

LOUISIANA UNIFORM CRASH REPORT CRASH INFORMATION

Rev. 2021-1

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CRASH CONDITIONS			
Roadway Surface Condition	000	Light Condition	100
000 Dry		100 Daylight	
100 Ice/Frost		200 Dawn/dusk	
101 Mud, dirt, gravel		300 Dark - continuous street lights	
102 Oil		301 Dark - street lights at intersection only	
103 Sand		302 Dark - not lighted	
104 Slush		399 Dark - unknown lighting	
105 Snow		980 Other	
106 Water (standing,moving)		999 Unknown	
107 Wet			
980 Other			
999 Unknown			
		Weather Conditions	000
		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	
		Environmental Conditions	000
		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			
Work Zone Relation	000	Work Zone Location	970
000 No		100 Before the first work zone warning sign	
100 Yes		101 Advance warning area	
999 Unknown		102 Transition area	
		103 Activity area	
		104 Termination area	
		970 Not applicable	
		999 Unknown	
		Work Zone Type	970
		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	
		Work Zone Circumstances	970
		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	
		Worker(s) Present	970
		000 No	
		100 Yes	
		970 Not applicable	
		999 Unknown	
		Law Enforcement Present	970
		000 No	
		100 Yes	
		970 Not applicable	
		999 Unknown	

REVIEWING OFFICER				
Rank	First Name	Middle Name	Last Name	Suffix
IT	Eric		Newman	

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

NON-VEHICULAR PROPERTY DAMAGE			PROPERTY #
Property Type	Damage Severity	Owner Name <input type="checkbox"/> Unknown	Owner Phone Number <input type="checkbox"/> Not Collected
Owner Address <input type="checkbox"/> Unknown			
<i>Street</i>	<i>City</i>	<i>State</i>	<i>Postal Code</i>

NON-VEHICULAR PROPERTY DAMAGE			PROPERTY #
Property Type	Damage Severity	Owner Name <input type="checkbox"/> Unknown	Owner Phone Number <input type="checkbox"/> Not Collected
Owner Address <input type="checkbox"/> Unknown			
<i>Street</i>	<i>City</i>	<i>State</i>	<i>Postal Code</i>

NON-VEHICULAR PROPERTY DAMAGE			PROPERTY #
Property Type	Damage Severity	Owner Name <input type="checkbox"/> Unknown	Owner Phone Number <input type="checkbox"/> Not Collected
Owner Address <input type="checkbox"/> Unknown			
<i>Street</i>	<i>City</i>	<i>State</i>	<i>Postal Code</i>

PROPERTY DAMAGE CODES				
Property Type	300 Cable barrier	303 Guardrail face	400 Traffic sign support	598 Other state property
100 Private property	301 Concrete traffic barrier	304 Impact attenuator/crash cushion	401 Traffic signal support	980 Other
200 Bridge overhead structure	302 Guardrail end terminal	398 Other traffic barrier	402 Utility pole/light support	
201 Bridge pier or support				
202 Bridge rail				
				Damage Severity
				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

Form containing vehicle details: Hit and Run (000), Vehicle Type (100), Vehicle Body Type (100), VIN (Unknown), Model Year (2021), Make (Tesla), Model (Other), Color (White), License Plate (LA 321CBA), Owner Name (Jacob York), Insurance details, and various vehicle categories like Passenger Vehicles, Construction/Farm Equipment, Cycle/Off Road/Recreation, Trucks, and Large Passenger Vehicle.

DAMAGE

Damage assessment form including Damage Extent (000), Initial Point of Contact (diagram showing impact on lane 6), Damaged Areas (diagram showing no damage), Tow Status (000), and Tow Authority (970).

MOTOR VEHICLE CIRCUMSTANCES

Motor Vehicle Circumstances form including Vehicle Usage (000), Vehicle Maneuver (100), Vehicle Maneuver Reason (000), and Emergency Vehicle Usage (000).

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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 [204] 2 [] 3 [] 4 [] Most Harmful Event [204]

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

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COMMERCIAL MOTOR VEHICLE INFORMATION

Vehicle Configuration	000	Hazardous Materials Placard	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
	302 Truck pulling trailer(s)		100 Carried hazardous material that required placarding
	303 Truck tractor (bobtail)		200 Carried hazardous materials without placard
	304 Truck tractor/semi-trailer		999 Unknown
	305 Truck tractor/double		Hazardous Material ID
	306 Truck tractor/triple		N/A
	307 Truck more than 10,000 lbs., cannot classify		Hazardous Material Class
200 Bus/large van (seats 9-15 occupants, including driver)			970
201 Bus (seats more than 15 occupants, including driver)			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
			970
			000 No, hazardous materials not released
			100 Yes, hazardous materials released
			970 Not applicable

