
Kansas Motor Vehicle	Investigating Department		Reviewed by	ý	Local C	Case No.	Page of	Amended Report			
Crash Report								- DUI			
	Investigating Officer Name		Badge Numb	nber County	y City Name						
KDOT Form 850A page 1 Rev. 2019								Hit & Run			
Milepost Block No Dir Pfx On Roa	ad Name Roa	pad Type Dir	ir Sfx SpdLmt	Date of Crash	n (mm/dd/yyyy)	Time Occur.	. Day	Crash Severity			
From Dist   Ft/Mi   From Dir   O FROM   Dir Pfx   Refer	rence or At Road Name Road	pad Type Dir	ir Sfx SpdLmt	Date Notified	l (mm/dd/yyyy)	Time Notif.	Day	Fatal Injury			
Narrative: Describe each traffic unit's pre-crash moven	ment and direction of travel			Date Arrived	(mm/dd/yyyy)	Time Arriv.	Day	-PDO >= \$1,000			
INAITAM VO. DOBOTTOO CACIT GALLE GALLE 1	ICIII and unconstant of the							PDO < \$1,000			
				Latitude (AOI)			WORK	ZONE TYPE			
								AT			
				Longitude (AOI	I)	••••••••		7000			
				D14-00 hx/				nce Zone - (KDOT?)			
				Photos by		••••••••	• • • • • • • • • • • • • • • • • • • •				
KDOT? Object 1 Damaged & Nature of Damage (show	v in diagram) Owner Street Ad	Adress		Personal	Phone		tility Zone nknown	<b>3</b> -			
KDOT!	III Giusin,	LICOS						N IN WORK ZONE (AOI)			
Owner Last Name First Name Midd	dle Name City		State Zip	Work Ph	ione						
							_	t warning sign			
KDOT? Object 2 Damaged & Nature of Damage (show	v in diagram) Owner Street Ad	Idress		Personal	Phone			varning area			
	~·····································		•••••••••••••••••••••••••••••••••••••••	1 T)1			ansition a				
Owner Last Name First Name Midd	dle Name City		State Zip	Work Pho	one		ctivity are				
ONLY CHOOSE O	NE CODE PER CATEGORY UNLES	COCIFIED	OTUEDWISE				ermination with the second sec				
LIGHT CONDITIONS	CRASH LOCATION			CRASH CLASS				ZONE CATEGORY			
	(of 1st Harmful Event)		(max	ark 1 box per side	e)		ne closur				
01 Daylight 04 Dark: street lights on	ON ROADWAY: (within trave	al lanes)			Harmful Event			crossover			
02 Dawn 05 Dark: no street lights	11 Non-intersection			non-collision				noulder / median			
03 Dusk 99 Unknown	12 Intersection +		•••••••	urned/Rollover				t or moving vehicle			
	13 Intersection-related +		COLLIS 02 Pedes	SION WITH: strian		88 Oth aa I Ink					
ADVERSE WEATHER CONDITIONS	14 Access to Parking lot	t/Drvwy		sman r vehicle in-trar	nenort*		or retor				
00 No adverse conditions	15 Interchange Area +			ly Parked Vehi				N WITH VEHICLE  Der side if applicable)			
01 Rain, mist, drizzle	16 On Crossover		05 Railwa					per side if applicable)			
02 Sleet, hail	17 Toll Plaza		06 Ranwa 06 Pedal			1 Harmful		Most Harmful Event			
03 Snow	OFF ROADWAY:		07 Anima				lead on				
04 Fog	20 Shoulder		08 Fixed				Rear end				
05 Smoke	21 Roadside (not should	der)	09 Other					de impact			
06 Strong wind	22 Median		99 Unkno	JWN			•	e: opposite direction			
07 Blowing dust, sand, etc.	23 Rest area	••••	**FIX	XED OBJECT T	YPE		•	e: Same direction			
08 Freezing rain, mist, drizzle	88 Other:		21	ox per side if appl		06 Backed into					
14 Rain & fog	99 Unknown		Harmful Ever 01 Bridge	ent <u>Most F</u> ent structure	Harmful Event						
16 Rain & wind 88 Other:	+INTERSECTION TY	PE	01 Bridge 02 Bridge			99 Ur	Jnknown				
24 Sleet & fog	01 Four-way intersection	)n		cush./Impact a	attenuator		TRAFFI	IC CONTROLS			
36 Snow & wind 99 Unknown	02 Five-way or more			er, median barri			(On / At	t Road) O/A   Type Present OK/NF			
SURFACE TYPE ON	03 T - intersection			ead sign suppo				Type Present OK/NF  1 1 1 1			
	04 Y - intersection			devices: pole,r	meter,etc	00 None					
01 Concrete 02 Displotes (Apphalt)	05 L - intersection			post or pole		01 Officer,					
02 Blacktop (Asphalt)	06 Roundabout (See M	100112	08 Building 09 Guardr			02 Traffic s		3 3			
03 Gravel 88 Other:		vianuai finitions)	09 Guardra 10 Sign po			03 Stop sig	ıgn	4 4			
04 Dirt	07 Frame Office 08 Part of an interchange		10 Sign po 11 Culvert			04 Flasher	<b>)</b> [				
05 Brick 99 Unknown	99 Unknown	3	12 Curb			05 Yield si	sign				
SURFACE CONDITIONS ON			13 Fence/	/Gate				nal			
	ROAD SPECIAL FEATURES  1 2	(up to 3)	14 Hydran			06 RR gates / signal 07 RR crossing signs					
01 Dry 88 Other:	00 None		15 Barrica	ade		07 RR crossing signs 08 No passing zone					
			16 Mailha	<b>\V</b>		08 No passing zone					
02 Wet	01 Bridge		16 Mailbox			09 Center/Edge lines					
02 Wet 03 Snow 99 Unknown	<ul><li>01 Bridge</li><li>02 Bridge Overhead</li></ul>		17 Ditch								
			17 Ditch 18 Emban			09 Center/ 10 Warnin					
03 Snow 99 Unknown	02 Bridge Overhead		17 Ditch 18 Emban 19 Wall				ng signs				
03 Snow 99 Unknown 04 Ice	02 Bridge Overhead 03 Railroad Bridge		17 Ditch 18 Emban 19 Wall 20 Tree	nkment		10 Warnin	ng signs				
03 Snow 99 Unknown 04 Ice 05 Mud/dirt/sand	02 Bridge Overhead 03 Railroad Bridge 04 RRXING		17 Ditch 18 Emban 19 Wall 20 Tree	nkment NG fixtures		10 Warnin 11 School	ng signs I zone signes				

