

Central Intelligence Agency

TOTAL NUMBER OF VEHICLES INVOLVED

DATE OF CRASH: 10302018 TIME (0000): 0715 DISTRICT/ZONE: GBCI TROOP: PAGE # 01

PARISH: PARISH CODE: LONG: 1800034207

CITY OR TOWN: CITY CODE: Quadrant: Service Road: NW SW NE SE N E S W

CRASH OCCURRED ON A. INTERSTATE B. U.S. HWY C. STATE HWY D. PARISH ROAD E. CITY STREET F. OFF ROAD G. PRIVATE PROPERTY H. TOLL ROAD	HIGHWAY #	MILEPOST	ROADWAY NAME 00930 DOLLEY MADISO	WORK ZONE	HIT & RUN
DISTANCE		MILES <input type="checkbox"/> FEET <input type="checkbox"/>	STREET/HIGHWAY AT INTERSECTION <input type="checkbox"/> NOT AT INTERSECTION <input type="checkbox"/>	PUBLIC PROPERTY DAMAGE	PHOTOS MADE
DISTANCE		MILES <input type="checkbox"/> FEET <input type="checkbox"/>	STREET/HIGHWAY AT INTERSECTION <input type="checkbox"/> NOT AT INTERSECTION <input type="checkbox"/>	RR TRAIN INVOLVED	FATALITY
		MILES <input type="checkbox"/> FEET <input type="checkbox"/>	STREET/HIGHWAY AT INTERSECTION <input type="checkbox"/> NOT AT INTERSECTION <input type="checkbox"/>	PED	INJURY

WRITE APPROPRIATE LETTER IN BLOCK CONTRIBUTING FACTORS AND CONDITIONS

ROAD SURFACE (ONE PER COLUMN) A. DRY B. WET C. SNOW/SLUSH D. ICE E. CONTAMINANT (SAND, MUD, DIRT, OIL, ETC.) Y. UNKNOWN Z. OTHER	ROADWAY CONDITIONS A. NO ABNORMALITIES B. SHOULDER ABNORMALITY 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. WATER ON ROADWAY L. ANIMAL IN ROADWAY M. OBJECT IN ROADWAY Z. OTHER	TYPE OF ROADWAY 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 Y. UNKNOWN Z. OTHER	ALIGNMENT 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 Y. UNKNOWN Z. OTHER	PRIMARY FACTOR SECONDARY FACTOR 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
WEATHER A. CLEAR B. CLOUDY C. RAIN D. FOG/SMOKE E. SLEET/HALE F. SNOW G. SEVERE CROSSWIND H. BLOWING SAND, SOIL, DIRT, SNOW Y. UNKNOWN Z. OTHER	KIND OF LOCATION A. MANUFACTURING OR INDUSTRIAL B. BUSINESS CONTINUOUS C. BUSINESS, MIXED RESIDENTIAL D. RESIDENTIAL DISTRICT E. RESIDENTIAL SCATTERED F. SCHOOL OR PLAYGROUND G. OPEN COUNTRY Z. OTHER	RELATION TO ROADWAY A. ON ROADWAY B. SHOULDER C. MEDIAN D. BEYOND SHOULDER - LEFT E. BEYOND SHOULDER - RIGHT F. BEYOND RIGHT OF WAY G. GORE Y. UNKNOWN Z. OTHER	ACCESS CONTROL A. NO CONTROL (UNLIMITED ACCESS TO ROADWAY) B. PARTIAL CONTROL (LIMITED ACCESS TO ROADWAY) C. FULL CONTROL (ONLY RAMP ENTRANCE & EXIT) Y. UNKNOWN Z. OTHER	LIGHTING A. DAYLIGHT B. DARK - NO STREET LIGHTS C. DARK - CONTINUOUS STREET LIGHT D. DARK - STREET LIGHT AT INTERSECTION ONLY E. DUSK F. DAWN Y. UNKNOWN Z. OTHER

