

LOUISIANA UNIFORM CRASH REPORT
CRASH INFORMATION

<input type="checkbox"/> Secondary Crash		<input checked="" type="checkbox"/> Photos Taken		<input type="checkbox"/> Videos Taken		Rev. 2023-1		Case #		Test Case Tracking - 10		Page 1 of 11	
Number of Motorists 1		Number of Non-Motorists 2		Non-Fatally Injured Persons 1		Fatalities 1		Total Injuries and Fatalities 2		Vehicles Involved 1		Troop A	
Investigating Agency CARTS LSU				Division		Parish DeSoto		City Rural DeSoto		Latitude 31.868559° N		Longitude 93.695043° W	
CRASH TIME INFORMATION													
Crash Date/Time 08/21/2021 2000		Police Notified Date/Time 08/21/2021 2000		Police Arrived Date/Time 08/21/2021 2001		Roadway Cleared Date/Time 08/21/2021 2005		On Scene Investigation Completed Date/Time 08/21/2021 2010					
ROAD INFORMATION													
Highway <input type="checkbox"/> Not applicable US Highway 171				Road US 171									
Distance/Direction From Intersection <input type="checkbox"/> Not applicable 50.0 ft North				Intersecting Road <input type="checkbox"/> Crash was at an intersection BAMES RD									
LOCATION INFORMATION													
Road Classification 101		Road Subtype 100		Property Ownership 100		Trafficway Characteristics 100		Number of Intersection Approaches 2		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 # 1234		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				200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle (including bicycles) 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		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 200 Front to front - head on 300 Front to rear - rear end 400 Backing - rear to front 401 Backing - rear to rear 402 Backing - rear to side 502 Sideswipe - opposite direction 505 Sideswipe - same direction 980 Other 999 Unknown					
Collision with 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 100 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				Intersection Geometry 102 100 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 103 000 No controls 100 Signalized 101 Stop -all way 102 Stop -partial 103 Yield 970 Not applicable													

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CRASH CONDITIONS

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

WORK ZONE CRASH INFORMATION

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

REVIEWING OFFICER

Rank	First Name	Middle Name	Last Name	Suffix
IT	Eric		Newman	

WITNESS #

WITNESS #

Name	Name
First Middle Last Suffix	First Middle Last Suffix
Address	Address
City State Postal Code	City State Postal Code
Phone Number Age Sex	Phone Number Age Sex

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY #

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

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY #

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

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY #

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

PROPERTY DAMAGE CODES

Property Type	Damage Severity
100 Private property	100 Light (less than \$500)
200 Bridge overhead structure	101 Moderate (between \$500 and \$10,000)
201 Bridge pier or support	102 Severe (over \$10,000)
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	

