

LOUISIANA UNIFORM CRASH REPORT
CRASH INFORMATION

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| | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|--|---|--|---|--|--|--|---|--|------------|--|-------------------------------|--|-------------------|--|-------|--|--|--|
| 4 | | 5 | | 6 | | Rev. 2023-2 | | Case # | | 3 | | Page | | of | | | | | | | |
| Secondary Crash | | Photos Taken | | Videos Taken | | Number of Motorists | | Number of Non-Motorists | | Non-Fatally Injured Persons | | Fatalities | | Total Injuries and Fatalities | | Vehicles Involved | | Troop | | | |
| Investigating Agency | | Division | | Parish | | City | | Latitude | | Longitude | | | | | | | | | | | |
| 14 | | 15 | | 16 | | 17 | | 18 | | 19 | | | | | | | | | | | |
| CRASH TIME INFORMATION | | | | | | | | | | | | | | | | | | | | | |
| Crash Date/Time | | Police Notified Date/Time | | Police Arrived Date/Time | | Roadway Cleared Date/Time | | On Scene Investigation Completed Date/Time | | | | | | | | | | | | | |
| 20 21 | | 22 23 | | 24 25 | | 26 27 | | 28 29 | | | | | | | | | | | | | |
| ROAD INFORMATION | | | | | | | | | | | | | | | | | | | | | |
| Highway | | | | Road | | | | | | | | | | | | | | | | | |
| 31 | | | | 32 | | | | | | | | | | | | | | | | | |
| Distance/Direction From Intersection | | | | Intersecting Road | | | | | | | | | | | | | | | | | |
| 35 36 38 | | | | 40 39 | | | | | | | | | | | | | | | | | |
| LOCATION INFORMATION | | | | | | | | | | | | | | | | | | | | | |
| Road Classification | | Road Subtype | | Property Ownership | | Trafficway Characteristics | | Number of Intersection Approaches | | Traffic Flow Direction | | | | | | | | | | | |
| 41 | | 42 | | 43 | | 44 | | 45 | | 46 | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | |
| 47 | | 48 | | 49 | | 50 | | 51 | | | | | | | | | | | | | |
| Badge # | | Printed Name | | Signature | | | | | | | | | | | | | | | | | |
| 52 | | 53 | | 54 | | | | | | | | | | | | | | | | | |
| CRASH CIRCUMSTANCES AND CONDITIONS | | | | | | | | | | | | | | | | | | | | | |
| First Harmful Event | | Location of First Harmful Event | | Manner of Crash | | | | | | | | | | | | | | | | | |
| 55 | | 56 | | 57 | | | | | | | | | | | | | | | | | |
| Non-Collision | | Collision with Non-Fixed Object | | Collision with 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 | | 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 | | 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 | | | | | | | | | | | |
| | | Relation to Junction | | Contributing Factor | | | | | | | | | | | | | | | | | |
| | | 58 | | Primary | | 59 | | | | | | | | | | | | | | | |
| | | | | Secondary | | 60 | | | | | | | | | | | | | | | |
| | | Intersection Geometry | | School Bus Relation | | | | | | | | | | | | | | | | | |
| | | 61 | | 62 | | | | | | | | | | | | | | | | | |
| | | Intersection Traffic Control | | | | | | | | | | | | | | | | | | | |
| | | 63 | | | | | | | | | | | | | | | | | | | |
| | | 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 | 64 | Light Condition | 65 | Weather Conditions | 66 | Environmental Conditions | 68 |
| 000 Dry | | 100 Daylight | | 000 Clear | 67 | 000 None | |
| 100 Ice/Frost | | 200 Dawn/dusk | | 100 Blowing sand, soil, dirt | | 100 Animal(s) | 69 |
| 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 | | | | 980 Other | | 109 Regular congestion | |
| | | | | 999 Unknown | | 110 Related to a bus stop | |
| | | | | | | 111 Road surface condition (wet, icy, snow, slush, etc.) | |

WORK ZONE CRASH INFORMATION

| | | | | | | | | | | | |
|---------------------------|-----------|---|-----------|---------------------------------|-----------|--|-----------|--------------------------|-----------|--------------------------------|-----------|
| Work Zone Relation | 70 | Work Zone Location | 71 | Work Zone Type | 72 | Work Zone Circumstances | 73 | Worker(s) Present | 74 | Law Enforcement Present | 75 |
| 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 | 76 | First Name | 77 | Middle Name | 78 | Last Name | 79 | Suffix | 80 |
|-------------|-----------|-------------------|-----------|--------------------|-----------|------------------|-----------|---------------|-----------|

WITNESS # **81**

WITNESS #

| | | | | | | | | | | | | | |
|----------------|-----------|-----------|-----------|-------------|----------------|-----------|-----------|-----------|-------------|--------------|-----------|-----------|-----------|
| Name | 82 | 83 | 84 | 85 | Name | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 |
| First | | Middle | | Suffix | First | | Middle | | Last | | Suffix | | |
| Address | 86 | 87 | 88 | 89 | Address | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 |
| City | | State | | Postal Code | City | | State | | Postal Code | City | | State | |
| Phone Number | | Age | | Sex | Phone Number | | Age | | Sex | Phone Number | | Age | |

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY # **93**

| | | | | | | | | | | |
|----------------------|------------|----------------------------------|------------|-------------------|------------|----------------------------------|---------------------------|------------|--|------------|
| Property Type | 94 | Damage Severity | 95 | Owner Name | 96 | <input type="checkbox"/> Unknown | Owner Phone Number | 97 | <input type="checkbox"/> Not Collected | 98 |
| Owner Address | 100 | <input type="checkbox"/> Unknown | 101 | 102 | 103 | 104 | 105 | 106 | 107 | 108 |
| Street | | City | | State | | Postal Code | | | | |

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY #

| | | | | | | | | | | |
|----------------------|------------|----------------------------------|------------|-------------------|------------|----------------------------------|---------------------------|------------|--|------------|
| Property Type | 94 | Damage Severity | 95 | Owner Name | 96 | <input type="checkbox"/> Unknown | Owner Phone Number | 97 | <input type="checkbox"/> Not Collected | 98 |
| Owner Address | 100 | <input type="checkbox"/> Unknown | 101 | 102 | 103 | 104 | 105 | 106 | 107 | 108 |
| Street | | City | | State | | Postal Code | | | | |

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY #

| | | | | | | | | | | |
|----------------------|------------|----------------------------------|------------|-------------------|------------|----------------------------------|---------------------------|------------|--|------------|
| Property Type | 94 | Damage Severity | 95 | Owner Name | 96 | <input type="checkbox"/> Unknown | Owner Phone Number | 97 | <input type="checkbox"/> Not Collected | 98 |
| Owner Address | 100 | <input type="checkbox"/> Unknown | 101 | 102 | 103 | 104 | 105 | 106 | 107 | 108 |
| Street | | City | | State | | Postal Code | | | | |

PROPERTY DAMAGE CODES

| | | | | | | | | | | |
|-------------------------------|-----------|------------------------------|-----------|-------------------------------------|-----------|----------------------------------|---------------------------|--------------------------|--|---|
| Property Type | 94 | Damage Severity | 95 | Owner Name | 96 | <input type="checkbox"/> Unknown | Owner Phone Number | 97 | <input type="checkbox"/> Not Collected | 98 |
| 100 Private property | | 300 Cable barrier | | 303 Guardrail face | | 400 Traffic sign support | | 598 Other state property | | 100 Light (less than \$500) |
| 200 Bridge overhead structure | | 301 Concrete traffic barrier | | 304 Impact attenuator/crash cushion | | 401 Traffic signal support | | 980 Other | | 101 Moderate (between \$500 and \$10,000) |
| 201 Bridge pier or support | | 302 Guardrail end terminal | | 398 Other traffic barrier | | 402 Utility pole/light support | | | | 102 Severe (over \$10,000) |
| 202 Bridge rail | | | | | | | | | | |

CRASH DATA

MAPPIN

| G # | DATABASE MAPPING |
|-----|--|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Crash.SecondaryCrash |
| 5 | Crash.PhotosTaken |
| 6 | Crash.VideosTaken |
| 7 | Computed from Crash Report Data |
| 8 | Computed from Crash Report Data |
| 9 | Computed from Crash Report Data |
| 10 | Computed from Crash Report Data |
| 11 | Computed from Crash Report Data |
| 12 | Computed from Crash Report Data |
| 13 | Crash.TroopRegion |
| 14 | Crash.AgencyName |
| 15 | Crash.AgencyDivision |
| 16 | Crash.Parish |
| 17 | Crash.City |
| 18 | Crash.Latitude |
| 19 | Crash.Longitude |
| 20 | Crash.CrashDate |
| 21 | Crash.CrashTime |
| 22 | Crash.PoliceNotificationDate |
| 23 | Crash.PoliceNotificationTime |
| 24 | Crash.PoliceArrivalDate |
| 25 | Crash.PoliceArrivalTime |
| 26 | Crash.RoadwayClearanceDate |
| 27 | Crash.RoadwayClearanceTime |
| 28 | Crash.OnSceneInvestigationCompletionDate |
| 29 | Crash.OnSceneInvestigationCompletionTime |
| 31 | Crash.Highway |
| 32 | Crash.RoadNumber Crash.RoadName Crash.RoadType |
| 35 | Crash.DistanceFromIntersection |
| 36 | Crash.DistanceFromIntersectionUnit |
| 37 | Crash.IsDistanceFromIntersectionNotApplicable |
| 38 | Crash.DirectionFromIntersection |
| 39 | Crash.IsIntersection |
| 40 | Crash.IntersectingRoadName |
| 41 | Crash.RoadClassification |
| 42 | Crash.RoadSubtype |
| 43 | Crash.PropertyOwnership |
| 44 | Crash.TrafficwayCharacteristics |

45 Crash.IntersectionApproach
46 Crash.TrafficFlowDirection
47 Crash.InvestigatingOfficerRank
48 Crash.InvestigatingOfficerFirstName
49 Crash.InvestigatingOfficerMiddleName
50 Crash.InvestigatingOfficerLastName
51 Crash.InvestigatingOfficerNameSuffix
52 Crash.InvestigatingOfficerId
53 Document.CreatorSignature
54 Document.CreatorSignature
55 Crash.FirstHarmfulEvent
56 Crash.FirstHarmfulEventLocation
57 Crash.CrashManner
58 Crash.JunctionLocation
59 Crash.PrimaryContributingFactor
60 Crash.SecondaryContributingFactor
61 Crash.IntersectionGeometry
62 Crash.SchoolBusRelation
63 Crash.IntersectionTrafficControl
64 Crash.RoadwaySurfaceCondition
65 Crash.LightCondition
66 CrashWeatherConditions.WeatherCondition
67 CrashWeatherConditions.WeatherCondition
CrashRoadwayEnvironmentalContributingCircumstances.RoadwayEnvironmentalContributi
68 ngCircumstance
CrashRoadwayEnvironmentalContributingCircumstances.RoadwayEnvironmentalContributi
69 ngCircumstance
70 Crash.WorkZoneRelation
71 Crash.WorkZoneLocation
72 Crash.WorkZoneType
73 Crash.WorkZoneCircumstance
74 Crash.WorkerPresence
75 Crash.LawEnforcementPresence
76 Document.ReviewerRank
77 Document.ReviewerFirstName
78 Document.ReviewerMiddleName
79 Document.ReviewerLastName
80 Document.ReviewerNameSuffix
81 Witness.Index
82 Witness.FirstName
83 Witness.MiddleName
84 Witness.LastName
85 Witness.NameSuffix
86 Witness.AddressStreet
87 Witness.AddressCity

