



Matt Mead  
Governor

# Department of Transportation

## State of Wyoming



Bill Panos  
Director

April 28, 2017

Dear Reader,

Wyoming's Report on Traffic Crashes for 2016 has been published for your information. This year's report continues to provide you with information on traffic crashes. This publication contains general information rather than all of the detailed information. The detailed information is still available in an individual report and can be printed to add to your 2016 Traffic Crash Report from the web site below.

Our publication is enclosed:

[http://www.dot.state.wy.us/home/dot\\_safety/safety\\_statistics.html](http://www.dot.state.wy.us/home/dot_safety/safety_statistics.html)

If you require further information, or you have questions, comments or suggestions about the annual report, please contact our office at the address below. If you can't find the information you are looking for please contact Michael Janicek at (307) 777-3910 or Chris Kwilinski at (307) 777- 4274 or for additional crash information.

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Sincerely,

Matthew D. Carlson, P.E.  
State Highway Safety Engineer

Data Provided By:  
Crash Data Management Section

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## DEFINITIONS

### REPORTABLE TRAFFIC CRASH

A Reportable Traffic Crash is one which results in bodily injury or death of any person or a total property damage of \$1000 or more.

### CRASH SEVERITY

#### Fatal Crash

A traffic crash involving one or more persons who were killed.

#### Injury Crash

A traffic crash involving one or more persons who were injured but there were no fatalities.

#### Property Damage Only (PDO)

A traffic crash involving property damage of \$1000 or more with no injuries or fatalities.

### INJURY STATUS

#### Fatal Injury

Any injury resulting in death within 30 days after the traffic crash.

#### Incapacitating Injury

Any injury, other than a fatal injury, which prevents the injured person from walking, driving or normally continuing any activities the person was capable of performing before the injury occurred.

#### Non-Incapacitating Injury

Any injury, other than a fatal or incapacitating injury, which is evident to observers at the scene of the traffic crash

#### Possible Injury

No evidence of an injury, but complaint of pain.

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# QUICK LOOK

## 2016 Crash Counts

TOTAL CRASHES	13846
FATAL CRASHES	100
INJURY CRASHES	2457
PDO CRASHES	11289

## 2016 Involved Counts

NUMBER OF VEHICLES	20857
NUMBER OF DRIVERS	19425
NUMBER OF PERSONS	27815
NUMBER OF PEDESTRIANS	99
NUMBER OF PEDACYCLISTS	72

## 2016 Injury/Fatal Counts

INJURY CRASHES	2457
NUMBER INJURED	3314
FATAL CRASHES	100
NUMBER KILLED	112
PEDESTRIAN CRASHES	91
PEDESTRIANS INJURED	94
PEDESTRIANS KILLED	5
BICYCLIST CRASHES	72
BICYCLISTS INJURED	71
BICYCLISTS KILLED	1

## 2016 Location Counts

URBAN CRASHES	7348
RURAL CRASHES	6498

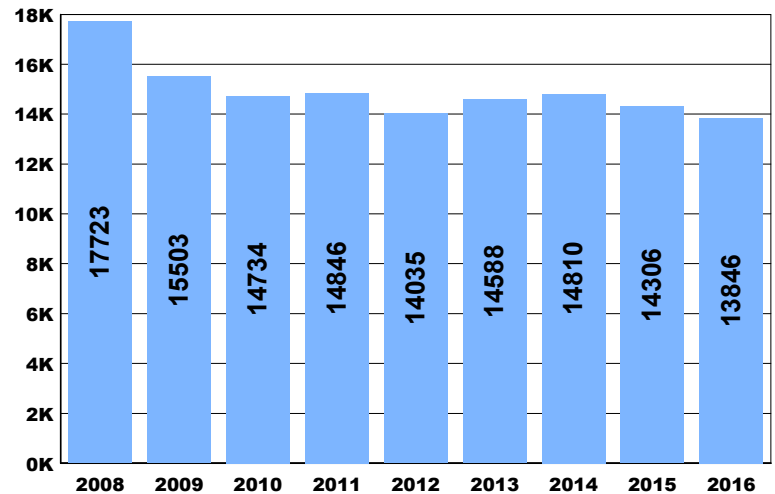
## 2016 Alcohol Statistics

ALCOHOL RELATED CRASHES	713
ALCOHOL FATAL CRASHES	28
ALCOHOL FATALITIES	32
ALCOHOL INJURY CRASHES	302
ALCOHOL INJURIES	385
ALCOHOL PDO CRASHES	383

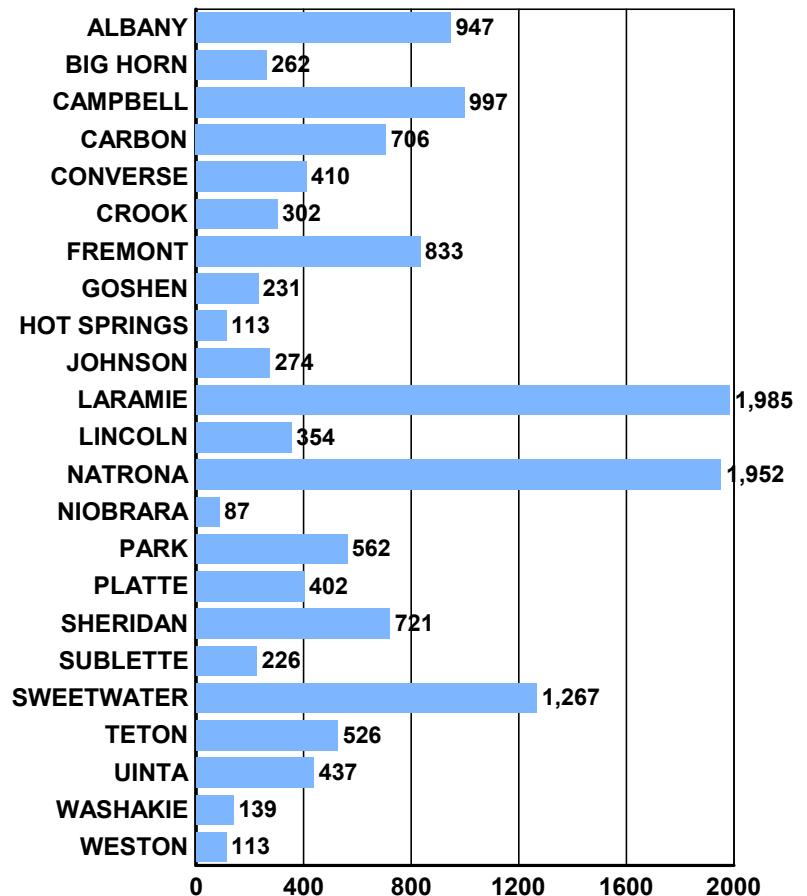
## 2016 Motorcycle Statistics

MOTORCYCLE CRASHES	229
MOTORCYCLE FATALITIES	24
MOTORCYCLE INJURIES	198

## TOTAL CRASHES / YEAR



## 2016 CRASHES / COUNTY



## 2016 WYOMING ECONOMIC LOSS/COUNTY

COUNTY	POPULATION	ECONOMIC LOSS
ALBANY	38,256	\$351,483,145
BIG HORN	12,005	\$96,917,830
CAMPBELL	48,803	\$263,645,710
CARBON	15,618	\$333,626,890
CONVERSE	14,191	\$138,893,145
CROOK	7,464	\$104,693,250
FREMONT	40,242	\$366,636,175
GOSHEN	13,390	\$105,235,370
HOT SPRINGS	4,679	\$87,976,645
JOHNSON	8,486	\$124,486,200
LARAMIE	98,136	\$687,321,535
LINCOLN	19,110	\$186,593,180
NATRONA	81,039	\$464,609,755
NIOBRARA	2,480	\$65,629,355
PARK	29,353	\$216,628,980
PLATTE	8,680	\$201,296,855
SHERIDAN	30,200	\$243,025,680
SUBLETTE	9,769	\$62,089,755
SWEETWATER	44,165	\$457,159,515
TETON	23,191	\$144,682,750
UINTA	20,773	\$257,837,580
WASHAKIE	8,235	\$55,610,060
WESTON	7,236	\$73,526,055
<b>TOTAL</b>	<b>585,501</b>	<b>\$5,091,800,425</b>

Population Source: U.S. Census Bureau 2016 estimates.

Figures used to determine Economic Loss came from the US Department of Transportation Memorandum; dated June 17, 2015 for the "Treatment of the Economic Value of a Statistical Life in Departmental Analyses." WYDOT has adopted a slightly modified version of the Relative Disutility Factors by Injury Status level.

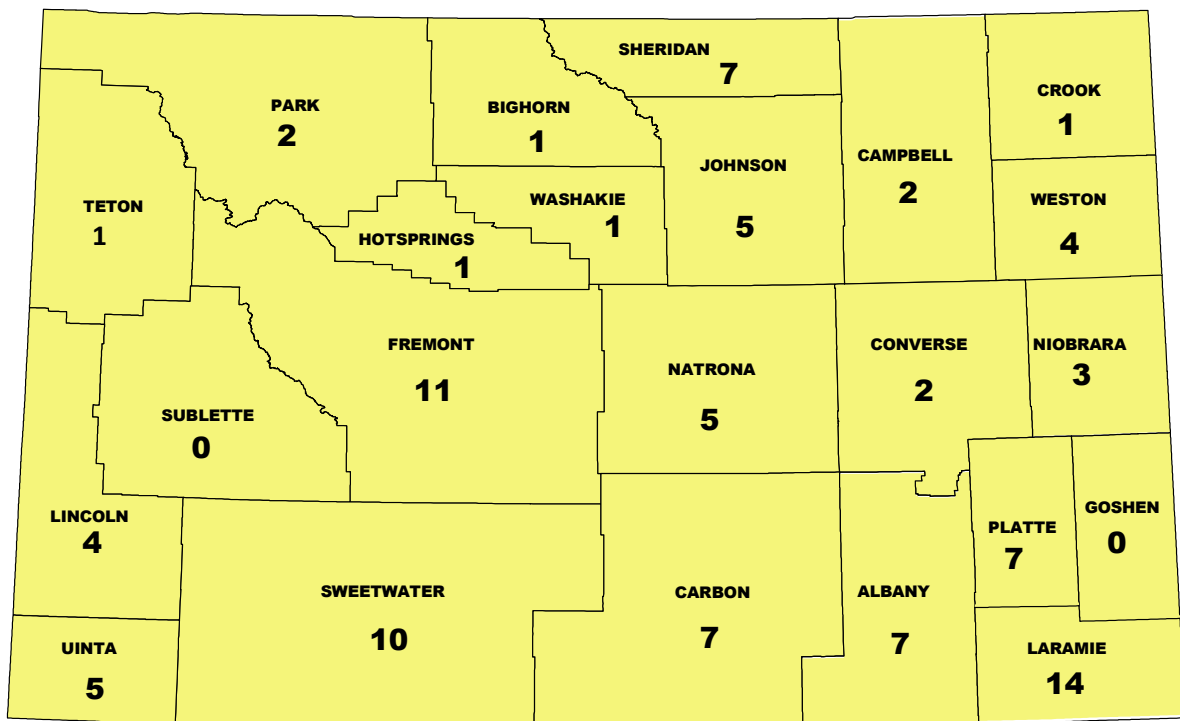
# 2012 - 2016 HOLIDAY CRASH STATISTICS

Time Period		2016	2015	2014	2013	2012
<b>New Years</b>	Hours	84	108	36	108	84
	Crashes	86	237	100	148	170
	Fatal	1	4	0	0	2
	Injury	14	28	14	17	34
	PDO	71	205	86	131	134
	Fatalities	1	5	0	0	2
<b>Memorial Day</b>	Injuries	18	49	18	17	49
	Hours	84	84	84	84	84
	Crashes	84	109	103	107	91
	Fatal	1	0	0	2	2
	Injury	16	25	31	26	21
	PDO	67	84	72	79	68
<b>Independence Day</b>	Fatalities	1	0	0	2	3
	Injuries	19	39	40	38	31
	Hours	84	84	84	108	36
	Crashes	125	144	111	147	48
	Fatal	1	3	3	3	0
	Injury	25	27	32	40	14
<b>Labor Day</b>	PDO	99	114	76	104	34
	Fatalities	1	3	3	3	0
	Injuries	35	39	42	57	16
	Hours	84	84	84	84	84
	Crashes	105	123	115	116	96
	Fatal	0	3	1	0	2
<b>Thanksgiving</b>	Injury	15	29	24	35	17
	PDO	90	91	90	81	77
	Fatalities	0	3	1	0	2
	Injuries	24	45	33	48	22
	Hours	108	108	108	108	108
	Crashes	126	224	164	122	155
<b>Christmas</b>	Fatal	3	0	0	0	2
	Injury	17	32	27	19	28
	PDO	106	192	137	103	125
	Fatalities	5	0	0	0	2
	Injuries	31	40	40	22	38
	Hours	84	84	108	36	108
<b>Christmas</b>	Crashes	119	87	263	21	164
	Fatal	0	0	0	0	1
	Injury	18	9	36	5	21
	PDO	101	78	227	16	142
	Fatalities	0	0	0	0	1
	Injuries	27	11	48	8	26



# 2016 WYOMING FATAL CRASH MAP

## by County

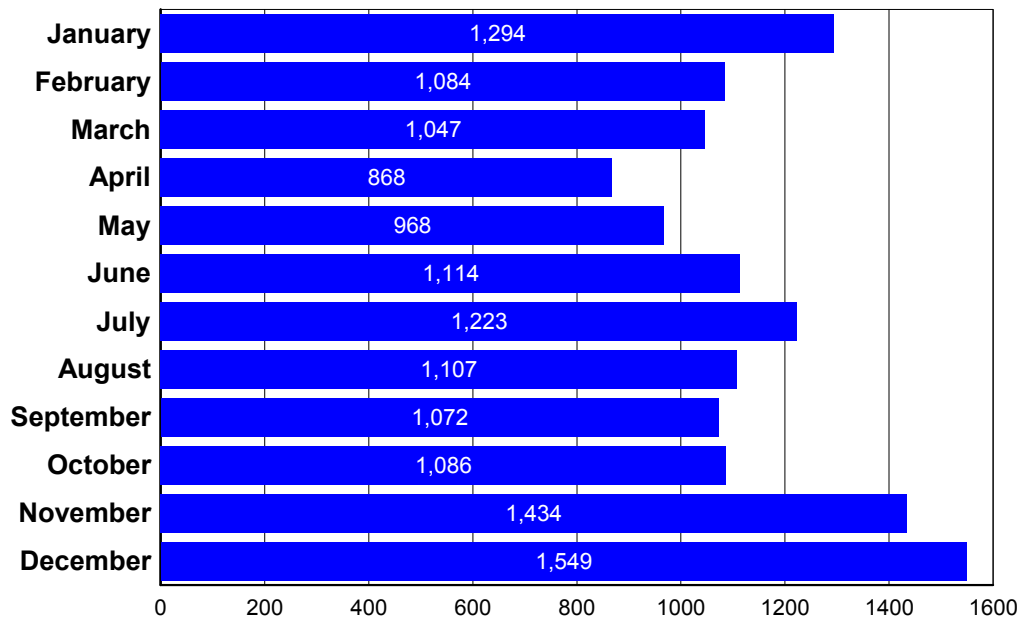


# GENERAL CRASH INFORMATION

## 2016 Crash Counts by County

	Fatal Crashes	Fatalities	Injury Crashes	Injuries	PDO Crashes	Total Crashes
ALBANY	7	8	172	239	768	947
BIG HORN	1	1	38	48	223	262
CAMPBELL	2	2	218	262	777	997
CARBON	7	7	122	169	577	706
CONVERSE	2	2	59	87	349	410
CROOK	1	1	39	49	262	302
FREMONT	11	13	136	176	686	833
GOSHEN	0	0	41	60	190	231
HOT SPRINGS	1	1	28	39	84	113
JOHNSON	5	5	24	35	245	274
LARAMIE	14	15	465	603	1506	1985
LINCOLN	4	5	67	103	283	354
NATRONA	5	6	317	430	1630	1952
NIOBRARA	3	3	10	17	74	87
PARK	2	5	95	143	465	562
PLATTE	7	7	77	102	318	402
SHERIDAN	7	7	108	137	606	721
SUBLETTE	0	0	28	43	198	226
SWEETWATER	10	10	216	289	1041	1267
TETON	1	2	71	84	454	526
UINTA	5	7	71	119	361	437
WASHAKIE	1	1	26	36	112	139
WESTON	4	4	29	44	80	113
<b>Total</b>	<b>100</b>	<b>112</b>	<b>2457</b>	<b>3314</b>	<b>11289</b>	<b>13846</b>

## 2016 Crash Count by Month



## 2012 TO 2016 CRASHES BY HARMFUL EVENT CATEGORY

<i>Harmful Event Category</i>	2012	2013	2014	2015	2016
<b>Non-Collision Crashes</b>	1866	1898	1943	1727	1765
<b>Moving Vehicle Crashes</b>	7175	7797	7931	7663	6801
<b>Animal Crashes</b>	2701	2278	2341	2699	3046
<b>Fixed Object Crashes</b>	2293	2613	2595	2216	2234
<b>Others</b>	0	2	0	0	0
<b>Total</b>	<b>14035</b>	<b>14588</b>	<b>14810</b>	<b>14305</b>	<b>13846</b>



# PEOPLE INVOLVED INFORMATION

## 2016 TOTAL DRIVERS INVOLVED IN FATAL CRASHES

### DRIVER'S AGE

DRIVER'S GENDER	14 - 16	17 - 20	21 - 24	25 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70 +	UK	Total
Female	3	6	1	6	4	9	3	3	2	0	37
Male	0	6	8	14	19	17	25	15	10	0	114
X	0	0	0	0	0	0	0	0	0	1	1
Total	3	12	9	20	23	26	28	18	12	1	152

X= Unknown. Unknown gender in this crash is due to investigating officers being unable to determine who was driving the vehicle.