LOUISIANA UNIFORM CRASH REPORT
VEHICLE INFORMATION

Motor Vehicle #		1		Case #		Test Case Tracking - 10		Page		3 of 11	
DESCRIPTION AND INFORMATION											
<input type="checkbox"/> Check if this vehicle had no driver		Hit and Run 101 000 No, did not leave scene 100 Yes, driver and vehicle left scene 101 Yes, only driver left scene		Vehicle Type 100 100 Motor vehicle in transport 101 Parked motor vehicle 102 Working vehicle / equipment		Vehicle Body Type 401 <u>Passenger Vehicles</u> 100 Passenger car 103 Pickup 101 Passenger van / Minivan (less than 9 seats) 104 Cargo van 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 505 School bus 501 Passenger van (9-15 seats) 506 Transit bus 502 Passenger van (16+ seats) 507 Motorcoach 503 Large limo 598 Other bus / large passenger vehicle 504 Mini-bus <u>Other</u> 980 Other 999 Unknown					
VIN <input checked="" type="checkbox"/> Unknown											
Model Year <input type="checkbox"/> Unknown 2018		Make Chevrolet		Model Unknown		Color Blue					
License Plate <input type="checkbox"/> Missing <input type="checkbox"/> Non-expiring State AL <input type="checkbox"/> Unknown Number FAS345 <input type="checkbox"/> Unknown Year 2022 <input type="checkbox"/> Unknown											
Owner Name <input type="checkbox"/> Same as driver <input checked="" type="checkbox"/> Unknown											
Owner Address <input type="checkbox"/> Same as driver <input checked="" type="checkbox"/> Unknown Street City State Postal Code											
Insurance <input type="checkbox"/> Uninsured at time of crash Company <input checked="" type="checkbox"/> Unknown Phone # <input checked="" type="checkbox"/> Unknown NAIC # <input checked="" type="checkbox"/> Unknown Policy # <input checked="" type="checkbox"/> Unknown Expiration Date <input checked="" type="checkbox"/> Unknown											
DAMAGE											
Damage Extent 102 000 None 100 Minor damage 101 Functional damage 102 Disabling damage 990 Vehicle not at scene		Initial Point of Contact 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		Damaged Areas 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 002 No damage <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage		Tow Status 101 000 Not towed 100 Towed, but not due to disabling damage 101 Towed (or will be towed) due to disabling damage Towed By <input checked="" type="checkbox"/> Unknown Tow Authority 101 100 Owner 101 Law enforcement 970 Not applicable 980 Other					
MOTOR VEHICLE CIRCUMSTANCES											
Vehicle Usage 000 000 No special function 980 Other 100 Bus - school (public or private) 999 Unknown 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)		Vehicle Maneuver 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 Vehicle Maneuver Reason 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 Emergency Vehicle Usage 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		Vehicle Maneuver 100 109 Crossed median into opposing lane 110 Crossed center line into opposing lane 111 Ran off road (not while making turn at intersection) 200 Entering traffic lane from shoulder 201 Entering traffic lane from median 202 Entering traffic lane from parking lane 203 Entering traffic lane from private lane or driveway 204 Entering freeway from on-ramp 300 Leaving traffic lane 400 Slowing to make left turn 401 Slowing to make right turn 402 Slowing to stop 498 Slowing for other reason 500 Parked 501 Stopped, preparing to turn left 502 Stopped, preparing to turn right 503 Stopped in traffic 980 Other 999 Unknown Direction of Travel Before Crash 300 000 Not on roadway 001 In roadway but not in motion 100 Northbound 300 Eastbound 500 Southbound 700 Westbound 999 Unknown							

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Motor Vehicle #		Rev. 2023-1		Case #		Test Case Tracking - 10		Page 4 of 11	
MOTOR VEHICLE CIRCUMSTANCES									
Skidmark Data (Feet)			Distance Traveled After Impact (Feet) <input checked="" type="checkbox"/> Unknown			Contributing Defects			
Front Left <input type="text"/> Front Right <input type="text"/> <input checked="" type="checkbox"/> Not applicable or measured <input type="checkbox"/> Unknown			Vehicle Lighting <input type="text"/> 100			000 None 100 Brakes 101 Exhaust system 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			
Rear Left <input type="text"/> Rear Right <input type="text"/>			000 Headlights off 100 Headlights on 101 Daytime running lights 999 Unknown						
Traffic Control Device Types and Statuses									
Traffic Control Device Types			Devices Present		Devices Inoperative or Missing				
000 None 100 Person (including flagger, law enforcement, crossing guard, etc) 200 Bicycle crossing sign 201 Curve Ahead warning sign 202 Intersection Ahead warning sign 203 Pedestrian crossing sign 204 Railroad crossing sign 205 Reduce Speed Ahead warning sign 206 School zone sign 207 Stop sign 208 Yield sign 298 Other warning sign 980 Other 999 Unknown			300 Flashing railroad crossing (may include gates) 301 Flashing school zone signal 302 Flashing traffic control signal 303 Lane use control signal 304 Ramp meter signal 305 Traffic control signal 398 Other signal 400 Bicycle crossing 401 Pedestrian crossing 402 Railroad crossing 403 School zone 404 Yellow no passing line 405 White or yellow dash line 406 Solid white lane line 498 Other pavement marking (excluding edgelines, centerlines, or lane lines) 999 Unknown		1 <input type="text"/> 207 2 <input type="text"/> 3 <input type="text"/> 4 <input type="text"/> 1 <input type="text"/> 000 2 <input type="text"/> 3 <input type="text"/> 4 <input type="text"/>		Automation System Level Present <input type="text"/> 000 000 No automation 100 Driver assistance 101 Partial automation 102 Conditional automation 103 High automation 104 Full automation 199 Automation level unknown 999 Unknown Automation System Level Engaged <input type="text"/> 000 000 No automation 100 Driver assistance 101 Partial automation 102 Conditional automation 103 High automation 104 Full automation 199 Automation level unknown 999 Unknown		
Trafficway Division			Barrier Type						
000 Not divided 001 Not divided, with a continuous left turn lane 100 Divided, flush median (greater than 4 ft wide) 101 Divided, raised median (curbed) 102 Divided, depressed median 999 Unknown			100 000 None 100 Cable barrier 101 Concrete barrier (e.g. Jersey barrier) 102 Earth embankment 103 Guardrail 980 Other		000 000 Not present 100 Separated barrier, flush (greater than 4 ft wide), raised or depressed median 101 Not separated, painted pavement markings, post-mounted delineators				
Roadway Grade <input type="text"/> 100		Number of Through Lanes		Number of Auxiliary Lanes		Roadway Alignment <input type="text"/> 100		Permitted Travel <input type="text"/> 200	
100 Level 101 Uphill 102 Hillcrest 103 Downhill 104 Sag (bottom)		2		0		100 Straight 101 Curve left 102 Curve right		100 One-way 200 Two-way Speed Limit <input type="text"/> 35 <input type="checkbox"/> Unknown <input type="checkbox"/> N/A	
MOTOR VEHICLE EVENTS									
Sequence of Events 1 <input type="text"/> 204 2 <input type="text"/> 204 3 <input type="text"/> 4 <input type="text"/>						Most Harmful Event <input type="text"/> 204			
Non-Harmful Events					Collision with Fixed Object				
000 Cross centerline 001 Cross median 002 End departure (T-intersection, dead-end, etc.) 003 Downhill runaway 004 Equipment failure (blown tire, brake failure, etc.)					005 Ran off roadway left 006 Ran off roadway right 007 Reentering roadway 008 Separation of units 098 Other non-harmful event				
Non-Collision Events					Collision with Person / Vehicle / Non-Fixed Object				
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					200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle (including bicycles) 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				
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				

