

LOUISIANA UNIFORM CRASH REPORT  
CRASH INFORMATION

<input type="checkbox"/> Secondary Crash		<input type="checkbox"/> Photos Taken		<input type="checkbox"/> Videos Taken		Rev. 2021-1		Case #		Test Case Tracking - 15		Page 1 of 12	
Number of Motorists 1		Number of Non-Motorists 2		Non-Fatally Injured Persons 0		Fatalities 2		Total Injuries and Fatalities 2		Vehicles Involved 1		Troop A	
Investigating Agency CARTS LSU				Division		Parish East Feliciana		City Slaughter		Latitude 30.719817° N		Longitude 91.138918° W	
CRASH TIME INFORMATION													
Crash Date/Time 08/24/2021 1200		Police Notified Date/Time 08/24/2021 1200		Police Arrived Date/Time 08/24/2021 1200		Roadway Cleared Date/Time 08/24/2021 1200		On Scene Investigation Completed Date/Time 08/24/2021 1200					
ROAD INFORMATION													
Highway <input type="checkbox"/> Not applicable LA Highway 412				Road LA 412									
Distance/Direction From Intersection <input checked="" type="checkbox"/> Not applicable				Intersecting Road <input checked="" type="checkbox"/> Crash was at an intersection COLLINIS LN									
LOCATION INFORMATION													
Road Classification 102		Road Subtype 100		Property Ownership 100		Trafficway Characteristics 100		Number of Intersection Approaches 2		Traffic Flow Direction W			
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 204				Location of First Harmful Event 104		Manner of Crash 000							
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				100 Gore 101 In parking lane or zone 102 Median 103 Off roadway, location unknown 104 On roadway 105 On shoulder, left side 106 On shoulder, right side 107 Outside road/right-of-way 108 Roadside 109 Separator/traffic island 999 Unknown		000 Not a collision between two motor vehicles in transport 300 Front to rear - rear end 400 Backing - rear to front 401 Backing - rear to rear 402 Backing - rear to side 500 Sideswipe - left against flow 501 Sideswipe - right against flow 502 Sideswipe - against flow 503 Sideswipe - left overtake 504 Sideswipe - right overtake 505 Sideswipe - with flow 980 Other 999 Unknown							
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				Relation to Junction 104 000 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 101 Secondary 101 100 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							
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				Intersection Geometry 101 100 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							
CRASH REPORT - CRASH SUMMARY													

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## CRASH CONDITIONS

<b>Roadway Surface Condition</b> 000	<b>Light Condition</b> 100	<b>Weather Conditions</b> 000	<b>Environmental Conditions</b> 000
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> 000	<b>Work Zone Location</b> 970	<b>Work Zone Type</b> 970	<b>Work Zone Circumstances</b> 970	<b>Worker(s) Present</b> 970	<b>Law Enforcement Present</b> 970
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>
First Middle Last Suffix	First Middle Last Suffix
<b>Address</b>	<b>Address</b>
City State Postal Code	City State Postal Code
Phone Number Age Sex	Phone Number Age Sex

