

FLORIDA TRAFFIC CRASH REPORT

LONG FORM ☒ SHORT FORM ☐ UPDATE ☐
(Shaded Areas)

MAIL TO: DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING
TALLAHASSEE, FL 32399-0537

TOTAL # OF VEHICLE SECTION(S) 2
TOTAL # OF PERSON SECTION(S) 2
TOTAL # OF NARRATIVE SECTION(S) 1

CRASH DATE 03/12/2013		TIME OF CRASH 10:35 AM		DATE OF REPORT 03/15/2013		REPORTING AGENCY CASE NUMBER 13-FR-1885		HSMV CRASH REPORT NUMBER 82176521		
CRASH IDENTIFIERS										
COUNTY CODE 12	CITY CODE 34	COUNTY OF CRASH Lake			PLACE OR CITY OF CRASH Fruitland Park			CHECK IF WITHIN CITY LIMITS <input checked="" type="checkbox"/>	TIME REPORTED 10:35 AM	TIME DISPATCHED 10:35 AM
TIME ON SCENE 10:37 AM		TIME CLEARED SCENE 11:00 AM		CHECK IF COMPLETED <input checked="" type="checkbox"/>	REASON (If Investigation NOT Complete)				Notified By: 1 Motorist 2 Law Enforcement 2	
ROADWAY INFORMATION (CHOOSE ONLY 1 OF 4 OPTIONS)										
CRASH OCCURRED ON STREET, ROAD, HIGHWAY SR 25					AT STREET ADDRESS # 1		AT LATITUDE AND LONGITUDE 2			
FEET	MILES	N S E W <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			AT / FROM INTERSECTION WITH STREET, ROAD, HIGHWAY 3 N. CR 25A			OR FROM MILEPOST # 4		
Road System Identifier 3 1 Interstate 2 U.S. 3 State		Type of Shoulder 2 1 Paved 2 Unpaved 3 Curb		Type of Intersection 3 1 Not at Intersection 2 Four-Way Intersection 3 T-Intersection 4 Y-Intersection 5 Traffic Circle 6 Roundabout 7 Five-Point, or More 77 Other, Explain in Narrative						
CRASH INFORMATION (CHECK IF PICTURES TAKEN) <input type="checkbox"/>										
Light Condition 1 1 Daylight 2 Dusk 3 Dawn 4 Dark-Lighted 5 Dark-Not Lighted 6 Dark-Unknown 77 Other, Explain in Narrative 88 Unknown		Weather Condition 1 1 Clear 2 Cloudy 3 Rain 4 Fog, Smog, Smoke 5 Sleet/Hail/ Freezing Rain 6 Blowing Sand, Soil, Dirt 7 Severe Crosswinds 77 Other, Explain in Narrative		Roadway Surface Condition 1 1 Dry 2 Wet 3 Ice/Frost 5 Oil 6 Mud, Dirt, Gravel 7 Sand 8 Water (standing/ moving) 77 Other, Explain in Narrative 88 Unknown		School Bus Related 1 1 No 2 Yes, School Bus Directly Involved 3 Yes, School Bus Indirectly Involved		Manner of Collision/Impact 3 1 Front to Rear 2 Front to Front 3 Angle 4 Sideswipe, Same Direction 5 Sideswipe, Opposite Direction 6 Rear to Side 7 Rear to Rear 77 Other, Explain in Narrative 88 Unknown		
First Harmful Event 11 First Harmful Event within Interchange 88 1 No 2 Yes 88 Unknown		Non-Collision 1 Overturn/Rollover 2 Fire/Explosion 3 Immersion 4 Jackknife 5 Cargo/Equipment Loss or Shift 6 Fell/Jumped From Motor Vehicle 7 Thrown or Falling Object 8 Ran into Water/Canal 9 Other Non-Collision		Collision Non-Fixed Object 10 Pedestrian 11 Pedalcycle 12 Railway Vehicle (train, engine) 13 Animal 14 Motor Vehicle in Transport 15 Parked Motor Vehicle 16 Work Zone/Maintenance Equipment 17 Struck By Falling, Shifting Cargo 18 Other Non-Fixed Object		Collision with Fixed Object 19 Impact Attenuator/Crash Cushion 20 Bridge Overhead Structure 21 Bridge Pier or Support 22 Bridge Rail 23 Culvert 24 Curb 25 Ditch 26 Embankment 27 Guardrail Face 28 Guardrail End 29 Cable Barrier		First Harmful Event Location 1 1 On Roadway 2 Off Roadway 3 Shoulder 4 Median 5 Gore 6 Separator 7 In Parking Lane or Zone 8 Outside Right-of-way 9 Roadside 88 Unknown		
First Harmful Event Relation to Junction 2 1 Non-Junction 2 Intersection 3 Intersection-Related 4 Driveway/Alley Access Related		Contributing Circumstances: Road 1 1 None 4 Work Zone (construction/ maintenance/utility) 6 Shoulders (none, low, soft, high) 7 Rut, Holes, Bumps		Contributing Circumstances: Road 1 9 Worn, Travel-Polished Surface 10 Road Surface Condition (wet, icy, snow, slush, etc.) 11 Obstruction in Roadway 12 Debris 13 Traffic Control Device Inoperative, Missing, or Obscured 14 Non-Highway Work 77 Other, Explain in Narrative 88 Unknown		Contributing Circumstances: Environment 1 1 None 2 Weather Conditions 3 Physical Obstruction(s) 4 Glare 5 Animal(s) in Roadway 77 Other, Explain in Narrative 88 Unknown				
Work Zone Related 1 1 No 2 Yes 88 Unknown		Crash in Work Zone 3 1 Before the First Work Zone Warning Sign 2 Advance Warning Area 3 Transition Area 4 Activity Area 5 Termination Area		Type of Work Zone 3 1 Lane Closure 2 Lane Shift/Crossover 3 Work on Shoulder or Media 4 Intermittent or Moving Work 77 Other, Explain in Narrative		Workers in Work Zone 2 1 No 2 Yes 88 Unknown		Law Enforcement in Work Zone 1 1 No 2 Officer Present 3 Law Enforcement Vehicle Only Present		
WITNESSES										
NAME PRIDGEON KUJAWSKI ELAINE		ADDRESS 15025 GREEN VALLEY BLVD.			CITY & STATE Clermont, FL			ZIP CODE 34711		
NAME		ADDRESS			CITY & STATE			ZIP CODE		
NAME		ADDRESS			CITY & STATE			ZIP CODE		
NON-VEHICLE PROPERTY DAMAGE										
VEHICLE #	PERSON #	PROPERTY DAMAGE - OTHER THAN VEHICLE	EST. AMOUNT	OWNER'S NAME <input type="checkbox"/> (Check if Business)	ADDRESS	CITY & STATE	ZIP CODE			
VEHICLE #	PERSON #	PROPERTY DAMAGE - OTHER THAN VEHICLE	EST. AMOUNT	OWNER'S NAME <input type="checkbox"/> (Check if Business)	ADDRESS	CITY & STATE	ZIP CODE			