VEHICLE CONFIGURATION							CARGO BODY TYPE				
A. PASSENGER CAR	D. A, B, C, OR S WITH TRAILER	G. OFF-ROAD VEHICLE	J. BUS W/SEATS FOR 9-15 OCCUPANTS	M. SINGLE UNIT TRUCK W/ 3 AXLES OR MORE	Q. TRACTOR SEMI-TRAILER	T. FARM EQUIPMENT	A. BUS	D. FLATBED	G. AUTO TRANSPORTER	J. HOPPER	
B. LT. TRUCK (P.U., ETC.)	E. MOTORCYCLE	H. EMERGENCY VEHICLE IN USE	K. BUS W/SEATS FOR 18 OR MORE OCC.	N. TRUCK/ TRAILER	R. TRUCK DOUBLE	V. MOTOR HOME	B. VAN/ENCLOSED BOX	E. DUMP TRUCK/ TRAILER	H. LOG TRUCK/ TRAILER	K. POLE TRAILER	
C. VAN	F. PEDALCYCLE	I. SCHOOL BUS	L. SINGLE UNIT TRUCK W/ 2 AXLES	P. TRUCK/ TRACTOR	S. SUV	Z. OTHER	C. CARGO TANK	F. CONCRETE MIXER	I. GARBAGE/ REFUSE	X. NO CARGO BODY	Z. OTHER

EMERGENCY SERVICES: AMBULANCE FIRE DEPARTMENT RESCUE UNIT

TIME CALLED: ARRIVED SCENE: DEPARTED SCENE: ARRIVED HOSPITAL: TIME CALLED: ARRIVED SCENE:

INVESTIGATING AGENCY: CIA NAME OF AGENCY: TIME OF NOTIFICATION: 0715 TIME OF ARRIVAL: 0720 TIME ALL LANES OPENED: 0720

INVESTIGATION COMPLETE: Y/N: INVESTIGATING POLICE AGENCY: A STATE B CITY C. PARISH Z. OTHER: DATE REPORT COMPLETED:

INVESTIGATING OFFICER'S NAME (PRINT): SIGNATURE: BADGE #: SUPERVISOR'S INITIALS OR BADGE#:

OFFICER'S NARRATIVE: DESCRIBE ANY UNUSUAL CIRCUMSTANCES ASSOCIATED WITH CRASH, INCLUDING OFFICER'S OBSERVATIONS AND OPINIONS. INCLUDE WITNESS NAMES, ADDRESSES, PHONE NUMBERS, ETC.

PAGE #

(b)(3)

IF NECESSARY, INDICATE DAMAGE TO PUBLIC OR PRIVATE PROPERTY (WITH OWNER'S NAME & ADDRESS) AT THE END OF THE NARRATIVE.

02

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REFER TO EACH BY VEHICLE NUMBER

On 10/30/2018 at 0715 I Officer [redacted] while working was dispatched to a traffic collision with no injuries. I arrived at approximately 0720 hours. I observed two vehicles pulled off to the side of the road. The first vehicle, a blue Volkswagon Passat with the tag [redacted] was sitting there waiting. I walked up to the driver, Mr. [redacted] and asked what happened. Mr. [redacted] informed me that while waiting at the stop sign by [redacted] lot, he was trying to make a left hand turn to drive towards the red lot. He said he thought the road was safe to take a left turn. When he pulled out he hit Ms [redacted] vehicle a Hyundai Accent tag [redacted] I then approached Ms. [redacted] vehicle and asked her what happened. She stated she was driving from the George Washington Parkway entrance and was attempting to make a left towards green lot. When Ms [redacted] started to make the left hand turn Mr. [redacted] pulled out and struck the driver side of her vehicle. There was a dent in Ms [redacted] vehicle just before the driver side rear wheel well. Mr. [redacted] had minor paint transfer and some scratches on the driver side front bumper of his vehicle. I informed both drivers there would be a police report, and had them exchange insurance forms. Neither driver had any visible injuries and the scene was cleared at approximately 0735 hours.