## 2016 TOTAL DRIVERS INVOLVED IN INJURY CRASHES

### DRIVER'S AGE

DRIVER'S GENDER	1 - 13	14 - 16	17 - 20	21 - 24	25 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70 +	UK	Total
Female	1	62	227	152	160	268	193	209	124	79	0	1475
Male	4	79	258	226	217	427	313	334	217	120	0	2195
Unknown	0	0	0	0	0	0	0	0	0	0	41	41
Total	5	141	485	378	377	695	506	543	341	199	41	3711

Unknown gender & age are a result of hit and run crashes

## 2016 TOTAL DRIVERS INVOLVED IN PDO CRASHES

### DRIVER'S AGE

DRIVER'S GENDER	1 - 13	14 - 16	17 - 20	21 - 24	25 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70 +	UK	Total
Female	1	254	724	540	651	1047	759	783	594	324	2	5679
Male	3	260	905	805	1015	1707	1473	1384	1109	613	7	9281
Unknown	0	0	0	0	0	0	0	0	0	0	602	602
Total	4	514	1629	1345	1666	2754	2232	2167	1703	937	611	15562

Unknown gender & age are a result of hit and run crashes

## OCCUPANTS WITH SEAT BELT / USAGE BY COUNTY from STATE CRASH DATA

	2014				2015				2016			
	Proper Use	Misuse	Not Used	UNK	Proper Use	Misuse	Not Used	UNK	Proper Use	Misuse	Not Used	UNK
	<b>ALBANY</b>											
Driver's	1266	79%	0	0%	62	4%	180	11%	1200	86%	3	0%
Passenger's	477	84%	27	5%	64	11%	0	0%	384	73%	8	2%
	<b>BIG HORN</b>											
Driver's	143	46%	2	1%	20	6%	64	21%	226	79%	1	0%
Passenger's	79	88%	6	7%	5	6%	0	0%	118	87%	3	2%
	<b>CAMPBELL</b>											
Driver's	1507	79%	4	0%	99	5%	174	9%	1262	86%	1	0%
Passenger's	641	88%	29	4%	61	8%	0	0%	496	87%	27	5%
	<b>CARBON</b>											
Driver's	608	70%	1	0%	37	4%	115	13%	735	83%	3	0%
Passenger's	269	77%	4	1%	76	22%	0	0%	255	64%	10	3%
	<b>CONVERSE</b>											
Driver's	453	68%	1	0%	36	5%	103	15%	412	84%	0	0%
Passenger's	182	88%	5	2%	20	10%	0	0%	180	89%	3	1%
	<b>CROOK</b>											
Driver's	150	51%	0	0%	33	11%	24	8%	287	88%	0	0%
Passenger's	121	88%	1	1%	15	11%	0	0%	159	93%	1	1%
	<b>FREMONT</b>											
Driver's	737	57%	3	0%	86	7%	267	20%	867	82%	4	0%
Passenger's	445	88%	20	4%	43	8%	0	0%	400	82%	9	2%
	<b>GOSHEN</b>											
Driver's	170	60%	0	0%	14	5%	39	14%	248	82%	0	0%
Passenger's	111	90%	4	3%	9	7%	0	0%	102	86%	1	1%
	<b>HOT SPRINGS</b>											
Driver's	47	42%	1	1%	7	6%	27	24%	109	81%	2	1%
Passenger's	37	90%	0	0%	4	10%	0	0%	46	92%	0	0%
	<b>JOHNSON</b>											
Driver's	171	41%	2	0%	18	4%	64	15%	248	80%	0	0%
Passenger's	144	81%	3	2%	30	17%	0	0%	130	89%	1	1%
	<b>LARAMIE</b>											
Driver's	2970	87%	5	0%	104	3%	253	7%	2883	88%	4	0%
Passenger's	1146	89%	60	5%	77	6%	0	0%	1056	81%	38	3%
	<b>LINCOLN</b>											
Driver's	192	57%	3	1%	19	6%	37	11%	358	86%	1	0%
Passenger's	156	90%	2	1%	16	9%	0	0%	204	80%	8	3%
	<b>NATRONA</b>											
Driver's	3090	81%	4	0%	147	4%	445	12%	2628	85%	4	0%
Passenger's	1370	90%	68	4%	82	5%	0	0%	964	85%	50	4%
	<b>NIOBRARA</b>											
Driver's	37	46%	0	0%	9	11%	21	26%	65	63%	1	1%
Passenger's	26	74%	1	3%	8	23%	0	0%	32	65%	0	0%
	<b>PARK</b>											
Driver's	440	56%	1	0%	39	5%	132	17%	622	83%	1	0%
Passenger's	259	89%	15	5%	16	6%	0	0%	232	86%	4	1%

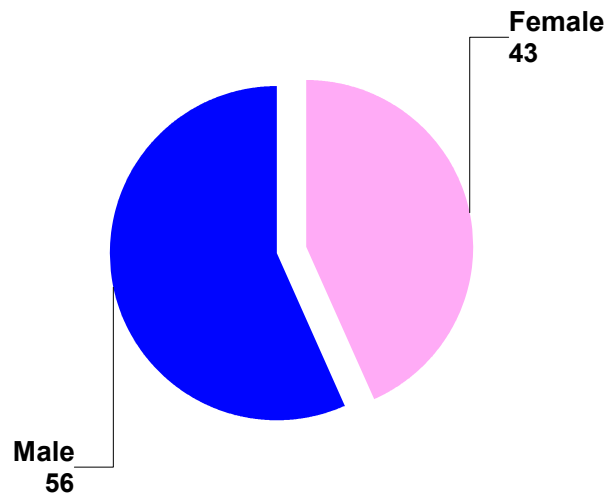
	2014				2015				2016			
	Proper Use	Misuse	Not Used	UNK	Proper Use	Misuse	Not Used	UNK	Proper Use	Misuse	Not Used	UNK
	<b>PLATTE</b>											
Driver's	322	65%	0	0%	39	8%	42	8%	267	59%	0	0%
Passenger's	242	84%	7	2%	40	14%	0	0%	116	83%	6	4%
	<b>SHERIDAN</b>											
Driver's	585	59%	0	0%	38	4%	200	20%	481	52%	0	0%
Passenger's	315	93%	9	3%	15	4%	0	0%	200	59%	8	2%
	<b>SUBLETTE</b>											
Driver's	123	43%	1	0%	22	8%	32	11%	104	41%	1	0%
Passenger's	110	91%	3	2%	8	7%	0	0%	37	70%	2	4%
	<b>SWEETWATER</b>											
Driver's	1465	79%	2	0%	99	5%	206	11%	1322	78%	2	0%
Passenger's	546	82%	27	4%	90	14%	0	0%	485	72%	30	4%
	<b>TETON</b>											
Driver's	541	65%	3	0%	20	2%	166	20%	493	65%	4	1%
Passenger's	262	88%	19	6%	16	5%	0	0%	202	59%	18	5%
	<b>UINTA</b>											
Driver's	301	62%	0	0%	25	5%	55	11%	332	60%	1	0%
Passenger's	210	86%	6	2%	29	12%	0	0%	184	73%	11	4%
	<b>WASHAKIE</b>											
Driver's	60	37%	0	0%	15	9%	61	38%	79	49%	1	1%
Passenger's	38	88%	2	5%	3	7%	0	0%	45	74%	1	2%
	<b>WESTON</b>											
Driver's	64	43%	1	1%	21	14%	32	21%	57	38%	0	0%
Passenger's	22	71%	0	0%	9	29%	0	0%	13	59%	0	0%
	<b>TOTAL</b>											
Driver's	17716	83%	33	0%	817	4%	2,707	13%	16863	83%	33	0%
Passenger's	6867	74%	318	3%	707	8%	1,424	15%	6890	78%	284	3%
	<b>COMBINED TOTAL</b>											
Driver's & Passenger's	24583	80%	351	1%	1524	5%	4131	14%	23753	82%	317	1%

\* The formulas used to determine seat belt use were revised in 2016 and are not applied to years prior.

## 2016 PEDESTRIANS IN ALL CRASHES AGE / INJURY STATUS

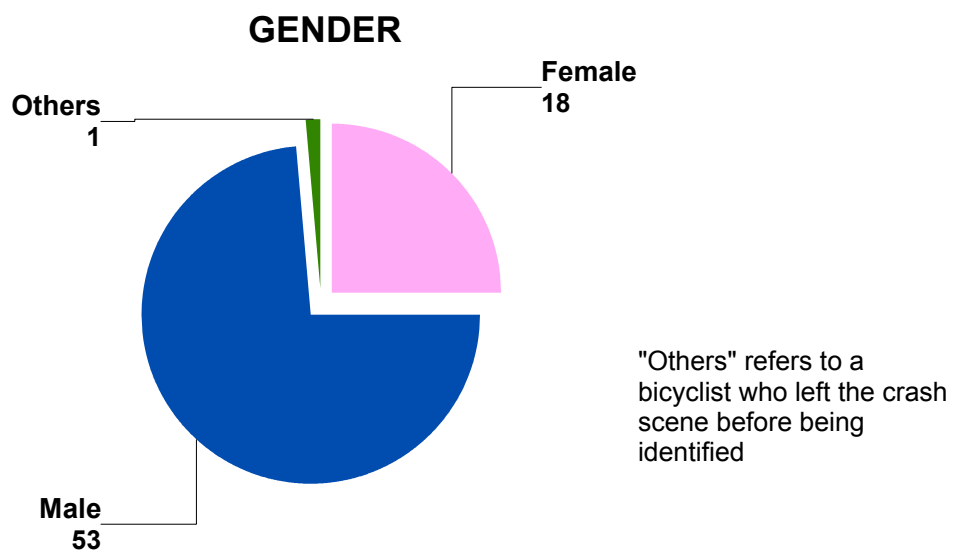
	Fatal	Incap	Non-Incap	Possible	Unknown	Total
<b>0 - 13</b>	0	2	6	3	0	11
<b>14 - 16</b>	0	0	4	2	0	6
<b>17 - 20</b>	0	2	4	3	0	9
<b>21 - 24</b>	0	0	5	3	0	8
<b>25 - 29</b>	0	5	1	1	0	7
<b>30 - 39</b>	1	5	7	3	0	16
<b>40 - 49</b>	0	2	6	3	1	12
<b>50 - 59</b>	1	3	5	3	0	12
<b>60 - 69</b>	2	3	5	2	0	12
<b>70 +</b>	1	2	0	3	0	6
<b>Total</b>	5	24	43	26	1	99

## GENDER



## 2016 BICYCLIST IN ALL CRASHES AGE / INJURY STATUS

	Fatal	Incap	Non-Incap	Possible	Total
<b>0 - 13</b>	0	1	15	5	21
<b>14 - 16</b>	0	0	6	4	10
<b>17 - 20</b>	0	1	4	4	9
<b>21 - 24</b>	0	1	4	1	6
<b>25 - 29</b>	0	1	4	2	7
<b>30 - 39</b>	0	0	2	2	4
<b>40 - 49</b>	0	1	3	0	4
<b>50 - 59</b>	0	1	1	2	4
<b>60 - 69</b>	1	0	2	0	3
<b>70 +</b>	0	0	2	0	2
<b>Unknown</b>	0	0	0	2	2
<b>Total</b>	1	6	43	22	72





# ENVIRONMENTAL

## 2016 CRASHES WITH ROAD SURFACE TYPE

Road Surface	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes
Asphalt	88	1869	6483	8440
Brick/Stone	0	0	1	1
Concrete	10	492	1724	2226
Dirt	1	44	123	168
Gravel/Rock	1	89	194	284
Unknown	0	2	2958	2960
<b>Total</b>	<b>100</b>	<b>2457</b>	<b>11289</b>	<b>13846</b>

Unknown road surface crashes include animal crash form (see appendix) where element is not included

## 2016 CRASHES ROAD CONDITIONS

Road Conditions	Fatal Crashes		Injury Crashes		PDO Crashes		Total Crashes	
	1st Condition	2nd Condition	1st Condition	2nd Condition	1st Condition	2nd Condition	1st Condition	2nd Condition
Dry	86	0	1844	8	7645	18	9575	26
Wet	4	2	159	11	746	91	909	104
Ice/Frost	7	1	288	63	1801	381	2096	445
Snow	2	3	107	129	790	853	899	985
Mud/Dirt/Gravel	0	0	35	26	51	22	86	48
Slush	1	0	15	28	116	136	132	164
Oil/Fuel	0	0	0	1	1	0	1	1
Sand on Dry Pavement	0	0	1	4	4	1	5	5
Sand on Icy Road	0	0	0	1	11	14	11	15
Water Standing/Running	0	0	2	4	5	11	7	15
Other	0	0	1	2	7	0	8	2
Unknown	0	0	5	3	112	5	117	8
<b>Total</b>	<b>100</b>	<b>6</b>	<b>2457</b>	<b>280</b>	<b>11289</b>	<b>1532</b>	<b>13846</b>	<b>1818</b>

NOTE: Every crash can have up to two road conditions selected

## 2016 CRASHES WEATHER CONDITIONS

Weather Conditions	Fatal Crashes		Injury Crashes		PDO Crashes		Total Crashes	
	1st Condition	2nd Condition	1st Condition	2nd Condition	1st Condition	2nd Condition	1st Condition	2nd Condition
Clear	87	0	1918	10	8599	35	10604	45
Raining	4	0	80	4	332	19	416	23
Snowing	6	2	200	13	1193	37	1399	52
Fog	0	0	7	1	30	11	37	12
Blowing Dust/Sand/Dirt	0	0	1	0	8	6	9	6
Severe Wind Only	0	0	50	3	174	19	224	22
Blizzard	1	0	7	7	43	34	51	41
Sleet/Hail/Freezing Rain	0	0	13	5	27	46	40	51
Blowing Snow	0	3	32	38	251	185	283	226
Cloudy, Overcast	2	0	133	15	465	70	600	85
Smoke	0	0	2	0	7	1	9	1
Other	0	0	0	1	7	0	7	1
Unknown	0	0	14	1	153	1	167	2
<b>Total</b>	<b>100</b>	<b>5</b>	<b>2457</b>	<b>98</b>	<b>11289</b>	<b>464</b>	<b>13846</b>	<b>567</b>

NOTE: Every crash can have up to two weather conditions selected

## 2016 CRASHES LIGHTING CONDITIONS

Lighting Conditions	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes
Darkness Lighted	3	218	808	1029
Darkness Unlighted	23	455	3077	3555
Dawn	5	51	381	437
Daylight	66	1660	6526	8252
Dusk	3	66	330	399
Other	0	1	4	5
Unknown	0	6	163	169
<b>Total</b>	<b>100</b>	<b>2457</b>	<b>11289</b>	<b>13846</b>

# VEHICLES

## 2016 VEHICLE TYPES

Number of Vehicles involved in:

Vehicle Type	Fatal Crashes	Injury Crashes	PDO Crashes	Total Vehicles
Passenger	19	1071	3944	5034
Passenger Van	6	126	445	577
PU	38	877	3505	4420
School Bus	0	4	32	36
Other Bus	1	1	11	13
Transit Bus	0	1	12	13
Charter Bus	0	1	6	7
MC > 150cc	19	146	30	195
Off Road MC	0	5	0	5
Other Vehicle	0	5	21	26
SUV	30	800	2640	3470
Cargo Van	1	11	87	99
Motor Home	1	8	41	50
Light Truck (< 10K)	0	5	23	28
Medium Truck (>10K - <26K)	3	27	107	137
Heavy Truck (>26K)	17	238	1009	1264
Farm Equipment	0	0	5	5
Construction Vehicle	0	2	24	26
MC <150 cc	2	21	4	27
Moped	0	2	0	2
Snowmobile	0	2	1	3
ATV	3	20	6	29
MPV	0	18	3	21
Unknown	0	8	3241	3249
<b>Total</b>	<b>100</b>	<b>2457</b>	<b>11289</b>	<b>20857</b>

## **2016 VEHICLE WITH CONTRIBUTING CIRCUMSTANCES**

Number of Vehicles involved in:

<b>Contributing Circumstances</b>	<b>Fatal Crashes</b>	<b>Injury Crashes</b>	<b>PDO Crashes</b>	<b>Total Vehicles</b>
Brakes	0	37	72	109
Cruise Control	1	10	7	18
Defroster	0	1	2	3
Exhaust System	0	0	3	3
Lights (Head, Signal, or Tail)	0	2	5	7
Mirrors	0	0	2	2
None	0	0	0	0
Other	1	63	174	238
Oversized Load	0	1	4	5
Power Train	1	4	14	19
Rain/Snow/Ice on Windshield	0	5	31	36
Stalled Vehicle	0	5	7	12
Steering	0	13	35	48
Suspension	0	3	5	8
Tinted Windows	0	1	2	3
Tire	3	32	120	155
Trailer Brakes	0	6	20	26
Truck Coupling/Trailer Hitch/	0	3	31	34
Unknown	0	0	0	0
Vehicle Cargo Blocking View	0	0	4	4
Wheels	0	6	27	33
Windows/Windshield	1	2	5	8
	0	0	0	0
<b>Total</b>	<b>7</b>	<b>194</b>	<b>570</b>	<b>771</b>

# WYOMING COMMUNITIES

2016

## CITY/TOWN CRASHES WITH INJURIES AND FATALITIES

City/Town	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes	# Persons Injured	# Persons Killed
AFTON	0	3	1	4	6	0
ALPINE	0	1	3	4	1	0
BASIN	0	0	5	5	0	0
BEAR RIVER	0	0	2	2	0	0
BIG PINEY	0	1	3	4	1	0
BUFFALO	0	2	30	32	6	0
BURLINGTON	0	1	0	1	1	0
BURNS	0	1	2	3	1	0
BYRON	0	0	2	2	0	0
CASPER	4	267	1334	1605	362	5
CHEYENNE	7	388	1227	1622	502	7
CHUGWATER	0	1	7	8	1	0
CODY	0	26	154	180	34	0
COKEVILLE	0	0	4	4	0	0
COWLEY	0	0	1	1	0	0
DAYTON	0	0	3	3	0	0
DIAMONDVILLE	0	0	2	2	0	0
DIXON	0	0	1	1	0	0
DOUGLAS	0	16	98	114	23	0
DUBOIS	0	1	9	10	1	0
EAST THERMOPOLIS	0	1	0	1	1	0
ENCAMPMENT	0	1	1	2	4	0
EVANSTON	0	16	77	93	19	0
EVANSVILLE	0	8	38	46	11	0
FT LARAMIE	0	0	3	3	0	0
GILLETTE	0	171	531	702	204	0
GLENDO	0	0	1	1	0	0
GLENROCK	0	6	18	24	7	0
GRANGER	0	0	1	1	0	0
GREEN RIVER	1	27	136	164	30	1
GREYBULL	0	2	13	15	2	0
GUERNSEY	0	1	6	7	1	0
HANNA	0	1	3	4	1	0
HUDSON	0	2	1	3	3	0
HULETT	0	0	3	3	0	0
JACKSON	0	31	216	247	33	0
KAYCEE	0	0	3	3	0	0
KEMMERER	0	1	19	20	1	0
LANDER	0	17	82	99	19	0
LARAMIE	1	101	413	515	135	1
LINGLE	0	0	4	4	0	0
LOVELL	0	2	15	17	3	0
LUSK	0	2	14	16	3	0
LYMAN	0	2	7	9	2	0
MARBLETON	0	0	2	2	0	0
MEDICINE BOW	0	0	2	2	0	0
MEETEETSE	0	0	2	2	0	0
MILLS	0	3	41	44	4	0
MOORCROFT	0	1	12	13	1	0
MOUNTAIN VIEW	0	0	1	1	0	0
NEWCASTLE	0	3	13	16	3	0
PINE BLUFFS	0	3	22	25	3	0
PINEDALE	0	4	16	20	5	0
POWELL	1	9	44	54	16	2

City/Town	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes	# Persons Injured	# Persons Killed
RANCHESTER	0	1	2	3	1	0
RAWLINS	0	14	124	138	20	0
RIVERTON	2	42	173	217	44	2
ROCK RIVER	0	0	1	1	0	0
ROCK SPRINGS	2	86	392	480	103	2
SARATOGA	0	1	8	9	2	0
SHERIDAN	0	62	365	427	79	0
SHOSHONI	0	0	3	3	0	0
SINCLAIR	0	5	15	20	5	0
STAR VALLEY RANCH	0	0	6	6	0	0
SUNDANCE	0	5	31	36	5	0
THAYNE	0	2	2	4	2	0
THERMOPOLIS	0	5	18	23	5	0
TORRINGTON	0	17	59	76	27	0
UPTON	0	1	2	3	1	0
WAMSUTTER	0	1	10	11	2	0
WHEATLAND	0	10	43	53	14	0
WORLAND	1	10	34	45	15	1
WRIGHT	0	2	6	8	2	0
<b>Total</b>	<b>19</b>	<b>1387</b>	<b>5942</b>	<b>7348</b>	<b>1777</b>	<b>21</b>



## 2016 CITY/TOWN CRASHES

### INTERSECTION TYPE AND MANNER OF COLLISION

#### Intersection Type

Manner of Collision	Five (5) Point or more	Four (4)-Way Intersection	Intersection as part of an Interchange	L Intersection	Not an Intersection	Roundabout	T Intersection	Unknown	Y Intersection	Total
Angle (Front to Side), Opposing Direction	2	236	9	1	158	0	82	0	1	489
Angle Direction not Specified	0	12	0	1	10	0	4	0	0	27
Angle Right (Front to Side, includes Broadside)	3	865	29	2	244	12	152	0	4	1311
Angle Same Direction (Front to Side)	1	157	19	0	308	35	57	0	3	580
Head On (Front to Front)	0	70	3	3	93	0	29	0	0	198
Not a Collision w/2 Vehicles in Transport	2	190	39	7	1,034	4	140	1	6	1423
Other	0	1	0	0	2	0	0	0	0	3
Rear End (Front to Rear)	5	656	72	1	716	3	246	0	5	1704
Rear to Front (Normally Backing)	1	43	5	0	121	0	17	0	1	188
Rear to Rear (Normally Backing)	0	2	0	0	38	0	1	0	0	41
Rear to Side (Normally Backing)	0	16	0	0	275	0	11	0	0	302
Sideswipe Opposite Direction (Meeting)	0	13	1	2	56	0	18	0	0	90
Sideswipe Same Direction (Passing)	2	68	14	1	383	4	27	1	0	500
Unknown	0	2	0	0	112	0	6	1	1	122
<b>Total</b>	<b>16</b>	<b>2331</b>	<b>191</b>	<b>18</b>	<b>3550</b>	<b>58</b>	<b>790</b>	<b>3</b>	<b>21</b>	<b>6978</b>