ROADWAY NUMBER OF LANES ON  AT  ON  ON  ON  ON  ON  ON  ON  ON  ON  O		Crash Diagram 850A page 2	SPECIAL EVI	ENT	SPEC	IAL DATA	Local Case No.	Page of
	ON	NUMBER OF LANES  AT  01 One  02 Two  03 Three  04 Four to Six  05 Seven or more  88 Other:	ON AT  O1 Straight & Level O2 Straight on grade/slope O3 Straight on hillcrest O4 Curved & level O5 Curved on grade/slope O6 Curved on hillcrest 88 Other:	00 Normal Jurisdict 01 National Park S 02 Military 03 Indian Reservat 04 College / Univer 05 Other Federal p 88 Other:	tion (Not Special) ervice ion sity Campus	crashes showing moven of all traffic units in relational literations of all traffic units in relational literations (label) the street with the area of impact (label) to vehicles and pedestrial assigned in this report.	nents, direction, and fonship to the trafficult(s) and traffic unit(s) (AOI) where possible ans by unique numbers (O	positions  /ay. along . Refer

	upants &						ENGER INFO			I	nvesti	gating Off	icer / Bad	ge No.		Loca	Case N	<b>O.</b>	Page of
KDOIF TU#	Form 850B page VIOLATIONS			(rec	cora pe		on suppleme ITATION#	ntal form TU#		ATI	ONS	CHARGE	CD Mor	e violat	tions in	narrative	CI	<b>FATI</b>	ON#
	OFFI	CER'S OP	INION OF	APPARE	NT CONTR	IBUTING CI	RCUMSTANCES - E	NTER AS M	ANY AS AP	PLY	TO TI	HIS CRASE	H (FACTO	RTYPE	E, TU#,	CC CODE)			
Unit #	DRIVER Last Na			Middle N		~	DDRESS (Numbe	~				nal Phone				SE Used			Transpt Unit
Seat Type TU	DRIVER First Na	ame	-	Date of EMN	arth	City		State	Z1p few address?		Work	Phone Nonal	umber		Age	Eject/Trap	Eject Pa	ath	Extrication?
				_															
ST				DOB							Work								
TU				MN				N	ew address?		Perso	nal							
ST			]	DOB							Work								
	IC UNIT# Driver's License 1		01, 03, N	<b>V3, X3,</b>		Class Drivit	ng for CDL'		e Driver's				2, 04, N	2, X4,	, etc)		Driving	for	CDL?
						Emplo						· CATTIO CT					Employ		
	DR LICENSE	REST	RICT CC	)MPLY	COMM	ERCIAL E	NDORSEMENTS		DR LICI			RESTR	RICT CO	MPLY	C(	OMMERC	IAL ENI	DORS	EMENTS
00 No	COMPLY t licensed	Restric	ctions?		1	2	3	00 N	COMP ot license			Restric	tions?			1	3		4
01 Val	id License	Driver's	s Lic C	omplied?	Z - N	lone		01 V	alid Licer	nse		Driver's	Lic Co	mplied	d?	Z - None			
	spended	Restric	tions \	<u>'</u>		ouble/Trip			uspende	d		Restrict	ions Y	<u>N</u>	_	T - Doubl	•		
03 Rev 04 Exp		1				Passenger Tank Vehic			evoked xpired			1				P - Passe N - Tank			9
•	ncld or Denied	2					Haz. Material		ancld or	Der	nied	2				H - Placa			aterial
06 Dis	qualified	3			X - C	Combinatio	n Tank/HazMat	06 D	isqualifie	ed		3				X - Comb	ination	Tank	/HazMat
	stricted	4				School Bus			estricted			4				S - Schoo			
99 Un	known	S	UBSTAN	CE USE		Jnknown		99 U	nknown			SI	JBSTAN(	CE USI	<b>E</b>	U - Unkn	OWN		
	- Alcohol inges	ited (n	nark all th				ugs contributed		P - Alcoh			•	ark all tha	t apply					ntributed
Ы AC DF	- Alcohol contri - Illegal drugs i						on ingested on contributed		C - Alcoh P - Illega							MP - Me			
	ETHOD OF DET					MPAIRME			METHOD								IRMEN		
ALCOHO	(mark all th	nat apply)		UGS	7 NICO NI	(mark all tha		ALCOF	•	mark	all tha	at apply)	DDI			·	k all that		
	o evidence of in	npairmer				o Test give	d (Alcohol/Drug)		No evide	nce	of im	npairmen	t			G - No Te R - Test R			hol/Drug)
01 E	vidential Test (B	Breath,Bl	lood,etc)				ve Test (PBT)	01	Evidentia	al Te	est (B	reath,Blo	od,etc)		· · · PT	- Prelim	Positive	e Tes	t (PBT)
	reliminary Breat					videntiary T			Prelimina							3 - Evider			
	ehavioral HGN, walk-and-turn	ono log s	etand oto		RP - R	esults pend	ding		Behavior s: HGN, wa		nd_turn	ono loa et	and oto		RF	P - Result	s pendir	ng	
	assive Alcohol S		stariu, Gto.	A	Evide	entiary Breat	th Sye Fluid		Passive A				and, <del>C</del> tc.		A	Evidentiar	y Breath		Eye Fluid
	etects alcohol from o		uth)	CO	0.		0.		(detects alc				ith)		C O	0.			0.
	bserved dor staggering slur	crad enack	h oto)	H	Blood	d (BAC)	Other		Observed (Odor, stage		a eluri	rod enooch	oto)		НО	Blood (BA	C)		Other
	dor, staggering, slur	-	ii, etc)		0.		0.	_]					, etc)			0.			0.
	ther (e.g. saliva	lest)			Drug	screen resu	ılt		Other (e.	y. S	aliva	lest)				Drug scree	en result		
Unit # Seat Type	PASSENGER La PASSENGER Fin			Middle No. Date of E		PASSENG: City	ER ADDRESS (No	amber, Stree State	t, Sfx, etc. Zip	·		nal Phone  C Phone N				SE Used Eject/Trap			Transpt Unit Extrication?
TU				MN				N	ew address?		Perso	nal							
ST			·····]	DOB							Work				••••••				·····
			-	<b>N</b> / N T								1							
TU				IVIIN					Tew address?		Perso	onai							
ST			]	DOB							Work								
TU				MN				N	ew address?		Perso	nal							
ST				DOB							Work								
TU				MN				N	ew address?		Perso	nal							
ST				DOB							Work			•••••	••••••				
	TIMO Timo NI	otifiad I T.	111100 1-0	n h						<b>C</b> T:-	ma NT	tifiad I Tai	11rad to1-a-	1					
Transpoi Unit	et EMS Time No	JULIOU   III	gurou takt	JII Uy.				Transpo Unit	JI'U		IIIC INC	otified   Inj	uicu takti	ı Uy.					
EMS Arri	ved EMS Time@	Hosp In	jured take	en to:				EMS A	rived EN	IS Ti	ime@	Hosp Inj	ured taker	i to:					