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NON-COLLISION WITH MOTOR VEHICLE	REAR END	HEAD-ON	RIGHT ANGLE	LEFT TURN	LEFT TURN	LEFT TURN	RIGHT TURN	RIGHT TURN	SIDESWIPE SAME	SIDESWIPE OPPOSITE	OTHER	MANNER OF COLLISION
A	B	C	D	E	F	G	H	I	J	K	Y	
												1

NORTH

Central Intelligence Agency 1 5 9 1

- 0 3

0 1 VEH # OR 0 PEDESTRIAN

CONF	CARGO BODY TYPE	YEAR	MAKE	MODEL	# DOORS	# AXLES	# TIRES
A	X <small>see page 1 for selections</small>	2 0 0 9	HYUN	ACCENT	2		

V.I.N. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

VEHICLE TOWED N

A YES
B NO
C. LEFT AT SCENE

REMOVED BY

YEAR STATE NUMBER TYPE

LICENSE PLATE 2 0 1 9

YEAR MAKE TYPE

GVWR/GCWR

REASON TOWED
A. VEHICLE DAMAGE
B. DRIVER ARRESTED
C. INSURANCE VIOLATION
Z. OTHER

(b)(6)

TRAILER DESCRIPTION

LICENSE PLATE

VEHICLE CLASSIFICATION	COMMERCIAL/BUSINESS VEHICLE	GOVERNMENT VEHICLE	PERSONAL VEHICLE <input checked="" type="checkbox"/> X
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US DOT #

CARRIER NAME MC/MX ("ICC") #

STREET ADDRESS CITY STATE ZIP

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INTERSTATE CARRIER N TRANSPORTING HAZARDOUS MATERIAL N CLASS # ID# PLACARDS DISPLAYED N HAZ MAT RELEASED N

NAME (LAST, FIRST, MI) OF DRIVER PEDESTRIAN

[Redacted Name]

DATE OF BIRTH

STREET ADDRESS

TELEPHONE #

CITY

STATE

A A B F E

STATE CLASS ENDORSEMENTS DRIVER'S LICENSE NUMBER

RESTRICTED TO EXCHANGE INFORMATION

TRANSPORTED TO MEDICAL FACILITY
A. YES C. REFUSED AID
B. NO Y. UNKNOWN

(b)(6)

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(b)(6)

PEDESTRIAN ONLY	UPPER BODY CLOTHING	LIGHT	DARK	LOWER BODY CLOTHING	LIGHT	DARK	SEX	RACE	AGE	INJURY CODE
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(b)(6)

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

Same as Driver

TELEPHONE #

STREET ADDRESS

CITY

STATE

ZIP

INSURANCE CO. NAME **GEICO** (NOT AGENCY NAME) POLICY NUMBER [Redacted] EXPIRATION DATE //

(b)(6)

AGENT'S NAME/ADDRESS

PHONE # 0-

OCCUPANT'S NAME (LAST, FIRST, MI)

STREET ADDRESS

TRANSPORTED TO MEDICAL FACILITY
A. YES C. REFUSED AID
B. NO Y. UNKNOWN

CITY

STATE

ZIP

NAME OF FACILITY

OCCUPANT'S NAME (LAST, FIRST, MI)

