

# LOUISIANA UNIFORM CRASH REPORT

## CRASH INFORMATION

2021000338

<input type="checkbox"/> Secondary Crash		<input checked="" type="checkbox"/> Photos Taken		<input type="checkbox"/> Videos Taken		Rev. 2024-1		Case #		G-130013-21		Page		1		of		18									
Number of Motorists		4		Number of Non-Motorists		2		Non-Fatally Injured Persons		1		Fatalities		5		Total Injuries and Fatalities		6		Vehicles Involved		2		Troop		A	
Investigating Agency						Division			Parish			City			Latitude			Longitude									
LSP (Troop A)									East Baton Rouge			Baton Rouge			30.435545° N			91.092760° W									

### CRASH TIME INFORMATION

Crash Date/Time		Police Notified Date/Time		Police Arrived Date/Time		Roadway Cleared Date/Time		On Scene Investigation Completed Date/Time	
08/25/2021 0900		08/25/2021 0900		08/25/2021 0901		08/25/2021 0905		08/25/2021 0910	

### ROAD INFORMATION

Highway <input checked="" type="checkbox"/> Not applicable		Road	
		TARA BLVD	
Distance/Direction From Intersection <input type="checkbox"/> Not applicable		Intersecting Road <input type="checkbox"/> Crash was at an intersection	
34.0 ft East		tribeca RD	

### LOCATION INFORMATION

Road Classification		104		Road Subtype		100		Property Ownership		100		Trafficway Characteristics		100		Number of Intersection Approaches		1		Traffic Flow Direction		S	
100 Interstate				100 Mainline				100 Public property				100 Trafficway, on road				1 Not an intersection				X Not applicable (not a divided highway)			
101 US highway				200 On-ramp				200 Private property				101 Trafficway, not on road				2 Two				N North			
102 State highway				201 Off-ramp								200 Non-trafficway				3 Three				W West		E East	
103 Parish road				300 Frontage/service												4 Four							
104 City street				970 Not applicable												5 Five or more				S South			
200 Off road/private property																							

### INVESTIGATING OFFICER

Rank		First Name		Middle Name		Last Name		Suffix	
Tester		eCrash		Test		User			
Badge #		Printed Name		Signature					
1234		eric		<i>eric</i>					

### CRASH CIRCUMSTANCES AND CONDITIONS

First Harmful Event		201		Location of First Harmful Event		104		Manner of Crash		200	
Non-collision				100 Cargo/equipment loss or shift				000 Not a collision between two motor vehicles in transport		200 Front to front - head on	
				101 Fell/jumped from motor vehicle						300 Front to rear - rear end	
				102 Fire/explosion				100 Angle - left overtake		400 Backing - rear to front	
				103 Immersion, full or partial				101 Angle - left opposite direction		401 Backing - rear to rear	
				104 Jackknife				102 Angle - left into flow		402 Backing - rear to side	
				105 Overturn/rollover				103 Angle - right into flow		502 Sideswipe - opposite direction	
				106 Thrown or falling object				104 Angle - right overtake		505 Sideswipe - same direction	
				198 Other non-collision harmful event				105 Angle - perpendicular/other angle		980 Other	
Collision with Non-Fixed Object				200 Collision with animal (live)				500 Angle - left across flow		999 Unknown	
				201 Collision with motor vehicle in transport				501 Angle - right across flow			
				202 Collision with parked motor vehicle							
				203 Collision with pedalcycle (including bicycles)				Contributing Factor		Primary	
				204 Collision with pedestrian				100 Violations		100	
				205 Collision with railway vehicle (train, engine)				101 Movement prior to crash		Secondary	
				206 Collision with object at rest from MV in transport				102 Vision obstructions		102	
				207 Collision with falling/shifting cargo or anything set in motion by MV				103 Driver condition			
				208 Collision with work zone/maintenance equipment				104 Vehicle condition			
				209 Collision with farm equipment				105 Road surface			
				297 Collision with other non-motorist				106 Roadway condition			
				298 Collision with other non-fixed object				107 Lighting condition			
Collision with Fixed Object				300 Collision with bridge overhead structure				108 Weather condition			
				301 Collision with bridge pier or support				109 Traffic control			
				302 Collision with bridge rail				110 Non-motorist condition			
				303 Collision with cable barrier				111 Non-motorist action			
				304 Collision with concrete traffic barrier				970 Not applicable			
				305 Collision with culvert							
				306 Collision with curb				School Bus Relation		000	
				307 Collision with ditch				000 No			
				308 Collision with embankment				100 Yes, school bus directly involved			
				309 Collision with fence				101 Yes, school bus indirectly involved			
				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							

CRASH INFORMATION

Rev. 2024-1

Case #G-130013-21Page2of18

CRASH CONDITIONS																	
Roadway Surface Condition		107	Light Condition		399	Weather Conditions		105	Environmental Conditions		117						
000 Dry			100 Daylight			000 Clear			000 None								
100 Ice/Frost			200 Dawn/dusk			100 Blowing sand, soil, dirt			100 Animal(s)								
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		100	Work Zone Location		100	Work Zone Type		101	Work Zone Circumstances		105	Worker(s) Present		000	Law Enforcement Present		000
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			970 Not applicable		
			104 Termination area			970 Not applicable			104 Traffic control device malfunction						999 Unknown		
			970 Not applicable			980 Other type of work zone			105 Free flow (light & fast traffic)								
			999 Unknown			999 Unknown			980 Other								
									970 Not applicable								
									999 Unknown								
REVIEWING OFFICER																	
Rank		First Name				Middle Name		Last Name			Suffix						
		Eric						Newman									
WITNESS #										WITNESS #							
Name					Name												
FirstMiddleLastSuffix					FirstMiddleLastSuffix												
Address					Address												
City			State		Postal Code		City			State		Postal Code					
Phone Number			Age		Sex		Phone Number			Age		Sex					
NON-VEHICULAR PROPERTY DAMAGE										PROPERTY #							
Property Type		Damage Severity		Owner Name				Owner Phone Number									
				<input type="checkbox"/> Unknown				<input type="checkbox"/> Not Collected									
Owner Address																	
<input type="checkbox"/> Unknown																	
StreetCityStatePostal Code																	
NON-VEHICULAR PROPERTY DAMAGE										PROPERTY #							
Property Type		Damage Severity		Owner Name				Owner Phone Number									
				<input type="checkbox"/> Unknown				<input type="checkbox"/> Not Collected									
Owner Address																	
<input type="checkbox"/> Unknown																	
StreetCityStatePostal Code																	
NON-VEHICULAR PROPERTY DAMAGE										PROPERTY #							
Property Type		Damage Severity		Owner Name				Owner Phone Number									
				<input type="checkbox"/> Unknown				<input type="checkbox"/> Not Collected									
Owner Address																	
<input type="checkbox"/> Unknown																	
StreetCityStatePostal Code																	
PROPERTY DAMAGE CODES																	
Property Type										Damage Severity							
100 Private property										100 Light (less than \$500)							
200 Bridge overhead structure										101 Moderate (between \$500 and \$10,000)							
201 Bridge pier or support										102 Severe (over \$10,000)							
202 Bridge rail																	
300 Cable barrier																	
301 Concrete traffic barrier																	
302 Guardrail end terminal																	
303 Guardrail face																	
304 Impact attenuator/crash cushion																	
398 Other traffic barrier																	
400 Traffic sign support																	
401 Traffic signal support																	
402 Utility pole/light support																	
598 Other state property																	
980 Other																	

