

# LOUISIANA UNIFORM CRASH REPORT

## CRASH INFORMATION

<input type="checkbox"/> Secondary Crash		<input type="checkbox"/> Photos Taken		<input checked="" type="checkbox"/> Videos Taken		Rev. 2021-1		Case #		Test Case Tracking - 13		Page 1 of 17	
Number of Motorists 4		Number of Non-Motorists 2		Non-Fatally Injured Persons 1		Fatalities 5		Total Injuries and Fatalities 6		Vehicles Involved 2		Troop A	
Investigating Agency CARTS LSU				Division		Parish East Baton Rouge		City Baton Rouge		Latitude 30.435312° N		Longitude 91.092765° W	

### CRASH TIME INFORMATION

Crash Date/Time 08/25/2021 0900		Police Notified Date/Time 08/25/2021 0900		Police Arrived Date/Time 08/25/2021 0901		Roadway Cleared Date/Time 08/25/2021 0905		On Scene Investigation Completed Date/Time 08/25/2021 0910			
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### ROAD INFORMATION

Highway <input checked="" type="checkbox"/> Not applicable		Road TARA BLVD									
Distance/Direction From Intersection <input type="checkbox"/> Not applicable 34.0 ft North					Intersecting Road <input type="checkbox"/> Crash was at an intersection TRIBECA RD						

### LOCATION INFORMATION

Road Classification 104		Road Subtype 100		Property Ownership 100		Trafficway Characteristics 100		Number of Intersection Approaches 1		Traffic Flow Direction S	
100 Interstate 101 US highway 102 State highway 103 Parish road 104 City street 200 Off road/private property		100 Mainline 200 On-ramp 201 Off-ramp 300 Frontage/service 970 Not applicable		100 Public property 200 Private property		100 Trafficway, on road 101 Trafficway, not on road 200 Non-trafficway		1 Not an intersection 2 Two 3 Three 4 Four 5 Five or more		X Not applicable (not a divided highway) N North W West S South E East	

### INVESTIGATING OFFICER

Rank Trooper		First Name Matt			Middle Name		Last Name Trahan			Suffix	
Badge # 1641		Printed Name Matt Trahan					Signature <i>Matt Trahan</i>				

### CRASH CIRCUMSTANCES AND CONDITIONS

First Harmful Event 201		Location of First Harmful Event 104		Manner of Crash 200	
Non-Collision 100 Cargo/equipment loss or shift 101 Fell/jumped from motor vehicle 102 Fire/explosion 103 Immersion, full or partial 104 Jackknife 105 Overturn/rollover 106 Thrown or falling object 198 Other non-collision harmful event		Collision with Non-Fixed Object 200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle 204 Collision with pedestrian 205 Collision with railway vehicle (train, engine) 206 Collision with object at rest from MV in transport 207 Collision with falling/shifting cargo or anything set in motion by MV 208 Collision with work zone/maintenance equipment 209 Collision with farm equipment 297 Collision with other non-motorist 298 Collision with other non-fixed object		Collision with Fixed Object 300 Collision with bridge overhead structure 301 Collision with bridge pier or support 302 Collision with bridge rail 303 Collision with cable barrier 304 Collision with concrete traffic barrier 305 Collision with culvert 306 Collision with curb 307 Collision with ditch 308 Collision with embankment 309 Collision with fence 310 Collision with guardrail end terminal 311 Collision with guardrail face 312 Collision with impact attenuator/crash cushion 313 Collision with mailbox 314 Collision with traffic sign support 315 Collision with traffic signal support 316 Collision with tree (standing) 317 Collision with utility pole/light support 396 Collision with other post, pole, or support 397 Collision with other traffic barrier 398 Collision with other fixed object (wall, building, tunnel, etc.) 399 Collision with unknown fixed object	
		Relation to Junction 000 000 Not an interchange area 100 Acceleration or deceleration lane 101 Crossover related 102 Driveway access or related 103 Entrance/exit ramp or related 104 Intersection or related 106 Railway grade crossing 107 Shared-use path or trail 108 Through roadway 980 Other location within an interchange area (median, shoulder, and roadside) 999 Unknown		Contributing Factor Primary 100 Secondary 102 100 Violations 101 Movement prior to crash 102 Vision obstructions 103 Driver condition 104 Vehicle condition 105 Road surface 106 Roadway condition 107 Lighting condition 108 Weather condition 109 Traffic control 110 Non-motorist condition 111 Non-motorist action 970 Not applicable	
		Intersection Geometry 970 100 Angled / skewed 101 Roundabout / traffic circle 102 Perpendicular 970 Not applicable		School Bus Relation 000 000 No 100 Yes, school bus directly involved 101 Yes, school bus indirectly involved	
		Intersection Traffic Control 970 000 No controls 100 Signalized 101 Stop -all way 102 Stop -partial 103 Yield 970 Not applicable			

# LOUISIANA UNIFORM CRASH REPORT CRASH INFORMATION

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### CRASH CONDITIONS

<b>Roadway Surface Condition</b>	107	<b>Light Condition</b>	399	<b>Weather Conditions</b>	105	<b>Environmental Conditions</b>	117
000 Dry 100 Ice/Frost 101 Mud, dirt, gravel 102 Oil 103 Sand 104 Slush 105 Snow 106 Water (standing,moving) 107 Wet 980 Other 999 Unknown		100 Daylight 200 Dawn/dusk 300 Dark - continuous street lights 301 Dark - street lights at intersection only 302 Dark - not lighted 399 Dark - unknown lighting 980 Other 999 Unknown		000 Clear 100 Blowing sand, soil, dirt 101 Blowing snow 102 Cloudy 103 Fog, smog, smoke 104 Freezing rain or freezing drizzle 105 Rain 106 Severe crosswinds 107 Sleet or hail 108 Snow 980 Other 999 Unknown		000 None 100 Animal(s) 101 Debris 102 Glare 103 Non-highway work 104 Obstructed crosswalks 105 Obstruction in roadway 106 Overhead clearance limited 107 Prior crash 108 Prior non-recurring incident 109 Regular congestion 110 Related to a bus stop 111 Road surface condition (wet, icy, snow, slush, etc.)	112 Ruts, holes, bumps 113 Shoulders (none, low, soft, high) 114 Toll booth/plaza related 115 Traffic control device 116 Traffic incident 117 Visual obstruction(s) 118 Weather conditions 119 Work zone (construction/maintenance/utility) 120 Worn, travel-polished surface 980 Other 999 Unknown

### WORK ZONE CRASH INFORMATION

<b>Work Zone Relation</b>	100	<b>Work Zone Location</b>	100	<b>Work Zone Type</b>	101	<b>Work Zone Circumstances</b>	105	<b>Worker(s) Present</b>	000	<b>Law Enforcement Present</b>	000
000 No 100 Yes 999 Unknown		100 Before the first work zone warning sign 101 Advance warning area 102 Transition area 103 Activity area 104 Termination area 970 Not applicable 999 Unknown		100 Lane closure 101 Lane shift / crossover 102 Work on shoulder or median 103 Intermittent or moving work 970 Not applicable 980 Other type of work zone 999 Unknown		100 Back of queue 101 Congestion (dense & slow traffic), typical 102 Heavy (dense & fast traffic) 103 Congestion (dense & slow traffic), not typical 104 Traffic control device malfunction 105 Free flow (light & fast traffic) 980 Other 970 Not applicable 999 Unknown		000 No 100 Yes 970 Not applicable 999 Unknown		000 No 100 Yes 970 Not applicable 999 Unknown	

