

LOUISIANA UNIFORM CRASH REPORT

CRASH INFORMATION

<input type="checkbox"/> Secondary Crash		<input type="checkbox"/> Photos Taken		<input type="checkbox"/> Videos Taken		Rev. 2023-1	Case #	C-345678-23	Page	1	of	11	
Number of Motorists	1	Number of Non-Motorists	0	Non-Fatally Injured Persons	4	Fatalities	0	Total Injuries and Fatalities	4	Vehicles Involved	1	Troop	A
Investigating Agency				Division	Parish	City		Latitude	Longitude				
LSP (Troop A)					East Baton Rouge	Baton Rouge		30.493452° N	91.128423° W				

CRASH TIME INFORMATION

Crash Date/Time	Police Notified Date/Time	Police Arrived Date/Time	Roadway Cleared Date/Time	On Scene Investigation Completed Date/Time
08/12/2021 0202	08/12/2021 0203	08/12/2021 0204	08/12/2021 0205	08/12/2021 1006

ROAD INFORMATION

Highway <input checked="" type="checkbox"/> Not applicable	Road
	EVANGELINE ST
Distance/Direction From Intersection <input type="checkbox"/> Not applicable	Intersecting Road <input type="checkbox"/> Crash was at an intersection
40.0 ft West	E BROOKSTOWN DR

LOCATION INFORMATION

Road Classification	104	Road Subtype	100	Property Ownership	100	Trafficway Characteristics	100	Number of Intersection Approaches	1	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	First Name	Middle Name	Last Name	Suffix
SGT	Christian		Rodriguez	
Badge #	Printed Name	Signature		
AB123	Christian	<i>Christian</i>		

CRASH CIRCUMSTANCES AND CONDITIONS

First Harmful Event	205	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 100 Angle - left overtake 101 Angle - left opposite direction 102 Angle - left into flow 103 Angle - right into flow 104 Angle - right overtake 105 Angle - perpendicular/other angle 500 Angle - left across flow 501 Angle - right across flow	
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 (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		Relation to Junction 000 000 Not an interchange area 100 Acceleration or deceleration lane 101 Crossover related 102 Driveway access or related 103 Entrance/exit ramp or related 104 Intersection or related 106 Railway grade crossing 107 Shared-use path or trail 108 Through roadway 980 Other location within an interchange area (median, shoulder, and roadside) 999 Unknown		Contributing Factor Primary 101 Secondary 970 100 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 970 100 Angled / skewed 101 Roundabout / traffic circle 102 Perpendicular 970 Not applicable		School Bus Relation 000 000 No 100 Yes, school bus directly involved 101 Yes, school bus indirectly involved	
		Intersection Traffic Control 970 000 No controls 100 Signalized 101 Stop -all way 102 Stop -partial 103 Yield 970 Not applicable			

LOUISIANA UNIFORM CRASH REPORT CRASH INFORMATION

Rev. 2023-1

Case # C-345678-23 Page 2 of 11

CRASH CONDITIONS

Roadway Surface Condition	107	Light Condition	200	Weather Conditions	107	Environmental Conditions	102
000 Dry		100 Daylight		000 Clear	980	000 None	
100 Ice/Frost		200 Dawn/dusk		100 Blowing sand, soil, dirt		100 Animal(s)	980
101 Mud, dirt, gravel		300 Dark - continuous street lights		101 Blowing snow		101 Debris	
102 Oil		301 Dark - street lights at intersection only		102 Cloudy		102 Glare	
103 Sand		302 Dark - not lighted		103 Fog, smog, smoke		103 Non-highway work	
104 Slush		399 Dark - unknown lighting		104 Freezing rain or freezing drizzle		104 Obstructed crosswalks	
105 Snow		980 Other		105 Rain		105 Obstruction in roadway	
106 Water (standing,moving)		999 Unknown		106 Severe crosswinds		106 Overhead clearance limited	
107 Wet				107 Sleet or hail		107 Prior crash	
980 Other				108 Snow		108 Prior non-recurring incident	
999 Unknown				999 Unknown		109 Regular congestion	
						110 Related to a bus stop	
						111 Road surface condition (wet, icy, snow, slush, etc.)	