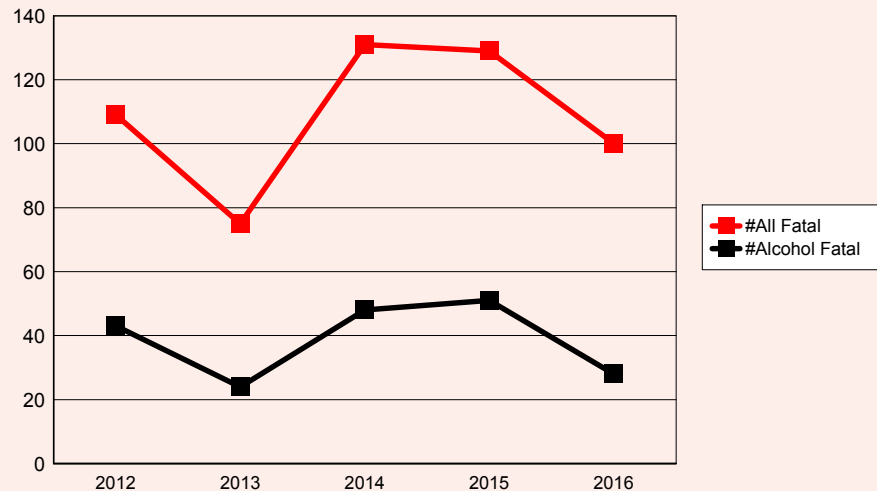
# ALCOHOL INVOLVED CRASHES

## 2016 ALCOHOL INVOLVED TRAFFIC CRASHES

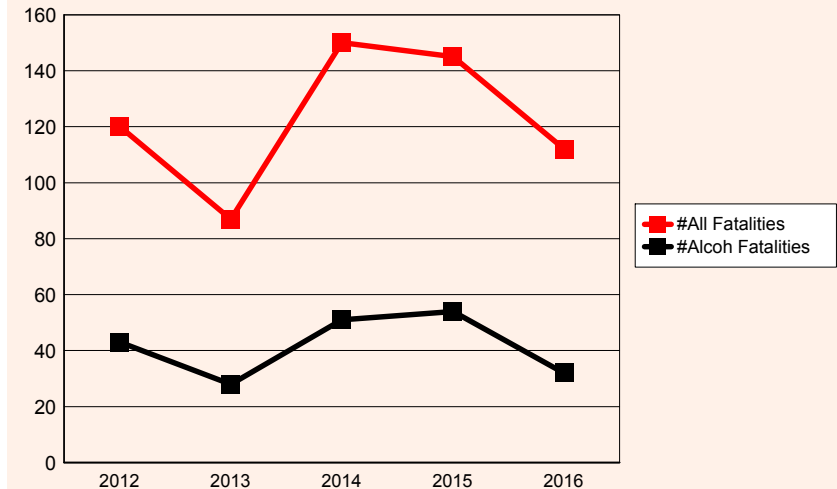
Year	Fatal Crashes						Injury Crashes						PDO Crashes		
	All Crashes	Alcohol Crashes	% Alcoh Crashes	Total Fatalities	Alcohol Fatalities	% Alcoh Fatalities	All Crashes	Alcohol Crashes	% Alcoh Crashes	* Total Injuries	* Alcohol Injuries	% Alcoh Injuries	All Crashes	Alcohol Crashes	% Alcoh Crashes
2012	109	43	39%	120	43	36%	2807	403	14%	3896	544	14%	11119	544	5%
2013	75	24	32%	87	28	32%	2790	355	13%	3759	483	13%	11723	502	4%
2014	131	48	37%	150	51	34%	2846	336	12%	3990	478	12%	11833	508	4%
2015	129	51	40%	145	54	37%	2792	319	11%	3819	439	11%	11385	422	4%
2016	100	28	28%	112	32	29%	2457	302	12%	3314	385	12%	11289	383	3%

\* Injuries include injuries from fatal crashes

### Alcohol Fatal Crashes



### Alcohol Fatalities





## **ALCOHOL INVOLVED CRASHES WITH AGE OF DRINKING DRIVERS**

**2012**

Drivers Involved in

Age Groups	Fatal Crashes	Injury Crashes	PDO Crashes	Total Drivers
14 - 16	0	4	2	6
17 - 20	2	30	66	98
21 - 24	6	81	84	171
25 - 29	5	56	77	138
30 - 39	11	85	100	196
40 - 49	6	50	65	121
50 - 59	3	51	58	112
60 - 69	2	7	17	26
70 - 79	1	0	6	7
80 +	0	0	1	1
Unknown	0	0	4	4
<b>Total</b>	<b>36</b>	<b>364</b>	<b>480</b>	<b>880</b>

**2013**

Drivers Involved in

Age Groups	Fatal Crashes	Injury Crashes	PDO Crashes	Total Drivers
14 - 16	0	2	0	2
17 - 20	3	27	35	65
21 - 24	1	59	91	151
25 - 29	5	50	77	132
30 - 39	4	88	88	180
40 - 49	3	44	81	128
50 - 59	3	42	53	98
60 - 69	0	7	12	19
70 - 79	0	3	2	5
80 +	0	1	1	2
Unknown	0	0	2	2
<b>Total</b>	<b>19</b>	<b>323</b>	<b>442</b>	<b>784</b>

**2014**

Drivers Involved in

Age Groups	Fatal Crashes	Injury Crashes	PDO Crashes	Total Drivers
14 - 16	1	4	1	6
17 - 20	2	30	31	63
21 - 24	6	47	84	137
25 - 29	6	48	71	125
30 - 39	11	69	114	194
40 - 49	7	52	63	122
50 - 59	6	38	59	103
60 - 69	2	16	22	40
70 - 79	1	4	3	8
80 +	0	1	1	2
Unknown	0	0	3	3
<b>Total</b>	<b>42</b>	<b>309</b>	<b>452</b>	<b>803</b>

## **ALCOHOL INVOLVED CRASHES WITH AGE OF DRINKING DRIVERS**

**2015**

Drivers Involved in

Age Groups	Fatal Crashes	Injury Crashes	PDO Crashes	Total Drivers
14 - 16	0	5	8	13
17 - 20	1	17	38	56
21 - 24	8	52	72	132
25 - 29	12	53	74	139
30 - 39	12	70	112	194
40 - 49	6	65	45	116
50 - 59	8	42	54	104
60 - 69	4	19	20	43
70 - 79	0	4	5	9
80 +	0	0	2	2
Unknown	0	1	7	8
<b>Total</b>	<b>51</b>	<b>328</b>	<b>437</b>	<b>816</b>

**2016**

Drivers Involved in

Age Groups	Fatal Crashes	Injury Crashes	PDO Crashes	Total Drivers
14 - 16	1	8	11	20
17 - 20	1	11	14	26
21 - 24	3	37	71	111
25 - 29	5	48	67	120
30 - 39	3	85	90	178
40 - 49	4	53	64	121
50 - 59	5	36	51	92
60 - 69	2	16	13	31
70 - 79	0	2	1	3
80 +	0	1	1	2
Unknown	1	1	13	15
<b>Total</b>	<b>25</b>	<b>298</b>	<b>396</b>	<b>719</b>

# ALCOHOL INVOLVED FATAL CRASHES

## 2016 ALCOHOL INVOLVED FATAL CRASHES BY COUNTY

County	Number Crashes	Number Injured	Number Killed
Albany	1	0	1
Big Horn	1	0	1
Carbon	2	1	2
Fremont	7	5	9
Johnson	2	0	2
Laramie	2	1	2
Lincoln	1	0	1
Natrona	2	0	2
Platte	2	0	2
Sheridan	4	3	4
Sweetwater	2	0	2
Uinta	1	2	3
Weston	1	0	1
<b>Total</b>	<b>28</b>	<b>12</b>	<b>32</b>

## 2016 ALCOHOL INVOLVED FATAL CRASHES BY CITY

City	Number Crashes	Number Injured	Number Killed
CASPER	1	0	1
CHEYENNE	1	1	1
RIVERTON	1	0	1
<b>Total</b>	<b>3</b>	<b>1</b>	<b>3</b>

## 2016 ALCOHOL INVOLVED FATAL CRASHES BY VEHICLE TYPE

Vehicle Type	Number of Vehicles
ATV	2
Heavy Truck > 26,000	2
MC > 150 cc	6
PU	13
Passenger	5
Passenger Van	2
SUV	5
<b>Total</b>	<b>35</b>

## 2016 ALCOHOL INVOLVED FATAL CRASHES ESTIMATED SPEED

Estimated Speed	Number of Vehicles
0 - 13	2
17 - 20	1
25 - 30	1
31 - 50	3
51 - 64	3
65 +	19
Others	6
<b>Total</b>	<b>35</b>

## 2016 ALCOHOL INVOLVED FATAL CRASHES WITH AGE AND GENDER OF DRIVERS

Age Groups	Male	Female	Total Drivers
17 - 20	2	0	2
21 - 24	3	0	3
25 - 29	4	1	5
30 - 39	1	2	3
40 - 49	3	1	4
50 - 59	5	0	5
60 - 69	2	0	2
UK	0	0	1
<b>Total</b>	<b>20</b>	<b>4</b>	<b>25</b>

# ALCOHOL INVOLVED INJURY CRASHES

## 2016 ALCOHOL INVOLVED INJURY CRASHES BY CITY

City	Number of Crashes	Number Injured
ALPINE	1	1
BIG PINEY	1	1
BUFFALO	1	3
BURLINGTON	1	1
CASPER	36	50
CHEYENNE	43	56
CODY	6	9
DOUGLAS	2	2
DUBOIS	1	1
EAST THERMOPOLIS	1	1
EVANSTON	1	1
GILLETTE	24	27
GLENROCK	1	1
GREEN RIVER	3	3
HANNA	1	1
HUDSON	1	2
JACKSON	1	1
KEMMERER	1	1
LANDER	1	1
LARAMIE	8	11
LYMAN	1	1
PINE BLUFFS	1	1
RIVERTON	13	14
ROCK SPRINGS	13	14
SHERIDAN	6	7
TORRINGTON	2	2
WORLAND	3	3
<b>Total</b>	<b>174</b>	<b>216</b>

## 2016 ALCOHOL INVOLVED INJURY CRASHES BY COUNTY

County	Injury Crashes	Number Injured
Albany	11	14
Big Horn	5	7
Campbell	30	33
Carbon	8	10
Converse	8	9
Crook	1	2
Fremont	29	33
Goshen	6	7
Hot Springs	6	9
Johnson	3	5
Laramie	47	60
Lincoln	9	9
Natrona	44	60
Park	15	18
Platte	5	8
Sheridan	16	19
Sublette	3	3
Sweetwater	31	37
Teton	8	11
Uinta	5	5
Washakie	7	9
Weston	5	5
<b>Total</b>	<b>302</b>	<b>373</b>

## 2016 ALCOHOL INVOLVED INJURY CRASHES WITH VEHICLE TYPE

Vehicle Type	Number of Vehicles	% Vehicles
ATV	4	1.0%
Cargo Van	1	0.2%
Heavy Truck > 26,000	9	2.1%
MC < 150 cc	2	0.5%
MC > 150 cc	24	5.7%
MPV	5	1.2%
Motor Home	1	0.2%
Off Road MC	1	0.2%
PU	145	34.4%
Passenger	131	31.1%
Passenger Van	8	1.9%
SUV	88	20.9%
Unknown	2	0.5%
<b>Total</b>	<b>421</b>	<b>100%</b>

## 2016 ALCOHOL INVOLVED INJURY CRASHES WITH ESTIMATED SPEED

Estimated Speed	Number of Vehicles
0 - 20	103
20 - 30	69
30 - 50	90
50 - 65	62
65 +	68
Others	29
<b>Total</b>	<b>421</b>

## 2016 ALCOHOL INVOLVED INJURY CRASHES WITH AGE AND GENDER OF DRIVERS

Age Groups	Male	Female	Unknown	Total Drivers
17 - 20	13	6	0	19
21 - 24	30	7	0	37
25 - 29	37	11	0	48
30 - 39	64	21	0	85
40 - 49	39	14	0	53
50 - 59	31	5	0	36
60 - 69	15	1	0	16
70 - 79	2	0	0	2
80 +	1	0	0	1
Unknown	0	0	1	1
<b>Total</b>	<b>232</b>	<b>65</b>	<b>1</b>	<b>298</b>

# ALCOHOL INVOLVED PDO CRASHES

## 2016 BY COUNTY

County	PDO Crashes
Albany	18
Big Horn	6
Campbell	28
Carbon	15
Converse	9
Crook	5
Fremont	23
Goshen	8
Hot Springs	1
Johnson	3
Laramie	59
Lincoln	9
Natrona	72
Niobrara	1
Park	8
Platte	6
Sheridan	32
Sublette	3
Sweetwater	43
Teton	19
Uinta	7
Washakie	7
Weston	1
<b>Total</b>	<b>383</b>

## 2016 BY CITY

City	PDO Crashes
ALPINE	1
BYRON	1
CASPER	58
CHEYENNE	52
CODY	3
DAYTON	1
DIAMONDVILLE	1
DOUGLAS	2
ENCAMPMENT	1
EVANSTON	2
EVANSVILLE	3
GILLETTE	22
GLENROCK	1
GREEN RIVER	6
JACKSON	9
KEMMERER	1
LANDER	3
LARAMIE	13
LOVELL	1
LUSK	1
MEDICINE BOW	1
MILLS	7
PINE BLUFFS	2
POWELL	3
RANCHESTER	1
RAWLINS	8
RIVERTON	14
ROCK SPRINGS	28
SARATOGA	2
SHERIDAN	24
SINCLAIR	1
SUNDANCE	1
TORRINGTON	1
WAMSUTTER	1
WHEATLAND	2
WORLAND	2
WRIGHT	1
<b>Total</b>	<b>281</b>

## 2016 ALCOHOL INVOLVED CRASHES WITH AGE AND BAC RESULTS OF DRIVERS

Age Groups		Drivers in	Drivers in	Drivers in
BAC Results		Fatal	Injury	PDO
		Crashes	Crashes	Crashes
<b>0 - 13</b>				
	Others	0	0	0
<b>Total</b>		<b>0</b>	<b>0</b>	<b>0</b>
<b>14 - 16</b>				
	.01 - .07	0	0	1
	.10 - .15	0	0	1
	Others	0	0	0
<b>Total</b>		<b>0</b>	<b>0</b>	<b>2</b>
<b>17 - 20</b>				
	.01 - .07	0	2	2
	.08 - .09	0	0	1
	.10 - .15	0	3	4
	.16 - .20	1	3	3
	.21 - .25	0	2	0
	.26 - .30	0	1	1
	Others	1	8	12
<b>Total</b>		<b>2</b>	<b>19</b>	<b>23</b>
<b>21 - 24</b>				
	.01 - .07	0	1	5
	.08 - .09	0	1	2
	.10 - .15	0	6	12
	.16 - .20	1	3	15
	.21 - .25	1	3	6
	.31 - .35	0	1	0
	Others	1	22	31
<b>Total</b>		<b>3</b>	<b>37</b>	<b>71</b>
<b>25 - 29</b>				
	.01 - .07	0	2	1
	.08 - .09	0	1	2
	.10 - .15	0	9	10
	.16 - .20	1	2	16
	.21 - .25	1	5	6
	.26 - .30	1	1	2
	.31 - .35	0	1	1
	.36 - .40	1	0	0
	Others	1	27	29
<b>Total</b>		<b>5</b>	<b>48</b>	<b>67</b>
<b>30 - 39</b>				
	.01 - .07	0	5	7
	.08 - .09	0	1	1
	.10 - .15	2	7	12
	.16 - .20	1	8	16
	.21 - .25	0	5	3
	.26 - .30	0	5	3
	.31 - .35	0	1	0
	.36 - .40	0	1	0
	Others	0	52	48
<b>Total</b>		<b>3</b>	<b>85</b>	<b>90</b>
<b>40 - 49</b>				
	.01 - .07	0	1	5
	.08 - .09	0	1	4
	.10 - .15	1	9	7
	.16 - .20	1	5	7

Others is a result of no reported BAC result



Age Groups	BAC Results	Drivers in Fatal Crashes	Drivers in Injury Crashes	Drivers in PDO Crashes
	.21 - .25	0	4	6
	.26 - .30	1	1	4
	.31 - .35	0	3	1
	Others	1	29	30
<b>Total</b>		<b>4</b>	<b>53</b>	<b>64</b>
<b>50 - 59</b>				
	.01 - .07	0	2	1
	.08 - .09	2	0	3
	.10 - .15	0	5	9
	.16 - .20	1	5	7
	.21 - .25	1	3	9
	.26 - .30	0	2	2
	Others	1	19	20
<b>Total</b>		<b>5</b>	<b>36</b>	<b>51</b>
<b>60 - 69</b>				
	.01 - .07	0	2	2
	.10 - .15	1	2	4
	.16 - .20	0	1	3
	.21 - .25	0	2	1
	Others	1	9	3
<b>Total</b>		<b>2</b>	<b>16</b>	<b>13</b>
<b>70 - 79</b>				
	.01 - .07	0	1	0
	.10 - .15	0	1	0
	Others	0	0	1
<b>Total</b>		<b>0</b>	<b>2</b>	<b>1</b>
<b>80 +</b>				
	.10 - .15	0	0	1
	Others	0	1	0
<b>Total</b>		<b>0</b>	<b>1</b>	<b>1</b>
<b>UK</b>				
	.21 - .25	0	0	1
	Others	1	1	12
<b>Total</b>		<b>1</b>	<b>1</b>	<b>13</b>
<b>Others</b>				
	Others	0	0	0
<b>Total</b>		<b>0</b>	<b>0</b>	<b>0</b>
		<b>25</b>	<b>298</b>	<b>396</b>

# DRIVERS AGE 14 - 20

## 2016 FATAL CRASHES INVOLVING DRIVERS BETWEEN AGES 14 - 20 GENDER

Age	Male	Female	Total
14	0	1	1
15	0	1	1
16	0	1	1
17	0	3	3
18	2	2	4
19	3	1	4
20	1	0	1
Total	6	9	15

## 2016 INJURY CRASHES INVOLVING DRIVERS BETWEEN AGES 14 - 20 GENDER

Age	Male	Female	Total
14	1	2	3
15	8	10	18
16	70	50	120
17	76	55	131
18	70	59	129
19	53	67	120
20	59	46	105
Total	337	289	626

## 2016 PDO CRASHES INVOLVING DRIVERS BETWEEN AGES 14 - 20 GENDER

Age	Male	Female	Total
14	2	9	11
15	30	26	56
16	228	219	447
17	227	179	406
18	256	192	448
19	219	194	413
20	203	159	362
Total	1165	978	2143

# TRUCKS

## TRUCK CRASHES

### MEDIUM TRUCK (>10K - <26K) & HEAVY TRUCK (> 26K)

Year	Fatal Crashes	Total Fatalities	# Truck Driver's Killed	Injury Crashes	Total Injuries	# Truck Driver's Injured	PDO Crashes	Total Crashes
2012	26	27	7	258	376	137	972	1256
2013	20	24	5	258	345	127	1092	1370
2014	28	39	5	317	470	173	1250	1595
2015	22	28	7	263	376	140	1000	1285
2016	20	25	5	259	345	138	1109	1388
Total	116	143	29	1355	1912	748	5423	6894

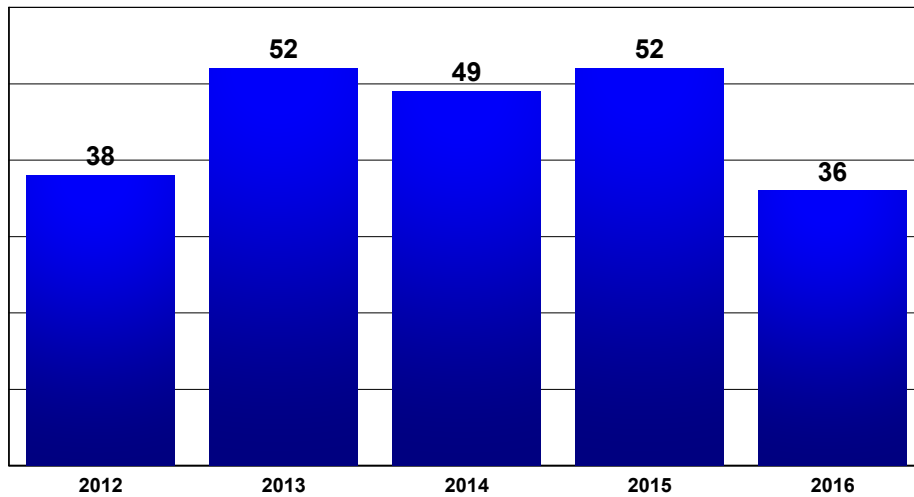
## 2016 TRUCK CRASHES

### MEDIUM TRUCK (>10K - <26K) & HEAVY TRUCK (> 26K) BY ROADWAY

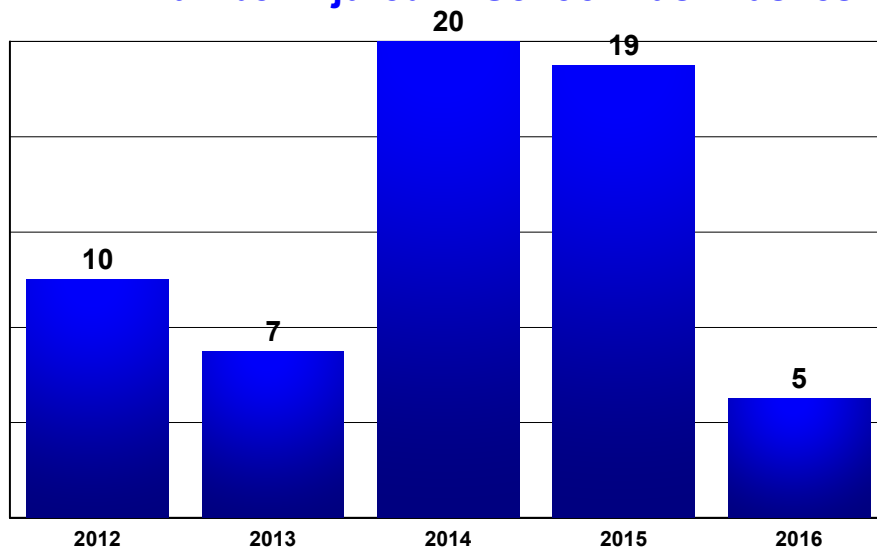
Roadway Type	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes
Interstate	13	152	744	909
Primary	5	68	176	249
Secondary	1	11	39	51
City Street	0	1	54	55
County Road Rural	0	9	23	32
State Highway	0	1	4	5
M Route	1	10	54	65
BLM	0	1	1	2
Forest Service	0	0	1	1
Service Road	0	3	8	11
County Road Urban	0	3	6	9
Total	20	259	1110	1389