### REVIEWING OFFICER

<b>Rank</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>	<b>Suffix</b>
IT	Eric		Newman	

#### WITNESS #

#### WITNESS #

<b>Name</b>				<b>Name</b>			
<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Suffix</i>	<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Suffix</i>
<b>Address</b>				<b>Address</b>			
<b>City</b>		<b>State</b>	<b>Postal Code</b>	<b>City</b>		<b>State</b>	<b>Postal Code</b>
<b>Phone Number</b>		<b>Age</b>	<b>Sex</b>	<b>Phone Number</b>		<b>Age</b>	<b>Sex</b>

### NON-VEHICULAR PROPERTY DAMAGE

#### PROPERTY #

<b>Property Type</b>	<b>Damage Severity</b>	<b>Owner Name</b> <input type="checkbox"/> Unknown	<b>Owner Phone Number</b> <input type="checkbox"/> Not Collected
<b>Owner Address</b> <input type="checkbox"/> Unknown			
<i>Street</i>		<i>City</i>	<i>State</i> <i>Postal Code</i>

### NON-VEHICULAR PROPERTY DAMAGE

#### PROPERTY #

<b>Property Type</b>	<b>Damage Severity</b>	<b>Owner Name</b> <input type="checkbox"/> Unknown	<b>Owner Phone Number</b> <input type="checkbox"/> Not Collected
<b>Owner Address</b> <input type="checkbox"/> Unknown			
<i>Street</i>		<i>City</i>	<i>State</i> <i>Postal Code</i>

### NON-VEHICULAR PROPERTY DAMAGE

#### PROPERTY #

<b>Property Type</b>	<b>Damage Severity</b>	<b>Owner Name</b> <input type="checkbox"/> Unknown	<b>Owner Phone Number</b> <input type="checkbox"/> Not Collected
<b>Owner Address</b> <input type="checkbox"/> Unknown			
<i>Street</i>		<i>City</i>	<i>State</i> <i>Postal Code</i>

### PROPERTY DAMAGE CODES

<b>Property Type</b>	<b>Damage Severity</b>
100 Private property 200 Bridge overhead structure 201 Bridge pier or support 202 Bridge rail	300 Cable barrier 301 Concrete traffic barrier 302 Guardrail end terminal 303 Guardrail face 304 Impact attenuator/crash cushion 398 Other traffic barrier 400 Traffic sign support 401 Traffic signal support 402 Utility pole/light support 598 Other state property 980 Other
	100 Light (less than \$500) 101 Moderate (between \$500 and \$10,000) 102 Severe (over \$10,000)

LOUISIANA UNIFORM CRASH REPORT
VEHICLE INFORMATION

Motor Vehicle # 1
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DESCRIPTION AND INFORMATION

Check if this vehicle had no driver
Hit and Run
Vehicle Type
Vehicle Body Type
VIN
Model Year
Make
Model
Color
License Plate
Owner Name
Owner Address
Insurance
Company
Phone #
NAIC #
Policy #
Expiration Date

DAMAGE TOWING

Damage Extent
Initial Point of Contact
Damaged Areas
Tow Status
Tow Authority
Towed By

MOTOR VEHICLE CIRCUMSTANCES

Vehicle Usage
Vehicle Maneuver
Vehicle Maneuver Reason
Emergency Vehicle Usage
Direction of Travel Before Crash

LOUISIANA UNIFORM CRASH REPORT
VEHICLE INFORMATION

Motor Vehicle #
1

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MOTOR VEHICLE CIRCUMSTANCES

Form containing sections: Skidmark Data (Feet), Distance Traveled After Impact (Feet), Contributing Defects, Vehicle Lighting, Traffic Control Device Types and Statuses, Trafficway Division, Barrier Type, Roadway Grade, Number of Through Lanes, Number of Auxiliary Lanes, Roadway Alignment, Permitted Travel, Speed Limit, HOV Lane Presence, and HOV Lane Relation.

MOTOR VEHICLE EVENTS

Sequence of Events 1 [201] 2 [204] 3 [ ] 4 [ ] Most Harmful Event [201]

Form containing sections: Non-Harmful Events, Collision with Fixed Object, Non-Collision Events, and Collision with Person / Vehicle / Non-Fixed Object.

# LOUISIANA UNIFORM CRASH REPORT VEHICLE INFORMATION

Motor Vehicle #  
1

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## COMMERCIAL MOTOR VEHICLE INFORMATION

<b>Vehicle Configuration</b> <span style="float: right;">000</span>		<b>Hazardous Materials Placard</b> <span style="float: right;">000</span>
000 Vehicles 10,000 lbs or less	300 Single-unit truck (2-axle and GVWR > 10,000 lbs.)	999 Unknown
100 Vehicles 10,000 lbs or less placarded for hazardous materials	301 Single-unit truck (3 or more axles)	000 Had no placard and not carrying hazardous materials
200 Bus/large van (seats 9-15 occupants, including driver)	302 Truck pulling trailer(s)	001 Had a placard, not carrying hazardous materials
201 Bus (seats more than 15 occupants, including driver)	303 Truck tractor (bobtail)	100 Carried hazardous material that required placarding
	304 Truck tractor/semi-trailer	200 Carried hazardous materials without placard <span style="float: right;">999 Unknown</span>
	305 Truck tractor/double	<b>Hazardous Material ID</b> <span style="float: right;">N/A</span>
	306 Truck tractor/triple	<b>Hazardous Material Class</b> <span style="float: right;">970</span>
	307 Truck more than 10,000 lbs., cannot classify	1 Explosives <span style="float: right;">970 Not applicable</span>
		2 Gas <span style="float: right;">999 Unknown</span>

<b>Cargo Body Type</b> <span style="float: right;">970</span>	<b>Special Sizing</b>
000 No cargo body	<input checked="" type="checkbox"/> 000 No special sizing
100 Bus	<input type="checkbox"/> 100 Over-height
101 Auto transporter	<input type="checkbox"/> 101 Over-length
102 Cargo tank	<input type="checkbox"/> 102 Over-weight
103 Concrete mixer	<input type="checkbox"/> 103 Over-width
104 Dump	<input type="checkbox"/> 999 Unknown
105 Flatbed	
106 Garbage / refuse	
107 Grain / chips / gravel	
108 Intermodal container chassis	
109 Log	
110 Pole trailer	
111 Van / enclosed box	
112 Vehicle towing another vehicle	
970 Not applicable	
980 Other	
999 Unknown	

<b>Load Permitted</b> <span style="float: right;">970</span>	<b>Number of Axles</b>	<b>Motor Carrier Type</b> <span style="float: right;">000</span>	<b>Motor Carrier Identification</b> <span style="float: right;">970</span>
000 Non-permitted load	<input type="checkbox"/> Unknown	000 Personal vehicle	100 US DOT number
100 Permitted load		001 Not in commerce: government	101 State number
970 Not applicable (not a qualifying vehicle)		002 Not in commerce: personal rental truck or bus	970 Not applicable
999 Unknown		098 Not in commerce: other	999 Unknown/unable to determine
		100 Interstate carrier	<b>State</b> _____
		101 Intrastate carrier	
			<b>Motor Carrier Name</b> <input type="checkbox"/> Unknown
			<b>Motor Carrier ID Number</b>