VEHICLE # 1		Check if Commercial <input type="checkbox"/>		REPORTING AGENCY CASE NUMBER 13-FR-1885		HSMV CRASH REPORT NUMBER 82176521				
1 Vehicle in Transport 2 Parked Motor Vehicle 3 Working Vehicle		VEHICLE LICENSE NUMBER 088IMS		STATE FL	REGISTRATION EXPIRES 14	Check if Permanent Registration <input checked="" type="checkbox"/>	VIN JTKDE177070215988			
Hit and Run 1 No 2 Yes 88 Unknown		YEAR 07	MAKE TOY	MODEL TC	STYLE 2D	COLOR PLE	DAMAGE: 1 Disabling 4 Minor 2 Functional 88 Unknown 3 None	EST. AMOUNT 4 \$200.00		
INSURANCE COMPANY TRAVALER HOME AND MARINE INSURENCE			INSURANCE POLICY NUMBER 9815404231		Towed due to Damage: 1 No 2 Yes	VEHICLE REMOVED BY 1 Rotation 2 Owner Request 3 Driver 4 Other, Explain in Narrative				
NAME OF VEHICLE OWNER (Check if Business) <input type="checkbox"/>		CURRENT ADDRESS 2904 DAVID STEWART LN.			CITY & STATE Lady Lake, FL		ZIP CODE 32159			
TRAILER #	LICENSE NUMBER	STATE	REGISTRATION EXPIRES	Check if Permanent Registration <input type="checkbox"/>	VIN	YEAR	MAKE	LENGTH	AXLES	
TRAILER #	LICENSE NUMBER	STATE	REGISTRATION EXPIRES	Check if Permanent Registration <input type="checkbox"/>	VIN	YEAR	MAKE	LENGTH	AXLES	
VEHICLE TRAVELING N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> Off-Road Unknown <input type="checkbox"/>		ON STREET, ROAD, HIGHWAY SR 25				AT EST. SPEED 45	POSTED SPEED 45	TOTAL LANES 4		
HAZ. MAT. RELEASED 1 No 2 Yes 88 Unknown		HAZ. MAT. PLACARD 1 No 2 Yes 88 Unknown		HAZ. MAT. NUMBER	HAZ. MAT. CLASS	Area of Initial Impact 2 3 4 5 6 7 18 19 20 21 1 15 16 17 8 9 14 13 12 11 10			Most Damaged Area 2 3 4 5 6 7 18 19 20 21 1 15 16 17 8 9 14 13 12 11 10	
MOTOR CARRIER NAME				US DOT NUMBER						
MOTOR CARRIER ADDRESS				CITY & STATE		ZIP CODE		PHONE NUMBER		
Vehicle Body Type 1 Passenger Car 2 Passenger Van 3 Pickup 7 Motor Home 8 Bus 11 Motorcycle 12 Moped 13 All Terrain Vehicle (ATV) 18 Motor Coach 19 Other Light Trucks (10,000 lbs (4,536 kg) or less) 20 Medium/Heavy Trucks (more than 10,000 lbs (4536 kg)) 21 Farm Labor Vehicle 77 Other, Explain in Narrative 88 Unknown		Trafficway 1 Two-Way, Not Divided 2 Two-Way, Not Divided, with a Continuous Left Turn Lane 3 Two-Way, Divided, Unprotected (painted >4 feet) Median 4 Two-Way, Divided, Positive Median Barrier 5 One-Way Trafficway 88 Unknown		Commercial Motor Vehicle Configuration 1 Vehicle 10,000 lbs or less Placarded for Hazardous Materials 2 Single-Unit Truck (2-axle and GVWR more than 10,000 lbs (4,536 kg)) 3 Single-Unit Truck (3 or more axles) 4 Truck Pulling Trailer(s) 5 Truck Tractor (bobtail) 6 Truck Tractor/Semi-Trailer 7 Truck Tractor/Double Truck 8 Tractor/Triples 9 Truck more than 10,000 lbs (4,536 kg), Cannot Classify 10 Bus/Large Van (seats for 9-15 occupants, including driver) 11 Bus (seats for more than 15 occupants, including driver) 77 Other, Explain in Narrative 88 Unknown						
Comm/Non-Commercial 1 Interstate Carrier 2 Intrastate Carrier 3 Not in Commerce/Government 4 Not in Commerce/Other Truck		Trailer Type 1 Single Semi Trailer 2 Tandem Semi Trailer 3 Tank Trailer 4 Saddle Mount/Trailer 5 Boat Trailer 6 Utility Trailer 7 House Trailer 8 Pole Trailer 9 Towed Vehicle 10 Auto Transport 77 Other, Explain in Narrative 88 Unknown		Cargo Body Type 1 No Cargo 2 Bus 3 Van/Enclosed Box 4 Hopper 5 Pole-Trailer 6 Cargo Tank 7 Flatbed 8 Dump 9 Concrete Mixer 10 Auto Transport 11 Garbage/Refuse 12 Log 13 Intermodal Container Chassis 14 Vehicle Towing Another Vehicle 15 Not Applicable (vehicle 10,000 lbs (4,536 kg) or less not displaying HM placard) 77 Other, Explain in Narrative 88 Unknown						
Most Harmful Event 14		Non-Collision 1 Overturn/Rollover 2 Fire/Explosion 3 Immersion 4 Jackknife 5 Cargo/Equipment Loss or Shift 6 Fell/Jumped From Motor Vehicle 7 Thrown or Falling Object 8 Ran into Water/ Canal 9 Other Non-Collision		Comm GVWR/GCWR 1 10,000 lbs (4,536 kg) or less 2 10,001-26,000 lbs (4,536-11,793 kg) 3 More than 26,000 lbs (11,793 kg) 4 Not Applicable		Collision with Non-Fixed Object 10 Pedestrian 11 Pedalcycle 12 Railway Vehicle (train, engine) 13 Animal 14 Motor Vehicle in Transport 15 Parked Motor Vehicle 16 Work Zone/Maintenance Equipment 17 Struck By Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle 18 Other Non-Fixed Object			Collision Fixed Object 19 Impact Attenuator/Crash Cushion 20 Bridge Overhead Structure 21 Bridge Pier or Support 22 Bridge Rail 23 Culvert 24 Curb 25 Ditch 26 Embankment 27 Guardrail Face 28 Guardrail End	