Cargo Body Type	970	Special Sizing
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		<input type="checkbox"/> 999 Unknown
970 Not applicable	980 Other	
	999 Unknown	

Load Permitted	970	Number of Axles	<input type="checkbox"/> Unknown	Motor Carrier Type	000	Motor Carrier Identification	970
000 Non-permitted load				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		State	
				101 Intrastate carrier			
						Motor Carrier Name	<input type="checkbox"/> Unknown
						Motor Carrier ID Number	

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

GVWR/GCWR	970	Commodity Hauled
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 #

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

TRAILER INFORMATION

TRAILER #

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

TRAILER INFORMATION

TRAILER #

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

LOUISIANA UNIFORM CRASH REPORT DRIVER INFORMATION

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DRIVER INFORMATION

Name <input type="checkbox"/> Unknown		Age <input type="checkbox"/> Unknown	Sex <input type="checkbox"/> 101	Race <input type="checkbox"/> 103
Jacob York		19	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
Address <input type="checkbox"/> Unknown		Phone Number <input type="checkbox"/> Not Collected		
3000 Drive Ln Baton Rouge LA 70808		225-777-6666		
Incident Responder		Date of Birth <input type="checkbox"/> Unknown	Ethnicity <input type="checkbox"/> 999	
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.)		9/10/2001	100 Hispanic 101 Other than Hispanic 999 Unknown	

DRIVER LICENSE INFORMATION

License Status <input type="checkbox"/> 100	License Class <input type="checkbox"/> 400	Driver License Type <input type="checkbox"/> 100	Commercial Driver License Status <input type="checkbox"/> 970
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
License Number 98776543210	License State LA		
Endorsements on License	Endorsement Compliance <input type="checkbox"/> 000	Restrictions 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	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	
		Alcohol Interlock Presence <input type="checkbox"/> 970	
		000 No 970 Not applicable 100 Yes 999 Unknown	

DRIVER SEATING AND SAFETY INFORMATION

Seating Position <input type="checkbox"/> 100	Restraint Systems Used <input type="checkbox"/> 105																																																																											
<table border="1"> <tr> <th colspan="5">Standard Vehicle Seats</th> <th rowspan="2">Other Seating Positions</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> <td rowspan="6">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</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> </table>	Standard Vehicle Seats					Other Seating Positions	Row	Left	Middle	Right	Unk	1	100	101	102	199	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	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	<table border="1"> <tr> <td>001 None used - motor vehicle occupant</td> <td>002 No helmet</td> <td>970 Not applicable</td> </tr> <tr> <td>100 Booster seat</td> <td>200 DOT-compliant motorcycle helmet</td> <td>980 Other</td> </tr> <tr> <td>101 Child restraint system - forward facing</td> <td>201 Not DOT-compliant motorcycle helmet</td> <td>999 Unknown</td> </tr> <tr> <td>102 Child restraint system - rear facing</td> <td>299 Unknown if DOT-compliant motorcycle helmet</td> <td></td> </tr> <tr> <td>103 Child restraint system - type unknown</td> <td></td> <td></td> </tr> <tr> <td>104 Lap belt only used</td> <td></td> <td></td> </tr> <tr> <td>105 Shoulder and lap belt used</td> <td></td> <td></td> </tr> <tr> <td>106 Shoulder belt only used</td> <td></td> <td></td> </tr> <tr> <td>107 Stretcher</td> <td></td> <td></td> </tr> <tr> <td>108 Wheelchair</td> <td></td> <td></td> </tr> <tr> <td>199 Restraint used - type unknown</td> <td></td> <td></td> </tr> </table>	001 None used - motor vehicle occupant	002 No helmet	970 Not applicable	100 Booster seat	200 DOT-compliant motorcycle helmet	980 Other	101 Child restraint system - forward facing	201 Not DOT-compliant motorcycle helmet	999 Unknown	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		
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Air Bags Deployed		Ejection <input type="checkbox"/> 000	Extrication <input type="checkbox"/> 000																																																																									
<input checked="" type="checkbox"/> 000 Not deployed <input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 001 Not deployed - switch off <input type="checkbox"/> 999 Deployment unknown <input type="checkbox"/> 100 Front <input type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain <input type="checkbox"/> 103 Other (knee, air belt, etc.)		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 #
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MEDICAL INFORMATION

Injury Status	104	Type of Medical Transportation	000	EMS Response Agency	
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	Not applicable
Medical Unique Identifier				<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown	Facility Receiving Patient
					Not applicable