<b>Motor Carrier Address</b> <input type="checkbox"/> Unknown	<b>Motor Carrier Phone Number</b> <input type="checkbox"/> Unknown
Street _____	City _____ State _____ Postal Code _____

<b>GVWR/GCWR</b> <span style="float: right;">970</span>	<b>Commodity Hauled</b>
100 Light (less than 10,000 lbs.GVWR/GCWR)	
101 Medium (10,001 - 26,000 lbs GVWR/GCWR)	
102 Heavy (greater than 26,000 lbs GVWR/GCWR)	
970 Not applicable (not a qualifying vehicle)	
999 Unknown	

## TRAILER INFORMATION

TRAILER #

<b>VIN</b> <input type="checkbox"/> Unknown	<b>Number of Axles</b> <input type="checkbox"/> Unknown
<b>Year</b> <input type="checkbox"/> Unknown	<b>Make</b> <input type="checkbox"/> Unknown
<b>Model</b> <input type="checkbox"/> Unknown	<b>License Plate</b> <input type="checkbox"/> Missing
<b>State</b> _____ <input type="checkbox"/> Unknown	<b>Number</b> _____ <input type="checkbox"/> Unknown
<b>Year</b> _____ <input type="checkbox"/> Unknown	<input type="checkbox"/> Non-expiring

## TRAILER INFORMATION

TRAILER #

<b>VIN</b> <input type="checkbox"/> Unknown	<b>Number of Axles</b> <input type="checkbox"/> Unknown
<b>Year</b> <input type="checkbox"/> Unknown	<b>Make</b> <input type="checkbox"/> Unknown
<b>Model</b> <input type="checkbox"/> Unknown	<b>License Plate</b> <input type="checkbox"/> Missing
<b>State</b> _____ <input type="checkbox"/> Unknown	<b>Number</b> _____ <input type="checkbox"/> Unknown
<b>Year</b> _____ <input type="checkbox"/> Unknown	<input type="checkbox"/> Non-expiring

## TRAILER INFORMATION

TRAILER #

<b>VIN</b> <input type="checkbox"/> Unknown	<b>Number of Axles</b> <input type="checkbox"/> Unknown
<b>Year</b> <input type="checkbox"/> Unknown	<b>Make</b> <input type="checkbox"/> Unknown
<b>Model</b> <input type="checkbox"/> Unknown	<b>License Plate</b> <input type="checkbox"/> Missing
<b>State</b> _____ <input type="checkbox"/> Unknown	<b>Number</b> _____ <input type="checkbox"/> Unknown
<b>Year</b> _____ <input type="checkbox"/> Unknown	<input type="checkbox"/> Non-expiring

# LOUISIANA UNIFORM CRASH REPORT DRIVER INFORMATION

<b>Motor Vehicle #</b> 1	<b>Rev. 2021-1</b>	<b>Case #</b> Test Case Tracking - 13	<b>Page</b> 6 <b>of</b> 17
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DRIVER INFORMATION			
<b>Name</b> <input type="checkbox"/> Unknown Rick Ford <small>First Middle Last Suffix</small>	<b>Age</b> <input type="checkbox"/> Unknown 39	<b>Sex</b> <input type="checkbox"/> 101 100 Female 101 Male 999 Unknown	<b>Race</b> <input type="checkbox"/> 102 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown
<b>Address</b> <input type="checkbox"/> Unknown 544 Rick Street Baton Rouge LA 70454 <small>Street City State Postal Code</small>	<b>Phone Number</b> <input type="checkbox"/> Not Collected 5678416322		
<b>Incident Responder</b> <input type="checkbox"/> 000 000 No 102 Police 980 Other 100 EMS 103 Tow operator 999 Unknown 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)	<b>Date of Birth</b> <input checked="" type="checkbox"/> Unknown	<b>Ethnicity</b> <input type="checkbox"/> 999 100 Hispanic 101 Other than Hispanic 999 Unknown	

DRIVER LICENSE INFORMATION			
<b>License Status</b> <input type="checkbox"/> 100 100 Valid license 004 Suspended 000 Not licensed 999 Unknown 001 Canceled or denied 002 Expired 003 Revoked	<b>License Class</b> <input type="checkbox"/> 400 000 None 100 Class A 101 Class B 102 Class C 200 Light commercial/chauffeur (LA class D) 300 Motorcycle only 400 Regular driver license (LA class E) 970 Not applicable	<b>Driver License Type</b> <input type="checkbox"/> 100 100 Non-CDL driver license 101 Non-CDL restricted driver license (learner's permit, temporary/limited, graduated driver license, etc.) 200 Commercial driver license (CDL) 970 Not applicable	<b>Commercial Driver License Status</b> <input type="checkbox"/> 970 100 Valid 000 Canceled or denied 101 Learner's permit 001 Disqualified 002 Expired 003 Revoked 004 Suspended 098 Other (not valid) 970 Not applicable (no CDL) 999 Unknown
<b>License Number</b> 564148635	<b>License State</b> LA		
<b>Endorsements on License</b> <input checked="" type="checkbox"/> 000 None/not applicable <input type="checkbox"/> 100 H - Hazardous materials <input type="checkbox"/> 101 N - Tank vehicle <input type="checkbox"/> 102 P - Passenger <input type="checkbox"/> 103 S - School <input type="checkbox"/> 104 T - Double/triple trailers <input type="checkbox"/> 105 X - Combination of tank vehicle and hazardous materials <input type="checkbox"/> 200 M - Motorcycle <input type="checkbox"/> 298 Other non-commercial license endorsements <input type="checkbox"/> 999 Unknown	<b>Endorsement Compliance</b> <input type="checkbox"/> 000 000 No endorsements required for the vehicle 100 Endorsements required, complied with 101 Endorsements required, not complied with 199 Endorsements required, compliance unknown 999 Unknown if endorsements required	<b>Restrictions on License</b> 000 - None	
		<b>Alcohol Interlock Presence</b> <input type="checkbox"/> 970 000 No 970 Not applicable 100 Yes 999 Unknown	