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VEHICLE INFORMATION

Motor Vehicle # 1		Rev. 2023-1		Case #	Test Case Tracking - 10	Page	5	of	11		
COMMERCIAL MOTOR VEHICLE INFORMATION											
Vehicle Configuration				303	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					
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		Hazardous Material ID				N/A	
				305 Truck tractor/double		Hazardous Material Class				970	
				306 Truck tractor/triple		1 Explosives				970 Not applicable	
				307 Truck more than 10,000 lbs., cannot classify		2 Gas				999 Unknown	
Cargo Body Type				000	Special Sizing						
000 No cargo body					<input checked="" type="checkbox"/> 000 No special sizing						
100 Bus				105 Flatbed	109 Log	<input type="checkbox"/> 100 Over-height					
101 Auto transporter				106 Garbage / refuse	110 Pole trailer	<input type="checkbox"/> 101 Over-length					
102 Cargo tank				107 Grain / chips / gravel	111 Van / enclosed box	<input type="checkbox"/> 102 Over-weight					
103 Concrete mixer				108 Intermodal container chassis	112 Vehicle towing another vehicle	<input type="checkbox"/> 103 Over-width					
104 Dump						<input type="checkbox"/> 999 Unknown					
970 Not applicable				980 Other	999 Unknown	Hazardous Materials Released from Vehicle Cargo Compartment				970	
						000 No, hazardous materials not released					
						100 Yes, hazardous materials released					
						970 Not applicable					
Load Permitted				000	Motor Carrier Type					000	
000 Non-permitted load					000 Personal vehicle						
100 Permitted load					001 Not in commerce: government						
					002 Not in commerce: personal rental truck or bus						
970 Not applicable (not a qualifying vehicle)					098 Not in commerce: other						
999 Unknown					100 Interstate carrier						
					101 Intrastate carrier						
					State						
Motor Carrier Address				<input type="checkbox"/> Unknown	Motor Carrier Phone Number					<input type="checkbox"/> Unknown	
Street					City						
					State						
					Postal Code						
GVWR/GCWR				101	Commodity Hauled						
100 Light (less than 10,000 lbs.GVWR/GCWR)					Unknown						
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
State					<input type="checkbox"/> Unknown	Number					<input type="checkbox"/> Unknown
Year					<input type="checkbox"/> Unknown	Non-expiring					<input type="checkbox"/> Non-expiring
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
State					<input type="checkbox"/> Unknown	Number					<input type="checkbox"/> Unknown
Year					<input type="checkbox"/> Unknown	Non-expiring					<input type="checkbox"/> Non-expiring
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
State					<input type="checkbox"/> Unknown	Number					<input type="checkbox"/> Unknown
Year					<input type="checkbox"/> Unknown	Non-expiring					<input type="checkbox"/> Non-expiring