DRIVER CONDITION AND CIRCUMSTANCES

Conditions at Time of Crash	000	Distraction Action	000	Distraction Source	970	Speeding Relation	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 Vision Obscurement 000 None 100 Rain, snow, etc. on windshield 101 Windshield otherwise obscured 102 Vision obscured by load 103 Trees, bushes, etc. 104 Building		200 Passenger or other non-motorist 201 External to vehicle/non-motorist area 298 Other 970 Not applicable 999 Unknown 105 Embankment 106 Sign boards 107 Hillcrest 108 Parked vehicles 109 Moving vehicles 110 Blinded by headlights	000 No 100 Exceeded speed limit 101 Racing 102 Too fast for conditions 999 Unknown 111 Blinded by sun glare 112 Distracted by neon lights in field of view 980 Other 999 Unknown			
Suspected Alcohol Usage	000	Test Status	000	Alcohol Kit Number	<input type="checkbox"/> Unknown	Alcohol Test Type	970	Alcohol Test Results	970	BAC
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		
Suspected Drug Usage	000	Test Status	000	Drug Kit Number	<input type="checkbox"/> Unknown	Drug Test Type	970	Drug Test Results		
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

Driver Actions at Time of Crash	108	Avoidance Maneuver	000	Pre-Collision Stability	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

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LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

Non-Motorist # 1
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NON-MOTORIST INFORMATION

Name: Brittany Phelps, Age: 30, Sex: 100 Female, Race: 100 American Indian or Alaska Native
Address: 2000 Lane St, Baton Rouge, LA 70808, Phone Number: 225-999-8888
Incident Responder: 100 No, 102 Police, 100 EMS, 103 Tow operator, 101 Fire, 104 Transportation
Date of Birth: 10/31/1990, Ethnicity: 999 Unknown

NON-MOTORIST CIRCUMSTANCES

Non-Motorist Type: 200 Pedestrian, Initial Contact Point: 999 Unknown, Location: 100 Intersection - marked crosswalk
Struck by Vehicle #: 1, Safety Equipment: 100 Helmet, 101 Protective pads used, 102 Reflective wear

Action Prior to Crash: 101 Walking/cycling along roadway against traffic
Actions or Circumstances At Time of Crash: 100 None (no improper action)
Clothing Brightness: 100 Light, 101 Dark, 970 Not applicable, 999 Unknown

NON-MOTORIST MEDICAL INFORMATION

Injury Status: 100 (K) Fatal Injury, Type of Medical Transportation: 000 Not transported, EMS Response Agency: Not applicable
Medical Unique Identifier: 100 None, Facility Receiving Patient: Not applicable

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 No, Alcohol Test Type: 100 Blood, Alcohol Test Results: 000 Results pending

Suspected Drug Usage: 000 No, Drug Test Type: 100 Blood, Drug Test Results: Not applicable

LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

Non-Motorist # 2
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NON-MOTORIST INFORMATION

Name Brandon Phelps, Age 30, Sex 101 Female, Race 103 American Indian or Alaska Native, Address 2000 Lane St Baton Rouge LA 70808, Phone Number 225-888-7777, Incident Responder 000, Date of Birth 11/1/1990, Ethnicity 999 Unknown

NON-MOTORIST CIRCUMSTANCES

Non-Motorist Type 200, Initial Contact Point 999, Location 100, Struck by Vehicle # 1, Safety Equipment 000 None, 100 Helmet, 101 Protective pads used, 102 Reflective wear

Action Prior to Crash 101, Actions or Circumstances At Time of Crash 000, Clothing Brightness 101, 100 Light, 101 Dark, 970 Not applicable, 999 Unknown

NON-MOTORIST MEDICAL INFORMATION

Injury Status 100, Type of Medical Transportation 000, EMS Response Agency Not applicable, EMS Response Run # Unknown, Medical Unique Identifier Not applicable, Facility Receiving Patient Not applicable

NON-MOTORIST CONDITION

Conditions at the Time of the Crash 000, Distraction Action 000, Distraction Source 970, 100 Apparently normal, 970 Not applicable, 100 Asleep/blacked out, 980 Other, 101 Talking / listening, 101 Fatigued, 999 Unknown, 101 Manually operating a device, 102 Emotional, 980 Other, 999 Unknown, 101 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

Suspected Alcohol Usage 000, Test Status 000, Alcohol Kit Number Unknown, Alcohol Test Type 970, Alcohol Test Results 970, BAC, 100 Blood, 300 Urine, 000 Results pending, 101 Blood clot, 301 Vitreous, 001 Negative results with no actual value, 102 Blood plasma/serum, 302 Liver, 100 Results received, 200 Breath, 970 Not applicable, 101 Positive results with no actual value, 201 Preliminary breath test (PBT), 980 Other, 970 Not applicable, 999 Unknown