Sequence of Events 1st 14 2nd 3rd 4th		[40-46 Sequence of Events only] 40 Equipment Failure (blown tire, brake failure, etc.) 41 Separation of Units 42 Ran Off Roadway, Right 43 Ran Off Roadway, Left 44 Cross Median 45 Cross Centerline 46 Downhill Runaway		Vehicle Maneuver Action 1 Straight Ahead 3 Turning Left 4 Backing 5 Turning Right 6 Changing Lanes 8 Parked 10 Making U-Turn 11 Overtaking/ Passing 13 Stopped in Traffic 14 Slowing 15 Negotiating a Curve 16 Leaving Traffic Lane 17 Entering Traffic Lane 77 Other, Explain in Narrative 88 Unknown		Traffic Control Device For This Vehicle 5 1 No Controls 4 School Zone Sign/ Device 5 Traffic Control Signal 6 Stop Sign 7 Yield Sign 8 Flashing Signal 9 Railway Crossing Device 10 Person (including Flagman, Officer, Guard, etc.) 13 Warning Sign 77 Other, Explain in Narrative 88 Unknown		Vehicle Defects 1 1 None 2 Brakes 3 Tires 4 Lights (head, signal, tail) 6 Steering 7 Wipers 9 Exhaust System 10 Body, Doors 11 Power Train 12 Suspension 13 Wheels 14 Windows/ Windshield 15 Mirrors 16 Truck Coupling/ Trailer Hitch/ Safety Chains 77 Other, Explain in Narrative 88 Unknown		
Roadway Grade 1 Level 2 Hillcrest 3 Uphill 4 Downhill 5 Sag (bottom)		Roadway Alignment 1 Straight 2 Curve Right 3 Curve Left		Special Function of a Motor Vehicle 1 No Special Function 2 Farm Vehicle 3 Police 7 Taxi 8 Military 9 Ambulance 10 Fire Truck 11 Farm Labor Transport 12 School Bus 13 Transil/Commuter Bus 14 Intercity Bus 15 Charter/Tour Bus 16 Shuttle Bus 17 Farm Labor Bus 88 Unknown		Emergency Vehicle Use 1 1 No 2 Yes 88 Unknown				
VIOLATIONS										
PERSON #	NAME OF VIOLATOR			FL STATUTE NUMBER		CHARGE		CITATION NUMBER		
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PERSON # 1		REPORTING AGENCY CASE NUMBER 13-FR-1885		HSMV CRASH REPORT NUMBER 82176521																									
1 Driver 2 Non-Motorist 3 Passenger		VEHICLE # 1	NAME Trinnen J. Chesnut		PHONE NUMBER (352) 326-8809																								
CURRENT ADDRESS (Number and Street) 705 Lewis Street		CITY & STATE FRUITLAND PARK, FL		ZIP CODE 34731																									
DATE OF BIRTH 04/29/1998	SEX: 1 Male 2 Female 88 Unknown	DRIVER LICENSE NUMBER 1	STATE	EXPIRES	INJURY SEVERITY (INJ) 1 None 2 Possible 3 Non-incapacitating 4 Incapacitating 5 Fatal (within 30 days) 6 Non-Traffic Fatality																								
DRIVER																													
DL Type 1 A 2 B 3 C 4 D/Chauffeur 5 E/Operator 6 E/Oper - Rest 7 None		Required Endorsements 1 Yes 2 No 3 No Req. Endorsement		Driver's Actions at Time of Crash																									
Driver Distracted By 1 Not Distracted 2 Electronic Communication Devices (cell phone, etc.) 3 Other Electronic Device (navigation device, DVD player)		Other Inside the Vehicle (explain in narrative) 4 Other Inside the Vehicle (explain in narrative) 5 External Distraction (outside the vehicle, explain in narrative) 6 Texting 7 Inattentive 88 Unknown		Condition At Time of Crash 1 Apparently Normal 3 Asleep or Fatigued 5 Ill (sick) or Fainted 6 Seizure, Epilepsy, Blackout 7 Physically, Impaired 8 Emotional (depression, angry, disturbed, etc.) 9 Under the Influence of Medications/Drugs/Alcohol 77 Other, Explain in Narrative 88 Unknown																									
Driver Vision Obstructions 1 Vision Not Obscured 2 Inclement Weather 3 Parked/Stopped Vehicle 4 Trees/Crops/Bushes		Load on Vehicle 5 Load on Vehicle 6 Building/Fixed Object 7 Signs/Billboards 8 Fog		Smoke 9 Smoke 10 Glare 77 All Other, Explain in Narrative																									
DRIVER OR PASSENGER																													
