

FLORIDA TRAFFIC CRASH REPORT

LONG FORM ☒ SHORT FORM ☐ UPDATE ☐

HIGHWAY SAFETY & MOTOR VEHICLES,
TRAFFIC CRASH RECORDS
NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

(Electronic Version)

Date of Crash 25/Feb/2011 02:00 PM	Time of Crash 25/Feb/2011 02:00 PM	Date of Report 25/Feb/2011 02:50 PM	Invest. Agency Report Number FHPD11OFF015669	HSMV Crash Report Number 81969694
---------------------------------------	---------------------------------------	--	---	--------------------------------------

CRASH IDENTIFIERS

County Code 12	City Code 30	County of Crash LAKE	Place or City of Crash CLERMONT	Within City Limits No	Time Reported 25/Feb/2011 02:02 PM	Time Dispatched 25/Feb/2011 02:05 PM
Time on Scene 25/Feb/2011 02:27 PM	Time Cleared Scene 25/Feb/2011 04:01 PM	Completed Yes	Reason (if Investigation NOT Completed)			Notified By Law Enforcement

ROADWAY INFORMATION

Crash Occured On Street, Road, Highway TOWN CENTER BLVD			At Street Address#	At Latitude 28.347799999999999	and Longitude -81.664578333333296
At Feet 500	Or Miles	Direction South	From Intersection With Street, Road, Highway STATE ROAD 530 (U.S. HIGHWAY 192)	Or From Milepost #	
Road System Identifier 5 Local		Type Of Shoulder 1 Paved	Type Of Intersection 1 Not at Intersection		

CRASH INFORMATION (Check if Pictures Taken) ☐

Light Condition 1 Daylight	Weather Condition 1 Clear	Roadway Surface Condition 1 Dry	School Bus Related 1 No	Manner Of Collision 3 Angle
First Harmful Event Type	First Harmful Event 11	First Harmful Event Location 1 On Roadway	Within Interchange No	First Harmful Event Relation to Junction 1 Non-Junction
Contributing Circumstances: Road 1 None		Contributing Circumstances: Road		Contributing Circumstances: Road
Contributing Circumstances: Environment 1 None		Contributing Circumstances: Environment		Contributing Circumstances: Environment
Work Zone Related 1 No	Crash In Work Zone	Type Of Work Zone	Workers In Work Zone	Law Enforcement In Work Zone

VEHICLE (Check if Commercial) ☐

Vehicle 1	Motor Vehicle Type 1 Vehicle in Transport	Hit and Run 1 No	Veh License Number G152ZX	State FL	Reg. Expires 30/Jun/2011	Permanent Reg. No	VIN KNDJD733465606095
Year 2006	Make KIA	Model SORRENTO	Style UT	Color BLU	Extent of Damage Minor	Est. Damage 300	Towed Due To Damage No
Insurance Company TRAVELERS INDEMNITY				Insurance Policy Number BA8661N13610SEL			
Name of Vehicle Owner (Check Box If Business) LIBERTY VACATION HOMES			Current Address (Number and Street) 8681 WIRLO BRONSON HWY STE127			City and State KISSIMMEE FL	
						Zip Code 34747	
Trailer One:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make
Trailer Two:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make
Vehicle Traveling:	Direction East	On Street, Road, Highway TOWN CENTER BLVD				At Est. Speed 5	Posted Speed 10
CMV Configuration		Cargo Body Type		Area of Initial Impact		Most Damaged Area	
Comm GVWR/GCWR		Trailer Type (trailer one)		Trailer Type (trailer two)			
Haz. Mat. Release	Haz Mat. Placard	Number	Class				
Motor Carrier Name			US DOT Number				
Motor Carrier Address			City and State			Zip Code	Phone Number
Comm/Non-Commercial	Vehicle Body Type 1 Passenger Car	Vehicle Defects (one) 1 None		Vehicle Defects (two)		Emergency Vehicle Use 1 No	Special Function of MV 1 No Special Function
Vehicle Maneuver Action 5 Turning Right	Trafficway 3 Two-Way, Divided, Unprotected (painted >4 feet) Median	Roadway Grade 1 Level	Roadway Alignment 1 Straight	Most Harmful Event 2 Collision with Non-Fixed Object		Most Harmful Event Detail 11 Pedalcycle	
Traffic Control Device For This Vehicle 6 Stop Sign	First (1) Sequence of Events 2 Collision with Non-Fixed Object 11 Pedalcycle		Second (2) Sequence of Events		Third (3) Sequence of Events		Fourth (4) Sequence of Events