88 Witness.AddressState
89 Witness.AddressPostalCode
90 Witness.PhoneNumber
91 Witness.Age
92 Witness.Sex
93 DamagedNonVehicularProperty.Index
94 DamagedNonVehicularProperty.PropertyType
95 DamagedNonVehicularProperty.DamageSeverity
96 DamagedNonVehicularProperty.IsOwnerNameUnknown
97 DamagedNonVehicularProperty.OwnerName
98 DamagedNonVehicularProperty.IsOwnerPhoneNumberUnknown
99 DamagedNonVehicularProperty.OwnerPhoneNumber
100 DamagedNonVehicularProperty.IsOwnerAddressUnknown
101 DamagedNonVehicularProperty.OwnerAddressStreet
102 DamagedNonVehicularProperty.OwnerAddressCity
103 DamagedNonVehicularProperty.OwnerAddressState
104 DamagedNonVehicularProperty.OwnerAddressPostalCode

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DESCRIPTION AND INFORMATION

| | | | | | |
|---|--|--|--|---|--|
| Check if this vehicle had no driver 5 <input type="checkbox"/> | Hit and Run 000 No, did not leave scene 100 Yes, driver and vehicle left scene 101 Yes, only driver left scene | Vehicle Type 100 Motor vehicle in transport 101 Parked motor vehicle 102 Working vehicle / equipment | Vehicle Body Type <u>Passenger Vehicles</u> 100 Passenger car 101 Passenger van / Minivan (less than 9 seats) 102 (Sport) utility vehicle <u>Construction / Farm Equipment</u> 200 Construction equipment (backhoe, bulldozer, etc.) 201 Farm equipment (tractor, combine, harvester, etc.) <u>Cycle / Off Road / Recreation</u> 300 2-wheeled motorcycle 301 3-wheeled motorcycle 302 Moped or motorized bicycle 303 All-terrain vehicle / all-terrain cycle (ATV / ATC) 304 Golf Cart 305 Snowmobile 306 Low Speed Vehicle 307 Recreational off-highway vehicles (ROV) 308 Autocycle <u>Trucks</u> 400 Single unit truck 401 Truck tractor 498 Other truck <u>Large Passenger Vehicle</u> 500 Motor home 501 Passenger van (9-15 seats) 502 Passenger van (16+ seats) 503 Large limo 504 Mini-bus <u>Other</u> 980 Other | | |
| VIN 9 | Model Year 11 | Make 12 | Model 14 | Color 15 | Vehicle Body Type 8 |
| License Plate 16 | State 17 | Number 19 | Year 21 | Non-expiring 22 | Cycle / Off Road / Recreation 23 |
| Owner Name 26 | Same as driver 24 | Unknown 25 | Owner Address 29 | Same as driver 27 | Unknown 30 |
| Insurance 33 | Company 34 | Phone # 36 | NAIC # 38 | Policy # 40 | Expiration Date 42 |
| Uninsured at time of crash 33 | Uninsured at time of crash 33 | Uninsured at time of crash 33 | Uninsured at time of crash 33 | Uninsured at time of crash 33 | Uninsured at time of crash 33 |

DAMAGE

| | | | | |
|---|--|--|--|---|
| Damage Extent 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 1 000 Non-collision 001 Vehicle not at scene 100 Top 113 Undercarriage 114 Cargo Loss 999 Unknown | Damaged Areas 6 7 8 9 10 11 12 5 4 3 2 1 001 Vehicle not at scene 002 No damage 100 Top 113 Undercarriage | Tow Status 000 Not towed 100 Towed, but not due to disabling damage 101 Towed (or will be towed) due to disabling damage Towed By Unknown 50 | Tow Authority 100 Owner 101 Law enforcement 970 Not applicable 980 Other |
|---|--|--|--|---|

MOTOR VEHICLE CIRCUMSTANCES

| | | | |
|---|---|---|--|
| Vehicle Usage 000 No special function 100 Bus - school (public or private) 101 Bus - childcare / daycare 102 Bus - transit / commuter 103 Bus - charter / tour 104 Bus - intercity 105 Bus - shuttle 198 Bus - other 200 Farm vehicle 201 Fire truck 202 Highway / maintenance 203 Mail carrier 204 Military 205 Ambulance 206 Police 207 Public utility 208 Non-transport emergency services vehicle 209 Safety service patrols - incident response 210 Other incident response 211 Rental truck (over 10,000 lbs) 212 Towing - incident response 213 Truck acting as crash attenuator 214 Taxi 215 Vehicle used for electronic ride-hailing (transportation network company) | Vehicle Maneuver 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 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 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 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 Direction of Travel Before Crash 000 Not on roadway 001 In roadway but not in motion 002 Not on trafficway | Vehicle Maneuver 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 |
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MOTOR VEHICLE CIRCUMSTANCES

| | | | | | |
|--|--|---|---------------------------------------|--|---|
| Skidmark Data (Feet) | | Distance Traveled After Impact (Feet) <input type="checkbox"/> Unknown | | Contributing Defects | |
| Front Left | Front Right | 63 | | 62 | |
| <input type="checkbox"/> Not applicable or measured | <input type="checkbox"/> Unknown | Vehicle Lighting | | 64 | |
| 58 | 59 | 000 Headlights off | | 000 None | |
| Rear Left | Rear Right | 100 Headlights on | | 100 Brakes | |
| 60 | 61 | 101 Daytime running lights | | 101 Exhaust system | |
| | | 999 Unknown | | 102 Body, doors | |
| | | | | 103 Steering | |
| | | | | 104 Power train | |
| | | | | 105 Suspension | |
| | | | | 106 Tires | |
| | | | | 107 Wheels | |
| | | | | 108 Headlights | |
| | | | | 109 Tail lights | |
| | | | | 110 Signal lights | |
| | | | | 111 All lights | |
| | | | | 112 Window / windshield | |
| | | | | 113 Mirrors | |
| | | | | 114 Wipers | |
| | | | | 115 Truck coupling / trailer hitch / safety chains | |
| | | | | 980 Other | |
| | | | | 999 Unknown | |
| Traffic Control Device Types and Statuses | | | | Automation System Level Present | |
| Traffic Control Device Types | | Devices Present | Devices Inoperative or Missing | 66 | |
| 000 None | 300 Flashing railroad crossing (may include gates) | 1 | 1 | 000 No automation | |
| 100 Person (including flagger, law enforcement, crossing guard, etc) | 301 Flashing school zone signal | 2 | 2 | 100 Driver assistance | |
| 200 Bicycle crossing sign | 302 Flashing traffic control signal | 3 | 3 | 101 Partial automation | |
| 201 Curve Ahead warning sign | 303 Lane use control signal | 4 | 4 | 102 Conditional automation | |
| 202 Intersection Ahead warning sign | 304 Ramp meter signal | | | 103 High automation | |
| 203 Pedestrian crossing sign | 305 Traffic control signal | | | 104 Full automation | |
| 204 Railroad crossing sign | 398 Other signal | | | 199 Automation level unknown | |
| 205 Reduce Speed Ahead warning sign | 400 Bicycle crossing | | | 999 Unknown | |
| 206 School zone sign | 401 Pedestrian crossing | | | Automation System Level Engaged | |
| 207 Stop sign | 402 Railroad crossing | | | 67 | |
| 208 Yield sign | 403 School zone | | | 000 No automation | |
| 298 Other warning sign | 404 Yellow no passing line | | | 100 Driver assistance | |
| | 405 White or yellow dash line | | | 101 Partial automation | |
| | 406 Solid white lane line | | | 102 Conditional automation | |
| | 498 Other pavement marking (excluding edgelines, centerlines, or lane lines) | | | 103 High automation | |
| | | | | 104 Full automation | |
| | | | | 199 Automation level unknown | |
| | | | | 999 Unknown | |
| 980 Other | 999 Unknown | | | | |
| Trafficway Division | | Barrier Type | | | |
| 000 Not divided | 100 Divided, flush median (greater than 4 ft wide) | 000 None 100 Cable barrier | | | |
| 001 Not divided, with a continuous left turn lane | 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 | HOV Lane Presence |
| 000 Not on trafficway | | | 000 Not on trafficway | 000 Not on trafficway | 000 None present |
| 100 Level | 77 | 78 | 100 Straight | 100 One-way | 100 Separated barrier, flush (greater than 4 ft wide), raised or depressed median |
| 101 Uphill | | | 101 Curve left | 200 Two-way | 101 Not separated, painted pavement markings, post-mounted delineators |
| 102 Hillcrest | | | 102 Curve right | Speed Limit | |
| 103 Downhill | | | | <input type="checkbox"/> Unknown | |
| 104 Sag (bottom) | | | | 83 | |
| | | | | <input type="checkbox"/> N/A | |
| | | | | 82 | |

MOTOR VEHICLE EVENTS

| | | | | |
|---|--|---|--|---------------------------|
| Sequence of Events 1 2 3 4 | | | | Most Harmful Event |
| 84 | | | | 85 |
| 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 | | |
| 009 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 | | |

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COMMERCIAL MOTOR VEHICLE INFORMATION

Vehicle Configuration

000 Vehicles 10,000 lbs or less
100 Vehicles 10,000 lbs or less
placarded for hazardous materials
200 Bus/large van
(seats 9-15 occupants, including driver)
201 Bus
(seats more than 15 occupants, including driver)

300 Single-unit truck (2-axle and GVWR > 10,000 lbs.)
301 Single-unit truck (3 or more axles)
302 Truck pulling trailer(s)
303 Truck tractor (bobtail)
304 Truck tractor/semi-trailer
305 Truck tractor/double
306 Truck tractor/triple
307 Truck more than 10,000 lbs., cannot classify

999 Unknown

Hazardous Materials Placard

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

Hazardous Material ID

88

Hazardous Material Class

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

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

Cargo Body Type

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

Special Sizing

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

Load Permitted

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

Number
of Axles

☐ Unknown
93

Motor Carrier Type

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

Motor Carrier Identification

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

State

97

Motor Carrier Name

☐ Unknown 98

Motor Carrier ID Number

100

Motor Carrier Address

☐ Unknown 103

104
Street

105
City

106
State

107
Postal Code

Motor Carrier Phone Number

☐ Unknown

102
101

GVWR/GCWR

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

Commodity Hauled

109

TRAILER INFORMATION

TRAILER

110

VIN

☐ Unknown 111
112

Number of Axles

☐ Unknown 113
114

Year

☐ Unknown 115
116

Make

☐ Unknown 117
118

Model

☐ Unknown 119
120

License Plate

☐ Missing 121

☐ Non-expiring 128

State

122

☐ Unknown 123

Number

124

☐ Unknown 125

Year

126

☐ Unknown 127

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

VEHICLE DATA

| MAPPING # | DATABASE MAPPING |
|-----------|---|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Vehicle.Index |
| 5 | Driver Record is Null |
| 6 | Vehicle.HitAndRun |
| 7 | Vehicle.Type |
| 8 | Vehicle.BodyType |
| 9 | Vehicle.Vin |
| 10 | Vehicle.IsVinUnknown |
| 11 | Vehicle.ModelYear |
| 12 | Vehicle.IsModelYearUnknown |
| 13 | Vehicle.Make |
| 14 | Vehicle.Model |
| 15 | Vehicle.Color |
| 16 | Vehicle.IsTagMissing |
| 17 | Vehicle.TagState |
| 18 | Vehicle.IsTagStateUnknown |
| 19 | Vehicle.TagNumber |
| 20 | Vehicle.IsTagNumberUnknown |
| 21 | Vehicle.TagYear |
| 22 | Vehicle.IsTagYearUnknown |
| 23 | Vehicle.IsTagNonExpiring |
| 24 | Vehicle.IsOwnerNameSameAsDriver |
| 25 | Vehicle.IsOwnerNameUnknown |
| 26 | Vehicle.OwnerName |
| 27 | Vehicle.IsOwnerAddressSameAsDriver |
| 28 | Vehicle.IsOwnerAddressUnknown |
| 29 | Vehicle.OwnerAddressStreet |
| 30 | Vehicle.OwnerAddressCity |
| 31 | Vehicle.OwnerAddressState |
| 32 | Vehicle.OwnerAddressPostalCode |
| 33 | Vehicle.IsUninsured |
| 34 | Vehicle.LiabilityInsuranceCompany |
| 35 | Vehicle.IsLiabilityInsuranceCompanyUnknown |
| 36 | Vehicle.LiabilityInsuranceCompanyPhoneNumber |
| 37 | Vehicle.IsLiabilityInsuranceCompanyPhoneNumberUnknown |
| 38 | Vehicle.LiabilityInsuranceNaicNumber |
| 39 | Vehicle.IsLiabilityInsuranceNaicNumberUnknown |
| 40 | Vehicle.LiabilityInsurancePolicyNumber |
| 41 | Vehicle.IsLiabilityInsurancePolicyNumberUnknown |
| 42 | Vehicle.LiabilityInsurancePolicyExpirationDate |