Motor Vehicle # 1		DRIVER INFORMATION		Case #	Test Case Tracking - 10	Page	6	of	11																																				
DRIVER INFORMATION																																													
Name <input checked="" type="checkbox"/> Unknown				Age <input checked="" type="checkbox"/> Unknown	Sex	101	Race			103																																			
<div>FirstMiddleLastSuffix</div>				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 checked="" type="checkbox"/> Unknown				Phone Number <input checked="" type="checkbox"/> Not Collected																																									
<div>StreetCityStatePostal Code</div>																																													
Incident Responder				999	Date of Birth <input checked="" type="checkbox"/> Unknown		Ethnicity			101																																			
000 No102 Police980 Other 100 EMS103 Tow operator999 Unknown 101 Fire104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)						100 Hispanic 101 Other than Hispanic 999 Unknown																																							
DRIVER LICENSE INFORMATION																																													
License Status		999	License Class		970	Driver License Type		970	Commercial Driver License Status		970																																		
100 Valid license004 Suspended 000 Not licensed999 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 101 Learner's permit		000 Canceled or denied 001 Disqualified 002 Expired 003 Revoked 004 Suspended 098 Other (not valid) 970 Not applicable (no CDL) 999 Unknown																																					
License Number		License State																																											
Endorsements on License		Endorsement Compliance		999	Restrictions on License																																								
<input 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 checked="" 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		999 - Unknown																																									
				Alcohol Interlock Presence					970																																				
				000 No970 Not applicable 100 Yes999 Unknown																																									
DRIVER SEATING AND SAFETY INFORMATION																																													
Seating Position		100	Restraint Systems Used							999																																			
Standard Vehicle Seats		Other Seating Positions		001 None used – motor vehicle occupant002 No helmet970 Not applicable 980 Other 999 Unknown																																									
<div>Front</div> <table><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>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>		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		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						
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? 000 No 100 Yes 999 Unknown																																									
Air Bags Deployed		Ejection		970	Extrication					000																																			
<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																																				

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MEDICAL INFORMATION

Injury Status	104	Type of Medical Transportation	999	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		Unknown
			EMS Response Run #	<input checked="" type="checkbox"/> Unknown
Medical Unique Identifier			Facility Receiving Patient	
<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Unknown			Unknown	

DRIVER CONDITION AND CIRCUMSTANCES

Conditions at Time of Crash	999	Distraction Action	999	Distraction Source	999	Speeding Relation	999		
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 106 Inattentive/distracted 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.) 200 Inattentive 980 Other distraction 999 Unknown distraction		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			
				Vision Obscurement			999		
				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					
Suspected Alcohol Usage	999	Test Status	000	Alcohol Kit Number	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	999	Test Status	000	Drug Kit Number	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	113	Avoidance Maneuver	999	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

LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

Non-Motorist #		Rev. 2023-1		Case #	Test Case Tracking - 10	Page	8	of	11
NON-MOTORIST INFORMATION									
Name <input type="checkbox"/> Unknown				Age <input type="checkbox"/> Unknown	Sex	101	Race		
Harry				40	100 Female 101 Male 999 Unknown	102 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 checked="" type="checkbox"/> Not Collected					
34 Richard Lane Baton Rouge LA 70155									
Street City State Postal Code									
Incident Responder				000	Date of Birth	<input type="checkbox"/> Unknown	Ethnicity		
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.)				8/25/1980			999 100 Hispanic 101 Other than Hispanic 999 Unknown		
NON-MOTORIST CIRCUMSTANCES									
Non-Motorist Type		200	Initial	103	Location		101		
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		Contact Point 100 Front (12 o'clock) 101 Right (3 o'clock) 102 Rear (6 o'clock) 103 Left (9 o'clock) 999 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		300 Driveway access 301 Non-trafficway area 302 Shared-use path or trail 303 Sidewalk	
Struck by Vehicle #		1	Origin/Destination		999	Safety Equipment			
			100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 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		
Action Prior to Crash		102	Actions or Circumstances At Time of Crash			000	Clothing Brightness		Upper 101
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		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)			009 Not visible (dark clothing, no lighting, etc.) 110 Wrong-way riding or walking 980 Other 999 Unknown		100 Light 101 Dark 970 Not applicable 999 Unknown		Lower 100
NON-MOTORIST MEDICAL INFORMATION									
Injury Status		100	Type of Medical Transportation		101	EMS Response Agency		EMS Response Run # <input checked="" 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		000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown		Allen Parish Ambulance Service Dist.		Medical Unique Identifier <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown		Facility Receiving Patient West Feliciana Parish Hospital	
NON-MOTORIST CONDITION									
Conditions at the Time of the Crash		000	Distraction Action		000	Distraction Source		970	
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 106 Inattentive/distracted		970 Not applicable 980 Other 999 Unknown		000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 200 Inattentive 980 Other distraction 999 Unknown distraction		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			
Suspected Alcohol Usage		000	Test Status		000	Alcohol Kit Number		Alcohol Test Type	
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	
Suspected Drug Usage		000	Test Status		000	Drug Kit Number		Drug Test Type	
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	
Alcohol Test Results		970	BAC						
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									

LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

Non-Motorist # 2		Rev. 2023-1		Case #	Test Case Tracking - 10	Page 9 of 11
NON-MOTORIST INFORMATION						
Name <input type="checkbox"/> Unknown Paula Dickinson <small>First Middle Last Suffix</small>		Age <input type="checkbox"/> Unknown 26	Sex <input type="checkbox"/> Unknown 100 Female 101 Male 999 Unknown	Race <input type="checkbox"/> 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 53 Major St Baton Rouge LA 70245 <small>Street City State Postal Code</small>		Phone Number <input checked="" type="checkbox"/> Not Collected		Date of Birth <input checked="" type="checkbox"/> Unknown		
Incident Responder 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.)		000		Ethnicity <input type="checkbox"/> Unknown 100 Hispanic 101 Other than Hispanic 999 Unknown		
NON-MOTORIST CIRCUMSTANCES						
Non-Motorist Type <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		Initial <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		Location <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 300 Driveway access 301 Non-trafficway area 302 Shared-use path or trail 303 Sidewalk 980 Other 999 Unknown		
Struck by Vehicle # 1		Origin/Destination <input type="checkbox"/> Unknown 100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 Unknown		Safety Equipment <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		
Action Prior to Crash <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		Actions or Circumstances At Time of Crash <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)		Clothing Brightness <input type="checkbox"/> Unknown Upper <input type="checkbox"/> Unknown Lower <input type="checkbox"/> Unknown 100 Light 101 Dark 970 Not applicable 999 Unknown		
NON-MOTORIST MEDICAL INFORMATION						
Injury Status <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		Type of Medical Transportation <input type="checkbox"/> Unknown 000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown		EMS Response Agency Acadian Air Med Services Medical Unique Identifier <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown Facility Receiving Patient VA Medical Center Shreveport		
NON-MOTORIST CONDITION						
Conditions at the Time of the Crash <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 106 Inattentive/distracted		Distraction Action <input type="checkbox"/> Unknown 000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 200 Inattentive 980 Other distraction 999 Unknown distraction		Distraction Source <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		
Suspected Alcohol Usage <input type="checkbox"/> Unknown 000 No 100 Yes 999 Unknown		Test Status <input type="checkbox"/> Unknown 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Alcohol <input type="checkbox"/> Unknown Kit Number Alcohol Test Type <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		
Suspected Drug Usage <input type="checkbox"/> Unknown 000 No 100 Yes 999 Unknown		Test Status <input type="checkbox"/> Unknown 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Drug <input type="checkbox"/> Unknown Kit Number Drug Test Type <input type="checkbox"/> Unknown 100 Blood 101 Urine 102 Both blood and urine 103 Saliva 198 Other		
CRASH REPORT - NON-MOTORIST INFORMATION						