LOUISIANA UNIFORM CRASH REPORT  
VEHICLE INFORMATION

2021000338

Motor Vehicle #		Rev. 2024-1		Case #	G-130013-21	Page	3	of	18
DESCRIPTION AND INFORMATION									
<input type="checkbox"/> Check if this vehicle had no driver		<b>Hit and Run</b> 000 No, did not leave scene 100 Yes, driver and vehicle left scene 101 Yes, only driver left scene		<b>Vehicle Type</b> 000 Motor vehicle in transport 101 Parked motor vehicle 102 Working vehicle / equipment		<b>Vehicle Body Type</b> <b>Passenger Vehicles</b> 100 Passenger car 101 Passenger van / Minivan (less than 9 seats) 102 (Sport) utility vehicle <b>Construction / Farm Equipment</b> 200 Construction equipment (backhoe, bulldozer, etc.) 201 Farm equipment (tractor, combine, harvester, etc.) <b>Cycle / Off Road / Recreation</b> 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 <b>Trucks</b> 400 Single unit truck 401 Truck tractor 498 Other truck <b>Large Passenger Vehicle</b> 500 Motor home 501 Passenger van (9-15 seats) 502 Passenger van (16+ seats) 503 Large limo 504 Mini-bus <b>Other</b> 980 Other			
VIN		<input checked="" type="checkbox"/> Unknown							
<b>Model Year</b> <input type="checkbox"/> Unknown 2012		<b>Make</b> Tesla		<b>Model</b> Other		<b>Color</b> White			
<b>License Plate</b> <input type="checkbox"/> Missing <b>State</b> LA <input type="checkbox"/> Unknown <b>Number</b> 635SFF <input type="checkbox"/> Unknown <b>Year</b> 2022 <input type="checkbox"/> Unknown		<input type="checkbox"/> Non-expiring							
<b>Owner Name</b> <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown Rick Ford		<b>Owner Address</b> <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown 544 Rick Street Baton Rouge LA 70454 <small>Street City State Postal Code</small>							
<b>Insurance</b> <input type="checkbox"/> Uninsured at time of crash <b>Company</b> Progressive <input type="checkbox"/> Unknown <b>Phone #</b> 2145846854 <input type="checkbox"/> Unknown <b>NAIC #</b> <input checked="" type="checkbox"/> Unknown <b>Policy #</b> FR3541E <input type="checkbox"/> Unknown <b>Expiration Date</b> 4/5/2022 <input type="checkbox"/> Unknown									
TOWING									
<b>Damage Extent</b> 102 000 None 100 Minor damage 101 Functional damage 102 Disabling damage 990 Vehicle not at scene		<b>Initial Point of Contact</b> 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 000 Non-collision <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage <input type="checkbox"/> 114 Cargo Loss <input type="checkbox"/> 999 Unknown		<b>Damaged Areas</b> 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 002 No damage <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage		<b>Tow Status</b> 101 000 Not towed 100 Towed, but not due to disabling damage 101 Towed (or will be towed) due to disabling damage <b>Towed By</b> <input checked="" type="checkbox"/> Unknown		<b>Tow Authority</b> 101 100 Owner 101 Law enforcement 970 Not applicable 980 Other	
MOTOR VEHICLE CIRCUMSTANCES									
<b>Vehicle Usage</b> 000 000 No special function 100 Bus - school (public or private) 101 Bus - childcare / daycare 102 Bus - transit / commuter 103 Bus - charter / tour 104 Bus - intercity 105 Bus - shuttle 198 Bus - other 200 Farm vehicle 201 Fire truck 202 Highway / maintenance 203 Mail carrier 204 Military 205 Ambulance 206 Police 207 Public utility 208 Non-transport emergency services vehicle 209 Safety service patrols - incident response 210 Other incident response 211 Rental truck (over 10,000 lbs) 212 Towing - incident response 213 Truck acting as crash attenuator 214 Taxi 215 Vehicle used for electronic ride-hailing (transportation network company)		<b>Vehicle Maneuver</b> 100 100 Going straight 101 Backing 102 Merging 103 Making U-turn 104 Negotiating a curve 106 Turning left 107 Turning right 108 Traveling wrong way <b>Vehicle Maneuver Reason</b> 000 000 Normal movement 100 To avoid other vehicle 101 To avoid non-motorist 102 To avoid animal 198 To avoid other object 200 Passing <b>Emergency Vehicle Usage</b> 000 000 Non-emergency, non-transport 100 Non-emergency transport 200 Emergency operation, emergency warning equipment not in use 201 Emergency operation, emergency warning equipment in use 970 Not applicable 999 Unknown		<b>Direction of Travel Before Crash</b> 700 000 Not on roadway 001 In roadway but not in motion 002 Not on trafficway 100 Northbound 300 Eastbound 500 Southbound 700 Westbound 999 Unknown					

LOUISIANA UNIFORM CRASH REPORT  
VEHICLE INFORMATION

2021000338

Motor Vehicle # 1		Rev. 2024-1		Case # G-130013-21		Page 4 of 18	
MOTOR VEHICLE CIRCUMSTANCES							
Skidmark Data (Feet)		Distance Traveled After Impact (Feet) <input checked="" type="checkbox"/> Unknown		Contributing Defects		980	
Front Left	Front Right	<input checked="" type="checkbox"/> Not applicable or measured <input type="checkbox"/> Unknown		Vehicle Lighting		100	
				000 Headlights off 100 Headlights on 101 Daytime running lights 999 Unknown		000 None 100 Brakes 101 Exhaust system 102 Body, doors 103 Steering 104 Power train 105 Suspension 106 Tires 107 Wheels 108 Headlights 109 Tail lights 110 Signal lights 111 All lights 112 Window / windshield 113 Mirrors 114 Wipers 115 Truck coupling / trailer hitch / safety chains 980 Other 999 Unknown	
Rear Left	Rear Right						
Traffic Control Device Types and Statuses							
Traffic Control Device Types		Devices Present		Devices Inoperative or Missing			
000 None	300 Flashing railroad crossing (may include gates)	1 207	1 000				
100 Person (including flagger, law enforcement, crossing guard, etc)	301 Flashing school zone signal	2	2				
200 Bicycle crossing sign	302 Flashing traffic control signal	3	3				
201 Curve Ahead warning sign	303 Lane use control signal	4	4				
202 Intersection Ahead warning sign	304 Ramp meter signal						
203 Pedestrian crossing sign	305 Traffic control signal						
204 Railroad crossing sign	398 Other signal						
205 Reduce Speed Ahead warning sign	400 Bicycle crossing						
206 School zone sign	401 Pedestrian crossing						
207 Stop sign	402 Railroad crossing						
208 Yield sign	403 School zone						
298 Other warning sign	404 Yellow no passing line						
	405 White or yellow dash line						
	406 Solid white lane line						
	498 Other pavement marking (excluding edgelines, centerlines, or lane lines)						
980 Other	999 Unknown						
Traffic Signal Status		970					
100 Red signal on 200 Yellow signal on 300 Green signal on 970 Not applicable 999 Unknown							
Automation System Level Present		104					
000 No automation 100 Driver assistance 101 Partial automation 102 Conditional automation 103 High automation 104 Full automation 199 Automation level unknown 999 Unknown							
Automation System Level Engaged		104					
000 No automation 100 Driver assistance 101 Partial automation 102 Conditional automation 103 High automation 104 Full automation 199 Automation level unknown 999 Unknown							
Trafficway Division		101		Barrier Type		000	
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	100	Number of Through Lanes	Number of Auxiliary Lanes	Roadway Alignment	100	Permitted Travel	200
000 Not on trafficway		2	0	000 Not on trafficway		000 Not on trafficway	
100 Level				100 Straight		100 One-way	
101 Uphill				101 Curve left		200 Two-way	
102 Hillcrest				102 Curve right		Speed Limit	
103 Downhill						35	
104 Sag (bottom)						<input type="checkbox"/> Unknown <input type="checkbox"/> N/A	
HOV Lane Presence							
000 None present 100 Separated barrier, flush (greater than 4 ft wide), raised or depressed median 101 Not separated, painted pavement markings, post-mounted delineators							
HOV Lane Relation							
000 No 100 Yes							
MOTOR VEHICLE EVENTS							
Sequence of Events		1 201		2 204		3 4	
						Most Harmful Event 201	
Non-Harmful Events				Collision with Fixed Object			
000 Cross centerline 001 Cross median 002 End departure (T-intersection, dead-end, etc.) 003 Downhill runaway 004 Equipment failure (blown tire, brake failure, etc.)				005 Ran off roadway left 006 Ran off roadway right 007 Reentering roadway 008 Separation of units 098 Other non-harmful event			
Non-Collision Events				Collision with Person / Vehicle / Non-Fixed Object			
100 Cargo/equipment loss or shift 101 Fell/jumped from motor vehicle 102 Fire/explosion 103 Immersion, full or partial 104 Jackknife 105 Overturn/rollover 106 Thrown or falling object 198 Other non-collision harmful event				200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle (including bicycles) 204 Collision with pedestrian 205 Collision with railway vehicle (train, engine) 206 Collision with object at rest from MV in transport 207 Collision with falling, shifting cargo, or anything set in motion by MV 208 Collision with work zone/maintenance equipment 209 Collision with farm equipment 297 Collision with other non-motorist 298 Collision with other non-fixed object			
				300 Collision with bridge overhead structure 301 Collision with bridge pier or support 302 Collision with bridge rail 303 Collision with cable barrier 304 Collision with concrete traffic barrier 305 Collision with culvert 306 Collision with curb 307 Collision with ditch 308 Collision with embankment 309 Collision with fence 310 Collision with guardrail end terminal 311 Collision with guardrail face 312 Collision with impact attenuator/crash cushion 313 Collision with mailbox 314 Collision with traffic sign support 315 Collision with traffic signal support 316 Collision with tree (standing) 317 Collision with utility pole/light support			
				396 Collision with other post,pole,or support 397 Collision with other traffic barrier 398 Collision with other fixed object (wall, building, tunnel, etc.) 399 Collision with unknown fixed object			
CRASH REPORT - MOTOR VEHICLE CIRCUMSTANCES AND EVENTS							