# SCHOOL BUS 2016

School Bus Crashes



Number Injured in School Bus Crashes



## 2016 SCHOOL BUS INVOLVED CRASHES COUNTY / CRASH SEVERITY

County	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes
ALBANY	0	0	3	3
BIG HORN	0	0	1	1
CAMPBELL	0	1	4	5
FREMONT	0	0	3	3
LARAMIE	0	0	6	6
LINCOLN	0	1	1	2
NATRONA	0	0	7	7
PARK	0	0	1	1
SHERIDAN	0	0	1	1
SWEETWATER	0	2	4	6
TETON	0	0	1	1
<b>Total</b>	<b>0</b>	<b>4</b>	<b>32</b>	<b>36</b>

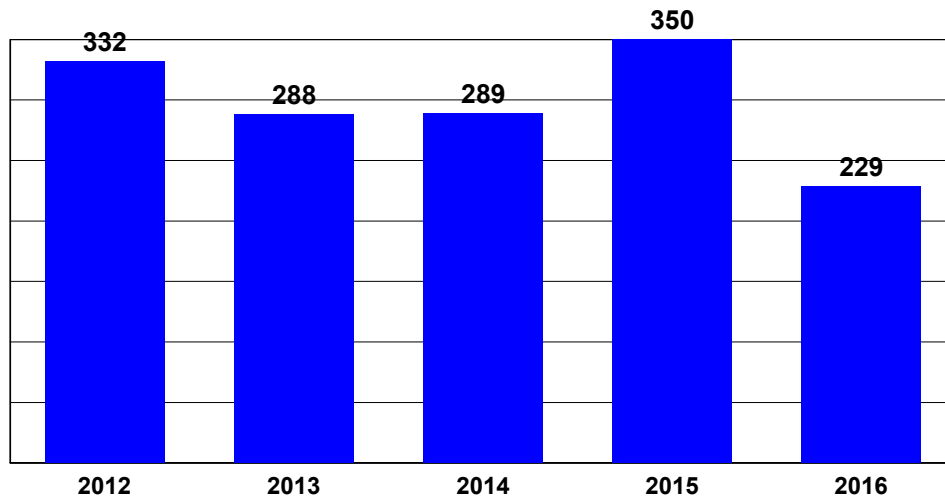
## 2016 SCHOOL BUS INVOLVED CRASHES COLLISION TYPE / CRASH SEVERITY

Collision Type	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes
Deer	0	0	1	1
Motor Vehicle in Transport on Roadway	0	4	26	30
Other Fixed Object	0	0	2	2
Parked Motor Vehicle	0	0	3	3
<b>Total</b>	<b>0</b>	<b>4</b>	<b>32</b>	<b>36</b>

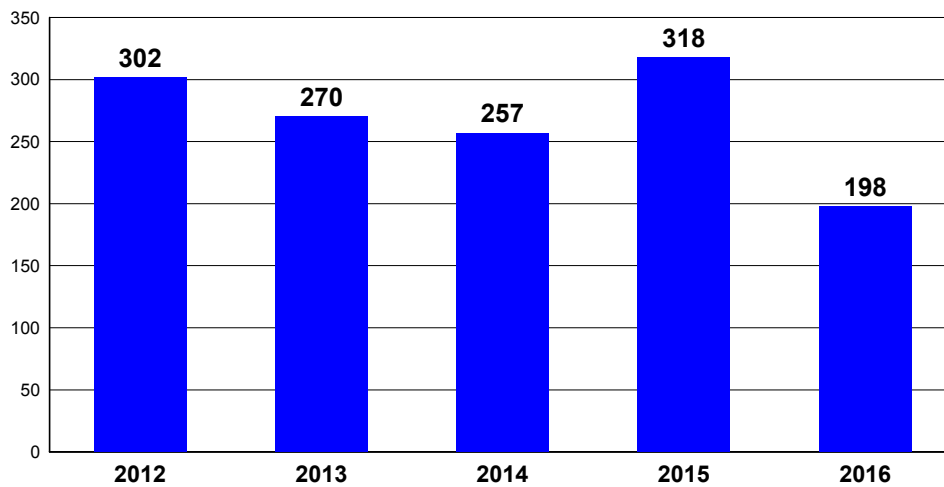
# MOTORCYCLES

## 2016

**Motorcycle Crashes**



**Number Injured in Motorcycle Crashes**



## 2016 MOTORCYCLE INVOLVED CRASHES COUNTY/CRASH SEVERITY

County	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes
ALBANY	2	5	3	10
BIG HORN	1	4	1	6
CAMPBELL	1	16	6	23
CARBON	1	4	2	7
CONVERSE	0	4	0	4
CROOK	1	12	2	15
FREMONT	4	9	0	13
GOSHEN	0	1	1	2
HOT SPRINGS	0	3	0	3
LARAMIE	1	23	8	32
LINCOLN	0	3	0	3
NATRONA	1	23	4	28
NIOBRARA	1	1	0	2
PARK	1	18	2	21
PLATTE	1	4	1	6
SHERIDAN	1	10	2	13
SUBLETTE	0	2	0	2
SWEETWATER	3	16	2	21
TETON	1	8	0	9
UINTA	1	2	0	3
WASHAKIE	0	2	0	2
WESTON	0	4	0	4
	21	174	34	229

## 2016 MOTORCYCLE INVOLVED CRASHES COLLISION TYPE/CRASH SEVERITY

Collision Type	Fatal Crashes	Injury Crashes	PDO Crashes	Total Crashes
Cattle Guard	1	0	0	1
Cow	0	1	0	1
Deer	1	15	0	16
Delineator Post	5	2	1	8
Ditch	0	1	0	1
Earth Embankment/Berm	0	1	0	1
End of Drainage Pipe/Structure/Culvert	0	1	0	1
Fell/Jumped from a MV	0	3	0	3
Guardrail End	0	1	0	1
Guardrail Face	0	4	0	4
Motor Vehicle in Transport on Roadway	8	55	19	79
Other Fixed Object	0	1	0	1
Other NON-Fixed Object	0	1	2	3
Other Non-Collision (MC Loss of Control)	3	80	10	91
Parked Motor Vehicle	0	3	2	5
Pedacycle	0	1	0	1
Pedestrian	0	1	0	1
Raised Median or Curb	0	3	0	3
Rock, Boulder, Rock Slide	0	3	0	3
Sign Support Single Post	1	0	0	1
Utility Pole/Light Support	0	2	0	2
Work Zone Channeling Device	2	0	0	2
	21	174	34	229

# APPENDIX





Mail completed form within 10 days to: Wyoming Department of Transportation  
Crash Records  
5300 Bishop Boulevard  
Cheyenne, WY 82009-3340

**County**

**In City/Town** ☐ Yes ☐ No

**City**

**Crash occurred on: Highway/Street**

**At/Related intersection: Highway/Street**

**If NOT at Intersection** ☐ Feet or Miles ☐ Direction

**GPS Latitude**

**GPS Longitude**

**Milepost Marker**

**Highway Section #**

**Intersection LRS #**

**Occurred on Divided RDway** ☐ No ☐ Yes

**if yes** **Incr / Decr** ☐ Incr ☐ Decr ☐ Unknown

**nearest street, highway, ramp, bridge, city, railroad crossing, etc.**

**TO ENSURE ACCURACY  
PRINT IN UPPER-CASE LETTERS USING A BLACK OR DARK BLUE PEN!  
PRINT NEATLY**

A	B	C	D	4	5	6	7	8
---	---	---	---	---	---	---	---	---

**If 'Other' is selected in any field, describe in narrative  
If a vehicle is towed, describe towed vehicle in narrative**

**mark if attached**

- ☐ If more than 2 vehicles are involved, complete form 'Supplemental Additional Vehicle/Driver Form'
- ☐ If more than 5 persons in a crash, complete form 'Supplemental Additional Vehicle Occupant Information'
- ☐ Trucks or Commercial Motor Vehicles complete form 'Supplemental Truck/CMV Information'
- ☐ If a non-motorist is involved, complete form 'Supplemental Non-Motorist'
- ☐ If a bus is involved and carrying passengers, complete form 'Supplemental Bus Information'
- ☐ If any drug tests are performed, complete 'Supplemental Drug Test Results'
- ☐ Previous report submitted

Investigating Agency

01 - City PD	02 - Sheriff	03 - BIA	Division (WHP only)
04 - Forest Service	05 - Campus Police	06 - WHP 07 - Other	

**Badge #**

Officer Name &amp; Rank

The diagram illustrates a 16-bit word structure. It is represented as a horizontal bar divided into four equal segments, each labeled below with a text label: "First", "MI", "Last", and "Rank". Each segment is further divided into four smaller sub-segments, indicating a 4-bit field for each label.

Report Date (yyyy/mm/dd)

***Signature***

**Highway Safety Use Only**

### Proximity to Residence

**1-Same Town 2-25 miles or less 3-25 miles Plus 4-Out of State**

**Date Received:**

Report Number:

☐ Rural ☐ PID ☐ NON-PID

**Highway District**

## Accurately Located

**Crash Type:** ☐ G > \$1,000 ☐ M - Missing Location

☐ N < \$1,000    ☐ I - Industrial Crash

☐ P - Private   ☐ D - Deliberate

## Highway System

# Driver/Vehicle Information

1

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ Gender \_\_\_\_\_ DOB (yyyy/mm/dd) \_\_\_\_\_

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_

Mailing Address (PO Box Number) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Driver Phone ☐ Home ☐ Work ☐ Cell Phone \_\_\_\_\_ Emp Phone ☐ Home ☐ Work ☐ Cell Phone \_\_\_\_\_ SSN (fatals only) \_\_\_\_\_ Age \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State (FIPS) \_\_\_\_\_ Restrictions \_\_\_\_\_ CDL Endorsement \_\_\_\_\_

DL Type		DL Class	DL Status		No. of Vehicle Occupants (01 to 50)
1 - Not Licensed	5 - CDL	1 - A	5 - Improper or No Endorsement	1 - Clear	Posted Speed _____ Estimated Speed _____
2 - Driver License	6 - CDL Permit	2 - B	6 - Other	2 - Expired	
3 - Instruction Permit	7 - No License Required	3 - C		3 - Canceled or Denied	
4 - I2 Permit-intermediate	8 - Restricted License	4 - M		4 - Revoked	
				5 - Suspended	
				99 - Unknown	

Vehicle Owner same as driver ☐

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Make (ie, Chevrolet, Dodge, Toyota) \_\_\_\_\_ Model (ie, Silverado, Dakota, Solara) \_\_\_\_\_ Year \_\_\_\_\_ Expir. Date (mm/yy) \_\_\_\_\_

Vehicle Identification Number \_\_\_\_\_ License Plate No. \_\_\_\_\_ State (FIPS) \_\_\_\_\_ Color \_\_\_\_\_

Insurance ☐ E-Verified ☐ Y-Yes ☐ N-No Company \_\_\_\_\_ Policy # \_\_\_\_\_

Vehicle Towed ☐ Y-Yes ☐ N-No By \_\_\_\_\_ To \_\_\_\_\_

Extent of Damage ☐ 01 - None 02 - Functional 03 - Minor 04 - Disabling 99 - Unknown

MV Damage ☐  $\geq \$1,000$  01-Yes 02-No 99-Unk.

Direction of Travel Prior to Crash

01 - North	05 - South
02 - Northeast	06 - Southwest
03 - East	07 - West
04 - Southeast	08 - Northwest
99 - Unknown	

Initial Impact Point \_\_\_\_\_ Most Damaged Area \_\_\_\_\_

00 Non-Collision (Overturn/Rollover)  
01-12 (Use 12 Point Clock Diagram)  
13 Top (Roof)  
14 Undercarriage  
99 Unknown (Can't determine)

2

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ Gender \_\_\_\_\_ DOB (yyyy/mm/dd) \_\_\_\_\_

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_

Mailing Address (PO Box Number) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Driver Phone ☐ Home ☐ Work ☐ Cell Phone \_\_\_\_\_ Emp Phone ☐ Home ☐ Work ☐ Cell Phone \_\_\_\_\_ SSN (fatals only) \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State (FIPS) \_\_\_\_\_ Restrictions \_\_\_\_\_ CDL Endorsement \_\_\_\_\_

DL Type		DL Class	DL Status		No. of Vehicle Occupants (01 to 50)
1 - Not Licensed	5 - CDL	1 - A	5 - Improper or No Endorsement	1 - Clear	Posted Speed _____ Estimated Speed _____
2 - Driver License	6 - CDL Permit	2 - B	6 - Other	2 - Expired	
3 - Instruction Permit	7 - No License Required	3 - C		3 - Canceled or Denied	
4 - I2 Permit-intermediate	8 - Restricted License	4 - M		4 - Revoked	
				5 - Suspended	
				99 - Unknown	

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Make (ie, Chevrolet, Dodge, Toyota) \_\_\_\_\_ Model (ie, Silverado, Dakota, Solara) \_\_\_\_\_ Year \_\_\_\_\_ Expir. Date (mm/yy) \_\_\_\_\_

Vehicle Identification Number \_\_\_\_\_ License Plate No. \_\_\_\_\_ State (FIPS) \_\_\_\_\_ Color \_\_\_\_\_

Insurance ☐ E-Verified ☐ Y-Yes ☐ N-No Company \_\_\_\_\_ Policy # \_\_\_\_\_

Vehicle Towed ☐ Y-Yes ☐ N-No By \_\_\_\_\_ To \_\_\_\_\_

Extent of Damage ☐ 01 - None 02 - Functional 03 - Minor 04 - Disabling 99 - Unknown

MV Damage ☐  $\geq \$1,000$  01-Yes 02-No 99-Unk.

Direction of Travel Prior to Crash

01 - North	05 - South
02 - Northeast	06 - Southwest
03 - East	07 - West
04 - Southeast	08 - Northwest
99 - Unknown	

Initial Impact Point \_\_\_\_\_ Most Damaged Area \_\_\_\_\_

00 Non-Collision (Overturn/Rollover)  
01-12 (Use 12 Point Clock Diagram)  
13 Top (Roof)  
14 Undercarriage  
99 Unknown (Can't determine)

**Vehicle Occupant Information**

CASE NO.

<b>Seat Position</b> 01-Driver 02-Front Row Middle 03-Front Row Right 04-Passenger Front Row Left (for foreign or postal vehicles where the driver is on the Right) 05-Second Row Left 06-Second Row Middle 07-Second Row Right 08-Third Row Left 09-Third Row Middle 10-Third Row Right 11-Fourth Row Left 12-Fourth Row Middle 13-Fourth Row Right 14-Other Row (ie. Bus, Van) 15-Lying Down-Front Seat 16-Lying Down-Other Seat 17-Motorcycle Passenger 18-Sleeper Section of Cab 19-Other Enclosed Area 20-Unenclosed Cargo Area 21-Trailing Unit 97-Riding on MV Exterior 98-Other (explain in narrative) 99-Unknown (explain in narrative)	<b>Air Bag Deployed</b> 01-Not Applicable 02-Not Deployed 03-Deployed Front 04-Deployed Side 05-Deployed Combination 06-Deployed Other 99-Deployment Unknown	<b>Ejection</b> 01-Not Ejected 02-Partially Ejected 03-Totally Ejected 04-Trapped & Extricated 05-Not Applicable 99-Unknown	<b>Injury Status</b> 01-Fatal Injury 02-Incapacitating Injury 03-Non-Incapacitating Injury 04-Possible Injury 05-No Injury 99-Unknown	<b>Injury Description</b> 01-Severe Lacerations 02-Broken 03-Crushed 04-Unconsciousness 05-Internal Unknown 06-Lumps 07-Abrasions 08-Bruises 09-Minor Lacerations 10-Limping 11-Pain 12-Nausea 13-Other (explain in narrative) 14- No Injury 99-Unknown
<b>Person Type</b> 01 - Driver 02 - Passenger 99 - Unknown If non-motorist, complete supplemental form	<b>Occupant Protection System Operation</b> 01-Apparently Normal 02-Failure/Malfunction 03-Misuse 04-Air Bag System Turned off or Rendered Inoperative 99-Unknown	<b>Safety Equipment Usage</b> 01-None Used 02-Not Available 03-Shoulder & Lap belt 04-Shoulder Belt Only 05-Lap Belt Only 06-Passive Restraint Only 07-Restraint used-Type Unk. 08-Forward Facing Child 09-Rear Facing Child Restraint 10-Booster Seat 11-Child Restraint-Type Unk. 12-Helmet Used 13-Other 99-Unknown	<b>Most Injured Area</b> 01-Head 02-Face 03-Neck 04-Thorax (Chest) 05-Abdomen/Pelvis 06-Spine 07-Upper Extremity (Arm...) 08-Lower Extremity (Leg...) 09-No Injury 99-Unknown	<b>Injury Classification</b> 01-Fatal (Not Documented) 02-Fatal (Autopsy) 03-Fatal (Medical Diagnosis) 04-Non-Fatal (Hospitalized overnight or longer) 05-Non-Fatal (Treated & Released from Hospital) 06-First Aid Given at Scene 07-No Treatment 08-Refused Treatment 99-Unknown
<b>Transported by</b> 01-Not Transported 02-EMS (Ground) 03-EMS (Air) 04-Law Enforcement 05-Other (Private MV) 99-Unknown				

Driver # 1	EMS ID	EMS Run #	Medical Facility
Driver # 2	EMS ID	EMS Run #	Medical Facility

**Occupant Information**

Last Name First Name MI DOB Age Gender M, F, X Home Work Cell Phone and/or Home Work Cell Phone Medical Facility	Last Name First Name MI DOB Age Gender M, F, X Home Work Cell Phone and/or Home Work Cell Phone Medical Facility	Last Name First Name MI DOB Age Gender M, F, X Home Work Cell Phone and/or Home Work Cell Phone Medical Facility	Last Name First Name MI DOB Age Gender M, F, X Home Work Cell Phone and/or Home Work Cell Phone Medical Facility	Last Name First Name MI DOB Age Gender M, F, X Home Work Cell Phone and/or Home Work Cell Phone Medical Facility
--	--	--	--	--

If more than 5 occupants add page three from Supplemental Additional Driver/Vehicle form

