# LSL BLVD – VMP – I-70

Roundabout Concept Study

**CITY OF LAKE SAINT LOUIS**

May 27, 2015

Authored by: Derek Koestel

# LSL BLVD – VMP – I-70

Roundabout Concept Study

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## Application

(Signed Copy Attached)

ST. CHARLES COUNTY

# Road Board Application

Clear Form and Create New Project | Retrieve Existing Project | Update/Save Project

PROJECT RECORD NUMBER CRB15-042 | Clear All Fields

## PROJECT INFORMATION

Name: LSL -VMP - I70 Roundabout Concept Study

Limits: Intersection of Lake Saint Louis Boulevard with Veterans Memorial Parkway and east bound I-70 ramps.

Project Length (miles) .05 Traffic Volume: ADT 18,500 Year 2015

## CONTACT INFORMATION

Sponsoring Agency: Lake Saint Louis

Contact Person Name: Derek Koestel

Title: Director of Public Works

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## FEDERAL FUNCTIONAL CLASSIFICATION: Please check one of the following.

- [ ] Principal Arterial
- [x] Minor Arterial
- [ ] Major Collector
- [ ] Minor Collector
- [ ] Local
- [ ] Unclassified

## PROJECT DESCRIPTION: Please attach additional pages if necessary.

This application is for the preparation of a concept study to improve the function of the two closely spaced signals at Veterans Memorial Parkway and the east bound ramps of I-70 on Lake Saint Louis Boulevard.

The starting point of the study is a double roundabout (sketch attached). The scope of the study will be as follows:

-Establish Design Criteria
-Alternative Analysis – review previous concepts (I-70 EIS) – consider alternate options
-Collect Traffic Data (VMP, EB ramps, and WB ramps)
-Request Utility maps to identify significant conflicts
-Prepare geometric design for one alternative sufficient to complete remainder of scope
-Create VISSUM Model to evaluate performance of selected alternative (includes EB and WB Ramps)
-Review Model to determine if adequate improvement is provided to complete remainder of scope
-Provide CMAQ related information including delay reduction, and Emissions reduction
-Determine approximate right-of-way need
-Provide opinion of cost for design, utility relocation, property acquisition, and construction
-Provide concept plan for use in grant applications
-Develop performance measures

**PROJECT TYPE:** Please check one of the following.

- [ ] Traffic Flow
- [ ] Safety
- [ ] Condition
- [ ] Operation Safe Streets (10 pts)
- [ ] New Road (10 pts)
- [x] Study (10 pts)

**Traffic Flow:** Select a priority condition that is based on the level of service.

- [ ] *High Priority Condition (10 pts)*
  Peak hour Level of Service E or F and project includes features to improve traffic flow and reduce travel time delay.
- [ ] *Medium Priority Condition (5 pts)*
  Peak hour Level of Service D and project includes features to improve traffic flow and reduce travel time delay.
- [ ] *Lower Priority Condition (0 pts)*
  Peak hour Level of Service A, B or C and project includes features to improve traffic flow and reduce travel time delay.

**Safety:** Select a priority condition that is based on the crash rate.

- [ ] *High Priority Condition (10 pts)*
  Crash rate per million vehicle miles is 6.0 or higher and project addresses specific safety issues(s) related to the crashes or addresses fatal/serious injury crash(es).
- [ ] *Medium Priority Condition (5 pts)*
  Crash rate per million vehicle miles is 3.0 to 5.9 and project addresses specific safety issues(s) related to crashes.
- [ ] *Lower Priority Condition (0 pts)*
  Accident rate per million vehicle miles is less than 3.0 and project addresses specific safety issue(s).

Total Number of Crashes Over Last 3 Years 20

Number of Crashes by type: Fatal 0 Serious Injury 1 Property Damage Only 19

**Condition**

Please complete the following sections using either the pavement condition index from inventory completed by Transmap or the bridge sufficiency rating calculated by MoDOT.

**Pavement Condition (Arterials Only):** Select a priority condition that is based on the Pavement Condition Index.

- [ ] *High Priority Condition (10 pts)*
  Pavement Condition Index 20-56 on scale of 100 or equivalent and project will improve deficient condition.
- [ ] *Medium Priority Condition (5 pts)*
  Pavement Condition Index 57-75 on scale of 100 or equivalent and project will improve deficient condition.
- [ ] *Lower Priority Condition (0 pts)*
  Pavement Condition Index greater than 75 on scale of 100 or equivalent and project will improve deficient condition.

Pavement Condition Index _____

***Bridge:*** Select a priority condition that is based on the Bridge Sufficiency Rating.

☐ *High Priority Condition (10 pts)*
Bridge sufficiency rating less than 20 on scale of 100 and project will improve deficient condition.

☐ *Medium Priority Condition (5 pts)*
Bridge sufficiency rating 20-49.9 on scale of 100 and project will improve deficient condition.

☐ *Lower Priority Condition (0 pts)*
Bridge sufficiency rating greater than 50 on scale of 100 and project will improve deficient condition.

Bridge Sufficiency Rating _____

***Operation Safe Streets – Arterials and Major Collectors Only***

The goal of Operation Safe Streets is to promote a systematic approach to improve roadway safety in St. Charles County.

***Safety Countermeasures – Rural Roads:*** Please check as many of the following that apply.

☐ Clear Zone Improvements
☐ High Friction Pavement Treatment
☐ Reconfiguration
☐ Rumble Strips
☐ Safety Edge
☐ Signs (advance curve warning signs, reflective posts, dynamic curve warning signs)
☐ Other _____

***Safety Countermeasures – Urban Roads:*** Please check as many of the following that apply.

☐ Access Management
☐ Clear Zone Improvements
☐ HAWK Pedestrian Beacon
☐ High Friction Pavement Treatment
☐ Median and Pedestrian Crossing Islands
☑ Reconfiguration
☐ Remove Unwarranted Stop Signs or Signals
☐ Traffic Signal Backplates with Reflective Borders
☐ Other _____

## *OTHER INFORMATION*

Anticipated Useful Life of the Proposed Improvements (years) _____

Estimated Date of Completion _____

| *FUNDING FOR IMPROVEMENTS* | | | | |
|---|---|---|---|---|
| | County | City | Other | Total |
| Design | $ 36,000 | $ 4,000 | | **$ 40,000** |
| Right-of-Way | | | | **$ 0** |
| Utility Relocations | | | | **$ 0** |
| Construction | | | | **$ 0** |
| **TOTAL** | **$ 36,000** | **$ 4,000** | **$ 0** | **$ 40,000** |
| PERCENT (%) | 90.00% | 10.00% | 0.00% | |

| *FINANCIAL PLAN* | | | | |
|---|---|---|---|---|
| **Design** | 2016 | 2017 | 2018 | Total |
| Sponsor | $ 4,000 | | | **$ 4,000** |
| County | $ 36,000 | | | **$ 36,000** |
| Federal | | | | **$ 0** |
| Other | | | | **$ 0** |
| **Utility Relocations** | 2016 | 2017 | 2018 | Total |
| Sponsor | | | | **$ 0** |
| County | | | | **$ 0** |
| Federal | | | | **$ 0** |
| Other | | | | **$ 0** |
| **Right-of-Way** | 2016 | 2017 | 2018 | Total |
| Sponsor | | | | **$ 0** |
| County | | | | **$ 0** |
| Federal | | | | **$ 0** |
| Other | | | | **$ 0** |
| **Construction** | 2016 | 2017 | 2018 | Total |
| Sponsor | | | | **$ 0** |
| County | | | | **$ 0** |
| Federal | | | | **$ 0** |
| Other | | | | **$ 0** |

*Please make sure the following documents are submitted.*

- [x] Signed Application
- [x] Conceptual Plans
- [x] Support Documentation
- [x] Location Map
- [x] Cost Estimate and Schedule
- [ ] Performance Measures

A minimum of 10 points is required for the project to be considered.

Signature

6-10-2015
Date

## Project Description

This application is for the preparation of a concept study to improve the function of the two closely spaced intersections at Veterans Memorial Parkway and the east bound ramps of I-70 on Lake Saint Louis Boulevard.

The EB Ramps of I-70 currently operate with LOS D in the GGL Phase II Signal Coordination Report. Because these two intersections are so closely spaced they operate as one intersection, and are controlled by a single signal controller. Utilizing the GGL Phase II Signal Coordination Report and combing the two intersections yields a LOS D with the existing timings and although there is some improvement the LOS after proposed timing changes remains a D for the combined intersection. This correlates to an expected LOS A or B with a roundabout replacing the two intersections.

The starting point of the study are two round about concepts (attached). The scope of the study will be as follows:

-Establish Design Criteria

-Alternative Analysis – review previous concepts (I-70 EIS) – consider alternate options

-Collect Traffic Data (VMP, EB ramps, and WB ramps)

-Request Utility maps to identify significant conflicts

-Prepare geometric design for one alternative sufficient to complete remainder of scope

-Create VISSUM Model to evaluate performance of selected alternative (includes EB and WB ramps)

-Review Model to determine if adequate improvement is provided to complete remainder of scope

-Provide CMAQ related information including delay reduction, and Emissions reduction

-Determine approximate right-of-way need

-Provide opinion of cost for design, utility relocation, property acquisition, and construction

-Provide concept plan for use in grant applications

-Develop performance measures

## Location Map

# LSL BLVD – VMP – I-70

Roundabout Concept Study

## Concept Plan

### Concept 1

## Concept 2

## Cost Estimate

Professional Services - $44,000

## Schedule

Receive Notification - September 2015

Execute Agreement – December 2015

Engineering Selection – January 2016

Engineering Contract Execution - March 2016

Review Available Data – April 2016

Meet with MODOT – April 2016

Collect Counts – May 2016

Design and Modeling – June 2016

Review Report (MODOT and City) – July 2016

Final Report – August 2016

## Corridor L - Lake Saint Louis Boulevard (I-70)

**Recommendation for Implementation**

Implement the timing and coordination plans as proposed and detailed below. Field Adjustments may be required to address any queuing or increased delays on the EB approach at Veterans Memorial Parkway during the AM peak.

### Description of Corridor

The study corridor is contained within the limits of West Terra Lane (north outer road) and Veterans Memorial Parkway (south outer road). This corridor provides access to I-70 for the residential and commercial uses on either side of the interstate.

Lake Saint Louis Boulevard at the I-70 interchange is made up of the following four fully actuated, signalized intersections:

- West Terra (north outer road)
- Westbound I-70 Ramps
- Eastbound I-70 Ramps
- Veterans Memorial Parkway (south outer road)

The corridor generally has four north-south through lanes, with dedicated turning lanes at each intersection. These intersections are closely spaced, with the majority of the turning lanes extending to the adjacent signal, including side-by-side left-turn lanes at the interchange to allow for more stacking room.

Of the four intersections, coordination is only provided from the westbound I-70 ramps to Veterans Memorial Parkway, and coordinated timing plans are provided during the weekday morning, midday and afternoon peak hours. The West Terra Lane signal runs time-of-day plans during all mentioned peak hours, but is operated at a different cycle length. All four signals operate in "free" mode on the weekend.

The eastbound ramps and Veterans Memorial Parkway intersections are operated by one controller and several overlaps due to their proximity.

This study focused on developing coordinated timing plans for the weekday morning, midday and afternoon and weekend peak hours. In addition, clearance intervals and pedestrian timings were evaluated for all intersections. Updates to any timing parameters are reflected in the proposed operating conditions analysis.

### Existing Traffic Volumes and Conditions

Turning movement traffic volumes were collected at the interchange during all peak hours, and during the morning and afternoon peak hours on a Saturday. The midday and Saturday volumes at the outer roads were estimated based upon the volumes collected at the adjacent intersections during those peak hours, as well as known traffic patterns and observations performed during peak hour travel time runs.

Because extensive traffic volume data was not available, weekday morning, midday and afternoon peak hours were assumed to be from 7:00-8:00 a.m., 12:00-1:00pm, and 5:00-6:00 p.m., respectively, and the Saturday peak hour 12:00-1:00 p.m. This assumption was based upon area traffic patterns and the performed observations.

The majority of traffic in the morning and afternoon correlates to an eastern commute, with the majority of southbound and northbound traffic on Lake St. Louis Boulevard turning onto the eastbound I-70 ramp in the morning and coming off of the westbound ramp in the afternoon. Specifically, there are over 200 southbound lefts and 300 northbound right turns onto the ramp during the morning peak hour; these volumes are reversed in the afternoon as commuters head home. These turning movements represent approximately half of the respective northbound and southbound approaches at the eastbound ramp.

There is also a fair amount of traffic going to and from the west on Veterans Memorial Parkway during these peak hours as there are residential uses as well as a hospital accessible from the roadway. There are approximately 200-250 eastbound left turns and southbound right turns at Veterans Memorial Parkway during both the morning and afternoon peak hours.

Midday and Saturday volumes were lighter, but traffic patterns resembled those of the morning peak hour with the majority of motorists turning onto eastbound I-70; volumes to and from the west on Veterans Memorial Parkway were still substantial.

### Existing Intersection Operations

Capacity analyses were conducted using the Synchro Software package to determine if each intersection had sufficient capacity. Acceptable geometrics and signalization parameters must be provided for a coordinated signal system to operate effectively. Inadequate capacity would result in queues or delays that would interfere with progressive traffic flow.

The intersection operating conditions for the Existing conditions are summarized in Table L1 below for each peak period.

As can be seen, all intersections along the corridor currently operate at LOS D or better during the peak hour. Several approaches and individual movements operate at LOS E during the morning peak hour, which includes the southbound left onto the eastbound I-70 on-ramp and then some side street movements.

**TABLE L1: LAKE SAINT LOUIS BOULEVARD (I-70) EXISTING INTERSECTION OPERATIONS**

| *Intersection/Approach* | *AM Peak Hour* | *Midday Peak Hour* | *PM Peak Hour* | *Saturday Peak Hour* |
|---|---|---|---|---|
| ***Lake St Louis Blvd at West Terra*** | | | | |
| Eastbound Approach | D (53.9) | D (36.0) | C (22.6) | B (17.1) |
| Westbound Approach | E (55.4) | D (35.8) | D (38.7) | B (14.2) |
| Northbound Approach | A (4.4) | A (4.8) | A (9.7) | A (7.1) |
| Southbound Approach | A (8.9) | A (9.9) | B (15.4) | B (14.4) |
| Overall Intersection | B (17.3) | B (13.7) | C (22.2) | B (11.7) |
| ***Lake St Louis Blvd at Westbound I-70 Ramps*** | | | | |
| Westbound Approach | D (39.7) | C (23.1) | C (24.8) | B (11.4) |
| Northbound Approach | B (14.5) | B (15.1) | C (24.4) | A (8.8) |
| Southbound Approach | B (10.5) | A (6.8) | A (8.8) | B (10.0) |
| Overall Intersection | C (20.5) | B (14.1) | B (18.9) | A (9.9) |
| ***Lake St Louis Blvd at Eastbound I-70 Ramps*** | | | | |
| Eastbound Approach | B (17.3) | C (20.9) | C (29.4) | C (26.2) |
| Northbound Approach | B (13.6) | A (6.8) | A (6.1) | A (5.0) |
| Southbound Approach | E (69.8) | D (36.5) | C (28.5) | D (37.2) |
| Overall Intersection | D (37.6) | C (21.6) | B (18.6) | C (20.1) |
| ***Lake St Louis Blvd at Veterans Memorial Parkway*** | | | | |
| Eastbound Approach | B (15.0) | B (19.2) | C (22.1) | C (20.9) |
| Westbound Approach | B (12.6) | B (15.3) | C (20.7) | B (19.5) |
| Northbound Approach | E (57.7) | C (30.0) | D (36.4) | D (37.1) |
| Southbound Approach | B (19.5) | C (21.1) | C (24.6) | B (12.2) |
| Overall Intersection | C (23.4) | C (21.6) | C (25.7) | C (21.3) |

X (XX.X) - Level of Service (Average vehicular delay in seconds per vehicle)

### Movements with Excessive Delay

The following movements with excessive delay were identified by agencies or evaluated in the capacity analysis:

- Morning peak hour
  - Lake Saint Louis Blvd at West Terra
    - Eastbound through: E (69.8)
    - Westbound left turn: E (62.1)
  - Lake Saint Louis Blvd at Westbound I-70 Ramps, westbound left turn: E (59.3)
  - Lake Saint Louis Blvd at Eastbound I-70 Ramps, southbound left turn: F (98.9)
  - Lake Saint Louis Blvd at Veterans Memorial, northbound through: E (62.7)

### Existing Arterial and Network Operations

In addition to individual intersection capacity analyses, the Lake Saint Louis Boulevard corridor was evaluated using Synchro to establish Arterial and Network Measures of Effectiveness (MOE). These MOE

include Total Delay, Stops, Average Speeds, and Calculated Travel Times, and are provided by direction during each peak hour. These MOE are summarized in **Table L2**.

**TABLE L2: LAKE SAINT LOUIS BOULEVARD (I-70) EXISTING ARTERIAL AND NETWORK OPERATIONS**

| *MOEs* | *Northbound* | *Southbound* | *Two-Way* | *Total Network* |
|---|---|---|---|---|
| ***AM Peak Hour*** | | | | |
| Total Delay (hrs) | 8 | 17 | 24 | 37 |
| No. of Stops | 469 | 898 | 1367 | 2278 |
| Avg Speed (mph) | 8 | 5 | 6 | 9 |
| Total Travel Time (hr) | 11 | 20 | 30 | 49 |
| ***Midday Peak Hour*** | | | | |
| Total Delay (hrs) | 5 | 9 | 14 | 23 |
| No. of Stops | 578 | 761 | 1339 | 2224 |
| Avg Speed (mph) | 11 | 7 | 9 | 11 |
| Total Travel Time (hr) | 8 | 11 | 19 | 34 |
| ***PM Peak Hour*** | | | | |
| Total Delay (hrs) | 9 | 10 | 19 | 36 |
| No. of Stops | 800 | 688 | 1488 | 2818 |
| Avg Speed (mph) | 10 | 7 | 8 | 10 |
| Total Travel Time (hr) | 13 | 13 | 26 | 50 |
| ***Saturday Peak Hour*** | | | | |
| Total Delay (hrs) | 5 | 7 | 12 | 20 |
| No. of Stops | 616 | 658 | 1274 | 2139 |
| Avg Speed (mph) | 11 | 8 | 9 | 12 |
| Total Travel Time (hr) | 9 | 9 | 18 | 31 |

### Development of Proposed Timing Plans

Signal timing plans and progression analyses were prepared for the Lake Saint Louis Boulevard corridor using the Synchro software package. Several cycle length options were chosen for each time period based upon relative measures of effectiveness (system's total stops, delays, unserved vehicles, average speeds, and estimated queuing) and studied in greater detail. Specifically, time-space diagrams were prepared for each chosen cycle length wherein the ability to provide adequate progression through the respective corridors was considered. The cycle length that best served the system was chosen for each time period.

It was determined that new timing plans would be appropriate for the morning, midday and afternoon peak periods during each weekday. The weekday midday plan was also applicable to weekday evenings as well as Saturdays and Sundays, and is thus referred to as the off-peak plan for the purposes of this report. During periods with the lowest traffic volumes, the signals would run free.

As can be seen, a cycle length of 80 seconds was chosen for the morning plan and off-peak plans, while 90 seconds was selected for the afternoon plan of a typical weekday. Coordination was developed to facilitate traffic flow throughout the entire corridor. A recommended traffic event schedule is shown in **Table L3**.

**TABLE L3: LAKE SAINT LOUIS BOULEVARD (I-70) RECOMMENDED TRAFFIC EVENT SCHEDULE**

| *Day* | *Time Period* | *Proposed Timing Plan (Dial/Split/Offset)* | *Cycle Length* |
|---|---|---|---|
| *Sunday* | 0:01 | Free | -- |
| | 9:00 | Off-Peak Proposed (1/1/1) | 80 |
| | 20:00 | Free | -- |
| *Monday-Friday* | 0:01 | Free | -- |
| | 6:00 | AM Proposed (2/1/1) | 80 |
| | 9:00 | Off-Peak Proposed (1/1/1) | 80 |
| | 15:00 | PM Proposed (3/1/1) | 90 |
| | 19:00 | Off-Peak Proposed (1/1/1) | 80 |
| | 20:00 | Free | -- |
| *Saturday* | 0:01 | Free | -- |
| | 9:00 | Off-Peak Proposed (1/1/1) | 80 |
| | 20:00 | Free | -- |

### Proposed Intersection Operating Conditions

Capacity analyses of each intersection were repeated using the finalized timing plans, and the intersection operating conditions with the proposed timing plans are summarized in Table L4 below for each respective peak period.

**TABLE L4: LAKE SAINT LOUIS BOULEVARD (I-70) PROPOSED INTERSECTION OPERATIONS**

| *Intersection/Approach* | *AM Peak Hour* | *Midday Peak Hour* | *PM Peak Hour* | *Saturday Peak Hour* |
|---|---|---|---|---|
| ***Lake St Louis Blvd at West Terra*** | | | | |
| Eastbound Approach | C (27.3) | C (27.3) | B (19.3) | C (27.3) |
| Westbound Approach | C (32.3) | C (32.3) | D (35.2) | C (32.3) |
| Northbound Approach | A (6.0) | A (5.8) | A (9.3) | A (6.1) |
| Southbound Approach | B (11.0) | B (11.0) | B (15.9) | B (10.7) |
| Overall Intersection | B (13.6) | B (13.6) | C (20.6) | B (13.8) |
| ***Lake St Louis Blvd at Westbound I-70 Ramps*** | | | | |
| Westbound Approach | C (26.4) | C (26.9) | C (33.1) | C (24.3) |
| Northbound Approach | B (14.1) | B (17.5) | C (26.0) | B (18.5) |
| Southbound Approach | A (6.1) | A (3.0) | A (3.8) | A (3.1) |
| Overall Intersection | B (14.5) | B (14.6) | C (20.5) | B (14.3) |
| ***Lake St Louis Blvd at Westbound I-70 Ramps*** | | | | |
| Eastbound Approach | C (31.2) | C (23.6) | C (33.7) | C (25.5) |
| Northbound Approach | A (7.8) | A (5.2) | A (4.5) | A (4.8) |
| Southbound Approach | C (31.1) | C (33.1) | D (87.3) | C (30.4) |
| Overall Intersection | C (22.6) | C (20.1) | C (21.8) | B (17.5) |
| ***Lake St Louis Blvd at Westbound I-70 Ramps*** | | | | |
| Eastbound Approach | D (35.8) | C (25.5) | C (28.7) | C (25.3) |
| Westbound Approach | B (15.9) | B (17.7) | C (23.5) | B (17.7) |
| Northbound Approach | C (27.3) | C (23.6) | C (26.5) | C (24.9) |
| Southbound Approach | B (11.3) | A (9.9) | B (16.0) | B (11.6) |
| Overall Intersection | C (21.8) | B (17.9) | C (23.0) | B (19.3) |

As compared to the Existing conditions, the proposed splits will generally produce equal or improved Levels of Service with delays comparable to or better than those generated by the existing timings. All intersections operate at Level of Service C or better during all time periods.

### Proposed Arterial and Network Operating Conditions

The Lake Saint Louis Boulevard corridor was again evaluated using Synchro to establish Arterial Measures of Effectiveness (MOE) for the proposed timing plans. As shown in the Table L5, the improved timing plans used in the proposed arterial analysis will provide significant benefits to the Lake Saint Louis Boulevard corridor. Total delay, stops, and travel time are generally decreased and average speed decreased during all peak hours.