## 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			
Street	City	State	Postal Code

## 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			
Street	City	State	Postal Code

## 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			
Street	City	State	Postal Code

## 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

2021000024

Motor Vehicle #		Rev. 2021-1		Case #	Test Case Tracking - 15	Page	3	of	12	
DESCRIPTION AND INFORMATION										
<input type="checkbox"/> Check if this vehicle had no driver	<b>Hit and Run</b> 000 No, did not leave scene 100 Yes, driver and vehicle left scene 101 Yes, only driver left scene	000	<b>Vehicle Type</b> 100 Motor vehicle in transport 101 Parked motor vehicle 102 Working vehicle / equipment	100	<b>Vehicle Body Type</b> <u>Passenger Vehicles</u> 100 Passenger car 101 Passenger van / Minivan (less than 9 seats) 102 (Sport) utility vehicle <u>Construction / Farm Equipment</u> 200 Construction equipment (backhoe, bulldozer, etc.) 201 Farm equipment (tractor, combine, harvester, etc.) <u>Cycle / Off Road / Recreation</u> 300 2-wheeled motorcycle 301 3-wheeled motorcycle 302 Moped or motorized bicycle 303 All-terrain vehicle / all-terrain cycle (ATV / ATC) 304 Golf Cart 305 Snowmobile 306 Low Speed Vehicle 307 Recreational off-highway vehicles (ROV) 308 Autocycle <u>Trucks</u> 400 Single unit truck 401 Truck tractor 498 Other truck <u>Large Passenger Vehicle</u> 500 Motor home 501 Passenger van (9-15 seats) 502 Passenger van (16+ seats) 503 Large limo 504 Mini-bus <u>Other</u> 980 Other 999 Unknown					
VIN <input checked="" type="checkbox"/> Unknown										
<b>Model Year</b> <input type="checkbox"/> Unknown 2021	<b>Make</b> Tesla	<b>Model</b> Other	<b>Color</b> White							
<b>License Plate</b> <input type="checkbox"/> Missing <input type="checkbox"/> Non-expiring <b>State</b> LA <input type="checkbox"/> Unknown <b>Number</b> 321CBA <input type="checkbox"/> Unknown <b>Year</b> 2021 <input type="checkbox"/> Unknown										
<b>Owner Name</b> <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown Jacob York										
<b>Owner Address</b> <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown 3000 Drive Ln Baton Rouge LA 70808 <small>Street City State Postal Code</small>										
<b>Insurance</b> <input type="checkbox"/> Uninsured at time of crash <b>Company</b> <input checked="" type="checkbox"/> Unknown <b>Phone #</b> <input checked="" type="checkbox"/> Unknown <b>NAIC #</b> <input checked="" type="checkbox"/> Unknown <b>Policy #</b> <input checked="" type="checkbox"/> Unknown <b>Expiration Date</b> <input checked="" type="checkbox"/> Unknown										
DAMAGE										
<b>Damage Extent</b> 000 000 None 100 Minor damage 101 Functional damage 102 Disabling damage 990 Vehicle not at scene	<b>Initial Point of Contact</b> 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 000 Non-collision <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage <input type="checkbox"/> 114 Cargo Loss <input type="checkbox"/> 999 Unknown		<b>Damaged Areas</b> 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 001 Vehicle not at scene <input checked="" type="checkbox"/> 002 No damage <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage		<b>Tow Status</b> 000 000 Not towed 100 Towed, but not due to disabling damage 101 Towed due to disabling damage <b>Towed By</b> <input type="checkbox"/> Unknown					<b>Tow Authority</b> 970 100 Owner 101 Law enforcement 970 Not applicable 980 Other
MOTOR VEHICLE CIRCUMSTANCES										
<b>Vehicle Usage</b> 000 000 No special function 100 Bus - school (public or private) 101 Bus - childcare / daycare 102 Bus - transit / commuter 103 Bus - charter / tour 104 Bus - intercity 105 Bus - shuttle 198 Bus - other 200 Farm vehicle 201 Fire truck 202 Highway / maintenance 203 Mail carrier 204 Military 205 Ambulance 206 Police 207 Public utility 208 Non-transport emergency services vehicle 209 Safety service patrols - incident response 210 Other incident response 211 Rental truck (over 10,000 lbs) 212 Towing - incident response 213 Truck acting as crash attenuator 214 Taxi 215 Vehicle used for electronic ride-hailing (transportation network company)		<b>Vehicle Maneuver</b> 100 100 Movements essentially straight ahead 101 Backing 102 Changing lanes 103 Making U-turn 104 Negotiating a curve 105 Overtaking / passing 106 Turning left 107 Turning right 108 Traveling wrong way <b>Vehicle Maneuver Reason</b> 000 000 Normal movement 100 To avoid other vehicle 101 To avoid non-motorist 102 To avoid animal 198 To avoid other object 200 Passing 201 Vehicle out of control, not passing 202 Vehicle out of control, passing 203 For traffic control 204 Due to congestion 205 Due to prior crash (collision) 206 Due to driver condition 207 Due to driver violation 208 Due to vehicle condition (failure) 209 Due to pavement condition 210 High wind 980 Other 999 Unknown								
<b>Emergency Vehicle Usage</b> 000 000 Non-emergency, non-transport 100 Non-emergency transport 200 Emergency operation, emergency warning equipment not in use 201 Emergency operation, emergency warning equipment in use 970 Not applicable 999 Unknown		<b>Direction of Travel Before Crash</b> 500 000 Not on roadway 001 In roadway but not in motion 100 Northbound 300 Eastbound 500 Southbound 700 Westbound 999 Unknown								