# Vehicle (1) Information

1st event <input type="text"/>	Sequence <input type="text"/>	Motor Vehicle Unit Type <input type="text"/>		Vehicle Maneuver/Action prior to crash <input type="text"/>	
2nd event <input type="text"/>	← choose up to 4: <input type="text"/>	01 - Motor Vehicle in Transport 02 - Parked Motor Vehicle 03 - Working Vehicle/Equipment		01 - Straight Ahead 02 - Backing 03 - Changing Lanes 04 - Overtaking/Passing 05 - Turning Right 06 - Turning Left 07 - Make U-Turn 08 - Leaving a Traffic Lane/Parking 09 - Entering a Traffic Lane 10 - Slowing 11 - Negotiating a Curve 12 - Parked 13 - Stopped in Traffic 14 - Driverless Motor Vehicle 15 - Trafficway Maintenance 16 - Other 99 - Unknown	
3rd event <input type="text"/>	Most Harmful Event <input type="text"/>	Commercial Motor Vehicle or HM Placard <input type="text"/>			
4th event <input type="text"/>	choose 1 → <input type="text"/>	01 - Yes 02 - No 99 - Unknown if yes, complete CMV supplement			
<b>Non-Collision</b>		Vehicle Owner <input type="text"/>		Road Surface <input type="text"/> Grade <input type="text"/>	
01 - Overturn/Rollover 02 - Fire/Explosion 03 - Immersion 04 - Jackknife 05 - Cargo/Equipment Loss or Shift 06 - Equipment Failure 07 - Separation of Units 08 - Ran Off the Road Right 09 - Ran Off the Road Left 10 - Cross Median 11 - Downhill Runaway 12 - Fell/Jumped from a MV 13 - Thrown or Falling Object 14 - Avoiding an Object on Road 15 - Avoiding an Animal on Road 16 - Carbon Monoxide (CO) Poisoning 17 - Injuries by being thrown against part of vehicle 18 - Other Non-Collision (MC Loss of Control)		01 - Same as Driver 02 - Other 03 - Passenger 04 - Relative 05 - Rental Vehicle 06 - Commercial 07 - Occupant 08 - Vehicle Parked 09 - Federal Law Enforcement 10 - Federal Other 11 - County Law Enforcement 12 - County Fire Department 13 - County Other 14 - City Law Enforcement 15 - City Fire Department 16 - City Other 17 - Government Other 18 - Ambulance/EMS 19 - WHP 20 - State Law Enforc Other		01 - Concrete 02 - Asphalt 03 - Gravel/Rock 04 - Dirt 05 - Brick/Stone 99 - Unknown 01 - Level 02 - Hillcrest 03 - Uphill 04 - Downhill 05 - Sag (Bottom) 99 - Unknown	
<b>Collision w/ Person, MV, or Non-Fixed Object</b>		Vehicle Type <input type="text"/>		Horizontal Alignment <input type="text"/>	
19 - Pedestrian 20 - Pedacycle 21 - Railway Vehicle 22 - Motor Vehicle in Transport on Roadway 23 - Motor Vehicle in Transport on OTHER Roadway 24 - Parked Motor Vehicle 26 - Other NON-Fixed Object 27 - Work Zone/Maintenance Equipment 28 - Work Zone Channeling Device 29 - Object Set in Motion by Another Vehicle		01 - Passenger 02 - Passenger Van 03 - PU 04 - School Bus 05 - Other Bus 06 - Transit Bus 07 - Charter Bus 08 - MC >150 cc 09 - Off Road MC 12 - Low Speed Vehicle 13 - Other Vehicle 14 - SUV 15 - Cargo Van 16 - Motor Home 17 - Light Truck (10K or less) 18 - Medium Truck (>10K - <26K) 19 - Heavy Truck (>26K) 20 - Farm Equipment 21 - Construction Vehicle 22 - MC <150 cc 23 - Moped 24 - Snowmobile 26 - ATV 27 - MPV 99 - Unknown		01 - Straight 03 - Curve Left 02 - Curve Right 99 - Unknown	
<b>Animals</b>		Non -Commercial Trailer Style <input type="text"/>		Total No. Lanes <input type="text"/>	
30 - Horse 31 - Cow 32 - Pig 33 - Sheep 34 - Other Domestic (Dog, Llama, ...) 35 - Elk 36 - Deer 37 - Moose 38 - Antelope 39 - Buffalo 40 - Other Wild		01 - No Trailer 02 - Camping Trailer 03 - Mobile Home 04 - Utility Trailer 05 - Boat/Jet Ski Trailer 06 - Towed Vehicle 07 - Horse/Stock Trailer 08 - Motorcycle Trailer 09 - Multiple Trailers 10 - Other (ie. Bicycle) 99 - Unknown		01 - 06, 99 = Unknown (exclude turn lanes)	
<b>Collision w/ Fixed Object</b>		Underride/Override <input type="text"/>		Traffic Control Working Properly <input type="text"/>	
41 - Guardrail End 42 - Guardrail Face 43 - Impact Attenuator/Crash Cushion 44 - Bridge Pier or Support 45 - Bridge Overhead Structure 46 - Bridge Rail 47 - Concrete Traffic Barrier/Jersey Barrier 48 - Other Traffic Barrier (Includes temporary) 49 - Utility Pole/Light Support 50 - Traffic Signal Support 51 - Traffic Sign Support 52 - Overhead Traffic Sign 53 - Sign Support Single Post 54 - Sign Support Multiple Post 55 - Other Traffic Sign Support 56 - Barricade 57 - Tree/Shrubbery 58 - Cut Slope 59 - Road Approach 60 - Rock, Boulder, Rock Slide 61 - End of Drainage Pipe/Structure/Culvert 62 - Building or Other Structure Wall 63 - Fence (Including Post) 64 - Raised Median or Curb 65 - Delineator Post 66 - Earth Embankment/Berm 67 - Ditch 68 - Snow Embankment 69 - Mail Box 70 - Tunnel 71 - Cattle Guard 72 - Other Fixed Object 73 - Cable Barrier		01 - No Underride or Override 02 - Underride-Compartment Intrusion 03 - Underride-No Compartment Intrusion 04 - Underride-Compartment Intrusion Unknown 05 - Override-Motor Vehicle in Transport 06 - Override-Other Motor Vehicle 99 - Unknown if Underride or Override		01 - Yes 02 - No 99 - Unknown	
99 - Unknown		Emergency Vehicle Use <input type="text"/>		Traffic Control <input type="text"/>	
		01 - Yes 02 - No 99 - Unknown		01 - None 02 - Stop Sign 03 - Yield Sign 04 - Flashing Traffic Signal 05 - Do Not Enter Sign 06 - Traffic Signal 07 - Traffic Signal w/ Ped 08 - Traffic Signal w/ Ped & Audible Signals 09 - Person (Officer/Flagger, Xing Guard, etc) 10 - Pedestrian Crossing 11 - No Passing Zone 12 - Warning Signs 13 - Pavement Markings 14 - Traffic Barrels/Cones 15 - Temporary Jersey Barrier 16 - School Bus Flashing Stop Lamps 17 - School Zone Crossing 18 - RR Crossing Signal 19 - RR Crossing Signal & Gate 20 - RR Crossing Cross Buck Sign Only 21 - RR Crossing Cross Buck with Stop Sign 22 - RR Crossing Cross Buck with Yield Sign 23 - Other 99 - Unknown	
		Emergency Equipment Activated <input type="text"/>		Trafficway Description <input type="text"/>	
		01 - Yes 02 - No 99 - Unknown		01 - Two-Way-Undivided 02 - Two-Way-Undivided w/ Continuous Left Turn Lane 03 - Two-Way-Divided, No Barrier 04 - Two-Way-Divided, With Barrier 05 - One Way 99 - Unknown	
		Special Function of MV in Transport <input type="text"/>		Rumble Strips Present <input type="text"/>	
		01 - None 02 - Police 03 - Ambulance/EMS 04 - Fire Truck 05 - Military 06 - Snow Plow 07 - Tow Truck 08 - MV used as School Bus 09 - MV used as Other Bus 10 - Construction Equipment 11 - Farm Equipment 12 - Taxi 13 - Train 99 - Unknown		01 - Yes 02 - No 99 - Unknown	
		Contributing Circumstance <input type="text"/>		Rumble Strips Applicable <input type="text"/>	
		01 - None 02 - Brakes 03 - Trailer Brakes 04 - Steering 05 - Power Train 06 - Suspension 07 - Tires 08 - Wheels 09 - Lights (Head, Signal or Tail) 10 - Windows/Windshield 11 - Rain/Snow/Ice on Windshield 12 - Tinted Windows 13 - Vehicle Cargo Blocking View 14 - Exhaust System 15 - Oversized Load 16 - Defroster 17 - Mirrors 18 - Wipers 19 - Truck Coupling/Trailer Hitch/Safety Chain 20 - Stalled Vehicle 21 - Cruise Control 22 - Other 99 - Unknown		01 - Yes 02 - No 99 - Unknown	
				Rumble Strips <input type="text"/>	
				01 - None 02 - Centerline Rumble Strips 03 - Median Shoulder Only 04 - Transverse Rumble Strips (Road Apprch) 05 - Both Shoulders 06 - Both Centerline and Outside Shoulder 07 - Outside Shoulders Only 99 - Unknown	



## Vehicle (2) Information

2

1st event	<input type="text"/>	Sequence	<input type="text"/>
2nd event	<input type="text"/>	← choose up to 4:	<input type="text"/>
3rd event	<input type="text"/>	Most Harmful Event	<input type="text"/>
4th event	<input type="text"/>	choose 1 →	<input type="text"/>

**Non-Collision**

- 01 - Overturn/Rollover
- 02 - Fire/Explosion
- 03 - Immersion
- 04 - Jackknife
- 05 - Cargo/Equipment Loss or Shift
- 06 - Equipment Failure
- 07 - Separation of Units
- 08 - Ran Off the Road Right
- 09 - Ran Off the Road Left
- 10 - Cross Median
- 74 - Cross Centerline
- 11 - Downhill Runaway
- 12 - Fell/Jumped from a MV
- 13 - Thrown or Falling Object
- 14 - Avoiding an Object on Road
- 15 - Avoiding an Animal on Road
- 16 - Carbon Monoxide (CO) Poisoning
- 17 - Injuries by being thrown against part of vehicle
- 18 - Other Non-Collision (MC Loss of Control)

**Collision w/ Person, MV, or Non-Fixed Object**

- 19 - Pedestrian
- 20 - Pedacycle
- 21 - Railway Vehicle
- 22 - Motor Vehicle in Transport on Roadway
- 23 - Motor Vehicle in Transport on OTHER Roadway
- 24 - Parked Motor Vehicle
- 25 - Struck by Falling, Shifting Cargo or Anything Else Set in Motion by Motor Vehicle
- 26 - Other NON-Fixed Object
- 27 - Work Zone/Maintenance Equipment
- 28 - Work Zone Channeling Device
- 29 - Object Set in Motion by Another Vehicle

**Animals**

- 30 - Horse
- 31 - Cow
- 32 - Pig
- 33 - Sheep
- 34 - Other Domestic (Dog, Llama, ...)
- 35 - Elk
- 36 - Deer
- 37 - Moose
- 38 - Antelope
- 39 - Buffalo
- 40 - Other Wild

**Collision w/ Fixed Object**

- 41 - Guardrail End
- 42 - Guardrail Face
- 43 - Impact Attenuator/Crash Cushion
- 44 - Bridge Pier or Support
- 45 - Bridge Overhead Structure
- 46 - Bridge Rail
- 47 - Concrete Traffic Barrier/Jersey Barrier
- 48 - Other Traffic Barrier (Includes temporary)
- 49 - Utility Pole/Light Support
- 50 - Traffic Signal Support
- 51 - Traffic Sign Support
- 52 - Overhead Traffic Sign
- 53 - Sign Support Single Post
- 54 - Sign Support Multiple Post
- 55 - Other Traffic Sign Support
- 56 - Barricade
- 57 - Tree/Shrubbery
- 58 - Cut Slope
- 59 - Road Approach
- 60 - Rock, Boulder, Rock Slide
- 61 - End of Drainage Pipe/Structure/Culvert
- 62 - Building or Other Structure Wall
- 63 - Fence (Including Post)
- 64 - Raised Median or Curb
- 65 - Delineator Post
- 66 - Earth Embankment/Berm
- 67 - Ditch
- 68 - Snow Embankment
- 69 - Mail Box
- 70 - Tunnel
- 71 - Cattle Guard
- 72 - Other Fixed Object
- 73 - Cable Barrier

99 - Unknown

**Motor Vehicle Unit Type**

- 01 - Motor Vehicle in Transport
- 02 - Parked Motor Vehicle
- 03 - Working Vehicle/Equipment

**Commercial Motor Vehicle or HM Placard**

- 01 - Yes 02 - No 99 - Unknown
- if yes, complete CMV supplement

**Vehicle Owner**

- 01 - Same as Driver
- 02 - Other
- 03 - Passenger
- 04 - Relative
- 05 - Rental Vehicle
- 06 - Commercial
- 07 - Occupant
- 08 - Vehicle Parked
- 09 - Federal Law Enforcement
- 10 - Federal Other
- 11 - County Law Enforcement
- 12 - County Fire Department
- 13 - County Other
- 14 - City Law Enforcement
- 15 - City Fire Department
- 16 - City Other
- 17 - Government Other
- 18 - Ambulance/EMS
- 19 - WHP
- 20 - State Law Enforc Other

**Vehicle Type**

- 01 - Passenger
- 02 - Passenger Van
- 03 - PU
- 04 - School Bus
- 05 - Other Bus
- 06 - Transit Bus
- 07 - Charter Bus
- 08 - MC >150 cc
- 09 - Off Road MC
- 12 - Low Speed Vehicle
- 13 - Other Vehicle
- 14 - SUV
- 15 - Cargo Van
- 16 - Motor Home
- 17 - Light Truck (10K or less)
- 18 - Medium Truck (>10K - <26K)
- 19 - Heavy Truck (>26K)
- 20 - Farm Equipment
- 21 - Construction Vehicle
- 22 - MC <150 cc
- 23 - Moped
- 24 - Snowmobile
- 26 - ATV
- 27 - MPV
- 99 - Unknown

**Non -Commercial Trailer Style**

- 01 - No Trailer
- 02 - Camping Trailer
- 03 - Mobile Home
- 04 - Utility Trailer
- 05 - Boat/Jet Ski Trailer
- 06 - Towed Vehicle
- 07 - Horse/Stock Trailer
- 08 - Motorcycle Trailer
- 09 - Multiple Trailers
- 10 - Other (ie. Bicycle)
- 99 - Unknown

**Underride/Override**

- 01 - No Underride or Override
- 02 - Underride-Compartment Intrusion
- 03 - Underride-No Compartment Intrusion
- 04 - Underride-Compartment Intrusion Unknown
- 05 - Override-Motor Vehicle in Transport
- 06 - Override-Other Motor Vehicle
- 99 - Unknown if Underride or Override

**Emergency Vehicle Use**

- 01 - Yes 02 - No 99 - Unknown

**Emergency Equipment Activated**

- 01 - Yes 02 - No 99 - Unknown

**Special Function of MV in Transport**

- 01 - None
- 02 - Police
- 03 - Ambulance/EMS
- 04 - Fire Truck
- 05 - Military
- 06 - Snow Plow
- 07 - Tow Truck
- 08 - MV used as School Bus
- 09 - MV used as Other Bus
- 10 - Construction Equipment
- 11 - Farm Equipment
- 12 - Taxi
- 13 - Train
- 99 - Unknown

**Contributing Circumstance**

- 01 - None
- 02 - Brakes
- 03 - Trailer Brakes
- 04 - Steering
- 05 - Power Train
- 06 - Suspension
- 07 - Tires
- 08 - Wheels
- 09 - Lights (Head, Signal or Tail)
- 10 - Windows/Windshield
- 11 - Rain/Snow/Ice on Windshield
- 12 - Tinted Windows
- 13 - Vehicle Cargo Blocking View
- 14 - Exhaust System
- 15 - Oversized Load
- 16 - Defroster
- 17 - Mirrors
- 18 - Wipers
- 19 - Truck Coupling/Trailer Hitch/Safety Chain
- 20 - Stalled Vehicle
- 21 - Cruise Control

1st choice

2nd choice

22 - Other

99 - Unknown

**Vehicle Maneuver/Action prior to crash**

- 01 - Straight Ahead
- 02 - Backing
- 03 - Changing Lanes
- 04 - Overtaking/Passing
- 05 - Turning Right
- 06 - Turning Left
- 07 - Make U-Turn
- 08 - Leaving a Traffic Lane/Parking
- 09 - Entering a Traffic Lane
- 10 - Slowing
- 11 - Negotiating a Curve
- 12 - Parked
- 13 - Stopped in Traffic
- 14 - Driverless Motor Vehicle
- 15 - Trafficway Maintenance
- 16 - Other
- 99 - Unknown

**Road Surface**

- 01 - Concrete
- 02 - Asphalt
- 03 - Gravel/Rock
- 04 - Dirt
- 05 - Brick/Stone
- 99 - Unknown
- 01 - Level
- 02 - Hillcrest
- 03 - Uphill
- 04 - Downhill
- 05 - Sag (Bottom)
- 99 - Unknown

**Horizontal Alignment**

- 01 - Straight
- 02 - Curve Right
- 03 - Curve Left
- 99 - Unknown

**Total No. Lanes**

- 01 - 06, 99 = Unknown (exclude turn lanes)

**Traffic Control Working Properly**

- 01 - Yes 02 - No 99 - Unknown

**Traffic Control**

- 01 - None
- 02 - Stop Sign
- 03 - Yield Sign
- 04 - Flashing Traffic Signal
- 05 - Do Not Enter Sign
- 06 - Traffic Signal
- 07 - Traffic Signal w/ Ped
- 08 - Traffic Signal w/ Ped & Audible Signals
- 09 - Person (Officer/Flagger, Xing Guard, etc)
- 10 - Pedestrian Crossing
- 11 - No Passing Zone
- 12 - Warning Signs
- 13 - Pavement Markings
- 14 - Traffic Barrels/Cones
- 15 - Temporary Jersey Barrier
- 16 - School Bus Flashing Stop Lamps
- 17 - School Zone Crossing
- 18 - RR Crossing Signal
- 19 - RR Crossing Signal & Gate
- 20 - RR Crossing Cross Buck Sign Only
- 21 - RR Crossing Cross Buck with Stop Sign
- 22 - RR Crossing Cross Buck with Yield Sign
- 23 - Other
- 99 - Unknown

**Trafficway Description**

- 01 - Two-Way-Undivided
- 02 - Two-Way-Undivided w/ Continuous Left Turn Lane
- 03 - Two-Way-Divided, No Barrier
- 04 - Two-Way-Divided, With Barrier
- 05 - One Way
- 99 - Unknown

**Rumble Strips Present**

- 01 - Yes 02 - No 99 - Unknown

**Rumble Strips Applicable**

- 01 - Yes 02 - No 99 - Unknown

**Rumble Strips**

- 01 - None
- 02 - Centerline Rumble Strips
- 03 - Median Shoulder Only
- 04 - Transverse Rumble Strips (Road Apprch)
- 05 - Both Shoulders
- 06 - Both Centerline and Outside Shoulder
- 07 - Outside Shoulders Only
- 99 - Unknown

# Driver Information

1

<b>Driver's Action</b> (choose up to 4)		1st choice <input type="text"/> 2nd choice <input type="text"/> 3rd choice <input type="text"/> 4th choice <input type="text"/>	<b>Driver's Condition</b> (choose up to 2)		1st choice <input type="text"/> 2nd choice <input type="text"/>	<b>Citations Issued</b> (choose up to 5)		1st choice <input type="text"/> 2nd choice <input type="text"/> 3rd choice <input type="text"/> 4th choice <input type="text"/> 5th choice <input type="text"/>	
01 - No Improper Driving 02 - Ran Off Road 03 - Failed to Yield ROW 04 - Disregarded Traffic Signs 05 - Ran Red Light 06 - Disregarded Other Road Marking 07 - Speeding 08 - Drove too Fast for Conditions 09 - Improper Turn or No Signal 10 - Improper Backing 11 - Improper Passing 12 - Improper Parking 13 - Wrong Side/Wrong Way 14 - Following too Close 15 - Failed to Keep Proper Lane 16 - Erratic/Reckless/Careless/Aggressive 17 - Avoiding an Object on Road 18 - Avoiding Animal 19 - Avoiding Non-Motorist 20 - Avoiding MV 21 - Swerve Due to Wind/Slippery Surface 22 - Over Corrected/Over Steered 23 - Evading Law Enforcement 24 - Other Improper Action 99 - Unknown		01 - Apparently Normal 02 - Emotional (depressed, angry, disturbed...) 03 - ill (Sick) 04 - Fell Asleep, Fainted 05 - Fatigued 06 - Under Influence of Medication 07 - Physical Disability 08 - Suspected Drug Use 09 - Suspected Alcohol Use 10 - Other 11 - Driver Inattention 99 - Unknown		<b>Driver's Distraction</b> (choose one)		01 - None 02 - DWUI 03 - Drinking - (i.e., open container) 04 - Exceeding Speed Limit 05 - Speed too Fast 06 - Following too Close 07 - Wrong Side of Road 08 - Improper or No Signal 09 - Improper Lane Use 10 - Improper Turn 11 - Improper Passing 12 - Improper Starting Out 13 - Failed to Grant ROW to Ped 14 - Failed to Grant ROW to MV 15 - Disregard Officer 16 - Disregard Stop Light 17 - Disregard Stop Sign 18 - Disregard Other 19 - Improper Parking 20 - Reckless Driving 21 - Vehicular Homicide 22 - Driver's License Violation 23 - Improper Backing 24 - No Insurance 25 - Hit & Run 26 - Registration Violation 27 - Failure to Use Seat Belt 28 - Charges Pending 29 - Fed R & R Driver 30 - Fed R & R Vehicle 31 - Racing 32 - Careless 33 - Other (explain in narrative)		01 - Not Distracted 02 - Electronic Communication Device (cell, pager...) 03 - Other Electronic Device (palm, TV, computer...) 04 - Other Distraction Inside MV (passenger, pet...) 05 - Other Distraction Outside MV 99 - Unknown	
<b>Suspect Alcohol</b> <input type="text"/>		<b>Alcohol Test Type</b> <input type="text"/>		<b>Suspect Drugs</b> <input type="text"/>		<b>Drug Test Type</b> <input type="text"/>		<b>DL Investigation</b> <input type="text"/>	
01 - Yes 02 - No 99 - Unknown		01 - No Test Performed 02 - Test Refused 03 - Blood 04 - Serum 05 - Breath 06 - Urine 07 - Other 99 - Unknown		01 - Yes 02 - No 99 - Unknown		01 - No Test Performed 02 - Test Refused 03 - Blood 04 - Serum 05 - Urine 06 - Other 99 - Unknown		01 - Yes 02 - No 99 - Unknown	

If Alcohol Test performed other than Breath then form 902E will be required with results at a later date.

If Drug Test performed then form 902E will be required with results at a later date.