**TABLE L5: LAKE SAINT LOUIS BOULEVARD (I-70) PROPOSED ARTERIAL AND NETWORK OPERATIONS**

| *MOEs* | *Eastbound* | *Westbound* | *Two-Way* | *Total Network* | *Arterial Improvement* | *Network Improvement* |
|---|---|---|---|---|---|---|
| ***AM Peak Hour*** | | | | | | |
| Total Delay (hrs) | 5 | 8 | 13 | 27 | -45.8% | -27.0% |
| No. of Stops | 577 | 818 | 1395 | 2505 | 2.0% | 10.0% |
| Avg Speed (mph) | 11 | 9 | 10 | 11 | 66.7% | 22.2% |
| Total Travel Time (hr) | 8 | 11 | 19 | 40 | -36.7% | -18.4% |
| ***Midday Peak Hour*** | | | | | | |
| Total Delay (hrs) | 5 | 7 | 11 | 21 | -21.4% | -8.7% |
| No. of Stops | 503 | 550 | 1053 | 1978 | -21.4% | -11.1% |
| Avg Speed (mph) | 12 | 9 | 10 | 12 | 11.1% | 9.1% |
| Total Travel Time (hr) | 8 | 9 | 17 | 32 | -10.5% | -5.9% |
| ***PM Peak Hour*** | | | | | | |
| Total Delay (hrs) | 8 | 9 | 17 | 36 | -10.5% | 0.0% |
| No. of Stops | 728 | 637 | 1365 | 2717 | -8.3% | -3.6% |
| Avg Speed (mph) | 10 | 8 | 9 | 10 | 12.5% | 0.0% |
| Total Travel Time (hr) | 12 | 12 | 24 | 51 | -7.7% | 2.0% |
| ***Saturday Peak Hour*** | | | | | | |
| Total Delay (hrs) | 5 | 2 | 11 | 20 | -8.3% | 0.0% |
| No. of Stops | 568 | 470 | 1038 | 1905 | -18.5% | -10.9% |
| Avg Speed (mph) | 11 | 9 | 10 | 12 | 11.1% | 0.0% |
| Total Travel Time (hr) | 9 | 8 | 16 | 31 | -11.1% | 0.0% |

## Supporting Documentation – Combined Signalized Intersections LOS

SIGNALIZED INT

TABLE 9-1. LEVEL-OF-SERVICE CRITERIA FOR SIGNALIZED INTERSECTIONS

| LEVEL OF SERVICE | CONTROL DELAY PER VEHICLE (SEC) |
|---|---|
| A | ≤10 |
| B | >10 and ≤20 |
| C | >20 and ≤35 |
| D | >35 and ≤55 |
| E | >55 and ≤80 |
| F | >80 |

## SimTraffic Performance Report
## Existing Conditions

5/27/2015

### Total Network Performance

| | |
|---|---|
| Total Delay (hr) | 4.4 |
| Delay / Veh (s) | 54.0 |
| St Del/Veh (s) | 49.7 |
| Total Stops | 245 |
| Travel Dist (mi) | 67.9 |
| Travel Time (hr) | 6.8 |
| Avg Speed (mph) | 11 |
| Fuel Used (gal) | 4.3 |
| HC Emissions (g) | 51 |
| CO Emissions (g) | 2608 |
| NOx Emissions (g) | 164 |
| Vehicles Entered | 290 |
| Vehicles Exited | 296 |
| Hourly Exit Rate | 1776 |
| Input Volume | 4870 |
| % of Volume | 36 |
| Denied Entry Before | 5 |
| Denied Entry After | 14 |

## SimTraffic Performance Report
## Proposed Conditions

5/27/2015

### Total Network Performance

| | |
|---|---|
| Total Delay (hr) | 3.5 |
| Delay / Veh (s) | 40.9 |
| St Del/Veh (s) | 36.1 |
| Total Stops | 309 |
| Travel Dist (mi) | 71.0 |
| Travel Time (hr) | 6.0 |
| Avg Speed (mph) | 13 |
| Fuel Used (gal) | 4.3 |
| HC Emissions (g) | 53 |
| CO Emissions (g) | 2667 |
| NOx Emissions (g) | 171 |
| Vehicles Entered | 306 |
| Vehicles Exited | 314 |
| Hourly Exit Rate | 1884 |
| Input Volume | 4870 |
| % of Volume | 39 |
| Denied Entry Before | 8 |
| Denied Entry After | 1 |

## Supporting Documentation - Accident Reports

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ☐ | 1 | 0 | 201201378 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 10/14/2012 | 2128 | 10/14/2012 | 2131 | 10/14/2012 | 2135 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ■ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ☐ No - No commercial vehicle fields need completion.
   ■ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | | LAT: 009°07'07.0" LONG: 003°08'08.0" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| SOR / VETERANS MEMORIAL PKWY | E | ☐ NA _____ Feet _____ Miles | ☐ NA ☐ After ☐ Before ■ At | CST / LAKE ST LOUIS BLVD |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 45 | ☐ Unknown ☐ State ■ County ☐ Municipal ☐ Private Property ☐ Other | 25 | W | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ☐ Level ☐ Downhill ☐ Dip ☐ Uphill ■ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ☐ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ■ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ☐ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ■ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ☐ Daylight ■ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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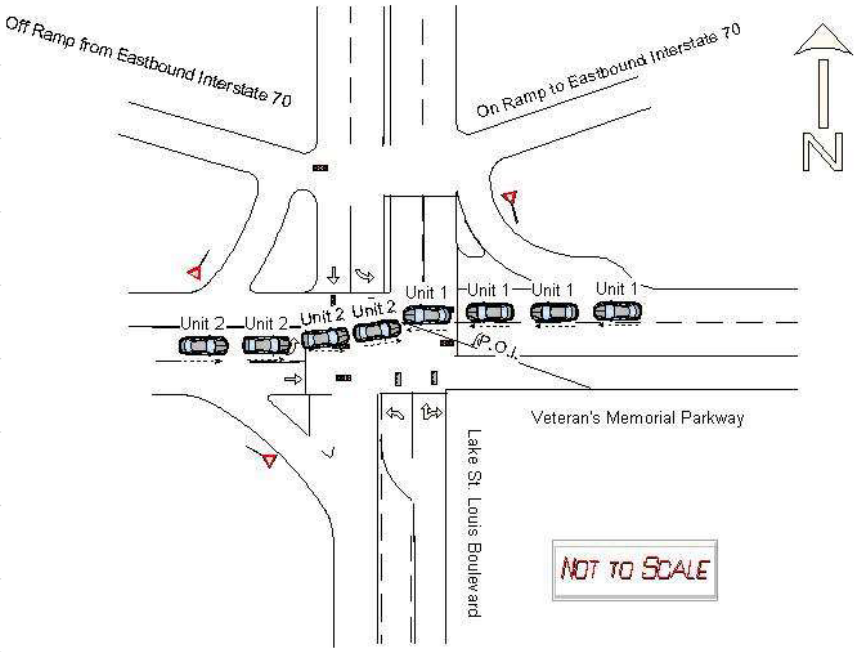
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S (W) U | V2 N (E) S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

REPORT # 201201378 PAGE 3 OF 5

**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | CLEVENGER, LILLY ANNE 15 COGNAC DR, LAKE ST. LOUIS, MO 63367 | (636) 293-7363 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| V050232023 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 03/21/1992 | F | FL | 3 | 2 | 2 | 5 | 1 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ☐ Expired 21ST CENTURY CENTENNIAL | | ☐ NA 2112 2787 | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| CLEVENGER, TOM D 15 COGNAC DR, LAKE ST. LOUIS, MO 63367 | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 1999 | HONDA | ELANTRA | WHI | WHI | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| FG2J0N | MO | 2013 | KMHJF25F7XU886473 | ■ Yes ☐ No | ■ Yes ☐ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7; 1 | 15 | 16 | 17 | 8; 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ☐ NA

BUDGET TOWING
(636) 332-1200
425 LUETKENHAUS BOULEVARD, WENTZVILLE, MO 63385

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car; ☐ Van (< 9 W/Driver); ☐ Passenger Van (9+ W/Driver); ☐ Sport Utility Vehicle; ☐ Limousine (7-8 W/Driver); ☐ Limousine (9-15 W/Driver); ☐ Motorized Bicycle; ☐ Pedalcycle → ☐ To / From School

☐ Small Bus (9-15 W/Driver); ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other

☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown

☐ Motor Home; ☐ Farm Implements; ☐ Construction Equip. Heavy Mach.; ☐ Other Vehicle (Code) _____; ☐ Cargo Van; ☐ Pickup; ☐ Other Heavy Truck; ☐ Unknown (Explain)

☐ Single-unit Truck; 2 axles, 6 tires; ☐ Single-unit Truck; 3 or more axles; ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors); ☐ Truck Tractor With No Units; ☐ Truck Tractor With One Unit; ☐ Truck Tractor With Two Units; ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only): ☐ Less than or equal to 10,000 lbs.; ☐ 10,001 - 26,000 lbs.; ☐ Greater than 26,000 lbs.; ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative ___ (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 07 15 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain); ☐ Speed - Exceeded Limit; ☐ Too Fast For Conditions; ☐ Violation Signal / Sign; ☐ Failed To Yield; ☐ Alcohol; ☐ Drugs

☐ Vision Obstructed; ☐ Driver Fatigue / Asleep; ☐ Improper Signal; ☐ Improper Backing; ☐ Improper Turn; ☐ Improper Passing; ☐ Improperly Parked

☐ Failed To Dim Headlights; ☐ Failed To Use Lights; ☐ Following Too Close; ☐ Wrong Side (Not Passing); ☐ Wrong Side (One-Way); ☐ Physical Impairment (Explain); ☐ Improper Start From Park

☐ Improper Towing / Pushing; ☐ Improperly Stopped On Roadway; ☐ Improper Lane Usage / Change; ☐ Overcorrected; ☐ Improper Riding / Clinging To Veh. Exterior; ☐ Failed To Secure Load / Improper Loading; ☐ Animal(s) In Roadway

☐ Object / Obstruction in Roadway; ☐ Distracted / Inattentive (Designate Type); ☐ Unknown (Explain); ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | VITKOVITSKY, IRENA VIVIAN — 2 MISSISSIPPI ALLEY, ST. LOUIS, MO 63104 | (314) 922-0610 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| T052005019 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ NA; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain) | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 09/23/1975 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | ■ Driver ☐ Vehicle |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | UNITED SERVICE AUTOMOBILE | | 0177550290 | |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2008 | CADI | CTS4 | TAN | TAN | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| DF4T0K | MO | 2014 | 1G6DT57V280144350 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

**VEHICLE BODY TYPES - Automobiles / Specialty Vehicles** ☐ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)

- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police ☐ Ambulance ☐ Fire ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

☐ Congestion Ahead ☐ Other Incident Ahead ☐ Crash Ahead ☐ Unknown (Explain)

**7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES** ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 08 05 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

**7D. PROBABLE CONTRIBUTING CIRCUMSTANCES** ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ■ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

**7E. WORK ZONE** ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

**TRAFFIC CONTROL** ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

**CONTROL MALFUNCTIONING / INOPERATIVE / MISSING** ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | | | | |

**7G. COMMERCIAL MOTOR VEHICLE** ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

**Sir,**

**Through investigation at the scene it was determined that Vehicle 1 was traveling westbound on Veterans Memorial Parkway approaching Lake St. Louis Boulevard. Vehicle 2 was traveling in the left turn lane of eastbound Veterans Memorial Parkway approaching Lake St. Louis Boulevard. The collision occurred when Vehicle 2 was facing east in the center of the intersection and Vehicle 1 collided into the front end of Vehicle 2. Both Vehicle 1 and Vehicle 2 received moderate front end damage due to the collision.**

**Driver 1 stated she was traveling westbound on Veterans Memorial Parkway and entered the intersection of Veterans Memorial Parkway and Lake St. Louis Boulevard. Driver 1 advised Vehicle 2 entered the intersection and began to make a left turn on to Lake St. Louis Boulevard. Driver 1 stated she applied her brakes and began to skid. Driver 1 advised she then collided into Vehicle 2.**

**Driver 2 stated she entered the intersection of Veterans Memorial Parkway and Lake St. Louis Boulevard. Driver 2 stated the electrical signal for her lane was showing solid green. Driver 2 advised while she was stopped in the middle of the intersection, Vehicle 1 entered the intersection and collided with the front driver's side corner of her car.**

**Driver 1 was transported to St. Joseph West for further medical treatment. Driver 2 refused medical treatment on scene.**

**Vehicle 1 was towed by Budget Towing and transported to their Wentzville, MO storage lot.**

**Any additional information shall be submitted in a supplemental report.**

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| LEPPERT, EDWARD | 209 | 1 | |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 201201443 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 11/01/2012 | 1142 | 11/01/2012 | 1144 | 11/01/2012 | 1154 | ☐ Yes ■ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ■ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'14.0" LONG: -90°46'14.0" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAST LOUIS BLVD | S | ☐ NA 30 Feet ____ Miles | ☐ After ■ Before ☐ At ☐ NA | IS / 70 |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 35 | ☐ State ☐ County ■ Municipal ☐ Private Property ☐ Other ☐ Unknown | 60 | E | |

TRAFFICWAY: ☐ One-Way ☐ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ■ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

DISTRIBUTION: COPY - AGENCY FILE ORIGINAL - MISSOURI STATE HIGHWAY PATROL - TRAFFIC RECORDS DIVISION - P.O. BOX 568 - JEFFERSON CITY, MO 65102 SHP-2Q 01/12

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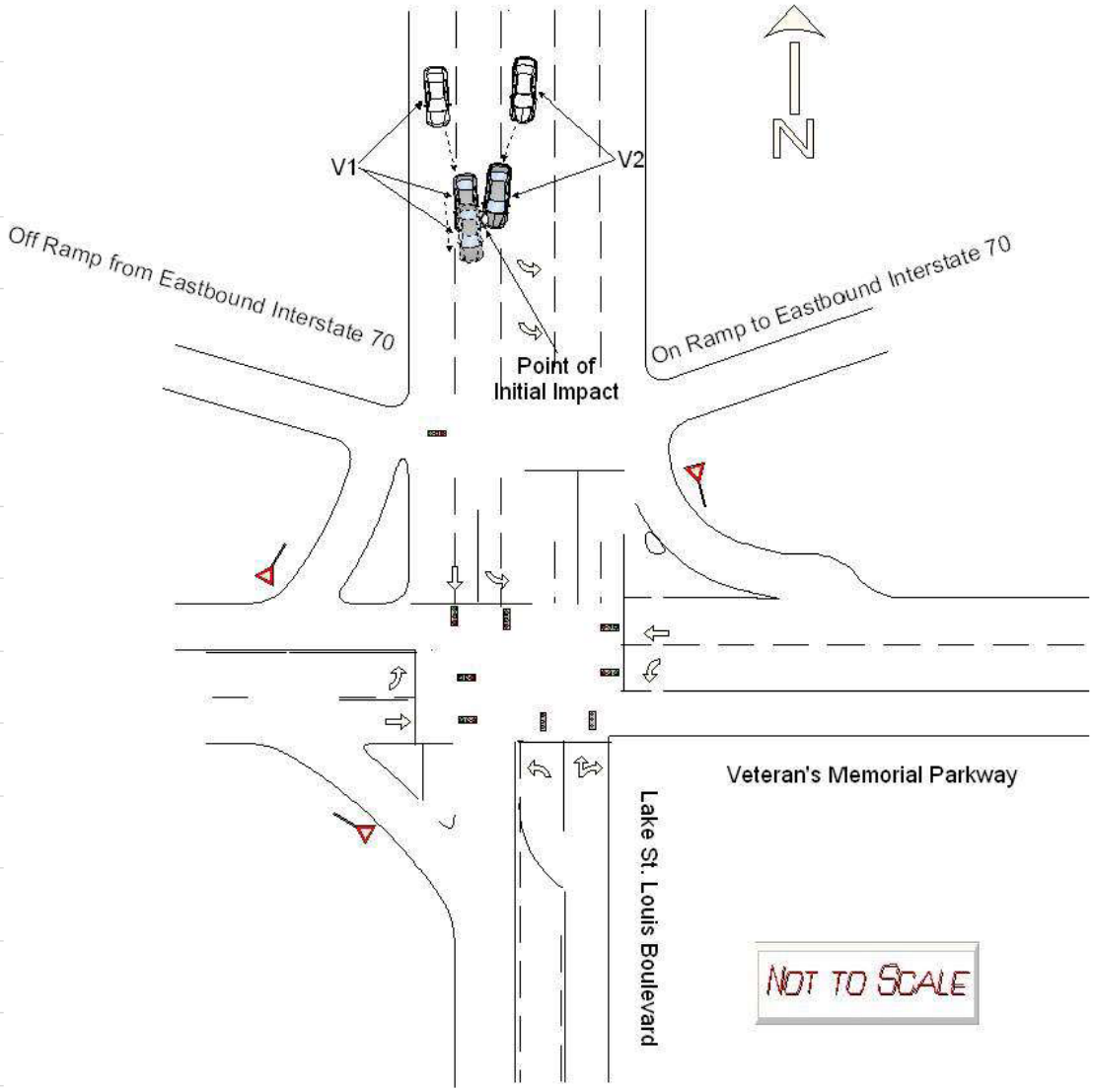
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E (S) W U | V2 N E (S) W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

REPORT # 201201443 PAGE 3 OF 5

**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | WORRELL, ALLISON KATE 6411 ALAMO AVE. #1-E, ST. LOUIS, MO 63105 | (636) 578-6100 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| N050330038 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class E; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 11/27/1984 | F | FL | 5 | 1 | 2 | 3 | U | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | PROGRESSIVE ☐ Expired | 800-776-4737 | 11372558-4 ☐ NA | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| WORRELL, MARK , | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2008 | SUBARU | IMPREZA | GRY | GRY | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| SG0S6R | MO | 2012 | JF1GH61658H834703 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 13

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 14 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
■ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO — PHONE NUMBER ☐ SAO

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. — USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | SHELTON, MILDRED E — 22 OAK BLUFF DR, LAKE ST. LOUIS, MO 63367 | (636) 887-0210 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| J121344004 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 12/17/1932 | F | FL | 5 | 1 | 2 | 3 | U | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | LIBERTY MUTUAL (☐ Expired) | 800-225-8285 | AOS248-736813-70-2 0 (☐ NA) | ☐ Driver ■ Vehicle |

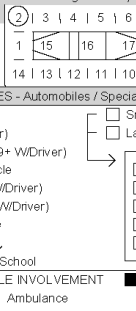
| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| SHELTON, MILDRED E — 22 OAK BLUFF DR, LAKE ST. LOUIS, MO 63367 | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2010 | BUICK | 4 DOOR | BLK / BLK | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| WA7H6D | MO | 2012 | 1G4HB5EM2AU108194 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 2




18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus ☐ Intercity ☐ Transit / Commuter ☐ Charter / Tour ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh ☐ 3 Wh ☐ 4 Wh ☐ 5 Wh / More ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ Fire ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ☐ NA
☐ Congestion Ahead ☐ Other Incident Ahead ☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES (☐ Unknown) | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 14 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ■ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO — PHONE NUMBER ☐ SAO

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. — USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR / FC SC TC / FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU - Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)
1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES
1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES
1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES
1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

On Thursday, 11/01/2012 at approximately 1154 hours, I responded to the area of Lake St. Louis Blvd. and Veteran's Memorial Parkway for a report of a motor vehicle accident with no reported injuries. Upon arrival I made contact with both drivers, who had relocated their vehicles out of the roadway and into a nearby parking lot.

I asked both drivers if they were in any need of medical aid, which both advised that they were okay and declined any need for medical assistance.

Driver 1, Allison Worrell and sole occupant of vehicle 1, stated that she was traveling south on Lake St. Louis Blvd. in the far right lane approaching the intersection of the I-70 eastbound on-ramp. She said that she was attempting to change lanes and veered left into the center lane, when her vehicle was struck by Vehicle 2 that was also changing lanes into the same lane from the far left lane of traffic.

Driver 2, Mildred Shelton and sole occupant of Vehicle 2, stated that she was traveling south on Lake St. Louis Blvd. in the left turn lane approaching the intersection of the I-70 eastbound on-ramp. She said that she was attempting to change lanes and veered right into the center lane, when she was struck by Vehicle 1 that was also changing lanes into the same lane from the far right lane of traffic.

Both drivers stated that they did not see the other vehicle until their vehicles made contact with one another.

Both vehicles were driven from the scene under their own power.

Nothing further,

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| BADY, JOHN | 202 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 201200811 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 06/20/2012 | 1410 | 06/20/2012 | 1413 | 06/20/2012 | 1425 | ■ Yes ☐ No |

CRASH TYPE

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ■ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ☐ No - No commercial vehicle fields need completion.
   ■ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'11.0" LONG: -90°46'14.8" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| SOR / VETERANS MEMORIAL PKWY | W | ■ NA ____ Feet ____ Miles | ☐ After ☐ Before ■ At ☐ NA | CST / LAKE ST LOUIS BLVD |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 45 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 35 | S | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ☐ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ■ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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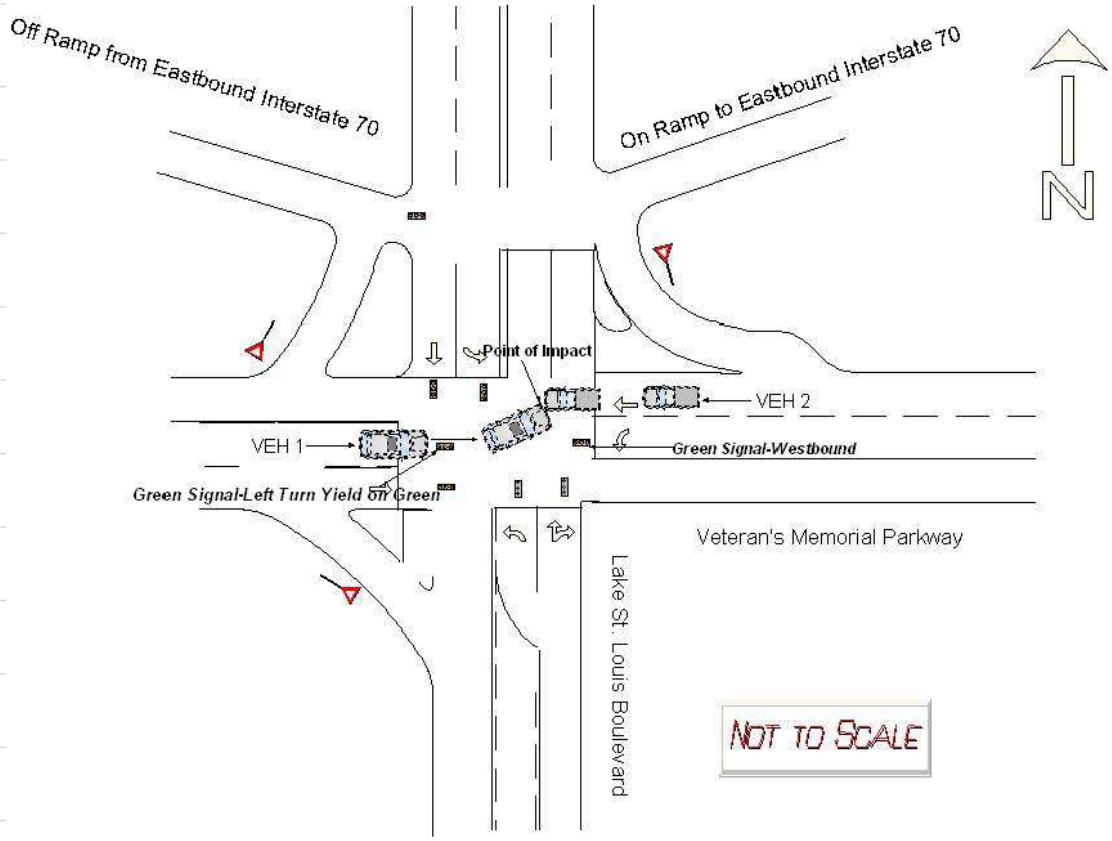
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N (E) S W U | V2 N E S (W) U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | SMITH, CHRISTOPHER LOUIS 4105 BEDFORD MANOR CT, WENTZVILLE, MO 63385 | (314) 575-6766 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| S121348007 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class E; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 12/05/1967 | M | FL | N | N | 1 | 3 | 5 | ■ NA; ☐ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain) |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | SHELTER ☐ Expired | 6363274202 | 24 1 3169240 4 ☐ NA | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2000 | FORD | EXPEDITION | WHI | WHI | 1 | 2 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 5DL801 | MO | 2014 | 1FMPU18L2YLA11370 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ■ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
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- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)

- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 05 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ■ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

| 7E. WORK ZONE | TRAFFIC CONTROL | CONTROL MALFUNCTIONING / INOPERATIVE / MISSING |
|---|---|---|
| ☐ Yes ■ No ☐ Unknown | Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain) ☐ None ☐ Unknown | ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA |
| Workers Present: ☐ Yes ■ No ☐ Unknown | Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain) | |

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| SMITH, RACHEL<br>SAD | 11/09/1999 | F | FR | N | N | 1 | 3 | 5 | (314) 575-6766 |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

REPORT # 201200811 PAGE 4 OF 5

**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | ROBBINS, WILLIAM BRADFORD 1368 TIMOTHY RIDGE DR, ST. CHARLES, MO 63304 | (636) 357-4379 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| S113188003 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class E; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 07/03/1961 | M | FL | N | N | 1 | 3 | 5 | ■ NA; ☐ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain) |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | MARSH USA INC ☐ Expired | 8668642255 | CA3506364 ☐ NA; ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ☐ SAD |
|---|---|
| SPECTRA COMMUNICATIONS LLC 3014 LEMONE IND BLVD, COLUMBIA , MO 65205 | (573) 886-3624 |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2002 | FORD | RANGER | WHI WHI | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 5YB901 | MO | 2012 | 1FTYR10E92PA17027 | ■ Yes ☐ No | ■ Yes ☐ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ■ Unknown ☐ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

☐ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) →
☐ School Bus
☐ Intercity
☐ Transit / Commuter
☐ Charter / Tour
☐ Other
☐ Motorcycle
☐ ATV →
☐ 2 Wh
☐ 3 Wh
☐ 4 Wh
☐ 5 Wh / More
☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
■ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
■ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR / FC SC TC / FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU - Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)
1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES
1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES
1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES
1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

Statements from both drivers and physical evidence at the scene agree that Vehicle 1 was traveling eastbound on Veteran's Memorial Parkway approaching Lake Saint Louis Blvd. Vehicle 2 was traveling westbound on Veteran's Memorial Parkway approaching Lake Saint Louis Blvd.

Driver 1 stated he arrived at the intersection and was going to make a left turn onto northbound Lake Saint Louis Blvd. Driver 1 stated he observed Vehicle 2, but for an unknown reason, he could not tell if Vehicle 2 was moving i.e. angle of approach, sun, etc. He added that if the Vehicle 2 was moving, he was unable to determine how fast or slow.

Driver 1, believing that Vehicle 2 was either moving very slowly, or not at all, entered the intersection and began making the left turn onto northbound Lake Saint Louis Blvd.

As he arrived in the intersection, he realized that Vehicle 2 was in fact moving and it had entered the intersection in front of him. Driver 1 attempted to stop his vehicle before a collision with Vehicle 2, but was unsuccessful and the front driver side of Vehicle 1 collided with the front driver side of Vehicle 2.

Both drivers stated they had a green traffic signal, which would indicate that Driver 1 could make a left turn only after yielding to oncoming vehicles. I confirmed this with Driver 1, who agreed.

Vehicle 1 was driven from the scene; Vehicle 2 was later towed from the scene by an unknown tow service.

Neither party involved claimed injury.

Anything further will be submitted in supplemental form.