Motor Vehicle Seating Position: <table border="1"><thead><tr><th>Seat</th><th>Row</th><th>Other</th></tr></thead><tbody><tr><td>1 Left</td><td>1 Front</td><td>1 Not Applicable</td></tr><tr><td>2 Middle</td><td>2 Second</td><td>2 Sleeper Section of Truck Cab</td></tr><tr><td>3 Right</td><td>3 Third</td><td>3 Other Enclosed Cargo Area</td></tr><tr><td>77 Other (explain in narrative)</td><td>4 Fourth</td><td>4 Unenclosed Cargo Area</td></tr><tr><td>88 Unknown</td><td>77 Other Row</td><td>5 Trailing Unit</td></tr><tr><td></td><td>88 Unknown</td><td>6 Riding on Motor Vehicle Exterior (non-trailing unit)</td></tr><tr><td></td><td></td><td>88 Unknown</td></tr></tbody></table>		Seat	Row	Other	1 Left	1 Front	1 Not Applicable	2 Middle	2 Second	2 Sleeper Section of Truck Cab	3 Right	3 Third	3 Other Enclosed Cargo Area	77 Other (explain in narrative)	4 Fourth	4 Unenclosed Cargo Area	88 Unknown	77 Other Row	5 Trailing Unit		88 Unknown	6 Riding on Motor Vehicle Exterior (non-trailing unit)			88 Unknown	LOCATION: SEAT ROW OTHER (LOC) 77		Helmet Use (HU) 3 1 DOT-Compliant Motorcycle Helmet 3 Other Helmet 3 No Helmet	
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Restraint Systems (RS) 1 Not Applicable 2 None Used - Motor Vehicle Occupant 3 Shoulder and Lap Belt Used 4 Shoulder Belt Only Used 5 Lap Belt Only Used 6 Restraint Used - Type Unknown 7 Child Restraint System - Forward Facing 8 Child Restraint System - Rear Facing 9 Booster Seat 10 Child Restraint Type Unknown 77 Other, Explain in Narrative																													
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Non-Motorist Description 3 1 Pedestrian 2 Other Pedestrian (wheelchair, person in a building, skater, pedestrian conveyance, etc.) 3 Bicyclist 4 Other Cyclist 5 Occupant of Motor Vehicle Not in Transport (parked, etc.) 6 Occupant of a Non-Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist		Non-Motorist Location At Time of Crash 88 1 Intersection - Marked Crosswalk 2 Intersection - Unmarked Crosswalk 3 Intersection - Other 4 Midblock - Marked Crosswalk 5 Travel Lane - Other Location 6 Bicycle Lane 7 Shoulder/Roadside 8 Sidewalk 9 Median/Crossing Island 10 Driveway Access 11 Shared-Use Path or Trail 12 Non-Trafficway Area 77 Other, Explain in Narrative 88 Unknown		Action Prior to Crash 88 1 Crossing Roadway 2 Waiting to Cross Roadway 3 Walking/Cycling Along Roadway with Traffic (in or adjacent to travel lane) 4 Walking/Cycling Along Roadway Against Traffic (in or adjacent to travel lane) 5 Walking/Cycling on Sidewalk 6 In Roadway - Other (working, playing, etc.) 7 Adjacent to Roadway (e.g., shoulder, median) 8 Going to or from School (K-12) 9 Working in Trafficway (incident response) 10 None 77 Other, Explain in Narrative 88 Unknown																									
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PERSON # 2		REPORTING AGENCY CASE NUMBER 13-FR-1885		HSMV CRASH REPORT NUMBER 82176521	
1 Driver 2 Non-Motorist 3 Passenger		1	VEHICLE # 1	NAME MELISSA ANN HUTSON	
PHONE NUMBER		Check if Recommend Driver Re-exam			
CURRENT ADDRESS (Number and Street) 2904 DAVID STEWART LN.		CITY & STATE Lady Lake, FL		ZIP CODE 32159	
DATE OF BIRTH 10/12/1985	SEX: 1 Male 2 Female 88 Unknown	2	DRIVER LICENSE NUMBER H325541858720		STATE FL
EXPIRES 10/12/2013		INJURY SEVERITY (INJ) 1 None 2 Possible 3 Non-incapacitating 4 Incapacitating 5 Fatal (within 30 days) 6 Non-Traffic Fatality		1	
DRIVER					
DL Type 5		Required Endorsements 3		Driver's Actions at Time of Crash	
1 A 2 B 3 C 4 D/Chauffeur 5 E/Operator 6 E/Oper - Rest 7 None		1 Yes 2 No 3 No Req. Endorsement		1st 1 No Contributing Action 2 Operated MV in Careless or Negligent Manner 3 Failed to Yield Right-of-Way 4 Improper Backing 5 Improper Turn 6 Ran off Roadway 7 Disregarded other Traffic Sign 8 Disregarded Other Road Markings 9 Over-Correcting/Over-Steering 10 Followed too Closely 11 Ran Red Light 12 Drove too Fast for Conditions 13 Ran Stop Sign 14 Improper Passing 15 Exceeded Posted Speed 16 Wrong Side of Wrong Way 17 Failed to Keep in Proper Lane 18 Ran off Roadway 19 Disregarded other Traffic Sign 20 Disregarded Other Road Markings 21 Over-Correcting/Over-Steering 22 Swerved or Avoided : Due to Wind, Slippery Surface, MV, Object, Non-Motorist in Roadway, etc. 23 Operated MV in Erratic, Reckless or Aggressive Manner 24 Other Contributing Action	