Occupants & Vehicles VEHICLE# SPECIAL DATA						LDATA	VEHICLE	Page of						
	- 850B pa	page 2		(01, 03, N3, X3,	, etc)			(02, 04, N2,					1 11	
OWNER Las	st Name ("Sa	ame" if Driver	r) OWn	NER First Name		Middle Nar	ne	OWNER La	st Name (	("Same" if Dri	iver) OW	VNER First Name	Middle 1	Name
	DRESS (Nu	Jumber, Street)				sonal Phone			DRESS (	(Number, Stree			Personal Phone	e
CITY			ST	ZIP	Work	rk Phone		CITY			ST	ZIP	Work Phone	
COLOR	YEAR	MAKE		MODEL	BODY	YSTYLE	ST	COLOR	YEAR	RMAKE		MODEL	BODY STYLE	ST
LICENSE PI	LATE#	County	Exp YR J	Removed by:			MC CCs	LICENSE P	LATE#	County	Exp YR	Removed by:		MC CCs
VEHICLE II	DENTIFICA	ATION NUMB	3ER		Dir	ir of Travel 7	# Occupants	VEHICLE	DENTIFIC	ICATION NUN	MBER		Dir of Trave	el # Occupants
Insurance Co	ompany			Policy Number				Insurance Co	ompany			Policy Number	er	
	CONDITIONS I		2	3 4 5	Odo	ometer	Fire?		CONDITION A FEIC LINIT		2	3 4 5	Odometer	Fire?
TRAF  1 Hit &	REFICUNITS Run		-Contact	t 3 Stolen					AFFIC UNIT & Run		on-Contac	ct 3 Stoler		
	ally Parked		sued by L				ved away o damage		x Run ally Parke	_	ursued by			owed away e to damage
	CHICLE BOD			GE / HEAVY VEHIC						BODY TYPE			HICLE (GCVWR o	
	ıtomobile		• • • • • • • • • • •	OSingle heavy tru	• • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	••••••		ıtomobile	e	• • • • • • • • •	•••••••	truck >10,000 lk	••••••
	otorcycle			1 Truck & trailer(s					otorcycle			1 Truck & trailer	er(s)	
		er or Moped		2 Tractor-trailer(s		Calculate at impac	ated speed act			oter or Mope		2 Tractor-trailer	Calcu	culated speed
04 Var				2 Cross country b		at min		04 Var				3 Cross country		paci
		<10,001 lbs		4 School bus		Dug Seat				ck <10,001		4 School bus		
	ort utility ve	·		5 Transit (city) bu	IIS	Bus Seat Capacity			•	y veh - SUV		5 Transit (city) k	bus Se Capaci	
	amper or R\			6 Other bus					amper or			6 Other bus		
	rm machine		• • • • • • • • •	5 Train	Po'	wer Source	e		arm mach		• • • • • • • •	25 Train	Power Sou	ırce
		hicle - ATV		8 Other:			Unknown			vehicle - AT		38 Other:		99 Unknown
	VEHICL				HICLE	E DAMAGE				ICLE USE			VEHICLE DAMA(	
n1 No sp	pecial use			00 None		04 Dest		01 No st	special us		·li~	00 None		estroyed
01 140 Sp 02 Taxi /		06 Police 07 Ambu			'~ingr			01 140 Sp 02 Taxi /			nbulance			
03 Schoo	olbus	07 / Tibu		01 Damage (r 02 Functional		7) 88 Othe	3r:	03 Schoo	ool bus	07 / Min		01 Damage 02 Functions		ther:
04 Other		09 Mail/F	/Parcel					04 Other		09 Ma	ail/Parcel			
05 Militar		99 Unkno		03 Disabling		99 Unkr		05 Militai			hnown	03 Disabling		Inknown  Incoma no otro