**Alcohol Test Result**

2

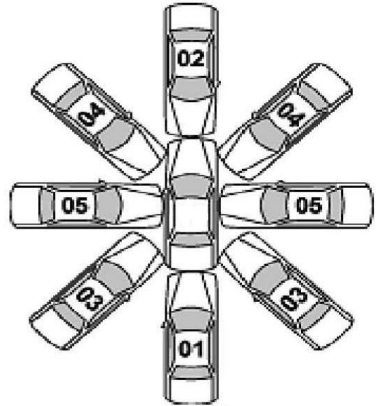
<b>Driver's Action</b> (choose up to 4)		1st choice <input type="text"/> 2nd choice <input type="text"/> 3rd choice <input type="text"/> 4th choice <input type="text"/>	<b>Driver's Condition</b> (choose up to 2)		1st choice <input type="text"/> 2nd choice <input type="text"/>	<b>Citations Issued</b> (choose up to 5)		1st choice <input type="text"/> 2nd choice <input type="text"/> 3rd choice <input type="text"/> 4th choice <input type="text"/> 5th choice <input type="text"/>	
01 - No Improper Driving 02 - Ran Off Road 03 - Failed to Yield ROW 04 - Disregarded Traffic Signs 05 - Ran Red Light 06 - Disregarded Other Road Marking 07 - Speeding 08 - Drove too Fast for Conditions 09 - Improper Turn or No Signal 10 - Improper Backing 11 - Improper Passing 12 - Improper Parking 13 - Wrong Side/Wrong Way 14 - Following too Close 15 - Failed to Keep Proper Lane 16 - Erratic/Reckless/Careless/Aggressive 17 - Avoiding an Object on Road 18 - Avoiding Animal 19 - Avoiding Non-Motorist 20 - Avoiding MV 21 - Swerve Due to Wind/Slippery Surface 22 - Over Corrected/Over Steered 23 - Evading Law Enforcement 24 - Other Improper Action 99 - Unknown		01 - Apparently Normal 02 - Emotional (depressed, angry, disturbed...) 03 - ill (Sick) 04 - Fell Asleep, Fainted 05 - Fatigued 06 - Under Influence of Meds 07 - Physical Disability 08 - Suspected Drug Use 09 - Suspected Alcohol Use 10 - Other 11 - Driver Inattention 99 - Unknown		<b>Driver's Distraction</b> (choose one)		01 - None 02 - DWUI 03 - Drinking - (i.e., open container) 04 - Exceeding Speed Limit 05 - Speed too Fast 06 - Following too Close 07 - Wrong Side of Road 08 - Improper or No Signal 09 - Improper Lane Use 10 - Improper Turn 11 - Improper Passing 12 - Improper Starting Out 13 - Failed to Grant ROW to Ped 14 - Failed to Grant ROW to MV 15 - Disregard Officer 16 - Disregard Stop Light 17 - Disregard Stop Sign 18 - Disregard Other 19 - Improper Parking 20 - Reckless Driving 21 - Vehicular Homicide 22 - Driver's License Violation 23 - Improper Backing 24 - No Insurance 25 - Hit & Run 26 - Registration Violation 27 - Failure to Use Seat Belt 28 - Charges Pending 29 - Fed R & R Driver 30 - Fed R & R Vehicle 31 - Racing 32 - Careless 33 - Other (explain in narrative)		01 - Not Distracted 02 - Electronic Communication Device (cell, pager...) 03 - Other Electronic Device (palm, TV, computer...) 04 - Other Distraction Inside MV (passenger, pet...) 05 - Other Distraction Outside MV 99 - Unknown	
<b>Suspect Alcohol</b> <input type="text"/>		<b>Alcohol Test Type</b> <input type="text"/>		<b>Suspect Drugs</b> <input type="text"/>		<b>Drug Test Type</b> <input type="text"/>		<b>DL Investigation</b> <input type="text"/>	
01 - Yes 02 - No 99 - Unknown		01 - No Test Performed 02 - Test Refused 03 - Blood 04 - Serum 05 - Breath 06 - Urine 07 - Other 99 - Unknown		01 - Yes 02 - No 99 - Unknown		01 - No Test Performed 02 - Test Refused 03 - Blood 04 - Serum 05 - Urine 06 - Other 99 - Unknown		01 - Yes 02 - No 99 - Unknown	

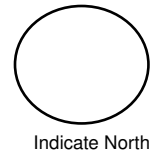
If Alcohol Test performed other than Breath then form 902E will be required with results at a later date.

If Drug Test performed then form 902E will be required with results at a later date.

**Alcohol Test Result**

# Base Information

FIRST HARMFUL EVENT	Location of FHE	Weather	Road	Lighting
<b>Non - Collision:</b> 01 - Overturn/Rollover 02 - Fire/Explosion 03 - Immersion 04 - Jackknife 05 - Cargo/Equipment Loss or Shift 12 - Fell/Jumped from a motor vehicle 13 - Thrown or Falling Object 16 - Carbon Monoxide (CO) Poisoning 17 - Injuries by being thrown against part of the vehicle 18 - Other Non-Collision (Motorcycle Loss of Control)	01 - On Roadway 02 - Off Roadway 03 - Shoulder 04 - Median 05 - On OTHER Roadway 06 - Outside of ROW 07 - Gore 08 - Separator 09 - In Parking Lane/Zone 10 - Tunnel 11 - Bridge 12 - Port of Entry 13 - Rest Area 99 - Unknown	01 - Clear 02 - Raining 03 - Snowing 04 - Fog 05 - Blowing Dust/Sand/Dirt 06 - Severe Wind Only 07 - Blizzard 08 - Sleet/Hail/Freezing Rain 09 - Blowing Snow 10 - Cloudy, Overcast 11 - Smoke 12 - Other 99 - Unknown	01 - Dry 02 - Wet 03 - Ice/Frost 04 - Snow 05 - Mud/Dirt/Gravel 06 - Slush 07 - Oil/Fuel 08 - Sand on Dry Pavement 09 - Sand on Icy Road 10 - Water standing/Running 11 - Other 99 - Unknown	01 - Daylight 02 - Darkness Unlighted 03 - Darkness Lighted 04 - Dawn 05 - Dusk 06 - Other 99 - Unknown
<b>Collision w/ Person, MV, or Non-Fixed Object:</b> 19 - Pedestrian 20 - Pedacycle 21 - Railway Vehicle 22 - Motor Vehicle in Transport on Roadway 23 - Motor Vehicle on OTHER Roadway 24 - Parked Motor Vehicle 26 - Other NON-Fixed Object 27 - Work Zone/Maintenance Equipment 28 - Work Zone Channeling Device 29 - Object Set in Motion by Another Vehicle	<b>Road Circumstance</b> choose up to 3 01 - None 02 - Road Surface Condition 03 - Debris, loose material on the surface 04 - Ruts, Holes, Bumps 05 - Work Zone/Construction Zone 06 - Worn or Polished Surface 07 - Obstruction in Roadway 08 - Traffic Control Device Missing 09 - Traffic Control Device Inoperative 10 - Traffic Control Device Obscured 11 - Shoulders (None, Low, Soft, High) 12 - Non- Highway Work 13 - Reduced Road Width 14 - Lane Markings Missing or Faded 15 - Obstructed by a Previous Crash 16 - Other 99 - Unknown	<b>Environmental Circumstance</b> choose up to 3 01 - Weather Conditions 02 - Visual Obstruction Buildings 03 - Visual Obstruction Other Vehicle 04 - Visual Obstruction Vegetation 05 - Visual Obstruction Hillcrest 06 - Visual Obstruction Embankment-Snow, Rock, etc 07 - Other Physical Obstruction 08 - Glare (Sun or Headlight) 09 - Animals in Roadway 10 - Other 11 - None 99 - Unknown	<b>School Bus Related</b> 01 - No 02 - Yes, Directly Involved 03 - Yes, Indirectly Involved	
<b>Animals:</b> 30 - Horse 31 - Cow 32 - Pig 33 - Sheep 34 - Other Domestic (Dog, Llama, etc) 35 - Elk 36 - Deer 37 - Moose 38 - Antelope 39 - Buffalo 40 - Other Wild (Bear, Coyote, Eagle)	<b>Work Zone Related</b> 01 - Yes 02 - No 99 - Unknown <b>Work Zone Workers Present</b> <b>Work Zone Location</b> 01 - Before the First Warning Sign 02 - Advance Warning Area 03 - Transition Area 04 - Activity Area 05 - Termination Area 99 - Unknown <b>Type of Work Zone</b> 01 - Lane Closure 02 - Lane Shift or Crossover 03 - Work on Shoulder/Median 04 - Intermittent or Moving Work 05 - Other 99 - Unknown <b>Manner of Collision</b> *see diagram right	<b>Relation to Junction</b> <b>Non-Interstate</b> 01 - Non-Junction 02 - Intersection 03 - Intersection Related 04 - Driveway Related 05 - Entrance/Exit Ramp 06 - Railway Grade Crossing 07 - Crossover Related 08 - Business Entrance 09 - Alley 10 - Other Non-Interchange (ie. Bike, Snowmobile Trail, School Xing) 99 - Unknown (describe in narrative) <b>Interstate</b> 12 - Thru Roadway 13 - Intersection 14 - Intersection Related 15 - Ramp 16 - Other Parts (Gore) 99 - Unknown Interchange	<b>Type of Intersection</b> 01 - Not an Intersection 02 - Four (4) -Way Intersection 03 - T Intersection 04 - Y Intersection 05 - Five (5) Point or more 06 - Intersection as part of an Interchange 07 - Roundabout 08 - L Intersection 99 - Unknown	
<b>Collision w/ Fixed Object</b> 41 - Guardrail End 42 - Guardrail Face 43 - Impact Attenuator/Crash Cushion 44 - Bridge Pier or Support 45 - Bridge Overhead Structure 46 - Bridge Rail 47 - Concrete Traffic Barrier/Jersey Barrier 48 - Other Traffic Barrier (Includes temporary) 49 - Utility Pole/Light Support 50 - Traffic Signal Support 51 - Traffic Sign Support 52 - Overhead Traffic Sign 53 - Sign Support Single Post 54 - Sign Support Multiple Post 55 - Other Traffic Sign Support 56 - Barricade 57 - Tree/Shrubbery 58 - Cut Slope 59 - Road Approach 60 - Rock, Boulder, Rock Slide 61 - End of Drainage Pipe/Structure/Culvert 62 - Building or Other Structure Wall 63 - Fence (Including Post) 64 - Raised Median or Curb 65 - Delineator Post 66 - Earth Embankment/Berm 67 - Ditch 68 - Snow Embankment 69 - Mail Box 70 - Tunnel 71 - Cattle Guard 72 - Fixed Object Other 73 - Cable Barrier 99 - Unknown	<b>Direction of Force</b> 01 - Opposing (Opposite Direction within 15 degrees) 02 - Angle (force exceeds 15 degrees) 03 - Same (same direction within 15 degrees) 04 - Meeting (glancing collision from opposite direction) 05 - Passing (glancing collision from same direction) 99 - Unknown			
<b>Manner of Collision CLARIFICATION</b> 01 - Rear End (Front-to-Rear) 02 - Head-on (Front-to-Front) 03 - Angle (Front-to-Side), Same Direction 04 - Angle (Front-to-Side), Opposing Direction 05 - Angle (Front-to-Side), Right Angle/Broadside				



Witnesses

1st

First Name

MI

Last Name

Street Number

Street Name

City:

State:

Zip Code

☐ Home ☐ Work ☐ Cell Phone and/or ☐ Home ☐ Work ☐ Cell Phone

2nd

First Name

MI

Last Name

Street Number

Street Name

City:

State:

Zip Code

☐ Home ☐ Work ☐ Cell Phone and/or ☐ Home ☐ Work ☐ Cell Phone

3rd

First Name

MI

Last Name

Street Number

Street Name

City:

State:

Zip Code

☐ Home ☐ Work ☐ Cell Phone and/or ☐ Home ☐ Work ☐ Cell Phone



# Supplemental Additional Driver/Vehicle Form

CASE NO. Vehicle No. 03 04 05... Last Name  First Name  MI  Gender  DOB (yyyy/mm/dd) Street Number  Street Name Mailing Address (PO Box Number)  City  State  Zip Code Occupation  Employer  Age Driver Phone  Home ☐ Work ☐ Cell Phone ☐ Emp Phone  Home ☐ Work ☐ Cell Phone ☐ SSN (fatals only) Driver's License Number  State (FIPS)  Restrictions  CDL Endorsement 

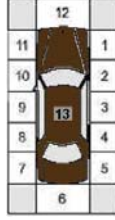
DL Type	DL Class	DL Status	No. of Vehicle Occupants (01 to 50)
1 - Not Licensed 2 - Driver License 3 - Instruction Permit 4 - I2 Permit-intermediate	5 - CDL 6 - CDL Permit 7 - No License Required 8 - Restricted License	1 - A 2 - B 3 - C 4 - M 5 - Improper or No Endorsement 6 - Other	1 - Clear 2 - Expired 3 - Canceled or Denied 4 - Revoked 5 - Suspended 99 - Unknown
			Posted Speed <input type="text"/> Estimated Speed <input type="text"/>

Vehicle Owner same as driver ☐

Last Name  First Name  MI

Street Number  Street Name  City  State  Zip Code

Make (ie, Chevrolet, Dodge, Toyota)  Model (ie, Silverado, Dakota, Solara)  Year  Expir. Date (mm/yy) Vehicle Identification Number  License Plate No.  State (FIPS)  Color 

Insurance E-Verified	Company	Policy #	Direction of Travel Prior to Crash	Initial Impact Point	Most Damaged Area
Y-Yes N-No			01 - North 02 - Northeast 03 - East 04 - Southeast 05 - South 06 - Southwest 07 - West 08 - Northwest 99 - Unknown		00 Non-Collision (Overturn/Rollover) 01-12 (Use 12 Point Clock Diagram) 13 Top (Roof) 14 Undercarriage 99 Unknown (Can't determine)
Vehicle Towed Y-Yes N-No	By <input type="text"/>	To <input type="text"/>			
Extent of Damage <input type="text"/>	01 - None 02 - Functional 03 - Minor 04 - Disabling 99 - Unknown	MV Damage <input type="text"/>	01-Yes 02-No 99-Unk.		

Driver's Action (choose up to 4/ ie. 01, 10, 25)	1st choice	2nd choice	3rd choice	4th choice	Driver's Condition (choose up to 2)	1st choice	2nd choice	Citations Issued (choose up to 5)	1st choice	2nd choice	3rd choice	4th choice	5th choice
01 - No Improper Driving 02 - Ran Off Road 03 - Failed to Yield ROW 04 - Disregarded Traffic Signs 05 - Ran Red Light 06 - Disregarded Other Road Marking 07 - Speeding 08 - Drove too Fast for Conditions 09 - Improper Turn or No Signal 10 - Improper Backing 11 - Improper Passing 12 - Improper Parking 13 - Wrong Side/Wrong Way 14 - Following too Close 15 - Failed to Keep Proper Lane 16 - Erratic/Reckless/Careless/Aggressive 17 - Avoiding an Object on Road 18 - Avoiding Animal 19 - Avoiding Non-Motorist 20 - Avoiding MV 21 - Swerve Due to Wind/Slippery Surface 22 - Over Corrected/Over Steered 23 - Evading Law Enforcement 24 - Other Improper Action 99 - Unknown					01 - Apparently Normal 02 - Emotional (depressed, angry, disturbed...) 03 - ill (Sick) 04 - Fell Asleep, Fainted 05 - Fatigued 06 - Under Influence of Medication 07 - Physical Disability 08 - Suspected Drug Use 09 - Suspected Alcohol Use 10 - Other 11 - driver Inattention 99 - Unknown			01 - None 02 - DWUI 03 - Drinking - (i.e., open container) 04 - Exceeding Speed Limit 05 - Speed too Fast 06 - Following too Close 07 - Wrong Side of Road 08 - Improper or No Signal 09 - Improper Lane Use 10 - Improper Turn 11 - Improper Passing 12 - Improper Starting Out 13 - Failed to Grant ROW to Ped 14 - Failed to Grant ROW to MV 15 - Disregard Officer 16 - Disregard Stop Light 17 - Disregard Stop Sign 18 - Disregard Other 19 - Improper Parking 20 - Reckless Driving 21 - Vehicular Homicide 22 - Driver's License Violation 23 - Improper Backing 24 - No Insurance 25 - Hit & Run 26 - Registration Violation 27 - Failure to Use Seat Belt 28 - Charges Pending 29 - Fed R & R Driver 30 - Fed R & R Vehicle 31 - Racing 32 - Careless 33 - Other (explain in narrative)					
Suspect Alcohol <input type="text"/>	01 - Yes 02 - No 99 - Unknown	Alcohol Test Type <input type="text"/>	01 - No Test Performed 02 - Test Refused 03 - Blood 04 - Serum 05 - Breath 06 - Urine 07 - Other 99 - Unknown	Suspect Drugs <input type="text"/>	01 - Yes 02 - No 99 - Unknown	Drug Test Type <input type="text"/>	01 - No Test Performed 02 - Test Refused 03 - Blood 04 - Serum 05 - Urine 06 - Other 99 - Unknown	DL Investigation <input type="text"/>	01 - Yes 02 - No 99 - Unknown				

If Alcohol Test performed other than Breath then form 902E will be required with results at a later date.

If Drug Test performed then form 902E will be required with results at a later date.

