE INFORMATION?  YES     NO    NAME OF FACILITY: 1234

OWNER'S NAME (LAST, FIRST, MI OR COMPANY NAME):    SAME AS DRIVER?  YES     NO    SR-10 FURNISHED?  YES     NO    PROOF OF INSURANCE?  YES     NO    NOTICE OF VIOLATION ISSUED?  YES     NO

OCCUPANT'S NAME (LAST, FIRST, MI):    STREET ADDRESS:    TRANSPORTED TO MEDICAL FACILITY:  A. YES    C. UNKNOWN    B. NO    D. REFUSED AID    NAME OF FACILITY:

CODES						
SEATING POSITION	EJECTION	TRAPPED OR EXTRICATED	AIRBAG	OCCUPANT PROTECTION SYSTEM USED	INJURY	
A - FRONT SEAT-LEFT SIDE (MOTORCYCLE DRIVER)	J - SLEEPER SECTION OF CAB (TRUCK)	A- NOT EJECTED	A- DEPLOYED	A- NONE USED-VEHICLE OCCUPANT	A- FATAL	
B - FRONT SEAT-MIDDLE	K - PASSENGER IN OTHER ENCLOSED PASSENGER OR CARGO AREA (NON-TRAILING UNIT)	B- TOTALLY EJECTED	B- NOT DEPLOYED	B- SHOULDER BELT ONLY USED	B- INCAPACITATING/ SEVERE	
C - FRONT SEAT-RIGHT SIDE	L - PASSENGER IN OTHER UNENCLOSED (MOTORCYCLE PASSENGER)	C- PARTIALLY EJECTED	C- NOT DEPLOYED- /SWITCH OFF	C- LAP BELT ONLY USED	C- NON- INCAPACITATING / MODERATE	
D - SECOND SEAT-LEFT SIDE (MOTORCYCLE PASSENGER)	M - PASSENGER ON TRAIN OR STREET CAR	D- UNKNOWN	D- NOT APPLICABLE	D- SHOULDER AND LAP BELT USED	D- POSSIBLE/ COMPLAINT	
E - SECOND SEAT-MIDDLE	N - TRAILING UNIT		E- UNKNOWN	E- CHILD SAFETY SEAT IMPROPERLY USED	E- NO INJURY	
F - SECOND SEAT-RIGHT SIDE	O - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			F- CHILD SAFETY SEAT USED		
G - THIRD ROW-LEFT SIDE (MOTORCYCLE PASSENGER)	P - UNKNOWN			G- HELMETS USED		
H - THIRD ROW-MIDDLE				H- RESTRAINT USE UNKNOWN		
I - THIRD ROW-RIGHT SIDE						

INSURANCE VEHICLE # 1		INSURANCE VEHICLE # 2	
INSURANCE CO, NAME (NOT AGENCY NAME)	EFFECTIVE DATE	INSURANCE CO, NAME (NOT AGENCY NAME)	EFFECTIVE DATE
Brother&Brother Insurance	10/29/2002	Lincolns Insurance Co.	5/23/03
POLICY NUMBER	EXPIRATION DATE	POLICY NUMBER	EXPIRATION DATE
35837503.2	10/29/2003	35850-3	5/22/04
AGENT'S NAME	PHONE #	AGENT'S NAME	PHONE #
Clark McKent	(168 )584-8468	Doug King	(324 ) 549-8688
AGENT'S ADDRESS		AGENT'S ADDRESS	
#5383 North Mainstreet		#123 Yale	

EMERGENCY SERVICES:  AMBULANCE    TIME CALLED:    ARRIVED SCENE:    DEPARTED SCENE:    ARRIVED HOSPITAL:    RESCUE UNIT:     TIME CALLED:    ARRIVED SCENE: 1 2 3

AMBULANCE SERVICE:    FIRE DEPARTMENT:

**STATE OF LOUISIANA**  
**UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT**  
**CONTRIBUTING FACTORS AND CONDITIONS**