DAIVIE	AGE LUCA	ATION AREA	A		NU. Br	EFORE UNS		DAIVI	AGE LU	DCATION AR	ÆA		AANU. BEFORE U	
First Impac		Major Impac 3B 4	ct	01 Straight/ following ro			ting turn	First Impa	ict	_ Major Imp	pact	O1 Straight/ following	road aw	opped vaiting turn
1	$\frac{2}{3A}$	3B 4	5	02 Left Turn		•	ped in traf		2	3A 3B	4 5	02 Left Turn	40 111	opped in traf
T 12B 120	/ 1	13 \\ 6C	6A	03 Right Turn			ally parked		2C	13	6A 6C	03 Right Tur		egally parked
2 12A			6B	04 U Turn		14 Disab roadw		2 12A			6B	04 U Turn	roa	sabled in adway
11	10 9B	9A 8	7	05 Passing		15 Slowin		11	10 9E	9B 9A 8	<b>7</b>	05 Passing	15 SIC	auway owing or
14 Unde	dercarriage	15 Wind	ndshield			16 Nogot	ping otiating a	14 Unde	dercarriag	је <u>15 V</u>	Vindshield		16 NIA	opping egotiating a
16 Othe	er windows	99 Unkr	<nown< td=""><td>07 Avoidance</td><td>man.</td><td>To Negot Curve</td><td></td><td>16 Othe</td><td></td><td></td><td>Jnknown</td><td>07 Avoidance</td><td>CC IIIaii. CUI</td><td>egotiating a irve</td></nown<>	07 Avoidance	man.	To Negot Curve		16 Othe			Jnknown	07 Avoidance	CC IIIaii. CUI	egotiating a irve
	re vehicle da	amaged		08 Merging 00 Parking	88	Other:				e damaged		08 Merging 08 Darking		
	ailer: Prese	ent / Damag		09 Parking 10 Backing		9 Unknown			ailer: Pre	esent / Dama		09 Parking 10 Backing		
VEHICLI	E SEQUENCE OF THE SECULAR SECUENCIAR SECULAR S	ICE OF EVEN	NTS (1	List up to 4 per unit	t in the	order of occ	curence)	VEHICL	E SEQUE	ENCE OF EV	ENTS (	List up to 4 per ur	unit in the order of	occurence)
	1	3	4	The exa	•	quence is ur			1	2	4	The ex	exact sequence is	3 unknown
		N-COLLISIO				COLLISION V				NON-COLLIS			COLLISIO	
01 Ran of						edestrian		01 Ran of					21 Pedestrian	
02 Ran of			Trailers					02 Ran of			11 Trailer s		22 Motor veh i	•
03 Crosse	ed centerlin	ne 12 \$	Separat					03 Crosse			2 Separa		23 Legally Par	ked Vehicle
04 Overtu	urn/Rollove	ar 13.	Jackknif		24 Trai			04 Overtu			13 Jackkni		24 Train	
05 Crosse	ed median	145	Fire		25 Pec'	dal cycle (t	Jike, etc)	05 Crosse	,ed medi	ian 1	14 Fire		25 Pedal cycle	) (bike, etc)
06 Fell/Ju	umped fror	m veh 15 E	Explosion	on	26 Anir	ımal		06 Fell/Ju	umped fr	from veh 1	15 Explos	ion	26 Animal	
07 Throw	n or falling	g object 16	Immers	ololi III watel		ced Object					16 Immer:	sion in water	27 Fixed Object	ct
08 Cargo	loss or sh	nift 88	Other ev	vent:	28 Oth	ier moveat		08 Cargo			88 Other e		28 Other move	eable object
09 Equipn		re _				ıknown obje		09 Equipr		ilure			99 Unknown o	bject



Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Local Case No.	Page of

									Complete	d Post Crash Insp	oection			
	AVY VEHICLE MAT Supplem		DRMATION ON JSES/HAZAR				Investiga	ting Officer	Badge No.	Local Case No.	Page of			
	Form 852 - Rev. 2		MO	TOR C	CARRIER	INFORMA	TION							
						A 1 1 (T)	1							
TU#	Carrier Name				Carrier Street	Address (P.O	). Box only	y 11 no stree	t address)	City				
							CARR	IER IDEN'	TIFICATION NUI	MBER(S)				
State	Zip Phon	1e	Carrier Coun	try		USDC	<b>)</b> T#		MC/MX#	$\mathbf{N}$	IONE			
	CARRIER TYPE  Introduction 1	ntoroto	ot in Commoroo	<b>Othor</b>	Truck or Du		NIA+ iA			h / Othor / NIot C				
	- Intrastate 1 - Intrastate  T THE TIME OF CRASI		ot in Commerce - GVWR/GCWR	- Other		S 3 RCE OF CARE		ommerce	- Government Ve PERMITS (Issuer	h 4 - Other / Not S and Permit Number)	pecified			
	VEHICLE WAS:		,000 lbs or less			NAME								
•	erating on a trafficway he public (In-Transpor	open   0240	,001-26,000 lbs			of vehicle		1.						
02 Parl	ked on or off the traffic	Cway	re than 26,000 lb known	)S	02 Ship man	ping papers ifest	Or	2.						
88 Oth	er:	ACTUAL		Tibs	03 Drive			3.						
99 Unk					04 Logk				ANTARTHAM					
TRAII	VEHICLE J ER DIMENSIONS	INFORMATION TRAILER(s)	OVERSIZED						IALS INVOLVEME					
	WIDTH (in) LENGTH (ft)	DAMAGED?	LOAD	Did	the vehicle	have a Haza								
Trailer		None	Height						The Placard:	10				
1 Trailer		Trailer 1		Haz	zMat 4-digit	# from the di	iamond c	enter box:						
2		Trailer 2	Weight	Haz	zMat Class #	from the bo		HazMat We	eight (lbs)					
Trailer 3		Trailer 3	Width	Was	s HazMat re	leased (spille	ed) from	THIS vehic	cle's cargo?					
		TRAILER TOTAL			ON-I	ROAD LANE	TYPE			LE ACCESS CONTROL TO ROADWAYS				
Vehicle (include t	railer(s))	No. of Trailers	No. of Axles	00	Two-way tra	ffic - Undivid	ded roadv	vay		control (Unlimited acc	cess -			
TRAILER	1 - IDENTIFICATION N	IUMBER		01	One-way tra	ffic - Undivid	ded roadv	vay		no interchanges)				
TRAILER	2 - IDENTIFICATION N					ffic - Median	•			ess control (mix of es and "at-grade" inter	reactionel			
	Z-IDLINIII ICATIONIN					offic - Median				s control (entry/exit onl				
TRAILER	3 - IDENTIFICATION N	IUMBER				offic - Undividuel eft turn lane			interchang		I y D y			
				99 (	Unknown				99 Unknown					
			HIS FORM FOR E				GURATIO	NS AND CA						
	VEHICLE CONFIGUI	KATION			BODY TYPE				CARGC	) TYPE				
	ıs 9-15 passengers, in				e/No cargo k	ody		00 None		12 Mobile / Modu	ılar home			
	is more than 15 passe		01 Van or 02 Hanne		sea box Grain, Chips	· Craval)		Drive av	way or Tow away	13 Motor vehicles	S			
	ngle-unit truck (2-axles				quid, powde			)2 Explosiv	ves	14 Refrigerated f	ioods			
	ngle-unit truck (3 or m		04 Flatbe	•				03 Animals	s: farm or other	15 Solids (bulk)				
	ngle-unit truck with tra uck Tractor only (bobt		05 Dump					04 Farm pr	oducts	16 Rock, sand, g	ıravel, salt			
	uck Tractor and semi-		06 Concre	ete mixe	er			)5 Gases		17 Other food pro				
	uck Tractor and two tr		07 Vehicle	e transp	porter				I freight (packages					
	uck Tractor and three		08 Garba											
	eavy truck > 10,000 lbs			•	ple, includin			)/ Heavy r	nachinery, objects					
10 Ve	hicles less than 10,00	00 lbs carrying	10 Bus m 11 Pole	ore mai	n 15 people			08 Househ	old goods	20 Garbage / refu				
ha	zardous materials			e towina	a another m	otor vehicle		D9 Liquids	(bulk)	21 Pavement mix concrete, asp				
88 Ot	88 Other: 13 Intern							10 Logs, p	oles, lumber	88 Other:				
99 Un	hknown						al (coils, sheets, etc)							
	CAB TYPE	88 Other:							99 Unknown					
	1 Cab behind engine	99 Unknown							SPECIAI	LDATA				
0	2 Cab over engine		99 Unkno	wn										