STREET ADDRESS

TRANSPORTED TO MEDICAL FACILITY
A. YES C. REFUSED AID
B. NO Y. UNKNOWN

CITY

STATE

ZIP

NAME OF FACILITY

SEATING POSITION	EJECTION	TRAPPED OR EXTRICATED	AIRBAG	OCCUPANT PROTECTION SYSTEM USED	INJURY
A - FRONT SEAT-LEFT SIDE (MOTORCYCLE DRIVER)	A - NOT EJECTED	A - NOT TRAPPED	A - DEPLOYED	A - NONE USED-VEHICLE OCCUPANT	A - FATAL
B - FRONT SEAT-MIDDLE	B - TOTALLY EJECTED	B - TRAPPED/EXTRICATED	B - NON DEPLOYED	B - SHOULDER BELT ONLY USED	B - INCAPACITATING/SEVERE
C - FRONT SEAT-RIGHT SIDE	C - PARTIALLY EJECTED	C - TRAPPED/NOT EXTRICATED	C - NON-DEPLOYED/SWITCH OFF	C - LAP BELT ONLY USED	C - NON-INCAPACITATING/MODERATE
D - SECOND SEAT-LEFT SIDE (MOTORCYCLE PASSENGER)	Y - UNKNOWN	Y - UNKNOWN	D - NOT APPLICABLE	D - SHOULDER AND LAP BELT USED	D - POSSIBLE/COMPLAINT
E - SECOND SEAT-MIDDLE			E - UNKNOWN	E - CHILD SAFETY SEAT IMPROPERLY USED	E - NO INJURY
F - SECOND SEAT-RIGHT SIDE				F - CHILD SAFETY SEAT USED	
G - THIRD ROW-LEFT SIDE (MOTORCYCLE PASSENGER)				G - HELMET USED	
H - THIRD ROW-MIDDLE				Y - RESTRAINT USE UNKNOWN	
I - THIRD ROW-RIGHT SIDE					