Scene #1

DIAGRAM

Rev. 2023-1

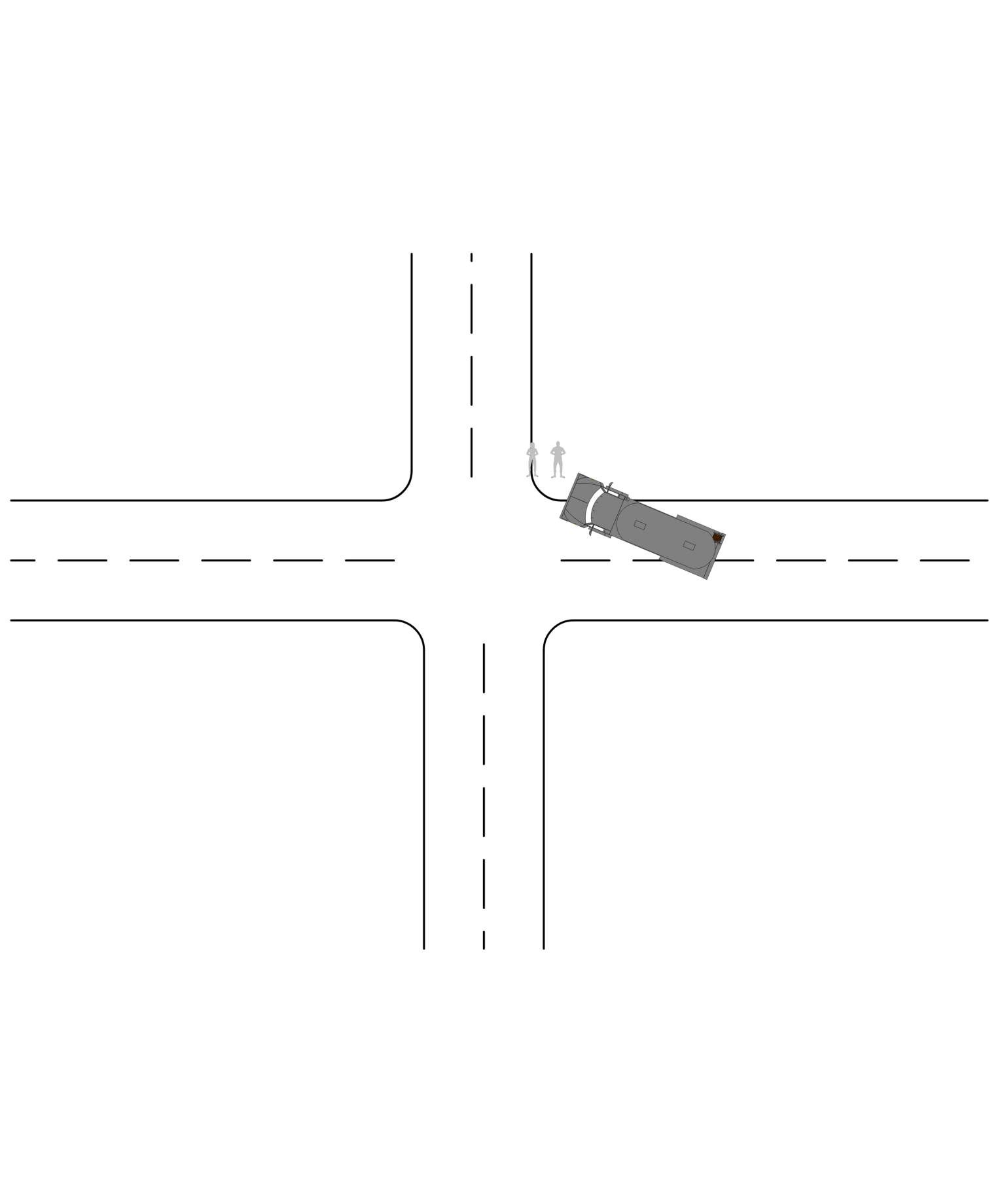
Case #

Test Case Tracking - 10

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CRASH DIAGRAM



NARRATIVE

Rev. 2023-1

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.

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

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This report was reassigned to Eric Newman.