Motor Vehicle #  
1

Rev. 2024-1

Case #  
G-130013-21

Page  
5

of  
18

VEHICLE INFORMATION

COMMERCIAL MOTOR VEHICLE INFORMATION

Vehicle Configuration000

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 Placard000

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

Cargo Body Type970

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 Permitted970

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

Number of Axles

☐ Unknown

Motor Carrier Type000

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 Identification970

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

Motor Carrier Address☐ Unknown

Motor Carrier Phone Number☐ Unknown

GVWR/GCWR970

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

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

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

Motor Vehicle #1

Rev. 2024-1

Case #G-130013-21

Page6 of 18

DRIVER INFORMATION

Name

☐ Unknown

RickFord

FirstMiddleLastSuffix

Address

☐ Unknown

544 Rick StreetBaton RougeLA70454

StreetCityStatePostal Code

Incident Responder

000 No102 Police980 Other

100 EMS103 Tow operator999 Unknown

101 Fire104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)

Age

☐ Unknown

39

Sex

100 Female

101 Male

999 Unknown

Race

100 American Indian or Alaska Native

101 Asian or Pacific Islander

102 Black

103 White

980 Other

999 Unknown

Phone Number

☐ Not Collected

5678416322

Date of Birth

☒ Unknown

Ethnicity

999

DRIVER LICENSE INFORMATION

License Status

100

100 Valid license004 Suspended

000 Not licensed999 Unknown

001 Canceled or denied

002 Expired

003 Revoked

License Class

400

000 None

100 Class A

101 Class B

102 Class C

200 Light commercial/chauffeur (LA class D)

300 Motorcycle only

400 Regular driver license (LA class E)

970 Not applicable

Driver License Type

100

100 Non-CDL driver license

101 Non-CDL restricted driver license (learner's permit, temporary/limited, graduated driver license, etc.)

200 Commercial driver license (CDL)

970 Not applicable

Commercial Driver License Status

970

100 Valid

101 Learner's permit

000 Canceled or denied

001 Disqualified

002 Expired

003 Revoked

004 Suspended

098 Other (not valid)

970 Not applicable (no CDL)

999 Unknown

License Number

564148635

License State

LA

Endorsements on License

☒ 000 None/not applicable

☐ 100 H - Hazardous materials

☐ 101 N - Tank vehicle

☐ 102 P - Passenger

☐ 103 S - School

☐ 104 T - Double/triple trailers

☐ 105 X - Combination of tank vehicle and hazardous materials

☐ 200 M - Motorcycle

☐ 298 Other non-commercial license endorsements

☐ 999 Unknown

Endorsement Compliance

000

000 No endorsements required for the vehicle

100 Endorsements required, complied with

101 Endorsements required, not complied with

199 Endorsements required, compliance unknown

999 Unknown if endorsements required

Restrictions on License

000 - None

Alcohol Interlock Presence

970

000 No

100 Yes

970 Not applicable

999 Unknown

DRIVER SEATING AND SAFETY INFORMATION

Seating Position

100

Standard Vehicle Seats

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

Restraint Systems Used

105

001 None used – motor vehicle occupant

002 No helmet

100 Booster seat

101 Child restraint system – forward facing

102 Child restraint system – rear facing

103 Child restraint system – type unknown

104 Lap belt only used

105 Shoulder and lap belt used

106 Shoulder belt only used

107 Stretcher

108 Wheelchair

199 Restraint used – type unknown

200 DOT-compliant motorcycle helmet

201 Not DOT-compliant motorcycle helmet

299 Unknown if DOT-compliant motorcycle helmet

970 Not applicable

980 Other

999 Unknown

Any indication of improper use?

000

000 No

100 Yes

999 Unknown

Air Bags Deployed

☐ 000 Not deployed

☐ 001 Not deployed - switch off

☒ 100 Front

☐ 101 Side

☐ 102 Curtain

☐ 103 Other (knee, air belt, etc.)

☐ 970 Not applicable

☐ 999 Deployment unknown

Ejection

000

000 Not ejected

100 Ejected, partially

101 Ejected, totally

970 Not applicable

999 Unknown

Extrication

000

000 No

100 Trapped and extricated

101 Trapped but not extricated

999 Unknown

Motor Vehicle #1

Rev. 2024-1

Case #G-130013-21

Page7 of 18

Medical Information

Injury Status100

Type of Medical Transportation101

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

North Shore Emergency Medical Services

EMS Response Run #☒ Unknown

Universally Unique Identifier

☒ Not applicable☐ Unknown

Facility Receiving Patient

Ochsner Medical Center Baton Rouge

Driver Condition and Circumstances

Conditions at Time of Crash000

Distraction Action000

Distraction Source970

Speeding Relation000

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

000 Not distracted  
100 Talking / listening  
101 Manually operating a device (e.g., texting, dialing, playing game, etc.)  
200 Inattentive  
980 Other distraction or distraction details unknown  
999 Unknown if distracted

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

Vision Obscurement

000 None  
100 Rain, snow, etc. on windshield  
101 Windshield otherwise obscured  
102 Vision obscured by load  
103 Trees, bushes, etc.  
104 Building

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 Usage000

Test Status000

Alcohol Kit Number☐ Unknown

Alcohol Test Type970

Alcohol Test Results970

BAC

000 Test not given  
001 Test refused  
100 Test given  
999 Unknown if tested

100 Blood  
101 Blood clot  
102 Blood plasma/serum  
200 Breath  
201 Preliminary breath test (PBT)

300 Urine  
301 Vitreous  
302 Liver  
970 Not applicable  
980 Other

000 Results pending  
001 Negative results with no actual value  
100 Results received  
101 Positive results with no actual value  
970 Not applicable  
999 Unknown

Suspected Drug Usage000

Test Status000

Drug Kit Number☐ Unknown

Drug Test Type970

Drug Test Results

000 Test not given  
001 Test refused  
100 Test given  
999 Unknown if tested

100 Blood  
101 Urine  
102 Both blood and urine  
103 Saliva  
198 Other

970 Not applicable  
999 Unknown

Not applicable

Driver Actions

Driver Actions at Time of Crash

Avoidance Maneuver000

Pre-Collision Stability000

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 Careless driving, inattentive operation, improper driving, or driving without due care  
109 Operating the vehicle in an erratic, reckless, or negligent 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  
116 Aggressive driving  
117 Road rage