Respectfully Submitted,
P.O. Wilson #221

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| WILSON, DION | 221 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 201200831 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 06/25/2012 | 0630 | 06/25/2012 | 0635 | 06/25/2012 | 0650 | ■ Yes ☐ No |

CRASH TYPE

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.
   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →
2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.
   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'13.0" LONG: -90°46'18.2" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| IS / 70 | E | ☐ NA 200 Feet ____ Miles | ☐ NA ☐ After ■ Before ☐ At | CST / LAKE ST LOUIS BLVD |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 60 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 25 | S | |

TRAFFICWAY: ■ One-Way ☐ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ☐ Level ☐ Downhill ☐ Dip ■ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ■ NA ☐ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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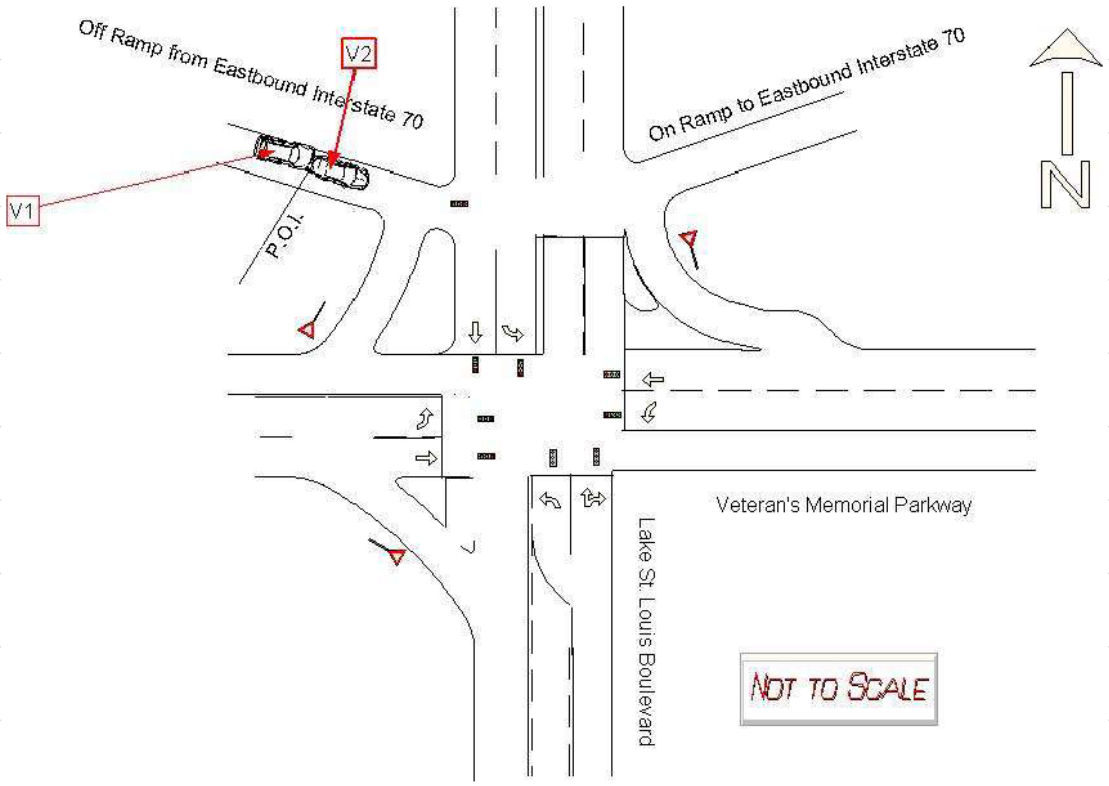
REPORT # 201200831 PAGE 2 OF 5

| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N (E) S W U | V2 N (E) S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | MERIDITH, AIMEE LYNN 328 SANTA FE TRAIL, ST. PETERS, MO 63376 | (636) 697-6215 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| S050090082 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 03/25/1991 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM INSURANCE | 636-970-1515 | 1320488-E11-25A | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| MERIDETH, GREGORY S 328 SANTA FE TRAIL, ST. PETERS, MO 63376 | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2006 | CHRY | PT CRUISER | SIL | SIL | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| FG8E7N | MO | 2014 | 3A8FY68B26T349189 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car; ☐ Van (< 9 W/Driver); ☐ Passenger Van (9+ W/Driver); ☐ Sport Utility Vehicle; ☐ Limousine (7-8 W/Driver); ☐ Limousine (9-15 W/Driver); ☐ Motorized Bicycle; ☐ Pedalcycle → ☐ To / From School

☐ Small Bus (9-15 W/Driver); ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other

☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown

☐ Motor Home; ☐ Farm Implements; ☐ Construction Equip. Heavy Mach.; ☐ Other Vehicle (Code) _____; ☐ Cargo Van; ☐ Pickup; ☐ Other Heavy Truck; ☐ Unknown (Explain)

☐ Single-unit Truck; 2 axles, 6 tires; ☐ Single-unit Truck; 3 or more axles; ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors); ☐ Truck Tractor With No Units; ☐ Truck Tractor With One Unit; ☐ Truck Tractor With Two Units; ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only): ☐ Less than or equal to 10,000 lbs.; ☐ 10,001 - 26,000 lbs.; ☐ Greater than 26,000 lbs.; ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police; ☐ Ambulance; ☐ Fire; ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run; ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

☐ Congestion Ahead; ☐ Other Incident Ahead; ☐ Crash Ahead; ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain); ☐ Speed - Exceeded Limit; ☐ Too Fast For Conditions; ☐ Violation Signal / Sign; ☐ Failed To Yield; ☐ Alcohol; ☐ Drugs

☐ Vision Obstructed; ☐ Driver Fatigue / Asleep; ☐ Improper Signal; ☐ Improper Backing; ☐ Improper Turn; ☐ Improper Passing; ☐ Improperly Parked

☐ Failed To Dim Headlights; ☐ Failed To Use Lights; ☐ Following Too Close; ☐ Wrong Side (Not Passing); ☐ Wrong Side (One-Way); ☐ Physical Impairment (Explain); ☐ Improper Start From Park

☐ Improper Towing / Pushing; ☐ Improperly Stopped On Roadway; ☐ Improper Lane Usage / Change; ☐ Overcorrected; ☐ Improper Riding / Clinging To Veh. Exterior; ☐ Failed To Secure Load / Improper Loading; ☐ Animal(s) In Roadway

☐ Object / Obstruction in Roadway; ■ Distracted / Inattentive (Designate Type); ☐ Unknown (Explain); ■ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ☐ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ■ None ☐ Unknown

Electric: ☐ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO — PHONE NUMBER ☐ SAO

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier; ☐ Intrastate Carrier; ☐ Not In Commerce - Government Vehicle; ☐ Not In Commerce - Rental Vehicle; ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. — USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box; ☐ Cargo Tank; ☐ Flatbed; ☐ Dump; ☐ Concrete Mixer; ☐ Auto Transporter; ☐ Garbage / Refuse; ☐ Grain / Chip / Gravel; ☐ Pole Trailer; ☐ Log; ☐ Vehicle Towing Another Veh.; ☐ Intermodal Container Chassis; ☐ NA (No Cargo Body); ☐ Other; ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | BOSTON, JANA MARIE 1315 SHAGBARK, TROY, MO 63379 | (636) 358-1135 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| E0760930 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 01/19/1963 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM INSURANCE | 314-838-7800 | 214-6196-B31-25 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ☐ SAD |
|---|---|
| | (636) 358-1135 |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2005 | FORD | SEDAN | BLU | BLU | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| SH9H5P | MO | 2013 | 1FMDK031X5GA78733 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 8

2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 1 | 15 | 16 | 17

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 08 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ■ None ☐ Unknown

Electric: ☐ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Lessee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR / FC SC TC / FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU -Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)
1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES
1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES
1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES
1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

On Monday, 06/25/2012 at approximately 0635 hours, I was dispatched to the Eastbound ramp of Interstate 70 onto Lake Saint Louis Boulevard in reference to a Motor Vehicle Crash.

On arrival, I made contact with Driver #1 who was identified as Meridith, Aimee Lynn, (see persons section of this report). I also contacted Driver #2 who was identified as Boston, Jana Marie, (see persons section of this report).

I asked them if they needed any medical attention and both parties refused.

Driver #1 stated she was pulling up to Lake Saint Louis Boulevard on the off ramp of Interstate I-70 when she yawned and did not noticed how quickly traffic was slowing. Driver #1 stated she was unable to stop Vehicle #1 in time and struck Vehicle #2 in the rear bumper.

Driver #2 stated she was slowing with traffic due to the red traffic light at the top of the off ramp when her vehicle was struck by Vehicle #1 in the rear bumper.

I observed damage to the front bumper of vehicle #1 and damage to the rear bumper of vehicle #2.

Both parties were able to drive their vehicles from the area without further incident.

There is nothing further to report at this time, and any additional information will be submitted in a supplemental report.

Respectfully Submitted,
Officer V. Ploch, DSN 206

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| PLOCH, VINCENT | 206 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 201200852 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 06/29/2012 | 1247 | 06/29/2012 | 1247 | 06/29/2012 | 1247 | ■ Yes ☐ No |

CRASH TYPE

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ■ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ☐ No - No commercial vehicle fields need completion.
   ■ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°47'11.0" LONG: -90°46'14.8" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| SOR / VETERANS MEMORIAL PKWY | W | ■ NA _____ Feet _____ Miles | ☐ After ☐ Before ■ At ☐ NA | CST / LAKE ST LOUIS BLVD |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 45 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 25 | N | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ☐ Straight ■ Curve ☐ Unknown (Explain)

ROAD PROFILE: ☐ Level ☐ Downhill ☐ Dip ☐ Uphill ■ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ☐ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ■ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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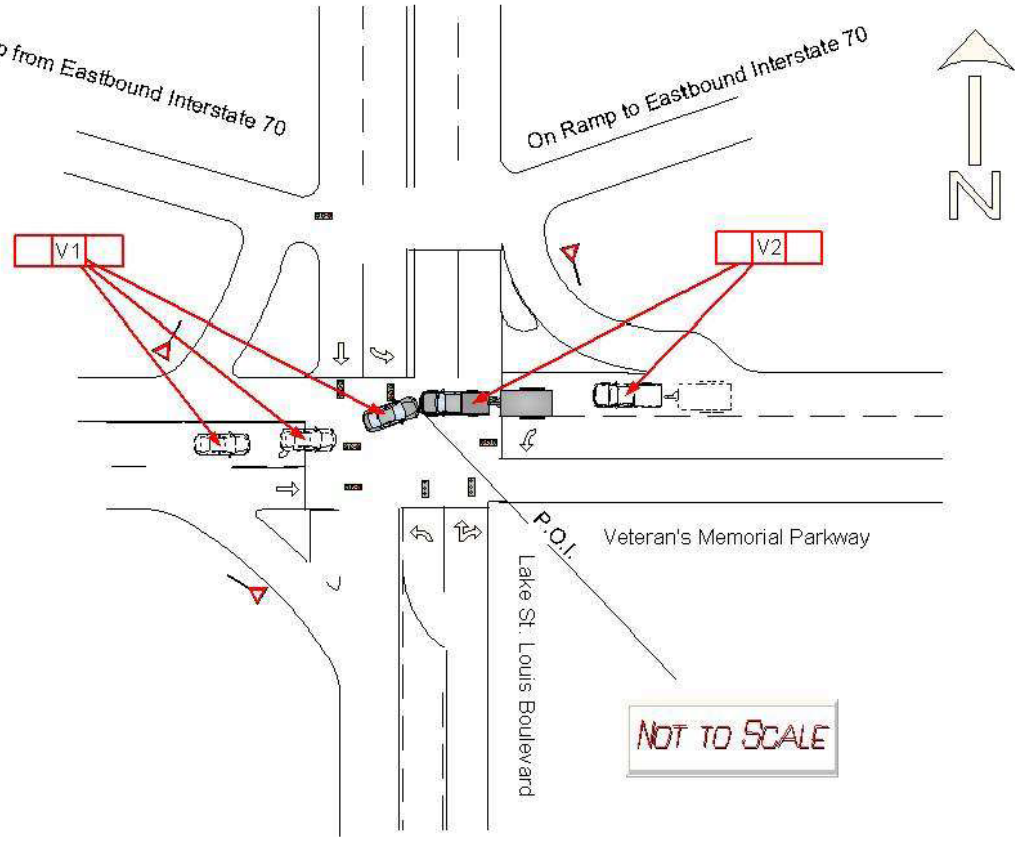
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N (E) S W U | V2 N E S (W) U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | HOENER, AMANDA CHRISTINE 3929 SUMMERTIME DR, ST CHARLES, MO 63304 | (636) 448-3364 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| L050043011 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 02/11/1985 | F | FL | 5 | 1 | 2 | 3 | 5 | ☐ NA; ☐ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ■ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain) |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ☐ Expired STATE FARM | | ☐ NA 024 8885-E03-25G | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2002 | VOLKSWAGON | JETTA | WHI | WHI | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| YB3V2H | MO | 2012 | 3VWSB69M82M027620 | ■ Yes ☐ No | ■ Yes ☐ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ■ Unknown ☐ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)

- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 05 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ■ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

| 7E. WORK ZONE | TRAFFIC CONTROL | CONTROL MALFUNCTIONING / INOPERATIVE / MISSING |
|---|---|---|
| ☐ Yes ■ No ☐ Unknown | ☐ None ☐ Unknown; Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain) | ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA |
| Workers Present: ☐ Yes ■ No ☐ Unknown | Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain) | |

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | CLARICE, NICO ANTHONY — 3 CARR CIRCLE, O'FALLON, MO 63367 | (636) 614-9471 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| T050213037 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 09/16/1988 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ☐ Yes ■ No ☐ Not Required | ■ Expired; STATE FARM | | ☐ NA; 25-9B3B-Z77 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| CLARICE, PAUL G — 3 CAR CIRCLE, OFALLON, MO 63366 | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 1994 | GMC | SIERRA | BLU | BLU | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 0HN797 | MO | 2014 | 1GTGK29K3RE545330 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ■ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

**VEHICLE BODY TYPES - Automobiles / Specialty Vehicles** ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ■ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)

- ■ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

**7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES** ☐ Additional Codes Listed in Narrative ___ (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 08 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

**7D. PROBABLE CONTRIBUTING CIRCUMSTANCES** ■ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

**7E. WORK ZONE** ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

**TRAFFIC CONTROL** ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

**CONTROL MALFUNCTIONING / INOPERATIVE / MISSING** ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

**7G. COMMERCIAL MOTOR VEHICLE** ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Through investigation at the scene, it was determined that vehicle 1 was making a left turn from eastbound Veteran's Memorial Parkway onto northbound Lake St. Louis Boulevard. Vehicle 2 was traveling westbound on Veteran's Memorial Parkway, crossing Lake St. Louis Boulevard. The collision occurred as vehicle 1 failed to yield to vehicle 2, crossing into its path and striking vehicle 2 head on.

Driver 1 stated she was making a left turn from eastbound Veteran's Memorial Parkway onto northbound Lake St. Louis Boulevard when she observed vehicle 2 crest the hill. Driver 1 stated she was unable to avoid the collision and struck vehicle 2 head on. Driver 1 stated she had a solid green light, not a left turn arrow.

Vehicle 1 had moderate damage to the entire front end of the vehicle.

Driver 2 stated he was traveling westbound on Veteran's Memorial Parkway, crossing over Lake St. Louis Boulevard when vehicle 1 turned in front of him. Driver 2 stated he attempted to stop in time, but was struck head on by vehicle 1. Driver 2 stated he had a solid green light at the time of the collision.

Vehicle 2 had no observable damage.

Both parties involved advised they were uninjured and refused medical attention.

Vehicle 1 was towed from the scene by private request. Vehicle 2 was driven from the scene.

Any further information will be submitted in a supplemental report.

Respectfully Submitted,

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| CROWLEY, GERALD | 239 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2013-01098 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 08/18/2013 | 1800 | 08/17/2013 | 1803 | 08/17/2013 | 1809 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ■ Sideswipe (Same Dir.) ■ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ☐ No - No commercial vehicle fields need completion.
   ■ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ■ Yes ☐ No | P.O. LAPORTE #272 | ■ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | | LAT: 038°48'10.9" LONG: -90°46'14.7" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAKE ST LOUIS BLVD | S | ☐ NA _____ Feet _____ Miles | ☐ After ☐ Before ■ At ☐ NA | SOR / VETERANS MEMORIAL PKWY |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ☐ Unknown ☐ State ☐ County ■ Municipal ☐ Private Property ☐ Other | 45 | N | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ☐ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ■ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

DISTRIBUTION: COPY - AGENCY FILE ORIGINAL - MISSOURI STATE HIGHWAY PATROL - TRAFFIC RECORDS DIVISION - P.O. BOX 568 - JEFFERSON CITY, MO 65102 SHP-2Q 01/12

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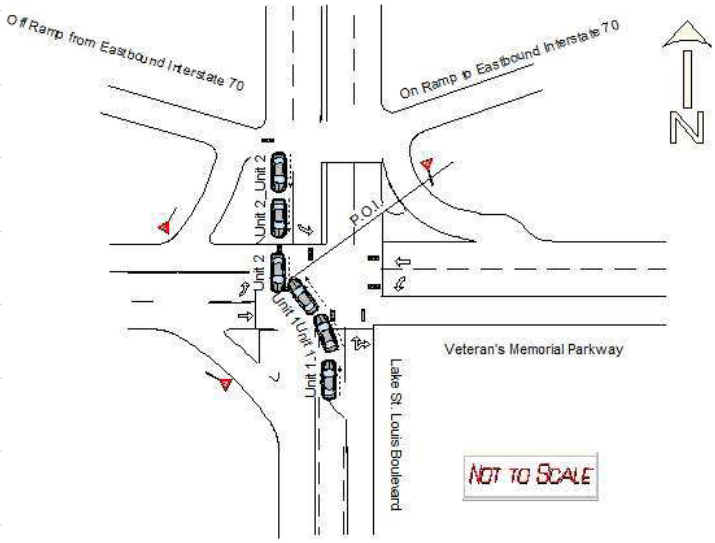
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 (N) E S W U | V2 N E (S) W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | PRESSEAU, LATASHA R 311 HWY P, WENTZVILLE, MO 63385 | (636) 448-3233 |

DRIVER LICENSE / ID NUMBER: G054181004 STATE: MO
LIC STATUS: [x] Valid [ ] Expired [ ] Susp / Rev / Denied [ ] Disqual CDL [ ] Canceled / Oth Invalid [ ] Unknown [ ] NA
LIC TYPE: [x] Operator Class F [ ] Permit [ ] Unknown (Explain) [ ] CDL Class ___ [ ] MC Only [ ] Interm / Grad [ ] Unlicensed [ ] NA
MC ENDORSEMENT: [ ] Yes [x] No [ ] NA [ ] Unknown (Explain)

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|---|---|
| 04/01/1980 | F | FL | 5 | 1 | 2 | 1 | 2 |

VISION OBSTRUCTED: [x] Not Obstructed [ ] Windshield [ ] Load on Veh [ ] Trees / Brush [ ] Building [ ] Embankment [ ] Sign [ ] Hillcrest [ ] Parked Veh [ ] Moving Veh [ ] Stopped Veh [ ] Glare [ ] Other (Explain) [ ] Unknown (Explain) [ ] NA

PROOF OF INSURANCE: [x] Yes [ ] No [ ] Not Required
INSURANCE COMPANY: STATEFARM INS [ ] Expired
PHONE NO. (Optional):
POLICY NUMBER: 2452406D0125A [ ] NA [ ] Driver [x] Vehicle

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) [x] SAD
PHONE NUMBER [ ] SAD

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 93 | BUIC | CENTURY | BLU | BLU | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| KJ6Y8J | MO | 15 | 1G4AG55N2P6489943 | [ ] Yes [x] No | [ ] Yes [ ] No |

VEHICLE DAMAGE (Mark all damaged areas) [ ] None / No Damage
INITIAL IMPACT NO: [ ] NA 14
2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9
18 - Undercarriage 19 - Windshield 20 - Burned 21 - Towed Unit 22 - Cargo 23 - Unknown 24 - Other (Explain)
TOWED BY [ ] Unknown [x] NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles [ ] Vehicle Used As Public Conveyance
[x] Passenger Car
[ ] Van (< 9 W/Driver)
[ ] Passenger Van (9+ W/Driver)
[ ] Sport Utility Vehicle
[ ] Limousine (7-8 W/Driver)
[ ] Limousine (9-15 W/Driver)
[ ] Motorized Bicycle
[ ] Pedalcycle → [ ] To / From School
[ ] Small Bus (9-15 W/Driver)
[ ] Large Bus (16+ W/Driver)
→ [ ] School Bus [ ] Intercity [ ] Transit / Commuter [ ] Charter / Tour [ ] Other
[ ] Motorcycle
[ ] ATV → [ ] 2 Wh [ ] 3 Wh [ ] 4 Wh [ ] 5 Wh / More [ ] Unknown
[ ] Motor Home
[ ] Farm Implements
[ ] Construction Equip. Heavy Mach.
[ ] Other Vehicle (Code) _____
[ ] Cargo Van
[ ] Pickup
[ ] Other Heavy Truck
[ ] Unknown (Explain)
[ ] Single-unit Truck; 2 axles, 6 tires
[ ] Single-unit Truck; 3 or more axles
[ ] Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
[ ] Truck Tractor With No Units
[ ] Truck Tractor With One Unit
[ ] Truck Tractor With Two Units
[ ] Truck Tractor With Three Units
GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
[ ] Less than or equal to 10,000 lbs.
[ ] 10,001 - 26,000 lbs.
[ ] Greater than 26,000 lbs.
[ ] Unknown

EMERGENCY VEHICLE INVOLVEMENT [ ] NA
[x] Police [ ] Ambulance [ ] Fire [ ] Other (Must check "A" / "B") → [ ] A. Emergency Vehicle on Emergency Run [ ] B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS [x] NA
[ ] Congestion Ahead [ ] Other Incident Ahead [ ] Crash Ahead [ ] Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES [ ] Additional Codes Listed in Narrative ___ (See Codes in Section 8)
SEQUENCE OF EVENTS CODES [ ] Unknown: 01 | 05 | 34
ANIMAL CODE(S)
FIXED OBJECT CODE(S)
ALCOHOL USE: [ ] Yes [ ] Unk [x] No [ ] NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES [ ] None
[ ] Vehicle Defects (Explain)
[ ] Speed - Exceeded Limit
[ ] Too Fast For Conditions
[ ] Violation Signal / Sign
[x] Failed To Yield
[ ] Alcohol
[ ] Drugs
[ ] Vision Obstructed
[ ] Driver Fatigue / Asleep
[ ] Improper Signal
[ ] Improper Backing
[ ] Improper Turn
[ ] Improper Passing
[ ] Improperly Parked
[ ] Failed To Dim Headlights
[ ] Failed To Use Lights
[ ] Following Too Close
[ ] Wrong Side (Not Passing)
[ ] Wrong Side (One-Way)
[ ] Physical Impairment (Explain)
[ ] Improper Start From Park
[ ] Improper Towing / Pushing
[ ] Improperly Stopped On Roadway
[ ] Improper Lane Usage / Change
[ ] Overcorrected
[ ] Improper Riding / Clinging To Veh. Exterior
[ ] Failed To Secure Load / Improper Loading
[ ] Animal(s) In Roadway
[ ] Object / Obstruction in Roadway
[x] Distracted / Inattentive (Designate Type)
[ ] Unknown (Explain)
[ ] Other (Explain)
DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) [ ] NA: 15

7E. WORK ZONE [ ] Yes [x] No [ ] Unknown
Workers Present [ ] Yes [x] No [ ] Unknown
TRAFFIC CONTROL [ ] None [ ] Unknown
Electric: [x] Green/Yellow/Red [ ] Flashing Red [ ] Flashing Yellow [ ] Ramp Meter [ ] Other (Explain)
Other Controls: [ ] Stop Sign [ ] No Passing Zone [ ] Turn Restricted [ ] Officer / Flagman [ ] Signal On School Bus [ ] Warning Sign / Device [ ] Railway Crossing Sign / Device [ ] School Zone [ ] Yield Sign [ ] Other (Explain)
CONTROL MALFUNCTIONING / INOPERATIVE / MISSING [ ] Yes (Explain) [x] No [ ] Unknown [ ] NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE [x] NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.
MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) [ ] SAO
PHONE NUMBER [ ] SAO
COMMERCIAL / NON-COMMERCIAL [ ] Interstate Carrier [ ] Intrastate Carrier [ ] Not In Commerce - Government Vehicle [ ] Not In Commerce - Rental Vehicle [ ] Not In Commerce - Other Vehicle
MC / MX / ICC NO.
USDOT NO.
CARGO BODY TYPE [ ] Enclosed Box [ ] Cargo Tank [ ] Flatbed [ ] Dump [ ] Concrete Mixer [ ] Auto Transporter [ ] Garbage / Refuse [ ] Grain / Chip / Gravel [ ] Pole Trailer [ ] Log [ ] Vehicle Towing Another Veh. [ ] Intermodal Container Chassis [ ] NA (No Cargo Body) [ ] Other [ ] Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | [ ] Yes [ ] No [ ] Unknown | | | [ ] Yes [ ] No [ ] Unknown | [ ] Yes [ ] No [ ] Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | REINHOLZ, DOUGLAS W 101 SHERIFF DIERKER CT, O'FALLON, MO 63366 | (636) 949-7900 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| R200061018 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 09/19/1980 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | CATLIN SPECIALTY INS CO | | ALC1004330514 | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| ST. CHARLES SHERIFF'S DEPT 101 SHERIFF DIERKER CT, O'FALLON, MO 63366 | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2011 | FORD | CROWN VIC | BRO | BRO | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 568 | MO | | 2FABP7BV1BX177057 | ■ Yes ☐ No | ■ Yes ☐ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ☐ NA

SUPERIOR TOWING
(314) 921-6424
11 ELAINE DRIVE OFALLON MO 63366

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School

☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other

☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown

☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)

☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ☐ NA
■ Police ☐ Ambulance
☐ Fire ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run; ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative ___ (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs

☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked

☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park

☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway

☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ☐ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO — PHONE NUMBER ☐ SAO

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. — USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR
FC SC TC
FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU - Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Through investigation at the scene it was determined that Vehicle 1(V1) was travelling north bound on Lake St. Louis Boulevard approaching Veteran's Memorial Parkway. V1 was in the left turn lane of north bound Lake St. Louis Boulevard attempting to make a left turn onto Veteran's Memorial Parkway. Vehicle 2(V2) was travelling south bound in the straight lane of Lake St. Louis Boulevard entering the intersection of Lake St. Louis Boulevard and Veteran's Memorial Parkway. The collision occurred when V1 began to make a left turn in front V2, failing to yield to the right of way of V2, and colliding into the front driver's side quarter panel of V2. V1 received moderate driver's side front end damage. V2 also received moderate driver's side front end damage.

Driver 1 (D1) stated she was at the intersection of north bound Lake St. Louis Boulevard and Veteran's Memorial Parkway attempting to make a left turn onto Veteran's Memorial Parkway. D1 stated she thought the electrical signal was displaying a green arrow allowing her to complete her left turn onto Veteran's Memorial Parkway. D1 stated she then struck the front driver's side quarter panel of V2.

Driver 2(D2) stated he was travelling south bound on Lake St. Louis entering the intersection of Lake St. Louis Boulevard and Veteran's Memorial Parkway. D2 stated the electric signal for his lane of traffic (straight lane) was displaying a solid green as he entered the intersection. D2 stated V1 then turned in front of his vehicle. D2 stated V1 then struck his vehicle.

D1 and D2 both refused medical attention at the scene. V1 was driven from the scene. V2 was towed from the scene by Superior Towing Company and towed to their storage lot.

Any further information will be submitted in a supplemental report.