COMPUTER NUMBER

PAGE #

5 6 4 7 5 6 4 - 0 3

WRITE APPROPRIATE LETTER IN BLOCK

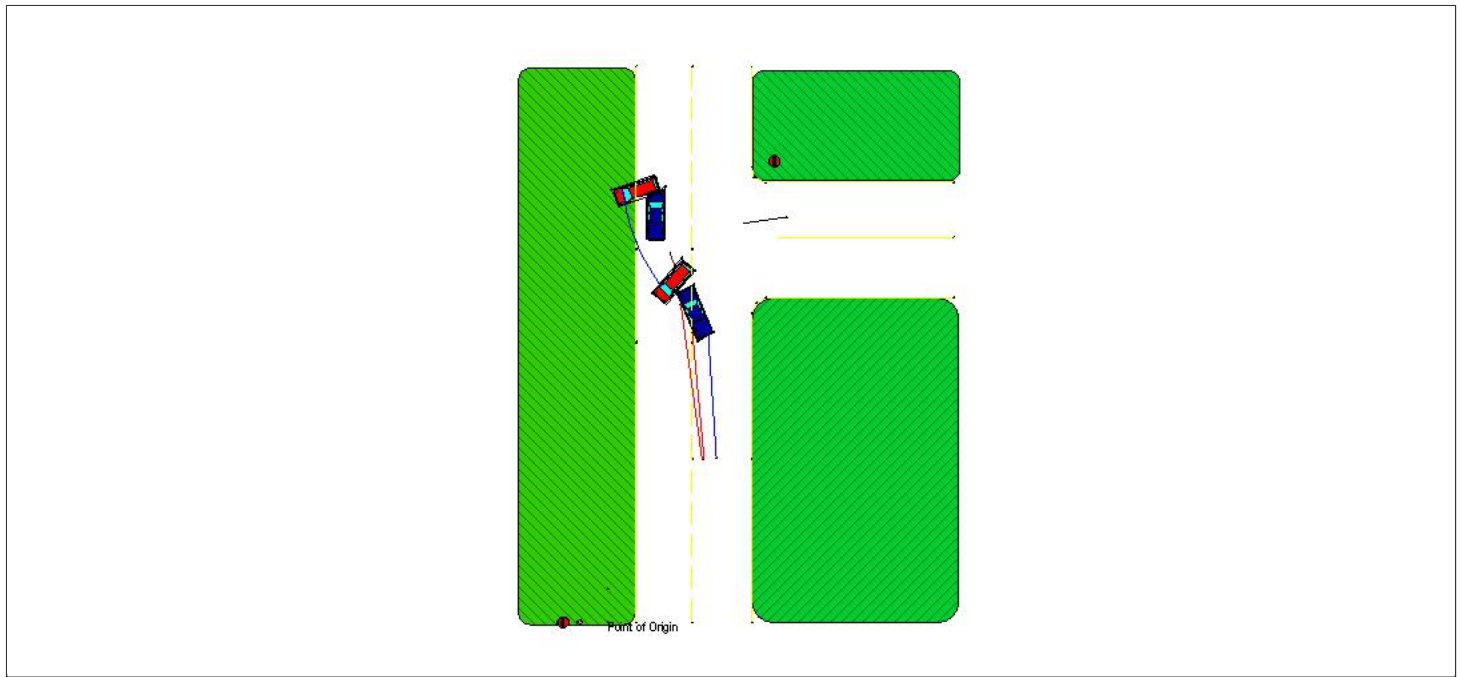
<p align="center"><b>ROAD SURFACE</b> (ONE PER COLUMN)</p> <p><b>D</b>                      <b>D</b></p> <p>A. DRY B. WET C. SNOW/SLUSH D. ICE E. CONTAMINANT (SAND MUD, DIRT, OIL, ECT.) F. UNKNOWN G. OTHER .....</p> <p>A. CONCRETE B. BLACK TOP C. BRICK D. GRAVEL E. DIRT F. UNKNOWN G. OTHER .....</p>	<p align="center"><b>ROADWAY CONDITIONS</b></p> <p><b>L</b></p> <p>A. NO DEFECTS B. DEFECTIVE SHOULDERS C. HOLES D. DEEP RUTS E. BUMPS F. LOOSE SURFACE MATERIAL G. CONSTRUCTION, REPAIR H. OVERHEAD CLEARANCE LIMITED I. CONSTRUCTION - NO WARNING J. PREVIOUS CRASH K. FLOODING L. ANIMAL IN ROADWAY M. OBJECT IN ROADWAY N. OTHER DEFECTS .....</p>	<p align="center"><b>LIGHTING</b></p> <p><b>C</b></p> <p>A. DAYLIGHT B. DARK - NO STREET LIGHTS C. DARK - CONTINUOUS STREET LIGHT D. DARK - STREET LIGHT AT INTERSECTION ONLY E. DUSK F. DAWN G. UNKNOWN</p>	<p align="center"><b>KIND OF LOCATION</b></p> <p><b>G</b></p> <p>A. MANUFACTURING OR INDUSTRIAL B. BUSINESS CONTINUOUS C. BUSINESS, MIXED RESIDENTIAL D. RESIDENTIAL DISTRICT E. RESIDENTIAL SCATTERED F. SCHOOL OR PLAYGROUND G. OPEN COUNTRY H. OTHER .....</p>	<p align="center"><b>PRIMARY FACTOR</b></p> <p><b>F</b></p> <p align="center"><b>SECONDARY FACTOR</b></p> <p><b>M</b></p> <p>A. VIOLATIONS B. MOVEMENT PRIOR TO CRASH C. VISION OBSCUREMENTS D. CONDITION OF DRIVER E. VEHICLE CONDITIONS F. ROAD SURFACE G. ROADWAY CONDITION H. LIGHTING I. WEATHER J. TRAFFIC CONTROL K. KIND OF LOCATION L. CONDITION OF PEDESTRIAN M. PEDESTRIAN ACTIONS</p>				
<p align="center"><b>TYPE OF ROADWAY</b></p> <p><b>C</b></p> <p>A. ONE-WAY ROAD B. TWO-WAY ROAD WITH NO PHYSICAL SEPARATION C. TWO-WAY ROAD WITH A PHYSICAL SEPARATION D. TWO-WAY ROAD WITH A PHYSICAL BARRIER E. UNKNOWN F. OTHER .....</p>	<p align="center"><b>WEATHER</b></p> <p><b>H</b></p> <p>A. CLEAR B. CLOUDY C. RAIN D. FOG/SMOKE E. SLEET/HAIL F. SNOW G. SEVERE CROSSWIND H. BLOWING SAND, SOIL, DIRT, SNOW I. UNKNOWN J. OTHER .....</p>	<p align="center"><b>VIOLATION</b></p> <p><b>1 2</b> <b>U G</b></p> <p>A. EXCEEDING STATED SPEED LIMIT B. EXCEEDING SAFE SPEED LIMIT C. FAILURE TO YIELD D. FOLLOWING TOO CLOSELY E. DRIVING LEFT OF CENTER F. CUTTING IN, IMPROPER PASSING G. FAILURE TO SIGNAL H. MADE WIDE RIGHT TURN I. CUT CORNER ON LEFT TURN J. TURNED FROM WRONG LANE K. OTHER IMPROPER TURNING L. DISREGARDED TRAFFIC CONTROL M. IMPROPER STARTING N. IMPROPER PARKING O. FAILED TO SET OUT FLAGS, FLARES P. FAILED TO DIM HEADLIGHTS Q. VEHICLE CONDITION R. DRIVER CONDITION S. CARELESS OPERATION T. UNKNOWN VIOLATIONS U. NO VIOLATIONS V. OTHER .....</p>	<p align="center"><b>REASON FOR MOVEMENT</b></p> <p><b>1 2</b> <b>J F</b></p> <p>A. TO AVOID OTHER VEHICLE B. TO AVOID PEDESTRIAN C. TO AVOID ANIMAL D. TO AVOID OTHER OBJECT E. PASSING F. VEHICLE OUT OF CONTROL, NOT PASSING G. VEHICLE OUT OF CONTROL, PASSING H. FOR TRAFFIC CONTROL I. DUE TO CONGESTION J. DUE TO PRIOR CRASH (COLLISION) K. DUE TO DRIVER CONDITION L. DUE TO DRIVER VIOLATION M. DUE TO VEHICLE CONDITION (FAILURE) N. DUE TO PAVEMENT CONDITION O. HIGH WIND P. NORMAL MOVEMENT Q. REASON UNKNOWN R. OTHER .....</p>	<p align="center"><b>ACCESS CONTROL</b></p> <p><b>A</b></p> <p>A. NO CONTROL (UNLIMITED ACCESS TO ROADWAY) B. PARTIAL CONTROL (LIMITED ACCESS TO ROADWAY) C. FULL CONTROL (ONLY RAMP ENTRANCE &amp; EXIT) D. UNKNOWN E. OTHER .....</p>				