### REPORTING CRITERIA FOR HEAVY VEHICLES AND/OR HAZARDOUS MATERIALS

COMPLETE THIS SUPPLEMENT FOR EACH OF THE FOLLOWING VEHICLES INVOLVED WHERE AT LEAST ONE MOTOR VEHICLE IN-TRANSPORT WAS ON A TRAFFICWAY OPEN TO THE PUBLIC:

>10,000 lbs Any truck having a gross vehicle weight rating (GVW/GVWR) of more than 10,000 pounds or a gross

combination weight rating (GCWR) over 10,000 pounds used on public trafficways, OR...

BUS Any motor vehicle with seats to transport nine (9) or more people, including the driver OR...

HAZMAT Any vehicle, regardless of weight, carrying placardable hazardous materials or displaying a hazardous

materials placard.

#### AND

### IF THIS CRASH INCLUDES:

A FATALITY: Any person(s) killed in or outside of any vehicle (truck, bus, car, etc.) involved in the crash or who dies

within 30 days of the crash as a result of an injury sustained in the crash, OR...

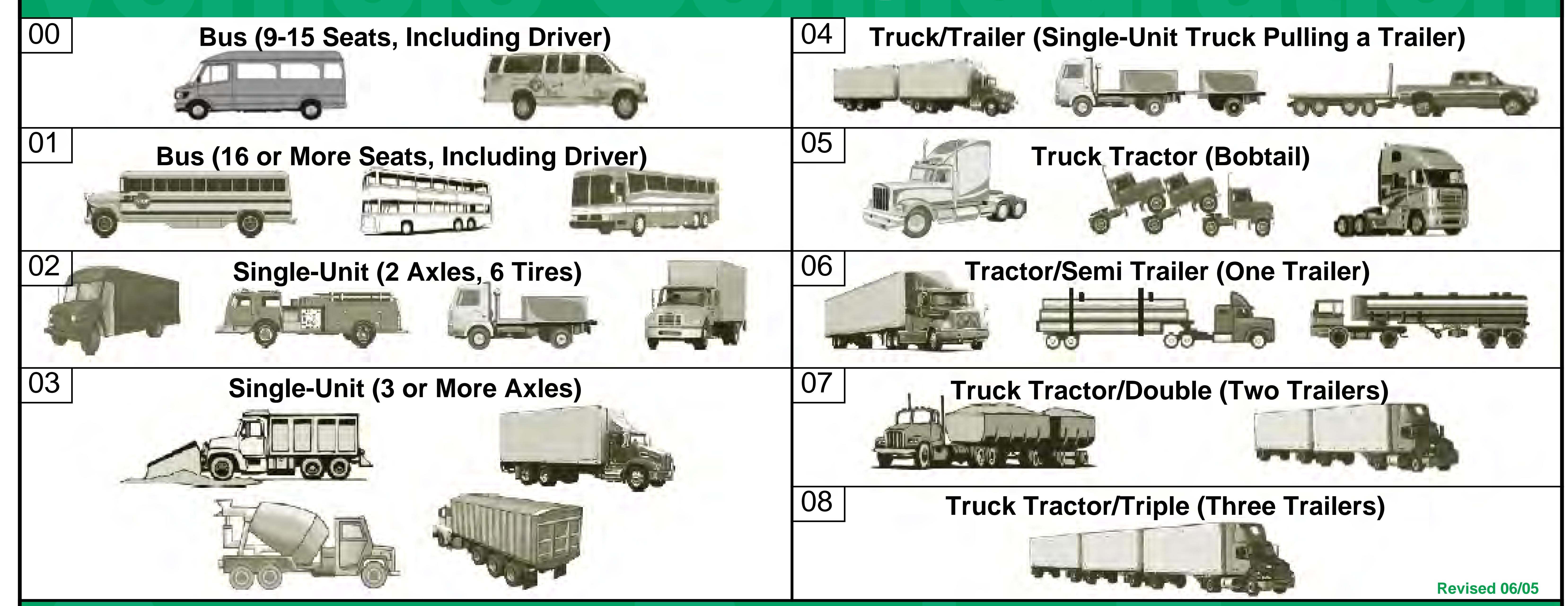
AN INJURY: Any person(s) injured as a result of the crash who immediately receives medical treatment away from the

crash scene, OR...