LOUISIANA UNIFORM CRASH REPORT  
VEHICLE INFORMATION

2021000024

Motor Vehicle #		Rev. 2021-1		Case #	Test Case Tracking - 15	Page	4	of	12
MOTOR VEHICLE CIRCUMSTANCES									
Skidmark Data (Feet)		Distance Traveled After Impact (Feet) <input checked="" type="checkbox"/> Unknown		Contributing Defects					
Front Left	Front Right	<input type="checkbox"/> Not applicable or measured <input checked="" type="checkbox"/> Unknown		000 None					
<input type="text"/>	<input type="text"/>			100 Brakes					
Rear Left	Rear Right			101 Exhaust system					
<input type="text"/>	<input type="text"/>			102 Body, doors					
				103 Steering					
				104 Power train					
				105 Suspension					
				106 Tires					
				107 Wheels					
				108 Headlights					
				109 Tail lights					
				110 Signal lights					
				111 All lights					
				112 Window / windshield					
				113 Mirrors					
				114 Wipers					
				115 Truck coupling / trailer hitch / safety chains					
				980 Other					
				999 Unknown					
Traffic Control Device Types and Statuses									
Traffic Control Device Types		Devices Present		Devices Inoperative or Missing					
000 None	300 Flashing railroad crossing (may include gates)	1	203	1	000				
100 Person (including flagger, law enforcement, crossing guard, etc)	301 Flashing school zone signal	2	206	2					
200 Bicycle crossing sign	302 Flashing traffic control signal	3	401	3					
201 Curve Ahead warning sign	303 Lane use control signal	4	305	4					
202 Intersection Ahead warning sign	304 Ramp meter signal					Automation System Level Present			
203 Pedestrian crossing sign	305 Traffic control signal					000 No automation			
204 Railroad crossing	398 Other signal					100 Driver assistance			
205 Reduce Speed Ahead warning sign	400 Bicycle crossing					101 Partial automation			
206 School zone sign	401 Pedestrian crossing					102 Conditional automation			
207 Stop sign	402 Railroad crossing					103 High automation			
208 Yield sign	403 School zone					104 Full automation			
298 Other warning sign	404 Yellow no passing line					199 Automation level unknown			
	498 Other pavement marking (excluding edgelines, centerlines, or lane lines)					999 Unknown			
	980 Other					Automation System Level Engaged			
	999 Unknown					000 No automation			
Trafficway Division		000		Barrier Type		000			
000 Not divided				000 None					
001 Not divided, with a continuous left turn lane				100 Cable barrier					
100 Divided, flush median (greater than 4 ft wide)				101 Concrete barrier (e.g. Jersey barrier)					
101 Divided, raised median (curbed)				102 Earth embankment					
102 Divided, depressed median				103 Guardrail					
999 Unknown				980 Other					
Roadway Grade	100	Number of Through Lanes	2	Number of Auxiliary Lanes	0	Roadway Alignment	100	Permitted Travel	200
100 Level						100 Straight		100 One-way	
101 Uphill						101 Curve left		200 Two-way	
102 Hillcrest						102 Curve right		Speed Limit	
103 Downhill								45	
104 Sag (bottom)								<input type="checkbox"/> Unknown	
								<input type="checkbox"/> N/A	
MOTOR VEHICLE EVENTS									
Sequence of Events		1	204	2		3		4	
								Most Harmful Event	204
Non-Harmful Events					Collision with Fixed Object				
000 Cross centerline					300 Collision with bridge overhead structure				
001 Cross median					301 Collision with bridge pier or support				
002 End departure (T-intersection, dead-end, etc.)					302 Collision with bridge rail				
003 Downhill runaway					303 Collision with cable barrier				
004 Equipment failure (blown tire, brake failure, etc.)					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				
Non-Collision Events					Collision with Person / Vehicle / Non-Fixed Object				
100 Cargo/equipment loss or shift					200 Collision with animal (live)				
101 Fell/jumped from motor vehicle					201 Collision with motor vehicle in transport				
102 Fire/explosion					202 Collision with parked motor vehicle				
103 Immersion, full or partial					203 Collision with pedacycle				
104 Jackknife					204 Collision with pedestrian				
105 Overturn/rollover					205 Collision with railway vehicle (train, engine)				
106 Thrown or falling object					206 Collision with object at rest from MV in transport				
198 Other non-collision harmful event					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				
CRASH REPORT - MOTOR VEHICLE CIRCUMSTANCES AND EVENTS									