<p align="center"><b>VISION OBSCUREMENTS</b></p> <p><b>1 2</b> <b>L E</b></p> <p>A. RAIN, SNOW, ETC. ON WINDSHIELD B. WINDSHIELD OTHERWISE OBSCURED C. VISION OBSCURED BY LOAD D. TREES, BUSHES, ETC. E. BUILDING F. EMBANKMENT G. SIGN BOARDS H. HILLCREST I. PARKED VEHICLES J. MOVING VEHICLES K. BLINDED BY HEADLIGHTS L. BLINDED BY SUNGLARE M. DISTRACTED BY NEON LIGHTS IN FIELD OF VIEW N. UNKNOWN O. NO OBSCUREMENTS P. OTHER .....</p>	<p align="center"><b>CONDITION OF DRIVER</b></p> <p><b>1 2</b> <b>B K</b></p> <p>A. NORMAL B. INATTENTIVE OR DISTRACTED C. PHYSICAL IMPAIRMENT (EYES, EAR, LIMB) D. ILLNESS E. FATIGUED F. APPARENTLY ASLEEP/BLACKOUT G. HAD BEEN DRINKING - IMPAIRED H. HAD BEEN DRINKING - NOT IMPAIRED I. DRUG USE - IMPAIRED J. DRUG USE - NOT IMPAIRED K. UNKNOWN L. OTHER .....</p>	<p align="center"><b>HARMFUL EVENTS</b></p> <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;"> <p>A. OVERTURNED B. FIRE/EXPLOSION C. IMMERSION D. JACKKNIFE E. OTHER NONCOLLISION F. PEDESTRIAN G. PEDALCYCLE H. RAILWAY TRAIN I. ANIMAL J. MOTOR VEHICLE IN TRANSPORT K. MOTOR VEHICLE IN TRANSPORT IN OTHER ROADWAY L. PARKED MOTOR VEHICLE M. OTHER OBJECT (NOT FIXED)</p> </td> <td style="width:50%; border: none;"> <p>N. IMPACT ATTENUATOR O. BRIDGE-PIER OR ABUTMENT P. BRIDGE-PARAPET END Q. BRIDGE-RAIL R. GUARDRAIL FACE S. GUARDRAIL END T. MEDIAN BARRIER U. HIGHWAY TRAFFIC SIGN POST V. OVERHEAD SIGN SUPPORT W. LUMINAIRE/LIGHT SUPPORT X. UTILITY POLE Y. OTHER POLE</p> </td> </tr> </table>			<p>A. OVERTURNED B. FIRE/EXPLOSION C. IMMERSION D. JACKKNIFE E. OTHER NONCOLLISION F. PEDESTRIAN G. PEDALCYCLE H. RAILWAY TRAIN I. ANIMAL J. MOTOR VEHICLE IN TRANSPORT K. MOTOR VEHICLE IN TRANSPORT IN OTHER ROADWAY L. PARKED MOTOR VEHICLE M. OTHER OBJECT (NOT FIXED)</p>	<p>N. IMPACT ATTENUATOR O. BRIDGE-PIER OR ABUTMENT P. BRIDGE-PARAPET END Q. BRIDGE-RAIL R. GUARDRAIL FACE S. GUARDRAIL END T. MEDIAN BARRIER U. HIGHWAY TRAFFIC SIGN POST V. OVERHEAD SIGN SUPPORT W. LUMINAIRE/LIGHT SUPPORT X. UTILITY POLE Y. OTHER POLE</p>	<p align="center"><b>VEH 1</b></p> <p>FIRST HARMFUL EVENT <b>F F</b></p> <p>MOST HARMFUL EVENT <b>A</b></p> <p>Z. CULVERT AA. CURB BB. EMBANKMENT CC. MAIL BOX DD. DITCH</p>	<p align="center"><b>VEH 2</b></p> <p>FIRST HARMFUL EVENT <b>P</b></p> <p>MOST HARMFUL EVENT <b>V</b></p> <p>EE. FENCE FF. TREE GG. UNKNOWN HH. OTHER FIXED OBJECT .....</p>
<p>A. OVERTURNED B. FIRE/EXPLOSION C. IMMERSION D. JACKKNIFE E. OTHER NONCOLLISION F. PEDESTRIAN G. PEDALCYCLE H. RAILWAY TRAIN I. ANIMAL J. MOTOR VEHICLE IN TRANSPORT K. MOTOR VEHICLE IN TRANSPORT IN OTHER ROADWAY L. PARKED MOTOR VEHICLE M. OTHER OBJECT (NOT FIXED)</p>	<p>N. IMPACT ATTENUATOR O. BRIDGE-PIER OR ABUTMENT P. BRIDGE-PARAPET END Q. BRIDGE-RAIL R. GUARDRAIL FACE S. GUARDRAIL END T. MEDIAN BARRIER U. HIGHWAY TRAFFIC SIGN POST V. OVERHEAD SIGN SUPPORT W. LUMINAIRE/LIGHT SUPPORT X. UTILITY POLE Y. OTHER POLE</p>							