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

CRASH REPORT - DRIVER CONDITION AND CIRCUMSTANCES

LOUISIANA UNIFORM CRASH REPORT  
VEHICLE INFORMATION

2021000338

Motor Vehicle #		Case #		Page																															
2		G-130013-21		8 of 18																															
DESCRIPTION AND INFORMATION																																			
<input type="checkbox"/> Check if this vehicle had no driver		<b>Hit and Run</b> 000 No, did not leave scene 100 Yes, driver and vehicle left scene 101 Yes, only driver left scene		<b>Vehicle Type</b> 100 Motor vehicle in transport 101 Parked motor vehicle 102 Working vehicle / equipment																															
<b>VIN</b>		<input checked="" type="checkbox"/> Unknown		<b>Vehicle Body Type</b> <b>Passenger Vehicles</b> 100 Passenger car 101 Passenger van / Minivan (less than 9 seats) 102 (Sport) utility vehicle <b>Construction / Farm Equipment</b> 200 Construction equipment (backhoe, bulldozer, etc.) 201 Farm equipment (tractor, combine, harvester, etc.) <b>Cycle / Off Road / Recreation</b> 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 <b>Trucks</b> 400 Single unit truck 401 Truck tractor 498 Other truck <b>Large Passenger Vehicle</b> 500 Motor home 501 Passenger van (9-15 seats) 502 Passenger van (16+ seats) 503 Large limo 504 Mini-bus <b>Other</b> 980 Other																															
<b>Model Year</b> <input type="checkbox"/> Unknown 2012		<b>Make</b> Mercedes Benz		<b>Model</b> Medium/heavy truck - Cab Behind Engine, conventional																															
<b>License Plate</b> <input type="checkbox"/> Missing State LA <input type="checkbox"/> Unknown Number 351SJH <input type="checkbox"/> Unknown Year 2022 <input type="checkbox"/> Unknown		<b>Color</b> Green, dark		<b>Non-expiring</b> <input type="checkbox"/> Non-expiring																															
<b>Owner Name</b> <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown Katy Gucci		<b>Owner Address</b> <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown 87 Foody Street Walker LA 70585 <small>Street City State Postal Code</small>		<b>Insurance</b> <input type="checkbox"/> Uninsured at time of crash <b>Company</b> Geico <input type="checkbox"/> Unknown <b>Phone #</b> 8552424123 <input type="checkbox"/> Unknown <b>NAIC #</b> <input checked="" type="checkbox"/> Unknown <b>Policy #</b> DRG-343222 <input type="checkbox"/> Unknown <b>Expiration Date</b> 2/5/2022 <input type="checkbox"/> Unknown																															
DAMAGE			TOWING																																
<b>Damage Extent</b> 102 000 None 100 Minor damage 101 Functional damage 102 Disabling damage 990 Vehicle not at scene		<b>Initial Point of Contact</b> <table border="1"><tr><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td></tr><tr><td>6</td><td colspan="3">→</td><td>12</td></tr><tr><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td></tr></table> <input type="checkbox"/> 000 Non-collision <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage <input type="checkbox"/> 114 Cargo Loss <input type="checkbox"/> 999 Unknown		7	8	9	10	11	6	→			12	5	4	3	2	1	<b>Damaged Areas</b> <table border="1"><tr><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td></tr><tr><td>6</td><td colspan="3">→</td><td>12</td></tr><tr><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td></tr></table> <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 002 No damage <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage		7	8	9	10	11	6	→			12	5	4	3	2	1
7	8	9	10	11																															
6	→			12																															
5	4	3	2	1																															
7	8	9	10	11																															
6	→			12																															
5	4	3	2	1																															
<b>Tow Status</b> 101 000 Not towed 100 Towed, but not due to disabling damage 101 Towed (or will be towed) due to disabling damage <b>Towed By</b> <input checked="" type="checkbox"/> Unknown		<b>Tow Authority</b> 101 100 Owner 101 Law enforcement 970 Not applicable 980 Other																																	
MOTOR VEHICLE CIRCUMSTANCES																																			
<b>Vehicle Usage</b> 000 000 No special function 100 Bus - school (public or private) 101 Bus - childcare / daycare 102 Bus - transit / commuter 103 Bus - charter / tour 104 Bus - intercity 105 Bus - shuttle 198 Bus - other 200 Farm vehicle 201 Fire truck 202 Highway / maintenance 203 Mail carrier 204 Military 205 Ambulance 206 Police 207 Public utility 208 Non-transport emergency services vehicle 209 Safety service patrols - incident response 210 Other incident response 211 Rental truck (over 10,000 lbs) 212 Towing - incident response 213 Truck acting as crash attenuator 214 Taxi 215 Vehicle used for electronic ride-hailing (transportation network company)		<b>Vehicle Maneuver</b> 100 100 Going straight 101 Backing 102 Merging 103 Making U-turn 104 Negotiating a curve 106 Turning left 107 Turning right 108 Traveling wrong way <b>Vehicle Maneuver Reason</b> 000 000 Normal movement 100 To avoid other vehicle 101 To avoid non-motorist 102 To avoid animal 198 To avoid other object 200 Passing 201 Vehicle out of control, not passing 202 Vehicle out of control, passing 203 For traffic control 204 Due to congestion 205 Due to prior crash (collision) 206 Due to driver condition 207 Due to driver violation 208 Due to vehicle condition (failure) 209 Due to pavement condition 210 High wind 980 Other 999 Unknown		<b>Emergency Vehicle Usage</b> 000 000 Non-emergency, non-transport 100 Non-emergency transport 200 Emergency operation, emergency warning equipment not in use 201 Emergency operation, emergency warning equipment in use 970 Not applicable 999 Unknown																															
<b>Direction of Travel Before Crash</b> 300 000 Not on roadway 001 In roadway but not in motion 002 Not on trafficway		100 Northbound 300 Eastbound 500 Southbound 700 Westbound 999 Unknown																																	