LOUISIANA UNIFORM CRASH REPORT  
VEHICLE INFORMATION

<b>Motor Vehicle #</b> 1		Rev. 2021-1		<b>Case #</b>	Test Case Tracking - 15	<b>Page</b>	5	<b>of</b>	12			
<b>COMMERCIAL MOTOR VEHICLE INFORMATION</b>												
<b>Vehicle Configuration</b>				000	<b>Hazardous Materials Placard</b>					000		
000 Vehicles 10,000 lbs or less				300 Single-unit truck (2-axle and GVWR > 10,000 lbs.)	999 Unknown					000 Had no placard and not carrying hazardous materials		
100 Vehicles 10,000 lbs or less placarded for hazardous materials				301 Single-unit truck (3 or more axles)						001 Had a placard, not carrying hazardous materials		
200 Bus/large van (seats 9-15 occupants, including driver)				302 Truck pulling trailer(s)						100 Carried hazardous material that required placarding		
201 Bus (seats more than 15 occupants, including driver)				303 Truck tractor (bobtail)						200 Carried hazardous materials without placard	999 Unknown	
				304 Truck tractor/semi-trailer						<b>Hazardous Material ID</b> N/A		
				305 Truck tractor/double						<b>Hazardous Material Class</b>		970
				306 Truck tractor/triple						1 Explosives	970 Not applicable	
				307 Truck more than 10,000 lbs., cannot classify						2 Gas	999 Unknown	
<b>Cargo Body Type</b>				970	<b>Special Sizing</b>							
000 No cargo body					<input checked="" type="checkbox"/> 000 No special sizing							
100 Bus				105 Flatbed	<input type="checkbox"/> 100 Over-height							
101 Auto transporter				106 Garbage / refuse	<input type="checkbox"/> 101 Over-length							
102 Cargo tank				107 Grain / chips / gravel	<input type="checkbox"/> 102 Over-weight							
103 Concrete mixer				108 Intermodal container chassis	<input type="checkbox"/> 103 Over-width							
104 Dump				109 Log	<input type="checkbox"/> 999 Unknown							
110 Pole trailer												
111 Van / enclosed box												
112 Vehicle towing another vehicle												
970 Not applicable				980 Other								
999 Unknown												
<b>Load Permitted</b>		970	<b>Number of Axles</b>			<b>Motor Carrier Type</b>		000	<b>Motor Carrier Identification</b>		970	
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>Motor Carrier Name</b>		<input type="checkbox"/> Unknown	
						101 Intrastate carrier			<b>Motor Carrier ID Number</b>			
						State						
<b>Motor Carrier Address</b>										<b>Motor Carrier Phone Number</b>		
<input type="checkbox"/> Unknown										<input type="checkbox"/> Unknown		
Street										City		
State										Postal Code		
<b>GVWR/GCWR</b>		970	<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												
<b>TRAILER INFORMATION</b>										<b>TRAILER #</b>		
<b>VIN</b>										<b>Number of Axles</b>		
<input type="checkbox"/> Unknown										<input type="checkbox"/> Unknown		
<b>Year</b>		<b>Make</b>		<b>Model</b>								
<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown								
<b>License Plate</b>										<input type="checkbox"/> Non-expiring		
<input type="checkbox"/> Missing										<input type="checkbox"/> Unknown		
<b>State</b>		<b>Number</b>		<b>Year</b>								
<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown								
<b>TRAILER INFORMATION</b>										<b>TRAILER #</b>		
<b>VIN</b>										<b>Number of Axles</b>		
<input type="checkbox"/> Unknown										<input type="checkbox"/> Unknown		
<b>Year</b>		<b>Make</b>		<b>Model</b>								
<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown								
<b>License Plate</b>										<input type="checkbox"/> Non-expiring		
<input type="checkbox"/> Missing										<input type="checkbox"/> Unknown		
<b>State</b>		<b>Number</b>		<b>Year</b>								
<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown								
<b>TRAILER INFORMATION</b>										<b>TRAILER #</b>		
<b>VIN</b>										<b>Number of Axles</b>		
<input type="checkbox"/> Unknown										<input type="checkbox"/> Unknown		
<b>Year</b>		<b>Make</b>		<b>Model</b>								
<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown								