Driver Distracted By 1 Not Distracted 2 Electronic Communication Devices (cell phone, etc.) 3 Other Electronic Device (navigation device, DVD player)		4 Other Inside the Vehicle (explain in narrative) 5 External Distraction (outside the vehicle, explain in narrative) 6 Texting 7 Inattentive 88 Unknown		3rd 4th	
Driver Vision Obstructions 1		1 Vision Not Obscured 2 Inclement Weather 3 Parked/Stopped Vehicle 4 Trees/Crops/Bushes		5 Load on Vehicle 6 Building/Fixed Object 7 Signs/Billboards 8 Fog	
9 Smoke 10 Glare 11 All Other, Explain in Narrative		DRIVER OR PASSENGER		3	
Motor Vehicle Seating Position: Seat Row Other 1 Left 1 Front 1 Not Applicable 2 Middle 2 Second 2 Sleeper Section of Truck Cab 3 Right 3 Third 3 Other Enclosed Cargo Area 77 Other 4 Fourth 4 Unenclosed Cargo Area 88 Unknown 77 Other Row 4 Trailing Unit 88 Unknown 88 Unknown 5 Riding on Motor Vehicle Exterior (non-trailing unit) 88 Unknown		LOCATION: SEAT ROW OTHER (LOC) 1 1 1		Ejection (EJECT) 1 Not Ejected 2 Ejected, Partially 3 Ejected, Completely 4 Not Applicable 88 Unknown	
Air Bag Deployed (ABD) 2		1 Not Applicable 2 Not Deployed 3 Deployed-Front 4 Deployed-Side		5 Deployed-Other (knee, air belt, etc.) 6 Deployed-Combination 7 Deployed-Curtain 88 Deployment Unknown	
Helmet Use (HU) 3		1 DOT-Compliant Motorcycle Helmet 3 Other Helmet 3 No Helmet		Eye Protection (EP) 3	
1 Yes 2 No 3 Not Applicable		Restraint Systems (RS) 3		1 Not Applicable 2 None Used - Motor Vehicle Occupant 3 Shoulder and Lap Belt Used 4 Shoulder Belt Only Used 5 Lap Belt Only Used 6 Restraint Used - Type Unknown 7 Child Restraint System - Forward Facing 8 Child Restraint System - Rear Facing 9 Booster Seat 10 Child Restraint Type Unknown 77 Other, Explain in Narrative	
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Non-Motorist Description 1 Pedestrian 2 Other Pedestrian (wheelchair, person in a building, skater, pedestrian conveyance, etc.) 3 Bicyclist 4 Other Cyclist 5 Occupant of Motor Vehicle Not in Transport (parked, etc.) 6 Occupant of a Non-Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist		Non-Motorist Location At Time of Crash 1 Intersection - Marked Crosswalk 2 Intersection - Unmarked Crosswalk 3 Intersection - Other 4 Midblock - Marked Crosswalk 5 Travel Lane - Other Location 6 Bicycle Lane 7 Shoulder/Roadside 8 Sidewalk 9 Median/Crossing Island 10 Driveway Access 11 Shared-Use Path or Trail 12 Non-Trafficway Area 77 Other, Explain in Narrative 88 Unknown		Action Prior to Crash 1 Crossing Roadway 2 Waiting to Cross Roadway 3 Walking/Cycling Along Roadway with Traffic (in or adjacent to travel lane) 4 Walking/Cycling Along Roadway Against Traffic (in or adjacent to travel lane) 5 Walking/Cycling on Sidewalk 6 In Roadway - Other (working, playing, etc.) 7 Adjacent to Roadway (e.g., shoulder, median) 8 Going to or from School (K-12) 9 Working in Trafficway (incident response) 10 None 77 Other, Explain in Narrative 88 Unknown	
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SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative		EMS AGENCY NAME OR ID 1		EMS RUN NUMBER	
MEDICAL FACILITY TRANSPORTED TO					
ADDITIONAL PASSENGERS					
PERSON #		VEHICLE #		NAME	
DATE OF BIRTH		INJ		SEX	
LOC: S R O		EJECT		HU EP ABD RS	
CURRENT ADDRESS (Number and Street)		CITY & STATE		ZIP CODE	
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative		EMS AGENCY NAME OR ID		EMS RUN NUMBER	
MEDICAL FACILITY TRANSPORTED TO					
PERSON #		VEHICLE #		NAME	
DATE OF BIRTH		INJ		SEX	
LOC: S R O		EJECT		HU EP ABD RS	
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SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative		EMS AGENCY NAME OR ID		EMS RUN NUMBER	
MEDICAL FACILITY TRANSPORTED TO					

