	ARI	IZONA CRASH	REPO														umber				
		FATAL SUPPLEM POLICE ONLY – FORWAR	YEAR	MONTH	DAY		HC	DUR			NC	CIC NO.		OFFICER ID NO.							
1		ADOT TRAFFIC RECORDS SECTION, 064R 206 S. 17 <sup>TH</sup> AVE., PHOENIX, ARIZONA 85007-3233																			
		Name	12011/100007 0200	1 1	1 1	1 1				Туре	e:		Driver		☐ Pedes	strian	<u> </u>	☐ Unknown	Occup	ant Ty	/ре
2		0				14/-:						Passeno	ger	☐ Pedal	cyclist	- 1	□ Unknown	Non-O	)ccupa	nt Type	
		Sex	In	Wei			ight			Date of Birt											
	)ED	Deceased at Scene:	Ft Deceased Removed							De	`		noved By		I						
	DECEASED	☐ Yes ☐ No																			
	DEC	Transported to First Medic  ☐ Yes ☐ No	cal Facility:	First Medic	al Facility T	ransported	l To:					Т	ransporte	ed to Fin	st Medic	al Facilit	у Ву:				
		Date of Death (MMDDYYYY)									Т	Time o	of Death								
		, ,				1	1	1	ı									I.			
	ш	If Intersection or Intersection  ☐ 1 Four Way Intersection					Roadway Surface Type at Crash Scene: UNIT #														
		☐ 2 T-Intersection ☐ 3 Y-Intersection			_	1	Cond	crete			-		Dirt								
	SCENI	☐ 4 Traffic Circle						□ 2	Blac	ktop, Bitu		s, or Asphalt									
3	)S H	If intersection or Intersec	ction-Related, and Tr	affic Signal	s Present,	Indicate T	ype of S	Signal:					or Block , Gravel,			L	1 113	i Unknown			
	CRASH	☐ 1 Traffic Control Signal	I With Pedestrian Signa	al	·			•	w	ork Zon	ne Ty	/pe:									
		☐ 2 Traffic Control Signal	i without Pedestrian Si	gnai							0 No V 1 Con		Zone Pre	esent			3 Util	lity ork Zone, Ty	ne l Ink	nown	
											2 Mair					_	, , , ,,,	JIK ZOIIG, TY	Je onk	IIOWII	
		Trailer Vehicle Identification			Extent	of Dama	amage:			otor Ve	hicle	Contrib	uting Ci	rcumsta	ances: (	Check :	all that app	ly)			
	VEHICLE INFORMATION	Unit #						_		IU	NIT#			•	UNIT	#					
		Unit #		<u> </u>	1 No Da	unctional Damage sabling Damage				None	e			I 8 Wip	ers						
		Unit # Unit #			2 Minor				1 0 None												
				<b>-</b> - 4	4 Disabl				<b>□</b> 3	Stee	eering							Safety Chains			
		Fire Occurrence: UNIT #		ט ט ט	o Unkno				□ 4 □ 5	Pow	Ispension					Safety					
									<b>7</b>	Light						_					
4		□ □ No □ □ Yes							1	Head											
		Underride/Override:																			
		UNIT #						UNIT#													
		□ □ 1 No Underride or																			
		□ □ 1 No Underride or Override Noted □ □ 2 Underriding a Motor Vehicle Not in Transport, No Compartment Intrusion □ □ 3 Underriding a Motor Vehicle in Transport, No Compartment Intrusion □ □ 4 Underriding a Motor Vehicle Not in Transport, Compartment Intrusion □ □ 8 Overriding a Motor Vehicle in Transport □ □ 9 Overriding a Motor Vehicle in Transport																			
		☐ ☐ 4 Underriding a Mo☐ ☐ 5 Underriding a Mo							icle Not in Underride												
													I		_						
		Driver Unit # HeightFt				FtIn			Racing Involve UNIT #				d								
		Weight:							No												
														Yes							
		Con UNIT#	npliance with License	Restriction	ns:			NIT#				C	omplian	ce with	CDL En	dorsem	ents:				
								_													
	NC	□ □ 0 No Restrictions □ □ 1 Restrictions Con									nt(s) Required, Complied With										
		☐ ☐ 2 Restrictions Not ☐ ☐ 3 Restrictions, Cor							nt(s) Required, Not Complied With nt(s) Required, Compliance Unknown												
		□ □ 51 Unknown																			