DRIVER SEATING AND SAFETY INFORMATION																																											
<b>Seating Position</b> <input type="checkbox"/> 100 <b>Standard Vehicle Seats</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="5" style="text-align: center;">Front</th> </tr> <tr> <th>Row</th> <th>Left</th> <th>Middle</th> <th>Right</th> <th>Unk</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>100</td> <td>101</td> <td>102</td> <td>199</td> </tr> <tr> <td>2</td> <td>200</td> <td>201</td> <td>202</td> <td>299</td> </tr> <tr> <td>3</td> <td>300</td> <td>301</td> <td>302</td> <td>399</td> </tr> <tr> <td>4</td> <td>400</td> <td>401</td> <td>402</td> <td>499</td> </tr> <tr> <td>Oth</td> <td>500</td> <td>501</td> <td>502</td> <td>599</td> </tr> <tr> <td>Unk</td> <td>600</td> <td>601</td> <td>602</td> <td>699</td> </tr> </tbody> </table>	Front					Row	Left	Middle	Right	Unk	1	100	101	102	199	2	200	201	202	299	3	300	301	302	399	4	400	401	402	499	Oth	500	501	502	599	Unk	600	601	602	699	<b>Other Seating Positions</b> 700 Unenclosed cargo area 701 Riding on motor vehicle exterior (non-trailing unit) 800 Trailing unit 801 Sleeper section of cab (truck) 898 Other enclosed cargo area 970 Not applicable 999 Unknown	<b>Restraint Systems Used</b> <input type="checkbox"/> 105 001 None used - motor vehicle occupant 002 No helmet 100 Booster seat 200 DOT-compliant motorcycle helmet 101 Child restraint system - forward facing 201 Not DOT-compliant motorcycle helmet 102 Child restraint system - rear facing 299 Unknown if DOT-compliant motorcycle helmet 103 Child restraint system - type unknown 104 Lap belt only used 105 Shoulder and lap belt used 106 Shoulder belt only used 107 Stretcher 108 Wheelchair 199 Restraint used - type unknown	<b>Any indication of improper use?</b> <input type="checkbox"/> 000 000 No 100 Yes 999 Unknown
Front																																											
Row	Left	Middle	Right	Unk																																							
1	100	101	102	199																																							
2	200	201	202	299																																							
3	300	301	302	399																																							
4	400	401	402	499																																							
Oth	500	501	502	599																																							
Unk	600	601	602	699																																							
<b>Air Bags Deployed</b> <input type="checkbox"/> 000 Not deployed <input type="checkbox"/> 001 Not deployed - switch off <input checked="" type="checkbox"/> 100 Front <input type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain 103 Other (knee, air belt, etc.) <input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 999 Deployment unknown	<b>Ejection</b> <input type="checkbox"/> 000 000 Not ejected 100 Ejected, partially 101 Ejected, totally 970 Not applicable 999 Unknown	<b>Extrication</b> <input type="checkbox"/> 000 000 No 100 Trapped and extricated 101 Trapped but not extricated 999 Unknown																																									

LOUISIANA UNIFORM CRASH REPORT DRIVER INFORMATION

Motor Vehicle # 1

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MEDICAL INFORMATION

Medical information section including Injury Status, Type of Medical Transportation, EMS Response Agency, EMS Response Run #, Medical Unique Identifier, and Facility Receiving Patient.

DRIVER CONDITION AND CIRCUMSTANCES

Driver condition and circumstances section including Conditions at Time of Crash, Distraction Action, Distraction Source, Speeding Relation, Alcohol Usage, Alcohol Test Type, Alcohol Test Results, BAC, Drug Usage, Drug Test Type, and Drug Test Results.

DRIVER ACTIONS

Driver actions section including Driver Actions at Time of Crash, Avoidance Maneuver, and Pre-Collision Stability.

CITATIONS

Citations section for recording any applicable traffic laws or regulations.

LOUISIANA UNIFORM CRASH REPORT
VEHICLE INFORMATION

Motor Vehicle # 2
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DESCRIPTION AND INFORMATION

Check if this vehicle had no driver
Hit and Run
Vehicle Type
Vehicle Body Type
VIN
Model Year
Make
Model
Color
License Plate
Owner Name
Owner Address
Insurance
Company
Phone #
NAIC #
Policy #
Expiration Date

DAMAGE

Damage Extent
Initial Point of Contact
Damaged Areas
Tow Status
Tow Authority
Towed By

MOTOR VEHICLE CIRCUMSTANCES

Vehicle Usage
Vehicle Maneuver
Vehicle Maneuver Reason
Emergency Vehicle Usage
Direction of Travel Before Crash

LOUISIANA UNIFORM CRASH REPORT
VEHICLE INFORMATION

Motor Vehicle #
2

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MOTOR VEHICLE CIRCUMSTANCES

Form containing sections: Skidmark Data (Feet), Distance Traveled After Impact (Feet), Contributing Defects, Vehicle Lighting, Traffic Control Device Types and Statuses, Trafficway Division, Barrier Type, Roadway Grade, Number of Through Lanes, Number of Auxiliary Lanes, Roadway Alignment, Permitted Travel, Speed Limit, HOV Lane Presence, and HOV Lane Relation.

MOTOR VEHICLE EVENTS

Sequence of Events 1 [201] 2 [203] 3 [ ] 4 [ ] Most Harmful Event [201]

Form containing sections: Non-Harmful Events, Collision with Fixed Object, Non-Collision Events, and Collision with Person / Vehicle / Non-Fixed Object.

# LOUISIANA UNIFORM CRASH REPORT VEHICLE INFORMATION

Motor Vehicle #  
2

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## COMMERCIAL MOTOR VEHICLE INFORMATION

Vehicle Configuration 100 Hazardous Materials Placard 100

- 000 Vehicles 10,000 lbs or less
- 100 Vehicles 10,000 lbs or less placarded for hazardous materials
- 200 Bus/large van (seats 9-15 occupants, including driver)
- 201 Bus (seats more than 15 occupants, including driver)
- 300 Single-unit truck (2-axle and GVWR > 10,000 lbs.)
- 301 Single-unit truck (3 or more axles)
- 302 Truck pulling trailer(s)
- 303 Truck tractor (bobtail)
- 304 Truck tractor/semi-trailer
- 305 Truck tractor/double
- 306 Truck tractor/triple
- 307 Truck more than 10,000 lbs., cannot classify
- 999 Unknown

- 000 Had no placard and not carrying hazardous materials
- 001 Had a placard, not carrying hazardous materials
- 100 Carried hazardous material that required placarding
- 200 Carried hazardous materials without placard 999 Unknown

Hazardous Material ID 6867

Hazardous Material Class 2

- 1 Explosives 970 Not applicable
- 2 Gas 999 Unknown
- 3 Flammable liquids
- 4 Other flammable substances
- 5 Oxidizing substances and organic peroxides
- 6 Toxic (poisonous) and infectious substances
- 7 Radioactive material
- 8 Corrosives
- 9 Miscellaneous dangerous goods

Hazardous Materials Released from Vehicle Cargo Compartment 100

- 000 No, hazardous materials not released
- 100 Yes, hazardous materials released
- 970 Not applicable

Motor Carrier Name  Unknown

Motor Carrier ID Number

Cargo Body Type 000

- 000 No cargo body
- 100 Bus
- 101 Auto transporter
- 102 Cargo tank
- 103 Concrete mixer
- 104 Dump
- 105 Flatbed
- 106 Garbage / refuse
- 107 Grain / chips / gravel
- 108 Intermodal container chassis
- 980 Other
- 999 Unknown
- 109 Log
- 110 Pole trailer
- 111 Van / enclosed box
- 112 Vehicle towing another vehicle

Special Sizing

- 000 No special sizing
- 100 Over-height
- 101 Over-length
- 102 Over-weight
- 103 Over-width
- 999 Unknown

Load Permitted 100

- 000 Non-permitted load
- 100 Permitted load
- 970 Not applicable (not a qualifying vehicle)
- 999 Unknown

Number of Axles  Unknown

4

Motor Carrier Type 000

- 000 Personal vehicle
- 001 Not in commerce: government
- 002 Not in commerce: personal rental truck or bus
- 098 Not in commerce: other
- 100 Interstate carrier
- 101 Intrastate carrier