43 Vehicle.IsLiabilityInsurancePolicyExpirationDateUnknown
44 Vehicle.DamageExtent
45 Vehicle.InitialPointOfContact
46 Vehicle.DamagedAreas.VehicleDamagedArea
47 Vehicle.TowStatus
48 Vehicle.TowAuthority
49 Vehicle.IsTowServiceUnknown
50 Vehicle.TowService
51 Vehicle.VehicleUsage
52 Vehicle.Maneuver
53 Vehicle.ManeuverReason
54 Vehicle.EmergencyVehicleUsage
55 Vehicle.TravelDirection
56 Vehicle.IsSkidmarkLengthNotApplicable
57 Vehicle.IsSkidmarkLengthUnknown
58 Vehicle.SkidmarkLengthFrontLeft
59 Vehicle.SkidmarkLengthFrontRight
60 Vehicle.SkidmarkLengthRearLeft
61 Vehicle.SkidmarkLengthRearRight
62 Vehicle.IsDistanceTraveledAfterImpactUnknown
63 Vehicle.DistanceTraveledAfterImpact
64 Vehicle.Lighting
65 Vehicle.ContributingCircumstance
66 Vehicle.AutomationSystemLevelPresent
67 Vehicle.AutomationSystemLevelEngaged
68 Vehicle.TrafficwayHovLanePresence
69 Vehicle.TrafficwayHovLaneRelation
70 Reference Data for 71 and 72

71 VehicleTrafficControlDevicesPresent.TrafficControlDevicePresent
VehicleTrafficControlDevicesInoperativeOrMissing.TrafficControlDeviceInoperativeOr
72 Missing
73 Vehicle.TrafficSignalStatus
74 Vehicle.TrafficwayDivision
75 Vehicle.TrafficwayBarrierType
76 Vehicle.RoadwayGrade
77 Vehicle.TotalThroughLanes
78 Vehicle.TotalAuxiliaryLanes
79 Vehicle.RoadwayAlignment
80 Vehicle.TrafficwayTravelDirection
81 Vehicle.IsSpeedLimitUnknown
82 Vehicle.IsSpeedLimitNotApplicable
83 Vehicle.SpeedLimit
84 Vehicle.SequenceOfEvents.Event
85 Vehicle.SequenceOfEvents.IsMostHarmfulEvent

86 Vehicle.VehicleConfiguration
87 Vehicle.HazardousMaterialsPlacardStatus
88 Vehicle.HazardousMaterialsId
89 Vehicle.HazardousMaterialClass
90 Vehicle.CargoBodyType
91 Vehicle.HazardousMaterialRelease
92 VehicleSpecialSizings.VehicleSpecialSizing
93 Vehicle.IsNumberOfAxlesUnknown
94 Vehicle.NumberOfAxles
95 Vehicle.MotorCarrierType
96 Vehicle.MotorCarrierIdentificationType
97 Vehicle.MotorCarrierIdentificationState
98 Vehicle.IsMotorCarrierNameUnknown
99 Vehicle.MotorCarrierName
100 Vehicle.MotorCarrierIdentificationNumber
101 Vehicle.IsMotorCarrierPhoneNumberUnknown
102 Vehicle.MotorCarrierPhoneNumber
103 Vehicle.IsMotorCarrierAddressUnknown
104 Vehicle.MotorCarrierAddressStreet
105 Vehicle.MotorCarrierAddressCity
106 Vehicle.MotorCarrierAddressState
107 Vehicle.MotorCarrierAddressPostalCode
108 Vehicle.WeightRating
109 Vehicle.CommodityHauled
110 VehicleTrailer.VehicleIndex
111 VehicleTrailer.IsVinUnknown
112 VehicleTrailer.Vin
113 VehicleTrailer.IsNumberOfAxlesUnknown
114 VehicleTrailer.NumberOfAxles
115 VehicleTrailer.IsModelYearUnknown
116 VehicleTrailer.ModelYear
117 VehicleTrailer.IsMakeUnknown
118 VehicleTrailer.Make
119 VehicleTrailer.IsModelUnknown
120 VehicleTrailer.Model
121 VehicleTrailer.IsTagMissing
122 VehicleTrailer.TagState
123 VehicleTrailer.IsTagStateUnknown
124 VehicleTrailer.TagNumber
125 VehicleTrailer.IsTagNumberUnknown
126 VehicleTrailer.TagYear
127 VehicleTrailer.IsTagYearUnknown
128 VehicleTrailer.IsTagNonExpiring
129 Vehicle.VehicleLoadPermit

LOUISIANA UNIFORM CRASH REPORT
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DRIVER INFORMATION

| | | | | | | |
|--|-------------|-------------|-------------------|--|--|---|
| Name 5 <input type="checkbox"/> Unknown | | | | Age <input type="checkbox"/> Unknown | Sex 12 100 Female 101 Male 999 Unknown | Race 13 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown |
| 6 First | 7 Middle | 8 Last | 9 Suffix | 10 11 | | |
| Address 15 <input type="checkbox"/> Unknown | | | | Phone Number <input type="checkbox"/> Not Collected | | |
| 16 Street | 17 City | 18 State | 19 Postal Code | 21 | 20 | |
| Incident Responder | | | | Date of Birth 23 <input type="checkbox"/> Unknown | Ethnicity 14 | |
| 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.) | | | | 22 24 | 100 Hispanic 101 Other than Hispanic 999 Unknown | |

DRIVER LICENSE INFORMATION

| | | | | | |
|---|-------------------------|---|---|---|--|
| License Status 25 100 Valid license 004 Suspended 000 Not licensed 999 Unknown 001 Canceled or denied 002 Expired 003 Revoked | | License Class 28 000 None 100 Class A 101 Class B 102 Class C 200 Light commercial/chauffeur (LA class D) 300 Motorcycle only 400 Regular driver license (LA class E) 970 Not applicable | Driver License Type 29 100 Non-CDL driver license 101 Non-CDL restricted driver license (learner's permit, temporary/limited, graduated driver license, etc.) 200 Commercial driver license (CDL) 970 Not applicable | Commercial Driver License Status 30 100 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 26 | License State 27 | | | | |
| Endorsements on License 31 <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 type="checkbox"/> 999 Unknown | | Endorsement Compliance 32 000 No endorsements required for the vehicle 100 Endorsements required, complied with 101 Endorsements required, not complied with 199 Endorsements required, compliance unknown 999 Unknown if endorsements required | | Restrictions on License 33 | |
| | | Alcohol Interlock Presence 34 000 No 970 Not applicable 100 Yes 999 Unknown | | | |

DRIVER SEATING AND SAFETY INFORMATION

| Seating Position 35 | | Restraint Systems Used 36 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|------|---|--|-----|--|--|-----|------|--------|-------|-----|---|-----|-----|-----|-----|---|-----|-----|-----|-----|---|-----|-----|-----|-----|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--|--|
| Standard Vehicle Seats <table><thead><tr><th colspan="5">Front</th></tr><tr><th>Row</th><th>Left</th><th>Middle</th><th>Right</th><th>Unk</th></tr></thead><tbody><tr><td>1</td><td>100</td><td>101</td><td>102</td><td>199</td></tr><tr><td>2</td><td>200</td><td>201</td><td>202</td><td>299</td></tr><tr><td>3</td><td>300</td><td>301</td><td>302</td><td>399</td></tr><tr><td>4</td><td>400</td><td>401</td><td>402</td><td>499</td></tr><tr><td>Oth</td><td>500</td><td>501</td><td>502</td><td>599</td></tr><tr><td>Unk</td><td>600</td><td>601</td><td>602</td><td>699</td></tr></tbody></table> | | Front | | | | | Row | Left | Middle | Right | Unk | 1 | 100 | 101 | 102 | 199 | 2 | 200 | 201 | 202 | 299 | 3 | 300 | 301 | 302 | 399 | 4 | 400 | 401 | 402 | 499 | Oth | 500 | 501 | 502 | 599 | Unk | 600 | 601 | 602 | 699 | Other Seating Positions 700 Unenclosed cargo area 701 Riding on motor vehicle exterior (non-trailing unit) 800 Trailing unit 801 Sleeper section of cab (truck) 898 Other enclosed cargo area 970 Not applicable 999 Unknown | |
| Front | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Row | Left | Middle | Right | Unk | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 100 | 101 | 102 | 199 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 200 | 201 | 202 | 299 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | 300 | 301 | 302 | 399 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | 400 | 401 | 402 | 499 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Oth | 500 | 501 | 502 | 599 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unk | 600 | 601 | 602 | 699 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 001 None used – motor vehicle occupant 002 No helmet 970 Not applicable 980 Other 999 Unknown 100 Booster seat 200 DOT-compliant motorcycle helmet 101 Child restraint system – forward facing 201 Not DOT-compliant motorcycle helmet 102 Child restraint system – rear facing 299 Unknown if DOT-compliant motorcycle helmet 103 Child restraint system – type unknown 104 Lap belt only used 105 Shoulder and lap belt used 106 Shoulder belt only used 107 Stretcher 108 Wheelchair 199 Restraint used – type unknown | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Any indication of improper use? 37 000 No 100 Yes 999 Unknown | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Bags Deployed 40 <input type="checkbox"/> 000 Not deployed <input type="checkbox"/> 001 Not deployed - switch off <input type="checkbox"/> 100 Front <input type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain <input type="checkbox"/> 103 Other (knee, air belt, etc.) <input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 999 Deployment unknown | | Ejection 39 000 Not ejected 100 Ejected, partially 101 Ejected, totally 970 Not applicable 999 Unknown | Extrication 38 000 No 100 Trapped and extricated 101 Trapped but not extricated 999 Unknown | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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MEDICAL INFORMATION

| | | |
|---|---|--|
| Injury Status 41 | Type of Medical Transportation 42 | 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 | 43 |
| | | EMS Response Run # <input type="checkbox"/> Unknown 44 |
| | | 45 |
| Medical Unique Identifier 46 <input type="checkbox"/> Not applicable 47 <input type="checkbox"/> Unknown | | Facility Receiving Patient |
| 48 | | 49 |