PR-902A  
Revised 11/9/11

<div> <div> <div> <div> <div>1st event</div> <div>2nd event</div> <div>3rd event</div> <div>4th event</div> </div> <div> <div>Sequence</div> <div> <div> <div>←</div> <div>choose up to 4:</div> </div> <div> <div>Most Harmful Event</div> <div>choose 1</div> <div>→</div> </div> </div> <div> <div>Non-Collision</div> <div> <div>01 - Overturn/Rollover</div> <div>02 - Fire/Explosion</div> <div>03 - Immersion</div> <div>04 - Jackknife</div> <div>05 - Cargo/Equipment Loss or Shift</div> <div>06 - Equipment Failure</div> <div>07 - Separation of Units</div> <div>08 - Ran Off the Road Right</div> <div>09 - Ran Off the Road Left</div> <div>10 - Cross Median</div> <div>74 - Cross Centerline</div> <div>11 - Downhill Runaway</div> <div>12 - Fell/Jumped from a MV</div> <div>13 - Thrown or Falling Object</div> <div>14 - Avoiding an Object on Road</div> <div>15 - Avoiding an Animal on Road</div> <div>16 - Carbon Monoxide (CO) Poisoning</div> <div>17 - Injuries by being thrown against part of vehicle</div> <div>18 - Other Non-Collision (MC Loss of Control)</div> </div> </div> </div> <div> <div>Collision w/ Person, MV, or Non-Fixed Object</div> <div> <div>19 - Pedestrian</div> <div>20 - Pedacycle</div> <div>21 - Railway Vehicle</div> <div>22 - Motor Vehicle in Transport on Roadway</div> <div>23 - Motor Vehicle in Transport on OTHER Roadway</div> <div>24 - Parked Motor Vehicle</div> <div>25 - Struck by Falling, Shifting Cargo or Anything Else Set in Motion by Motor Vehicle</div> <div>26 - Other NON-Fixed Object</div> <div>27 - Work Zone/Maintenance Equipment</div> <div>28 - Work Zone Channeling Device</div> <div>29 - Object Set in Motion by Another Vehicle</div> </div> </div> <div> <div>Animals</div> <div> <div>30 - Horse</div> <div>31 - Cow</div> <div>32 - Pig</div> <div>33 - Sheep</div> <div>34 - Other Domestic (Dog, Llama, ...)</div> <div>35 - Elk</div> <div>36 - Deer</div> <div>37 - Moose</div> <div>38 - Antelope</div> <div>39 - Buffalo</div> <div>40 - Other Wild</div> </div> </div> <div> <div>Collision w/ Fixed Object</div> <div> <div>41 - Guardrail End</div> <div>42 - Guardrail Face</div> <div>43 - Impact Attenuator/Crash Cushion</div> <div>44 - Bridge Pier or Support</div> <div>45 - Bridge Overhead Structure</div> <div>46 - Bridge Rail</div> <div>47 - Concrete Traffic Barrier/Jersey Barrier</div> <div>48 - Other Traffic Barrier (Includes temporary)</div> <div>49 - Utility Pole/Light Support</div> <div>50 - Traffic Signal Support</div> <div>51 - Traffic Sign Support</div> <div>52 - Overhead Traffic Sign</div> <div>53 - Sign Support Single Post</div> <div>54 - Sign Support Multiple Post</div> <div>55 - Other Traffic Sign Support</div> <div>56 - Barricade</div> <div>57 - Tree/Shrubbery</div> <div>58 - Cut Slope</div> <div>59 - Road Approach</div> <div>60 - Rock, Boulder, Rock Slide</div> <div>61 - End of Drainage Pipe/Structure/Culvert</div> <div>62 - Building or Other Structure Wall</div> <div>63 - Fence (Including Post)</div> <div>64 - Raised Median or Curb</div> <div>65 - Delineator Post</div> <div>66 - Earth Embankment/Berm</div> <div>67 - Ditch</div> <div>68 - Snow Embankment</div> <div>69 - Mail Box</div> <div>70 - Tunnel</div> <div>71 - Cattle Guard</div> <div>72 - Other Fixed Object</div> <div>73 - Cable Barrier</div> </div> </div> <div> <div>99 - Unknown</div> </div> </div></div></div>	<div> <div> <div>Motor Vehicle Unit Type</div> <div> <div>01 - Motor Vehicle in Transport</div> <div>02 - Parked Motor Vehicle</div> <div>03 - Working Vehicle/Equipment</div> </div> </div> <div> <div>HM Placard or Commercial Motor Vehicle</div> <div> <div>01 - Yes</div> <div>02 - No</div> <div>99 - Unknown</div> <div>if yes, complete CMV supplement</div> </div> </div> <div> <div>Vehicle Owner</div> <div> <div>01 - Same as Driver</div> <div>02 - Other</div> <div>03 - Passenger</div> <div>04 - Relative</div> <div>05 - Rental Vehicle</div> <div>06 - Commercial</div> <div>07 - Occupant</div> <div>08 - Vehicle Parked</div> <div>09 - Federal Law Enforcement</div> <div>10 - Federal Other</div> <div>11 - County Law Enforcement</div> <div>12 - County Fire Department</div> <div>13 - County Other</div> <div>14 - City Law Enforcement</div> <div>15 - City Fire Department</div> <div>16 - City Other</div> <div>17 - Government Other</div> <div>18 - Ambulance/EMS</div> <div>19 - WHP</div> <div>20 - State Law Enforc Other</div> </div> </div> <div> <div>Vehicle Type</div> <div> <div>01 - Passenger</div> <div>02 - Passenger Van</div> <div>03 - PU</div> <div>04 - School Bus</div> <div>05 - Other Bus</div> <div>06 - Transit Bus</div> <div>07 - Charter Bus</div> <div>08 - MC &gt;150 cc</div> <div>09 - Off Road MC</div> <div>10 - Motorized Skateboard/Scter</div> <div>11 - Pedestrian Vehicle</div> <div>12 - Low Speed Vehicle</div> <div>13 - Other Vehicle</div> <div>14 - SUV</div> <div>15 - Cargo Van</div> <div>16 - Motor Home</div> <div>17 - Light Truck (10K or less)</div> <div>18 - Medium Truck (&gt;10K-&lt;26K)</div> <div>19 - Heavy Truck (&gt;26K)</div> <div>20 - Farm Equipment</div> <div>21 - Construction Vehicle</div> <div>22 - MC &lt;150 cc</div> <div>23 - Moped</div> <div>24 - Snowmobile</div> <div>25 - Segway</div> <div>26 - ATV</div> <div>99 - Unknown</div> </div> </div> <div> <div>Non -Commercial Trailer Style</div> <div> <div>01 - No Trailer</div> <div>02 - Camping Trailer</div> <div>03 - Mobile Home</div> <div>04 - Utility Trailer</div> <div>05 - Boat/Jet Ski Trailer</div> <div>06 - Towed Vehicle</div> <div>07 - Horse/Stock Trailer</div> <div>08 - Motorcycle Trailer</div> <div>09 - Multiple Trailers</div> <div>10 - Other (ie. Bicycle)</div> <div>99 - Unknown</div> </div> </div> <div> <div>Underride/Override</div> <div> <div>01 - No Underride or Override</div> <div>02 - Underride-Compartment Intrusion</div> <div>03 - Underride-No Compartment Intrusion</div> <div>04 - Underride-Compartment Intrusion Unknow</div> <div>05 - Override-Motor Vehicle in Transport</div> <div>06 - Override-Other Motor Vehicle</div> <div>99 - Unknown if Underride or Override</div> </div> </div> <div> <div>Emergency Vehicle Use</div> <div> <div>01 - Yes</div> <div>02 - No</div> <div>99 - Unknown</div> </div> </div> <div> <div>Emergency Equipment Activated</div> <div> <div>01 - Yes</div> <div>02 - No</div> <div>99 - Unknown</div> </div> </div> <div> <div>Special Function of MV in Transport</div> <div> <div>01 - None</div> <div>02 - Police</div> <div>03 - Ambulance/EMS</div> <div>04 - Fire Truck</div> <div>05 - Military</div> <div>06 - Snow Plow</div> <div>07 - Tow Truck</div> <div>08 - MV used as School Bus</div> <div>09 - MV used as Other Bus</div> <div>10 - Construction Equipment</div> <div>11 - Farm Equipment</div> <div>12 - Taxi</div> <div>13 - Train</div> <div>99 - Unknown</div> </div> </div> <div> <div>Contributing Circumstance</div> <div> <div>01 - None</div> <div>02 - Brakes</div> <div>03 - Trailer Brakes</div> <div>04 - Steering</div> <div>05 - Power Train</div> <div>06 - Suspension</div> <div>07 - Tires</div> <div>08 - Wheels</div> <div>09 - Lights (Head, Signal or Tail)</div> <div>10 - Windows/Windshield</div> <div>11 - Rain/Snow/Ice on Windshield</div> <div>12 - Tinted Windows</div> <div>13 - Vehicle Cargo Blocking View</div> <div>14 - Exhaust System</div> <div>15 - Oversized Load</div> <div>16 - Defroster</div> <div>17 - Mirrors</div> <div>18 - Wipers</div> <div>19 - Truck Coupling/Trailer Hitch/Safety Chain</div> <div>20 - Stalled Vehicle</div> <div>21 - Cruise Contro</div> <div>22 - Other</div> <div>99-Unknown</div> </div> </div> </div>	<div> <div>Vehicle Maneuver/Action prior to crash</div> <div> <div>01 - Straight Ahead</div> <div>02 - Backing</div> <div>03 - Changing Lanes</div> <div>04 - Overtaking/Passing</div> <div>05 - Turning Right</div> <div>06 - Turning Left</div> <div>07 - Make U-Turn</div> <div>08 - Leaving a Traffic Lane/Parking</div> <div>09 - Entering a Traffic Lane</div> <div>10 - Slowing</div> <div>11 - Negotiating a Curve</div> <div>12 - Parked</div> <div>13 - Stopped in Traffic</div> <div>14 - Driverless Motor Vehicle</div> <div>15 - Trafficway Maintenance</div> <div>16 - Other</div> <div>99 - Unknown</div> </div> </div> <div> <div>Road Surface</div> <div> <div>01 - Concrete</div> <div>02 - Asphalt</div> <div>03 - Gravel/Rock</div> <div>04 - Dirt</div> <div>05 - Brick/Stone</div> <div>99 - Unknown</div> <div>01 - Level</div> <div>02 - Hillcrest</div> <div>03 - Uphill</div> <div>04 - Downhill</div> <div>05 - Sag (Bottom)</div> <div>99 - Unknown</div> </div> </div> <div> <div>Horizontal Alignment</div> <div> <div>01 - Straight</div> <div>02 - Curve Right</div> <div>03 - Curve Left</div> <div>99 - Unknown</div> </div> </div> <div> <div>Total No. Lanes</div> <div> <div>01 - 06, 99 = Unknown</div> <div>(exclude turn lanes)</div> </div> </div> <div> <div>Traffic Control Working Properly</div> <div> <div>01 - Yes</div> <div>02 - No</div> <div>99 - Unknown</div> </div> </div> <div> <div>Traffic Control</div> <div> <div>01 - None</div> <div>02 - Stop Sign</div> <div>03 - Yield Sign</div> <div>04 - Flashing Traffic Signal</div> <div>05 - Do Not Enter Sign</div> <div>06 - Traffic Signal</div> <div>07 - Traffic Signal w/ Ped</div> <div>08 - Traffic Signal w/ Ped &amp; Audible Signals</div> <div>09 - Person (Officer/Flagger, Xing Guard, etc)</div> <div>10 - Pedestrian Crossing</div> <div>11 - No Passing Zone</div> <div>12 - Warning Signs</div> <div>13 - Pavement Markings</div> <div>14 - Traffic Barrels/Cones</div> <div>15 - Temporary Jersey Barrier</div> <div>16 - School Bus Flashing Stop Lamps</div> <div>17 - School Zone Crossing</div> <div>18 - RR Crossing Signal</div> <div>19 - RR Crossing Signal &amp; Gate</div> <div>20 - RR Crossing Cross Buck Sign Only</div> <div>21 - RR Crossing Cross Buck with Stop Sign</div> <div>22 - RR Crossing Cross Buck with Yield Sign</div> <div>23 - Other</div> <div>99 - Unknown</div> </div> </div> <div> <div>Trafficway Description</div> <div> <div>01 - Two-Way-Undivided</div> <div>02 - Two-Way-Undivided w/ Continuous Left Turn Lane</div> <div>03 - Two-Way-Divided, No Barrier</div> <div>04 - Two-Way-Divided, With Barrier</div> <div>05 - One Way</div> <div>99 - Unknown</div> </div> </div> <div> <div>Rumble Strips Present</div> <div> <div>01 - Yes</div> <div>02 - No</div> <div>99 - Unknown</div> </div> </div> <div> <div>Rumble Strips Applicable</div> <div> <div>01 - Yes</div> <div>02 - No</div> <div>99 - Unknown</div> </div> </div> <div> <div>Rumble Strips</div> <div> <div>01 - None</div> <div>02 - Centerline Rumble Strips</div> <div>03 - Median Shoulder Only</div> <div>04 - Transverse Rumble Strips (Road Apprch)</div> <div>05 - Both Shoulders</div></div></div>
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<b>Seat Position</b> 01-Driver 02-Front Row Middle 03-Front Row Right 04-Passenger Front Row Left (for foreign or postal vehicles where the driver is on the Right) 05-Second Row Left 06-Second Row Middle 07-Second Row Right 08-Third Row Left 09-Third Row Middle 10-Third Row Right 11-Fourth Row Left 12-Fourth Row Middle 13-Fourth Row Right 14-Other Row (ie. Bus, Van) 15-Lying Down-Front Seat 16-Lying Down-Other Seat 17-MC Passenger 18-Sleeper Section of Cab 19-Other Enclosed Area 20-Unenclosed Cargo Area 21-Trailing Unit 97-Riding on MV Exterior 98-Other (explain in narrative) 99-Unknown	<b>Air Bag Deployed</b> 01-Not Applicable 02-Not Deployed 03-Deployed Front 04-Deployed Side 05-Deployed Combination 06-Deployed Other 99-Deployment Unknown	<b>Ejection</b> 01-Not Ejected 02-Partially Ejected 03-Totally Ejected 04-Trapped & Extricated 05-Not Applicable 99-Unknown	<b>Injury Status</b> 01-Fatal Injury 02-Incapacitating Injury 03-Non-Incapacitating Injury 04-Possible Injury 05-No Injury 99-Unknown	<b>Injury Description</b> 01-Severe Lacerations 02-Broken 03-Crushed 04-Unconsciousness 05-Internal Unknown 06-Lumps 07-Abrasions 08-Bruises 09-Minor Lacerations 10-Limping 11-Pain 12-Nausea 13-Other (explain in narrative) 14- No Injury 99-Unknown		
<b>Occupant Protection System Operation</b> 01-Apparently Normal 02-Failure/Malfunction 03-Misuse 04-Air Bag System Turned off or Rendered Inoperative 99-Unknown	<b>Seat Belt Usage</b> 01-None Used 02-Not Available 03-Shoulder & Lap belt 04-Shoulder Belt Only 05-Lap Belt Only 06-Passive Restraint Only 07-Restraint used-Type Unk. 08-Forward Facing Child 09-Rear Facing Child Restraint 10-Booster Seat 11-Child Restraint-Type Unk. 12-Helmet Used 13-Other 99-Unknown	<b>Most Injured Area</b> 01-Head 02-Face 03-Neck 04-Thorax (Chest) 05-Abdomen/Pelvis 06-Spine 07-Upper Extremity (Arm...) 08-Lower Extremity (Leg...) 09-No Injury 99-Unknown	<b>Injury Classification</b> 01-Fatal (Not Documented) 02-Fatal (Autopsy) 03-Fatal (Medical Diagnosis) 04-Non-Fatal (Hospitalized overnight or longer) 05-Non-Fatal (Treated & Released from Hospital) 06-First Aid Given at Scene 07-No Treatment 08-Refused Treatment 99-Unknown	<b>Inj. Transported by</b> 01-Not Transported 02-EMS (Ground) 03-EMS (Air) 04-Law Enforcement 05-Other (Private MV) 99-Unknown		
<b>MV #</b> 01 02 03 04 05...	<b>Person Type</b> 01-Driver 02-Passenger 99-Unknown <i>If non-motorist, complete supplemental form</i>	<b>Seat Position</b>	<b>Seat Belt Usage</b>	<b>EMS ID</b>	<b>EMS Run #</b>	<b>Medical Facility</b>
<b>Driver</b>	<b>EMS ID</b>	<b>EMS Run #</b>	<b>Medical Facility</b>			

**Occupant Information**

<b>Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>DOB</b>	<b>Age</b>	<b>Gender</b>	<b>Medical Facility</b>
SSN (Fatafs Only)					M, F, X	
<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone				
<b>Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>DOB</b>	<b>Age</b>	<b>Gender</b>	<b>Medical Facility</b>
SSN (Fatafs Only)					M, F, X	
<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone				
<b>Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>DOB</b>	<b>Age</b>	<b>Gender</b>	<b>Medical Facility</b>
SSN (Fatafs Only)					M, F, X	
<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone				
<b>Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>DOB</b>	<b>Age</b>	<b>Gender</b>	<b>Medical Facility</b>
SSN (Fatafs Only)					M, F, X	
<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone				
<b>Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>DOB</b>	<b>Age</b>	<b>Gender</b>	<b>Medical Facility</b>
SSN (Fatafs Only)					M, F, X	
<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone				

CASE NO. 

## Supplemental Truck/CMV Information

01 - Commercial Vehicle

02 - Non-Commercial Vehicle Vehicle Number 01 02 03 04 05.. GVW  
Combination GVW 01 - 10,000 lbs or less  
02 - 10,001 to 26,000 lbs  
03 - More than 26,000 lbsDriver Last Name Driver First Name MI ICC/MC No. US DOT No. No. Axles  
02-98 or 99 for unknown Carrier's Name Carrier's Street  
Number Carrier's Street Name Street Address or PO Box of Individual,  
Partnership, or Corporation City State Zip Code Carrier's Country Commercial Cargo Body Type 

01 - No Cargo Body  
02 - Bus  
03 - Van/Enclosed Box  
04 - Hopper (grain/chips/Benonite)  
05 - Pole  
06 - Cargo Tank  
07 - Flatbed  
08 - Dump (Belly, Side, or Tail Dump)  
09 - Concrete Mixer  
10 - Auto Transporter  
11 - Tow Truck  
12 - Garbage/Refuse  
13 - Snowplow  
14 - Livestock  
15 - Drilling Equipment  
16 - Other Truck  
17 - Logging  
18 - Intermodal  
99 - Unknown

Commercial Cargo 

01 - Not Applicable  
(Light MV w/o HM Placard or Bobtail)  
02 - General Freight  
03 - Household Goods  
04 - Heavy Machinery  
05 - Motor Vehicles  
06 - Gases in Bulk  
07 - Livestock  
08 - Solids in Bulk  
09 - Liquids in Bulk  
10 - Explosives  
11 - Other Hazardous Materials  
12 - Empty  
13 - Refrigerated Foods  
14 - Other  
99 - Unknown

Commercial MV Configuration 

01 - Passenger Vehicles Carrying Hazardous Materials  
02 - Single-Unit Truck (2 axle and GVWR more than 10,000 lbs)  
03 - Single-Unit Truck (3 or more axles)  
04 - Truck Pulling Trailer(s)  
05 - Truck Tractor Only (Bobtail)  
06 - Truck Tractor/Semi-Trailer  
07 - Truck Tractor/Double Trailer  
08 - Truck Tractor/Triple Trailer (illegal in WY)  
09 - Truck - Can't Classify (More than 10,000 lbs GVWR)  
99 - Unknown

HZ Materials Placard 

01 - Yes, (If yes continue on)  
02 - No  
99 - Unknown

HZ Materials Spill 

01 - Yes  
02 - No  
99 - Unknown

HZ Material Placard ID No. 1 HZ Material Placard ID No. 2 HZ Material Placard ID No. 3 HZ Material Placard Class 1st 

01 - Class 1 Explosives  
02 - Class 2 Gases (Flammable, Non-Flammable, Poison and Toxic)  
03 - Class 3 Flammable Liquids  
04 - Class 4 Flammable Solids  
05 - Class 5 Oxidizers & Organic Peroxides  
06 - Class 6 Poisonous & Toxic  
07 - Class 7 Radioactive Materials  
08 - Class 8 Corrosives  
09 - Class 9 Miscellaneous Hazardous Materials  
10 - Other Placards (Dangerous Mixed Loads, Hot Markings)  
11 - Not Applicable  
99 - Unknown

2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th 13th 14th 15th 16th 17th 18th 19th 20th 21st 22nd 23rd 24th 25th 26th 27th 28th 29th 30th 31st 32nd 33rd 34th 35th 36th 37th 38th 39th 40th 41st 42nd 43rd 44th 45th 46th 47th 48th 49th 50th 51st 52nd 53rd 54th 55th 56th 57th 58th 59th 60th 61st 62nd 63rd 64th 65th 66th 67th 68th 69th 70th 71st 72nd 73rd 74th 75th 76th 77th 78th 79th 80th 81st 82nd 83rd 84th 85th 86th 87th 88th 89th 90th 91st 92nd 93rd 94th 95th 96th 97th 98th 99th 100th 101st 102nd 103rd 104th 105th 106th 107th 108th 109th 110th 111st 112nd 113rd 114th 115th 116th 117th 118th 119th 120th 121st 122nd 123rd 124th 125th 126th 127th 128th 129th 130th 131st 132nd 133rd 134th 135th 136th 137th 138th 139th 140th 141st 142nd 143rd 144th 145th 146th 147th 148th 149th 150th 151st 152nd 153rd 154th 155th 156th 157th 158th 159th 160th 161st 162nd 163rd 164th 165th 166th 167th 168th 169th 170th 171st 172nd 173rd 174th 175th 176th 177th 178th 179th 180th 181st 182nd 183rd 184th 185th 186th 187th 188th 189th 190th 191st 192nd 193rd 194th 195th 196th 197th 198th 199th 200th 201st 202nd 203rd 204th 205th 206th 207th 208th 209th 210th 211st 212nd 213rd 214th 215th 216th 217th 218th 219th 220th 221st 222nd 223rd 224th 225th 226th 227th 228th 229th 230th 231st 232nd 233rd 234th 235th 236th 237th 238th 239th 240th 241st 242nd 243rd 244th 245th 246th 247th 248th 249th 250th 251st 252nd 253rd 254th 255th 256th 257th 258th



Supplemental NON-MotoristNon Motorist Segment No: Vehicle No. 01 02 03... 