Respectfully Submitted,

P.O. Jeffery LaPorte DSN 272

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| LAPORTE, JEFFERY | 272 | 1 | |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2013-01669 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 12/17/2013 | 0017 | 12/17/2013 | 1738 | 12/17/2013 | 1746 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | | LAT: 038°48'12.8" LONG: -90°46'15.0" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAKE ST LOUIS BLVD | S | ☐ NA _____ Feet _____ Miles | ☐ NA ☐ After ☐ Before ■ At | IS / 70 |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 65 | | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ☐ Daylight ■ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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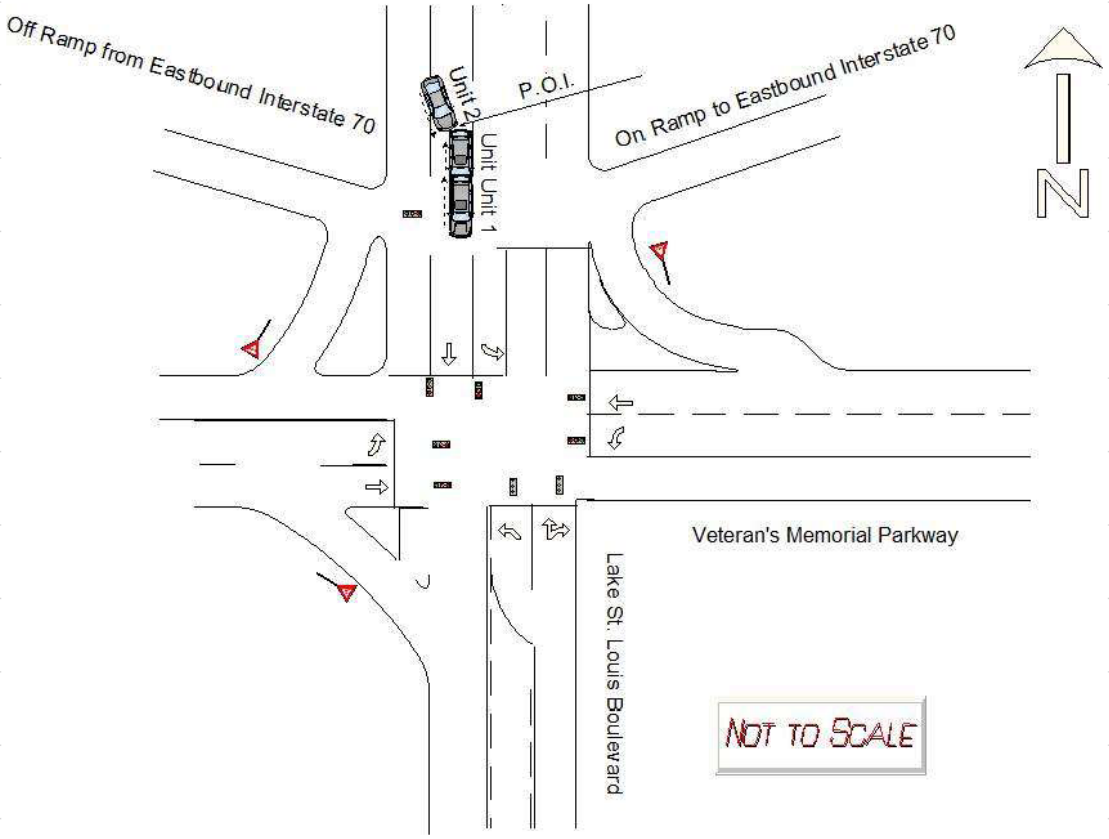
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S W U | V2 N E S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | BAUMANN, CHRISTOPHER DEAN 1018 MARIONS COVE DR, LAKE ST. LOUIS, MO 63367 | (636) 675-7572 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| X121073001 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 03/14/1973 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | IDS PROPERTY CASUALTY INS CO ☐ Expired | | A102221779 ☐ NA ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2006 | GMC | YUKON XL | TAN | TAN | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| SA4Z2T | MO | 14 | 1GKFK66U46J175800 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 7

2 | 3 | 4 | 5 | 6 | (7)
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ■ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ☐ NA
■ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 12 11 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ■ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | JOHNSON, HANNAH LOUISE — 7 RED COAT WAY CT, O'FALLON, MO 63366 | (636) 293-5969 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| V050181020 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 06/16/1994 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM INS (☐ Expired) | | 1681899D2025C (☐ NA) ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|
| JOHNSON, TARA — 7 RED COAT WAY CT, O'FALLON, MO 63366 (☐ SAD) | ■ SAD |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2007 | CHEV | COBALT | RED / RED | 1 | 2 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| HE7D0X | MO | 15 | 1G1AK55F777315672 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car; ☐ Van (< 9 W/Driver); ☐ Passenger Van (9+ W/Driver); ☐ Sport Utility Vehicle; ☐ Limousine (7-8 W/Driver); ☐ Limousine (9-15 W/Driver); ☐ Motorized Bicycle; ☐ Pedalcycle → ☐ To / From School

☐ Small Bus (9-15 W/Driver); ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other

☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown

☐ Motor Home; ☐ Farm Implements; ☐ Construction Equip. Heavy Mach.; ☐ Other Vehicle (Code) ____; ☐ Cargo Van; ☐ Pickup; ☐ Other Heavy Truck; ☐ Unknown (Explain)

☐ Single-unit Truck; 2 axles, 6 tires; ☐ Single-unit Truck; 3 or more axles; ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors); ☐ Truck Tractor With No Units; ☐ Truck Tractor With One Unit; ☐ Truck Tractor With Two Units; ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only): ☐ Less than or equal to 10,000 lbs.; ☐ 10,001 - 26,000 lbs.; ☐ Greater than 26,000 lbs.; ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police; ☐ Ambulance; ☐ Fire; ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run; ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ☐ NA

■ Congestion Ahead; ☐ Other Incident Ahead; ☐ Crash Ahead; ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative ___ (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| ☐ Unknown; 12 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain); ☐ Speed - Exceeded Limit; ☐ Too Fast For Conditions; ☐ Violation Signal / Sign; ☐ Failed To Yield; ☐ Alcohol; ☐ Drugs

☐ Vision Obstructed; ☐ Driver Fatigue / Asleep; ☐ Improper Signal; ☐ Improper Backing; ☐ Improper Turn; ☐ Improper Passing; ☐ Improperly Parked

☐ Failed To Dim Headlights; ☐ Failed To Use Lights; ☐ Following Too Close; ☐ Wrong Side (Not Passing); ☐ Wrong Side (One-Way); ☐ Physical Impairment (Explain); ☐ Improper Start From Park

☐ Improper Towing / Pushing; ☐ Improperly Stopped On Roadway; ■ Improper Lane Usage / Change; ☐ Overcorrected; ☐ Improper Riding / Clinging To Veh. Exterior; ☐ Failed To Secure Load / Improper Loading; ☐ Animal(s) In Roadway

☐ Object / Obstruction in Roadway; ☐ Distracted / Inattentive (Designate Type); ☐ Unknown (Explain); ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

7F.

| OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| BUSKEN, GARY PATRICK<br>33 VALLEY OAK CT, O'FALLON, MO 63366 | 12/17/1993 | F | FR | 5 | 1 | 2 | 3 | 5 | (636) 499-0908 |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|
| ☐ SAO | ☐ SAO |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier; ☐ Intrastate Carrier; ☐ Not In Commerce - Government Vehicle; ☐ Not In Commerce - Rental Vehicle; ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO.: USDOT NO.:

CARGO BODY TYPE: ☐ Enclosed Box; ☐ Cargo Tank; ☐ Flatbed; ☐ Dump; ☐ Concrete Mixer; ☐ Auto Transporter; ☐ Garbage / Refuse; ☐ Grain / Chip / Gravel; ☐ Pole Trailer; ☐ Log; ☐ Vehicle Towing Another Veh.; ☐ Intermodal Container Chassis; ☐ NA (No Cargo Body); ☐ Other; ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR / FC SC TC / FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU - Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)
1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES
1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES
1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES
1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Through investigation at the scene it was determined that Vehicle 1(V1) was travelling south bound on Lake St. Louis Boulevard crossing I-70 approaching Veteran's Memorial Parkway. Vehicle 2(V2) was also travelling south bound on Lake St. Louis Boulevard crossing I-70 approaching Veteran's Memorial Parkway. The collision occurred when V1 travelled in reverse to avoid blocking the intersection and struck the driver's side front corner of V2. V1 received minor passenger side rear bumper damage.

Driver 1(D1) stated he was travelling south bound on Lake St. Louis Boulevard crossing I-70. D1 stated he entered the intersection of south bound Lake St. Louis Boulevard and the exit ramp of east bound I-70 to Lake St. Louis Boulevard. D1 stated he entered the intersection while the electric signal was displaying green. D1 stated that traffic was not moving due to heavy traffic. D1 stated the electric signal turned red while he was in the intersection so he proceeded to travel in reverse to avoid blocking the intersection. D1 stated he began to travel backwards and V2 entered his lane behind his vehicle and he struck the front driver's side corner of V2.

Driver 2(D2) stated she was travelling on south bound Lake St. Louis Boulevard crossing I-70. D2 stated she was attempting to change lanes from the right far right lane to the center lane on the overpass. D2 stated her vehicle was stopped in traffic and at a slight angle between the right lane and center lane. D2 stated her vehicle was then struck by V1.

V1 and V2 both were driven from the scene. D1 and D2 both refused medical attention at the time of this incident.

Any further information will be submitted in a supplemental report.

Respectfully Submitted,

P.O. Jeffery LaPorte DSN 272

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| LAPORTE, JEFFERY | 272 | 1 | |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 1 | 0 | 2013-00204 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 02/18/2013 | 0922 | 02/18/2013 | 0924 | 02/18/2013 | 0937 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | 1 | LAT: 038°48'13.5" LONG: -90°46'14.6" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAST LOUIS BLVD | W | ☐ NA 63 Feet ____ Miles | ■ After ☐ Before ☐ At ☐ NA | IS / 70 |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 60 | E | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ☐ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ■ Cloudy ☐ Snow ☐ Freezing (Temp) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

DISTRIBUTION: COPY - AGENCY FILE ORIGINAL - MISSOURI STATE HIGHWAY PATROL - TRAFFIC RECORDS DIVISION - P.O. BOX 568 - JEFFERSON CITY, MO 65102 SHP-2Q 01/12

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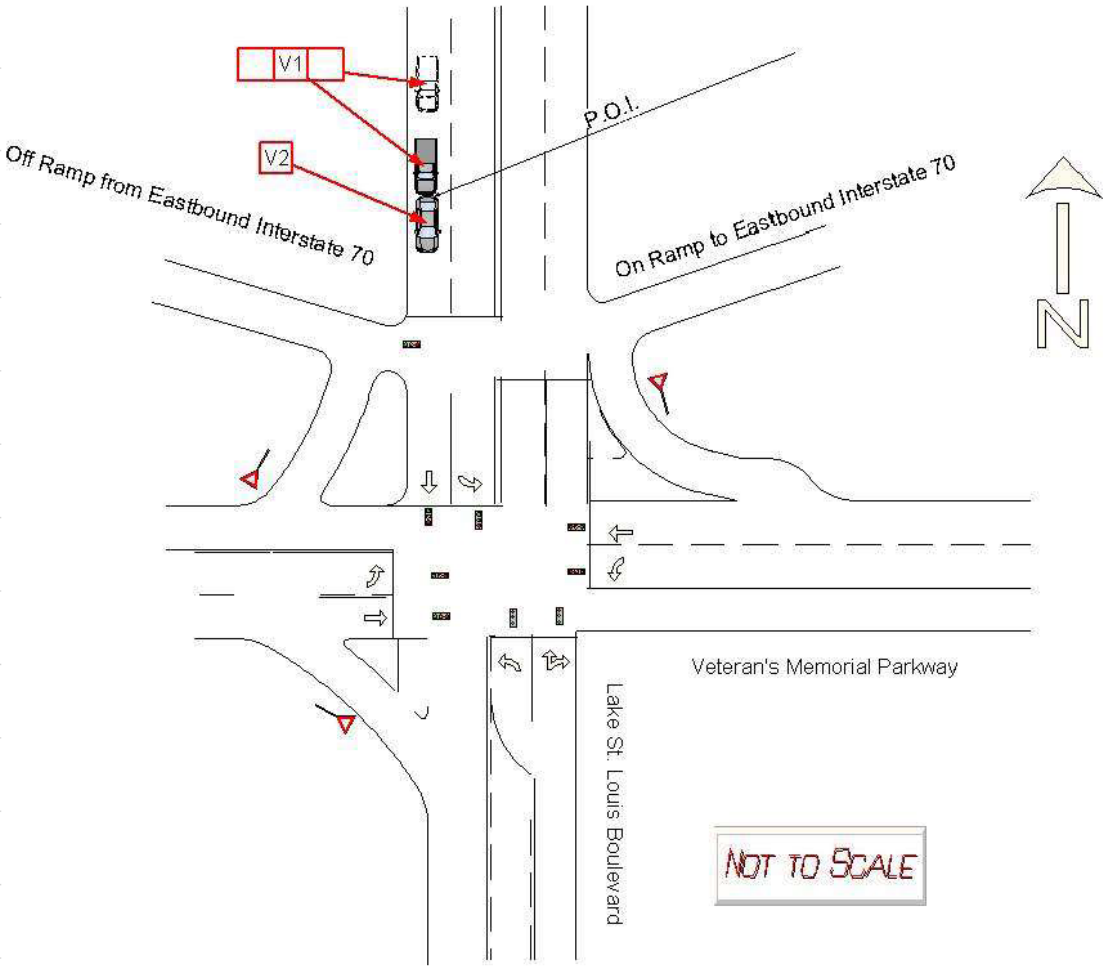
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S (W) U | V2 N E S (W) U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

REPORT # 2013-00204 PAGE 3 OF 5

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | PHELPS, GLENN EDMOND 809 TAYLOR PLACE, O'FALLON, MO 63366 | (636) 544-2903 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| T121352001 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 12/23/1964 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ☐ Expired; AMERICAN FAMILY | | ☐ NA; 1607-5635-03-90-FPPA-MO | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2003 | DODGE | DAKOTA | BLU | BLU | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 0MS981 | MO | 2013 | 1D7HG38X63S234658 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) →
  - ☐ School Bus
  - ☐ Intercity
  - ☐ Transit / Commuter
  - ☐ Charter / Tour
  - ☐ Other
- ☐ Motorcycle
- ☐ ATV →
  - ☐ 2 Wh
  - ☐ 3 Wh
  - ☐ 4 Wh
  - ☐ 5 Wh / More
  - ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ■ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)

- ■ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

- ☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
- ☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

- ☐ Congestion Ahead ☐ Other Incident Ahead
- ☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| ☐ Unknown; 01 08 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ■ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | HAGAN, CHARLES E 5 PEBBLE RIDGE CT, ST. PETERS, MO 63376 | (636) 970-1465 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| T148312024 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 11/30/1941 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | AMERICANFAMILY | | 2417-9309-02-87-FPPA-MO | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2005 | TOYOTA | MATRIX | BLU | BLU | 1 | 2 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| UC5Z7T | MO | 2013 | 2T1KR32E05C328198 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 8

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 08 12 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|---|
| HAGAN, MARY J<br>SAD | 09/28/1943 | F | FR | 4 | 1 | 2 | 3 | 5 | | (636) 875-6238 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR
FC SC TC
FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU - Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Through investigation at the scene, it was determined that vehicle 2 was stopped in traffic at a red traffic signal on westbound Lake St. Louis Boulevard, south of Interstate 70. Vehicle 1 was traveling behind vehicle 2. The collision occurred as vehicle 1 rear ended vehicle 2 as it was stopped for the red traffic signal.

Driver 1 stated he was following behind vehicle 2 on westbound Lake St. Louis Boulevard, south of Interstate 70, when vehicle 2 stopped for the red traffic signal. Driver 1 stated he was unable to stop in time causing him to rear end vehicle 2.

Vehicle 1 had minor damage to the vehicle's front bumper.

Driver 2 stated he was traveling westbound on Lake St. Louis Boulevard, south of Interstate 70 when he observed a red traffic signal. Driver 2 stated he came to a stop for the red signal and was rear ended by vehicle 1. Driver 2 stated he did not know what caused vehicle 1 to rear end him.

Occupant 1 (Mary) corroborated driver 2's statement.

Vehicle 2 had minor damage to the rear of the vehicle.

Driver 1 and driver 2 advised they were uninjured and refused medical attention. Occupant 1 (Mary) advised her back was a little sore, but refused medical attention.

Both vehicles were driven from the scene.

Any further information will be submitted in a supplemental report.

Respectfully Submitted,

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| CROWLEY, GERALD | 239 | 1 | 1 |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

**AGENCY NAME AND ORI**

Lake St. Louis Police Department

MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2013-00031 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 01/08/2013 | 1029 | 01/08/2013 | 1031 | 01/08/2013 | 1042 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ■ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'10.9" LONG: -90°46'14.7" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAKE ST LOUIS BLVD | N | ■ NA ____ Feet ____ Miles | ☐ After ☐ Before ■ At ☐ NA | IS / 70 |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 60 | E | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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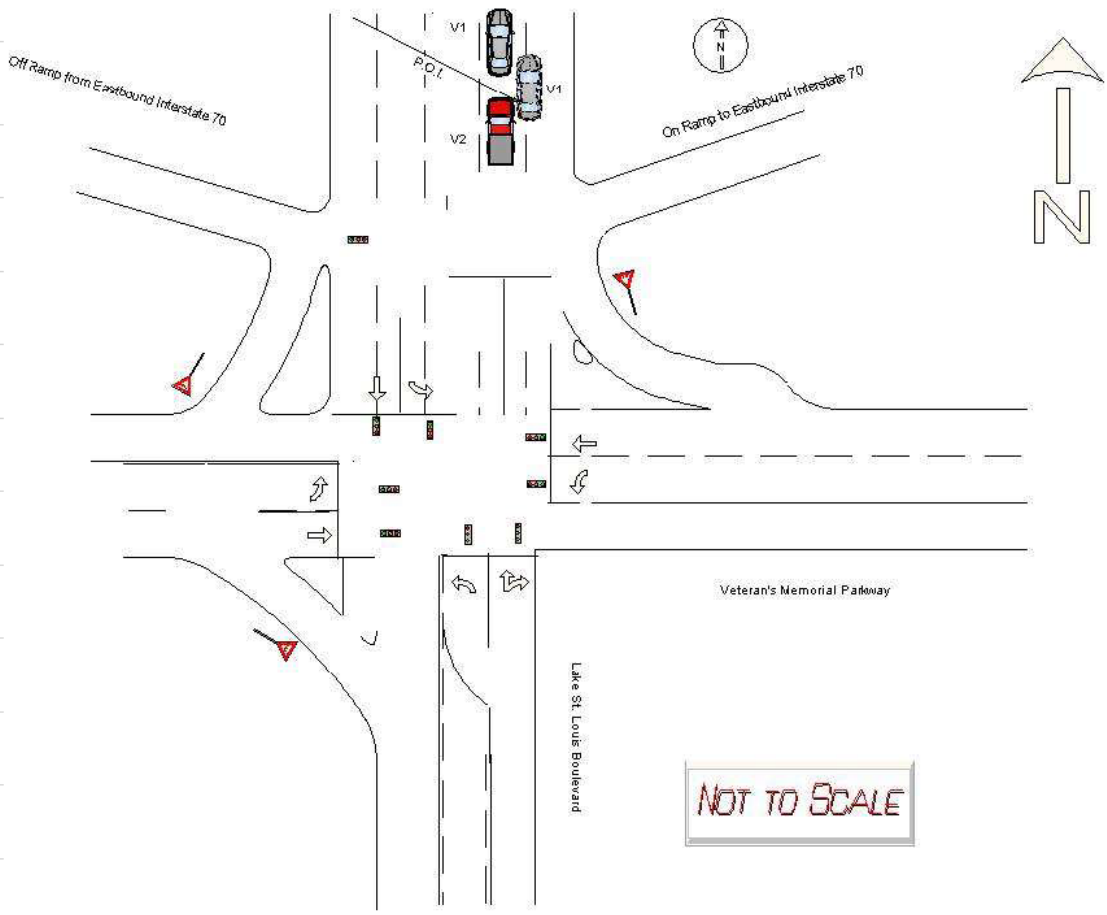
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S W U | V2 N E S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | LANG, BRIAN PAUL 4 CHAMBERS CT, O'FALLON, MO 63366 | (636) 542-1869 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| N050302021 | MO | ■ Valid; ☐ Expired; ☐ Susp / Rev / Denied; ☐ Disqual CDL; ☐ Canceled / Oth Invalid; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ Permit; ☐ Unknown (Explain); ☐ CDL Class ___; ☐ MC Only; ☐ Interm / Grad; ☐ Unlicensed; ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 10/28/1988 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ NA; ☐ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain) |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | GEICO ☐ Expired | | 4288530118 ☐ NA | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2007 | CHEVY | IMPALIA | SIL | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| PJT800 | HI | 2013 | 2G1WB58K679286923 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 11

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ Fire ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead ☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 14 34 | | | ☐ Yes ☐ Unk ☐ No ■ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ■ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

| 7E. WORK ZONE | TRAFFIC CONTROL | CONTROL MALFUNCTIONING / INOPERATIVE / MISSING |
|---|---|---|
| ☐ Yes ■ No ☐ Unknown | ☐ None ☐ Unknown | |
| Workers Present ☐ Yes ☐ No ☐ Unknown | Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain) | ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA |
| | Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain) | |

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | DUBOIS, MICHAEL VINCENT 721 RED GATE DR, DEFIANCE, MO 63341 | (636) 798-2078 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| L6167309 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 02/04/1959 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | GARRISON PROP AND CAS INS CO | | 00525652OR | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 1997 | FORD | F250 | RED | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 7MM719 | MO | 2013 | 1FTHX26F3VED06626 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 2

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

☐ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
■ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
■ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ☐ Unk ☐ No ■ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
■ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ☐ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir:

On Tuesday, 01-08-13 at approximately 1031 hours, I responded to Lake Saint Louis Blvd over Interstate 70 for a report of a vehicle crash.

Upon arrival I made contact with the driver of Vehicle #2. Driver #2 stated he was traveling north in the center lane of Lake Saint Louis Blvd. Driver #2 stated he heard a vehicle honking its horn. Driver #2 stated the front right bumper of his vehicle was struck by Vehicle #1. Driver #2 stated he stopped his vehicle and Vehicle #1 pulled in front of him. Driver #2 stated Driver #1 began to yell. Driver #2 stated he called the Lake Saint Louis Police Department.

I next spoke with Driver #1. Driver #1 stated he was also driving in the center lane traveling north on Lake Saint Louis Blvd. Driver #1 stated Vehicle #2 came into his lane and struck his vehicle on the rear driver's side wheel area. Driver #1 stated he stopped and Vehicle #2 pulled behind him.

Due to my investigation at the scene it was impossible for both vehicles to be in the same lane, due to the nature of the damage to both vehicles.

Both subjects stated they were not injured and refused medical attention on the scene.

Both vehicles were driven from the scene.

Any further information will be submitted in a supplemental report.

Respectfully Submitted

R. G. Henson DSN 277

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| HENSON, GARRETT | 277 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2013-00623 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 05/14/2013 | 0940 | 05/14/2013 | 0943 | 05/14/2013 | 0951 | ■ Yes ☐ No |

CRASH TYPE

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.
   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →
2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.
   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'10.9" LONG: -90°46'14.7" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAKE ST LOUIS BLVD | S | ■ NA ____ Feet ____ Miles | ☐ After ☐ Before ■ At ☐ NA | RP / 70 |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 60 | E | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ☐ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ■ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ☐ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ■ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ☐ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

DISTRIBUTION: COPY - AGENCY FILE ORIGINAL - MISSOURI STATE HIGHWAY PATROL - TRAFFIC RECORDS DIVISION - P.O. BOX 568 - JEFFERSON CITY, MO 65102 SHP-2Q 01/12

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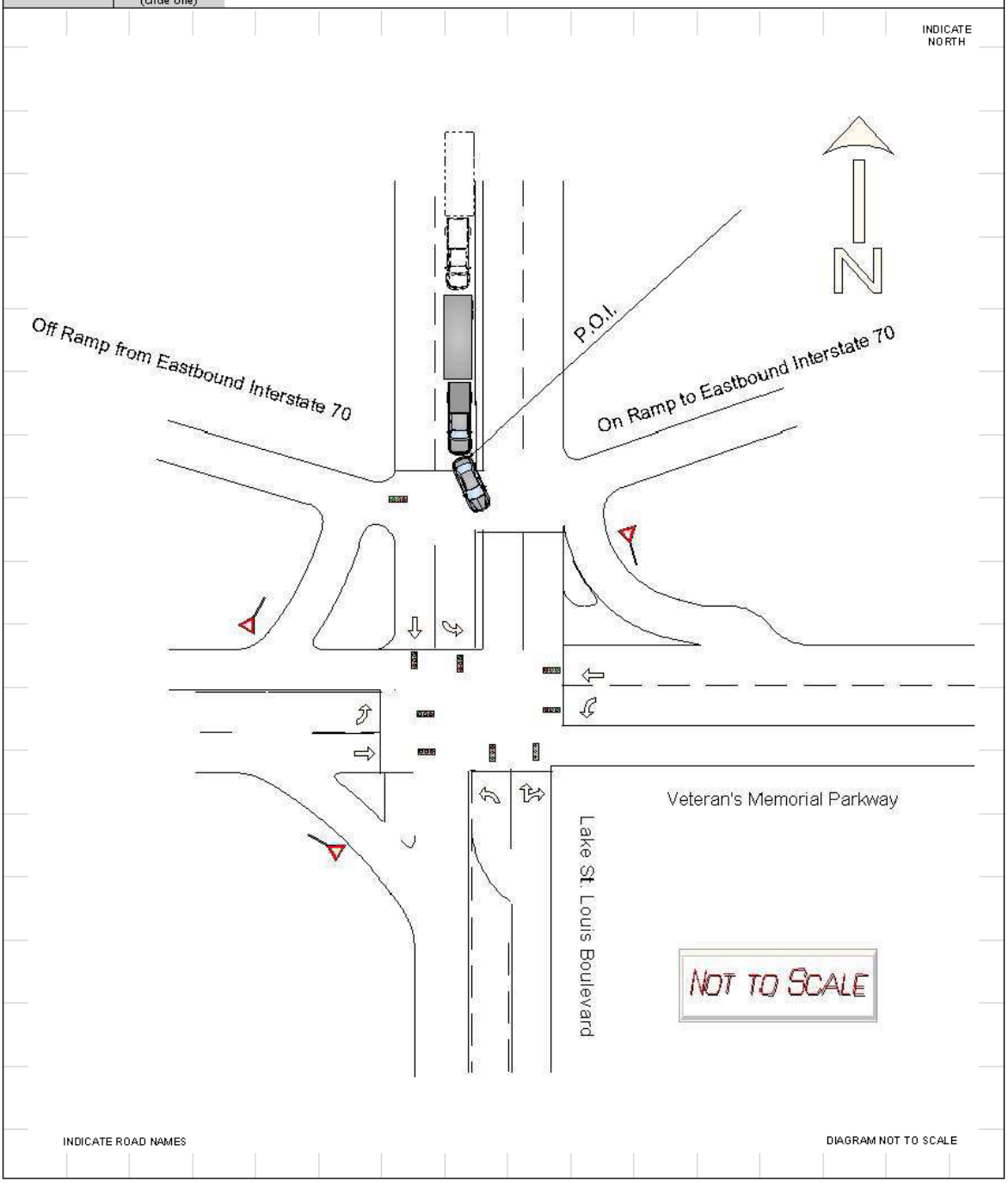
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E (S) W U | V2 N E (S) W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|



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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | | PHONE NUMBER |
|---|---|---|---|
| 1 | HAWKINS, JAMES DEAN | 9 JODY DRIVE, ST. PETERS, MO 63376 | (314) 605-5473 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| U148305007 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ☐ Operator Class ___; ■ CDL Class A; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 11/03/1956 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ACUITY (☐ Expired) | | L73385 (☐ NA) | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) (☐ SAD) | | PHONE NUMBER (☐ SAD) |
|---|---|---|
| JD HAULING LLC | 9 JODY DRIVE, ST. PETERS, MO 63376 | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2011 | FORD | F-450 | WHI | WHI | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 50AF0M | MO | 2013 | 1FT8W4DT2BEA45475 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

**VEHICLE BODY TYPES - Automobiles / Specialty Vehicles** ☐ Vehicle Used As Public Conveyance

☐ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
■ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
■ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

**7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES** ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES (☐ Unknown) | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 08 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

**7D. PROBABLE CONTRIBUTING CIRCUMSTANCES** ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
■ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

**7E. WORK ZONE** ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

**TRAFFIC CONTROL** ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

**CONTROL MALFUNCTIONING / INOPERATIVE / MISSING** ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

**7G. COMMERCIAL MOTOR VEHICLE** ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) (☐ SAO) | PHONE NUMBER (☐ SAO) |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | MADONNA, BARBARA E 1620 COUNTRY SPRING DRIVE, WENTZVILLE, MO 63385 | (636) 327-5232 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| D1173616 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 11/19/1935 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ☐ Expired STATE FARM | | ☐ NA 386 6126-F04-25J | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2013 | HONDA | CIVIC | BLU | BLU | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| PA8A4X | MO | 2013 | 1HGCR2F3XDA035775 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 9

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ Fire ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead ☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 05 12 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

| 7E. WORK ZONE | TRAFFIC CONTROL | CONTROL MALFUNCTIONING / INOPERATIVE / MISSING |
|---|---|---|
| ☐ Yes ■ No ☐ Unknown | ☐ None ☐ Unknown | |
| Workers Present ☐ Yes ■ No ☐ Unknown | Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain) | ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA |
| | Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain) | |

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Through investigation at the scene, it was determined that vehicle 1 was traveling southbound Lake St. Louis Boulevard, north of the eastbound Interstate 70 entrance ramp. Vehicle 2 was traveling directly in front of vehicle 1. The collision occurred as driver 2 started into the intersection, but stopped as the light turned yellow, causing vehicle 1 to rear end vehicle 2.