DRIVER CONDITION AND CIRCUMSTANCES

| | | | | | |
|--|--|--|--|--|------------|
| Conditions at Time of Crash 50 | Distraction Action 52 | Distraction Source 53 | Speeding Relation 54 | | |
| 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 55 | | | |
| | | 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 56 | Test Status 57 | Alcohol Kit Number 58 | Alcohol Test Type 60 | Alcohol Test Results 61 | BAC |
| 000 No 100 Yes 999 Unknown | 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested | 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 | 62 |
| Suspected Drug Usage 63 | Test Status 64 | Drug Kit Number 65 | Drug Test Type 67 | 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 | | 68 | |

DRIVER ACTIONS

| | | |
|--|---|--|
| Driver Actions at Time of Crash | Avoidance Maneuver 70 | Pre-Collision Stability 69 |
| 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

72

VEHICLE DRIVER DATA

| MAPPING # | DATABASE MAPPING |
|------------------|---|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Driver.Index |
| 5 | Driver.IsNameUnknown |
| 6 | Driver.FirstName |
| 7 | Driver.MiddleName |
| 8 | Driver.LastName |
| 9 | Driver.NameSuffix |
| 10 | Driver.IsAgeUnknown |
| 11 | Driver.Age |
| 12 | Driver.Sex |
| 13 | Driver.Race |
| 14 | Driver.Ethnicity |
| 15 | Driver.IsAddressUnknown |
| 16 | Driver.AddressStreet |
| 17 | Driver.AddressCity |
| 18 | Driver.AddressState |
| 19 | Driver.AddressPostalCode |
| 20 | Driver.IsPhoneNumberUnknown |
| 21 | Driver.PhoneNumber |
| 22 | Driver.IncidentResponder |
| 23 | Driver.IsDateOfBirthUnknown |
| 24 | Driver.DateOfBirth |
| 25 | Driver.DriverLicenseStatus |
| 26 | Driver.DriverLicenseNumber |
| 27 | Driver.DriverLicenseState |
| 28 | Driver.DriverLicenseClass |
| 29 | Driver.DriverLicenseType |
| 30 | Driver.CommercialDriverLicenseStatus.DriverLicenseEndorsement |
| 31 | DriverDriverLicenseEndorsements.DriverLicenseEndorsement |
| 32 | Driver.EndorsementCompliance |
| 33 | DriverDriverLicenseRestrictions.DriverLicenseRestriction |
| 34 | Driver.AlcoholInterlockPresence |
| 35 | Driver.SeatingPosition |
| 36 | Driver.RestraintSystemType |
| 37 | Driver.ImproperRestraintSystemUsage |
| 38 | Driver.Extrication |
| 39 | Driver.Ejection |
| 40 | DriverAirBagDeployments.AirBagDeployment |
| 41 | Driver.InjuryStatus |
| 42 | Driver.MedicalTransportationType |

43 Driver.EmsResponseAgency
44 Driver.IsEmsResponseRunNumberUnknown
45 Driver.EmsResponseRunNumber
46 Driver.IsMedicalUniqueIdentifierNotApplicable
47 Driver.IsMedicalUniqueIdentifierUnknown
48 Driver.MedicalUniqueIdentifier
49 Driver.MedicalFacilityReceivingPatient
50 DriverConditions.Condition
51 DriverConditions.Condition
52 Driver.DistractedAction
53 Driver.DistractedSource
54 Driver.SpeedingRelation
55 Driver.VisionObscurement
56 Driver.AlcoholUseSuspicion
57 Driver.AlcoholTestStatus
58 Driver.IsAlcoholKitNumberUnknown
59 Driver.AlcoholKitNumber
60 Driver.AlcoholTestType
61 Driver.AlcoholTestResult
62 Driver.BloodAlcoholContent
63 Driver.DrugUseSuspicion
64 Driver.DrugTestStatus
65 Driver.IsDrugKitNumberUnknown
66 Driver.DrugKitNumber
67 Driver.DrugTestType
68 DriverDrugTestResults.DrugTestResult
69 Driver.PreCollisionStability
70 Driver.AvoidanceManeuver
71 DriverDriverActions.DriverAction
72 Citation.TicketNumber/Citation.ViolationCode

PASSENGER INFORMATION

MOTOR VEHICLE #5PASSENGER #6

Name7Unknown

891011

1213

Sex14

Race15

AddressUnknown16

17181920

2122

Air Bags Deployed27

Injury Status28

Incident Responder29

Restraint System30

Any indication of improper use?31

Seating Position23

Ejection24

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Type of Medical Transportation32

Medical Unique Identifier3334

EMS Response Agency36

EMS Response Run #3738

Facility Receiving Patient26

MOTOR VEHICLE #PASSENGER #

NameUnknown

Sex

Race

AddressUnknown

Air Bags Deployed

Injury Status

Incident Responder

Restraint System

Used Improperly?

Seating Position

Ejection

Extrication

Type of Medical Transportation

Medical Unique Identifier

EMS Response Agency

EMS Response Run #

Facility Receiving Patient

MOTOR VEHICLE #PASSENGER #

NameUnknown

Sex

Race

AddressUnknown

Air Bags Deployed

Injury Status

Incident Responder

Restraint System

Used Improperly?

Seating Position

Ejection

Extrication

Type of Medical Transportation

Medical Unique Identifier

EMS Response Agency

EMS Response Run #

Facility Receiving Patient

PASSENGER CODES

Injury Status

Ejection

Extrication

Restraint Systems

Seating Position

Race

Ethnicity

Incident Responder

Seating Position

Type of Medical Transportation

Seating Position

CRASH REPORT - PASSENGER INFORMATION

VEHICLE PASSENGER DATA

| MAPPING # | DATABASE MAPPING |
|-----------|--|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Computed from Crash Report Data |
| 5 | Passenger.VehicleIndex |
| 6 | Passenger.Index |
| 7 | Passenger.IsNameUnknown |
| 8 | Passenger.FirstName |
| 9 | Passenger.MiddleName |
| 10 | Passenger.LastName |
| 11 | Passenger.NameSuffix |
| 12 | Passenger.DateOfBirth |
| 13 | Passenger.Age |
| 14 | Passenger.Sex |
| 15 | Passenger.Race |
| 16 | Passenger.IsAddressUnknown |
| 17 | Passenger.AddressStreet |
| 18 | Passenger.AddressCity |
| 19 | Passenger.AddressState |
| 20 | Passenger.AddressPostalCode |
| 21 | Passenger.PhoneNumber |
| 22 | Passenger.Ethnicity |
| 23 | Passenger.SeatingPosition |
| 24 | Passenger.Ejection |
| 25 | Passenger.Extrication |
| 26 | Passenger.MedicalFacilityReceivingPatient |
| 27 | PassengerAirBagDeployments.AirBagDeployment |
| 28 | Passenger.InjuryStatus |
| 29 | Passenger.IncidentResponder |
| 30 | Passenger.RestraintSystemType |
| 31 | Passenger.ImproperRestraintSystemUsage |
| 32 | Passenger.MedicalTransportationType |
| 33 | Passenger.IsMedicalUniqueIdentifierNotApplicable |
| 34 | Passenger.IsMedicalUniqueIdentifierUnknown |
| 35 | Passenger.MedicalUniqueIdentifier |
| 36 | Passenger.EmsResponseAgency |
| 37 | Passenger.IsEmsResponseRunNumberUnknown |
| 38 | Passenger.EmsResponseRunNumber |
| 39 | Passenger.IsPhoneNumberUnknown |

LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

| Non-Motorist # | | Rev. 2023-2 | | Case # | | Page | | of | |
|---|--|---|--|---|--|--|--|--|--|
| NON-MOTORIST INFORMATION | | | | | | | | | |
| Name <input type="checkbox"/> Unknown | | | | Age <input type="checkbox"/> Unknown | | Sex | | Race | |
| <div>6 First</div> <div>7 Middle</div> <div>8 Last</div> <div>9 Suffix</div> | | | | <div>10</div> <div>11</div> | | <div>12</div> <div>100 Female</div> <div>101 Male</div> <div>999 Unknown</div> | | <div>13</div> <div>100 American Indian or Alaska Native</div> <div>101 Asian or Pacific Islander</div> <div>102 Black</div> <div>103 White</div> <div>980 Other</div> <div>999 Unknown</div> | |
| Address <input type="checkbox"/> Unknown | | | | Phone Number <input type="checkbox"/> Not Collected | | Date of Birth <input type="checkbox"/> Unknown | | | |
| <div>15 Street</div> <div>16 City</div> <div>17 State</div> <div>18 Postal Code</div> | | | | <div>19</div> <div>20</div> | | <div>21</div> <div>22</div> <div>23</div> | | | |
| Incident Responder | | | | Date of Birth | | Ethnicity | | | |
| <div>000 No</div> <div>100 EMS</div> <div>101 Fire</div> <div>102 Police</div> <div>103 Tow operator</div> <div>104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)</div> <div>980 Other</div> <div>999 Unknown</div> | | | | <div>21</div> <div>22</div> <div>23</div> | | <div>24</div> <div>100 Hispanic</div> <div>101 Other than Hispanic</div> <div>999 Unknown</div> | | | |
| NON-MOTORIST CIRCUMSTANCES | | | | | | | | | |
| Non-Motorist Type | | Initial | | Location | | Contact Point | | | |
| <div>100 Bicyclist</div> <div>198 Other cyclist</div> <div>200 Pedestrian</div> <div>298 Other pedestrian (wheelchair, person in a building, skater, personal conveyance, etc.)</div> <div>300 Occupant of a non-motor vehicle transportation device</div> <div>999 Unknown</div> | | <div>25</div> <div>26</div> <div>100 Front (12 o'clock)</div> <div>101 Right (3 o'clock)</div> <div>102 Rear (6 o'clock)</div> <div>103 Left (9 o'clock)</div> <div>999 Unknown</div> | | <div>27</div> <div>100 Intersection - marked crosswalk</div> <div>101 Intersection - unmarked crosswalk</div> <div>102 Intersection - other</div> <div>103 Median/crossing island</div> <div>104 Midblock - marked crosswalk</div> <div>105 Shoulder/roadside</div> <div>106 Travel lane - other location</div> <div>200 Signed route (no pavement marking)</div> <div>201 Shared lane markings</div> <div>202 On-street bike lanes</div> <div>203 On-street buffered bike lanes</div> <div>204 Separated bike lanes</div> <div>205 Off-street trails/sidepaths</div> <div>300 Driveway access</div> <div>301 Non-trafficway area</div> <div>302 Shared-use path or trail</div> <div>303 Sidewalk</div> <div>980 Other</div> <div>999 Unknown</div> | | <div>28</div> <div>29</div> <div>30</div> <div>100 Going to or from school (K-12)</div> <div>101 Going to or from transit</div> <div>970 Not applicable</div> <div>999 Unknown</div> <div>31</div> <div>32</div> <div>33</div> <div>34</div> <div>35</div> <div>100 None</div> <div>100 Adjacent to roadway (e.g., shoulder, median)</div> <div>101 Crossing roadway</div> <div>102 Waiting to cross roadway</div> <div>103 Walking/cycling along roadway against traffic (in or adjacent to travel lane)</div> <div>104 Walking/cycling along roadway with traffic (in or adjacent to travel lane)</div> <div>105 Walking/cycling on sidewalk</div> <div>106 Working in trafficway (incident response)</div> <div>198 In roadway -other</div> <div>980 Other</div> <div>999 Unknown</div> <div>100 None (no improper action)</div> <div>100 Dart / dash</div> <div>101 Disabled vehicle related (working on, pushing, leaving/approaching)</div> <div>102 Entering/exiting parked/standing vehicle</div> <div>103 Failure to obey traffic signs, signals, or officer</div> <div>104 Failure to yield right-of-way</div> <div>105 Improper passing</div> <div>106 Improper turn/merge</div> <div>107 Inattentive (talking, eating, etc.)</div> <div>108 In roadway improperly (standing, lying, working, playing)</div> <div>109 Not visible (dark clothing, no lighting, etc.)</div> <div>110 Wrong-way riding or walking</div> <div>980 Other</div> <div>999 Unknown</div> <div>100 Light</div> <div>101 Dark</div> <div>970 Not applicable</div> <div>999 Unknown</div> | | | |
| Struck by Vehicle # | | Origin/Destination | | Safety Equipment | | Clothing Brightness | | | |
| <div>28</div> | | <div>29</div> | | <div>30</div> | | <div>31</div> <div>32</div> <div>33</div> <div>34</div> <div>35</div> <div>100 None</div> <div>100 Helmet</div> <div>101 Protective pads used (elbows, knees, shins, etc.)</div> <div>102 Reflective wear (backpack, triangles, etc.)</div> <div>103 Lighting</div> <div>104 Reflectors</div> <div>980 Other</div> <div>999 Unknown</div> | | | |
| NON-MOTORIST MEDICAL INFORMATION | | | | | | | | | |
| Injury Status | | Type of Medical Transportation | | EMS Response Agency | | EMS Response Run # | | | |
| <div>36</div> <div>100 (K) Fatal Injury</div> <div>101 (A) Suspected Serious Injury</div> <div>102 (B) Suspected Minor Injury</div> <div>103 (C) Possible Injury</div> <div>104 (O) No Apparent Injury</div> | | <div>37</div> <div>000 Not transported</div> <div>100 EMS air</div> <div>101 EMS ground</div> <div>200 Law enforcement</div> <div>980 Other</div> <div>999 Unknown</div> | | <div>38</div> <div>39</div> <div>40</div> <div>41</div> <div>42</div> <div>43</div> <div>44</div> <div>45</div> <div>46</div> <div>47</div> <div>48</div> <div>49</div> <div>50</div> <div>51</div> <div>52</div> <div>53</div> <div>54</div> <div>55</div> <div>56</div> <div>57</div> <div>58</div> <div>59</div> <div>60</div> <div>61</div> <div>62</div> <div>63</div> <div>64</div> <div>65</div> <div>66</div> <div>67</div> <div>68</div> <div>69</div> <div>70</div> <div>71</div> <div>72</div> <div>73</div> <div>74</div> <div>75</div> <div>76</div> <div>77</div> <div>78</div> <div>79</div> <div>80</div> <div>81</div> 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<div>809</div> <div>810</div> <div>811</div> <div>812</div> <div>813</div> <div>814</div> <div>815</div> <div>816</div> <div>817</div> <div>818</div> <div>819</div> <div>820</div> <div>821</div> <div>822</div> <div>823</div> <div>824</div> <div>825</div> <div>826</div> <div>827</div> <div>828</div> <div>829</div> <div>830</div> <div>831</div> <div>832</div> <div>833</div> <div>834</div> <div>835</div> <div>836</div> <div>837</div> <div>838</div> <div>839</div> <div>840</div> <div>841</div> <div>842</div> <div>843</div> <div>844</div> <div>845</div> <div>846</div> <div>847</div> <div>848</div> <div>849</div> <div>850</div> <div>851</div> <div>852</div> <div>853</div> <div>854</div> <div>855</div> <div>856</div> <div>857</div> <div>858</div> <div>859</div> <div>860</div> <div>861</div> <div>862</div> <div>863</div> <div>864</div> <div>865</div> <div>866</div> <div>867</div> <div>868</div> <div>869</div> <div>870</div> <div>871</div> <div>872</div> <div>873</div> <div>874</div> 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<div>941</div> <div>942</div> <div>943</div> <div>944</div> <div>945</div> <div>946</div> <div>947</div> <div>948</div> <div>949</div> <div>950</div> <div>951</div> <div>952</div> <div>953</div> <div>954</div> <div>955</div> <div>956</div> <div>957</div> <div>958</div> <div>959</div> <div>960</div> <div>961</div> <div>962</div> <div>963</div> <div>964</div> <div>965</div> <div>966</div> <div>967</div> <div>968</div> <div>969</div> <div>970</div> <div>971</div> <div>972</div> <div>973</div> <div>974</div> <div>975</div> <div>976</div> <div>977</div> <div>978</div> <div>979</div> <div>980</div> <div>981</div> <div>982</div> <div>983</div> <div>984</div> <div>985</div> <div>986</div> <div>987</div> <div>988</div> <div>989</div> <div>990</div> <div>991</div> <div>992</div> <div>993</div> <div>994</div> <div>995</div> <div>996</div> <div>997</div> <div>998</div> <div>999</div> <div>1000</div> <div>1001</div> <div>1002</div> <div>1003</div> <div>1004</div> <div>1005</div> <div>1006</div> <div>1007</div> <div>1008</div> <div>1009</div> <div>1010</div> <div>1011</div> <div>1012</div> <div>1013</div> <div>1014</div> <div>1015</div> <div>1016</div> <div>1017</div> <div>1018</div> <div>1019</div> <div>1020</div> <div>1021</div> <div>1022</div> <div>1023</div> <div>1024</div> <div>1025</div> <div>1026</div> <div>1027</div> <div>1028</div> <div>1029</div> <div>1030</div> <div>1031</div> <div>1032</div> <div>1033</div> <div>1034</div> <div>1035</div> <div>1036</div> <div>1037</div> <div>1038</div> <div>1039</div> <div>1040</div> <div>1041</div> <div>1042</div> <div>1043</div> <div>1044</div> <div>1045</div> <div>1046</div> <div>1047</div> <div>1048</div> <div>1049</div> <div>1050</div> <div>1051</div> <div>1052</div> <div>1053</div> <div>1054</div> <div>1055</div> <div>1056</div> <div>1057</div> <div>1058</div> <div>1059</div> <div>1060</div> <div>1061</div> <div>1062</div> <div>1063</div> <div>1064</div> <div>1065</div> <div>1066</div> <div>1067</div> <div>1068</div> <div>1069</div> <div>1070</div> <div>1071</div> <div>1072</div> <div>1073</div> <div>1074</div> <div>1075</div> <div>1076</div> <div>1077</div> <div>1078</div> <div>1079</div> <div>1080</div> <div>1081</div> <div>1082</div> <div>1083</div> <div>1084</div> <div>1085</div> <div>1086</div> <div>1087</div> <div>1088</div> <div>1089</div> <div>1090</div> <div>1091</div> <div>1092</div> <div>1093</div> <div>1094</div> <div>1095</div> <div>1096</div> <div>1097</div> <div>1098</div> <div>1099</div> <div>1100</div> <div>1101</div> <div>1102</div> <div>1103</div> <div>1104</div> <div>1105</div> <div>1106</div> <div>1107</div> <div>1108</div> <div>1109</div> <div>1110</div> <div>1111</div> <div>1112</div> <div>1113</div> <div>1114</div> <div>1115</div> <div>1116</div> <div>1117</div> <div>1118</div> <div>1119</div> <div>1120</div> <div>1121</div> <div>1122</div> <div>1123</div> <div>1124</div> <div>1125</div> <div>1126</div> <div>1127</div> <div>1128</div> <div>1129</div> <div>1130</div> <div>1131</div> <div>1132</div> <div>1133</div> <div>1134</div> <div>1135</div> <div>1136</div> <div>1137</div> <div>1138</div> <div>1139</div> <div>1140</div> <div>1141</div> <div>1142</div> <div>1143</div> <div>1144</div> <div>1145</div> <div>1146</div> <div>1147</div> <div>1148</div> <div>1149</div> <div>1150</div> <div>1151</div> <div>1152</div> <div>1153</div> <div>1154</div> <div>1155</div> <div>1156</div> <div>1157</div> <div>1158</div> <div>1159</div> <div>1160</div> <div>1161</div> <div>1162</div> <div>1163</div> <div>1164</div> <div>1165</div> <div>1166</div> <div>1167</div> <div>1168</div> <div>1169</div> <div>1170</div> <div>1171</div> <div>1172</div> <div>1173</div> <div>1174</div> <div>1175</div> <div>1176</div> <div>1177</div> <div>1178</div> <div>1179</div> <div>1180</div> <div>1181</div> <div>1182</div> <div>1183</div> <div>1184</div> <div>1185</div> <div>1186</div> <div>1187</div> <div>1188</div> <div>1189</div> <div>1190</div> <div>1191</div> <div>1192</div> <div>1193</div> <div>1194</div> <div>1195</div> <div>1196</div> <div>1197</div> <div>1198</div> <div>1199</div> <div>1200</div> <div>1201</div> <div>1202</div> <div>1203</div> <div>1204</div> <div>1205</div> <div>1206</div> <div>1207</div> <div>1208</div> <div>1209</div> <div>1210</div> <div>1211</div> <div>1212</div> <div>1213</div> <div>1214</div> <div>1215</div> <div>1216</div> <div>1217</div> <div>1218</div> <div>1219</div> <div>1220</div> <div>1221</div> <div>1222</div> <div>1223</div> <div>1224</div> <div>1225</div> <div>1226</div> <div>1227</div> <div>1228</div> <div>1229</div> <div>1230</div> <div>1231</div> <div>1232</div> <div>1233</div> <div>1234</div> <div>1235</div> <div>1236</div> <div>1237</div> <div>1238</div> <div>1239</div> <div>1240</div> <div>1241</div> <div>1242</div> <div>1243</div> <div>1244</div> <div>1245</div> <div>1246</div> <div>1247</div> <div>1248</div> <div>1249</div> <div>1250</div> <div>1251</div> <div>1252</div> <div>1253</div> <div>1254</div> <div>1255</div> <div>1256</div> <div>1257</div> <div>1258</div> <div>1259</div> <div>1260</div> <div>1261</div> <div>1262</div> <div>1263</div> <div>1264</div> <div>1265</div> <div>1266</div> <div>1267</div> <div>1268</div> <div>1269</div> <div>1270</div> <div>1271</div> <div>1272</div> <div>1273</div> <div></div> | | | | | |

NON-MOTORIST DATA

| MAPPING # | DATABASE MAPPING |
|------------------|---|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | NonMotorist.Index |
| 5 | NonMotorist.IsNameUnknown |
| 6 | NonMotorist.FirstName |
| 7 | NonMotorist.MiddleName |
| 8 | NonMotorist.LastName |
| 9 | NonMotorist.NameSuffix |
| 10 | NonMotorist.IsAgeUnknown |
| 11 | NonMotorist.Age |
| 12 | NonMotorist.Sex |
| 13 | NonMotorist.Race |
| 14 | NonMotorist.IsAddressUnknown |
| 15 | NonMotorist.AddressStreet |
| 16 | NonMotorist.AddressCity |
| 17 | NonMotorist.AddressState |
| 18 | NonMotorist.AddressPostalCode |
| 19 | NonMotorist.IsPhoneNumberUnknown |
| 20 | NonMotorist.PhoneNumber |
| 21 | NonMotorist.IncidentResponder |
| 22 | NonMotorist.IsDateOfBirthUnknown |
| 23 | NonMotorist.DateOfBirth |
| 24 | NonMotorist.Ethnicity |
| 25 | NonMotorist.Type |
| 26 | NonMotorist.InitialContactPoint |
| 27 | NonMotorist.Location |
| 28 | NonMotorist.StrikingVehicleId |
| 29 | NonMotorist.OriginOrDestination |
| 30 | NonMotoristSafetyEquipment.SafetyEquipment |
| 31 | NonMotorist.ActionPriorToCrash |
| 32 | NonMotoristNonMotoristContributingCircumstances.NonMotoristContributingCircumstance |
| 33 | NonMotoristNonMotoristContributingCircumstances.NonMotoristContributingCircumstance |
| 34 | NonMotorist.UpperClothingBrightness |
| 35 | NonMotorist.LowerClothingBrightness |
| 36 | NonMotorist.InjuryStatus |
| 37 | NonMotorist.MedicalTransportationType |
| 38 | NonMotorist.EmsResponseAgencyDescription |
| 39 | NonMotorist.IsEmsResponseRunNumberUnknown |
| 40 | NonMotorist.EmsResponseRunNumber |
| 41 | NonMotorist.IsMedicalUniquelIdentifierNotApplicable |
| 42 | NonMotorist.IsMedicalUniquelIdentifierUnknown |