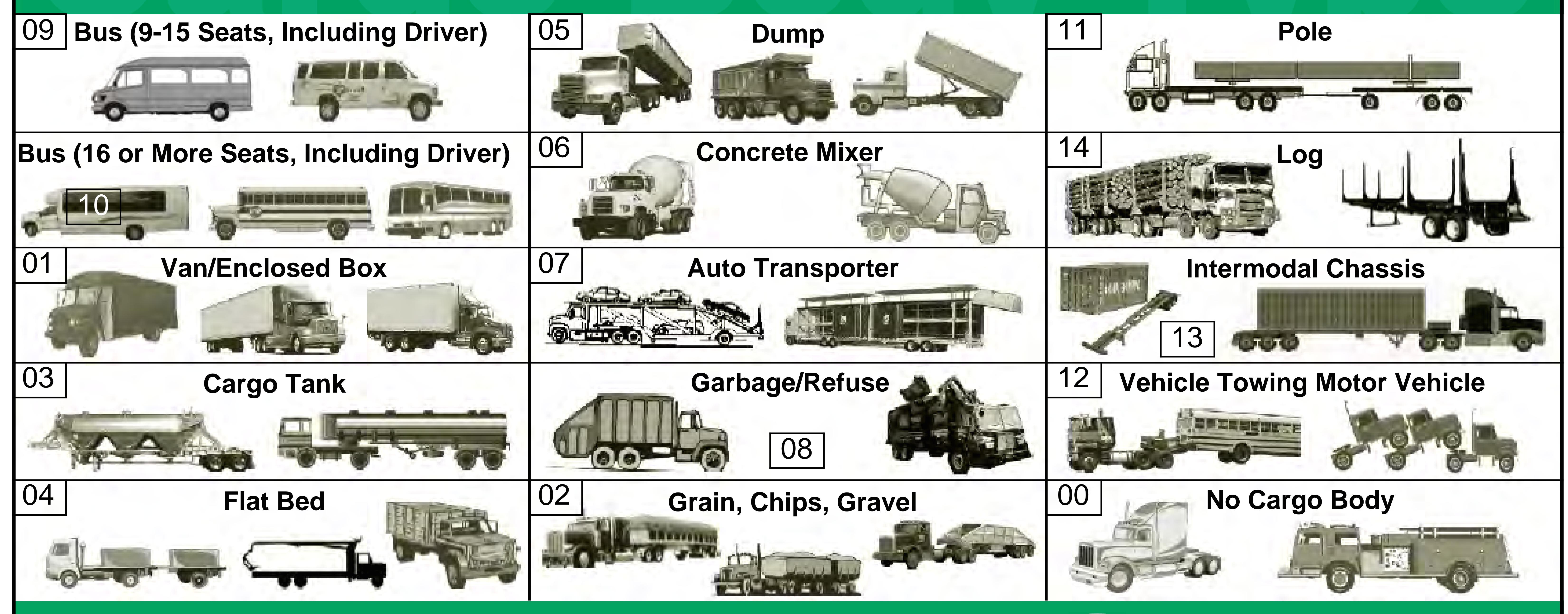
TOW-AWAY: Any motor vehicle (truck combination, bus, car, etc.) disabled as a result of the crash and transported away

from the scene by a tow truck or other vehicle.

## Vehicle Configuration



# Cargo Body Type



	sengers & Pe T Form 854 page		LIST ADDITIONAL PAS TRAFFIC U		Inve	estigating Officer / Badge N	Jo.	Local	Page of	
Unit #	PASSENGER Last Nan	ne Middle Na			.) Pe	ersonal Phone Number		,	Inj Severity	Transpt Unit
Seat Type TU	PASSENGER First Nan	ne Date of Bir MN	th City	State Zip  New address		Vork Phone Number ersonal	Age	Eject/Trap	Eject Path	Extrication?
ST		DOB				Jork				
		MN		Now oddrogg		orgono1				
IU				New address						
ST		DOB			W	Vork				
TU		MN		New address	? [] Pe	ersonal				
ST		DOB				Jork				
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		MN		New address	? <b>П</b> Ре	ersona1				
51		DOB				Vork				
TU		MN		New address		ersonal				
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		MN		New address	) <b>П</b> Ре	ersonal				
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1 U				New address						
ST		DOB			W	Jork				
Transpor Unit	t EMS Time Notified	Injured taken by:		Transport Unit	IS Time	e Notified Injured taken by	•			
EMS Arriv	ved EMS Time@Hosp	Injured taken to:		EMS Arrived EN	AS Time	e@Hosp Injured taken to	•			
Transpor	t EMS Time Notified	Injured taken by:			IS Time	Notified Injured taken by	<b>7</b> •			
Unit  EMS Arriv	<pre>- ved EMS Time@Hosp</pre>	Injured taken to:		Unit EMS Arrived EN	AS Time	e@Hosp Injured taken to	•			