Last Name

First Name

MI

Age Gender: M, F, X 

SSN (Fatais Only)

DOB (yyyy/mm/dd)

☐ Home☐ Work☐ Cell Phoneand/  
or☐ Home☐ Work☐ Cell Phone

EMS ID EMS Run #

Medical Facility

Non Motorist Action  
Prior to Crash

- 01 - Entering/Crossing Road
- 02 - Traveling along road w/ traffic
- 03 - Traveling along road against traffic
- 04 - Pushing a Motor Vehicle
- 05 - Approaching or Leaving MV
- 06 - Playing or Working On Motor Vehicle
- 07 - Standing/Laying Down
- 08 - In a parked MV (sitting, etc.)
- 09 - Other
- 99 - Unknown

## Non Motorist Pursuit

- 01 - Recreation Pursuit
- 02 - Going to/from school
- 03 - Non motorist commuter
- 04 - Stranded Motorist
- 05 - Working
- 06 - Cycling
- 07 - Other
- 99 - Unknown

Non Motorist Location  
at time of Crash

- 01 - Marked Crosswalk at Intersection
- 02 - Intersection w/o Marked Crosswalk
- 03 - Non-intersection Crosswalk
- 04 - Driveway Access Crosswalk
- 05 - In Roadway (not in crosswalk or intersection)
- 06 - Median (Not Shoulder)
- 07 - Island
- 08 - Shoulder
- 09 - Sidewalk
- 10 - Roadside
- 11 - Outside of Traffic Way
- 12 - Dedicated Bike Lane
- 13 - Shared-Used Path or Trail
- 14 - Inside Building
- 15 - Other
- 99 - Unknown

## Most Injured Area

- 01 - Head
- 02 - Face
- 03 - Neck
- 04 - Thorax (Chest)
- 05 - Abdomen/Pelvis
- 06 - Spine
- 07 - Upper Extremity (ie Arm)
- 08 - Lower Extremity (ie Leg)
- 09 - No Injury
- 99 - Unknown

## Non Motorist Type

- 03 - Pedestrian
- 04 - Pedacyclist
- 05 - Occupant of MV NOT in transport (parked)
- 06 - Pedestrian Conveyance
- 07 - Other Pedestrian (ie.wheelchair)
- 99 - Unknown type

Non Motorist Condition at Time of  
Crash

- 01 - Apparently Normal
- 02 - Emotional (ie, depressed, angry)
- 03 - Ill (sick)
- 04 - Fell Asleep, Fainted
- 05 - Fatigued
- 06 - Under Influence of Medication
- 07 - Physical Disability
- 08 - Suspected Drug Use
- 09 - Suspected Alcohol Use
- 10 - Other
- 99 - Unknown

Non Motorist Action at  
Time of Crash  
(choose up to 2)

- 01 - No Improper Action
- 02 - Improper Crossing
- 03 - Darting
- 04 - In Roadway
- 05 - Failure to yield ROW
- 06 - Not Visible (Dark Clothing)
- 07 - Inattentive (talking, eating, etc)
- 08 - Disobey Traffic Signs, Officer, etc.
- 09 - On Wrong Side of Road
- 10 - Other Improper Action
- 99 - Unknown

1st   
2nd Injured  
Transported by

- 01-Not Transported
- 02-EMS (Ground)
- 03-EMS (Air)
- 04-Law Enforcement
- 05-Other (Private MV)
- 99-Unknown

## Injury Description

- 01 - Severe Lacerations
- 02 - Broken
- 03 - Crushed
- 04 - Unconsciousness
- 05 - Internal Unknown
- 06 - Lumps
- 07 - Abrasions
- 08 - Bruises
- 09 - Minor Lacerations
- 10 - Limping
- 11 - Pain
- 12 - Nausea
- 13 - Other
- 14 - No Injury
- 99 - Unknown

## Injury Classification

- 01 - Fatal (Not Documented)
- 02 - Fatal (Autopsy)
- 03 - Fatal (Medical Diagnosis)
- 04 - Non-Fatal (hospitalized overnight or longer)
- 05 - Non-Fatal (Treated and Released from Hospital)
- 06 - First Aid Given at Scene
- 07 - No Treatment
- 08 - Refused Treatment
- 99 - Unknown

## Non Motorist Proximity

- 01 - Same city as report made
- 02 - Lives 25 miles or less from crash scene
- 03 - Lives greater than 25 miles from crash scene by within Wyoming
- 04 - Does not have residence in Wyoming
- 99 - Unknown

Non Motorist Safety Equipment  
(choose up to 2)

- 01 - None
- 02 - Helmet
- 03 - Protective Pad (elbow, knee, etc.)
- 04 - Reflective Clothing
- 05 - Lighting
- 06 - Other
- 07 - Not Applicable
- 99 - Unknown

1st   
2nd Suspect Alcohol  
on Non Motorist

- 01-Yes
- 02-No
- 99-Unknown

If Alcohol Test performed other than Breath then form 902E will be required with results at a later date.

Alcohol  
Test Result

## Alcohol Test Type

- 01 - No Test Performed
- 02 - Test Refused
- 03 - Blood
- 04 - Serum
- 05 - Breath
- 06 - Urine
- 07 - Other
- 99 - Unknown

Suspect Drugs on Non  
Motorist

- 01-Yes
- 02-No
- 99-Unknown

If Drug Test performed then form 902E will be required with results at a later date.

## Drug Test Type

- 01 - No Test Performed
- 02 - Test Refused
- 03 - Blood
- 04 - Serum
- 05 - Urine
- 06 - Other
- 99 - Unknown

## Injury Status

- 01 - Fatal Injury
- 02 - Incapacitating Injury
- 03 - Non-Incapacitating Injury
- 04 - Possible Injury
- 05 - No Injury
- 99 - Unknown

CASE NO. 

## SUPPLEMENTAL BUS INFORMATION

Vehicle No. 1 2 3... Actual No. of  
Bus  
Occupants  
(01 to 99) Carrier's Name Carrier's Street  
Number Carrier's City Street Name Street Address or PO Box of Individual,  
Partnership, or Corporation City State Zip Code ICC/MC No. Carrier's Country US DOT No. 

## Occupant Data Required only for Fatal or Injured Occupants

54	53	52	51	50
49	48	47	46	45
44	43	42	41	40
39	38	37	36	35
34	33	32	31	30
29	28	27	26	25
24	23	22	21	20
19	18	17	16	15
14	13	12	11	10
9	8	7	6	5
4	3	2	1	0

Layout A

67	66	65	64	63
62	61	60	59	58
57	56	55	54	53
52	51	50	49	48
47	46	45	44	43
42	41	40	39	38
37	36	35	34	33
32	31	30	29	28
27	26	25	24	23
22	21	20	19	18
17	16	15	14	13
12	11	10	9	8
7	6	5	4	3
2	1	0	0	0

Layout B

80	79	78	77	76
75	74	73	72	71
70	69	68	67	66
65	64	63	62	61
60	59	58	57	56
55	54	53	52	51
50	49	48	47	46
45	44	43	42	41
40	39	38	37	36
35	34	33	32	31
30	29	28	27	26
25	24	23	22	21
20	19	18	17	16
15	14	13	12	11
10	9	8	7	6
5	4	3	2	1
0	0	0	0	0

Layout C

15	14	13
12	11	10
9	8	7
6	5	4
3	2	1

Layout D

## Commercial / Charter / School Bus Layouts

- ☐ A ☐ B ☐ C ☐ Other Bus
- ☐ D (Bus/Van 9-15 passengers)

## Seat Position

02-60 (see bus layout for passenger position)  
97-Riding on MV Exterior  
98-Other (explain in narrative)  
99-Unknown

## Person Type

02-Passenger  
99-Unknown

If non-motorist, complete supplemental form

## MV #

01  
02  
03...

MV #  
Person Type:  
Seat Position  
Seat Belt Usage

## Occupant Protection System Operation

01-Apparently Normal  
02-Failure/Malfunction  
03-Misuse  
99-Unknown

## Seat Belt Usage

01-None Used  
02-Not Available  
03-Shoulder & Lap belt  
04-Shoulder Belt Only  
05-Lap Belt Only  
06-Passive Restraint Only  
07-Restraint used-Type Unk.  
08-Forward Facing Child  
09-Rear Facing Child Restraint  
10-Booster Seat  
11-Child Restraint-Type Unk.  
12-Helmet Used  
13-Other  
99-Unknown

## Ejection

01-Not Ejected  
02-Partially Ejected  
03-Totally Ejected  
04-Trapped & Extricated  
05-Not Applicable  
99-Unknown

Seat Belt Operation  
Ejection  
Injury Status  
Injury Area  
Injury Description  
Injury Classification  
Injured Transported by

## Injury Status

01-Fatal Injury  
02-Incapacitating Injury  
03-Non-Incapacitating Injury  
04-Possible Injury  
05-No Injury  
99-Unknown

## Most Injured Area

01-Head  
02-Face  
03-Neck  
04-Thorax (Chest)  
05-Abdomen/Pelvis  
06-Spine  
07-Upper Extremity (Arm...)  
08-Lower Extremity (Leg...)  
09-No Injury  
99-Unknown

## Injury Description

01-Severe Lacerations  
02-Broken  
03-Crushed  
04-Unconsciousness  
05-Internal Unknown  
06-Lumps  
07-Abrasions  
08-Bruises  
09-Minor Lacerations  
10-Limping  
11-Pain  
12-Nausea  
13-Other (explain in narrative)  
14- No Injury  
99-Unknown

## Injury Classification

01-Fatal (Not Documented)  
02-Fatal (Autopsy)  
03-Fatal (Medical Diagnosis)  
04-Non-Fatal (Hospitalized overnight or longer)  
05-Non-Fatal (Treated & Released from Hospital)  
06-First Aid Given at Scene  
07-No Treatment  
08-Refused Treatment  
99-Unknown

## Inj. Transported by

01-Not Transported  
02-EMS (Ground)  
03-EMS (Air)  
04-Law Enforcement  
05-Other (Private MV)  
99-Unknown

EMS ID EMS Run #

Last Name	First Name	MI	DOB	Age	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone	<input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell Phone				
Medical Facility <input type="text"/>					
SSN (Fatales Only) <input type="text"/>					
Last Name					
First Name					
MI					
DOB					
Age					
Gender					
Medical Facility <input type="text"/>					
SSN (Fatales Only) <input type="text"/>					

# SUPPLEMENTAL BUS INFORMATION

**Layout A**

54	53	52	51	50
49	48		47	46
45	44		43	42
41	40		39	38
37	36		35	34
33	32		31	30
29	28		27	26
25	24		23	22
21	20		19	18
17	16		15	14
13	12		11	10
9	8		7	6
5	4		3	2
1				

**AISLE**

Cur Side

Driver

**Layout B**

67	66	65	64	63	62
61	60	59		58	57
56	55	54		53	52
51	50	49		48	47
46	45	44		43	42
41	40	39		38	37
36	35	34		33	32
31	30	29		28	27
26	25	24		23	22
21	20	19		18	17
16	15	14		13	12
11	10	9		8	7
6	5	4		3	2
1					

**AISLE**

Cur Side

Driver

**Layout C**

80	79	78	77	76	75	74
73	72	71		70	69	68
67	66	65		64	63	62
61	60	59		58	57	56
55	54	53		52	51	50
49	48	47		46	45	44
43	42	41		40	39	38
37	36	35		34	33	32
31	30	29		28	27	26
25	24	23		22	21	20
19	18	17		16	15	14
13	12	11		10	9	8
7	6	5		4	3	2
1						

**AISLE**

Cur Side

Driver

**Layout D**

15	14	13
12	11	10
9	8	7
6	5	4
3	2	Driver

**MV #** **Person Type:** **Seat Position** **Seat Belt Usage** **Seat Belt Operation** **Ejection** **Injury Status** **Injury Area** **Injury Description** **Injury Classification** **Injured Transported by** **EMS ID** **EMS Run #**

>> Last Name	First Name	MI	DOB	Age	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
Medical Facility					
>> Last Name	First Name	MI	DOB	Age	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
Medical Facility					
>> Last Name	First Name	MI	DOB	Age	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
Medical Facility					
>> Last Name	First Name	MI	DOB	Age	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
Medical Facility					
>> Last Name	First Name	MI	DOB	Age	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
Medical Facility					
>> Last Name	First Name	MI	DOB	Age	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
Medical Facility					
>> Last Name	First Name	MI	DOB	Age	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
<input type="radio"/> Home	<input type="radio"/> Work	<input type="radio"/> Cell Phone	and/or		<input type="radio"/> Home
Medical Facility					



**SUPPLEMENTAL ALCOHOL OR DRUG TEST  
RESULTS DRIVER**

Vehicle No. 01 02 03...

CASE NO.

Last Name  First Name  MI

**Alcohol Test Results**

Alcohol  
Test Result

**Drug Test Results**

Drug Test Indication	<input type="text"/>
P - Positive	
N - Negative	
99 - Unknown	

Drug Test Results choose up to 4	1st choice
01 - Marijuana	<input type="text"/>
02 - Cocaine	2nd choice <input type="text"/>
03 - Opiate	3rd choice <input type="text"/>
04 - Amphetamine	4th choice <input type="text"/>
05 - PCP	
06 - Other Controlled Substance	
07 - Other Drug (excludes post crash drugs)	



**SUPPLEMENTAL ALCOHOL OR DRUG TEST  
RESULTS NON-MOTORIST**

Vehicle No. 01 02 03...

CASE NO.

Last Name  First Name  MI

**Alcohol Test Results**

Alcohol  
Test Result

**Drug Test Results**

Drug Test Indication	<input type="text"/>
P - Positive	
N - Negative	
99 - Unknown	

Drug Test Results choose up to 4	1st choice
01 - Marijuana	<input type="text"/>
02 - Cocaine	2nd choice <input type="text"/>
03 - Opiate	3rd choice <input type="text"/>
04 - Amphetamine	4th choice <input type="text"/>
05 - PCP	
06 - Other Controlled Substance	
07 - Other Drug (excludes post crash drugs)	





# INVESTIGATOR'S PDO/SINGLE VEHICLE ANIMAL CRASH ONLY

PR-903  
Revised 4/13/2012

CASE NO. \_\_\_\_\_ BUSES EXCLUDED \_\_\_\_\_

Highway Safety Office Use Only  
Crash Type: ☐ G ≥ \$1,000 ☐ N < \$1000 ☐ P - Private

Investigating Agency  
01 - City PD 02 - Sheriff 03 - BIA 04 - Forest Service 05 - Campus Police 06 - WHP 07 - Other

Division (WHP only) \_\_\_\_\_

Badge # \_\_\_\_\_ Officer's Last Name \_\_\_\_\_

County \_\_\_\_\_ in / near \_\_\_\_\_ City \_\_\_\_\_

Crash occurred on: Highway/Street \_\_\_\_\_ at intersection with: Highway/Street \_\_\_\_\_

Highway Section # \_\_\_\_\_

If NOT at Intersection ☐ Feet or Miles \_\_\_\_\_ Direction \_\_\_\_\_ nearest street, highway, ramp, bridge, city, railroad crossing, etc. \_\_\_\_\_

GPS Latitude \_\_\_\_\_ GPS Longitude \_\_\_\_\_

# Vehicles \_\_\_\_\_ Investigated at Scene by Law \_\_\_\_\_  
# Drivers \_\_\_\_\_ Enforcement Yes ☐ No ☐  
# Persons \_\_\_\_\_ Insurance Verified Yes ☐ No ☐  
Vehicle Towed Yes ☐ No ☐  
Intersection LRS # \_\_\_\_\_  
Milepost Marker \_\_\_\_\_

## DRIVER INFORMATION

Driver's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ Gender \_\_\_\_\_ DOB (yyyy/mm/dd) \_\_\_\_\_

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State (FIPS) \_\_\_\_\_ Age \_\_\_\_\_ HomePhone \_\_\_\_\_ Work phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

## VEHICLE INFORMATION

Vehicle owner same as driver ☐

Vehicle Owner's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ Posted Speed \_\_\_\_\_ Est. Speed \_\_\_\_\_

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Make (example: Chevrolet, Dodge, Toyota) \_\_\_\_\_ Model (example: Silverado, Dakota, Solara) \_\_\_\_\_ Year \_\_\_\_\_

Vehicle Identification Number (VIN - 17 Digits) \_\_\_\_\_ License Plate No. \_\_\_\_\_ State (FIPS) \_\_\_\_\_

Was Commercial Vehicle Involved? ☐ YES ☐ NO

If yes, fill out supplement PR-902B

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

## Most Harmful Event (Animal)

30 - Horse 32 - Pig 34 - Other Domestic (Dog, Llama,...) 36 - Deer 38 - Antelope  
31 - Cow 33 - Sheep 35 - Elk 37 - Moose 39 - Buffalo 40 - Other Wild

## Trailer Style

- 1 - No Trailer
- 2 - Camping Trailer
- 3 - Mobile Home
- 4 - Utility Trailer
- 5 - Boat/Jet Ski Trailer
- 6 - Towed Vehicle
- 7 - Horse/Stock Trailer
- 8 - Motorcycle Trailer
- 9 - Multiple Trailers
- 10 - Other (ie. Bicycle)
- 99 - Unknown

## Vehicle Maneuver/Action

- 1 - Straight Ahead
- 2 - Backing
- 3 - Changing Lanes
- 4 - Overtaking/Passing
- 5 - Turning Right
- 6 - Turning Left
- 7 - Make U-Turn
- 8 - Leaving a Traffic Lane/Parking
- 9 - Entering a Traffic Lane
- 10 - Slowing
- 11 - Negotiating a Curve
- 12 - Parked
- 13 - Stopped in Traffic
- 14 - Driverless Motor Vehicle
- 15 - Trafficway Maintenance
- 16 - Other
- 99 - Unknown

## Weather

- 1 - Clear
- 2 - Raining
- 3 - Snowing
- 4 - Fog
- 5 - Blowing Dust/Sand/Dirt
- 6 - Severe Wind Only
- 7 - Blizzard
- 8 - Sleet/Hail/Freezing Rain
- 9 - Blowing Snow
- 10 - Cloudy/Overcast
- 11 - Smoke
- 12 - Other
- 99 - Unknown

## Road

- 1 - Dry
- 2 - Wet
- 3 - Icy/Frost
- 4 - Snow
- 5 - Mud/Dirt/Gravel
- 6 - Slush
- 7 - Oil/Fuel
- 8 - Sand on Dry Pavement
- 9 - Sand on Icy Road
- 10 - Water standing/Running
- 11 - Other
- 99 - Unknown



Vehicle #1  
Damage Estimate

Shade number next to the area damaged on your vehicle

## Lighting

- 1 - Daylight
- 2 - Darkness/Unlighted
- 3 - Darkness/Lighted
- 4 - Dawn
- 5 - Dusk
- 99 - Unknown

Seat Position	Safety Equipment Usage	Injury Status	Air Bag Deployed
1-Driver 2-Front Row Middle 3-Front Row Right 4-Passenger Front Row Left (for foreign or postal vehicles) 5-Second Row Left 6-Second Row Middle 7-Second Row Right 8-Third Row Left 9-Third Row Middle 10-Third Row Right 11-Fourth Row Left 12-Fourth Row Middle 13-Fourth Row Right 14-Other Row (ie. Bus, Van) 15-Lying Down-Front Seat 16-Lying Down-Other Seat 17-MC Passenger 18-Sleeper Section of Cab 19-Other Enclosed Area 20-Unenclosed Cargo Area 21-Trailing Unit 97-Riding on MV Exterior 98-Other (explain in narrative) 99-Unknown	1-None Used 2-Not Available 3-Shoulder & Lap belt 4-Shoulder Belt Only 5-Lap Belt Only 6-Passive Restraint Only 7-Restraint used-Type Unk. 8-Forward Facing Child 9-Rear Facing Child Restraint 10-Booster Seat 11-Child Restraint-Type Unk. 12-Helmet Used 13-Other 99-Unknown	5-No Injury  If any injuries form 902 must be used	1-Not Applicable 2-Not Deployed 3-Deployed Front 4-Deployed Side 5-Deployed Combination 6-Deployed Other 7-Deployment Unknown

**VEHICLE # 1**      Please Attach More Sheets If Needed  
**Driver # 1**

PASSENGER INFORMATION FOR VEHICLE #1							
Last	Name	First	Name	MI	AGE	Gender	
						M, F, X	

<b>Driver's Action</b> (choose up to 4/ ie. 01, 10, 25) <table style="width: 100%;"> <tr><td>1st</td><td></td></tr> <tr><td>2nd</td><td></td></tr> <tr><td>3rd</td><td></td></tr> <tr><td>4th</td><td></td></tr> </table>	1st		2nd		3rd		4th		<b>Driver's Condition</b> (choose up to 2) <table style="width: 100%;"> <tr><td>1st</td><td></td></tr> <tr><td>2nd</td><td></td></tr> </table>	1st		2nd		<b>Driver's Distraction</b> (choose one) <table style="width: 100%;"> <tr><td></td><td></td></tr> </table>		
1st																
2nd																
3rd																
4th																
1st																
2nd																
01 - No Improper Driving 02 - Ran Off Road 03 - Failed to Yield ROW 04 - Disregarded Traffic Signs 05 - Ran Red Light 06 - Disregarded Other Road Marking 07 - Speeding 08 - Drove too Fast for Conditions 09 - Improper Turn or No Signal 10 - Improper Backing 11 - Improper Passing 12 - Improper Parking 13 - Wrong Side/Wrong Way 14 - Following too Close 15 - Failed to Keep Proper Lane 16 - Erratic/Reckless/Careless/Aggressive 17 - Avoiding an Object on Road 18 - Avoiding Animal 19 - Avoiding Non-Motorist 20 - Avoiding MV 21 - Swerve Due to Wind/Slippery Surface 22 - Over Corrected/Over Steered 23 - Evading Law Enforcement 24 - Other Improper Action 99 - Unknown	01 - Apparently Normal 02 - Emotional (depressed, angry, disturbed...) 03 - ill (Sick) 04 - Fell Asleep, Fainted 05 - Fatigued 06 - Under Influence of Medication 07 - Physical Disability 08 - Suspected Drug Use 09 - Suspected Alcohol Use 10 - Other 99 - Unknown	01 - Not Distracted 02 - Electronic Communication Device (cell, pager...) 03 - Other Electronic Device (palm, TV, computer...) 04 - Other Distraction Inside MV (passenger, pet...) 05 - Other Distraction Outside MV 99 - Unknown														

Location of FHE
01 - On Roadway
02 - Off Roadway
03 - Shoulder
04 - Median
05 - On OTHER Roadway
06 - Outside of ROW
07 - Gore
08 - Separator
09 - In Parking Lane/Zone
10 - Tunnel
11 - Bridge
12 - Port of Entry
13 - Rest Area
99 - Unknown

Narrative (Briefly describe the events of the crash)

DIAGRAM
Please indicate direction of travel <div style="text-align: center; margin-top: 20px;"> </div>