Motor Vehicle # 2	Rev. 2024-1	Case #	G-130013-21	Page	9	of	18				
MOTOR VEHICLE CIRCUMSTANCES											
Skidmark Data (Feet)		Distance Traveled After Impact (Feet) <input checked="" type="checkbox"/> Unknown		Contributing Defects		000					
Front Left	Front Right	<input checked="" type="checkbox"/> Not applicable or measured <input type="checkbox"/> Unknown		000 None 100 Brakes 101 Exhaust system 102 Body, doors 103 Steering 104 Power train 105 Suspension 106 Tires 107 Wheels 108 Headlights 109 Tail lights 110 Signal lights 111 All lights 112 Window / windshield 113 Mirrors 114 Wipers 115 Truck coupling / trailer hitch / safety chains 980 Other 999 Unknown							
Rear Left	Rear Right	Vehicle Lighting 000 Headlights off 100 Headlights on 101 Daytime running lights 999 Unknown		100							
Traffic Control Device Types and Statuses											
Traffic Control Device Types		Devices Present		Devices Inoperative or Missing							
000 None	300 Flashing railroad crossing (may include gates)	1	207	1	000						
100 Person (including flagger, law enforcement, crossing guard, etc)	301 Flashing school zone signal	2		2							
200 Bicycle crossing sign	302 Flashing traffic control signal	3		3							
201 Curve Ahead warning sign	303 Lane use control signal	4		4							
202 Intersection Ahead warning sign	304 Ramp meter signal					Automation System Level Present 000					
203 Pedestrian crossing sign	305 Traffic control signal					000 No automation 100 Driver assistance 101 Partial automation 102 Conditional automation 103 High automation 104 Full automation 199 Automation level unknown 999 Unknown					
204 Railroad crossing sign	398 Other signal					Automation System Level Engaged 000					
205 Reduce Speed Ahead warning sign	400 Bicycle crossing					000 No automation 100 Driver assistance 101 Partial automation 102 Conditional automation 103 High automation 104 Full automation 199 Automation level unknown 999 Unknown					
206 School zone sign	401 Pedestrian crossing										
207 Stop sign	402 Railroad crossing										
208 Yield sign	403 School zone										
298 Other warning sign	404 Yellow no passing line										
	405 White or yellow dash line										
	406 Solid white lane line										
	498 Other pavement marking (excluding edgelines, centerlines, or lane lines)										
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 Earth embankment								
	102 Divided, depressed median	102 Earth embankment	103 Guardrail								
	999 Unknown	103 Guardrail	980 Other								
999 Unknown		980 Other									
Roadway Grade	100	Number of Through Lanes	Number of Auxiliary Lanes	Roadway Alignment	100	Permitted Travel	200	HOV Lane Presence	000	HOV Lane Relation	000
000 Not on trafficway				000 Not on trafficway		000 Not on trafficway		000 None present		000 No	
100 Level				100 One-way		100 One-way		100 Separated barrier, flush (greater than 4 ft wide), raised or depressed median		100 Yes	
101 Uphill				100 Straight		200 Two-way		101 Not separated, painted pavement markings, post-mounted delineators			
102 Hillcrest				101 Curve left		Speed Limit					
103 Downhill				102 Curve right		35	<input type="checkbox"/> Unknown <input type="checkbox"/> N/A				
104 Sag (bottom)											
MOTOR VEHICLE EVENTS											
Sequence of Events		1	201	2	203	3		4		Most Harmful Event 201	
Non-Harmful Events						Collision with Fixed Object					
000 Cross centerline 001 Cross median 002 End departure (T-intersection, dead-end, etc.) 003 Downhill runaway 004 Equipment failure (blown tire, brake failure, etc.)						005 Ran off roadway left 006 Ran off roadway right 007 Reentering roadway 008 Separation of units 009 Other non-harmful event					
Non-Collision Events						Collision with Person / Vehicle / Non-Fixed Object					
100 Cargo/equipment loss or shift 101 Fell/jumped from motor vehicle 102 Fire/explosion 103 Immersion, full or partial 104 Jackknife 105 Overturn/rollover 106 Thrown or falling object 198 Other non-collision harmful event						200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle (including bicycles) 204 Collision with pedestrian 205 Collision with railway vehicle (train, engine) 206 Collision with object at rest from MV in transport 207 Collision with falling, shifting cargo, or anything set in motion by MV 208 Collision with work zone/maintenance equipment 209 Collision with farm equipment 297 Collision with other non-motorist 298 Collision with other non-fixed object					
300 Collision with bridge overhead structure 301 Collision with bridge pier or support 302 Collision with bridge rail 303 Collision with cable barrier 304 Collision with concrete traffic barrier 305 Collision with culvert 306 Collision with curb 307 Collision with ditch 308 Collision with embankment 309 Collision with fence 310 Collision with guardrail end terminal 311 Collision with guardrail face 312 Collision with impact attenuator/crash cushion 313 Collision with mailbox 314 Collision with traffic sign support 315 Collision with traffic signal support 316 Collision with tree (standing) 317 Collision with utility pole/light support						396 Collision with other post,pole,or support 397 Collision with other traffic barrier 398 Collision with other fixed object (wall, building, tunnel, etc.) 399 Collision with unknown fixed object					
CRASH REPORT - MOTOR VEHICLE CIRCUMSTANCES AND EVENTS											

Motor Vehicle #  
2

Rev. 2024-1

Case #  
G-130013-21

Page 10 of 18

COMMERCIAL MOTOR VEHICLE INFORMATION

Vehicle Configuration

100

000 Vehicles 10,000 lbs or less

300 Single-unit truck (2-axle and GVWR > 10,000 lbs.)

999 Unknown

100 Vehicles 10,000 lbs or less placarded for hazardous materials

301 Single-unit truck (3 or more axles)

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

200 Bus/large van (seats 9-15 occupants, including driver)

201 Bus (seats more than 15 occupants, including driver)

Hazardous Materials Placard

100

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

6867

Hazardous Material Class

2

1 Explosives

2 Gas

3 Flammable liquids

4 Other flammable substances

5 Oxidizing substances and organic peroxides

6 Toxic (poisonous) and infectious substances

7 Radioactive material

8 Corrosives

9 Miscellaneous dangerous goods

970 Not applicable

999 Unknown

Cargo Body Type

000

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

100

☒ 000 No special sizing

☐ 100 Over-height

☐ 101 Over-length

☐ 102 Over-weight

☐ 103 Over-width

☐ 999 Unknown

Load Permitted

100

000 Non-permitted load

100 Permitted load

970 Not applicable (not a qualifying vehicle)

999 Unknown

Number of Axles

4

☐ Unknown

Motor Carrier Type

000

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

970

100 US DOT number

101 State number

970 Not applicable

999 Unknown/unable to determine

State

Motor Carrier Name

☐ Unknown

Motor Carrier ID Number

Motor Carrier Address

☐ Unknown

Motor Carrier Phone Number

☐ Unknown

Street

City

State

Postal Code

GVWR/GCWR

100

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

Unknown

TRAILER INFORMATION

TRAILER #

VIN

☐ Unknown

Number of Axles

☐ Unknown

Year

☐ Unknown

Make

☐ Unknown

Model

☐ Unknown

License Plate

☐ Missing

☐ Non-expiring

State

☐ Unknown

Number

☐ Unknown

Year

☐ Unknown

TRAILER INFORMATION

TRAILER #

VIN

☐ Unknown

Number of Axles

☐ Unknown

Year

☐ Unknown

Make

☐ Unknown

Model

☐ Unknown

License Plate

☐ Missing

☐ Non-expiring

State

☐ Unknown

Number

☐ Unknown

Year

☐ Unknown

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

Motor Vehicle # 2		DRIVER INFORMATION		Case #	G-130013-21	Page	11	of	18	
DRIVER INFORMATION										
Name <input type="checkbox"/> Unknown				Age <input type="checkbox"/> Unknown	Sex	100	Race			
KatyGucci				41	100 Female 101 Male 999 Unknown	100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown				
Address <input type="checkbox"/> Unknown				Phone Number <input checked="" type="checkbox"/> Not Collected						
87 Foody StreetWalkerLA70585										
Incident Responder				Date of Birth		Ethnicity				
000 No102 Police980 Other 100 EMS103 Tow operator999 Unknown 101 Fire104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)				5/6/1980		100 Hispanic 101 Other than Hispanic 999 Unknown		999		
DRIVER LICENSE INFORMATION										
License Status		100	License Class		102	Driver License Type		200	Commercial Driver License Status	100
100 Valid license004 Suspended 000 Not licensed999 Unknown 001 Canceled or denied 002 Expired 003 Revoked			000 None 100 Class A 101 Class B 102 Class C 200 Light commercial/chauffeur (LA class D) 300 Motorcycle only 400 Regular driver license (LA class E) 970 Not applicable			100 Non-CDL driver license 101 Non-CDL restricted driver license (learner's permit, temporary/limited, graduated driver license, etc.) 200 Commercial driver license (CDL) 970 Not applicable			100 Valid000 Canceled or denied 101 Learner's permit001 Disqualified 002 Expired 003 Revoked 004 Suspended 098 Other (not valid) 970 Not applicable (no CDL) 999 Unknown	
License Number		License State								
351651351		LA								
Endorsements on License		Endorsement Compliance		Restrictions on License						
<input type="checkbox"/> 000 None/not applicable <input checked="" type="checkbox"/> 100 H - Hazardous materials <input type="checkbox"/> 101 N - Tank vehicle <input type="checkbox"/> 102 P - Passenger <input type="checkbox"/> 103 S - School <input type="checkbox"/> 104 T - Double/triple trailers <input type="checkbox"/> 105 X - Combination of tank vehicle and hazardous materials <input type="checkbox"/> 200 M - Motorcycle <input type="checkbox"/> 298 Other non-commercial license endorsements <input type="checkbox"/> 999 Unknown		000 No endorsements required for the vehicle 100 Endorsements required, complied with 101 Endorsements required, not complied with 199 Endorsements required, compliance unknown 999 Unknown if endorsements required		000 - None						
				Alcohol Interlock Presence						
				000 No970 Not applicable 100 Yes999 Unknown						
DRIVER SEATING AND SAFETY INFORMATION										
Seating Position		100	Restraint Systems Used							
Standard Vehicle Seats		Other Seating Positions		001 None used – motor vehicle occupant002 No helmet970 Not applicable 980 Other 999 Unknown						
Front		700 Unenclosed cargo area 701 Riding on motor vehicle exterior (non-trailing unit) 800 Trailing unit 801 Sleeper section of cab (truck) 898 Other enclosed cargo area 970 Not applicable 999 Unknown		100 Booster seat 101 Child restraint system – forward facing 102 Child restraint system – rear facing 103 Child restraint system – type unknown 104 Lap belt only used 105 Shoulder and lap belt used 106 Shoulder belt only used 107 Stretcher 108 Wheelchair 199 Restraint used – type unknown						
RowLeftMiddleRightUnk				Any indication of improper use?						
1100101102199				000 No 100 Yes 999 Unknown						
2200201202299										
3300301302399										
4400401402499										
Oth500501502599										
Unk600601602699										
Air Bags Deployed				Ejection		Extrication				
<input type="checkbox"/> 000 Not deployed <input type="checkbox"/> 001 Not deployed - switch off <input checked="" type="checkbox"/> 100 Front <input type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain <input type="checkbox"/> 103 Other (knee, air belt, etc.)				000 Not ejected 100 Ejected, partially 101 Ejected, totally 970 Not applicable 999 Unknown		000 No 100 Trapped and extricated 101 Trapped but not extricated 999 Unknown		000		
<input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 999 Deployment unknown										