Suspected Drug Usage 000, Test Status 000, Drug Kit Number Unknown, Drug Test Type 970, Drug Test Results, 100 Blood, 970 Not applicable, 999 Unknown, 101 Urine, 999 Unknown, 102 Both blood and urine, 103 Saliva, 198 Other

DIAGRAM

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Scene #

1

Case #

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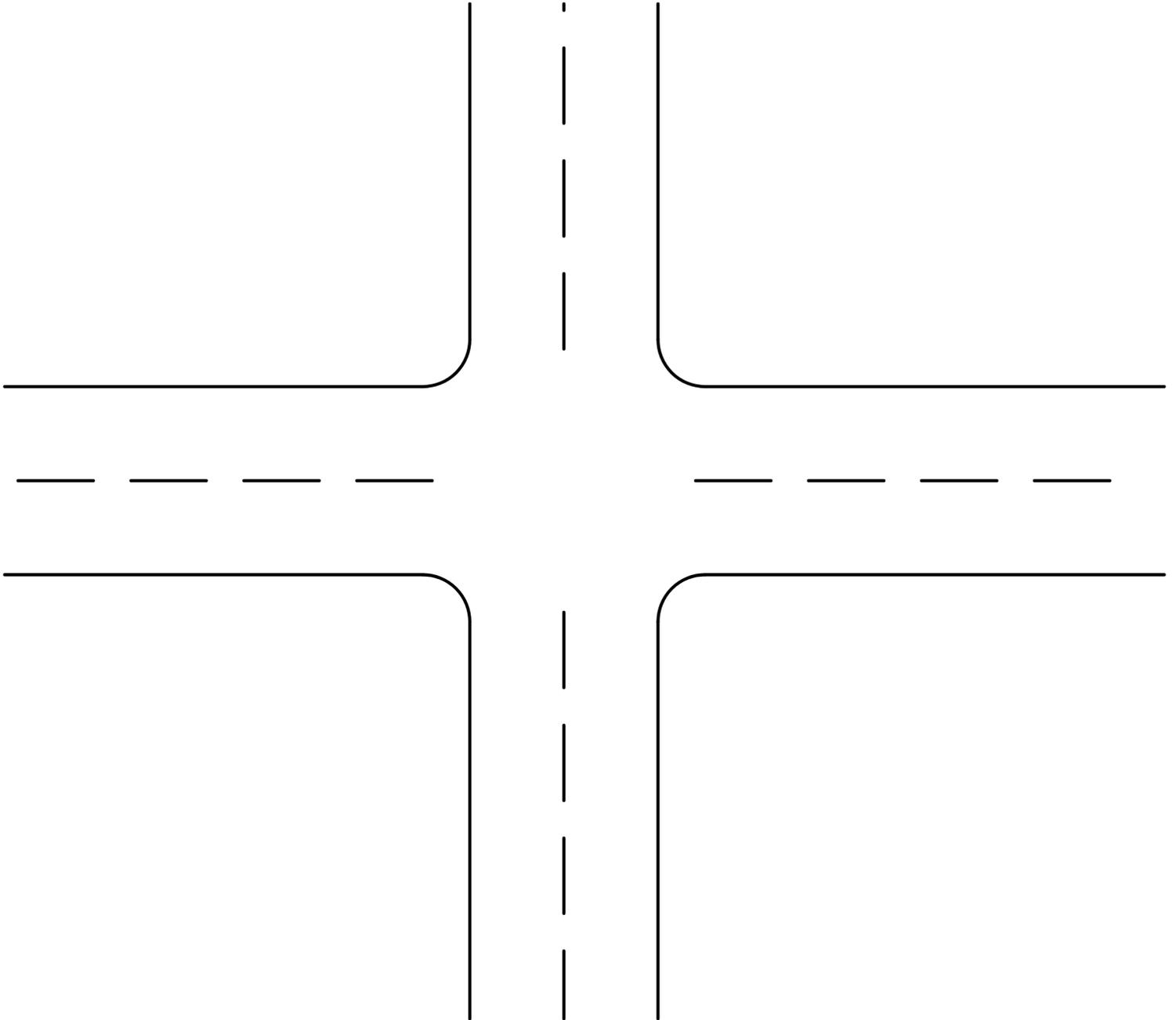
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CRASH DIAGRAM



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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LOUISIANA UNIFORM CRASH REPORT NARRATIVE

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CRASH NARRATIVE

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Vehicle 1 Model: Model Y