<b>License Plate</b>										<input type="checkbox"/> Non-expiring		
<input type="checkbox"/> Missing										<input type="checkbox"/> Unknown		
<b>State</b>		<b>Number</b>		<b>Year</b>								
<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown		<input type="checkbox"/> Unknown								

Motor Vehicle # 1		DRIVER INFORMATION		Case #	Test Case Tracking - 15	Page	6	of	12																																								
DRIVER INFORMATION																																																	
Name <input type="checkbox"/> Unknown JacobYork <small>FirstMiddleLastSuffix</small>				Age <input type="checkbox"/> Unknown 19	Sex <input type="checkbox"/> 101 100 Female 101 Male 999 Unknown	Race <input type="checkbox"/> 103 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown																																											
Address <input type="checkbox"/> Unknown 3000 Drive LnBaton RougeLA 70808 <small>StreetCityStatePostal Code</small>				Phone Number <input type="checkbox"/> Not Collected 225-777-6666																																													
Incident Responder 000 No102 Police980 Other 100 EMS103 Tow operator999 Unknown 101 Fire104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)				Date of Birth <input type="checkbox"/> Unknown 9/10/2001		Ethnicity <input type="checkbox"/> 999 100 Hispanic 101 Other than Hispanic 999 Unknown																																											
DRIVER LICENSE INFORMATION																																																	
License Status <input type="checkbox"/> 100 100 Valid license004 Suspended 000 Not licensed999 Unknown 001 Canceled or denied 002 Expired 003 Revoked		License Class <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		Driver License Type <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		Commercial Driver License Status <input type="checkbox"/> 970 100 Valid000 Canceled or denied 101 Learner's permit001 Disqualified 002 Expired 003 Revoked 004 Suspended 098 Other (not valid) 970 Not applicable (no CDL) 999 Unknown																																											
License Number 98776543210		License State LA																																															
Endorsements on License <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		Endorsement Compliance <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		Restrictions on License 000 - None																																													
				Alcohol Interlock Presence <input type="checkbox"/> 970 000 No970 Not applicable 100 Yes999 Unknown																																													
DRIVER SEATING AND SAFETY INFORMATION																																																	
Seating Position <input type="checkbox"/> 100		Restraint Systems Used <input type="checkbox"/> 105																																															
Standard Vehicle Seats		Other Seating Positions																																															
<table><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		001 None used – motor vehicle occupant002 No helmet970 Not applicable 980 Other 999 Unknown 100 Booster seat200 DOT-compliant motorcycle helmet 101 Child restraint system – forward facing201 Not DOT-compliant motorcycle helmet 102 Child restraint system – rear facing299 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					
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																																													
				Any indication of improper use? <input type="checkbox"/> 000 000 No 100 Yes 999 Unknown																																													
Air Bags Deployed <input checked="" 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 103 Other (knee, air belt, etc.) <input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 999 Deployment unknown				Ejection <input type="checkbox"/> 000 000 Not ejected 100 Ejected, partially 101 Ejected, totally 970 Not applicable 999 Unknown		Extrication <input type="checkbox"/> 000 000 No 100 Trapped and extricated 101 Trapped but not extricated 999 Unknown																																											