<p align="center"><b>RELATION TO ROADWAY</b></p> <p><b>B</b></p> <p>A. ON ROADWAY B. SHOULDER C. MEDIAN D. BEYOND SHOULDER - LEFT E. BEYOND SHOULDER - RIGHT F. OFF ROADWAY G. GORE H. UNKNOWN I. OTHER .....</p>	<p align="center"><b>ALIGNMENT</b></p> <p><b>G</b></p> <p>A. STRAIGHT-LEVEL B. STRAIGHT LEVEL ELEVATED C. CURVE-LEVEL D. CURVE-LEVEL ELEVATED E. ON GRADE-STRAIGHT F. ON GRADE-CURVE G. HILLCREST-STRAIGHT H. HILLCREST-CURVE I. DIP, HUMP-STRAIGHT J. DIP, HUMP-CURVE K. UNKNOWN L. OTHER .....</p>	<p align="center"><b>MOVEMENT PRIOR TO CRASH</b></p> <p><b>1 2</b> <b>N P</b></p> <p>A. STOPPED B. PROCEEDING STRAIGHT AHEAD C. TRAVELING WRONG WAY D. BACKING E. CROSSED MEDIAN INTO OPPOSING LANE F. CROSSED CENTER LINE INTO OPPOSING LANE G. RAN OFF ROAD (NOT WHILE MAKING TURN AT INTERSECTION) H. CHANGING LANES ON MULTI-LANE ROAD I. MAKING LEFT TURN J. MAKING RIGHT TURN K. STOPPED PREPARING TO, OR MAKING U-TURN L. MAKING TURN, DIRECTION UNKNOWN M. STOPPED, PREPARING TO TURN LEFT N. STOPPED PREPARING TO TURN RIGHT O. SLOWING TO MAKE LEFT TURN P. SLOWING TO MAKE RIGHT TURN Q. SLOWING TO STOP R. PROPERLY PARKED S. PARKING MANEUVER T. ENTERING TRAFFIC FROM SHOULDER U. ENTERING TRAFFIC FROM MEDIAN V. ENTERING TRAFFIC FROM PARKING LANE W. ENTERING TRAFFIC FROM PRIVATE LANE X. ENTERING FREEWAY FROM ON RAMP Y. LEAVING FREEWAY VIA OFF RAMP Z. OTHER OR UNKNOWN</p>	<p align="center"><b>VEHICLE CONDITION</b></p> <p><b>1 2</b> <b>C H</b></p> <p>A. DEFECTIVE BRAKES B. DEFECTIVE HEADLIGHTS C. DEFECTIVE REAR LIGHTS D. DEFECTIVE SIGNAL LIGHTS E. ALL LIGHTS OUT F. DEFECTIVE STEERING G. TIRE FAILURE H. WORN OR SMOOTH TIRES I. ENGINE FAILURE J. DEFECTIVE SUSPENSION K. NO DEFECTS OBSERVED L. UNKNOWN DEFECTS M. OTHER .....</p>	<p align="center"><b>TRAFFIC CONTROL CONDITIONS</b></p> <p><b>1 2</b> <b>B B</b></p> <p>A. CONTROLS FUNCTIONING B. CONTROLS NOT FUNCTIONING C. CONTROLS OBSCURED D. LANE MARKING UNCLEAR OR DEFECTIVE E. NO CONTROLS F. CONDITION UNKNOWN</p>				
<p align="center"><b>TRAFFIC CONTROL</b></p> <p><b>1 2</b> <b>V C</b></p> <p>A. STOP SIGN B. YIELD SIGN C. RED SIGNAL ON D. YELLOW SIGNAL ON E. GREEN SIGNAL ON F. GREEN TURN ARROW ON G. RIGHT TURN ON RED H. LIGHT PHASE UNKNOWN I. FLASHING YELLOW J. FLASHING RED K. OFFICER, WATCHMAN L. RR CROSSING, SIGN M. RR CROSSING, SIGNAL</p> <p>N. RR CROSSING, NO CONTROL O. WARNING SIGN (SCHOOL, ETC.) P. SCHOOL FLASHING SPEED SIGN Q. YELLOW NO PASSING LINE R. WHITE DASHED LINE S. YELLOW DASHED LINE T. BIKE LANE U. CROSSWALK V. NO CONTROL W. UNKNOWN X. OTHER .....</p>		<p align="center"><b>ALCOHOL/DRUG INVOLVEMENT</b></p> <p align="right">#1                      #2</p> <p align="right"><b>E</b>                      <b>D</b></p> <p><b>ALCOHOL/DRUGS PRESENT</b> .....</p> <p>A. NEITHER ALCOHOL OR DRUGS PRESENT B. YES (ALCOHOL PRESENT) C. YES (DRUGS PRESENT) D. YES (ALCOHOL AND DRUGS PRESENT) E. NOT REPORTED F. UNKNOWN</p> <p><b>ALCOHOL</b> .....</p> <p>A. TEST REFUSED B. NO TEST GIVEN C. TEST GIVEN, RESULTS PENDING D. TEST GIVEN, BAC ..... g%      ..... g%</p> <p><b>DRUGS</b> .....</p> <p>A. TEST NOT GIVEN B. TEST GIVEN, RESULTS PENDING C. DRUGS REPORTED (SPECIFY) D. UNKNOWN</p> <p>SUSPECTED DRUGS .....</p>						