WORK ZONE CRASH INFORMATION

Work Zone Relation	100	Work Zone Location	101	Work Zone Type	980	Work Zone Circumstances	980	Worker(s) Present	999	Law Enforcement Present	999
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
	Eric		Newman	

WITNESS

WITNESS

Name				Name			
<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Suffix</i>	<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Suffix</i>
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 <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	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 # C-345678-23
Page 3 of 11

DESCRIPTION AND INFORMATION

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

DAMAGE

Damage Extent
Initial Point of Contact
Damaged Areas
Tow Status
Tow Authority
Towed By
Big Ron's Tow Time

MOTOR VEHICLE CIRCUMSTANCES

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

LOUISIANA UNIFORM CRASH REPORT VEHICLE INFORMATION

Motor Vehicle #	1	Rev. 2023-1	Case #	C-345678-23	Page	4	of	11
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MOTOR VEHICLE CIRCUMSTANCES

Skidmark Data (Feet)		Distance Traveled After Impact (Feet) <input type="checkbox"/> Unknown		Contributing Defects		999
Front Left	Front Right	50		000 None		
<input type="checkbox"/>	<input type="checkbox"/>			100 Brakes		
<input checked="" type="checkbox"/> Not applicable or measured <input type="checkbox"/> Unknown		Vehicle Lighting		101 Exhaust system		999
Rear Left	Rear Right	000 Headlights off		102 Body, doors		
<input type="checkbox"/>	<input type="checkbox"/>	100 Headlights on		103 Steering		
		101 Daytime running lights		104 Power train		
		999 Unknown		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	Automation System Level Present		999
000 None	300 Flashing railroad crossing (may include gates)	1 <input type="text" value="300"/>	1 <input type="text" value="303"/>	000 No automation		
100 Person (including flagger, law enforcement, crossing guard, etc)	301 Flashing school zone signal	2 <input type="text" value="301"/>	2 <input type="text" value="304"/>	100 Driver assistance		
200 Bicycle crossing sign	302 Flashing traffic control signal	3 <input type="text" value="302"/>	3 <input type="text" value="305"/>	101 Partial automation		
201 Curve Ahead warning sign	303 Lane use control signal	4 <input type="text" value="980"/>	4 <input type="text" value="398"/>	102 Conditional automation		
202 Intersection Ahead warning sign	304 Ramp meter signal	Traffic Signal Status		103 High automation		
203 Pedestrian crossing sign	305 Traffic control signal	100		104 Full automation		
204 Railroad crossing sign	398 Other signal	100 Red signal on		199 Automation level unknown		
205 Reduce Speed Ahead warning sign	400 Bicycle crossing	200 Yellow signal on		999 Unknown		
206 School zone sign	401 Pedestrian crossing	300 Green signal on		Automation System Level Engaged		999
207 Stop sign	402 Railroad crossing	970 Not applicable		000 No automation		
208 Yield sign	403 School zone	999 Unknown		100 Driver assistance		
298 Other warning sign	404 Yellow no passing line			101 Partial automation		
	405 White or yellow dash line			102 Conditional automation		
	406 Solid white lane line			103 High automation		
	498 Other pavement marking (excluding edgelines, centerlines, or lane lines)			104 Full automation		
980 Other	999 Unknown			199 Automation level unknown		
				999 Unknown		
Trafficway Division		Barrier Type	HOV Lane Presence		HOV Lane Relation	
000 Not divided		000	000 None present		000	
001 Not divided, with a continuous left turn lane		000 None		100 Separated barrier, flush (greater than 4 ft wide), raised or depressed median		
100 Divided, flush median (greater than 4 ft wide)		100 Cable barrier		101 Not separated, painted pavement markings, post-mounted delineators		
101 Divided, raised median (curbed)		101 Concrete barrier (e.g. Jersey barrier)				
102 Divided, depressed median		102 Earth embankment				
999 Unknown		103 Guardrail				
		980 Other				
Roadway Grade	Number of Through Lanes	Number of Auxiliary Lanes	Roadway Alignment	Permitted Travel	Speed Limit	
100	4	0	100	200	40	
100 Level			100 Straight	100 One-way	<input type="checkbox"/> Unknown	
101 Uphill			101 Curve left	200 Two-way	<input type="checkbox"/> N/A	
102 Hillcrest			102 Curve right			
103 Downhill						
104 Sag (bottom)						