Driver 1 stated he was following vehicle 2, southbound Lake St. Louis Boulevard, north of the eastbound Interstate 70 entrance ramp. Driver 1 stated as driver 2 entered the intersection and started to make a left turn onto the eastbound Interstate 70 entrance ramp, the light turned yellow and driver 2 stopped abruptly, causing him to rear end vehicle 2. Driver 1 stated because of the weight of his vehicle, trailer and load, he was unable to stop in time.

Vehicle 1 had minor damage to the driver's side of the front bumper.

Driver 2 stated she was traveling southbound on Lake St. Louis Boulevard, north of the eastbound Interstate 70 entrance ramp when she observed the traffic signal turn to yellow. Driver 2 stated as she came to a stop for the yellow light, she was rear ended by vehicle 1.

Vehicle 2 had minor damage to the driver's side of the rear bumper.

Both parties involved advised they were uninjured and refused medical attention.

Both vehicles were driven from the scene.

Any further information will be submitted in a supplemental report.

Respectfully Submitted,

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| CROWLEY, GERALD | 239 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2013-00819 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 06/22/2013 | 1935 | 06/22/2013 | 1937 | 06/22/2013 | 1946 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ■ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'10.8" LONG: 090°46'14.8" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| SOR / VETERANS MEMORIAL PKWY | E | ■ NA _____ Feet _____ Miles | ☐ After ☐ Before ■ At ☐ NA | CST / LAKE ST LOUIS BLVD |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 45 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 25 | N | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ☐ Level ☐ Downhill ☐ Dip ■ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ☐ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ■ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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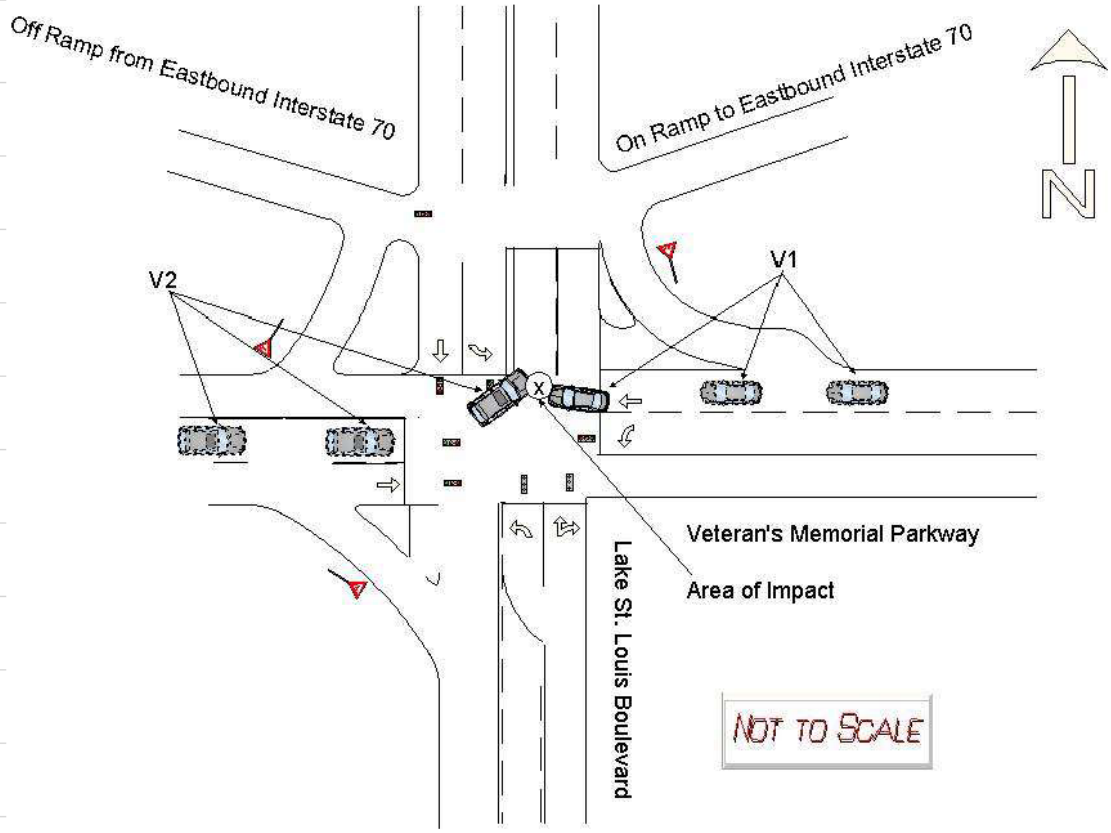
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S (W) U | V2 N (E) S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | PIZZO, SALVATOR 1077 BROOK MONT DR, O'FALLON, MO 63366 | (314) 322-7441 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| L148254018 | MO | ■ Valid ☐ Expired ☐ Susp / Rev / Denied ☐ Disqual CDL ☐ Canceled / Oth Invalid ☐ Unknown ☐ NA | ■ Operator Class F ☐ Permit ☐ Unknown (Explain) ☐ CDL Class ___ ☐ MC Only ☐ Interm / Grad ☐ Unlicensed ☐ NA | ☐ Yes ■ No ☐ NA ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 01/15/1966 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed ☐ Windshield ☐ Load on Veh ☐ Trees / Brush ☐ Building ☐ Embankment ☐ Sign ☐ Hillcrest ☐ Parked Veh ☐ Moving Veh ☐ Stopped Veh ☐ Glare ☐ Other (Explain) ☐ Unknown (Explain) ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | PROGRESSIVE INS CO. | | 11117231-5 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2011 | INFINITY | G37X | GRY | GRY | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| DG8E9N | MO | 2014 | JN1CV6AR3BM403287 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus ☐ Intercity ☐ Transit / Commuter ☐ Charter / Tour ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh ☐ 3 Wh ☐ 4 Wh ☐ 5 Wh / More ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 08 15 07 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | MCDONALD, JAKE PATRICK 105 S. MAPLE, LACONNER, WA 98257 | (636) 734-5358 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| MCD0NJP205KZ | WA | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 05/09/1980 | M | FL | 5 | 1 | 2 | 1 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ☐ Expired ALLSTATE INS CO. | | ☐ NA 976511587 05/09 ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 1992 | NISSAN | PATHFINDER | BLK | BLK | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| ALF0872 | WA | 2014 | JN8HD17YXNW018782 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 2

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

☐ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
■ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 12 09 01 05 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
■ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR / FC SC TC / FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU - Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)
1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES
1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES
1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES
1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Driver 1 stated that he had been traveling west on Veteran's Memorial Pkwy approaching the intersection with Lake St. Louis Blvd. Driver 1 stated that as he proceeded west through the intersection on a green electric signal, vehicle 2 turned left from eastbound Veteran's Memorial Pkwy onto Lake St. Louis Blvd directly into the path of vehicle 1. Driver 1 stated that he braked vehicle 1 and turned the wheel to the right to avoid a collision with vehicle 2, but was unsuccessful. Driver 1 stated that vehicle 1 struck vehicle 2 in the right front corner with the front bumper and right front corner of vehicle 1. Driver 1 reported no injury and vehicle 1 was driven from the scene. I observed moderate damage to the front bumper molding and right front bumper of vehicle 1.

Driver 2 stated that he had been traveling east on Veteran's Memorial Pkwy approaching the intersection with Lake St. Louis Blvd. He stated that that he entered the left turn lane to turn left onto Lake St. Louis Blvd. Driver 2 stated that the electric signal was solid green and he proceeded to turn left onto northbound Lake St. Louis Blvd from eastbound Veteran's Memorial Pkwy. Driver 2 stated that vehicle 1 was entering the intersection with Lake St. Louis Blvd from Westbound Veteran's Memorial Pkwy as he began to turn left. Driver 2 stated that he had already committed to the left turn and was unable to avoid the collision with vehicle 1. Driver 2 stated that vehicle 1 struck vehicle 2 in the right front corner with the front bumper and right front corner of vehicle 1. Driver 2 reported no injury and vehicle 2 was driven from the scene. I observed moderate damage to the right front bumper corner and headlight assembly of vehicle 2.

Any further information will be submitted in supplemental reports.

Respectfully submitted,
P.O. Gummels 288

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| GUMMELS, RICH | 288 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2013-00932 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 07/10/2013 | 1610 | 07/10/2013 | 1618 | 07/10/2013 | 1629 | ■ Yes ☐ No |

CRASH TYPE

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | | LAT: 038°48'10.9" LONG: -90°46'14.7" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAST LOUIS BLVD | N | ☐ NA _____ Feet _____ Miles | ☐ NA ☐ After ☐ Before ■ At | SOR / VETERANS MEMORIAL PKWY |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ☐ Unknown ☐ State ☐ County ■ Municipal ☐ Private Property ☐ Other | 45 | E | |

TRAFFICWAY: ☐ One-Way ☐ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ■ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ☐ 4-Way Intersection ☐ Y-Intersection ■ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ☐ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ■ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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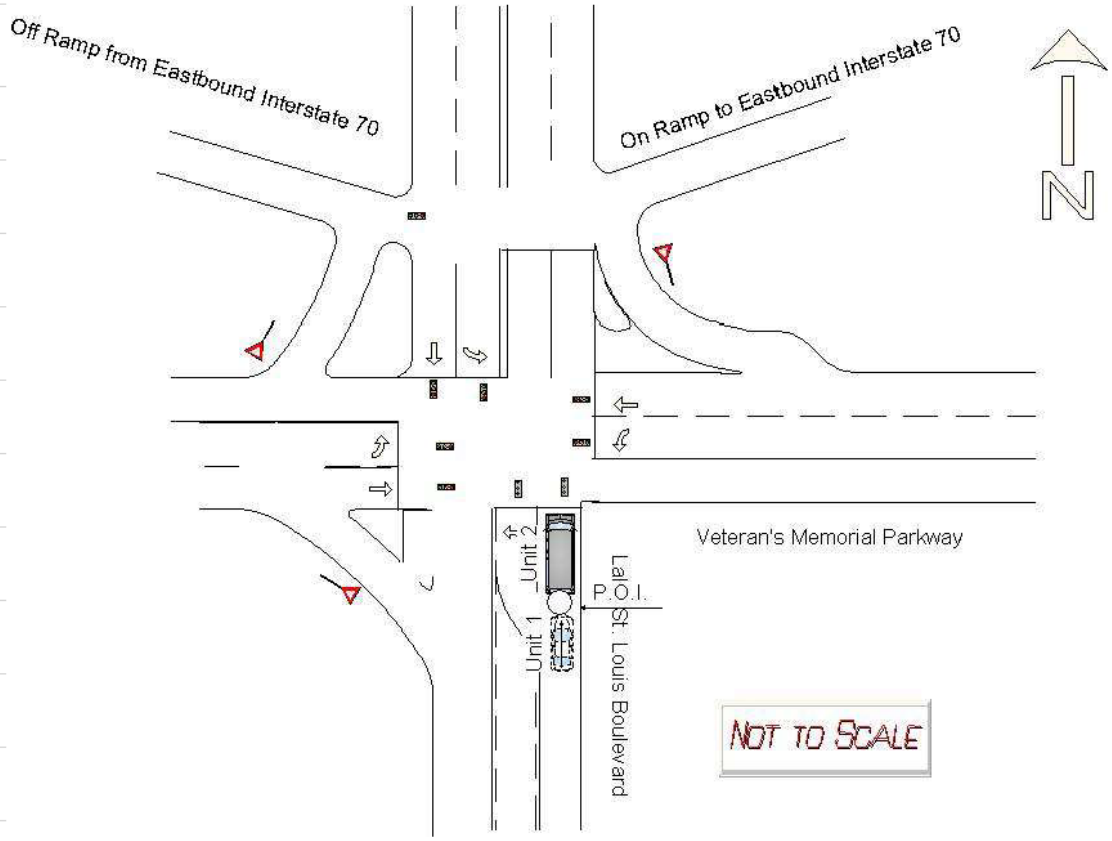
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S W U | V2 N E S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | LUPO, COURTNEY CORRINE — 265 THREE CEDARS DR, LAKE ST. LOUIS, MO 63367 | (314) 655-8223 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| W121200006 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 05/23/1995 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ NA; ☐ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain) |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ☐ Expired; ALLIED INSURANCE | | ☐ NA; PPBM0008499875-5 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| LUPO, FRANK — 265 THREE CEDARS DR, LAKE ST. LOUIS, MO 63367 | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2001 | VOLK | PASSAT | SIL | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| UG1Z6S | MO | 2013 | WVWRH63B61P286042 | ☐ Yes ■ No | ☐ Yes ☐ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

**VEHICLE BODY TYPES - Automobiles / Specialty Vehicles** ☐ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)

- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

**7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES** ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 12 01 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

**7D. PROBABLE CONTRIBUTING CIRCUMSTANCES** ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ■ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ■ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ■ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

| 7E. WORK ZONE | TRAFFIC CONTROL | CONTROL MALFUNCTIONING / INOPERATIVE / MISSING |
|---|---|---|
| ☐ Yes ■ No ☐ Unknown | ☐ None ☐ Unknown; Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain) | ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA |
| Workers Present: ☐ Yes ■ No ☐ Unknown | Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain) | |

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

**7G. COMMERCIAL MOTOR VEHICLE** ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | | PHONE NUMBER |
|---|---|---|---|
| 2 | KIMBERLAND, DALE RICHARD | 417 WOODSTREAM DR, ST. CHARLES, MO 63304 | (314) 873-1402 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| J050095018 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 05/22/1956 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ NA; ☐ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain) |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ☐ Expired; CONTINENTAL CASUALTY INSURANCE | | ☐ NA; BUA2095786697 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | | PHONE NUMBER ☐ SAD |
|---|---|---|
| DONLEN TRUST C/O VIOX SERVICES INC | 15 W VOOREES ST, CINCINATI, OH 45215 | (636) 432-2578 |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2008 | FORD | E250 | WHI | WHI | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 3PA132 | MO | 2013 | 1FTNE14W18DB46438 | ☐ Yes ■ No | ☐ Yes ☐ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 7

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

☐ Passenger Car
■ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver)
→ ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative ___ (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 12 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING
☐ Yes (Explain) ■ No
☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ☐ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Lease, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | | PHONE NUMBER ☐ SAO |
|---|---|---|
| DONLEN TRUST C/O VIOX SERVICES INC | 15 W VOORHEES ST, CINCINATI, OH 45215 | (636) 432-2578 |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ■ Not In Commerce - Other Vehicle

MC / MX / ICC NO.

USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ■ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ■ No ☐ Unknown | | | ☐ Yes ■ No ☐ Unknown | ☐ Yes ■ No ☐ Unknown | |

8 - CODES

**SEAT LOCATION**

FR SR TR
FC SC TC
FL SL TL

XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU -Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

**INJURY**

1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

**TRANSPORTED** (For Medical Treatment)

1. No
2. EMS
3. Other
U. Unknown
N. NA

**EJECTION**

1. NA
2. No
3. Partially
4. Totally
U. Unknown

**AIR BAG**

1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

**SAFETY DEVICES**

1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

**VEHICLE ACTION / SEQUENCE OF EVENTS** (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

**ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS**

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

**FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS**

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

**DISTRACTED / INATTENTIVE CODES**

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

**VEHICLE TYPE CODES**

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

**OTHER VEHICLE CODES**

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

**9. NARRATIVE / STATEMENTS** (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

On Wednesday, 07-10-2013 at approximately 1629 hours, I responded to the area of Lake Saint Louis Blvd. near Veterans Memorial Parkway in reference to a non injury motor vehicle crash.

I spoke with D-1 who advised that she was stopped behind V-2 at a steady red electric signal on northbound Lake Saint Louis Blvd. at Veterans Memorial Parkway. D-1 advised that the light changed to green and she assumed V-2 would proceed through the intersection. D-1 accelerated and V-2 did not move. The front of V-1 then struck the rear of V-2.

D-2 advised that he was stopped at a steady red electric signal on Lake Saint Louis Blvd. at Veterans Memorial Parkway when V-2 was struck in the rear by V-1.

No parties reported any injuries and no vehicles were towed from the scene.

Any further information will be submitted in a supplemental report,

Respectfully submitted,

P.O. Jeffrey Thompson DSN 291

**10. REPORTING AND REVIEWING OFFICER INFORMATION**

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| THOMPSON, JEFF | 291 | 1 | |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ■ Yes ☐ No | | ☐ Yes ■ No | | ■ | 0 | 0 | 2014-01166 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 08/12/2014 | 1732 | 08/12/2014 | 1738 | 08/12/2014 | 1750 | ☐ Yes ■ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ■ Yes ☐ No | P.O. BADY 202 | ■ Investigating Agency LAKE ST. LOUIS P.D. |
| RECONSTRUCTION ☐ Yes ■ No | BY WHOM | AVAILABLE FROM ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'12.0" LONG: -90°46'14.0" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAKE ST LOUIS BLVD | S | ☐ NA _____ Feet _____ Miles | ☐ After ☐ Before ■ At ☐ NA | IS / 70 |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 35 | ☐ Unknown ☐ State ☐ County ■ Municipal ☐ Private Property ☐ Other | 60 | E | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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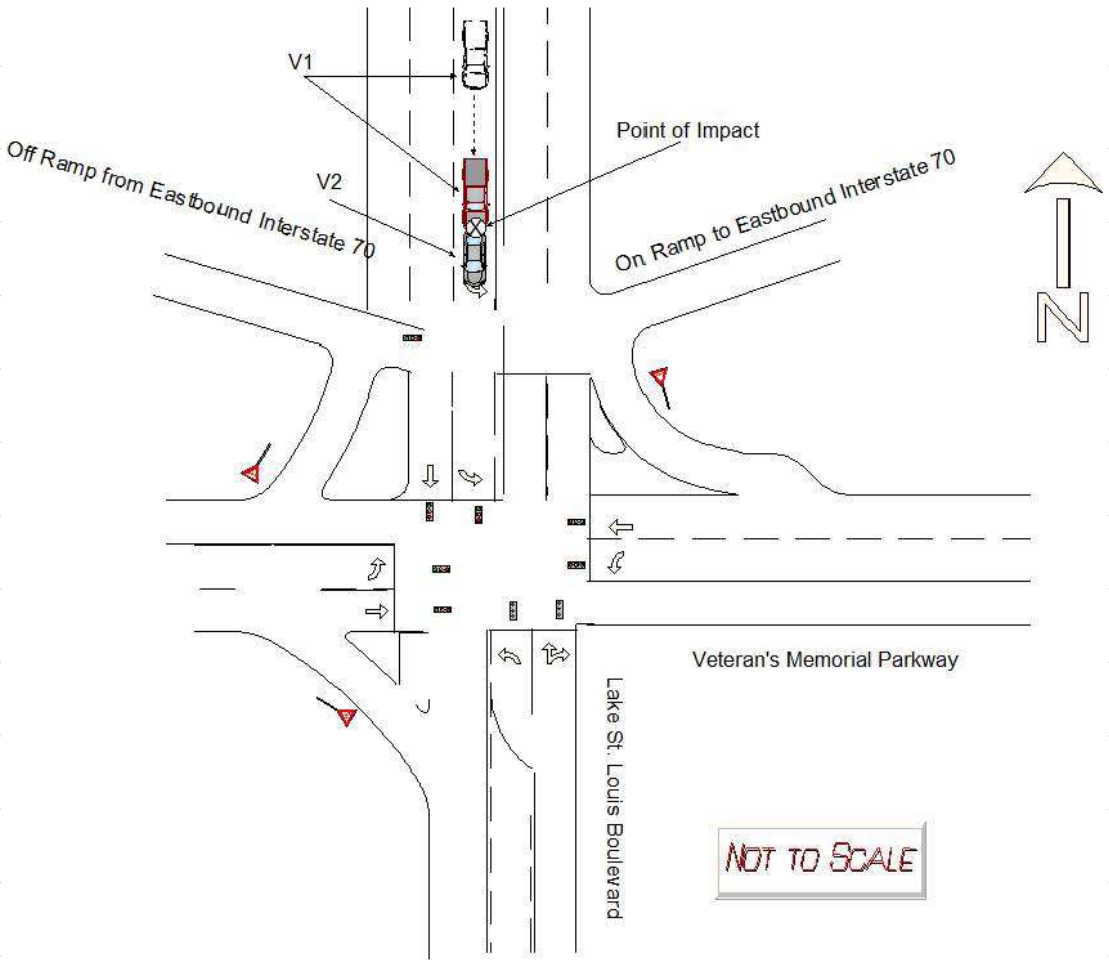
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E (S) W U | V2 N E (S) W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | | PHONE NUMBER |
|---|---|---|---|
| 1 | BINDER, THOMAS JAMES | 104 EISENHOWER, ST. PETERS, MO 63376 | (314) 486-4812 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| S137195043 | MO | ☐ Valid ■ Susp / Rev / Denied ☐ Canceled / Oth Invalid ☐ Expired ☐ Disqual CDL ☐ Unknown ☐ NA | ☐ Operator Class ___ ■ CDL Class B ☐ Interm / Grad ☐ Permit ☐ MC Only ☐ Unlicensed ☐ Unknown (Explain) ☐ NA | ☐ Yes ☐ No ■ NA ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 05/13/1977 | M | FL | U | 1 | 2 | U | U | ☐ Not Obstructed ☐ Windshield ☐ Load on Veh ☐ Trees / Brush ☐ Building ☐ Embankment ☐ Sign ☐ Hillcrest ☐ Parked Veh ☐ Moving Veh ☐ Stopped Veh ☐ Glare ☐ Other (Explain) ■ Unknown (Explain) ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ☐ Yes ■ No ☐ Not Required | ☐ Expired | | ☐ NA ☐ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | | PHONE NUMBER ■ SAD |
|---|---|---|
| DIEL, ASHLEY | 104 EISENHOWER, ST. PETERS, MO 63376 | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2001 | FORD | F150 | BURG | BURG | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 0MS805 | MO | 2015 | 1FTRX18L71NB85465 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus ☐ Intercity ☐ Transit / Commuter ☐ Charter / Tour ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh ☐ 3 Wh ☐ 4 Wh ☐ 5 Wh / More ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ■ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ■ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ Fire ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead ☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ■ Unk ☐ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ■ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | LECURU, JULIE LYNN 1314 BUFFALO ROCK DR., O'FALLON, MO 63366 | (573) 619-0378 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| T980478539 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 01/28/1973 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM ☐ Expired | 636-474-0700 | 276 1318 F30-25 ☐ NA ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| LECURU, JULIE LYNN 1314 BUFFALO ROCK DR., O'FALLON, MO 63366 | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2007 | SATURN | ION | GRY GRY | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| KJ7Y4P | MO | 2015 | 1G8AJ58F77Z201093 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 8

2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 1 | 15 | 16 | 17

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 12 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR / FC SC TC / FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU - Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)
1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES
1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES
1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES
1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

On Tuesday, 8/12/2014 at approximately 1750 hours, I responded to the lot of Circle K, located at 1001 Lake St. Louis Blvd. for a report of a motor vehicle crash involving two vehicles. Upon arrival I contacted the reporting party, Julie Lecuru (see " Persons" ).

Driver 1 left the scene before my arrival. Driver 2 stated that she was shaken up from the crash, but uninjured and did not require medical assistance.

Driver 2, Julie Lecuru was the sole occupant of Vehicle 2. She stated that she was traveling southbound on Lake St. Louis Blvd. and merged into the left turn lane for the entrance ramp to eastbound Interstate 70. She approached the electric signal that had turned red and waited at the signal. She said that she was waiting at the red light for only a few seconds before being struck from behind by Vehicle 1. She said they both moved their vehicles to the gas station parking lot of Circle K. She said Driver 1 exited his vehicle and told her that he did not have insurance and then got back into his truck and left the area.

I observed damage to the rear bumper of Vehicle 2 and took several photographs of the damage.

Vehicle 2 was driven from the scene by the owner.

I was later able to make contact with Driver 1 by telephone, however; he has yet to provide any details of the incident.

See Investigative section for further information.