Motor Carrier Identification 970

- 100 US DOT number
  - 101 State number
  - 970 Not applicable
  - 999 Unknown/unable to determine
- State \_\_\_\_\_

Motor Carrier Address  Unknown

Motor Carrier Phone Number  Unknown

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_

GVWR/GCWR 100

- 100 Light (less than 10,000 lbs.GVWR/GCWR)
- 101 Medium (10,001 - 26,000 lbs GVWR/GCWR)
- 102 Heavy (greater than 26,000 lbs GVWR/GCWR)
- 970 Not applicable (not a qualifying vehicle)
- 999 Unknown

Commodity Hauled

Unknown

## TRAILER INFORMATION

TRAILER #

VIN  Unknown

Number of Axles  Unknown

Year  Unknown Make  Unknown

Model  Unknown

License Plate  Missing  Non-expiring

State \_\_\_\_\_  Unknown Number \_\_\_\_\_  Unknown Year \_\_\_\_\_  Unknown

## TRAILER INFORMATION

TRAILER #

VIN  Unknown

Number of Axles  Unknown

Year  Unknown Make  Unknown

Model  Unknown

License Plate  Missing  Non-expiring

State \_\_\_\_\_  Unknown Number \_\_\_\_\_  Unknown Year \_\_\_\_\_  Unknown

## TRAILER INFORMATION

TRAILER #

VIN  Unknown

Number of Axles  Unknown

Year  Unknown Make  Unknown

Model  Unknown

License Plate  Missing  Non-expiring

State \_\_\_\_\_  Unknown Number \_\_\_\_\_  Unknown Year \_\_\_\_\_  Unknown

# LOUISIANA UNIFORM CRASH REPORT DRIVER INFORMATION

**Motor Vehicle #**  
2

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## DRIVER INFORMATION

<b>Name</b> <input type="checkbox"/> Unknown				<b>Age</b> <input type="checkbox"/> Unknown	<b>Sex</b> <span style="border: 1px solid black; padding: 2px;">100</span>	<b>Race</b> <span style="border: 1px solid black; padding: 2px;">103</span>
Katy Gucci				41	100 Female 101 Male 999 Unknown	100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown
<i>First Middle Last Suffix</i>						
<b>Address</b> <input type="checkbox"/> Unknown				<b>Phone Number</b> <input checked="" type="checkbox"/> Not Collected		
87 Foody Street Walker LA 70585						
<i>Street City State Postal Code</i>						
<b>Incident Responder</b> <span style="border: 1px solid black; padding: 2px;">000</span>				<b>Date of Birth</b> <input type="checkbox"/> Unknown		<b>Ethnicity</b> <span style="border: 1px solid black; padding: 2px;">999</span>
000 No 102 Police 980 Other 100 EMS 103 Tow operator 999 Unknown 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)				5/6/1980		100 Hispanic 101 Other than Hispanic 999 Unknown

## DRIVER LICENSE INFORMATION

<b>License Status</b> <span style="border: 1px solid black; padding: 2px;">100</span>		<b>License Class</b> <span style="border: 1px solid black; padding: 2px;">102</span>	<b>Driver License Type</b> <span style="border: 1px solid black; padding: 2px;">200</span>	<b>Commercial Driver License Status</b> <span style="border: 1px solid black; padding: 2px;">100</span>
100 Valid license 004 Suspended 000 Not licensed 999 Unknown 001 Canceled or denied 002 Expired 003 Revoked		000 None 100 Class A 101 Class B 102 Class C 200 Light commercial/chauffeur (LA class D) 300 Motorcycle only 400 Regular driver license (LA class E) 970 Not applicable	100 Non-CDL driver license 101 Non-CDL restricted driver license (learner's permit, temporary/limited, graduated driver license, etc.) 200 Commercial driver license (CDL) 970 Not applicable	100 Valid 000 Canceled or denied 101 Learner's permit 001 Disqualified 002 Expired 003 Revoked 004 Suspended 098 Other (not valid) 970 Not applicable (no CDL) 999 Unknown
<b>License Number</b> 351651351	<b>License State</b> LA			
<b>Endorsements on License</b>		<b>Endorsement Compliance</b> <span style="border: 1px solid black; padding: 2px;">199</span>	<b>Restrictions on License</b>	
<input type="checkbox"/> 000 None/not applicable <input checked="" type="checkbox"/> 100 H - Hazardous materials <input type="checkbox"/> 101 N - Tank vehicle <input type="checkbox"/> 102 P - Passenger <input type="checkbox"/> 103 S - School <input type="checkbox"/> 104 T - Double/triple trailers <input type="checkbox"/> 105 X - Combination of tank vehicle and hazardous materials <input type="checkbox"/> 200 M - Motorcycle <input type="checkbox"/> 298 Other non-commercial license endorsements <input type="checkbox"/> 999 Unknown		000 No endorsements required for the vehicle 100 Endorsements required, complied with 101 Endorsements required, not complied with 199 Endorsements required, compliance unknown 999 Unknown if endorsements required	000 - None	
		<b>Alcohol Interlock Presence</b> <span style="border: 1px solid black; padding: 2px;">970</span>		
		000 No 970 Not applicable 100 Yes 999 Unknown		

## DRIVER SEATING AND SAFETY INFORMATION

<b>Seating Position</b> <span style="border: 1px solid black; padding: 2px;">100</span>					<b>Restraint Systems Used</b> <span style="border: 1px solid black; padding: 2px;">105</span>																																												
<b>Standard Vehicle Seats</b>					<b>Other Seating Positions</b>																																												
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th colspan="5">Front</th> </tr> <tr> <th>Row</th> <th>Left</th> <th>Middle</th> <th>Right</th> <th>Unk</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>100</td> <td>101</td> <td>102</td> <td>199</td> </tr> <tr> <td>2</td> <td>200</td> <td>201</td> <td>202</td> <td>299</td> </tr> <tr> <td>3</td> <td>300</td> <td>301</td> <td>302</td> <td>399</td> </tr> <tr> <td>4</td> <td>400</td> <td>401</td> <td>402</td> <td>499</td> </tr> <tr> <td>Oth</td> <td>500</td> <td>501</td> <td>502</td> <td>599</td> </tr> <tr> <td>Unk</td> <td>600</td> <td>601</td> <td>602</td> <td>699</td> </tr> </tbody> </table>					Front					Row	Left	Middle	Right	Unk	1	100	101	102	199	2	200	201	202	299	3	300	301	302	399	4	400	401	402	499	Oth	500	501	502	599	Unk	600	601	602	699	700 Unenclosed cargo area 701 Riding on motor vehicle exterior (non-trailing unit) 800 Trailing unit 801 Sleeper section of cab (truck) 898 Other enclosed cargo area 970 Not applicable 999 Unknown				
Front																																																	
Row	Left	Middle	Right	Unk																																													
1	100	101	102	199																																													
2	200	201	202	299																																													
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					001 None used – motor vehicle occupant 100 Booster seat 101 Child restraint system – forward facing 102 Child restraint system – rear facing 103 Child restraint system – type unknown 104 Lap belt only used 105 Shoulder and lap belt used 106 Shoulder belt only used 107 Stretcher 108 Wheelchair 199 Restraint used – type unknown																																												
					002 No helmet 200 DOT-compliant motorcycle helmet 201 Not DOT-compliant motorcycle helmet 299 Unknown if DOT-compliant motorcycle helmet																																												
					<b>Any indication of improper use?</b> <span style="border: 1px solid black; padding: 2px;">000</span>																																												
					000 No 100 Yes 999 Unknown																																												
<b>Air Bags Deployed</b>					<b>Ejection</b> <span style="border: 1px solid black; padding: 2px;">000</span>		<b>Extrication</b> <span style="border: 1px solid black; padding: 2px;">000</span>																																										
<input type="checkbox"/> 000 Not deployed <input type="checkbox"/> 001 Not deployed - switch off <input checked="" type="checkbox"/> 100 Front <input type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain 103 Other (knee, air belt, etc.)					<input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 999 Deployment unknown		000 Not ejected 100 Ejected, partially 101 Ejected, totally 970 Not applicable 999 Unknown																																										
					000 No 100 Trapped and extricated 101 Trapped but not extricated 999 Unknown																																												