**OFFICER'S NARRATIVE:** DESCRIBE ANY UNUSUAL CIRCUMSTANCES ASSOCIATED WITH CRASH, INCLUDING OFFICER'S OBSERVATIONS AND OPINIONS. INCLUDE WITNESS NAMES, ADDRESSES, PHONE NUMBERS, ETC. IF NECESSARY, INDICATE DAMAGE TO PRIVATE PROPERTY (WITH OWNER'S NAME & ADDRESS) AT THE END OF THE NARRATIVE.

**REFER TO EACH BY VEHICLE NUMBER**

Vehicle 1 was heading north. Vehicle two was heading west, comencing a left turn.

<b>NON-COLLISION WITH MOTOR VEHICLE</b> A	<b>REAR END</b> B	<b>HEAD-ON</b> C	<b>RIGHT ANGLE</b> D	<b>LEFT TURN</b> E	<b>LEFT TURN</b> F	<b>LEFT TURN</b> G	<b>RIGHT TURN</b> H	<b>RIGHT TURN</b> I	<b>SIDESWIPE SAME</b> J	<b>SIDESWIPE OPPOSITE</b> K	<b>OTHER</b> L	<b>MANNER OF COLLISION</b> H
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VEH	DIRECTION BEFORE CRASH		FINAL LOCATION OF VEHICLES	DISTANCE TRAVELED AFTER IMPACT	SPEED		SKIDMARK DATA (FEET)			
	HEADED	ON STREET, HIGHWAY OR DRIVE			EST.	POSTED	FR	FL	RR	RL
1	3 NE SW	5th Street	Ditch	23.6 F	1 2 3	8 0	2	1	1	3
2	2 NE SW	Rotinghouse Drive	Road	25.3F	0 9 9	8 0	3	5	2	4

