

# 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 24/Dec/2013 02:04 PM	Time of Crash 24/Dec/2013 02:04 PM	Date of Report 24/Dec/2013 12:00 AM	Invest. Agency Report Number 13120376	HSMV Crash Report Number 84318645
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## CRASH IDENTIFIERS

County Code 12	City Code 42	County of Crash LAKE	Place or City of Crash LEESBURG	Within City Limits Yes	Time Reported 24/Dec/2013 02:06 PM	Time Dispatched 24/Dec/2013 02:07 PM
Time on Scene 24/Dec/2013 02:20 PM	Time Cleared Scene 24/Dec/2013 02:50 PM	Completed Yes	Reason (if Investigation NOT Completed)			Notified By Law Enforcement

## ROADWAY INFORMATION

Crash Occured On Street, Road, Highway US 441			At Street Address#		At Latitude and Longitude	
At Feet 225	Or Miles	Direction South	From Intersection With Street, Road, Highway RADIO RD			Or From Milepost #
Road System Identifier 2 U.S.		Type Of Shoulder 3 Curb		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
First Harmful Event Type	First Harmful Event 11	First Harmful Event Location 1 On Roadway	Within Interchange No	First Harmful Event Relation to Junction 4 Driveway/Alley Access Related
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 HNJ5C	State FL	Reg. Expires 13/Aug/2014	Permanent Reg.	VIN 1GNSKHE30BR222760		
Year 2011	Make CHEV	Model SUBURBAN	Style UT	Color WHI	Extent of Damage Minor	Est. Damage 75	Towed Due To Damage No	Vehicle Removed By OWNER	Rotation
Insurance Company					Insurance Policy Number				
Name of Vehicle Owner (Check Box If Business) <input type="checkbox"/>			Current Address (Number and Street) 9605 SILVER LAKE DR			City and State LEESBURG FL		Zip Code 34788	
Trailer One:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles
Trailer Two:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles
Vehicle Traveling:	Direction South	On Street, Road, Highway 10401 US HWY 441					At Est. Speed 2	Posted Speed	Total Lanes
CMV Configuration			Cargo Body Type			Area of Initial Impact		Most Damaged Area	
Comm GVWR/GCWR 4 Not Applicable			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 16 (Sport) Utility Vehicle	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 4 Two-Way, Divided, Positive Median Barrier	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 5 Traffic Control Signal	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# 1	Description 1 Driver	Vehicle # 1	Name MICHAELA LEE MORRIS	Date of Birth 24/Jun/1996	Sex 2 Female	Phone Number 3527876781	Re-Exam No
Address 9605 SILVER LAKE DR		City LEESBURG		State FL		Zip Code 34788	
Driver License Number M620552967240		State FL	Expires 24/Jun/2020	DL Type 5 E/Operator	Req. End. 3 No Req Endorsement	Injury Severity 1 None	Ejection 1 Not Ejected

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Restraint System 3 Shoulder and Lap Belt Used	Air Bag Deployed 2 Not Deployed	Helmet Use	Eye Protection	Seating Location Seat 1 Left	Seating Location Row 1 Front	Seating Location Other 1 Not Applicable		
Drivers Actions at Time of Crash (first) 3 Failed to Yield Right.of.Way		Drivers Actions at Time of Crash (second)			Driver Distracted By 88 Unknown	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	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 No	Drug Tested	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# 2	Description 2 Non-Motorist	Name WILLIAM JERNIGAN			Date of Birth 24/Jul/1951	Sex 1 Male	Injury Severity 3 Non-incapacitating		Phone Number 3522172087
Address 11414 MARLETTE AVE		City LEESBURG		State FL			Zip Code 34788		
Non-Motorist Description Detail 3 Bicyclist			Non-Motorist Action Prior to Crash 5 Walking/Cycling on Sidewalk				Non-Motorist Location at Time of Crash 4 Midblock - Marked Crosswalk		
Non-Motorist Actions/Circumstance (First) 4 Failure to Obey Traffic Signs, Signals, or Officer		Non-Motorist Actions/Circumstance (Second)		Non-Motorist Safety Equipment (One) 1 None			Non-Motorist Safety Equipment (Two)		
Suspected Alcohol Use 1 No	Alcohol Tested	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 No	Drug Tested		Drug Test Type	Drug Test Result
Source of Transport to Medical Facility 2 EMS		EMS Agency Name or ID LAKE EMS		EMS Run Number 242814			Medical Facility Transported To LEESBURG REGIONAL MEDICAL CENTER		

#### WITNESSES

Name DOUGLAS JAMES HUNTER J	Address 1201 ORANGE AVE	City TAVARES	State FL	Zip Code 32778
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#### NON VEHICLE PROPERTY DAMAGE

Vehicle# 1	Person#	Property Damage - Other Than Vehicle HUFFY BICYCLE SERIAL #2C5616	Est. Amount 25	Business No	Owner's Name WILLIAM JERNIGAN	Address 11414 MARLETTE AV	City & State LEESBURG FL	Zip Code 34788
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#### NARRATIVE