WRITE APPROPRIATE LETTER IN BLOCK

CONTRIBUTING FACTORS AND CONDITIONS

<p>VISION OBSCUREMENTS N</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. NO OBSCUREMENTS Y. UNKNOWN Z. OTHER</p>	<p>CONDITION OF DRIVER/PED Y</p> <p>A. NORMAL B. INATTENTIVE C. DISTRACTED D. ILLNESS E. FATIGUED F. APPARENTLY ASLEEP/BLACKOUT G. DRINKING ALCOHOL - IMPAIRED H. DRINKING ALCOHOL - NOT IMPAIRED I. DRUG USE - IMPAIRED J. DRUG USE - NOT IMPAIRED K. PHYSICAL IMPAIRMENT (EYES, EAR, LIMB) Y. UNKNOWN Z. OTHER</p>	<p>SEQUENCE OF EVENTS/HARMFUL EVENTS</p> <p>NON COLLISION A. OVERTURN/Rollover B. FIRE/EXPLOSION C. IMMERSION D. JACKKNIFE E. CARGO/EQUIPMENT LOSS OR SHIFT F. FELL/JUMPED FROM MOTOR VEHICLE G. THROWN OR FALLING OBJECT H. EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC.) I. SEPARATION OF UNITS IN TRANSPORT J. RAN OFF ROAD RIGHT K. RAN OFF ROAD LEFT L. CROSSED MEDIAN/CENTERLINE M. DOWNHILL RUNAWAY N. OTHER NON-COLLISION</p> <p>COLLISION WITH PERSON, MOTOR VEHICLE, OR NON-FIXED OBJECT O. PEDESTRIAN P. PEDALCYCLE Q. RAILWAY VEHICLE (TRAIN, ENGINE) R. ANIMAL</p> <p>COLLISION WITH FIXED OBJECT S. MOTOR VEHICLE IN TRANSPORT T. PARKED MOTOR VEHICLE U. STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY MOTOR VEHICLE V. WORK ZONE/MAINTENANCE EQUIPMENT W. OTHER NON-FIXED OBJECT</p> <p>COLLISION WITH FIXED OBJECT X. IMPACT ATTENUATOR/CRASH CUSHION Y. BRIDGE OVERHEAD STRUCTURE Z. BRIDGE PIER OR SUPPORT AA. BRIDGE RAIL BB. CULVERT CC. CURB DD. DITCH EE. EMBANKMENT FF. GUARDRAIL FACE GG. GUARDRAIL END HH. CONCRETE TRAFFIC BARRIER II. OTHER TRAFFIC BARRIER JJ. TREE (STANDING) KK. UTILITY POLE/LIGHT SUPPORT</p> <p>LL. TRAFFIC SIGN SUPPORT MM. TRAFFIC SIGNAL SUPPORT NN. OTHER POST, POLE, OR SUPPORT OO. FENCE PP. MAILBOX QQ. OTHER FIXED OBJECT (WALL, BUILDING, TUNNEL, ETC.) YY. UNKNOWN</p>
<p>VIOLATION U</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. IMPROPER BACKING U. NO VIOLATIONS Y. UNKNOWN Z. OTHER</p>	<p>DRIVER DISTRACTION E</p> <p>A. CELL PHONE B. OTHER ELECTRONIC DEVICE (PAGER, PALM PILOT, NAVIGATION DEVICE, ETC.) C. OTHER INSIDE THE VEHICLE D. OTHER OUTSIDE THE VEHICLE E. NOT DISTRACTED Y. UNKNOWN</p>	<p>REASON FOR MOVEMENT Y</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 Y. UNKNOWN Z. OTHER</p>
<p>TRAFFIC CONTROL A</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, FLAGMAN 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 Y. UNKNOWN Z. OTHER</p>	<p>PEDESTRIAN ACTIONS Y</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 Y. UNKNOWN Z. OTHER</p>	<p>MOVEMENT PRIOR TO CRASH I</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</p> <p>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</p> <p>T. ENTERING TRAFFIC FROM SHOULDER U. ENTERING TRAFFIC FROM MEDIAN V. ENTERING TRAFFIC FROM PARKING LANE W. ENTERING TRAFFIC FROM PRIVATE LANE OR DRIVEWAY X. ENTERING FREEWAY FROM ON RAMP Y. LEAVING FREEWAY VIA OFF RAMP Z. OTHER OR UNKNOWN</p>
<p>VEHICLE LIGHTING Y</p> <p>A. HEADLIGHTS ON B. HEADLIGHTS OFF C. DAYTIME RUNNING LIGHTS Y. UNKNOWN</p>	<p>VEHICLE CONDITION K</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 Y. UNKNOWN Z. OTHER</p>	<p>ALCOHOL/DRUG INVOLVEMENT</p> <p>ALCOHOL/DRUGS SUSPECTED A</p> <p>A. NEITHER ALCOHOL NOR DRUGS B. YES-ALCOHOL C. YES-DRUGS D. YES-ALCOHOL AND DRUGS Y. UNKNOWN</p> <p>ALCOHOL B</p> <p>A. TEST REFUSED B. NO TEST GIVEN C. TEST GIVEN, RESULTS PENDING D. TEST GIVEN, BAC 0%</p> <p>DRUGS A</p> <p>A. TEST NOT GIVEN B. TEST GIVEN, RESULTS PENDING C. TEST REFUSED D. DRUGS REPORTED (SPECIFY IN NARRATIVE)</p>
<p>AFFIX BLOOD ALCOHOL KIT LABEL HERE</p> <p>(OR ENTER BLOOD ALCOHOL KIT NUMBER)</p>		

DIRECTION BEFORE CRASH		FINAL LOCATION OF VEHICLES	DISTANCE TRAVELED AFTER IMPACT	SPEED		SKIDMARK DATA (FEET)			
HEADED	ON HIGHWAY, STREET OR DRIVE			EST.	POSTED	FR	FL	RR	RL
NE SW					25				

DAMAGE TO VEHICLE

<p>AREA DAMAGED</p> <p>N- UNDER-CARRIAGE O- TOTAL P- OTHER Q- NONE Y- UNKNOWN</p>	<p>EXTENT OF DEFORMITY</p> <p>A- NONE B- VERY MINOR C- MINOR D- MINOR/MODERATE E- MODERATE F- MODERATE/SEVERE G- SEVERE H- VERY SEVERE Y- UNKNOWN</p>
<p>1ST <input type="checkbox"/></p> <p>2ND <input type="checkbox"/></p> <p>3RD <input type="checkbox"/></p>	<p>1ST <input type="checkbox"/></p> <p>2ND <input type="checkbox"/></p> <p>3RD <input type="checkbox"/></p>