43 NonMotorist.MedicalUniquelIdentifier
44 NonMotorist.MedicalFacilityReceivingPatientDescription
45 NonMotorist.ConditionsDescription
46 NonMotorist.ConditionsDescription
47 NonMotorist.DistractioAction
48 NonMotorist.DistractioSource
49 NonMotorist.AlcoholUseSuspicion
50 NonMotorist.AlcoholTestStatus
51 NonMotorist.IsAlcoholKitNumberUnknown
52 NonMotorist.AlcoholKitNumber
53 NonMotorist.AlcoholTestType
54 NonMotorist.AlcoholTestResult
55 NonMotorist.BloodAlcoholContent
56 NonMotorist.DrugUseSuspicion
57 NonMotorist.DrugTestStatus
58 NonMotorist.IsDrugKitNumberUnknown
59 NonMotorist.DrugKitNumber
60 NonMotorist.DrugTestType
61 NonMotorist.DrugTestResultsDescription

LOUISIANA UNIFORM CRASH REPORT
NON-VEHICULAR PROPERTY DAMAGE

Rev. 2023-2

Case # 3 Page of

NON-VEHICULAR PROPERTY DAMAGE

PROPERTY # 4

| | | | |
|--|-----------------------------------|---|--|
| Property Type 5 | Damage Severity 6 | Owner Name 7 <input type="checkbox"/> Unknown 8 | Owner Phone Number 10 <input type="checkbox"/> Not Collected 9 |
| Owner Address 11 <input type="checkbox"/> Unknown | | | |
| 12 <small>Street</small> | | 13 <small>City</small> | 14 15 <small>State</small> <small>Postal Code</small> |

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 | | | |
| <small>Street</small> | | <small>City</small> | <small>State</small> <small>Postal Code</small> |

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 | | | |
| <small>Street</small> | | <small>City</small> | <small>State</small> <small>Postal Code</small> |

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 | | | |
| <small>Street</small> | | <small>City</small> | <small>State</small> <small>Postal Code</small> |

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 | | | |
| <small>Street</small> | | <small>City</small> | <small>State</small> <small>Postal Code</small> |

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 | | | |
| <small>Street</small> | | <small>City</small> | <small>State</small> <small>Postal Code</small> |

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 | | | |
| <small>Street</small> | | <small>City</small> | <small>State</small> <small>Postal Code</small> |

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 | | | |
| <small>Street</small> | | <small>City</small> | <small>State</small> <small>Postal Code</small> |

PROPERTY DAMAGE CODES

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

NON-VEHICULAR PROPERTY DAMAGE DATA

| MAPPING # | DATABASE MAPPING |
|------------------|---|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | DamagedNonVehicularProperty.PropertyType |
| 5 | DamagedNonVehicularProperty.DamageSeverity |
| 6 | DamagedNonVehicularProperty.OwnerName |
| 7 | DamagedNonVehicularProperty.IsOwnerNameUnknown |
| 8 | DamagedNonVehicularProperty.OwnerPhoneNumber |
| 9 | DamagedNonVehicularProperty.IsOwnerPhoneNumberUnknown |
| 10 | DamagedNonVehicularProperty.IsOwnerAddressUnknown |
| 11 | DamagedNonVehicularProperty.OwnerAddressStreet |
| 12 | DamagedNonVehicularProperty.OwnerAddressCity |
| 13 | DamagedNonVehicularProperty.OwnerAddressState |
| 14 | DamagedNonVehicularProperty.OwnerAddressPostalCode |
| 15 | DamagedNonVehicularProperty.Index |

LOUISIANA UNIFORM CRASH REPORT
TRAIN SUPPLEMENT

| | | | | | |
|--|---|--|--|--|--|
| Train # 4 | | Rev. 2023-2 | | Case # 3 | Page of |
| TRAIN INFORMATION | | | | | |
| Train Type 100 Railroad train 101 Streetcar | ID # 6 8 | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown 7 | Lead Engine # 9 10 | <input type="checkbox"/> Unknown Serial # 11 12 | Present Equipment 13 <input type="checkbox"/> 000 None <input type="checkbox"/> 100 Headlight functional <input type="checkbox"/> 101 Ditch lights functional <input type="checkbox"/> 102 Horn functional <input type="checkbox"/> 103 Bell functional <input type="checkbox"/> 104 Event data recorder equipped |
| Make <input type="checkbox"/> Unknown 15 | Type <input type="checkbox"/> Unknown 16 17 | # of Engines <input type="checkbox"/> Unknown 19 | # of Cars <input type="checkbox"/> Unknown 21 | Data Recorder Speed 23 <input type="checkbox"/> Pending 22 | |
| TRACK INFORMATION | | | | | |
| DOT Crossing # 25 26 27 | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown | Crossing Surface 24 Material 100 Rubber mat 101 Asphalt 102 Wood 103 Concrete 104 Gravel | Present Warning Devices 28 <input 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 | Advance Warning Devices 29 <input 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 | Active Warning Devices 30 <input 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 |
| Sets of Tracks 31 | Speed Limit 32 | Crossing Type 33 100 Public 101 Private | | | |
| COLLISION INFORMATION | | | | | |
| Train in Motion 34 000 No 100 Yes | Crossing Vehicle Interaction 35 100 Stalled on crossing 101 Stopped on crossing 102 Moving over crossing 103 Trapped on crossing | Struck Car # <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown 37 38 39 | Struck Car Type <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown 40 41 42 | Distance Traveled After Impact 46 49 47 feet 48 miles | Estimated Speed Before Braking 50 |
| Collision Type 36 100 Frontal 101 Side/backing | | Struck Car Position 43 44 45 | <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown | | |
| Hazardous Materials Placard 51 000 Had no placard and not carrying hazardous materials 001 Had a placard, not carrying hazardous materials 100 Carried hazardous material that required placarding 200 Carried hazardous materials without placard 999 Unknown | | Hazardous Material Class 53 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 | Hazardous Materials Released from Train Cargo Compartment 54 000 No, hazardous materials not released 100 Yes, hazardous materials released 970 Not applicable | | |
| Hazardous Material ID 52 | | | | | |
| TRAIN OPERATOR | | | | | |
| Name 55 56 <input type="checkbox"/> Unknown | Address <input type="checkbox"/> Unknown 57 58 59 60 61 Street City State Postal Code | | | | |
| TRACK OWNER | | | | | |
| Name 62 63 <input type="checkbox"/> Unknown | Address <input type="checkbox"/> Unknown 64 65 66 67 68 Street City State Postal Code | | | | |
| TRAIN ENGINEER | | | | | |
| Name 69 70 First | <input type="checkbox"/> This train had no engineer 71 Middle 72 Last | | Certification Number <input type="checkbox"/> Unknown 73 74 75 | Race 76 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown | |
| Address <input type="checkbox"/> Unknown 77 78 79 Street City State Postal Code | | | Phone Number <input type="checkbox"/> Not Collected 80 81 82 83 | | |
| Incident Responder 000 No 100 EMS 101 Fire 102 Police 103 Tow operator 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.) 980 Other 999 Unknown | | | Sex 84 100 Female 101 Male 999 Unknown | Age <input type="checkbox"/> Unknown 85 86 87 | Date of Birth <input type="checkbox"/> Unknown 88 89 |
| Injury Status 91 100 (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 92 000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown | | |
| Medical Unique Identifier 96 97 98 | | | EMS Response Agency 93 EMS Response Run # <input type="checkbox"/> Unknown 94 95 Facility Receiving Patient 99 | | |

LOUISIANA UNIFORM CRASH REPORT
TRAIN SUPPLEMENT

| | | | | | | | | | |
|---|--|---|--|--|--|---|---------------|---|--|
| Train # 4 | | Rev. 2023-2 | | Case # | 3 | Page | | of | |
| TRAIN CONDUCTOR | | | | | | | | | |
| Name 100 <input type="checkbox"/> Unknown <input type="checkbox"/> This train had no conductor | | | | Race 105 | | | | | |
| 101 | | 102 | | 103 | | 104 | | 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 999 Unknown 980 Other | |
| First | | Middle | | Last | | Suffix | | | |
| Address <input type="checkbox"/> Unknown 106 | | | | | | Phone Number <input type="checkbox"/> Not Collected | | | |
| 107 | | 108 | | 109 | | 110 | | 111 | |
| Street | | City | | State | | Postal Code | | | |
| Incident Responder 113 | | | | Sex 114 | Age <input type="checkbox"/> Unknown 115 | Date of Birth <input type="checkbox"/> Unknown 117 | Ethnicity 119 | | |
| 000 No 100 EMS 101 Fire | | | | 102 Police 103 Tow operator 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.) | | 100 Female 101 Male 999 Unknown | | 100 Hispanic 101 Other than Hispanic 999 Unknown | |
| Injury Status 120 | | Type of Medical Transportation 121 | | 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 | | 122 | | | | | |
| | | | | EMS Response Run # <input type="checkbox"/> Unknown 123 | | | | | |
| | | | | 124 | | | | | |
| Medical Unique Identifier 125 <input type="checkbox"/> Not applicable <input type="checkbox"/> Unknown 126 | | | | Facility Receiving Patient 128 | | | | | |

| | | | | | | | | | |
|---|--|---|--|--|--|---|---------------|---|--|
| PASSENGER INFORMATION | | | | | | | | | |
| PASSENGER # 129 | | | | | | | | | |
| Name 130 <input type="checkbox"/> Unknown | | | | Race 135 | | | | | |
| 131 | | 132 | | 133 | | 134 | | 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 999 Unknown 980 Other | |
| First | | Middle | | Last | | Suffix | | | |
| Address <input type="checkbox"/> Unknown 136 | | | | | | Phone Number <input type="checkbox"/> Not Collected | | | |
| 137 | | 138 | | 139 | | 140 | | 141 | |
| Street | | City | | State | | Postal Code | | | |
| Incident Responder 143 | | | | Sex 144 | Age <input type="checkbox"/> Unknown 145 | Date of Birth <input type="checkbox"/> Unknown 147 | Ethnicity 149 | | |
| 000 No 100 EMS 101 Fire | | | | 102 Police 103 Tow operator 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.) | | 100 Female 101 Male 999 Unknown | | 100 Hispanic 101 Other than Hispanic 999 Unknown | |
| Injury Status 150 | | Type of Medical Transportation 151 | | 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 | | 152 | | | | | |
| | | | | EMS Response Run # <input type="checkbox"/> Unknown 153 | | | | | |
| | | | | 154 | | | | | |
| Medical Unique Identifier 155 <input type="checkbox"/> Not applicable <input type="checkbox"/> Unknown 156 | | | | Facility Receiving Patient 158 | | | | | |

| | | | | | | | | | |
|---|--|---|--|--|--------------------------------------|---|-----------|---|--|
| PASSENGER # | | | | | | | | | |
| Name <input type="checkbox"/> Unknown | | | | Race | | | | | |
| | | | | | | | | 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 999 Unknown 980 Other | |
| First | | Middle | | Last | | Suffix | | | |
| Address <input type="checkbox"/> Unknown | | | | | | Phone Number <input type="checkbox"/> Not Collected | | | |
| Street | | City | | State | | Postal Code | | | |
| Incident Responder | | | | Sex | Age <input type="checkbox"/> Unknown | Date of Birth <input type="checkbox"/> Unknown | Ethnicity | | |
| 000 No 100 EMS 101 Fire | | | | 102 Police 103 Tow operator 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.) | | 100 Female 101 Male 999 Unknown | | 100 Hispanic 101 Other than Hispanic 999 Unknown | |
| Injury Status | | Type of Medical Transportation | | 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 | | EMS Response Run # <input type="checkbox"/> Unknown | | | | | |
| | | | | | | | | | |
| Medical Unique Identifier <input type="checkbox"/> Not applicable <input type="checkbox"/> Unknown | | | | Facility Receiving Patient | | | | | |