DAMAGE TO VEHICLE 1		DAMAGE TO VEHICLE 2	
AREA DAMAGED	EXTENT OF DEFORMITY	AREA DAMAGED	EXTENT OF DEFORMITY
<p>N- UNDER-CARRIAGE Q- TOTAL P- OTHER R- NONE A- UNKNOWN</p>	<p>1ST P</p> <p>2ND N</p> <p>3RD</p> <p>A- NONE B- VERY MINOR C- MINOR D- MINOR/MODERATE E- MODERATE F- MODERATE/SEVERE G- SEVERE H- VERY SEVERE I- UNKNOWN</p>	<p>N- UNDER-CARRIAGE Q- TOTAL P- OTHER R- NONE A- UNKNOWN</p>	<p>1ST A</p> <p>2ND Q</p> <p>3RD N</p> <p>A- NONE B- VERY MINOR C- MINOR D- MINOR/MODERATE E- MODERATE F- MODERATE/SEVERE G- SEVERE H- VERY SEVERE I- UNKNOWN</p>

CITATION NO	VEH. 1	VEH. 2	R.S. OR ORD. NO
41234123	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1234
1234123	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2134	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	



# CONTRIBUTING FACTORS AND CONDITIONS

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WRITE APPROPRIATE LETTER IN BLOCK

<p><b>VISION OBSCUREMENTS</b> <span style="float: right;">B</span></p> <p>A. RAIN, SNOW, ETC. ON WINDSHIELD          B. WINDSHIELD OTHERWISE OBSCURED          C. VISION OBSCURED BY LOAD          D. TREES, BUSHES, ETC.          E. BUILDING          F. EMBANKMENT          G. SIGN BOARDS          H. HILLCREST          I. PARKED VEHICLES          J. MOVING VEHICLES          K. BLINDED BY HEADLIGHTS          L. BLINDED BY SUNGLARE          M. DISTRACTED BY NEON LIGHTS IN FIELD OF VIEW          N. UNKNOWN          O. NO OBSCUREMENTS          P. OTHER .....</p>	<p><b>CONDITION OF DRIVER AND PEDESTRIANS</b> <span style="float: right;">D C D</span></p> <p>A. NORMAL          B. INATTENTIVE OR DISTRACTED          C. PHYSICAL IMPAIRMENT (EYES, EAR, LIMB)          D. ILLNESS          E. FATIGUED          F. APPARENTLY ASLEEP/BLACKOUT          G. HAD BEEN DRINKING - IMPAIRED          H. HAD BEEN DRINKING - IMPAIRED - NOT IMPAIRED          I. DRUG USE - IMPAIRED          J. DRUG USE - NOT IMPAIRED          K. UNKNOWN          L. OTHER .....</p>	<p><b>MOVEMENT PRIOR TO CRASH</b> <span style="float: right;">F</span></p> <p>A. STOPPED          B. PROCEEDING STRAIGHT AHEAD          C. TRAVELING WRONG WAY          D. BACKING          E. CROSSED MEDIAN INTO OPPOSING LANE          F. CROSSED CENTER LINE INTO OPPOSING LANE          G. RAN OFF ROAD (NOT WHILE MAKING TURN AT INTERSECTION)          H. CHANGING LANES ON MULTI-LANE ROAD          I. MAKING LEFT TURN          J. MAKING RIGHT TURN          K. STOPPED PREPARING TO, OR MAKING U-TURN          L. MAKING TURN, DIRECTION UNKNOWN          M. STOPPED, PREPARING TO TURN LEFT          N. STOPPED PREPARING TO TURN RIGHT          O. SLOWING TO MAKE LEFT TURN          P. SLOWING TO MAKE RIGHT TURN          Q. SLOWLY TO STOP          R. PROPERLY PARKED          S. PARKING MANEUVER          T. ENTERING TRAFFIC FROM SHOULDER          U. ENTERING TRAFFIC FROM MEDIAN          V. ENTERING TRAFFIC FROM PARKING LANE          W. ENTERING TRAFFIC FROM PRIVATE LANE          X. ENTERING FREEWAY FROM ON RAMP          Y. LEAVING FREEWAY VIA OFF RAMP          Z. OTHER OR UNKNOWN</p>	<p><b>VEHICLE CONDITION</b> <span style="float: right;">H</span></p> <p>A. DEFECTIVE BRAKES          B. DEFECTIVE HEADLIGHTS          C. DEFECTIVE REAR LIGHTS          D. DEFECTIVE SIGNAL LIGHTS          E. ALL LIGHTS OUT          F. DEFECTIVE STEERING          G. TIRE FAILURE          H. WORN OR SMOOTH TIRES          I. ENGINE FAILURE          J. DEFECTIVE SUSPENSION          K. NO DEFECTS OBSERVED          L. UNKNOWN DEFECTS          M. OTHER .....</p>
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**TRAFFIC CONTROL** A

A. CONTROLS FUNCTIONING  
 B. CONTROLS NOT FUNCTIONING  
 C. CONTROLS OBSCURED  
 D. LANE MARKING UNCLEAR OR DEFECTIVE  
 E. NO CONTROLS  
 F. CONDITION UNKNOWN