CITATION NO	VEH. PED.	B.S. OR ORD. NO
	<input type="checkbox"/> <input type="checkbox"/>	
	<input type="checkbox"/> <input type="checkbox"/>	
	<input type="checkbox"/> <input type="checkbox"/>	
	<input type="checkbox"/> <input type="checkbox"/>	
	<input type="checkbox"/> <input type="checkbox"/>	

NOTICE OF INSURANCE VIOLATION

Central Intelligence Agency 1 5 9 1

- 0 5

0 2 VEH # OR 0 PEDESTRIAN

CONF	CARGO BODY TYPE	YEAR	MAKE	MODEL	# DOORS	# AXLES	# TIRES
A	X see page 1 for selections	2013	VOLK	PASSAT	4		

V.I.N 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

VEHICLE TOWED N

A YES
B NO
C. LEFT AT SCENE

REMOVED BY

YEAR STATE NUMBER TYPE

LICENSE PLATE 2 0 1 9

GVWR/GCWR

REASON TOWED
A. VEHICLE DAMAGE
B. DRIVER ARRESTED
C. INSURANCE VIOLATION
Z. OTHER

(b)(6)

TRAILER DESCRIPTION

LICENSE PLATE

VEHICLE CLASSIFICATION	COMMERCIAL/BUSINESS VEHICLE	GOVERNMENT VEHICLE	PERSONAL VEHICLE <input checked="" type="checkbox"/>
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US DOT #

CARRIER NAME

MC/MX ("ICC") #

(b)(6)

STREET ADDRESS: CITY STATE ZIP

INTERSTATE CARRIER Y/N TRANSPORTING HAZARDOUS MATERIAL Y/N CLASS ID# PLACARDS DISPLAYED Y/N HAZ MAT RELEASED Y/N

NAME (LAST, FIRST, MI) OF DRIVER PEDESTRIAN

(b)(3)
(b)(6)

DATE OF BIRTH

STREET ADDRESS

TELEPHONE #

INSURANCE CO. NAME POLICY NUMBER EXPIRATION DATE

(b)(6)

CITY STATE

STATE

A A B M E

(b)(6)

STATE CLASS ENDORSEMENTS DRIVER'S LICENSE NUMBER

TRANSPORTED TO MEDICAL FACILITY

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

Y/N Y

NATAL OF FACILITY

(b)(6)

(b)(6)

PEDESTRIAN ONLY UPPER BODY CLOTHING LIGHT DARK LOWER BODY CLOTHING LIGHT DARK SEX RACE AGE INJURY CODE

(b)(6)

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

X Same as Driver

TELEPHONE #

STREET ADDRESS

CITY STATE ZIP

STATE

ZIP

INSURANCE CO. NAME PROGRESSIVE

(NOT AGENCY NAME)

POLICY NUMBER

EXPIRATION DATE //

(b)(6)

AGENT'S NAME/ADDRESS

PHONE # (-)

OCCUPANT'S NAME (LAST, FIRST, MI)

REASON TOWED
A. VEHICLE DAMAGE
B. DRIVER ARRESTED
C. INSURANCE VIOLATION
Z. OTHER

STREET ADDRESS

TRANSPORTED TO MEDICAL FACILITY

NAME OF FACILITY

CITY STATE ZIP

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

OCCUPANT'S NAME (LAST, FIRST, MI)