Total # of Train Passengers
159

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PASSENGER INFORMATION

TRAIN #4PASSENGER #129

Name130☐ Unknown

Race135
100 American Indian or Alaska Native
102 Black
103 White
101 Asian or Pacific Islander
999 Unknown

131First132Middle133Last134Suffix

Address136☐ Unknown

Phone Number☐ Not Collected

137Street138City139State140Postal Code

142141

Incident Responder
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.)

143Sex144Age☐ Unknown146145148147149Ethnicity
100 Female
101 Male
999 Unknown
100 Hispanic
101 Other than Hispanic
999 Unknown

Injury Status150Type of Medical Transportation151

EMS Response Agency
152
EMS Response Run #☐ Unknown153
154

Medical Unique Identifier155☐ Not applicable☐ Unknown156

Facility Receiving Patient
158

TRAIN #PASSENGER #

Name☐ Unknown

Race
100 American Indian or Alaska Native
102 Black
103 White
101 Asian or Pacific Islander
999 Unknown

Address☐ Unknown

Phone Number☐ Not Collected

StreetCityStatePostal Code

Incident Responder
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.)

SexAge☐ UnknownDate of Birth☐ UnknownEthnicity
100 Female
101 Male
999 Unknown
100 Hispanic
101 Other than Hispanic
999 Unknown

Injury StatusType of Medical Transportation

EMS Response Agency
EMS Response Run #☐ Unknown

Medical Unique Identifier☐ Not applicable☐ Unknown

Facility Receiving Patient

TRAIN #PASSENGER #

Name☐ Unknown

Race
100 American Indian or Alaska Native
102 Black
103 White
101 Asian or Pacific Islander
999 Unknown

Address☐ Unknown

Phone Number☐ Not Collected

StreetCityStatePostal Code

Incident Responder
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.)

SexAge☐ UnknownDate of Birth☐ UnknownEthnicity
100 Female
101 Male
999 Unknown
100 Hispanic
101 Other than Hispanic
999 Unknown

Injury StatusType of Medical Transportation

EMS Response Agency
EMS Response Run #☐ Unknown

Medical Unique Identifier☐ Not applicable☐ Unknown

Facility Receiving Patient

TRAIN #PASSENGER #

Name☐ Unknown

Race
100 American Indian or Alaska Native
102 Black
103 White
101 Asian or Pacific Islander
999 Unknown

Address☐ Unknown

Phone Number☐ Not Collected

StreetCityStatePostal Code

Incident Responder
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.)

SexAge☐ UnknownDate of Birth☐ UnknownEthnicity
100 Female
101 Male
999 Unknown
100 Hispanic
101 Other than Hispanic
999 Unknown

Injury StatusType of Medical Transportation

EMS Response Agency
EMS Response Run #☐ Unknown

Medical Unique Identifier☐ Not applicable☐ Unknown

Facility Receiving Patient

TRAIN DATA

| MAPPING # | DATABASE MAPPING |
|-----------|--|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Train.Index |
| 5 | Train.TrainType |
| 6 | Train.IsTrainIdNumberNotApplicable |
| 7 | Train.IsTrainIdNumberUnknown |
| 8 | Train.TrainIdNumber |
| 9 | Train.IsLeadEngineNumberUnknown |
| 10 | Train.LeadEngineNumber |
| 11 | Train.IsSerialNumberUnknown |
| 12 | Train.SerialNumber |
| 13 | TrainEquipmentStatuses.EquipmentStatus |
| 14 | Train.IsMakeUnknown |
| 15 | Train.Make |
| 16 | Train.IsTypeUnknown |
| 17 | Train.Type |
| 18 | Train.IsNumberOfEnginesUnknown |
| 19 | Train.NumberOfEngines |
| 20 | Train.IsNumberOfCarsUnknown |
| 21 | Train.NumberOfCars |
| 22 | Train.IsDataRecorderSpeedPending |
| 23 | Train.DataRecorderSpeed |
| 24 | Train.CrossingSurfaceMaterial |
| 25 | Train.IsDotCrossingNumberNotApplicable |
| 26 | Train.IsDotCrossingNumberUnknown |
| 27 | Train.DotCrossingNumber |
| 28 | TrainWarningDevices.WarningDevice |
| 29 | TrainAdvanceWarningDevices.AdvanceWarningDevice |
| 30 | TrainActiveWarningDeviceStatuses.ActiveWarningDeviceStatus |
| 31 | Train.SetsOfTracks |
| 32 | Train.TrackSpeedLimit |
| 33 | Train.CrossingType |
| 34 | Train.Motion |
| 35 | Train.CrossingVehicleInteraction |
| 36 | Train.CollisionType |
| 37 | Train.IsStruckCarNumberNotApplicable |
| 38 | Train.IsStruckCarNumberUnknown |
| 39 | Train.StruckCarNumber |
| 40 | Train.IsStruckCarTypeNotApplicable |
| 41 | Train.IsStruckCarTypeUnknown |
| 42 | Train.StruckCarType |

43 Train.IsStruckCarPositionNotApplicable
44 Train.IsStruckCarPositionUnknown
45 Train.StruckCarPosition
46 Train.IsDistanceTraveledAfterImpactNotApplicable
47 Train.DistanceTraveledAfterImpactUnit
48 Train.DistanceTraveledAfterImpactUnit
49 Train.DistanceTraveledAfterImpact
50 Train.EstimatedSpeedBeforeBraking
51 Train.HazardousMaterialsPlacardStatus
52 Train.HazardousMaterialsId
53 Train.HazardousMaterialClass
54 Train.HazardousMaterialRelease
55 Train.IsOperatorNameUnknown
56 Train.OperatorName
57 Train.IsOperatorAddressUnknown
58 Train.OperatorAddressStreet
59 Train.OperatorAddressCity
60 Train.OperatorAddressState
61 Train.OperatorAddressPostalCode
62 Train.IsTrackOwnerNameUnknown
63 Train.TrackOwnerName
64 Train.IsTrackOwnerAddressUnknown
65 Train.TrackOwnerAddressStreet
66 Train.TrackOwnerAddressCity
67 Train.TrackOwnerAddressState
68 Train.TrackOwnerAddressPostalCode
69 TrainEngineer.IsNameUnknown
70 TrainEngineer.FirstName
71 TrainEngineer.MiddleName
72 TrainEngineer.LastName
73 TrainEngineer.NameSuffix
74 TrainEngineer.IsCertificationNumberUnknown
75 TrainEngineer.CertificationNumber
76 TrainEngineer.Race
77 TrainEngineer.IsAddressUnknown
78 TrainEngineer.AddressStreet
79 TrainEngineer.AddressCity
80 TrainEngineer.AddressState
81 TrainEngineer.AddressPostalCode
82 TrainEngineer.IsPhoneNumberUnknown
83 TrainEngineer.PhoneNumber
84 TrainEngineer.IncidentResponder
85 TrainEngineer.Sex
86 TrainEngineer.IsAgeUnknown
87 TrainEngineer.Age

88 TrainEngineer.IsDateOfBirthUnknown
89 TrainEngineer.DateOfBirth
90 TrainEngineer.Ethnicity
91 TrainEngineer.InjuryStatus
92 TrainEngineer.MedicalTransportationType
93 TrainEngineer.EmsResponseAgency
94 TrainEngineer.IsEmsResponseRunNumberUnknown
95 TrainEngineer.EmsResponseRunNumber
96 TrainEngineer.IsMedicalUniqueIdentifierNotApplicable
97 TrainEngineer.IsMedicalUniqueIdentifierUnknown
98 TrainEngineer.MedicalUniqueIdentifier
99 TrainEngineer.MedicalFacilityReceivingPatient
100 TrainConductor.IsNameUnknown
101 TrainConductor.FirstName
102 TrainConductor.MiddleName
103 TrainConductor.LastName
104 TrainConductor.NameSuffix
105 TrainConductor.Race
106 TrainConductor.IsAddressUnknown
107 TrainConductor.AddressStreet
108 TrainConductor.AddressCity
109 TrainConductor.AddressState
110 TrainConductor.AddressPostalCode
111 TrainConductor.IsPhoneNumberUnknown
112 TrainConductor.PhoneNumber
113 TrainConductor.IncidentResponder
114 TrainConductor.Sex
115 TrainConductor.IsAgeUnknown
116 TrainConductor.Age
117 TrainConductor.IsDateOfBirthUnknown
118 TrainConductor.DateOfBirth
119 TrainConductor.Ethnicity
120 TrainConductor.InjuryStatus
121 TrainConductor.MedicalTransportationType
122 TrainConductor.EmsResponseAgency
123 TrainConductor.IsEmsResponseRunNumberUnknown
124 TrainConductor.EmsResponseRunNumber
125 TrainConductor.IsMedicalUniqueIdentifierNotApplicable
126 TrainConductor.IsMedicalUniqueIdentifierUnknown
127 TrainConductor.MedicalUniqueIdentifier
128 TrainConductor.MedicalFacilityReceivingPatient
129 TrainPassenger.Index
130 TrainPassenger.IsNameUnknown
131 TrainPassenger.FirstName
132 TrainPassenger.MiddleName

133 TrainPassenger.LastName
134 TrainPassenger.NameSuffix
135 TrainPassenger.Race
136 TrainPassenger.IsAddressUnknown
137 TrainPassenger.AddressStreet
138 TrainPassenger.AddressCity
139 TrainPassenger.AddressState
140 TrainPassenger.AddressPostalCode
141 TrainPassenger.IsPhoneNumberUnknown
142 TrainPassenger.PhoneNumber
143 TrainPassenger.IncidentResponder
144 TrainPassenger.Sex
145 TrainPassenger.IsAgeUnknown
146 TrainPassenger.Age
147 TrainPassenger.IsDateOfBirthUnknown
148 TrainPassenger.DateOfBirth
149 TrainPassenger.Ethnicity
150 TrainPassenger.InjuryStatus
151 TrainPassenger.MedicalTransportationType
152 TrainPassenger.EmsResponseAgency
153 TrainPassenger.IsEmsResponseRunNumberUnknown
154 TrainPassenger.EmsResponseRunNumber
155 TrainPassenger.IsMedicalUniqueIdentifierNotApplicable
156 TrainPassenger.IsMedicalUniqueIdentifierUnknown
157 TrainPassenger.MedicalUniqueIdentifier
158 TrainPassenger.MedicalFacilityReceivingPatient
159 Computed from Crash Report Data