Vehicle 1 was at the main exit to 10401 US Hwy 441 onto US Hwy 441. Non-Motorist 1 was on the sidewalk on the north side of the exit. Driver 1 advised she stopped at the stop bar and pulled forward to make a right on red. She was looking for northbound traffic when she entered the crosswalk. Non-Motorist 1 advised he didn't push the crosswalk button and entered the crosswalk on a red pedestrian signal. The front of Vehicle 1 collided with Non-Motorist 1's bicycle. Non-Motorist 1 has unknown injuries and was transported to Leesburg Regional Medical Center for treatment. Both Driver 1 & Non-Motorist 1 are at fault for the crash. No citations were issued.

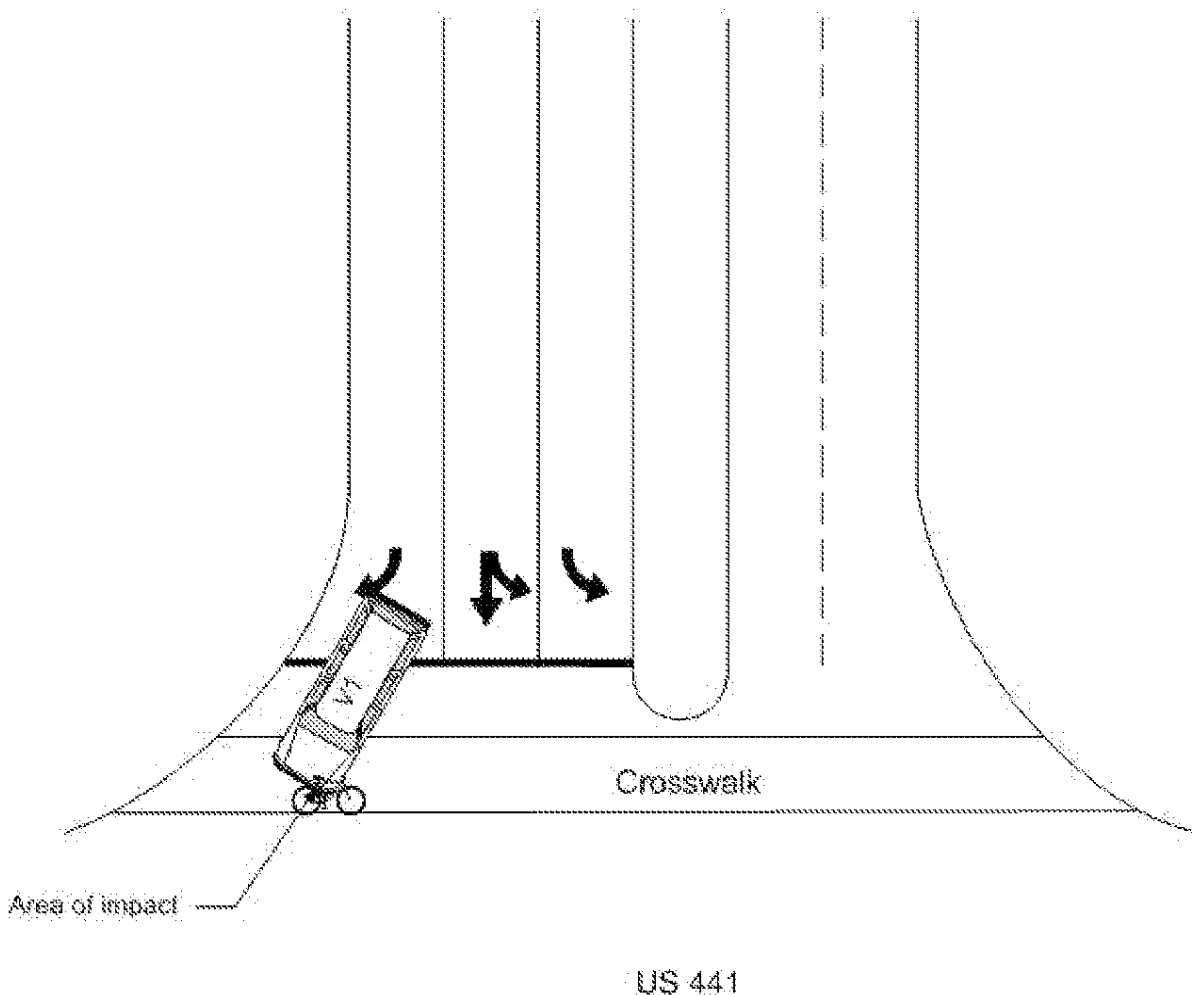
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#### REPORTING OFFICER

ID/Badge # T-53	Rank and Name SR. OFC. PARSONS	Department LEESBURG POLICE DEPARTMENT	Type of Department PD
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Parking lot of 10401 US 441



\*Not drawn to scale