REASON TOWED
A. VEHICLE DAMAGE
B. DRIVER ARRESTED
C. INSURANCE VIOLATION
Z. OTHER

STREET ADDRESS

TRANSPORTED TO MEDICAL FACILITY

NAME OF FACILITY

CITY STATE ZIP

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

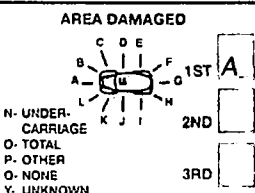
SEATING POSITION	EJECTION	TRAPPED OR EXTRICATED	AIRBAG	OCCUPANT PROTECTION SYSTEM USED	INJURY
A - FRONT SEAT-LEFT SIDE (MOTORCYCLE DRIVER)	J - SLEEPER SECTION OF CAB (TRUCK)	A - NOT EJECTED	A - NOT TRAPPED	A - NONE USED-VEHICLE OCCUPANT	A - FATAL
B - FRONT SEAT-MIDDLE	K - PASSENGER IN OTHER ENCLOSED PASSENGER OR CARGO AREA (NON-TRAILING UNIT)	B - TOTALLY EJECTED	B - TRAPPED/EXTRICATED	B - SHOULDERS BELT ONLY USED	B - INCAPACITATING/SEVERE
C - FRONT SEAT-RIGHT SIDE	L - PASSENGER IN OTHER UNENCLOSED PASSENGER OR CARGO AREA (NON-TRAILING UNIT)	C - PARTIALLY EJECTED	C - TRAPPED/NOT EXTRICATED	C - LAP BELT ONLY USED	C - NON-INCAPACITATING/MODERATE
D - SECOND SEAT-LEFT SIDE (MOTORCYCLE PASSENGER)	M - PASSENGER ON TRAIN OR STREETCAR	Y - UNKNOWN	Y - UNKNOWN	D - SHOULDERS AND LAP BELT USED	D - POSSIBLE/COMPLAINT
E - SECOND SEAT-MIDDLE	N - TRAILING UNIT			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)	Y - UNKNOWN			G - HELMET USED	
H - THIRD ROW-MIDDLE				Y - RESTRAINT USE UNKNOWN	
I - THIRD ROW-RIGHT SIDE					