Diagram

DHSMV # 82176521

1 = VEHICLE ONE

2 = VEHICLE TWO

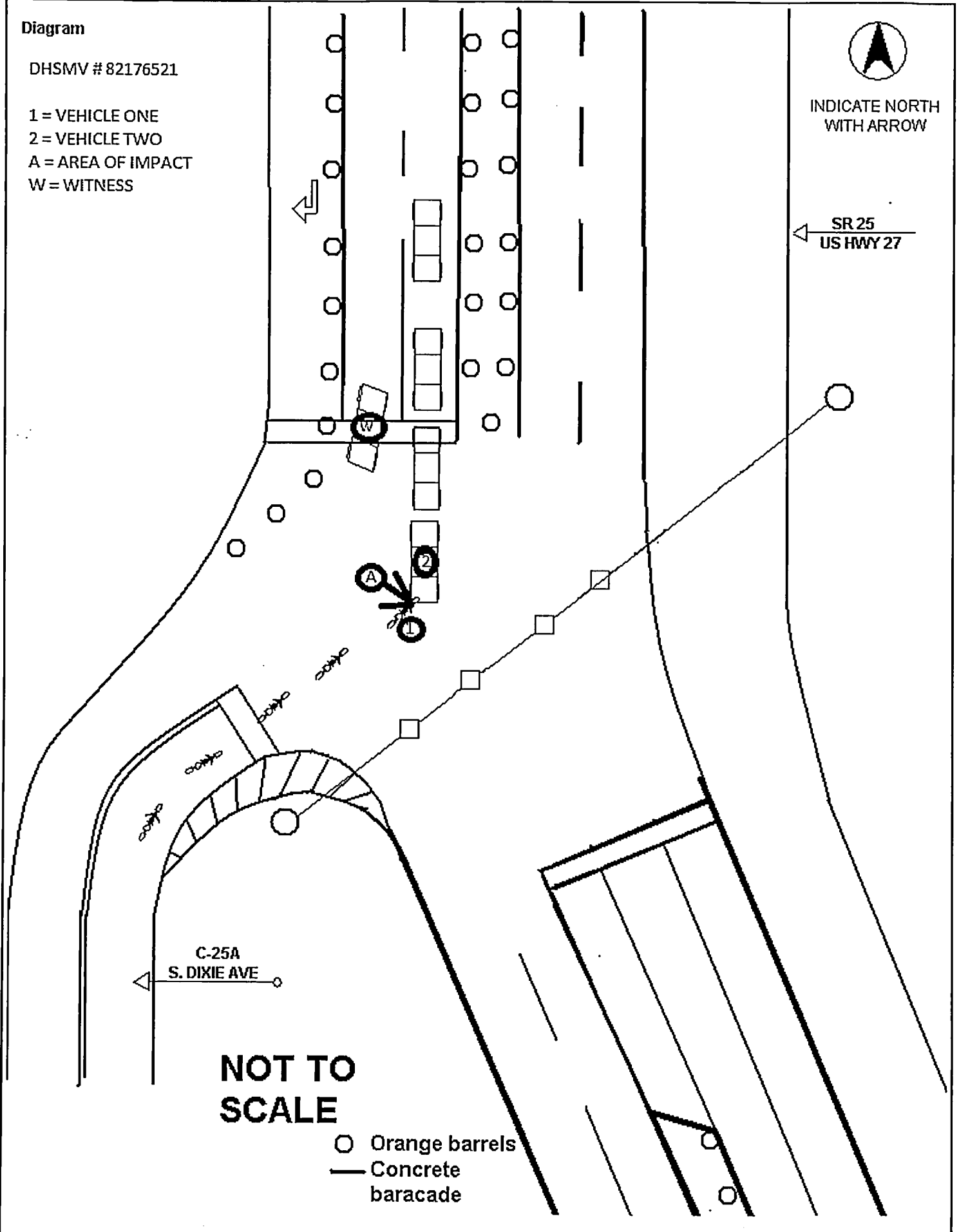
A = AREA OF IMPACT

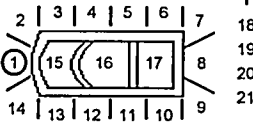
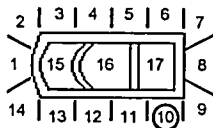
W = WITNESS