<p><b>VEHICLE LIGHTING</b> <span style="float: right;">A</span></p> <p>A. HEADLIGHTS ON          B. HEADLIGHTS OFF          C. DAYTIME RUNNING LIGHTS          D. UNKNOWN</p>	<p style="text-align: center;"><b>ALCOHOL/DRUG INVOLVEMENT</b></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">VEHICLE</td> <td style="width: 50%; text-align: center;">PEDESTRIAN</td> </tr> <tr> <td style="text-align: center;">C</td> <td style="text-align: center;">D</td> </tr> </table> <p><b>ALCOHOL/DRUGS PRESENT</b> .....</p> <p>A. NEITHER ALCOHOL OR DRUGS PRESENT          B. YES (ALCOHOL PRESENT)          C. YES (DRUGS PRESENT)          D. YES (ALCOHOL AND DRUGS PRESENT)          E. NOT REPORTED          F. UNKNOWN</p>	VEHICLE	PEDESTRIAN	C	D
VEHICLE	PEDESTRIAN				
C	D				

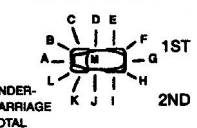
<p><b>VIOLATION</b> <span style="float: right;">S</span></p> <p>A. EXCEEDING STATED SPEED LIMIT          B. EXCEEDING SAFE SPEED LIMIT          C. FAILURE TO YIELD          D. FOLLOWING TOO CLOSELY          E. DRIVING LEFT OF CENTER          F. CUTTING IN, IMPROPER PASSING          G. FAILURE TO SIGNAL          H. MADE WIDE RIGHT TURN          I. CUT CORNER ON LEFT TURN          J. TURNED FROM WRONG LANE          K. OTHER IMPROPER TURNING          L. DISREGARDED TRAFFIC CONTROL          M. IMPROPER STARTING          N. IMPROPER PARKING          O. FAILED TO SET OUT FLAGS, FLARES          P. FAILED TO DIM HEADLIGHTS          Q. VEHICLE CONDITION          R. DRIVER CONDITION          S. CARELESS OPERATION          T. UNKNOWN VIOLATIONS          U. NO VIOLATIONS          V. OTHER .....</p>	<p><b>REASON FOR MOVEMENT</b> <span style="float: right;">A</span></p> <p>A. TO AVOID OTHER VEHICLE          B. TO AVOID PEDESTRIAN          C. TO AVOID ANIMAL          D. TO AVOID OTHER OBJECT          E. PASSING          F. VEHICLE OUT OF CONTROL, NOT PASSING          G. VEHICLE OUT OF CONTROL, PASSING          H. FOR TRAFFIC CONTROL          I. DUE TO CONGESTION          J. DUE TO PRIOR CRASH (COLLISION)          K. DUE TO DRIVER CONDITION          L. DUE TO DRIVER VIOLATION          M. DUE TO VEHICLE CONDITION (FAILURE)          N. DUE TO PAVEMENT CONDITION          O. HIGH WIND          P. NORMAL MOVEMENT          Q. REASON UNKNOWN          R. OTHER .....</p>	<p><b>ALCOHOL</b> .....</p> <p>A. TEST REFUSED          B. NO TEST GIVEN          C. TEST GIVEN, RESULTS PENDING          D. TEST GIVEN, BAC ..... g%          E. UNKNOWN</p> <p><b>DRUGS</b> .....</p> <p>A. TEST NOT GIVEN          B. TEST, GIVEN RESULTS PENDING          C. DRUGS REPORTED (SPECIFY)          D. UNKNOWN</p> <p>SUSPECTED DRUGS .....</p>
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<p><b>TRAFFIC CONTROL</b> <span style="float: right;">A</span></p> <p>A. STOP SIGN          B. YIELD SIGN          C. RED SIGNAL ON          D. YELLOW SIGNAL ON          E. GREEN SIGNAL ON          F. GREEN TURN ARROW ON          G. RIGHT TURN ON RED          H. LIGHT PHASE UNKNOWN          I. FLASHING YELLOW          J. FLASHING RED          K. OFFICER, WATCHMAN          L. RR CROSSING, SIGN          M. RR CROSSING, SIGNAL          N. RR CROSSING, NO CONTROL          O. WARNING SIGN (SCHOOL, ETC.)          P. SCHOOL FLASHING SPEED SIGN          Q. YELLOW NO PASSING LINE          R. WHITE DASHED LINE          S. YELLOW DASHED LINE          T. BIKE LANE          U. CROSSWALK          V. NO CONTROL          W. UNKNOWN          X. OTHER .....