WRITE APPROPRIATE LETTER IN BLOCK

CONTRIBUTING FACTORS AND CONDITIONS

<p>VISION OBSCUREMENTS N</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. NO OBSCUREMENTS Y. UNKNOWN Z. OTHER</p>	<p>CONDITION OF DRIVER/PED A</p> <p>A. NORMAL B. INATTENTIVE C. DISTRACTED D. ILLNESS E. FATIGUED F. APPARENTLY ASLEEP/BLACKOUT G. DRINKING ALCOHOL - IMPAIRED H. DRINKING ALCOHOL - NOT IMPAIRED I. DRUG USE - IMPAIRED J. DRUG USE - NOT IMPAIRED K. PHYSICAL IMPAIRMENT (EYES, EAR, LIMB) Y. UNKNOWN Z. OTHER</p>	<p>SEQUENCE OF EVENTS/HARMFUL EVENTS</p> <p>NON-COLLISION A. OVERTURN/ROLLOVER B. FIRE/EXPLOSION C. IMMERSION D. JACKKNIFE E. CARGO/EQUIPMENT LOSS OR SHIFT F. FELL/JUMPED FROM MOTOR VEHICLE G. THROWN OR FALLING OBJECT H. EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC.) I. SEPARATION OF UNITS IN TRANSPORT J. RAN OFF ROAD RIGHT K. RAN OFF ROAD LEFT L. CROSSED MEDIAN/CENTERLINE M. DOWNHILL RUNAWAY N. OTHER NON-COLLISION</p> <p>COLLISION WITH FIXED OBJECT X. IMPACT ATTENUATOR/CRASH CUSHION Y. BRIDGE OVERHEAD STRUCTURE Z. BRIDGE PIER OR SUPPORT AA. BRIDGE RAIL BB. CULVERT CC. CURB DD. DITCH EE. EMBANKMENT FF. GUARDRAIL FACE GG. GUARDRAIL END HH. CONCRETE TRAFFIC BARRIER II. OTHER TRAFFIC BARRIER JJ. TREE (STANDING) KK. UTILITY POLE/LIGHT SUPPORT</p> <p>COLLISION WITH PERSON, MOTOR VEHICLE, OR NON-FIXED OBJECT O. PEDESTRIAN P. PEDALCYCLE Q. RAILWAY VEHICLE (TRAIN, ENGINE) R. ANIMAL</p> <p>LL. TRAFFIC SIGN SUPPORT MM. TRAFFIC SIGNAL SUPPORT NN. OTHER POST, POLE, OR SUPPORT OO. FENCE PP. MAILBOX QQ. OTHER FIXED OBJECT (WALL, BUILDING, TUNNEL, ETC.) YY. UNKNOWN</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">1st</td> <td style="width:10%; text-align: center;">S</td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> </tr> <tr> <td style="text-align: center;">2nd</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> </tr> <tr> <td style="text-align: center;">3rd</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> </tr> <tr> <td style="text-align: center;">4th</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> </tr> </table> <p style="text-align: right;">MOST HARMFUL EVENT S</p>	1st	S									2nd	Y	Y	Y	Y	Y	Y	Y	Y	Y	3rd	Y	Y	Y	Y	Y	Y	Y	Y	Y	4th	Y	Y	Y	Y	Y	Y	Y	Y	Y
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3rd	Y	Y	Y	Y	Y	Y	Y	Y	Y																																	
4th	Y	Y	Y	Y	Y	Y	Y	Y	Y																																	
<p>VIOLATION U</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. IMPROPER BACKING U. NO VIOLATIONS Y. UNKNOWN Z. OTHER</p>	<p>DRIVER DISTRACTION Y</p> <p>A. CELL PHONE B. OTHER ELECTRONIC DEVICE (PAGER, PALM PILOT, NAVIGATION DEVICE, ETC.) C. OTHER INSIDE THE VEHICLE D. OTHER OUTSIDE THE VEHICLE E. NOT DISTRACTED Y. UNKNOWN</p>	<p>MOVEMENT PRIOR TO CRASH M</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</p> <p>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</p> <p>T. ENTERING TRAFFIC FROM SHOULDER U. ENTERING TRAFFIC FROM MEDIAN V. ENTERING TRAFFIC FROM PARKING LANE W. ENTERING TRAFFIC FROM PRIVATE LANE OR DRIVEWAY X. ENTERING FREEWAY FROM ON RAMP Y. LEAVING FREEWAY VIA OFF RAMP Z. OTHER OR UNKNOWN</p>																																								
<p>TRAFFIC CONTROL A</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, FLAGMAN 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 Y. UNKNOWN Z. OTHER</p>	<p>REASON FOR MOVEMENT Y</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 Y. UNKNOWN Z. OTHER</p>	<p>VEHICLE CONDITION K</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 Y. UNKNOWN Z. OTHER</p>																																								
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DIRECTION BEFORE CRASH		FINAL LOCATION	DISTANCE TRAVELED	SPEED		SKIDMARK DATA (FEET)			
ON HIGHWAY, STREET OR DRIVE		OF VEHICLES	AFTER IMPACT	EST.	POSTED	FR	FL	RR	RL
HEADED	N E S W				25				

<p>DAMAGE TO VEHICLE</p> <div style="display: flex;"> <div style="flex: 1;"> <p>AREA DAMAGED</p>  <p>N. UNDER CARRIAGE O. TOTAL P. OTHER Q. NONE Y. UNKNOWN</p> </div> <div style="flex: 1;"> <p>EXTENT OF DEFORMITY</p> <p>A. NONE B. VERY MINOR C. MINOR D. MINOR/MODERATE E. MODERATE F. MODERATE/SEVERE G. SEVERE H. VERY SEVERE Y. UNKNOWN</p> </div> </div>	<p>CITATION NO</p> <p>_____</p>	<p>VEH. PED.</p> <p>_____</p>	<p>B.S. OR ORD. NO</p> <p>_____</p>
<p>NOTICE OF INSURANCE VIOLATION <input type="checkbox"/></p>			