INDICATE NORTH
WITH ARROW

SR 25
US HWY 27



VEHICLE # 1		Check if Commercial <input type="checkbox"/>		REPORTING AGENCY CASE NUMBER 13-FR-1885		HSMV CRASH REPORT NUMBER 82176521					
1 Vehicle in Transport 2 Parked Motor Vehicle 3 Working Vehicle 1		VEHICLE LICENSE NUMBER		STATE	REGISTRATION EXPIRES	Check if Permanent Registration <input type="checkbox"/>	VIN				
Hit and Run 1 No 2 Yes 88 Unknown 2		YEAR	MAKE	MODEL	STYLE BICYCLE	COLOR TAN	DAMAGE: 1 Disabling 2 Functional 3 None 4 Minor 88 Unknown 4	EST. AMOUNT \$50.00			
INSURANCE COMPANY			INSURANCE POLICY NUMBER		Towed due to Damage: 1 No 2 Yes 1	VEHICLE REMOVED BY LAW ENFORCEMENT		1 Rotation 2 Owner Request 3 Driver 4 Other, Explain in Narrative 4			
NAME OF VEHICLE OWNER (Check if Business) <input type="checkbox"/>				CURRENT ADDRESS		CITY & STATE		ZIP CODE			
TRAILER #	LICENSE NUMBER	STATE	REGISTRATION EXPIRES	Check if Permanent Registration <input type="checkbox"/>	VIN	YEAR	MAKE	LENGTH	AXLES		
TRAILER #	LICENSE NUMBER	STATE	REGISTRATION EXPIRES	Check if Permanent Registration <input type="checkbox"/>	VIN	YEAR	MAKE	LENGTH	AXLES		
VEHICLE TRAVELING N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> Off-Road <input type="checkbox"/> Unknown <input type="checkbox"/>		ON STREET, ROAD, HIGHWAY DIXIE				AT EST. SPEED 10	POSTED SPEED 35	TOTAL LANES 4			
HAZ. MAT. RELEASED 1 No 2 Yes 88 Unknown 1		HAZ. MAT. PLACARD 1 No 2 Yes 88 Unknown <input type="checkbox"/>		HAZ. MAT. NUMBER		HAZ. MAT. CLASS		Area of Initial Impact 		Most Damaged Area 	
MOTOR CARRIER NAME				US DOT NUMBER							
MOTOR CARRIER ADDRESS				CITY & STATE		ZIP CODE		PHONE NUMBER			
Vehicle Body Type 77 1 Passenger Car 2 Passenger Van 3 Pickup 7 Motor Home 8 Bus 11 Motorcycle 12 Moped 13 All Terrain Vehicle (ATV) 88 Unknown		4 15 Low Speed Vehicle 16 (Sport) Utility Vehicle 17 Cargo Van (10,000 lbs (4,536 kg) or less) 18 Motor Coach 19 Other Light Trucks (10,000 lbs (4,536 kg) or less) 20 Medium/Heavy Trucks (more than 10,000 lbs (4536 kg)) 21 Farm Labor Vehicle 77 Other, Explain in Narrative 88 Unknown		Trafficway 1 Two-Way, Not Divided 2 Two-Way, Not Divided, with a Continuous Left Turn Lane 3 Two-Way, Divided, Unprotected (painted >4 feet) Median 4 Two-Way, Divided, Positive Median Barrier 5 One-Way Trafficway 88 Unknown		Commercial Motor Vehicle Configuration 1 Vehicle 10,000 lbs or less Placarded for Hazardous Materials 2 Single-Unit Truck (2-axle and GVWR more than 10,000 lbs (4,536 kg)) 3 Single-Unit Truck (3 or more axles) 4 Truck Pulling Trailer(s) 5 Truck Tractor (bobtail) 6 Truck Tractor/Semi-Trailer 7 Truck Tractor/Double Truck 8 Tractor/Tractor Trailer 9 Truck more than 10,000 lbs (4,536 kg), Cannot Classify 10 Bus/Large Van (seats for 9-15 occupants, including driver) 11 Bus (seats for more than 15 occupants, including driver) 77 Other, Explain in Narrative 88 Unknown					
Comm/Non-Commercial 1 Interstate Carrier 2 Intrastate Carrier 3 Not in Commerce/Government 4 Not in Commerce/Other Truck		Trailer Type 1 Single Semi Trailer 2 Tandem Semi Trailer 3 Tank Trailer 4 Saddle Mount/Trailer 5 Boat Trailer 6 Utility Trailer 7 House Trailer 8 Pole Trailer 9 Towed Vehicle 10 Auto Transport 77 Other, Explain in Narrative 88 Unknown		Cargo Body Type 1 No Cargo 2 Bus 3 Van/Enclosed Box 4 Hopper 5 Pole-Trailer 6 Cargo Tank 7 Flatbed 8 Dump 9 Concrete Mixer 10 Auto Transport 11 Garbage/Refuse 12 Log 13 Intermodal Container Chassis 14 Vehicle Towing Another Vehicle 15 Not Applicable (vehicle 10,000 lbs (4,536 kg) or less not displaying HM placard) 77 Other, Explain in Narrative 88 Unknown							