MOTOR VEHICLE EVENTS

Sequence of Events	1 <input type="text" value="205"/>	2 <input type="text" value="098"/>	3 <input type="text" value="298"/>	4 <input type="text" value="396"/>	Most Harmful Event	<input type="text" value="205"/>
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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
005 Ran off roadway left	305 Collision with culvert
006 Ran off roadway right	306 Collision with curb
007 Reentering roadway	307 Collision with ditch
008 Separation of units	308 Collision with embankment
098 Other non-harmful event	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
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 pedalcycle (including bicycles)
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

LOUISIANA UNIFORM CRASH REPORT
VEHICLE INFORMATION

Motor Vehicle # 1 Case # C-345678-23 Page 5 of 11

COMMERCIAL MOTOR VEHICLE INFORMATION

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

Cargo Body Type 102 Special Sizing
000 No cargo body
100 Bus 105 Flatbed 109 Log
101 Auto transporter 106 Garbage / refuse 110 Pole trailer
102 Cargo tank 107 Grain / chips / gravel 111 Van / enclosed box
103 Concrete mixer 108 Intermodal container chassis 112 Vehicle towing another vehicle
104 Dump
970 Not applicable 980 Other 999 Unknown

Load Permitted 100 Number of Axles Motor Carrier Type 100 Motor Carrier Identification 100
000 Non-permitted load
100 Permitted load
970 Not applicable (not a qualifying vehicle)
999 Unknown

Motor Carrier Address Unknown Motor Carrier Phone Number Unknown
123 Pine Rd Baton Rouge LA 70111

GVWR/GCWR 101 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 # 1

VIN Unknown Number of Axles Unknown
Year Unknown Make Unknown Model Unknown

License Plate Missing Non-expiring
State LA Unknown Number 654456 Unknown Year 2022 Unknown

TRAILER INFORMATION TRAILER #

VIN Unknown Number of Axles Unknown
Year Unknown Make Unknown Model Unknown

License Plate Missing Non-expiring
State Unknown Number Unknown Year Unknown

TRAILER INFORMATION TRAILER #

VIN Unknown Number of Axles Unknown
Year Unknown Make Unknown Model Unknown

License Plate Missing Non-expiring
State Unknown Number Unknown Year Unknown

LOUISIANA UNIFORM CRASH REPORT DRIVER INFORMATION

Motor Vehicle # 1

Rev. 2023-1

Case # C-345678-23 Page 7 of 11

MEDICAL INFORMATION

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

DRIVER CONDITION AND CIRCUMSTANCES

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

DRIVER ACTIONS

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

CITATIONS

Citations section for recording any applicable citations.

LOUISIANA UNIFORM CRASH REPORT TRAIN SUPPLEMENT

Train # 1	Rev. 2023-1	Case # C-345678-23	Page 8 of 11
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TRAIN INFORMATION								
Train Type	100	ID #	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown 123	Lead Engine #	789	Serial #	7	Present Equipment
100 Railroad train 101 Streetcar								<input type="checkbox"/> 000 None <input checked="" type="checkbox"/> 100 Headlight functional <input checked="" type="checkbox"/> 101 Ditch lights functional <input checked="" type="checkbox"/> 102 Horn functional <input checked="" type="checkbox"/> 103 Bell functional <input checked="" type="checkbox"/> 104 Event data recorder equipped
Make	<input type="checkbox"/> Unknown	Type	<input type="checkbox"/> Unknown	# of Engines	<input type="checkbox"/> Unknown	# of Cars	<input type="checkbox"/> Unknown	Data Recorder Speed
Train		Choo-Choo		1		2		50 <input type="checkbox"/> Pending