</p>	<p style="text-align: center;"><b>HARMFUL EVENTS</b></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">                 A. OVERTURNED                  B. FIRE/EXPLOSION                  C. IMMERSION                  D. JACKKNIFE                  E. OTHER NONCOLLISION                  F. PEDESTRIAN                  G. PEDALCYCLE                  H. RAILWAY TRAIN                  I. ANIMAL                  J. MOTOR VEHICLE IN TRANSPORT                  K. MOTOR VEHICLE IN TRANSPORT IN OTHER ROADWAY                  L. PARKED MOTOR VEHICLE             </td> <td style="width: 33%;">                 M. OTHER OBJECT (NOT FIXED)                  N. IMPACT ATTENUATOR                  O. BRIDGE-PIER OR ABUTMENT                  P. BRIDGE-PARAPET END                  Q. BRIDGE-RAIL                  R. GUARDRAIL FACE                  S. GUARDRAIL END                  T. MEDIAN BARRIER                  U. HIGHWAY TRAFFIC SIGN POST                  V. OVERHEAD SIGN SUPPORT                  W. LUMINAIRE/LIGHT SUPPORT             </td> <td style="width: 33%;">                 X. UTILITY POLE                  Y. OTHER POLE                  Z. CULVERT                  AA. CURB                  BB. EMBANKMENT                  CC. MAIL BOX                  DD. DITCH                  EE. FENCE                  FF. TREE                  GG. UNKNOWN                  HH. OTHER FIXED OBJECT             </td> </tr> </table> <p style="text-align: right;"><b>VEHICLE</b></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">FIRST HARMFUL EVENT</td> <td style="width: 50%;">A</td> </tr> <tr> <td style="width: 50%;">MOST HARMFUL EVENT</td> <td style="width: 50%;">A</td> </tr> </table>	A. OVERTURNED B. FIRE/EXPLOSION C. IMMERSION D. JACKKNIFE E. OTHER NONCOLLISION F. PEDESTRIAN G. PEDALCYCLE H. RAILWAY TRAIN I. ANIMAL J. MOTOR VEHICLE IN TRANSPORT K. MOTOR VEHICLE IN TRANSPORT IN OTHER ROADWAY L. PARKED MOTOR VEHICLE	M. OTHER OBJECT (NOT FIXED) N. IMPACT ATTENUATOR O. BRIDGE-PIER OR ABUTMENT P. BRIDGE-PARAPET END Q. BRIDGE-RAIL R. GUARDRAIL FACE S. GUARDRAIL END T. MEDIAN BARRIER U. HIGHWAY TRAFFIC SIGN POST V. OVERHEAD SIGN SUPPORT W. LUMINAIRE/LIGHT SUPPORT	X. UTILITY POLE Y. OTHER POLE Z. CULVERT AA. CURB BB. EMBANKMENT CC. MAIL BOX DD. DITCH EE. FENCE FF. TREE GG. UNKNOWN HH. OTHER FIXED OBJECT	FIRST HARMFUL EVENT	A	MOST HARMFUL EVENT	A
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<p><b>PEDESTRIAN ACTIONS</b> <span style="float: right;">A</span></p> <p>A. CROSSING, ENTERING ROAD AT INTERSECTION          B. CROSSING, ENTERING ROAD NOT AT INTERSECTION          C. WALKING IN ROAD - WITH TRAFFIC          D. WALKING IN ROAD - AGAINST TRAFFIC          E. SLEEPING IN ROADWAY          F. STANDING IN ROADWAY          G. GETTING ON OR OFF OTHER VEHICLE          H. PUSHING, WORKING ON VEHICLE IN ROAD          I. OTHER WORKING IN ROADWAY          J. PLAYING IN ROADWAY          K. NOT IN ROADWAY OR UNKNOWN          L. NOT APPLICABLE          M. OTHER IN ROADWAY .....</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">CITATION NO.</th> <th style="width: 10%;">VEH.</th> <th style="width: 10%;">PED.</th> <th style="width: 50%;">R.S. OR ORD. NO.</th> </tr> <tr> <td>_____</td> <td style="text-align: center;">□</td> <td style="text-align: center;">□</td> <td>_____</td> </tr> <tr> <td>_____</td> <td style="text-align: center;">□</td> <td style="text-align: center;">□</td> <td>_____</td> </tr> <tr> <td>_____</td> <td style="text-align: center;">□</td> <td style="text-align: center;">□</td> <td>_____</td> </tr> <tr> <td>_____</td> <td style="text-align: center;">□</td> <td style="text-align: center;">□</td> <td>_____</td> </tr> </table>	CITATION NO.	VEH.	PED.	R.S. OR ORD. NO.	_____	□	□	_____	_____	□	□	_____	_____	□	□	_____	_____	□	□	_____
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DIRECTION BEFORE CRASH	FINAL LOCATION OF VEHICLES	DISTANCE TRAVELED AFTER IMPACT	SPEED		SKIDMARK DATA (FEET)			
ON STREET OR HIGHWAY OR DRIVE			EST.	POSTED	FR	FL	RR	RL
N E S W			□ □ □ □	□ □ □ □				

**DAMAGE TO THIS VEHICLE**

AREA DAMAGED	EXTEND OF DEFORMITY
	A- NONE B- VERY MINOR C- MINOR D- MINOR/MODERATE E- MODERATE F- MODERATE/SEVERE G- SEVERE H- VERY SEVERE I- UNKNOWN
1ST <input type="text"/> 2ND <input type="text"/> 3RD <input type="text"/>	1ST <input type="text"/> 2ND <input type="text"/> 3RD <input type="text"/>

**INSURANCE THIS VEHICLE**

INSURANCE CO. NAME (NOT AGENCY NAME)	EFFECTIVE DATE
POLICY NUMBER	EXPIRATION DATE
AGENT'S NAME	PHONE # ( )
AGENT'S ADDRESS	