Pas	sengers & Perengers & Perenger			PEDESTRI	AN INFORM	Investigating	Officer / Badge N	Local Case No.		Page of					
Unit #	PEDESTRIAN Last Nan	ne Middle			ADDRESS (Nu		x, etc.)	· • • · · · · · · · · · · · · · · · · ·		• ••••••		<b> </b>	Transpt Unit		
Ped Type TU	PEDESTRIAN First Nan	ne Date of MN	Birth	City		State Z New add	dress?	Work Phon Personal	e Number	Age	Eject/Trap	Eject Path	Extrication?		
DТ															
PI		DOB						Work							
TU		MN				New add	dress?	Personal							
PT		DOB						Work							
Transpo	rt EMS Time Notified	Iniured taken by:				Transport	IEMS T	ime Notified	Injured taken by	•					
Unit						Unit									
EMS Arr	ived EMS Time@Hosp	Injured taken to:				EMS Arrived	EMS	Fime@Hosp	Injured taken to:						
TU# I	DirTrvl DL State Driver's	s License Number		Special Da	ata	TU# DirT1	vl DL	State Driver	's License Numbe	r		Special Data			
	PEDESTRIAN	IROADWAY LOC	CATION BE	FORE IMPAC			P	EDESTRIA	NROADWAYL	OCATI(	)N BEFOR	EIMPACT			
00	NOT in roadway (driv	ving lanes)				00 NC	ot in ro	adway (dr	iving lanes)						
	IN or AT INTERSECTION			r AT INTERSECT				NTERSECTIO				NTERSECTIO			
	In crosswalk or bikev			sswalk or bike				alk or bike				lk or bikew			
	NOT in crosswalk or 2 In intercection without			n crosswalk o				rosswalk or				sswalk or b			
	In intersection withous crosswalk or bikeway		bikewa					ction witho k or bikewa			ikeway				
88	Other:		99 Unkno	WN		88 Ot	her:			99 L	Jnknown				
	OTHER PEDEST	TRIAN LOCATIO	N (Not in Di	iving Lanes)			OTF	HER PEDES	TRIAN LOCAT	ION (No	t in Driving	Lanes)			
01 W	ithin a work zone		08 Drive	vay access cr	osswalk	01 Withi	n a wor	rk zone		08 [	Driveway a	eway access crosswalk			
02 In	median (not shoulder	r)	09 Dedic	ated bike lane	<b>)</b>	02 In me	edian (r	not shoulde	09 [	09 Dedicated bike lane					
030	n Island		10 Share	d-use path or	trails	03 On Is	land		10 \$	10 Shared-use path or trails					
04 R	oad shoulder (not ditc	h or median)		building		04 Road	should	der (not dit	ch or median)	11 I	11 Inside building 12 In Josephy parked webicle				
05 R	oadside (not on shoule	der)		ally parked ve	hicle	05 Road	side (n	ot on shou	lder)		<ul><li>12 In legally parked vehicle</li><li>88 Other:</li></ul>				
	dewalk		88 Other			06 Sidev									
	utside trafficway  DEDECT		99 Unkno								Jnknown  Transation				
 	PEDES I Valking / cycling to or f	From school		ing, sitting, or	· Ivina	01 Walk	ina / cv		from school				/ina		
	pproaching or leaving			g, running, w				g or leaving		07 Standing, sitting, or lying 08 Playing, running, walking					
	pproaching or leaving				anting			g or leaving		09 Cycling					
			09 Cyclir												
	Vorking (not on vehicle	<b>3</b> )		ng or crossing				ot on vehicl	<b>e</b> )	10 E					
	Vorking on vehicle		88 Other			05 Work				88 Other:					
06 P	ushing motor vehicle		99 Unkno			06 Push		tor vehicle		99 Unknown					
		NOBEDIENCE T			ınction				an al				otion		
	<ul><li>00 No pedestrian sig</li><li>01 Obeyed pedestria</li></ul>			d signal malfu t applicable		00 No pedestrian signal 03 Ped signal malfunct 01 Obeyed pedestrian signal 04 Not applicable									
	02 Disobeyed pedes			known					strian signal		99 Unknov				
		SUBSTANCE US					\ laahal		SUBSTANCE I		<b>1</b> DO III.				
	<ul><li>Alcohol ingested</li><li>Alcohol contributed</li></ul>	(mark all that apply		<ul><li>Illegal drugs</li><li>Medication i</li></ul>				ingested contributed	(mark all that ap			gal drugs co dication ing			
	P - Illegal drugs ingeste			- Medication				lrugs ingest				dication co			
N	IETHOD OF DETERMIN	CEST	METHOD OF DETERMINATION  (mark all that apply)  (mark all that apply)												
ALCOH	(mark all that apply <u>OL</u>	ply)	(mark all that apply)  ALCOHOL  (mark all that apply)  DRUGS  NG - No Test given												
	lo evidence of impairm	Icohol/Drug)	□ 00 No evidence of impairment □ □ TR - Test Refused (Alcohol/Dr												
	Evidential Test (Breath,		PT - Pr	elim Positive 1	Test (PBT)						T - Prelim I	Positive Tes	st (PBT)		
	Preliminary Breath Test	t PBT		identiary Test		O2 Preli		Breath Tes	t PBT	- I <u></u>		tiary Test g	iven		
	Sehavioral : HGN, walk-and-turn, one le	g stand, etc.		sults pending				and-turn, one le	eg stand, etc.		P - Results				
04 F	Passive Alcohol Sensor detects alcohol from driver's r		A Evide O.	ntiary Breath	Eye Fluid  O.	04 Pass	sive Alc	ohol Senso ol from driver's			Evidentiary  O.	Breath	Eye Fluid O.		
	Observed Odor, staggering, slurred spe		Ho Blood O L O L	(BAC)	Other O.	O5 Obse (Odor		ng, slurred spe	eech, etc)	HOLD       Blood (BAC)       Other         0.       0.					
06 C	Other (e.g. saliva test)		Drug	screen result		06 Othe	r (e.g.	saliva test)			Drug scree	n result			