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| BADY, JOHN | 202 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2014-01393 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 09/23/2014 | 1448 | 09/23/2014 | 0000 | 09/23/2014 | 1506 | ■ Yes ☐ No |

CRASH TYPE

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ■ Yes ☐ No | P.O. BADY 202 | ■ Investigating Agency LAKE ST. LOUIS P.D. |
| RECONSTRUCTION ☐ Yes ■ No | BY WHOM | AVAILABLE FROM ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'13.0" LONG: -90°46'14.0" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAKE ST LOUIS BLVD | S | ☐ NA _____ Feet _____ Miles | ☐ After ☐ Before ■ At ☐ NA | IS / 70 |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 60 | E | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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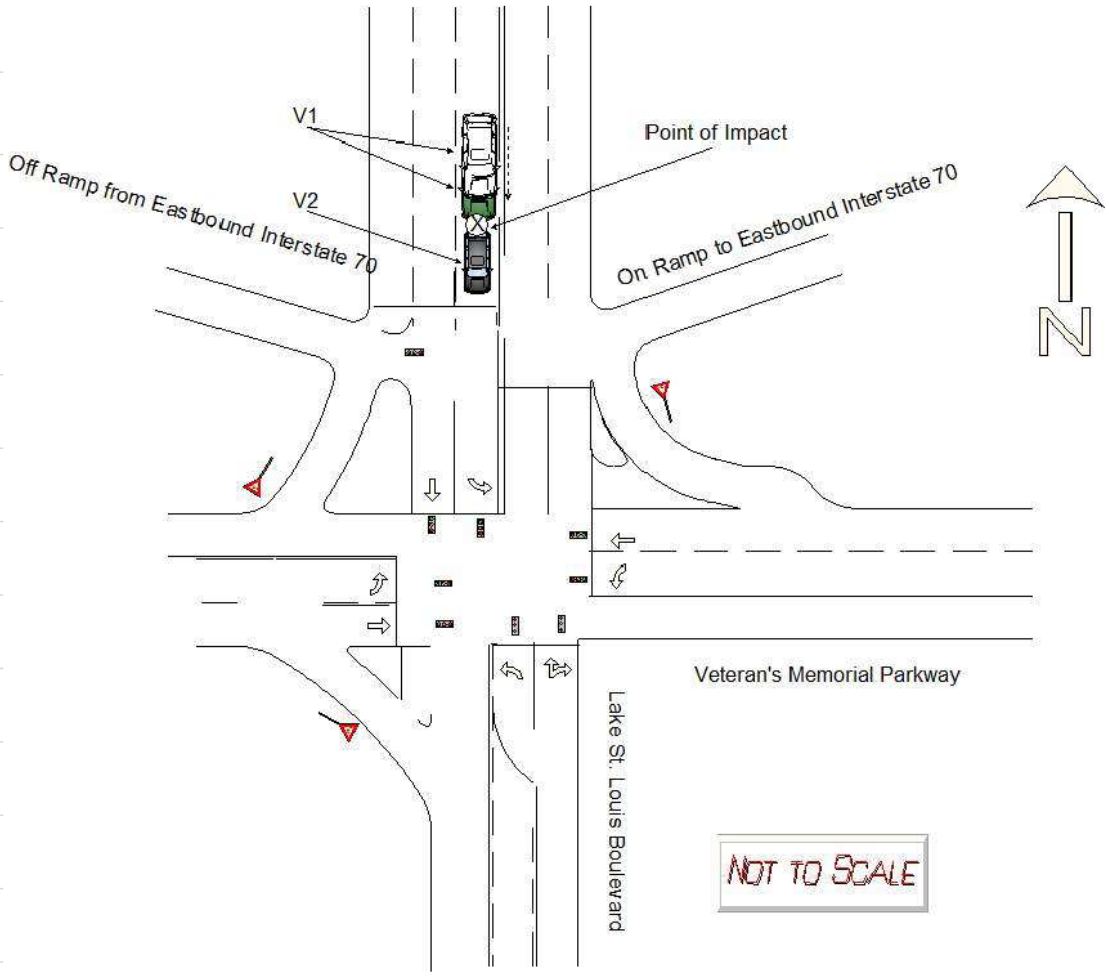
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E (S) W U | V2 N E (S) W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | THERION, BRIAN WILLARD 611 WESTHOFF AVE. #8, O'FALLON, MO 63366 | (636) 293-1786 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| E2941945 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 02/16/1967 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM ☐ Expired | 636-227-2000 | 2113428-A01-25C ☐ NA ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ■ SAD |
|---|---|
| THERION, BRIAN WILLARD 611 WESTHOFF AVE. #8, O'FALLON, MO 63366 | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2001 | FORD | EXCURSION | GRN TAN | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| 3CA94 | MO | 2015 | 1FMNU43S31EB46021 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

**VEHICLE BODY TYPES - Automobiles / Specialty Vehicles** ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ■ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)

- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

**7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES** ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

**7D. PROBABLE CONTRIBUTING CIRCUMSTANCES** ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ■ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

**7E. WORK ZONE** ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

**TRAFFIC CONTROL** ■ None ☐ Unknown

Electric: ☐ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

**CONTROL MALFUNCTIONING / INOPERATIVE / MISSING** ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

**7G. COMMERCIAL MOTOR VEHICLE** ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | BOSCHERT, PATRICK LEE 418 WESTBROOK DR., O'FALLON, MO 63366 | (636) 272-7376 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| K173361001 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 02/17/1962 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | ☐ Expired INSURANCE CONCEPTS OF ST LOUIS | | ☐ NA 4E52738 | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ☐ SAD |
|---|---|
| PINON, VINCE L 963 HAMPSHIRE HEATH, O'FALLON, MO 63368 | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2011 | ACURA | MDX | BLK | BLK | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| FE6K8Y | MO | 2015 | 2HNYD2H2XBH505643 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 8

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ■ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ Fire ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead ☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 12 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ■ None ☐ Unknown

Electric: ☐ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
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| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU - Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

On Tuesday, 9/23/2014 at approximately 1506 hours, I responded to the Lake St. Louis Blvd. overpass of Interstate 70 for a report of a minor motor vehicle crash involving two vehicles. Upon arrival I contacted both drivers and asked if they were in need of medical assistance. Both drivers stated that they were un-injured and declined any need for medical aid.

Driver 1, Brain Therion and sole occupant of Vehicle 1 stated that he was behind Vehicle 2 in the left turn lane of southbound Lake St. Louis Blvd. He said they were both waiting to turn left onto eastbound I-70. He said he thought Vehicle 2 started going, at which time; he began to move forward. He said Vehicle 2 stopped and that he did not see Vehicle 2 stop before he struck the rear of Vehicle 2 with the front of his vehicle.

Driver 2, Patrick Boschert and sole occupant of Vehicle 2 stated that he was waiting at the electric signal at southbound Lake St. Louis Blvd. to turn onto eastbound I-70. He said he was about to go through the light, but another vehicle from an opposing lane looked as if they were going to travel in front of his vehicle so he stopped and was struck from behind by Vehicle 1.

I observed a large dented area of the front bumper of Vehicle 1 and was not able to see much damage to Vehicle 2. I asked Driver 1 if the front bumper of his vehicle was damaged in a previous incident, as it did not appear to have been caused by this crash. Driver 1 stated that he had not noticed the damage before and was unsure. It should be noted that the amount of damage to the front of Vehicle 1 does not appear to be consistent with that of the damage, or lack of damage to Vehicle 2.

Photographs of both vehicles were taken and are attached for review.

Nothing further,

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| BADY, JOHN | 202 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

**AGENCY NAME AND ORI**

Lake St. Louis Police Department

MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2014-00194 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 02/12/2014 | 1145 | 02/12/2014 | 1152 | 02/12/2014 | 1210 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ■ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'11.0" LONG: 090°46'14.6" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| SOR / VETERANS MEMORIAL PKWY | E | ☐ NA 25 Feet ____ Miles | ☐ After ☐ Before ■ At ☐ NA | CST / LAKE ST LOUIS BLVD |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 45 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 35 | N | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

DISTRIBUTION: COPY - AGENCY FILE ORIGINAL - MISSOURI STATE HIGHWAY PATROL - TRAFFIC RECORDS DIVISION - P.O. BOX 568 - JEFFERSON CITY, MO 65102 SHP-2Q 01/12

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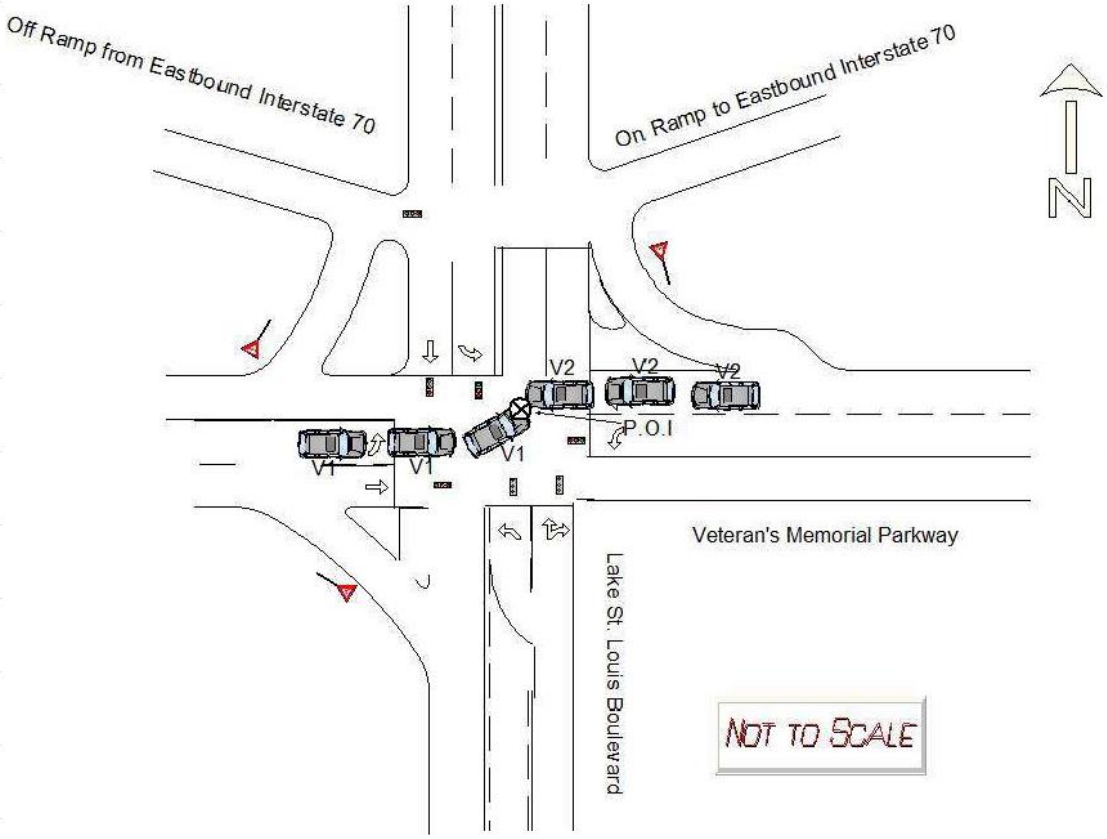
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N (E) S W U | V2 N E S (W) U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | GROSS, NICOLE 2344 EATHERTON, WILDWOOD, MO 63038 | (314) 974-2566 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| L149250031 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 07/21/1984 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM ☐ Expired | | 2531617B0125A ☐ NA; ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2010 | AUDI | Q5 | GRY | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| WH0U5K | MO | 2014 | WA1LKAFP4AA113201 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

☐ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
■ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 08 05 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
■ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | BURKEMPER, JENNIFER 111 HILLARY CIR, WENTZVILLE, MO 633685 | (816) 805-5019 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| M205120025 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 09/29/1978 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | AAA ☐ Expired | | A60728901 ☐ NA | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2012 | TOYT | VENZA | WHT | 1 | 3 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| PE6F3V | MO | 2014 | 4T3ZK3BB1CU048382 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ■ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|---|
| BURKEMPER, JAMES<br>SAD | 11/10/2011 | M | SL | 5 | 1 | 2 | 3 | 11 | | (816) 805-5019 |
| BURKEMPER, AVA<br>SAD | 02/01/2009 | F | SR | 5 | 1 | 2 | 3 | 11 | | (816) 805-5019 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

Per investigation at the scene it was determined that V1 was traveling east on Veterans Memorial Pkwy and attempting to make a left turn onto Lake St. Louis Blvd at the intersection. V2 was traveling west on Veterans Memorial Pkwy and traveling straight through the intersection.

D1 stated that as she approached the intersection, the light turned yellow and the car in front of hers proceeded through the intersection successfully making the left turn. She stated that she also was going through the intersection and was going to make a left turn when V2 continued straight. D1 stated that V2 was traveling at what she thought was a high rate of speed and struck the front of her car. She stated that she didn't see V2 in time to stop her vehicle and avoid a collision.

D2 stated that she was on Veterans Memorial Pkwy and was traveling through the intersection to continue on Veterans Memorial Pkwy. D2 stated that as she approached the light it turned yellow. She continued through the intersection when V1 attempted to make a left turn and struck her car. D2 could not stop her vehicle in time to avoid a collision.

Both vehicles had damage to the front driver side bumpers. No injuries were reported at the scene and both vehicles were driven from the scene.

Any further will be seen in a supplement.

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| HURWITZ, REBECCA | 297 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2014-00533 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 04/18/2014 | 1057 | 04/18/2014 | 1100 | 04/18/2014 | 1112 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ■ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'12.2" LONG: -90°46'14.6" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAKE ST LOUIS BLVD | N | ■ NA ____ Feet ____ Miles | ☐ After ☐ Before ■ At ☐ NA | IS / 70 |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 35 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 60 | E | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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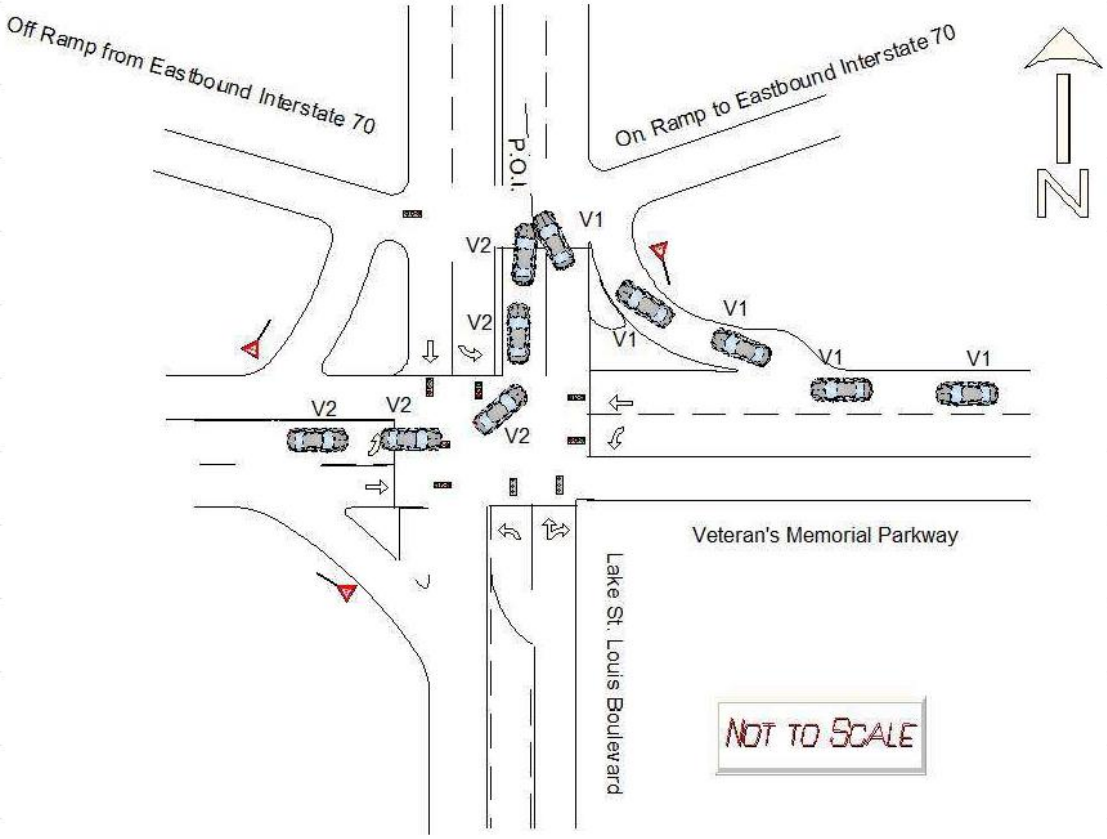
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S W U | V2 N E S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | RUCKER, BENJAMIN ANDREW — 18 BRIDLEWOOD DR, LAKE ST. LOUIS, MO 63367 | (636) 443-3129 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| T980588654 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 02/17/1997 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM (☐ Expired) | | 3599444E1025M (☐ NA) | ☐ Driver ■ Vehicle |

**7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)** ■ SAD — PHONE NUMBER ■ SAD

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2003 | NISS | ALTIMA | GLD | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| FJ1U0R | MO | 2015 | 1N4AL11D03C187431 | ☐ Yes ■ No | ☐ Yes ■ No |

**VEHICLE DAMAGE (Mark all damaged areas)** ☐ None / No Damage — TOWED BY ☐ Unknown ■ NA

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

**VEHICLE BODY TYPES - Automobiles / Specialty Vehicles** ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School

☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other

☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown

☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)

☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

**EMERGENCY VEHICLE INVOLVEMENT** ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

**CONTRIBUTING TRAFFIC CONDITIONS** ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

**7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES** ☐ Additional Codes Listed in Narrative ___ (See Codes in Section 8)

SEQUENCE OF EVENTS CODES ☐ Unknown: 03 | 14 | 34

ANIMAL CODE(S) — FIXED OBJECT CODE(S)

ALCOHOL USE: ☐ Yes ☐ Unk ■ No ☐ NA

**7D. PROBABLE CONTRIBUTING CIRCUMSTANCES** ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs

☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked

☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park

☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
■ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway

☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

**7E. WORK ZONE** ☐ Yes ■ No ☐ Unknown — Workers Present ☐ Yes ■ No ☐ Unknown

**TRAFFIC CONTROL** ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

**CONTROL MALFUNCTIONING / INOPERATIVE / MISSING** ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

**7G. COMMERCIAL MOTOR VEHICLE** ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO — PHONE NUMBER ☐ SAO

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. — USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | BILLINGSLEY, JUDITH LOUISE 225 LAKEWOOD TRAIL DRIVE, FORISTELL, MO 63348 | (636) 639-6161 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| T139289003 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ■ No ☐ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 10/21/1938 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | THE HEARTFORD MIDWEST AGENCY | | 84PH908542 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2002 | NISS | MAXIMA | GRY | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| YE8X9A | MO | 2014 | JN1DA31DX2T423187 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 2

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 05 01 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR<br>FC SC TC<br>FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir:

On Friday, 04-18-14 at approximately 1100 hours, I responded to the area of Lake St. Louis Blvd and Interstate 70 for a report of a motor vehicle crash.

Upon arrival I met with Driver #1 and #2. They both stated they were uninjured and refused medical attention on the scene.

I first spoke with Driver #1. He stated he was making a right turn from Veterans Memorial Parkway onto Lake St. Louis Blvd. Driver #1 stated he changed lanes on Lake St. Louis Blvd into the far left lane so he could access Interstate 70 westbound. Driver #1 stated as he changed lanes his vehicle struck Vehicle #2.

Driver #2 stated she was making a right from Veterans Memorial Parkway onto Lake St. Louis Blvd. Driver #2 stated as she made the turn she was in the far left lane to access Interstate 70 westbound. Driver #2 stated that her vehicle was struck by Vehicle #1.

Both vehicles were driven from the scene.

Respectfully submitted

R. G. Henson DSN 277

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| HENSON, GARRETT | 277 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2014-00630 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 05/03/2014 | 2054 | 05/03/2014 | 2056 | 05/03/2014 | 2107 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ■ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | | LAT: 038°48'12.9" LONG: 090°46'14.6" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAST LOUIS BLVD | N | ☐ NA 100 Feet ____ Miles | ■ After ☐ Before ☐ At ☐ NA | SOR / VETERANS MEMORIAL PKWY |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ☐ State ☐ County ■ Municipal ☐ Private Property ☐ Other ☐ Unknown | 45 | E | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ☐ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ■ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ☐ Daylight ■ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ☐ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| ALLEN, LARRY JAMES | 670 SPRINGFIELD DRIVE, O'FALLON, MO 63366 | (314) 303-1477 |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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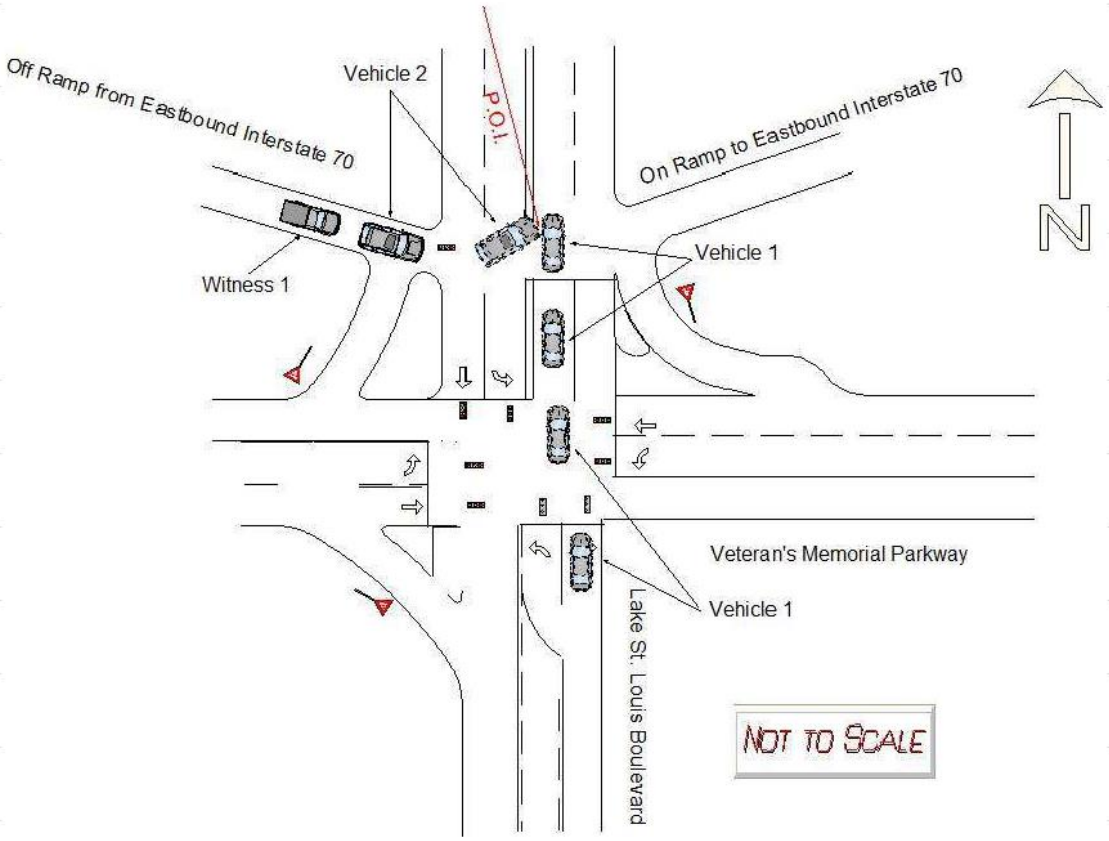
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S W U | V2 N E S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | HOPPER, LANCE CHRISTOPHER 716 WARRIOR PASS, WARRENTON, MO 63383 | (573) 220-1713 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| S058291001 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 10/13/1984 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | FARM BUREAU TOWN & COUNTRY INS | 636-456-2854 | APV041728302 | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2010 | NISSAN | ALTIMA | BLK | BLK | 1 | 2 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| UA9R7H | MO | 2014 | 1N4AL2AP4AN464809 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 12

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ Fire ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead ☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ■ Unk ☐ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ■ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|---|
| HOPPER, ANIYAH<br>SAD | 12/26/2007 | F | TR | 1 | 1 | 2 | 3 | 11 | | (573) 220-1713 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | | PHONE NUMBER |
|---|---|---|---|
| 2 | TUBBS, JONATHAN ROGER | 23 BEDFORD WAY, O'FALLON, MO 63366 | (636) 262-5298 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| T980187287 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ NA; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain) | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 07/30/1985 | M | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | PROGRESSIVE ☐ Expired | | 11677252 ☐ NA | ■ Driver ☐ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2009 | FORD | EDGE | RED | RED | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| MB4X9L | MO | 2014 | 2FMDK38C09BA88163 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 2

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

- ☐ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ■ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle
- ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 12 09 05 34 | | | ☐ Yes ■ Unk ☐ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

| 7E. WORK ZONE | TRAFFIC CONTROL | CONTROL MALFUNCTIONING / INOPERATIVE / MISSING |
|---|---|---|
| ☐ Yes ■ No ☐ Unknown | Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain) ☐ None ☐ Unknown | ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA |
| Workers Present ☐ Yes ■ No ☐ Unknown | Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain) | |

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

Through investigation at the scene it was determined that Vehicle 2 was stopped in traffic on the exit ramp of eastbound interstate 70 at Lake St. Louis Boulevard. Witness 1 was stopped in traffic directly behind Vehicle 2. Vehicle 1 was traveling straight on northbound Lake St. Louis Boulevard. Vehicle 2 began making a left turn onto northbound Lake St. Louis Boulevard. The right side of Vehicle 2's front bumper made contact with the front driver's side door of Vehicle 1.

Driver 1 advised he was traveling northbound on Lake St. Louis Boulevard near interstate 70 when Vehicle 2 made contact with his driver's side door. Driver 1 advised the traffic signal was green when he entered the intersection.

Driver 2 stated he waited for the traffic light to turn green and began making a left turn onto northbound Lake St. Louis Boulevard. Driver 2 advised before completing the left turn the front passenger's side of his bumper made contact with Vehicle 1.

Witness 1 advised once the traffic signal turned green he observed Vehicle 2 start to make a left turn onto northbound Lake St. Louis Boulevard. Witness advised he saw the right side of Vehicle 2's front bumper make contact with Vehicle 1. Witness 1 said that Vehicle 2 had a green light and the right of way.

Driver 1, 2, and Passenger 1 refused any medical attention.

Both vehicles were driven from the scene.