TRACK INFORMATION			WARNING DEVICES			
DOT Crossing #	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown 77	Crossing Surface	980 Material 100 Rubber mat 980 Other 101 Asphalt 102 Wood 103 Concrete 104 Gravel	Present Warning Devices	Advance Warning Devices	Active Warning Devices
Sets of Tracks	Speed Limit	Crossing Type	100 101 Private	<input checked="" type="checkbox"/> 000 None <input type="checkbox"/> 100 Flashing lights <input type="checkbox"/> 101 Bell <input type="checkbox"/> 102 Gate <input type="checkbox"/> 103 Crossbuck <input type="checkbox"/> 980 Other	<input checked="" type="checkbox"/> 000 None <input type="checkbox"/> 100 Sign <input type="checkbox"/> 101 Pavement markings <input type="checkbox"/> 102 Active advance warning <input type="checkbox"/> 980 Other	<input checked="" type="checkbox"/> 000 None <input type="checkbox"/> 100 Lights flashing <input type="checkbox"/> 101 Bell ringing <input type="checkbox"/> 102 Gates down <input type="checkbox"/> 980 Other
2	50					

COLLISION INFORMATION							
Train in Motion	000	Crossing Vehicle Interaction	101	Struck Car #	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown	Struck Car Type	<input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Unknown
000 No 100 Yes		100 Stalled on crossing 101 Stopped on crossing 102 Moving over crossing 103 Trapped on crossing		1			
Collision Type	100	Struck Car Position		<input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Unknown	Distance Traveled After Impact	<input checked="" type="checkbox"/> Not Applicable	Estimated Speed Before Braking
100 Frontal 101 Side/backing						<input type="checkbox"/> feet <input type="checkbox"/> miles	27

Hazardous Materials Placard	000	Hazardous Material Class	970	Hazardous Materials Released from Train Cargo Compartment	970
000 Had no placard and not carrying hazardous materials 001 Had a placard, not carrying hazardous materials 100 Carried hazardous material that required placarding 200 Carried hazardous materials without placard 999 Unknown		1 Explosives 2 Gas 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	970 Not applicable 999 Unknown	000 No, hazardous materials not released 100 Yes, hazardous materials released 970 Not applicable	
Hazardous Material ID	N/A				

TRAIN OPERATOR				
Name	<input type="checkbox"/> Unknown	Address	<input type="checkbox"/> Unknown	
Emmett Brown		8 Eastwood Ravine Rd		Hill Valley CA 90210
		<i>Street</i>		<i>City State Postal Code</i>

TRACK OWNER				
Name	<input type="checkbox"/> Unknown	Address	<input type="checkbox"/> Unknown	
Biff Tannen		9 Lyon Estates		Hill Valley CA 90210
		<i>Street</i>		<i>City State Postal Code</i>

TRAIN ENGINEER				
Name	<input type="checkbox"/> Unknown	<input type="checkbox"/> This train had no engineer	Certification Number	<input type="checkbox"/> Unknown
Marty		McFly	123456	
<i>First</i>		<i>Last</i>		
Address	<input type="checkbox"/> Unknown	Phone Number	<input type="checkbox"/> Not Collected	
9303 Roslyndale Avenue		Hill Valley CA 90210	888-222-4444	
<i>Street</i>		<i>City State Postal Code</i>		

Incident Responder	000 No	102 Police	980 Other	999 Unknown	Sex	101	Age	<input type="checkbox"/> Unknown	Date of Birth	<input type="checkbox"/> Unknown	Ethnicity	101
	100 EMS	103 Tow operator			100 Female		53		6/12/1968		100 Hispanic	
	101 Fire	104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)										999 Unknown