LOUISIANA UNIFORM CRASH REPORT  
DRIVER INFORMATION

2021000024

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Case # Test Case Tracking - 15 Page 7 of 12

Motor Vehicle #  
1

## MEDICAL INFORMATION

<b>Injury Status</b> 104	<b>Type of Medical Transportation</b> 000	<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 980 Other 100 EMS air 999 Unknown 101 EMS ground 200 Law enforcement	Not applicable
		<b>EMS Response Run #</b> <input type="checkbox"/> Unknown

<b>Medical Unique Identifier</b> <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown	<b>Facility Receiving Patient</b>
	Not applicable

## 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> 000	
		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> 000	<b>Pre-Collision Stability</b> 999
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  
NON-MOTORIST INFORMATION

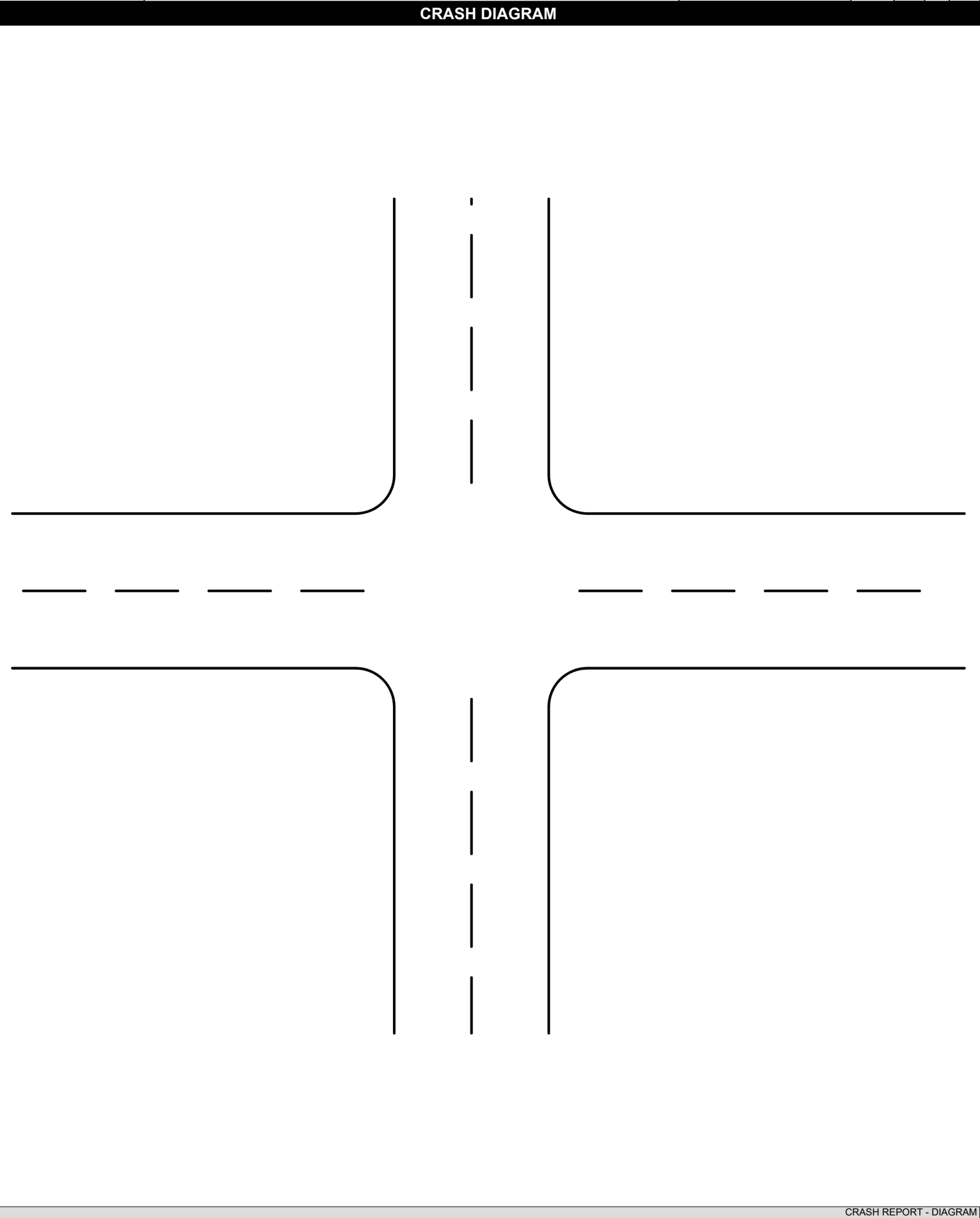
Non-Motorist #		Rev. 2021-1		Case #		Test Case Tracking - 15		Page 8 of 12			
<b>NON-MOTORIST INFORMATION</b>											
<b>Name</b> <input type="checkbox"/> Unknown Brittany Phelps <small>First Middle Last Suffix</small>				<b>Age</b> <input type="checkbox"/> Unknown 30		<b>Sex</b> <input type="checkbox"/> Unknown 100 Female 101 Male 999 Unknown		<b>Race</b> <input type="checkbox"/> Unknown 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 2000 Lane St Baton Rouge LA 70808 <small>Street City State Postal Code</small>				<b>Phone Number</b> <input type="checkbox"/> Not Collected 225-999-8888							
<b>Incident Responder</b> 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 type="checkbox"/> Unknown 10/31/1990		<b>Ethnicity</b> <input type="checkbox"/> Unknown 100 Hispanic 101 Other than Hispanic 999 Unknown					
<b>NON-MOTORIST CIRCUMSTANCES</b>											
<b>Non-Motorist Type</b> <input type="checkbox"/> Unknown 100 Bicyclist 198 Other cyclist 200 Pedestrian 298 Other pedestrian (wheelchair, person in a building, skater, personal conveyance, etc.) 300 Occupant of a non-motor vehicle transportation device 999 Unknown		<b>Initial</b> <input type="checkbox"/> Unknown Contact Point 100 Front (12 o'clock) 101 Right (3 o'clock) 102 Rear (6 o'clock) 103 Left (9 o'clock) 999 Unknown		<b>Location</b> <input type="checkbox"/> Unknown 100 Intersection - marked crosswalk 101 Intersection - unmarked crosswalk 102 Intersection - other 103 Median/crossing island 104 Midblock - marked crosswalk 105 Shoulder/roadside 106 Travel lane - other location 200 Signed route (no pavement marking) 201 Shared lane markings 202 On-street bike lanes 203 On-street buffered bike lanes 204 Separated bike lanes 205 Off-street trails/sidepaths 980 Other 999 Unknown		<b>Origin/Destination</b> <input type="checkbox"/> Unknown 100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 Unknown		<b>Safety Equipment</b> <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> 000 None <input type="checkbox"/> 100 Helmet <input type="checkbox"/> 101 Protective pads used (elbows, knees, shins, etc.) <input type="checkbox"/> 102 Reflective wear (backpack, triangles, etc.) <input type="checkbox"/> 103 Lighting <input type="checkbox"/> 980 Other <input type="checkbox"/> 104 Reflectors <input type="checkbox"/> 999 Unknown			