WITNESSES

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Total # of Witnesses
4

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| WITNESSES | | | | | | | | | | | |
|--|--|--|--|-------------|--|----------------------------------|--|------------------------------|--|--|--|
| WITNESS # 5 | | | | | | WITNESS # | | | | | |
| Name 6 First 7 Middle 8 Last 9 Suffix | | | | | | Name First Middle Last Suffix | | | | | |
| Address 10 | | | | | | Address | | | | | |
| City 11 | | | | State 12 | | Postal Code 13 | | City State Postal Code | | | |
| Phone Number 14 | | | | Age 15 | | Sex 16 | | Phone Number Age Sex | | | |
| WITNESS # | | | | | | WITNESS # | | | | | |
| Name First Middle Last Suffix | | | | | | Name First Middle Last Suffix | | | | | |
| Address | | | | | | Address | | | | | |
| City | | | | State | | Postal Code | | City State Postal Code | | | |
| Phone Number | | | | Age | | Sex | | Phone Number Age Sex | | | |
| WITNESS # | | | | | | WITNESS # | | | | | |
| Name First Middle Last Suffix | | | | | | Name First Middle Last Suffix | | | | | |
| Address | | | | | | Address | | | | | |
| City | | | | State | | Postal Code | | City State Postal Code | | | |
| Phone Number | | | | Age | | Sex | | Phone Number Age Sex | | | |
| WITNESS # | | | | | | WITNESS # | | | | | |
| Name First Middle Last Suffix | | | | | | Name First Middle Last Suffix | | | | | |
| Address | | | | | | Address | | | | | |
| City | | | | State | | Postal Code | | City State Postal Code | | | |
| Phone Number | | | | Age | | Sex | | Phone Number Age Sex | | | |
| WITNESS # | | | | | | WITNESS # | | | | | |
| Name First Middle Last Suffix | | | | | | Name First Middle Last Suffix | | | | | |
| Address | | | | | | Address | | | | | |
| City | | | | State | | Postal Code | | City State Postal Code | | | |
| Phone Number | | | | Age | | Sex | | Phone Number Age Sex | | | |
| WITNESS # | | | | | | WITNESS # | | | | | |
| Name First Middle Last Suffix | | | | | | Name First Middle Last Suffix | | | | | |
| Address | | | | | | Address | | | | | |
| City | | | | State | | Postal Code | | City State Postal Code | | | |
| Phone Number | | | | Age | | Sex | | Phone Number Age Sex | | | |
| WITNESS # | | | | | | WITNESS # | | | | | |
| Name First Middle Last Suffix | | | | | | Name First Middle Last Suffix | | | | | |
| Address | | | | | | Address | | | | | |
| City | | | | State | | Postal Code | | City State Postal Code | | | |
| Phone Number | | | | Age | | Sex | | Phone Number Age Sex | | | |

WITNESS DATA

| MAPPING # | DATABASE MAPPING |
|-----------|---------------------------------|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Computed from Crash Report Data |
| 5 | Witness.Index |
| 6 | Witness.FirstName |
| 7 | Witness.MiddleName |
| 8 | Witness.LastName |
| 9 | Witness.NameSuffix |
| 10 | Witness.AddressStreet |
| 11 | Witness.AddressCity |
| 12 | Witness.AddressState |
| 13 | Witness.AddressPostalCode |
| 14 | Witness.PhoneNumber |
| 15 | Witness.Age |
| 16 | Witness.Sex |

Scene #

4

DIAGRAM

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CRASH DIAGRAM

5

DIAGRAM DATA

| MAPPING # | DATABASE MAPPING |
|------------------|-------------------------|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Attachment.Index |
| 5 | AttachmentData.Data |

LOUISIANA UNIFORM CRASH REPORT
NARRATIVE

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CRASH NARRATIVE

4

CRASH NARRATIVE DATA

| MAPPING # | DATABASE MAPPING |
|-----------|-----------------------|
| | Report Reference |
| 1 | Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Crash.Narrative |

LOUISIANA UNIFORM CRASH REPORT
PHOTOS

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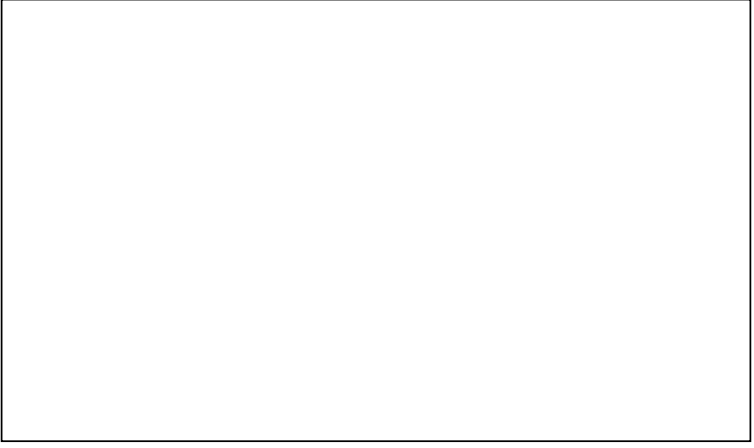
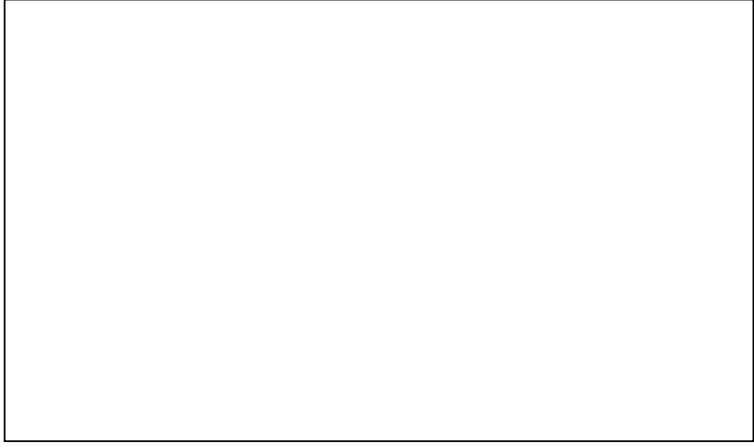
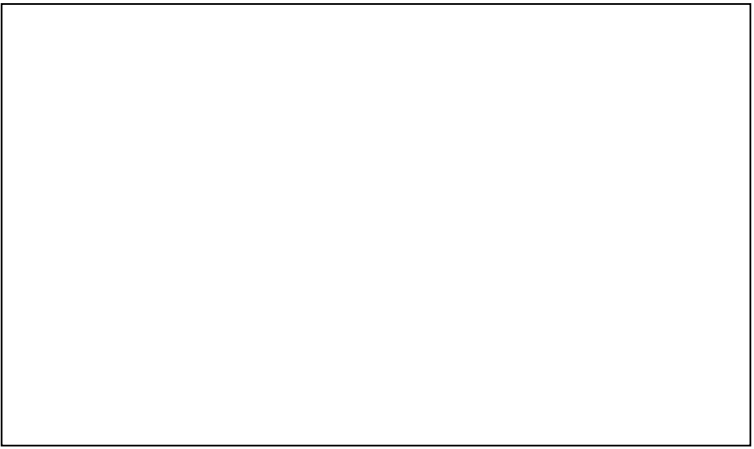
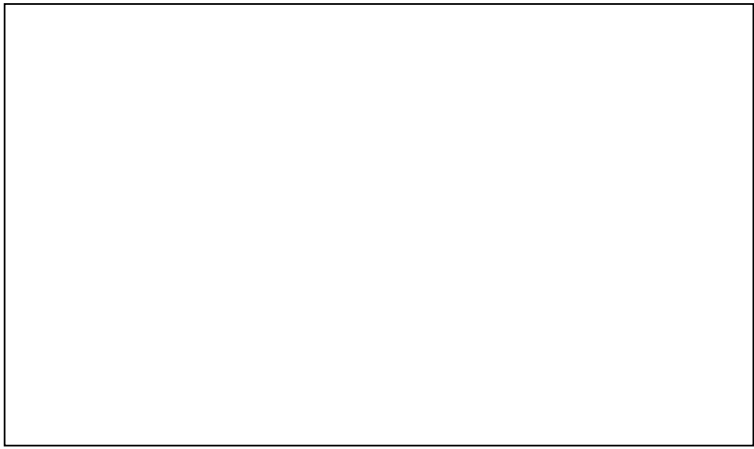
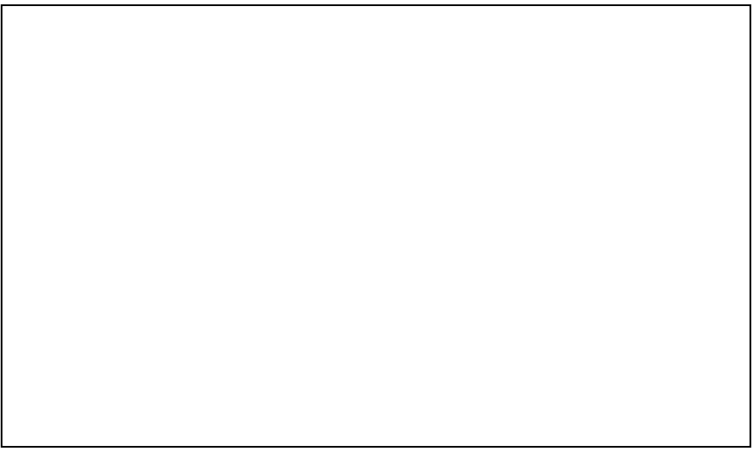
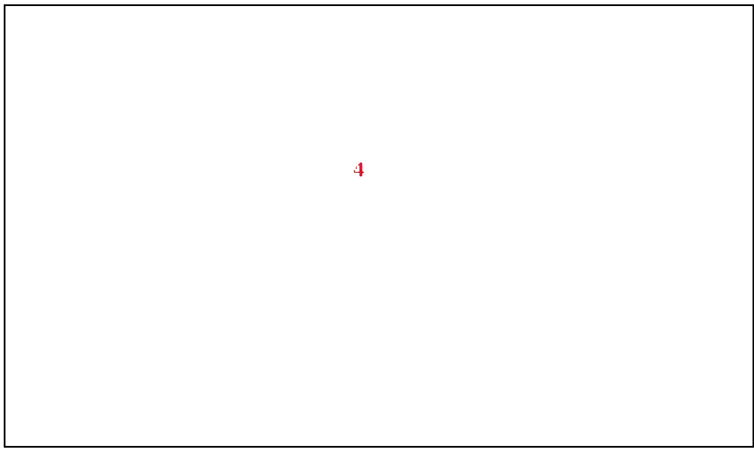
Case #

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PHOTOS



CRASH PHOTOS DATA

| MAPPING # | DATABASE MAPPING |
|------------------|-------------------------|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | AttachmentData.Data |

ATTACHMENT

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Attachment #

4

ATTACHMENT

5

CRASH ATTACHMENT DATA

| MAPPING # | DATABASE MAPPING |
|------------------|-------------------------|
| 1 | Report Reference Number |
| 2 | Crash.StateCaseNumber |
| 3 | Crash.LocalCaseNumber |
| 4 | Attachment.Index |
| 5 | AttachmentData.Data |