# LOUISIANA UNIFORM CRASH REPORT DRIVER INFORMATION

Motor Vehicle #  
2

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## MEDICAL INFORMATION

<b>Injury Status</b> 100	<b>Type of Medical Transportation</b> 101	<b>EMS Response Agency</b>
100 (K) Fatal Injury 101 (A) Suspected Serious Injury 102 (B) Suspected Minor Injury 103 (C) Possible Injury 104 (O) No Apparent Injury	000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown	New Orleans Emergency Medical Services
<b>Medical Unique Identifier</b> <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown		<b>EMS Response Run #</b> <input checked="" type="checkbox"/> Unknown
		<b>Facility Receiving Patient</b> West Jefferson Medical Center

## DRIVER CONDITION AND CIRCUMSTANCES

<b>Conditions at Time of Crash</b> 000	<b>Distraction Action</b> 000	<b>Distraction Source</b> 970	<b>Speeding Relation</b> 000		
000 Apparently normal 100 Asleep/blacked out 101 Fatigued 102 Emotional (depressed, angry, disturbed, etc.) 103 Ill (sick), fainted 104 Physically impaired 105 Under the influence of medications/ drugs/alcohol 970 Not applicable 980 Other 999 Unknown	000 Not distracted 100 Talking / listening 101 Manually operating a device (e.g., texting, dialing, playing game, etc.) 980 Other 999 Unknown	100 Hands-free mobile phone 101 Hand-held mobile phone 102 Vehicle-integrated device 198 Other electronic device 200 Passenger or other non-motorist 201 External to vehicle/non-motorist area 298 Other 970 Not applicable 999 Unknown	000 No 100 Exceeded speed limit 101 Racing 102 Too fast for conditions 999 Unknown		
		<b>Vision Obscurement</b> 100			
		000 None 100 Rain, snow, etc. on windshield 101 Windshield otherwise obscured 102 Vision obscured by load 103 Trees, bushes, etc. 104 Building 105 Embankment 106 Sign boards 107 Hillcrest 108 Parked vehicles 109 Moving vehicles 110 Blinded by headlights 111 Blinded by sun glare 112 Distracted by neon lights in field of view 980 Other 999 Unknown			
<b>Suspected Alcohol Usage</b> 000	<b>Test Status</b> 000	<b>Alcohol Kit Number</b> <input type="checkbox"/> Unknown	<b>Alcohol Test Type</b> 970	<b>Alcohol Test Results</b> 970	<b>BAC</b>
000 No 100 Yes 999 Unknown	000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		100 Blood 101 Blood clot 102 Blood plasma/serum 200 Breath 201 Preliminary breath test (PBT) 300 Urine 301 Vitreous 302 Liver 970 Not applicable 980 Other	000 Results pending 001 Negative results with no actual value 100 Results received 101 Positive results with no actual value 970 Not applicable 999 Unknown	
<b>Suspected Drug Usage</b> 000	<b>Test Status</b> 000	<b>Drug Kit Number</b> <input type="checkbox"/> Unknown	<b>Drug Test Type</b> 970	<b>Drug Test Results</b>	
000 No 100 Yes 999 Unknown	000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		100 Blood 101 Urine 102 Both blood and urine 103 Saliva 198 Other 970 Not applicable 999 Unknown	Not applicable	

## DRIVER ACTIONS

<b>Driver Actions at Time of Crash</b>	<b>Avoidance Maneuver</b> 980	<b>Pre-Collision Stability</b> 000
000 No contributing action  100 Disregarded other road markings 101 Disregarded other traffic signs 102 Failed to keep in proper lane 103 Failed to yield right-of-way 104 Followed too closely 105 Improper backing 106 Improper passing 107 Improper turn 108 Operated motor vehicle in inattentive, careless, negligent, or erratic manner 109 Operated motor vehicle in reckless or aggressive manner 110 Over-correcting or over-steering 111 Ran off roadway 112 Ran red light 113 Ran stop sign 114 Swerved or avoided due to wind, slippery surface, motor vehicle, object, non-motorist in roadway, etc. 115 Wrong side or wrong way  980 Other contributing action 999 Unknown	000 No avoidance maneuver  100 Accelerating 101 Accelerating and steering left 102 Accelerating and steering right 103 Braking and steering left 104 Braking and steering right 105 Braking (lockup) 106 Braking (no lockup) 107 Braking (lockup unknown) 108 Releasing brakes 109 Steering left 110 Steering right  980 Other 999 Unknown	000 Tracking 100 Skidding longitudinally - rotation less than 30 degrees 200 Skidding laterally - clockwise rotation 201 Skidding laterally - counter-clockwise rotation 299 Skidding laterally - rotation direction unknown 980 Other vehicle loss of control 999 Unknown

## CITATIONS

# LOUISIANA UNIFORM CRASH REPORT PASSENGER INFORMATION

<b>Total # of Passengers</b> 2	Rev. 2021-1	Case #	Test Case Tracking - 13	Page	13	of	17
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PASSENGER INFORMATION									
MOTOR VEHICLE #		PASSENGER #							
1		1							
<b>Name</b> <input type="checkbox"/> Unknown				<b>Date of Birth</b>		<b>Age</b>	<b>Sex</b>		<b>Race</b>
Morty Ford				Unknown		12	100 Female 101 Male 999 Unknown		103
<b>Address</b> <input type="checkbox"/> Unknown				<b>Phone Number</b> <input checked="" type="checkbox"/> Not Collected		<b>Ethnicity</b>			
544 Rick Street Baton Rouge LA 70454						999			
<b>Air Bags Deployed</b>		<b>Injury Status</b>	<b>Incident Responder</b>	<b>Restraint System</b>	<b>Any indication of improper use?</b>	<b>Seating Position</b>	<b>Ejection</b>	<b>Extrication</b>	
<input type="checkbox"/> 000 Not deployed <input type="checkbox"/> 001 Not deployed - switch off <input type="checkbox"/> 100 Front <input checked="" type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain <input type="checkbox"/> 103 Other		100	000	105	000 No 100 Yes 999 Unknown	202	000	000	
<b>Type of Medical Transportation</b>		<b>Medical Unique Identifier</b>	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown	<b>EMS Response Agency</b>		<b>Facility Receiving Patient</b>			
101				East Carroll EMS		Winn Parish Medical Center			
				<b>EMS Response Run #</b> <input checked="" type="checkbox"/> Unknown					