PERSON RECORD

Person# 2	Description 1 Driver	Vehicle # 1	Name NANCY TOBON	Date of Birth 18/Aug/1970	Sex 2 Female	Phone Number	Re-Exam No
Address 1035 DARLINGTON CT		City KISSIMMEE	State FL	Zip Code 34758			
Driver License Number T150620707981	State FL	Expires 18/Aug/2018	DL Type 5 E/Operator	Req. End.	Injury Severity 1 None	Ejection 1 Not Ejected	

Date of Crash 25/Feb/2011 02:00 PM	Date of Report 25/Feb/2011 02:00 PM	Invest. Agency Report Number FHPD11OFF015669	HSMV Crash Report Number 81969694
---------------------------------------	--	---	--------------------------------------

Restraint System 3 Shoulder and Lap Belt Used	Air Bag Deployed 1 Not Applicable	Helmet Use	Eye Protection 3 Not Applicable	Seating Location Seat 1 Left	Seating Location Row 1 Front	Seating Location Other		
Drivers Actions at Time of Crash (first) 1 No Contributing Action		Drivers Actions at Time of Crash (second)			Driver Distracted By 1 Not Distracted	Vision Obstruction 1 Vision Not Obscured		
Drivers Actions at Time of Crash (third)		Drivers Actions at Time of Crash (fourth)			Drivers Condition at Time of Crash 1 Apparently Normal			
Suspected Alcohol Use 1 No	Alcohol Tested 1 Test Not Given	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 No	Drug Tested 1 Test Not Given	Drug Test Type	Drug Test Result
Source of Transport to Medical Facility 1 Not Transported		EMS Agency Name or ID		EMS Run Number		Medical Facility Transported To		

PERSON RECORD

Person# 1	Description 2 Non-Motorist	Name ALBERT JAMES NITTEROUR			Date of Birth 08/Feb/1932	Sex 1 Male	Injury Severity 2 Possible	Phone Number	
Address 9600 US HWY 192 # 126		City CLERMONT		State FL			Zip Code 34714		
Non-Motorist Description Detail 3 Bicyclist		Non-Motorist Action Prior to Crash 4 Walking/Cycling Along Roadway Against Traffic (in or adjacent to travel lane)				Non-Motorist Location at Time of Crash 2 Intersection - Unmarked Crosswalk			
Non-Motorist Actions/Circumstance (First) 3 Failure to Yield Right-of-Way		Non-Motorist Actions/Circumstance (Second)			Non-Motorist Safety Equipment (One) 1 None		Non-Motorist Safety Equipment (Two)		
Suspected Alcohol Use 1 No	Alcohol Tested 1 Test Not Given	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 No	Drug Tested 1 Test Not Given	Drug Test Type	Drug Test Result	
Source of Transport to Medical Facility 1 Not Transported		EMS Agency Name or ID			EMS Run Number		Medical Facility Transported To		

VIOLATIONS

Person# 1	Name ALBERT JAMES NITTEROUR	Florida Statute Number 316.2065(1)	Charge VIOLATION BICYCLE REGULATIONS	Citation 1898-SUB
---------------------	---------------------------------------	--	--	-----------------------------

NARRATIVE

Officer: E. RODRIGUEZ
Date: Feb 25 2011 3:24PM

Bicycle (B1) was traveling west in the single through lane on Town Center Blvd, attempting a left turn into the Publix parking lot area. Vehicle Two (V02) was traveling east in the single through lane on Town Center Blvd, attempting a right turn south on Town Center Blvd. B1 veered left, entering into the path of V01 and the right side of B1 struck the front of V01. B1 was moved off the road prior to my arrival. V01 came to final rest in the single through lane on Town Center Blvd facing southeast.

Note: Pedal cyclist was riding a Road Master mountain Sport SX, black in color. S/N FSD08g68724.

REPORTING OFFICER

ID/Badge # 2463	Rank and Name TROOPER E. RODRIGUEZ	Department FLORIDA HIGHWAY PATROL	Type of Department FHP
---------------------------	--	---	----------------------------------