Motor Vehicle #	2	Rev. 2024-1	Case #	G-130013-21	Page	12	of	18
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MEDICAL INFORMATION			
Injury Status	100	Type of Medical Transportation	101
100 (K) Fatal Injury	000 Not transported	980 Other	EMS Response Agency New Orleans Emergency Medical Services
101 (A) Suspected Serious Injury	100 EMS air	999 Unknown	
102 (B) Suspected Minor Injury	101 EMS ground		
103 (C) Possible Injury	200 Law enforcement		
104 (O) No Apparent Injury			
Universally Unique Identifier		<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Unknown	EMS Response Run # <input type="checkbox"/> Unknown 123fds
		Facility Receiving Patient	West Jefferson Medical Center

DRIVER CONDITION AND CIRCUMSTANCES					
Conditions at Time of Crash	000	Distraction Action	000	Distraction Source	970
000 Apparently normal		000 Not distracted		100 Hands-free mobile phone	200 Passenger or other non-motorist
100 Asleep/blacked out		100 Talking / listening		101 Hand-held mobile phone	201 External to vehicle/non-motorist area
101 Fatigued		101 Manually operating a device		102 Vehicle-integrated device	298 Other
102 Emotional (depressed, angry, disturbed, etc.)		(e.g., texting, dialing, playing game, etc.)		198 Other electronic device	970 Not applicable
103 Ill (sick), fainted		200 Inattentive			999 Unknown
104 Physically impaired		980 Other distraction or distraction details unknown		Vision Obscurement	
105 Under the influence of medications/drugs/alcohol		999 Unknown if distracted		000 None	105 Embankment
106 Inattentive/distracted				100 Rain, snow, etc. on windshield	106 Sign boards
				101 Windshield otherwise obscured	107 Hillcrest
				102 Vision obscured by load	108 Parked vehicles
				103 Trees, bushes, etc.	109 Moving vehicles
				104 Building	110 Blinded by headlights
					980 Other
					999 Unknown
Suspected Alcohol Usage	000	Test Status	000	Alcohol Kit Number	000
000 No		000 Test not given		100 Blood	300 Urine
100 Yes		001 Test refused		101 Blood clot	301 Vitreous
999 Unknown		100 Test given		102 Blood plasma/serum	302 Liver
		999 Unknown if tested		200 Breath	970 Not applicable
				201 Preliminary breath test (PBT)	980 Other
Suspected Drug Usage	000	Test Status	000	Drug Kit Number	000
000 No		000 Test not given		100 Blood	970 Not applicable
100 Yes		001 Test refused		101 Urine	999 Unknown
999 Unknown		100 Test given		102 Both blood and urine	
		999 Unknown if tested		103 Saliva	
				198 Other	
Suspected Alcohol Usage	000	Test Status	000	Alcohol Test Type	970
000 No		000 Test not given		100 Blood	300 Urine
100 Yes		001 Test refused		101 Blood clot	301 Vitreous
999 Unknown		100 Test given		102 Blood plasma/serum	302 Liver
		999 Unknown if tested		200 Breath	970 Not applicable
				201 Preliminary breath test (PBT)	980 Other
Suspected Drug Usage	000	Test Status	000	Drug Test Type	970
000 No		000 Test not given		100 Blood	970 Not applicable
100 Yes		001 Test refused		101 Urine	999 Unknown
999 Unknown		100 Test given		102 Both blood and urine	
		999 Unknown if tested		103 Saliva	
				198 Other	
Suspected Alcohol Usage	000	Test Status	000	Alcohol Test Results	970
000 No		000 Test not given		000 Results pending	
100 Yes		001 Test refused		001 Negative results with no actual value	
999 Unknown		100 Test given		100 Results received	
		999 Unknown if tested		101 Positive results with no actual value	
				970 Not applicable	
				999 Unknown	
Suspected Drug Usage	000	Test Status	000	Drug Test Results	970
000 No		000 Test not given		000 Results pending	
100 Yes		001 Test refused		001 Negative results with no actual value	
999 Unknown		100 Test given		100 Results received	
		999 Unknown if tested		101 Positive results with no actual value	
				970 Not applicable	
				999 Unknown	

DRIVER ACTIONS			
Driver Actions at Time of Crash	000	Avoidance Maneuver	980
000 No contributing action		000 No avoidance maneuver	
100 Disregarded other road markings		100 Accelerating	
101 Disregarded other traffic signs		101 Accelerating and steering left	
102 Failed to keep in proper lane		102 Accelerating and steering right	
103 Failed to yield right-of-way		103 Braking and steering left	
104 Followed too closely		104 Braking and steering right	
105 Improper backing		105 Braking (lockup)	
106 Improper passing		106 Braking (no lockup)	
107 Improper turn		107 Braking (lockup unknown)	
108 Careless driving, inattentive operation, improper driving, or driving without due care		108 Releasing brakes	
109 Operating the vehicle in an erratic, reckless, or negligent manner		109 Steering left	
110 Over-correcting or over-steering		110 Steering right	
		980 Other	
		999 Unknown	
980 Other contributing action			
999 Unknown			
Pre-Collision Stability	000		
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	

CRASH REPORT - DRIVER CONDITION AND CIRCUMSTANCES

Total # of Passengers2

Rev. 2024-1

Case #G-130013-21

Page13 of18

PASSENGER INFORMATION

MOTOR VEHICLE #1PASSENGER #1

Name☐ Unknown

MortyFord

FirstMiddleLastSuffix

Date of BirthUnknown

Age12

Sex

100 Female

101 Male

999 Unknown

101

Race

103

Address☐ Unknown

544 Rick StreetBaton RougeLA70454

StreetCityStatePostal Code

Phone Number☒ Not Collected

Ethnicity999

Air Bags Deployed

☐ 000 Not deployed

☐ 001 Not deployed - switch off

☐ 100 Front

☒ 101 Side

☐ 102 Curtain

☐ 103 Other

Injury Status

☐ 970 Not applicable

☐ 999 Unknown

100

Incident Responder

000

Restraint System

105

Any indication of improper use?

000 No

100 Yes

999 Unknown

000

Type of Medical Transportation

101

EMS Response Agency

East Carroll EMS

Facility Receiving Patient

Winn Parish Medical Center

Seating Position

202

Ejection

000

Extrication

000

MOTOR VEHICLE #2PASSENGER #1

Name☐ Unknown

DixonWins

FirstMiddleLastSuffix

Date of BirthUnknown

Age26

Sex

100 Female

101 Male

999 Unknown

101

Race

102

Address☐ Unknown

87 Foody StreetWalkerLA70585

StreetCityStatePostal Code

Phone Number☒ Not Collected

Ethnicity100

Air Bags Deployed

☐ 000 Not deployed

☐ 001 Not deployed - switch off

☒ 100 Front

☐ 101 Side

☐ 102 Curtain

☐ 103 Other

Injury Status

☐ 970 Not applicable

☐ 999 Unknown

103

Incident Responder

000

Restraint System

105

Any indication of improper use?