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

LOUISIANA UNIFORM CRASH REPORT TRAIN SUPPLEMENT

Train # 1		Rev. 2023-1		Case # C-345678-23	Page 9	of 11
TRAIN CONDUCTOR						
Name <input type="checkbox"/> Unknown <input type="checkbox"/> This train had no conductor		Race			103	
George McFly		100 American Indian or Alaska Native 101 Asian or Pacific Islander			102 Black 103 White 999 Unknown 980 Other	
Address <input type="checkbox"/> Unknown		Phone Number <input type="checkbox"/> Not Collected				
9303 Roslyndale Avenue Hill Valley CA 90210		888-555-9999				
Incident Responder		<input type="checkbox"/> 000	Sex <input type="checkbox"/> 101	Age <input type="checkbox"/> Unknown	Date of Birth <input type="checkbox"/> Unknown	Ethnicity <input type="checkbox"/> 101
000 No 102 Police 980 Other 999 Unknown 100 EMS 103 Tow operator 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)			100 Female 101 Male 999 Unknown	83	1/1/1938	100 Hispanic 101 Other than Hispanic 999 Unknown
Injury Status <input type="checkbox"/> 103	Type of Medical Transportation <input type="checkbox"/> 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 980 Other 100 EMS air 999 Unknown 101 EMS ground 200 Law enforcement	Unknown				
Medical Unique Identifier <input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Unknown		EMS Response Run # <input checked="" type="checkbox"/> Unknown				
		Facility Receiving Patient				
		Unknown				

PASSENGER INFORMATION						
PASSENGER # 1						
Name <input type="checkbox"/> Unknown		Race			101	
first1 last1		100 American Indian or Alaska Native 101 Asian or Pacific Islander			102 Black 103 White 999 Unknown 980 Other	
Address <input checked="" type="checkbox"/> Unknown		Phone Number <input type="checkbox"/> Not Collected				
		111-444-7777				
Incident Responder		<input type="checkbox"/> 101	Sex <input type="checkbox"/> 100	Age <input type="checkbox"/> Unknown	Date of Birth <input type="checkbox"/> Unknown	Ethnicity <input type="checkbox"/> 999
000 No 102 Police 980 Other 999 Unknown 100 EMS 103 Tow operator 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)			100 Female 101 Male 999 Unknown	15	1/1/2006	100 Hispanic 101 Other than Hispanic 999 Unknown
Injury Status <input type="checkbox"/> 101	Type of Medical Transportation <input type="checkbox"/> 980	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 980 Other 100 EMS air 999 Unknown 101 EMS ground 200 Law enforcement	Not applicable				
Medical Unique Identifier <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown		EMS Response Run # <input type="checkbox"/> Unknown				
		Facility Receiving Patient				
		Other				

PASSENGER # 2						
Name <input type="checkbox"/> Unknown		Race			980	
first2 last2		100 American Indian or Alaska Native 101 Asian or Pacific Islander			102 Black 103 White 999 Unknown 980 Other	
Address <input type="checkbox"/> Unknown		Phone Number <input checked="" type="checkbox"/> Not Collected				
123 first Baton Rouge LA 77771						
Incident Responder		<input type="checkbox"/> 102	Sex <input type="checkbox"/> 999	Age <input type="checkbox"/> Unknown	Date of Birth <input checked="" type="checkbox"/> Unknown	Ethnicity <input type="checkbox"/> 999
000 No 102 Police 980 Other 999 Unknown 100 EMS 103 Tow operator 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)			100 Female 101 Male 999 Unknown	44		100 Hispanic 101 Other than Hispanic 999 Unknown
Injury Status <input type="checkbox"/> 103	Type of Medical Transportation <input type="checkbox"/> 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 980 Other 100 EMS air 999 Unknown 101 EMS ground 200 Law enforcement	Not applicable				
Medical Unique Identifier <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown		EMS Response Run # <input type="checkbox"/> Unknown				
		Facility Receiving Patient				
		Not applicable				