MOTOR VEHICLE #		PASSENGER #							
2		1							
<b>Name</b> <input type="checkbox"/> Unknown				<b>Date of Birth</b>		<b>Age</b>	<b>Sex</b>		<b>Race</b>
Dixon Winns				Unknown		26	100 Female 101 Male 999 Unknown		102
<b>Address</b> <input type="checkbox"/> Unknown				<b>Phone Number</b> <input checked="" type="checkbox"/> Not Collected		<b>Ethnicity</b>			
87 Foody Street Walker LA 70585						100			
<b>Air Bags Deployed</b>		<b>Injury Status</b>	<b>Incident Responder</b>	<b>Restraint System</b>	<b>Any indication of improper use?</b>	<b>Seating Position</b>	<b>Ejection</b>	<b>Extrication</b>	
<input type="checkbox"/> 000 Not deployed <input type="checkbox"/> 001 Not deployed - switch off <input checked="" type="checkbox"/> 100 Front <input type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain <input type="checkbox"/> 103 Other		103	000	105	000 No 100 Yes 999 Unknown	102	000	000	
<b>Type of Medical Transportation</b>		<b>Medical Unique Identifier</b>	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown	<b>EMS Response Agency</b>		<b>Facility Receiving Patient</b>			
000				Not applicable		Not applicable			
				<b>EMS Response Run #</b> <input type="checkbox"/> Unknown					

MOTOR VEHICLE #		PASSENGER #							
<b>Name</b> <input type="checkbox"/> Unknown				<b>Date of Birth</b>		<b>Age</b>	<b>Sex</b>		<b>Race</b>
							100 Female 101 Male 999 Unknown		
<b>Address</b> <input type="checkbox"/> Unknown				<b>Phone Number</b> <input type="checkbox"/> Not Collected		<b>Ethnicity</b>			
<b>Air Bags Deployed</b>		<b>Injury Status</b>	<b>Incident Responder</b>	<b>Restraint System</b>	<b>Any indication of improper use?</b>	<b>Seating Position</b>	<b>Ejection</b>	<b>Extrication</b>	
<input type="checkbox"/> 000 Not deployed <input type="checkbox"/> 001 Not deployed - switch off <input type="checkbox"/> 100 Front <input type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain <input type="checkbox"/> 103 Other					000 No 100 Yes 999 Unknown				
<b>Type of Medical Transportation</b>		<b>Medical Unique Identifier</b>	<input type="checkbox"/> Not applicable <input type="checkbox"/> Unknown	<b>EMS Response Agency</b>		<b>Facility Receiving Patient</b>			
				<b>EMS Response Run #</b> <input type="checkbox"/> Unknown					

PASSENGER CODES																																												
<b>Injury Status</b> 100 (K) Fatal injury 101 (A) Suspected serious injury 102 (B) Suspected minor injury 103 (C) Possible injury 104 (O) No apparent injury	<b>Ejection</b> 000 Not ejected 100 Ejected, partially 101 Ejected, totally 970 Not applicable 999 Unknown	<b>Extrication</b> 000 No 100 Trapped and extricated 101 Trapped but not extricated 999 Unknown	<b>Restraint Systems</b> 001 None used – motor vehicle occupant 100 Booster seat 101 Child restraint system – forward facing 102 Child restraint system – rear facing 103 Child restraint system – type unknown 104 Lap belt only used 105 Shoulder and lap belt used 106 Shoulder belt only used 107 Stretcher 108 Wheelchair 199 Restraint used – type unknown	<b>Seating Position</b> 700 Unenclosed cargo area 701 Riding on motor vehicle exterior (non-trailing unit) 800 Trailing unit 801 Sleeper section of cab (truck) 898 Other enclosed cargo area 970 Not applicable 999 Unknown																																								
<b>Race</b> 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown	<b>Ethnicity</b> 100 Hispanic 101 Other than Hispanic 999 Unknown	<b>Incident Responder</b> 000 No 100 EMS 101 Fire 102 Police 103 Tow operator 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.) 980 Other 999 Unknown	970 Not applicable 980 Other 999 Unknown	<table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 5px;"> <tr><th colspan="5" style="text-align: center;">Front</th></tr> <tr><th>Row</th><th>Left</th><th>Middle</th><th>Right</th><th>Unk</th></tr> <tr><td>1</td><td>100</td><td>101</td><td>102</td><td>199</td></tr> <tr><td>2</td><td>200</td><td>201</td><td>202</td><td>299</td></tr> <tr><td>3</td><td>300</td><td>301</td><td>302</td><td>399</td></tr> <tr><td>4</td><td>400</td><td>401</td><td>402</td><td>499</td></tr> <tr><td>Other</td><td>500</td><td>501</td><td>502</td><td>599</td></tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Unk</td><td>600</td><td>601</td><td>602</td><td>699</td></tr> </table>	Front					Row	Left	Middle	Right	Unk	1	100	101	102	199	2	200	201	202	299	3	300	301	302	399	4	400	401	402	499	Other	500	501	502	599	Unk	600	601	602	699
Front																																												
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1	100	101	102	199																																								
2	200	201	202	299																																								
3	300	301	302	399																																								
4	400	401	402	499																																								
Other	500	501	502	599																																								
Unk	600	601	602	699																																								
<b>Type of Medical Transportation</b> 000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown																																												

LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

Non-Motorist # 1
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Case # Test Case Tracking - 13 Page 14 of 17

NON-MOTORIST INFORMATION

Name: Peter Russel, Age: 45, Sex: 101 Female, Race: 100 American Indian or Alaska Native
Address: [Unknown], Phone Number: [Not Collected]
Incident Responder: 100 No, 102 Police, 100 EMS, 103 Tow operator, 101 Fire, 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)
Date of Birth: [Unknown], Ethnicity: 100 Hispanic

NON-MOTORIST CIRCUMSTANCES

Non-Motorist Type: 100 Bicyclist, Initial Contact Point: 100 Front (12 o'clock), Location: 100 Intersection - marked crosswalk
Origin/Destination: 100 Going to or from school (K-12), Safety Equipment: [None], Struck by Vehicle #: 2

Action Prior to Crash: 102, Actions or Circumstances At Time of Crash: 000 None (no improper action), Clothing Brightness: 100 Light

NON-MOTORIST MEDICAL INFORMATION

Injury Status: 100 (K) Fatal Injury, Type of Medical Transportation: 101, EMS Response Agency: Acadian Ambulance Services, EMS Response Run #: [Unknown]

NON-MOTORIST CONDITION

Conditions at the Time of the Crash: 000 Apparently normal, Distraction Action: 000 Not distracted, Distraction Source: 100 Hands-free mobile phone

Suspected Alcohol Usage: 000, Test Status: 000, Alcohol Kit Number: [Unknown], Alcohol Test Type: 970, Alcohol Test Results: 970, BAC: [Unknown]

Suspected Drug Usage: 000, Test Status: 000, Drug Kit Number: [Unknown], Drug Test Type: 970, Drug Test Results: Not applicable

LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

Non-Motorist # 2
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NON-MOTORIST INFORMATION

Name Sara Johnson, Age 26, Sex 100 Female, Race 100 American Indian or Alaska Native, Address Unknown, Phone Number Not Collected, Incident Responder 100 No, 102 Police, 100 EMS, 103 Tow operator, 101 Fire, 104 Transportation, Date of Birth Unknown, Ethnicity 999 Unknown

NON-MOTORIST CIRCUMSTANCES

Non-Motorist Type 200 Pedestrian, Initial Contact Point 101 Right (3 o'clock), Location 101 Intersection - unmarked crosswalk, Safety Equipment 100 Helmet, Struck by Vehicle # 1

Action Prior to Crash 102 Walking/cycling along roadway against traffic, Actions or Circumstances At Time of Crash 101 Disabled vehicle related, Clothing Brightness 101 Dark

NON-MOTORIST MEDICAL INFORMATION

Injury Status 101 (A) Suspected Serious Injury, Type of Medical Transportation 200 EMS air, EMS Response Agency Not applicable, Medical Unique Identifier Not applicable, Facility Receiving Patient Woman's Hospital Baton Rouge

NON-MOTORIST CONDITION

Conditions at the Time of the Crash 101 Fatigued, Distraction Action 101 Manually operating a device, Distraction Source 100 Hands-free mobile phone

Suspected Alcohol Usage 100 No, Test Status 000 Test not given, Alcohol Kit Number, Alcohol Test Type 100 Blood, Alcohol Test Results 000 Results pending

Suspected Drug Usage 100 No, Test Status 000 Test not given, Drug Kit Number, Drug Test Type 100 Blood, Drug Test Results Not applicable

DIAGRAM

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Scene #

1

Case #

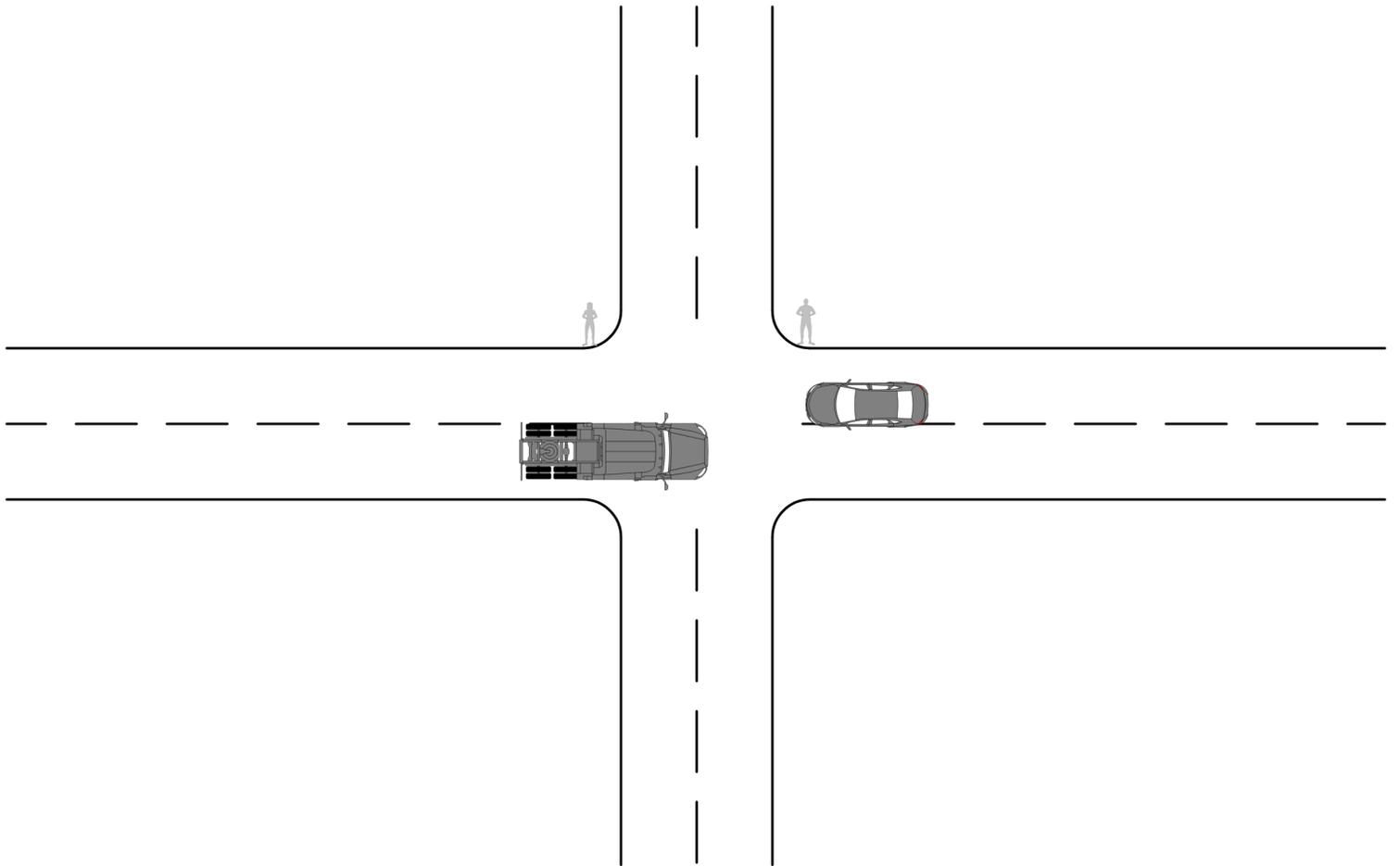
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CRASH DIAGRAM



# LOUISIANA UNIFORM CRASH REPORT NARRATIVE

Rev. 2021-1

## CRASH NARRATIVE

After over 16 years of use, the current crash report form no longer meets the needs of the transportation community. A new crash report is being developed based on the Model Minimum Uniform Crash Criteria (MMUCC) guidelines and will capture the data necessary to improve highway safety in Louisiana. A new crash reporting application called Louisiana eCrash (LA eCrash) developed by the Center for Advanced Public Safety (CAPS) at the University of Alabama will soon replace LACRASH as the state's crash reporting application. CAPS currently has their software in use in Alabama, Mississippi, and Arkansas.

LSU's Center for Analytics & Research in Transportation Safety (CARTS) will continue to support law enforcement agencies using the new LA eCrash application. CARTS will also work with your agency to provide the data schema and technical information required for those agencies choosing to use a third-party vendor approach or already have a CAD/RMS system in place. After over 16 years of use, the current crash report form no longer meets the needs of the transportation community. A new crash report is being developed based on the Model Minimum Uniform Crash Criteria (MMUCC) guidelines and will capture the data necessary to improve highway safety in Louisiana.

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=====  
 =====  
 Disclaimer: All information below this line is auto-generated from report data.  
 =====  
 =====

Vehicle 1 Model: Model X  
 Vehicle 1 Driver Actions: Auto-Pilot Malfunction  
 Vehicle 1 Contributing Circumstances: Auto-Pilot  
 Vehicle 2 Model: Heavy Truck  
 Vehicle 2 Driver Avoidance Maneuver: 0

This report was reassigned to Eric Newman.