Any further information will be submitted in a supplemental report

Respectfully Submitted,

P.O. Leppert 209

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| LEPPERT, EDWARD | 209 | 1 | |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | | | 2014-00068 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 01/14/2014 | 2235 | 01/14/2014 | 2237 | 01/14/2014 | 2255 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ■ Front to Front ☐ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ☐ No - No commercial vehicle fields need completion.
   ■ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'11.1" LONG: 090°46'14.8" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| SOR / VETERANS MEMORIAL PKWY | W | ☐ NA _____ Feet _____ Miles | ☐ After ☐ Before ■ At ☐ NA | CST / LAKE ST LOUIS BLVD |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 45 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 35 | N | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ☐ Level ☐ Downhill ☐ Dip ☐ Uphill ■ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ☐ Daylight ■ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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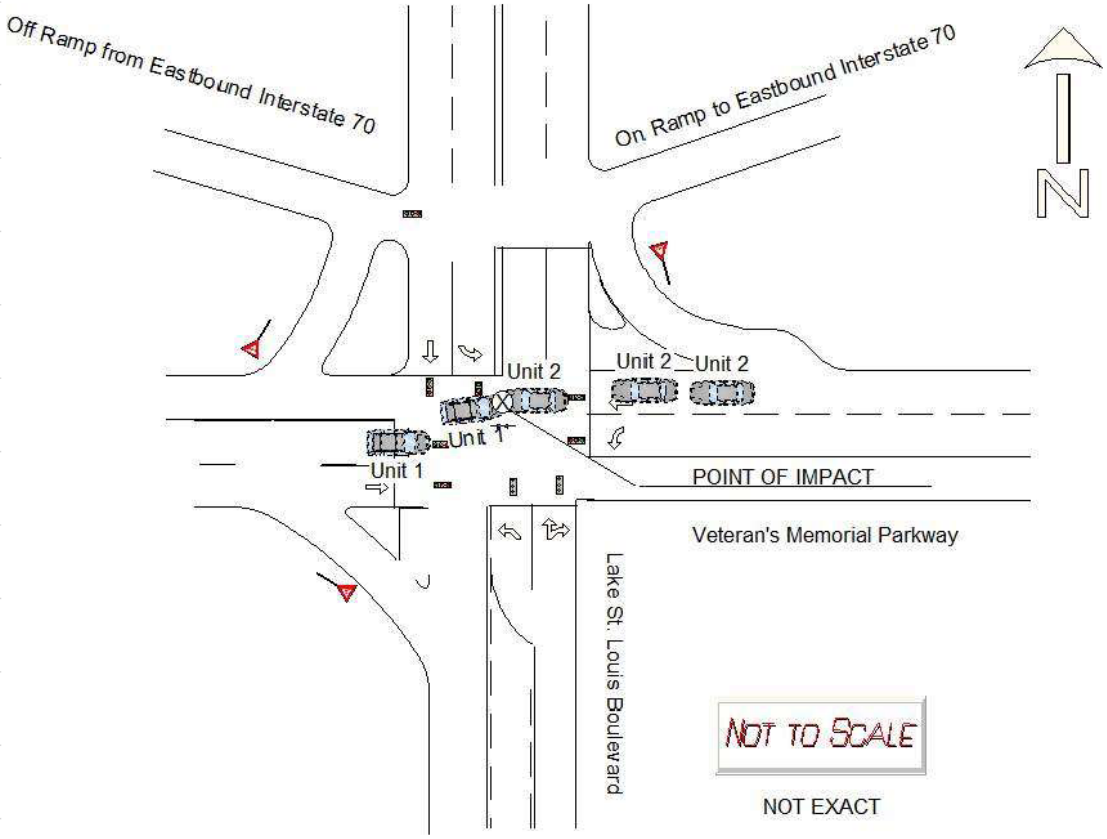
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N (E) S W U | V2 N E S (W) U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | YOUNG, KIMBERLY ANN — 3640 WOODCHUCK DRIVE, FOTISTELL, MO 63348 | (636) 466-5246 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| S050116018 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 01/24/1965 | F | FR | 5 | 1 | 2 | 5 | 5 | ☐ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ■ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM INSURANCE (☐ Expired) | 636-561-4699 | 1814317-F31-25A (☐ NA; ☐ Driver ■ Vehicle) |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) (☐ SAD) | PHONE NUMBER (☐ SAD) |
|---|---|
| FARR, MARY LOUISE — 3640 WOODCHUCK DRIVE, FORISTELL, MO 63348 | (636) 463-1720 |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2000 | FORD | WINDSTAR | GRY / GRY | 1 | 2 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| SB5W2K | MO | 2014 | 2FMZA5147YBB49188 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

☐ Passenger Car; ■ Van (< 9 W/Driver); ☐ Passenger Van (9+ W/Driver); ☐ Sport Utility Vehicle; ☐ Limousine (7-8 W/Driver); ☐ Limousine (9-15 W/Driver); ☐ Motorized Bicycle; ☐ Pedalcycle; ☐ To / From School

☐ Small Bus (9-15 W/Driver); ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other

☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown

☐ Motor Home; ☐ Farm Implements; ☐ Construction Equip. Heavy Mach.; ☐ Other Vehicle (Code) ____; ☐ Cargo Van; ☐ Pickup; ☐ Other Heavy Truck; ☐ Unknown (Explain)

☐ Single-unit Truck; 2 axles, 6 tires; ☐ Single-unit Truck; 3 or more axles; ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors); ☐ Truck Tractor With No Units; ☐ Truck Tractor With One Unit; ☐ Truck Tractor With Two Units; ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only): ☐ Less than or equal to 10,000 lbs.; ☐ 10,001 - 26,000 lbs.; ☐ Greater than 26,000 lbs.; ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA

☐ Police; ☐ Ambulance; ☐ Fire; ☐ Other (Must check "A" / "B") → ☐ A. Emergency Vehicle on Emergency Run; ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA

☐ Congestion Ahead; ☐ Other Incident Ahead; ☐ Crash Ahead; ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES (☐ Unknown) | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 05 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain); ☐ Speed - Exceeded Limit; ☐ Too Fast For Conditions; ☐ Violation Signal / Sign; ■ Failed To Yield; ☐ Alcohol; ☐ Drugs

☐ Vision Obstructed; ☐ Driver Fatigue / Asleep; ☐ Improper Signal; ☐ Improper Backing; ☐ Improper Turn; ☐ Improper Passing; ☐ Improperly Parked

☐ Failed To Dim Headlights; ☐ Failed To Use Lights; ☐ Following Too Close; ☐ Wrong Side (Not Passing); ☐ Wrong Side (One-Way); ☐ Physical Impairment (Explain); ☐ Improper Start From Park

☐ Improper Towing / Pushing; ☐ Improperly Stopped On Roadway; ☐ Improper Lane Usage / Change; ☐ Overcorrected; ☐ Improper Riding / Clinging To Veh. Exterior; ☐ Failed To Secure Load / Improper Loading; ☐ Animal(s) In Roadway

☐ Object / Obstruction in Roadway; ☐ Distracted / Inattentive (Designate Type); ☐ Unknown (Explain); ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| FARR, MARY LOUISE<br>3640 WOODCHUCK DRIVE, FORISTELL, MO 63348 | 05/26/1942 | F | FL | 5 | 1 | 2 | 5 | 5 | (636) 463-1720 |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO — PHONE NUMBER ☐ SAO

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier; ☐ Intrastate Carrier; ☐ Not In Commerce - Government Vehicle; ☐ Not In Commerce - Rental Vehicle; ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. — USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box; ☐ Cargo Tank; ☐ Flatbed; ☐ Dump; ☐ Concrete Mixer; ☐ Auto Transporter; ☐ Garbage / Refuse; ☐ Grain / Chip / Gravel; ☐ Pole Trailer; ☐ Log; ☐ Vehicle Towing Another Veh.; ☐ Intermodal Container Chassis; ☐ NA (No Cargo Body); ☐ Other; ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | ESTES, BELINDA JOYCE 203 CASALON DR, O'FALLON, MO 63366 | (314) 705-3691 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| L148171001 | MO | ■ Valid; ☐ Expired; ☐ Susp / Rev / Denied; ☐ Disqual CDL; ☐ Canceled / Oth Invalid; ☐ Unknown; ☐ NA | ☐ Operator Class ___; ☐ Permit; ☐ Unknown (Explain); ■ CDL Class E; ☐ MC Only; ☐ Interm / Grad; ☐ Unlicensed; ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 10/24/1956 | F | FR | 5 | 1 | 2 | 3 | 5 | ☐ Not Obstructed; ☐ Trees / Brush; ☐ Sign; ☐ Moving Veh; ☐ Other (Explain); ☐ Windshield; ☐ Building; ■ Hillcrest; ☐ Stopped Veh; ☐ Unknown (Explain); ☐ NA; ☐ Load on Veh; ☐ Embankment; ☐ Parked Veh; ☐ Glare |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | GATEWAY INSURANCE | | CAP055861202 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ☐ SAD |
|---|---|
| ST. CHARLES CO CAB, PO BOX 1211, O'FALLON, MO 63366 | (636) 281-8080 |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2002 | CHEV | IMPALA | WHI | WHI | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| YG6B1K | MO | 2014 | 2G1WF55KX29241145 | ■ Yes ☐ No | ■ Yes ☐ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ☐ NA

SHERMAN TOWING
(636) 240-4400
1650 KEMMAR CT, O'FALLON, MO 63366

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ■ Vehicle Used As Public Conveyance

- ■ Passenger Car
- ☐ Van (< 9 W/Driver)
- ☐ Passenger Van (9+ W/Driver)
- ☐ Sport Utility Vehicle
- ☐ Limousine (7-8 W/Driver)
- ☐ Limousine (9-15 W/Driver)
- ☐ Motorized Bicycle
- ☐ Pedalcycle → ☐ To / From School
- ☐ Small Bus (9-15 W/Driver)
- ☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
- ☐ Motorcycle; ☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
- ☐ Motor Home
- ☐ Farm Implements
- ☐ Construction Equip. Heavy Mach.
- ☐ Other Vehicle (Code) _____
- ☐ Cargo Van
- ☐ Pickup
- ☐ Other Heavy Truck
- ☐ Unknown (Explain)
- ☐ Single-unit Truck; 2 axles, 6 tires
- ☐ Single-unit Truck; 3 or more axles
- ☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
- ☐ Truck Tractor With No Units
- ☐ Truck Tractor With One Unit
- ☐ Truck Tractor With Two Units
- ☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
- ☐ Less than or equal to 10,000 lbs.
- ☐ 10,001 - 26,000 lbs.
- ☐ Greater than 26,000 lbs.
- ☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

- ☐ Vehicle Defects (Explain)
- ☐ Speed - Exceeded Limit
- ☐ Too Fast For Conditions
- ☐ Violation Signal / Sign
- ☐ Failed To Yield
- ☐ Alcohol
- ☐ Drugs
- ☐ Vision Obstructed
- ☐ Driver Fatigue / Asleep
- ☐ Improper Signal
- ☐ Improper Backing
- ☐ Improper Turn
- ☐ Improper Passing
- ☐ Improperly Parked
- ☐ Failed To Dim Headlights
- ☐ Failed To Use Lights
- ☐ Following Too Close
- ☐ Wrong Side (Not Passing)
- ☐ Wrong Side (One-Way)
- ☐ Physical Impairment (Explain)
- ☐ Improper Start From Park
- ☐ Improper Towing / Pushing
- ☐ Improperly Stopped On Roadway
- ☐ Improper Lane Usage / Change
- ☐ Overcorrected
- ☐ Improper Riding / Clinging To Veh. Exterior
- ☐ Failed To Secure Load / Improper Loading
- ☐ Animal(s) In Roadway
- ☐ Object / Obstruction in Roadway
- ☐ Distracted / Inattentive (Designate Type)
- ☐ Unknown (Explain)
- ☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
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| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ■ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ■ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ■ No ☐ Unknown | | | ☐ Yes ■ No ☐ Unknown | ☐ Yes ■ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

Driver one, Ms. Young stated that she was making a left turn when her vehicle was struck head on by Vehicle two. Ms. Young stated that she had a green light but was not aware whether or not it was a green left turn arrow.

Ms. Young complained that her head and chest hurt from being impacted by the vehicles front airbag but she refused medical attention at the scene. Her vehicle suffered moderate damage to the front bumper, hood, and right front fender. The vehicle was disabled from the crash and was later towed privately by an unknown tow company.

The right front seat passenger of Vehicle one, Ms. Farr stated she observed that Ms. Young had a steady green arrow prior to her proceeding through the intersection. She stated as they proceeded through the intersection, making a left turn she observed Vehicle two coming toward them without slowing. Vehicle one and two then collided.
Ms. Farr complained of no injury and she refused medical treatment at the scene.

Driver two, Ms. Estes stated she was traveling westbound on Veterans Memorial Parkway crossing over Lake Saint Louis Boulevard when Vehicle one turned into her path of travel. Ms. Estes advised that she had a green light when she proceeded through the intersection. Ms. Estes complained that her left hand and head hurt from being impacted by the airbag. Ms. Estes refused medical attention at the scene.

Vehicle two suffered moderate damage to the front bumper, left front fender and hood. The vehicle was disabled from the crash and was towed privately at her request by Sherman Towing (636-240-4400).

Any further information will follow in a supplemental report.

Respectfully submitted,

Sergeant K. Dooley 265

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| DOOLEY, KYLE | 265 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

MISSOURI UNIFORM CRASH REPORT



**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ■ Yes ☐ No | 1 | ☐ Yes ■ No | | ■ | 1 | 0 | 2014-00790 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 06/04/2014 | 2118 | 06/04/2014 | 2120 | 06/04/2014 | 2123 | ■ Yes ☐ No |

**CRASH TYPE**

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA** - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ■ Yes ☐ No | PO T. OTTEN DSN 210 | ■ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 2 | C | LAT: 038°48'10.9" LONG: -90°46'14.7" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| CST / LAST LOUIS BLVD | E | ☐ NA _____ Feet _____ Miles | ☐ NA ☐ After ☐ Before ■ At | SOR / VETERANS MEMORIAL PKWY |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 25 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 45 | E | |

TRAFFICWAY: ☐ One-Way ■ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ☐ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ☐ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ■ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ☐ Daylight ■ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

DISTRIBUTION: COPY - AGENCY FILE ORIGINAL - MISSOURI STATE HIGHWAY PATROL - TRAFFIC RECORDS DIVISION - P.O. BOX 568 - JEFFERSON CITY, MO 65102 SHP-2Q 01/12

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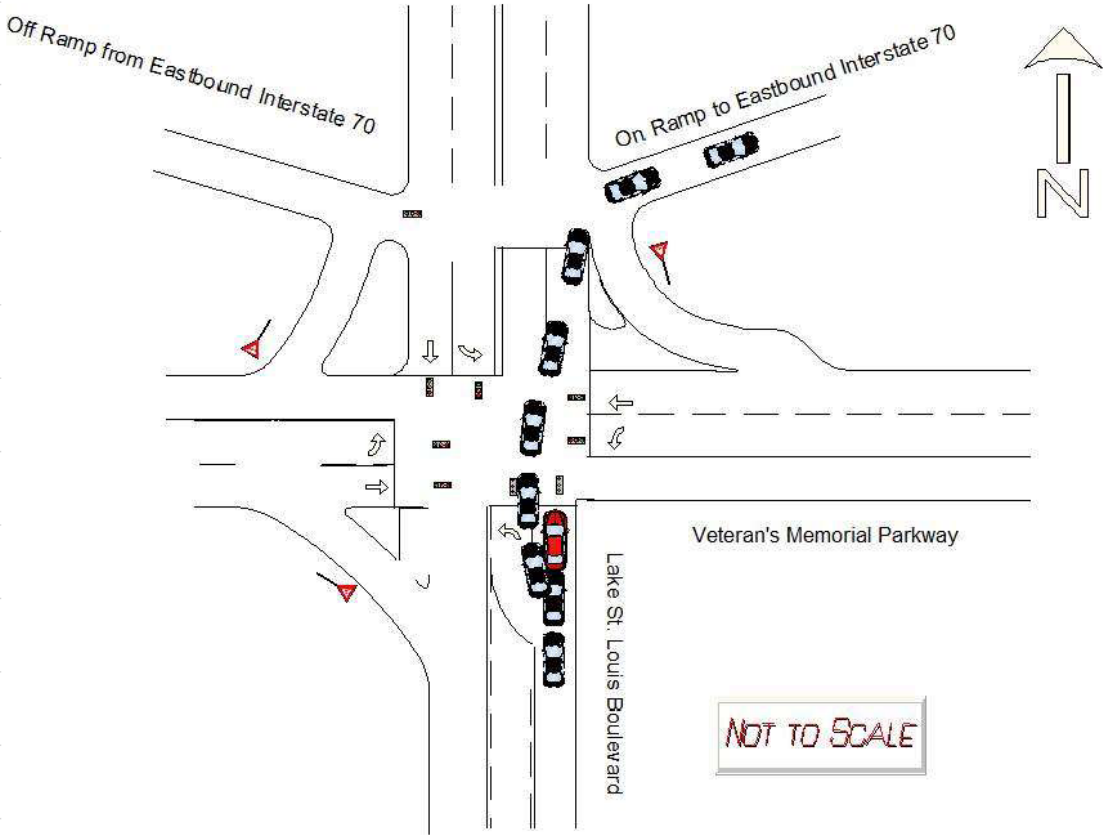
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N E S W U | V2 N E S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | UNKNOWN | |

DRIVER LICENSE / ID NUMBER: UNKNOWN | STATE: | LIC STATUS: ☐ Valid ☐ Susp / Rev / Denied ☐ Canceled / Oth Invalid ☐ Expired ☐ Disqual CDL ☐ Unknown ☐ NA | LIC TYPE: ☐ Operator Class ____ ☐ CDL Class ____ ☐ Interm / Grad ☐ Permit ☐ MC Only ☐ Unlicensed ☐ Unknown (Explain) ☐ NA | MC ENDORSEMENT: ☐ Yes ☐ No ☐ NA ☐ Unknown (Explain)

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| Unk | M | FL | U | 1 | 2 | U | U | ■ NA ☐ Not Obstructed ☐ Windshield ☐ Load on Veh ☐ Trees / Brush ☐ Building ☐ Embankment ☐ Sign ☐ Hillcrest ☐ Parked Veh ☐ Moving Veh ☐ Stopped Veh ☐ Glare ☐ Other (Explain) ☐ Unknown (Explain) |

PROOF OF INSURANCE: ☐ Yes ☐ No ☐ Not Required | INSURANCE COMPANY: UNKNOWN ☐ Expired | PHONE NO. (Optional): | POLICY NUMBER: ☐ NA | ☐ Driver ☐ Vehicle

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD: UNKNOWN, , | PHONE NUMBER ☐ SAD

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| | | | BLK | | |

LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE: ☐ Yes ■ No | TOWED DUE TO DIS. DAMAGE: ☐ Yes ■ No

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage | TOWED BY ☐ Unknown ■ NA

INITIAL IMPACT NO: ☐ NA 1

2 | 3 | 4 | 5 | 6 | 7
1 | 15 | 16 | 17 | 8
14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage
19 - Windshield
20 - Burned
21 - Towed Unit
22 - Cargo
23 - Unknown
24 - Other (Explain)

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus ☐ Intercity ☐ Transit / Commuter ☐ Charter / Tour ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh ☐ 3 Wh ☐ 4 Wh ☐ 5 Wh / More ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

SEQUENCE OF EVENTS CODES ☐ Unknown: 12 | 09 | 34 | 02 | 14 | ANIMAL CODE(S) | FIXED OBJECT CODE(S)

ALCOHOL USE: ☐ Yes ■ Unk ☐ No ☐ NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
■ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
■ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
■ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
■ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE: ☐ Yes ■ No ☐ Unknown
Workers Present: ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL: ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING: ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle | MC / MX / ICC NO. | USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | FLANIGAN, LISA MAE 651 THICKET LN, LAKE ST. LOUIS, MO 63367 | (636) 293-6296 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| D0395303 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 11/07/1961 | F | FL | 4 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | CENTURY SURETY COMPANY | 614-895-2000 | CCP 762432 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ☐ SAD | PHONE NUMBER ☐ SAD |
|---|---|
| FLANIGAN'S AUTOMOTIVE GROUP LLC. 506 N MAIN ST., O'FALLON, MO 63366 | (636) 293-6296 |

| YEAR | MAKE | MODEL | COLOR | | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|---|
| 2008 | FORD | EDGE LIMITED | RED | RED | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| D7626AU | MO | 2014 | 2FMDK49C98BA76919 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 8

2 3 4 5 6 7 1 15 16 17 8 14 13 12 11 10 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 12 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ■ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ■ No ☐ Unknown ☐ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

SEAT LOCATION
FR SR TR / FC SC TC / FL SL TL
XX - Not Known
B - Pedalcycle
M - Motorcycle
CP - Commercial Passenger
OE - Occupant - Enclosed Load Area
OU -Occupant - Unenclosed Load Area
RC - Rail Crew
SV - Other (Explain in Narrative)
NA - Not Applicable

INJURY
1. Fatal
2. Disabling
3. Evident - Not Disabling
4. Probable - Not Apparent
5. None Apparent
U. Unknown
N. NA

TRANSPORTED (For Medical Treatment)
1. No
2. EMS
3. Other
U. Unknown
N. NA

EJECTION
1. NA
2. No
3. Partially
4. Totally
U. Unknown

AIR BAG
1. None / NA
3. Not Deployed
4. Removed
5. Deployed - Front
6. Deployed - Side
7. Deployed - Curtain
8. Deployed - Other (Knee, Air Belt, etc.)
9. Deployed - Combination
10. Deployment Unknown
U. Air Bag Presence Unknown

SAFETY DEVICES
1. None
2. Not Used
3. Shoulder Belt Only
4. Lap Belt Only
5. Shoulder and Lap Belt
7. DOT Compliant MC Helmet
8. No Helmet
10. Booster Seat
11. Child Restraint - Forward Facing
12. Child Restraint - Rear Facing
13. Other Helmet
14. Reflective Clothing
15. Other
U. Use Unknown
N. Not Applicable

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)
1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS
20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES
1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES
1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES
1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir,

On Wednesday, 06/04/2014 at 2120 hours, I responded to the parking lot of 1001 Lake St. Louis Blvd. for a report of a motor vehicle crash where a vehicle had left the scene. The crash had occurred near at the intersection of Lake St. Louis Blvd and Veterans Memorial Parkway.

Upon arrival, I met with the reporting party/ victim identified as:

Flanigan, Lisa Mae (see " Persons" section)
DOB: 11/07/61 F/W
OLN: D0395303
651 Thicket Ln.
Lake St. Louis, MO 63367
636-293-6296

Flanigan said that she was driving northbound on Lake St. Louis Blvd and stopped at a steady red traffic signal at the intersection of Veterans Memorial Parkway. Flanigan said that a dark colored (possibly Black) passenger vehicle (similar to a GMC Envoy) pulled very closely behind her nearly touching her bumper. Flanigan said that she felt the driver of the unknown vehicle was trying to intimidate her as the driver turned their music up very loudly and she could hear and feel the bass coming from the unknown vehicle. Flanigan said that when the light turned green, the driver of the unknown vehicle " rammed" her from behind and then quickly accelerated around her vehicle on the left side and entered eastbound I-70, leaving the scene at a high rate of speed. See attached diagram in the Missouri Uniform Crash Report for further. Flanigan said that she felt the collision was intentional on behalf of the unknown driver that left the scene.

Flanigan described the unknown vehicle which left the scene as:

Early 2000's Passenger Car- Crossover style vehicle similar to a GMC Envoy
Dark Colored- Possibly Black
Aftermarket Sound System

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| GILLIAM, JOSH | 292 | 2 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

11 NARRATIVE / STATEMENTS CONTINUATION (If additional room is necessary use Narrative / Statements Continuation / Supplement)

Some type of a "Black box" underneath the rear bumper
Vehicle possibly "Lowered" to the ground with aftermarket modification

Flanigan described the driver of the vehicle leaving the scene as:

White Male- Approximately 19 years of age
Longer brown hair, possibly pulled back, possibly wearing a stocking cap

Flanigan also said there were as many as 3-4 other passengers in the vehicle that she could not describe.

I examined Flanigan's vehicle which was described as:

2008 Ford Edge Limited (see "Vehicles" section) (V2)
LIC: D7626AU MO 2014
VIN: 2FMDK49C98BA76919

V2 had damage consistent with a motor vehicle crash on the rear bumper and left side rear quarter panel. It appeared that after V1 crashed into the rear end of V2, V1 then caused damage to the left rear quarter panel while pulling around V2 to leave the scene. It would therefore be likely that V1 may have sustained damage to the front end and also possibly on the right side of the vehicle.

I requested that Lake St. Louis Police Dispatch broadcast the description of the suspect vehicle to surrounding Law Enforcement Agencies for their assistance in attempting to locate the vehicle. As of the time this report was written, no additional leads from other Law Enforcement Agencies have been obtained. I conducted an area canvass and searched surrounding areas for the suspect vehicle. This search met with negative results. There is no known video surveillance that covers the intersection where this crash occurred.

Flanigan (D1) complained of having soreness and pain to her neck. Flanigan refused medical attention and said that she did not want an ambulance.

See the attached "Missouri Uniform Crash Report" for further investigative details. Flanigan's vehicle was driven from the scene.

This report shall be classified as inactive, unless further information is received. Any further information will be submitted in a supplemental report.

Respectfully Submitted,

Sergeant Joshua H. Gilliam DSN 292

MISSOURI UNIFORM CRASH REPORT

PAGE 1 OF 5

**1 - GENERAL CRASH INFORMATION**

SPACE USED FOR BARCODE

AGENCY NAME AND ORI: Lake St. Louis Police Department MO0920900

| LEFT THE SCENE | DRIVER NO. | CLEARED | CRASH CLASSIFICATION | PROPERTY DAMAGE ONLY | NO. INJURED | NO. KILLED | REPORT / CASE / INCIDENT NUMBER |
|---|---|---|---|---|---|---|---|
| ☐ Yes ■ No | | ☐ Yes ☐ No | | ■ | 0 | 0 | 2014-00089 |

| NO. VEH. INV. | CRASH DATE | CRASH TIME (MIL.) | NOTIFIED DATE | TIME NOTIFIED (MIL.) | INVESTIGATION DATE | TIME ARRIVED (MIL.) | INVEST. AT SCENE |
|---|---|---|---|---|---|---|---|
| 2 | 01/21/2014 | 1152 | 01/20/2014 | 1154 | 01/20/2014 | 1158 | ■ Yes ☐ No |

CRASH TYPE

ROADWAY: ■ On Roadway ☐ Off Roadway

NON-COLLISION: ☐ Overturning ☐ Fire / Explosion ☐ Immersion ☐ Jackknife ☐ Fell / Jumped From MV ☐ Cargo / Equip Loss / Shift ☐ Other Non-Collision

COLLISION INVOLVING: ☐ Animal ☐ Pedalcycle ☐ Fixed Object ☐ Other Object ☐ Pedestrian ☐ Railway Vehicle ☐ Animal Drawn Veh. / Animal Ridden Trans. ■ Motor Vehicle In Transport → ☐ Parked Motor Vehicle → ☐ Working Motor Vehicle →

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE: ☐ Front to Front ■ Front to Rear ☐ Rear to Rear ☐ Rear to Side ☐ Angle ☐ Sideswipe (Same Dir.) ☐ Sideswipe (Opp. Dir.) ☐ Falling / Shifting Cargo (Set in motion by MV) ☐ Other (Explain) ☐ Unknown (Explain)

COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.