<b>Struck by Vehicle #</b> 1											
<b>Action Prior to Crash</b> <input type="checkbox"/> Unknown 000 None 100 Adjacent to roadway (e.g., shoulder, median) 101 Crossing roadway 102 Waiting to cross roadway 103 Walking/cycling along roadway against traffic (in or adjacent to travel lane) 104 Walking/cycling along roadway with traffic (in or adjacent to travel lane) 105 Walking/cycling on sidewalk 106 Working in trafficway (incident response) 198 In roadway -other 980 Other 999 Unknown		<b>Actions or Circumstances At Time of Crash</b> <input type="checkbox"/> Unknown 000 None (no improper action) 100 Dart / dash 101 Disabled vehicle related (working on, pushing, leaving/approaching) 102 Entering/exiting parked/standing vehicle 103 Failure to obey traffic signs, signals, or officer 104 Failure to yield right-of-way 105 Improper passing 106 Improper turn/merge 107 Inattentive (talking, eating, etc.) 108 In roadway improperly (standing, lying, working, playing)		<b>Clothing Brightness</b> <input type="checkbox"/> Unknown Upper <input type="checkbox"/> Unknown Lower <input type="checkbox"/> Unknown 100 Light 101 Dark 970 Not applicable 999 Unknown							
<b>NON-MOTORIST MEDICAL INFORMATION</b>											
<b>Injury Status</b> <input type="checkbox"/> Unknown 100 (K) Fatal Injury 101 (A) Suspected Serious Injury 102 (B) Suspected Minor Injury 103 (C) Possible Injury 104 (O) No Apparent Injury		<b>Type of Medical Transportation</b> <input type="checkbox"/> Unknown 000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown		<b>EMS Response Agency</b> Not applicable		<b>EMS Response Run #</b> <input type="checkbox"/> Unknown					
				<b>Medical Unique Identifier</b> <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown		<b>Facility Receiving Patient</b> Not applicable					
<b>NON-MOTORIST CONDITION</b>											
<b>Conditions at the Time of the Crash</b> <input type="checkbox"/> Unknown 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		<b>Distraction Action</b> <input type="checkbox"/> Unknown 000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 980 Other 999 Unknown		<b>Distraction Source</b> <input type="checkbox"/> 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							
<b>Suspected Alcohol Usage</b> <input type="checkbox"/> Unknown 000 No 100 Yes 999 Unknown		<b>Test Status</b> <input type="checkbox"/> Unknown 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		<b>Alcohol Kit Number</b> <input type="checkbox"/> Unknown		<b>Alcohol Test Type</b> <input type="checkbox"/> Unknown 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		<b>Alcohol Test Results</b> <input type="checkbox"/> Unknown 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>BAC</b>	
<b>Suspected Drug Usage</b> <input type="checkbox"/> Unknown 000 No 100 Yes 999 Unknown		<b>Test Status</b> <input type="checkbox"/> Unknown 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		<b>Drug Kit Number</b> <input type="checkbox"/> Unknown		<b>Drug Test Type</b> <input type="checkbox"/> Unknown 100 Blood 101 Urine 102 Both blood and urine 103 Saliva 198 Other 970 Not applicable 999 Unknown		<b>Drug Test Results</b> Not applicable			