000 No

100 Yes

999 Unknown

000

Type of Medical Transportation

000

EMS Response Agency

Not applicable

Facility Receiving Patient

Not applicable

Seating Position

102

Ejection

000

Extrication

000

MOTOR VEHICLE #PASSENGER #

Name☐ Unknown

FirstMiddleLastSuffix

Date of Birth

Age

Sex

100 Female

101 Male

999 Unknown

Race

Address☐ Unknown

StreetCityStatePostal Code

Phone Number☐ Not Collected

Ethnicity

Air Bags Deployed

☐ 000 Not deployed

☐ 001 Not deployed - switch off

☐ 100 Front

☐ 101 Side

☐ 102 Curtain

☐ 103 Other

Injury Status

☐ 970 Not applicable

☐ 999 Unknown

Incident Responder

Restraint System

Any indication of improper use?

000 No

100 Yes

999 Unknown

Type of Medical Transportation

EMS Response Agency

Facility Receiving Patient

Seating Position

Ejection

Extrication

PASSENGER CODES

Injury Status

100 (K) Fatal injury

101 (A) Suspected serious injury

102 (B) Suspected minor injury

103 (C) Possible injury

104 (O) No apparent injury

Race

100 American Indian or Alaska Native

101 Asian or Pacific Islander

102 Black

103 White

980 Other

999 Unknown

Type of Medical Transportation

000 Not transported

100 EMS air

101 EMS ground

200 Law enforcement

980 Other

999 Unknown

Ejection

000 Not ejected

100 Ejected, partially

101 Ejected, totally

970 Not applicable

999 Unknown

Ethnicity

100 Hispanic

101 Other than Hispanic

999 Unknown

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

Extrication

000 No

100 Trapped and extricated

101 Trapped but not extricated

999 Unknown

Restraint Systems

001 None used – motor vehicle occupant

100 Booster seat

101 Child restraint system – forward facing

102 Child restraint system – rear facing

103 Child restraint system – type unknown

104 Lap belt only used

105 Shoulder and lap belt used

106 Shoulder belt only used

107 Stretcher

108 Wheelchair

199 Restraint used – type unknown

002 No helmet

200 DOT-compliant motorcycle helmet

201 Not DOT-compliant motorcycle helmet

299 Unknown if DOT-compliant motorcycle helmet

970 Not applicable

980 Other

999 Unknown

Seating Position

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
Other	500	501	502	599

Unk	600	601	602	699
-----	-----	-----	-----	-----

700 Unenclosed cargo area

701 Riding on motor vehicle exterior (non-trailing unit)

800 Trailing unit

801 Sleeper section of cab (truck)

898 Other enclosed cargo area

970 Not applicable

999 Unknown

LOUISIANA UNIFORM CRASH REPORT  
NON-MOTORIST INFORMATION

Non-Motorist # 1		Rev. 2024-1		Case # G-130013-21		Page 14 of 18	
NON-MOTORIST INFORMATION							
Name <input type="checkbox"/> Unknown Peter Russel <small>First Middle Last Suffix</small>				Age <input type="checkbox"/> Unknown 45		Sex <input type="checkbox"/> Unknown 100 Female 101 Male 999 Unknown	
Address <input checked="" type="checkbox"/> Unknown <small>Street City State Postal Code</small>				Phone Number <input checked="" type="checkbox"/> Not Collected		Race <input type="checkbox"/> 103 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown	
Incident Responder 000 No 102 Police 980 Other 100 EMS 103 Tow operator 999 Unknown 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)				Date of Birth <input checked="" type="checkbox"/> Unknown		Ethnicity <input type="checkbox"/> 100 100 Hispanic 101 Other than Hispanic 999 Unknown	
NON-MOTORIST CIRCUMSTANCES							
Non-Motorist Type <input type="checkbox"/> 100		Initial <input type="checkbox"/> 100		Location <input type="checkbox"/> 100		Contact Point <input type="checkbox"/> 100	
100 Bicyclist 198 Other cyclist 200 Pedestrian 298 Other pedestrian on personal conveyance 300 Occupant of a non-motor vehicle transportation device 500 Person in or on a building 999 Unknown		100 Front (12 o'clock) 101 Right (3 o'clock) 102 Rear (6 o'clock) 103 Left (9 o'clock) 999 Unknown		100 Intersection - marked crosswalk 101 Intersection - unmarked crosswalk 102 Intersection - other 103 Median/crossing island 104 Midblock - marked crosswalk 105 Shoulder/roadside 106 Travel lane - other location		200 Signed route (no pavement marking) 201 Shared lane markings 202 On-street bike lanes 203 On-street buffered bike lanes 204 Separated bike lanes 205 Off-street trails/sidepaths 980 Other 999 Unknown	
Struck by Vehicle # 2		Origin/Destination <input type="checkbox"/> 999 100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 Unknown		Safety Equipment <input checked="" type="checkbox"/> 000 None <input type="checkbox"/> 100 Helmet <input type="checkbox"/> 101 Protective pads used (elbows, knees, shins, etc.) <input type="checkbox"/> 102 Reflective wear (backpack, triangles, etc.)		<input type="checkbox"/> 103 Lighting <input type="checkbox"/> 980 Other <input type="checkbox"/> 104 Reflectors <input type="checkbox"/> 999 Unknown	
Action Prior to Crash <input type="checkbox"/> 102 000 None 100 Adjacent to roadway (e.g., shoulder, median) 101 Crossing roadway 102 Waiting to cross roadway 103 Walking/cycling along roadway against traffic (in or adjacent to travel lane) 104 Walking/cycling along roadway with traffic (in or adjacent to travel lane) 105 Walking/cycling on sidewalk 106 Working in trafficway (incident response) 198 In roadway -other 980 Other 999 Unknown		Actions or Circumstances At Time of Crash <input type="checkbox"/> 000 000 None (no improper action) 100 Dart / dash 101 Disabled vehicle related (working on, pushing, leaving/approaching) 102 Entering/exiting parked/standing vehicle 103 Failure to obey traffic signs, signals, or officer 104 Failure to yield right-of-way 105 Improper passing 106 Improper turn/merge 107 Inattentive (talking, eating, etc.) 108 In roadway improperly (standing, lying, working, playing)		Clothing Brightness <input type="checkbox"/> 000 100 Light 101 Dark 970 Not applicable 999 Unknown		Upper <input type="checkbox"/> 100 Lower <input type="checkbox"/> 101	
NON-MOTORIST MEDICAL INFORMATION							
Injury Status <input type="checkbox"/> 100 100 (K) Fatal Injury 101 (A) Suspected Serious Injury 102 (B) Suspected Minor Injury 103 (C) Possible Injury 104 (O) No Apparent Injury		Type of Medical Transportation <input type="checkbox"/> 101 000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown		EMS Response Agency Acadian Ambulance Services		EMS Response Run # <input checked="" type="checkbox"/> Unknown	
				Universally Unique Identifier <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Unknown		Facility Receiving Patient Winn Parish Medical Center	
NON-MOTORIST CONDITION							
Conditions at the Time of the Crash <input type="checkbox"/> 000 000 Apparently normal 100 Asleep/blacked out 101 Fatigued 102 Emotional (depressed, angry, disturbed, etc.) 103 Ill (sick), fainted 104 Physically impaired 105 Under the influence of medications/ drugs/alcohol 106 Inattentive/distracted		Distraction Action <input type="checkbox"/> 000 000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 200 Inattentive 980 Other distraction or distraction details unknown 999 Unknown if distracted		Distraction Source <input type="checkbox"/> 970 100 Hands-free mobile phone 101 Hand-held mobile phone 102 Vehicle-integrated device 198 Other electronic device 200 Passenger or other non-motorist 201 External to vehicle/non-motorist area 298 Other 970 Not applicable 999 Unknown			
Suspected Alcohol Usage <input type="checkbox"/> 000 000 No 100 Yes 999 Unknown		Test Status <input type="checkbox"/> 000 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Alcohol Kit Number <input type="checkbox"/> Unknown Alcohol Test Type <input type="checkbox"/> 970 100 Blood 101 Blood clot 102 Blood plasma/serum 200 Breath 201 Preliminary breath test (PBT)		Alcohol Test Results <input type="checkbox"/> 970 000 Results pending 001 Negative results with no actual value 100 Results received 101 Positive results with no actual value 970 Not applicable 999 Unknown	
Suspected Drug Usage <input type="checkbox"/> 000 000 No 100 Yes 999 Unknown		Test Status <input type="checkbox"/> 000 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Drug Kit Number <input type="checkbox"/> Unknown Drug Test Type <input type="checkbox"/> 970 100 Blood 101 Urine 102 Both blood and urine 103 Saliva 198 Other		Drug Test Results Not applicable	