1. Does this crash involve any of the following?
   1a. A person fatally injured; OR
   1b. A person transported for medical attention; OR
   1c. A vehicle towed due to disabling damage.

   ■ No - No commercial vehicle fields need completion.
   ☐ Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
   2a. A truck / cargo van with GVWR / GCVWR of more than 10,000 lbs; OR
   2b. A motor vehicle with seating for 9 or more including driver; OR
   2c. A vehicle with a hazardous materials placard.

   ☐ No - No commercial vehicle fields need completion.
   ☐ Yes - Complete Section 7G for appropriate vehicle.

| EVIDENTIARY PHOTOS TAKEN | BY WHOM | AVAILABLE FROM |
|---|---|---|
| ☐ Yes ■ No | | ☐ Investigating Agency |
| **RECONSTRUCTION** | **BY WHOM** | **AVAILABLE FROM** |
| ☐ Yes ■ No | | ☐ Investigating Agency |

**2 - LOCATION**

| COUNTY | MUNICIPALITY | BEAT / ZONE | TRP/DIST/PCT | GPS COORDINATES (DD:MM:SS.S FORMAT) |
|---|---|---|---|---|
| ST. CHARLES COUNTY | LAKE ST. LOUIS | 1 | C | LAT: 038°48'11.0" LONG: -90°46'14.7" |

| ON | RDWY. DIR. | DISTANCE FROM | LOCATION | INTERSECTING |
|---|---|---|---|---|
| SOR / VETERANS MEMORIAL PKWY | E | ■ NA ____ Feet ____ Miles | ☐ After ☐ Before ■ At ☐ NA | CST / LAKE ST LOUIS BLVD |

| SPEED LIMIT | ROAD MAINTAINED BY | SPEED LIMIT | INT. DIR. | GEO - CODE |
|---|---|---|---|---|
| 45 | ■ State ☐ County ☐ Municipal ☐ Private Property ☐ Other ☐ Unknown | 25 | N | |

TRAFFICWAY: ☐ One-Way ☐ Two-Way; Not Divided ☐ Two-Way; Divided; Unprotected Median ■ Other ☐ Two-Way; Not Divided; Continuous Center Turn Lane ☐ Two-Way; Divided; Positive Median Barrier ☐ Unknown

ROAD ALIGNMENT: ■ Straight ☐ Curve ☐ Unknown (Explain)

ROAD PROFILE: ■ Level ☐ Downhill ☐ Dip ☐ Uphill ☐ Hillcrest ☐ Unknown (Explain)

INTERSECTION TYPE: ☐ NA ■ 4-Way Intersection ☐ Y-Intersection ☐ 5-way / More ☐ Unknown (Explain) ☐ T-Intersection ☐ Roundabout ☐ Other (Explain)

ROAD CONDITION: ■ Dry ☐ Snow ☐ Slush ☐ Standing Water ☐ Sand / Gravel ☐ Unknown (Explain) ☐ Wet ☐ Ice / Frost ☐ Mud / Dirt ☐ Moving Water ☐ Other (Explain)

ROAD SURFACE: ■ Concrete ☐ Brick ☐ Dirt / Sand ☐ Cobblestone ☐ Asphalt ☐ Gravel ☐ Multi-Surface ☐ Unknown (Explain)

WEATHER CONDITION: ■ Clear ☐ Rain ☐ Sleet / Hail ☐ Fog / Mist ☐ Other (Explain) ☐ Cloudy ☐ Snow ☐ Freezing (Temp.) ☐ Severe Crosswind ☐ Unknown (Explain)

LIGHT CONDITION: ■ Daylight ☐ Dark-Lighted ☐ Dark-Unlighted ☐ Dark-Unknown Lighting ☐ Other (Explain) ☐ Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES** ■ None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE. ☐ MoDOT ☐ County ☐ Municipality

**4 - WITNESS** ■ None Identified ☐ Additional Witnesses In Narrative

| NAME | ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**5 - PEDESTRIAN** ■ NA ☐ Law Enforcement Officer ☐ Other Emergency Services Personnel ☐ MoDOT Worker ☐ Other Trafficway Worker ☐ Other Pedestrian

| NO. | NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| | | |

| DATE OF BIRTH | SEX | STRUCK BY VEH # | INJ | TRANS-PORT | SAFETY DEVICES | LOCATION |
|---|---|---|---|---|---|---|
| | | | | | | ☐ On Roadway ☐ In Driveway Access ☐ On Median / Crossing Island ☐ On Sidewalk ☐ Off Roadway ☐ Unknown |

CROSSING ROAD: ☐ NA ☐ With Signal ☐ Against Signal ☐ No Signal ☐ Unknown ☐ Not At Crosswalk ☐ In Marked Crosswalk ☐ In Unmarked Crosswalk ☐ Unknown

OTHER ACTIONS: ☐ NA / None ☐ Getting On / Off Vehicle ☐ Standing / Lying / Sitting In Trafficway ☐ Pushing / Working On Vehicle ☐ Behind / In Front of Parked / Stopped Veh. ☐ Working In Trafficway ☐ Playing In Trafficway ☐ Walking / Running In Trafficway ☐ With Traffic ☐ Against Traffic ☐ Unknown ☐ Other (Explain)

SCHOOL INFO.: ☐ NA ☐ Going To / From School ☐ Getting On / Off School Bus ☐ Both Of The Above ☐ Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES: ☐ None ☐ Failed To Yield ☐ Distracted / Inattentive ☐ Alcohol ☐ Drugs ☐ Vision Obstructed (Explain) ☐ Physical Impairment (Explain) ☐ Other (Explain) ☐ Unknown (Explain)

DISTRACTION / INATTENTION CODE(S): ☐ NA

ALCOHOL USE: ☐ Yes ☐ No ☐ Unknown

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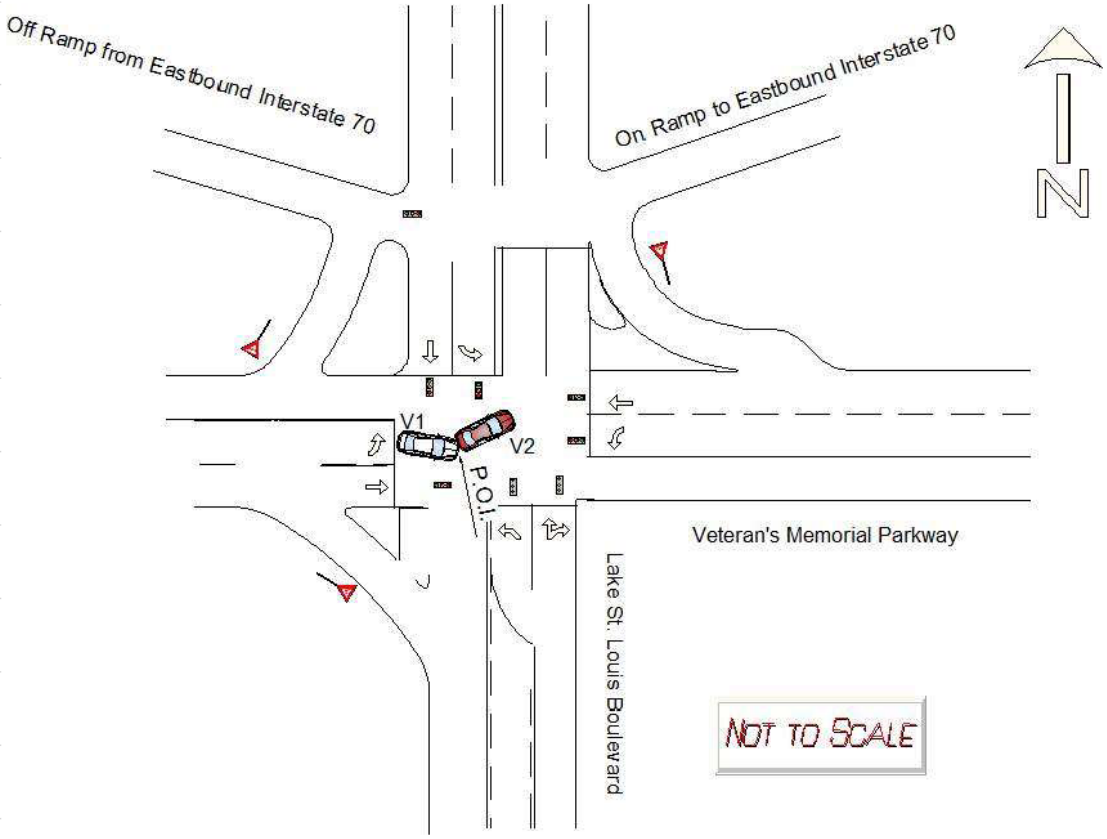
| 6. COLLISION DIAGRAM | Compass Direction Before Crash Event(s) (Circle One) | V1 N (E) S W U | V2 N (E) S W U | N E S W U | N E S W U | N E S W U | N E S W U |
|---|---|---|---|---|---|---|---|

INDICATE NORTH




INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

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**7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS**

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 1 | DACUS, FRANKIE L 2303 MILL POND CIR, O'FALLON, MO 63366 | (636) 272-4646 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| J173208005 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 12/22/1929 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY ☐ Expired | PHONE NO. (Optional) | POLICY NUMBER ☐ NA | |
|---|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | AMERICAN FAMILY | | 071897100180 | ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2001 | FORD | ESCORT | WHI | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| CC64M | MO | 2015 | 3FAFP13P21R187382 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 14

2 | 3 | 4 | 5 | 6 | 7 — 1 | 15 | 16 | 17 | 8 — 14 | 13 | 12 | 11 | 10 | 9

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 15 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
■ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
☐ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
☐ Failed To Secure Load / Improper Loading
☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown
Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown
Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)
Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING
☐ Yes (Explain) ☐ No
☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA — Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL: ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE: ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

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7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

| NO. | 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) | PHONE NUMBER |
|---|---|---|
| 2 | CILEK, MARIAN ANNE 4122 CRIPPLE CREEK CT, WENTZVILLE, MO 63385 | (636) 887-0498 |

| DRIVER LICENSE / ID NUMBER | STATE | LIC STATUS | LIC TYPE | MC ENDORSEMENT |
|---|---|---|---|---|
| J148025013 | MO | ■ Valid; ☐ Susp / Rev / Denied; ☐ Canceled / Oth Invalid; ☐ Expired; ☐ Disqual CDL; ☐ Unknown; ☐ NA | ■ Operator Class F; ☐ CDL Class ___; ☐ Interm / Grad; ☐ Permit; ☐ MC Only; ☐ Unlicensed; ☐ Unknown (Explain); ☐ NA | ☐ Yes ☐ No ■ NA; ☐ Unknown (Explain) |

| DATE OF BIRTH | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | VISION OBSTRUCTED |
|---|---|---|---|---|---|---|---|---|
| 05/05/1940 | F | FL | 5 | 1 | 2 | 3 | 5 | ■ Not Obstructed; ☐ Windshield; ☐ Load on Veh; ☐ Trees / Brush; ☐ Building; ☐ Embankment; ☐ Sign; ☐ Hillcrest; ☐ Parked Veh; ☐ Moving Veh; ☐ Stopped Veh; ☐ Glare; ☐ Other (Explain); ☐ Unknown (Explain); ☐ NA |

| PROOF OF INSURANCE | INSURANCE COMPANY | PHONE NO. (Optional) | POLICY NUMBER |
|---|---|---|---|
| ■ Yes ☐ No ☐ Not Required | STATE FARM ☐ Expired | | 2934058019259 ☐ NA; ☐ Driver ■ Vehicle |

| 7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) ■ SAD | PHONE NUMBER ■ SAD |
|---|---|
| | |

| YEAR | MAKE | MODEL | COLOR | VEH. TYPE | TOTAL NO. OF OCC. |
|---|---|---|---|---|---|
| 2008 | TOYT | SOLARA | RED | 1 | 1 |

| LICENSE - PLATE NO. | STATE | YEAR | VIN | TOWED FROM SCENE | TOWED DUE TO DIS. DAMAGE |
|---|---|---|---|---|---|
| FB4J1U | MO | 2014 | 4T1CA30P68U149621 | ☐ Yes ■ No | ☐ Yes ■ No |

VEHICLE DAMAGE (Mark all damaged areas) ☐ None / No Damage

INITIAL IMPACT NO: ☐ NA 8

2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 1 | 15 | 16 | 17

18 - Undercarriage; 19 - Windshield; 20 - Burned; 21 - Towed Unit; 22 - Cargo; 23 - Unknown; 24 - Other (Explain)

TOWED BY ☐ Unknown ■ NA

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles ☐ Vehicle Used As Public Conveyance

■ Passenger Car
☐ Van (< 9 W/Driver)
☐ Passenger Van (9+ W/Driver)
☐ Sport Utility Vehicle
☐ Limousine (7-8 W/Driver)
☐ Limousine (9-15 W/Driver)
☐ Motorized Bicycle
☐ Pedalcycle → ☐ To / From School
☐ Small Bus (9-15 W/Driver)
☐ Large Bus (16+ W/Driver) → ☐ School Bus; ☐ Intercity; ☐ Transit / Commuter; ☐ Charter / Tour; ☐ Other
☐ Motorcycle
☐ ATV → ☐ 2 Wh; ☐ 3 Wh; ☐ 4 Wh; ☐ 5 Wh / More; ☐ Unknown
☐ Motor Home
☐ Farm Implements
☐ Construction Equip. Heavy Mach.
☐ Other Vehicle (Code) _____
☐ Cargo Van
☐ Pickup
☐ Other Heavy Truck
☐ Unknown (Explain)
☐ Single-unit Truck; 2 axles, 6 tires
☐ Single-unit Truck; 3 or more axles
☐ Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
☐ Truck Tractor With No Units
☐ Truck Tractor With One Unit
☐ Truck Tractor With Two Units
☐ Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
☐ Less than or equal to 10,000 lbs.
☐ 10,001 - 26,000 lbs.
☐ Greater than 26,000 lbs.
☐ Unknown

EMERGENCY VEHICLE INVOLVEMENT ■ NA
☐ Police ☐ Ambulance ☐ A. Emergency Vehicle on Emergency Run
☐ Fire ☐ Other (Must check "A" / "B") → ☐ B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS ■ NA
☐ Congestion Ahead ☐ Other Incident Ahead
☐ Crash Ahead ☐ Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES ☐ Additional Codes Listed in Narrative (See Codes in Section 8)

| SEQUENCE OF EVENTS CODES ☐ Unknown | ANIMAL CODE(S) | FIXED OBJECT CODE(S) | ALCOHOL USE |
|---|---|---|---|
| 01 05 08 34 | | | ☐ Yes ☐ Unk ■ No ☐ NA |

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES ☐ None

☐ Vehicle Defects (Explain)
☐ Speed - Exceeded Limit
☐ Too Fast For Conditions
☐ Violation Signal / Sign
☐ Failed To Yield
☐ Alcohol
☐ Drugs
☐ Vision Obstructed
☐ Driver Fatigue / Asleep
☐ Improper Signal
☐ Improper Backing
☐ Improper Turn
☐ Improper Passing
☐ Improperly Parked
☐ Failed To Dim Headlights
☐ Failed To Use Lights
☐ Following Too Close
☐ Wrong Side (Not Passing)
☐ Wrong Side (One-Way)
☐ Physical Impairment (Explain)
☐ Improper Start From Park
☐ Improper Towing / Pushing
■ Improperly Stopped On Roadway
☐ Improper Lane Usage / Change
☐ Overcorrected
☐ Improper Riding / Clinging To Veh. Exterior
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☐ Animal(s) In Roadway
☐ Object / Obstruction in Roadway
☐ Distracted / Inattentive (Designate Type)
☐ Unknown (Explain)
☐ Other (Explain)

DISTRACTED / INATTENTIVE CODE(S) (See Codes in Section 8) ■ NA

7E. WORK ZONE ☐ Yes ■ No ☐ Unknown

Workers Present ☐ Yes ■ No ☐ Unknown

TRAFFIC CONTROL ☐ None ☐ Unknown

Electric: ■ Green/Yellow/Red ☐ Flashing Red ☐ Flashing Yellow ☐ Ramp Meter ☐ Other (Explain)

Other Controls: ☐ Stop Sign ☐ No Passing Zone ☐ Turn Restricted ☐ Officer / Flagman ☐ Signal On School Bus ☐ Warning Sign / Device ☐ Railway Crossing Sign / Device ☐ School Zone ☐ Yield Sign ☐ Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING ☐ Yes (Explain) ☐ No ☐ Unknown ■ NA

| 7F. OCCUPANTS - NAME (Last, First, MI) / ADDRESS (Street, City, State, Zip) | DATE OF BIRTH MM-DD-YYYY | SEX | SEAT LOC | INJ | TRANS-PORT | EJEC-TION | AIR BAG | SAFETY DEVICES | PHONE NUMBER |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

7G. COMMERCIAL MOTOR VEHICLE ■ NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

| MOTOR CARRIER IDENTIFICATION (Lessee, etc.) - NAME & ADDRESS (Street, City, State, Zip) ☐ SAO | PHONE NUMBER ☐ SAO |
|---|---|
| | |

COMMERCIAL / NON-COMMERCIAL ☐ Interstate Carrier ☐ Intrastate Carrier ☐ Not In Commerce - Government Vehicle ☐ Not In Commerce - Rental Vehicle ☐ Not In Commerce - Other Vehicle

MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE ☐ Enclosed Box ☐ Cargo Tank ☐ Flatbed ☐ Dump ☐ Concrete Mixer ☐ Auto Transporter ☐ Garbage / Refuse ☐ Grain / Chip / Gravel ☐ Pole Trailer ☐ Log ☐ Vehicle Towing Another Veh. ☐ Intermodal Container Chassis ☐ NA (No Cargo Body) ☐ Other ☐ Unknown

| HAZARDOUS MATERIALS | PLACARD DISPLAYED | 4-DIGIT NO. | CLASS | HM CARGO PRESENT | HM CARGO RELEASED | HAZARDOUS MATERIAL NAME |
|---|---|---|---|---|---|---|
| | ☐ Yes ☐ No ☐ Unknown | | | ☐ Yes ☐ No ☐ Unknown | ☐ Yes ☐ No ☐ Unknown | |

8 - CODES

| SEAT LOCATION | INJURY | TRANSPORTED | EJECTION | AIR BAG | SAFETY DEVICES |
|---|---|---|---|---|---|
| FR SR TR / FC SC TC / FL SL TL<br>XX - Not Known<br>B - Pedalcycle<br>M - Motorcycle<br>CP - Commercial Passenger<br>OE - Occupant - Enclosed Load Area<br>OU -Occupant - Unenclosed Load Area<br>RC - Rail Crew<br>SV - Other (Explain in Narrative)<br>NA - Not Applicable | 1. Fatal<br>2. Disabling<br>3. Evident - Not Disabling<br>4. Probable - Not Apparent<br>5. None Apparent<br>U. Unknown<br>N. NA | (For Medical Treatment)<br>1. No<br>2. EMS<br>3. Other<br>U. Unknown<br>N. NA | 1. NA<br>2. No<br>3. Partially<br>4. Totally<br>U. Unknown | 1. None / NA<br>3. Not Deployed<br>4. Removed<br>5. Deployed - Front<br>6. Deployed - Side<br>7. Deployed - Curtain<br>8. Deployed - Other (Knee, Air Belt, etc.)<br>9. Deployed - Combination<br>10. Deployment Unknown<br>U. Air Bag Presence Unknown | 1. None<br>2. Not Used<br>3. Shoulder Belt Only<br>4. Lap Belt Only<br>5. Shoulder and Lap Belt<br>7. DOT Compliant MC Helmet<br>8. No Helmet<br>10. Booster Seat<br>11. Child Restraint - Forward Facing<br>12. Child Restraint - Rear Facing<br>13. Other Helmet<br>14. Reflective Clothing<br>15. Other<br>U. Use Unknown<br>N. Not Applicable |

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)

1. Going Straight
2. Overtaking
3. Making Right Turn
4. Right Turn on Red
5. Making Left Turn
6. Making U-Turn
7. Skidding / Sliding
8. Slowing / Stopping
9. Start In Traffic
10. Start From Parked
11. Backing
12. Stopped In Traffic
13. Parked
14. Changing Lanes
15. Avoiding
16. Cross Median
17. Cross Center Of Road
18. Cross Road
19. Airborne
20. Ran Off Roadway - Right
21. Ran Off Roadway - Left
22. Overturn / Rollover
23. Fire / Explosion
24. Immersion
25. Jackknife
26. Cargo Loss / Shift
27. Equipment Failure
28. Separation Of Units
29. Returned To Roadway
30. Collision Inv. Pedestrian
31. Collision Inv. Bicycle/Pedalcycle
32. Collision Inv. Railway Veh.
33. Collision Inv. Animal (**)
34. Collision Inv. MV in Transport
35. Collision Inv. Parked MV
36. Collision Inv. Fixed Object (**)
37. Collision Inv. Other Object (Explain)
38. Other Non-collision
39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane
40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation
41. Collision Inv. Working MV
42. Downhill Runaway
43. Fell/Jumped From MV
44. Thrown/Falling Object
45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
46. Ran Off Roadway - Other (Explain)
47. Cross Separator

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer
61. Farm Animal
62. Dog
63. Other Animal
U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)
21. Embankment / Driveway / Ground / Rock Bluff
22. Guardrail Face
23. Utility Pole
24. Fence
25. Street Light Support
26. Culvert
27. Highway Traffic Sign Post / Support
28. Bridge Pier / Abutment / Support
29. Curb
30. Mail Box
31. Concrete Traffic Barrier
32. Building
33. Traffic Signal Support
34. Impact Attenuator / Crash Cushion
35. Fire Hydrant
36. Other (Explain)
37. Bridge Parapet End
38. Bridge Rail
39. Guardrail End
40. Other Traffic Barrier
41. Overhead Sign Support
42. Ditch
43. Other Post / Pole / Support
44. Wall
45. Cable Barrier
46. Bridge Overhead Structure
47. Overhead Line / Cable
U. Unknown

DISTRACTED / INATTENTIVE CODES

1. External Distraction
2. Passengers
3. Stereo / Audio / Video Equipment
4. Navigation Device
5. Communication Device - Hand-held
6. Communication Device - Hands Free
7. Communication Device - Texting / E-mailing
8. Communication Device - Web Browsing
9. Eating / Drinking
10. Reading
11. Tobacco Use
12. Grooming
13. Computer Equipment / Electronic Games / etc.
14. Adjusting Vehicle Controls
15. Other (Explain)

VEHICLE TYPE CODES

1. Motor Vehicle In Transport
2. Parked Motor Vehicle
3. Working Motor Vehicle
4. Pedalcycle
5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor
2. Golf Cart
3. Snowmobile
4. Forklift
5. Animal Drawn Vehicle / Animal Ridden For Transportation
6. Low Speed Vehicle
7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

Sir:

On Thursday, 01-20-14 at approximately 1154 hours, I responded to Veterans Memorial Parkway and Lake St. Louis Blvd for a report of a vehicle crash.

Upon arrival I spoke with Driver #1 and #2. Both drivers stated they were uninjured and refused medical attention on the scene. Both vehicles were in the middle of the intersection blocking the roadway. Driver #1 and #2 stated their vehicles were drivable and I had them move to the side of the roadway to allow traffic to pass.

Driver #1 stated she was traveling east on Veterans Memorial Parkway. Driver #1 stated as Vehicle #2 began to make a left turn onto Lake St. Louis Blvd. Vehicle #2 suddenly stopped in the middle of the intersection. Driver #1 stated she tried to avoid Vehicle #2 and struck the rear bumper of the vehicle.

Driver #2 stated she was making a left turn onto Lake St. Louis Blvd. from Veterans Memorial Parkway. Driver #2 stated as she began to make the turn the light changed, she stopped Vehicle #2, and was struck on the rear bumper by Vehicle #1. Driver #2 stated she stopped before the white line while making the turn. I asked why on my arrival she was partially through the turn in the middle of the intersection. She stated she was told by other people to move to the middle of the intersection. I asked Driver #2 who the people were who told her to move to the middle of the intersection. She was unable to provide me the information.

Both vehicles were driven from the scene.

Respectfully submitted

R. G. Henson DSN 277

10. REPORTING AND REVIEWING OFFICER INFORMATION

| REPORTING OFFICER NAME | DSN / BADGE NO. | BEAT / ZONE | TROOP / DISTRICT / PRECINCT |
|---|---|---|---|
| HENSON, GARRETT | 277 | 1 | C |

| REVIEWING OFFICER NAME | DSN / BADGE NO. | REVIEWING OFFICER 2 NAME | DSN / BADGE NO. |
|---|---|---|---|
| | | | |

## Supporting Documentation – Similar Roundabouts

### US 23 and Lee Road

# Traffic and Transportation Engineering for Modern Roundabouts

**Award Winner**

ACEC Michigan
"Eminent Conceptor"
2008

## US 23 and Lee Road Roundabouts

### Livingston County, MI

Mark Johnson, P.E., was the roundabout design engineer responsible for the capacity analysis and horizontal design of what is the most complex system of roundabouts in the US at this time. The roundabout corridor handles approximately 8,000 vph and opened in 2006.

Signal alternatives were found to have inadequate capacity, resulting in excessive delays and potentially dangerous backups on freeway ramps. The double roundabout configuration at the southbound ramp terminals accommodates the five entries and exits with minimal circulating flow – increasing intersection entry capacity and reducing crash potential.

High-capacity roundabout intersections allowed a major interchange capacity improvement, while deferring the high cost of widening the bridge over US 23. This is an excellent example of placing capacity where it is usually needed – at the intersections – while maintaining narrow connecting roads between intersections.

Want to learn more?

View this presentation from the 2011 TRB Roundabout Conference (http://teachamerica.com/RAB11/RAB1111Walther/player.html) given by Walther Rogers, Principal Associate, Parsons Corporation

US 23 & Lee Road, Livingston County, MI

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## I-15 and Brigham Rd, St. George Utah