LOUISIANA UNIFORM CRASH REPORT  
NON-MOTORIST INFORMATION

Non-Motorist #		Rev. 2021-1		Case #		Test Case Tracking - 15		Page 9 of 12	
<b>NON-MOTORIST INFORMATION</b>									
<b>Name</b> <input type="checkbox"/> Unknown Brandon Phelps <small>First Middle Last Suffix</small>				<b>Age</b> <input type="checkbox"/> Unknown 30		<b>Sex</b> <input type="checkbox"/> Unknown 100 Female 101 Male 999 Unknown		<b>Race</b> <input type="checkbox"/> Unknown 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 2000 Lane St Baton Rouge LA 70808 <small>Street City State Postal Code</small>				<b>Phone Number</b> <input type="checkbox"/> Not Collected 225-888-7777					
<b>Incident Responder</b> 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 type="checkbox"/> Unknown 11/1/1990		<b>Ethnicity</b> <input type="checkbox"/> Unknown 100 Hispanic 101 Other than Hispanic 999 Unknown			
<b>NON-MOTORIST CIRCUMSTANCES</b>									
<b>Non-Motorist Type</b> <input type="checkbox"/> Unknown 100 Bicyclist 198 Other cyclist 200 Pedestrian 298 Other pedestrian (wheelchair, person in a building, skater, personal conveyance, etc.) 300 Occupant of a non-motor vehicle transportation device 999 Unknown		<b>Initial</b> <input type="checkbox"/> Unknown Contact Point 100 Front (12 o'clock) 101 Right (3 o'clock) 102 Rear (6 o'clock) 103 Left (9 o'clock) 999 Unknown		<b>Location</b> <input type="checkbox"/> Unknown 100 Intersection - marked crosswalk 101 Intersection - unmarked crosswalk 102 Intersection - other 103 Median/crossing island 104 Midblock - marked crosswalk 105 Shoulder/roadside 106 Travel lane - other location 200 Signed route (no pavement marking) 201 Shared lane markings 202 On-street bike lanes 203 On-street buffered bike lanes 204 Separated bike lanes 205 Off-street trails/sidepaths 980 Other 999 Unknown		<b>Origin/Destination</b> <input type="checkbox"/> Unknown 100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 Unknown			
<b>Struck by Vehicle #</b> 1		<b>Safety Equipment</b> <input checked="" type="checkbox"/> 000 None <input type="checkbox"/> 100 Helmet <input type="checkbox"/> 101 Protective pads used (elbows, knees, shins, etc.) <input type="checkbox"/> 102 Reflective wear (backpack, triangles, etc.)		<input type="checkbox"/> 103 Lighting <input type="checkbox"/> 980 Other <input type="checkbox"/> 104 Reflectors <input type="checkbox"/> 999 Unknown					
<b>Action Prior to Crash</b> <input type="checkbox"/> Unknown 000 None 100 Adjacent to roadway (e.g., shoulder, median) 101 Crossing roadway 102 Waiting to cross roadway 103 Walking/cycling along roadway against traffic (in or adjacent to travel lane) 104 Walking/cycling along roadway with traffic (in or adjacent to travel lane) 105 Walking/cycling on sidewalk 106 Working in trafficway (incident response) 198 In roadway -other 980 Other 999 Unknown		<b>Actions or Circumstances At Time of Crash</b> <input type="checkbox"/> Unknown 000 None (no improper action) 100 Dart / dash 101 Disabled vehicle related (working on, pushing, leaving/approaching) 102 Entering/exiting parked/standing vehicle 103 Failure to obey traffic signs, signals, or officer 104 Failure to yield right-of-way 105 Improper passing 106 Improper turn/merge 107 Inattentive (talking, eating, etc.) 108 In roadway improperly (standing, lying, working, playing)		<b>Clothing Brightness</b> <input type="checkbox"/> Unknown Upper <input type="checkbox"/> Unknown Lower <input type="checkbox"/> Unknown 100 Light 101 Dark 970 Not applicable 999 Unknown					
<b>NON-MOTORIST MEDICAL INFORMATION</b>									
<b>Injury Status</b> <input type="checkbox"/> Unknown 100 (K) Fatal Injury 101 (A) Suspected Serious Injury 102 (B) Suspected Minor Injury 103 (C) Possible Injury 104 (O) No Apparent Injury		<b>Type of Medical Transportation</b> <input type="checkbox"/> Unknown 000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown		<b>EMS Response Agency</b> Not applicable		<b>EMS Response Run #</b> <input type="checkbox"/> Unknown			
		<b>Medical Unique Identifier</b> <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown		<b>Facility Receiving Patient</b> Not applicable					
<b>NON-MOTORIST CONDITION</b>									
<b>Conditions at the Time of the Crash</b> <input type="checkbox"/> Unknown 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		<b>Distraction Action</b> <input type="checkbox"/> Unknown 000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 980 Other 999 Unknown		<b>Distraction Source</b> <input type="checkbox"/> 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					
<b>Suspected Alcohol Usage</b> <input type="checkbox"/> Unknown 000 No 100 Yes 999 Unknown		<b>Test Status</b> <input type="checkbox"/> Unknown 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		<b>Alcohol Kit Number</b> <input type="checkbox"/> Unknown		<b>Alcohol Test Type</b> <input type="checkbox"/> Unknown 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		<b>Alcohol Test Results</b> <input type="checkbox"/> Unknown 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> <input type="checkbox"/> Unknown 000 No 100 Yes 999 Unknown		<b>Test Status</b> <input type="checkbox"/> Unknown 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		<b>Drug Kit Number</b> <input type="checkbox"/> Unknown		<b>Drug Test Type</b> <input type="checkbox"/> Unknown 100 Blood 101 Urine 102 Both blood and urine 103 Saliva 198 Other 970 Not applicable 999 Unknown		<b>Drug Test Results</b> Not applicable	

Scene # 1	DIAGRAM Rev. 2021-1	Case #	Test Case Tracking - 15	Page	10	of	12
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LOUISIANA UNIFORM CRASH REPORT  
NARRATIVE

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## CRASH NARRATIVE

The LACRASH software system is used by law enforcement agencies throughout the state of Louisiana to electronically capture motor vehicle accident reporting information.

LACRASH was developed to enhance the paper uniform motor vehicle traffic crash report form in the state of Louisiana. By electronically reproducing the crash report form, the LACRASH software allows officers to enter accident reporting information using a laptop in their patrol car or a desktop computer in their office. The electronic submission of the data helps to collect traffic crash reporting information in a timelier manner. With the added benefits of software edits, GPS devices, and card swipes, information collected using LACRASH is more accurate and complete.

Designed by the Center for Analytics & Research in Transportation Safety (CARTS) at Louisiana State University, the LACRASH system was initially released in December 2004 with a hand full of agencies going online January 1, 2005. As of October 2019, roughly 250 Louisiana law enforcement agencies were using LACRASH (~249 using version 2.0 SP1) with new and old agencies continually being added\upgraded as needed.

CARTS also analyzes the motor vehicle accident data and produces Louisiana Crash Data and Statistical Reports using data collected from the LACRASH application.

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

NARRATIVE

Rev. 2021-1

CRASH NARRATIVE

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Vehicle 1 Model: Model Y