	INFORMATION							Driver's Attempted Avoidance Maneuver (Check Only One)													
5	ORN	UNIT #		UN	JNIT # — —																
3	DRIVER INF	☐ ☐ 1 Driver Did Not M☐ ☐ 2 Object			<ul><li>□ 1 No Avoidar</li><li>□ 2 Releasing I</li></ul>				ver	<ul><li>□ □ 9 Accelerating</li><li>□ □ 10 Accelerating and Stee</li></ul>			and Steeri	ering Left							
		□ □ 3 Poor Road Cond			☐ ☐ 3 Braking										ng Righ		Direction				
		5 Motor Vehicle (in transport, parked, working) 6 Pedestrian, Pedalcyclist or Other Non-Motorist						□ □ 5 Steering Ri				Loft	□ □ 50 Other Actions:						_ `		
		☐ ☐ 7 Non-Contact Mo☐ ☐ 51 Unknown		☐ ☐ 6 Braking and ☐ 7 Braking and ☐ ☐ 8 Braking and ☐ ☐ 8									or or or		7110101011001	nancav	0171110	Simpled			
		B B 31 Olikilowii			Draking 6	and 0															
		Alcohol		Unit #				Driver Alcohol/Drug Testing Result Unit #					ilts	ts							
		Unit # Unit #	<b>-</b>	Unit	Drugs # Unit		_		Alcoho	l Test		-				Alco	hol Tes				
			No Test Given Test Given	<u> </u>			Test Given	en	Alcoho Drug T		t Results ype:	s:					hol Tes Test T	t Results: ype:			
			Test Refused									t Results: Drug Test Results:									
			Testing Unknown			ung Unkl	IIWUII		<del></del>												
		1																			

6	EMS	Notification	on Time EMS:				Arrival Time	e EMS:					EMS Time at Hospital:						
7	TINFORMATION	Unit#	Seat Pos.	S/D	Ejection	EJ. Path	Extrication	Transport	t (	Seating Position									
	MOTOR VEHICLE OCCUPANT/NON-OCCUPANT INFORMATION	Ejection	cted/Not Applic	nghla.	Ejection 0 – Not Ap				2 2 3 4 5 6	0 – Not Applical 1 – Lap Belt On 2 – Shoulder Be 3 – Shoulder an 4 – Restraint – 5 – Other: Spec 6 – Child Restra 7 – Child Restra	Shoulder Belt Only Shoulder and Lap Belt Used Restraint – Type Unknown Other: Specify Child Restraint – Forward Facing Child Restraint – Rear Facing  Shoulder Belt Only 10 – No Helmet 11 – DOT-Compliant Motorcycle Helmet 12 – Helmet, Other Than DOT-Compliant MC 13 – Helmet, Unknown if DOT-Compliant 50 – Unknown if Helmet Worn 51 – Unknown								
		1 – Ejected 2 – Ejected 3 – Ejected	, Totally		1 – Throug 2 – Throug 3 – Throug 4 – Throug 5 – Throug 6 – Throug 7 – Throug 8 – Other	pincapie ph Side Door \ ph Side Door \ ph Windshield ph Back Winds ph Back Door/ ph Roof Open ph Roof (conv Path (Back of on Path Unkr	2	U – Not Applicable 1 – Not Extricated 1 – EMS Air 2 – Extricated 2 – Extricated 3 – EMS Unknown Mode 4 – Law Enforcement 5 – Transported Unknown Source 6 – Other 51 – Unknown if Transported											
8	MOTORCYCLE INFORMATION	Motorcycle Body Style  Motorcycles – Two Wheel Styles UNIT # Unit																	
9	INFORMATI	UNIT#	Pedestrian Bicyclist Person on Perso Other Cyclist (ur Person In/On Bu Occupant of a N Unknown Type	onal Conveyar nicycle, tricycle uilding lon-Motor Vehi of Non-Motor	cle Transpor	)	UNI Prot UNI	Preventative: UNIT #											
	NON-OCCUPA	Unit #	Alcohol Unit #	No Test Girlest Given Test Refus Testing Un	ven ed	Unit #_	Drugs Unit #	No Test Giv Test Given Test Refuse Testing Unk	ed	Unit # Alcohol Te Alcohol Te Drug Test Drug Test	st Results: Type:		upant Alcohol/l	Unit # _ Alcoho Alcoho Drug T		oe: sults:			
	2																		
1 0	COMMENTS																		
1	Office	er's Name / E	Badge #			Supervisor's	Signature			Agency N	lame				Date	Complete	d		