DIAGRAM

Rev. 2023-1

Scene #

1

Case #

C-345678-23

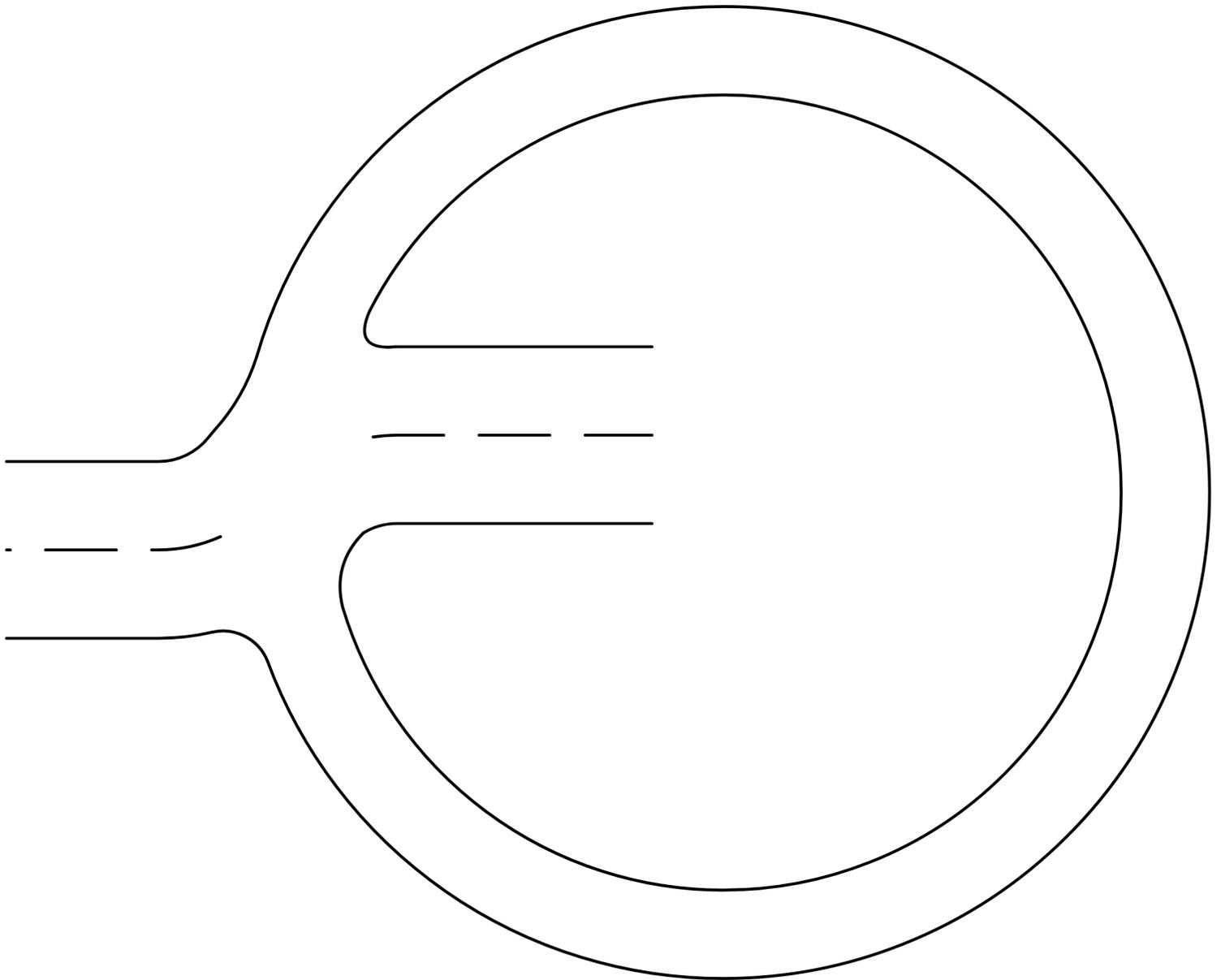
Page

10

of

11

CRASH DIAGRAM



NARRATIVE

Rev. 2023-1

Case #

C-345678-23

Page

11

of

11

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.
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Weather Conditions: weather other
Roadway Environmental Contributing Circumstances: environmental conditions other
Work Zone Type: Work Zone Type other
Work Zone Circumstances: Work Zone Circumstances other
Vehicle 1 Traffic Control Devices Present: Traffic Control other
Vehicle 1 Traffic Control Devices Inoperative or Missing: Flashy
Vehicle 1 Event 2: other non-harmful event other
Vehicle 1 Event 3: Collision with other non-fixed object other
Vehicle 1 Event 4: Collision with other post: Other
Train 1 Crossing Surface Material: Crossing Surface Material: other
Train 1 Passenger 1 Medical Transportation Type: med facility other
Train 1 Passenger 1 Medical Facility Receiving Patient: receiving patient other
Train 1 Passenger 2 Race: race other

This report was reassigned to Eric Newman.