Most Harmful Event 6 1 Overturn/Rollover 2 Fire/Explosion 3 Immersion 4 Jackknife 5 Cargo/Equipment Loss or Shift 6 Fell/Jumped From Motor Vehicle 7 Thrown or Falling Object 8 Ran into Water/ Canal 9 Other Non-Collision		Non-Collision 40 Equipment Failure (blown tire, brake failure, etc.) 41 Separation of Units 42 Ran Off Roadway, Right 43 Ran Off Roadway, Left 44 Cross Median 45 Cross Centerline 46 Downhill Runaway		Comm GVWR/GCWR 1 10,000 lbs (4,536 kg) or less 2 10,001-26,000 lbs (4,536-11,793 kg) 3 More than 26,000 lbs (11,793 kg) 4 Not Applicable		Collision with Non-Fixed Object 10 Pedestrian 11 Pedalcycle 12 Railway Vehicle (train, engine) 13 Animal 14 Motor Vehicle in Transport 15 Parked Motor Vehicle 16 Work Zone/Maintenance Equipment 17 Struck By Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle 18 Other Non-Fixed Object		Collision Fixed Object 19 Impact Attenuator/Crash Cushion 20 Bridge Overhead Structure 21 Bridge Pier or Support 22 Bridge Rail 23 Culvert 24 Curb 25 Ditch 26 Embankment 27 Guardrail Face 28 Guardrail End 29 Cable Barrier 30 Concrete Traffic Barrier 31 Other Traffic Barrier 32 Tree (standing) 33 Utility Pole/Light Support 34 Traffic Sign Support 35 Traffic Signal Support 36 Other Post, Pole, or Support 37 Fence 38 Mailbox 39 Other Fixed Object (wall, building, tunnel, etc.)		Emergency Vehicle Use 1 1 No 2 Yes 88 Unknown	
Sequence of Events 1st 14 2nd 6 3rd 4th		[40-46 Sequence of Events only] 40 Equipment Failure (blown tire, brake failure, etc.) 41 Separation of Units 42 Ran Off Roadway, Right 43 Ran Off Roadway, Left 44 Cross Median 45 Cross Centerline 46 Downhill Runaway		Vehicle Maneuver Action 1 Straight Ahead 3 Turning Left 4 Backing 5 Turning Right 6 Changing Lanes 8 Parked 10 Making U-Turn 11 Overtaking/ Passing 13 Stopped in Traffic 14 Slowing 15 Negotiating a Curve 16 Leaving Traffic Lane 17 Entering Traffic Lane 77 Other, Explain in Narrative 88 Unknown		Traffic Control Device For This Vehicle 1 No Controls 4 School Zone Sign/ Device 5 Traffic Control Signal 6 Stop Sign 7 Yield Sign 8 Flashing Signal 9 Railway Crossing Device 10 Person (including Flagman, Officer, Guard, etc.) 13 Warning Sign 77 Other, Explain in Narrative 88 Unknown		Vehicle Defects 1 None 2 Brakes 3 Tires 4 Lights (head, signal, tail) 6 Steering 7 Wipers 9 Exhaust System 10 Body, Doors 11 Power Train 12 Suspension 13 Wheels 14 Windows/ Windshield 15 Mirrors 16 Truck Coupling/ Trailer Hitch/ Safety Chains 77 Other, Explain in Narrative 88 Unknown			
Roadway Grade 4 1 Level 2 Hillcrest 3 Uphill 4 Downhill 5 Sag (bottom)		Roadway Alignment 2 1 Straight 2 Curve Right 3 Curve Left		Special Function of a Motor Vehicle 1 No Special Function 2 Farm Vehicle 3 Police 7 Taxi 8 Military 9 Ambulance 10 Fire Truck 11 Farm Labor Transport 12 School Bus 13 Transit/Commuter Bus 14 Intercity Bus 15 Charter/Tour Bus 16 Shuttle Bus 17 Farm Labor Bus 88 Unknown							
VIOLATIONS											
PERSON # 1	NAME OF VIOLATOR Trinnen J. Chesnut			FL STATUTE NUMBER 316.061(1)		CHARGE LEAVE SCENE OF CRASH - PROPERTY DAMA		CITATION NUMBER			
PERSON #	NAME OF VIOLATOR			FL STATUTE NUMBER		CHARGE		CITATION NUMBER			
PERSON #	NAME OF VIOLATOR			FL STATUTE NUMBER		CHARGE		CITATION NUMBER			