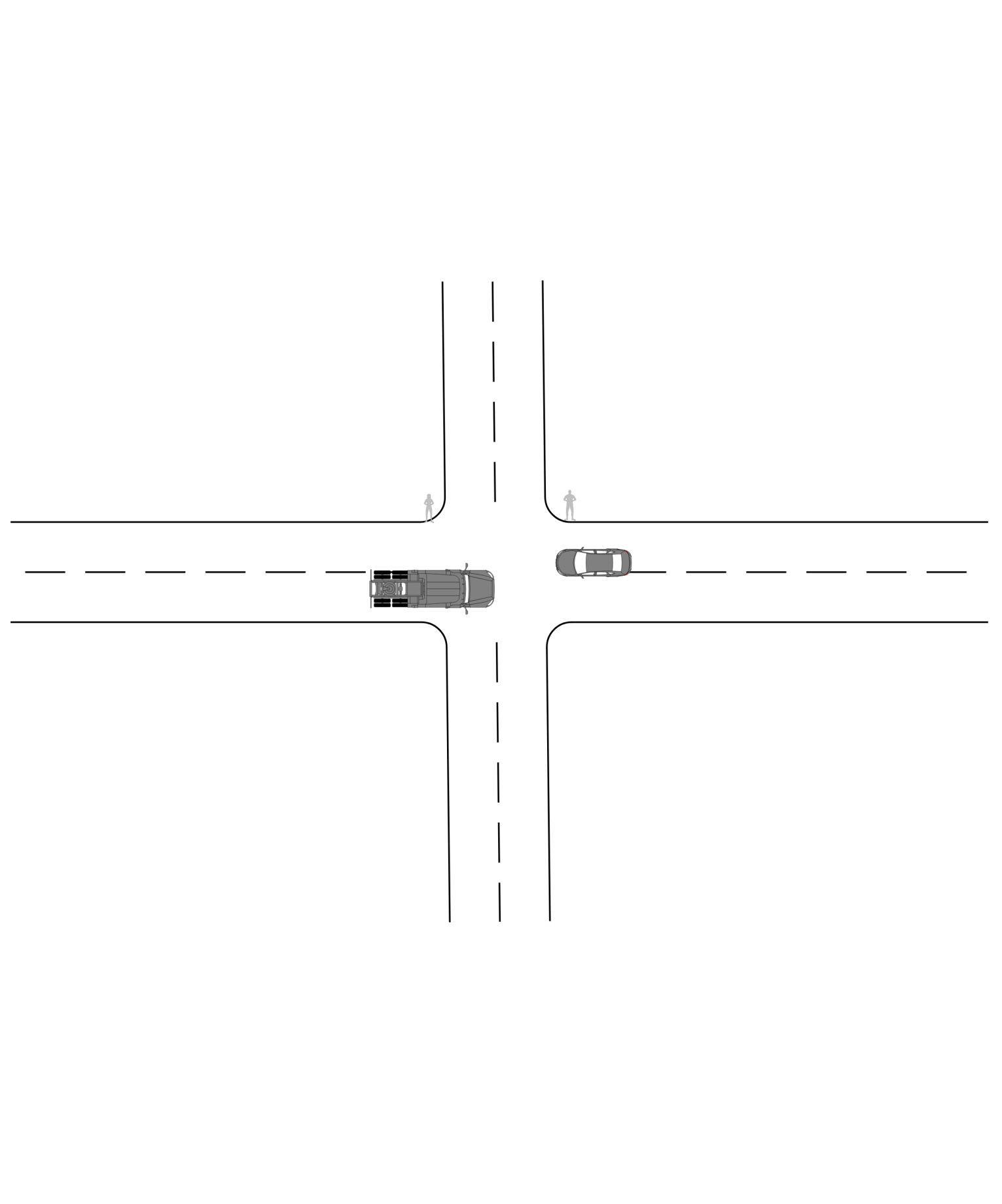
LOUISIANA UNIFORM CRASH REPORT  
NON-MOTORIST INFORMATION

2021000338

Non-Motorist # 2		Rev. 2024-1		Case # G-130013-21		Page 15 of 18	
NON-MOTORIST INFORMATION							
Name <input type="checkbox"/> Unknown Sara Johnson <small>First Middle Last Suffix</small>				Age <input type="checkbox"/> Unknown 26		Sex <input type="checkbox"/> Unknown 100 Female 101 Male 999 Unknown	
Address <input checked="" type="checkbox"/> Unknown <small>Street City State Postal Code</small>				Phone Number <input checked="" type="checkbox"/> Not Collected		Race <input type="checkbox"/> 103 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown	
Incident Responder 000 No 102 Police 980 Other 100 EMS 103 Tow operator 999 Unknown 101 Fire 104 Transportation (i.e. maintenance workers, safety service patrol operators, etc.)				Date of Birth <input checked="" type="checkbox"/> Unknown		Ethnicity <input type="checkbox"/> 999 100 Hispanic 101 Other than Hispanic 999 Unknown	
NON-MOTORIST CIRCUMSTANCES							
Non-Motorist Type <input type="checkbox"/> 200		Initial <input type="checkbox"/> 100		Location <input type="checkbox"/> 100			
100 Bicyclist 198 Other cyclist 200 Pedestrian 298 Other pedestrian on personal conveyance 300 Occupant of a non-motor vehicle transportation device 500 Person in or on a building 999 Unknown		Contact Point 100 Front (12 o'clock) 101 Right (3 o'clock) 102 Rear (6 o'clock) 103 Left (9 o'clock) 999 Unknown		100 Intersection - marked crosswalk 101 Intersection - unmarked crosswalk 102 Intersection - other 103 Median/crossing island 104 Midblock - marked crosswalk 105 Shoulder/roadside 106 Travel lane - other location 200 Signed route (no pavement marking) 201 Shared lane markings 202 On-street bike lanes 203 On-street buffered bike lanes 204 Separated bike lanes 205 Off-street trails/sidepaths 980 Other 999 Unknown		300 Driveway access 301 Non-trafficway area 302 Shared-use path or trail 303 Sidewalk	
Struck by Vehicle # 1		Origin/Destination <input type="checkbox"/> 999 100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 Unknown		Safety Equipment <input checked="" type="checkbox"/> 000 None <input type="checkbox"/> 100 Helmet <input type="checkbox"/> 101 Protective pads used (elbows, knees, shins, etc.) <input type="checkbox"/> 102 Reflective wear (backpack, triangles, etc.)		<input type="checkbox"/> 103 Lighting <input type="checkbox"/> 980 Other <input type="checkbox"/> 104 Reflectors <input type="checkbox"/> 999 Unknown	
Action Prior to Crash <input type="checkbox"/> 102 000 None 100 Adjacent to roadway (e.g., shoulder, median) 101 Crossing roadway 102 Waiting to cross roadway 103 Walking/cycling along roadway against traffic (in or adjacent to travel lane) 104 Walking/cycling along roadway with traffic (in or adjacent to travel lane) 105 Walking/cycling on sidewalk 106 Working in trafficway (incident response) 198 In roadway -other 980 Other 999 Unknown		Actions or Circumstances At Time of Crash <input type="checkbox"/> 000 000 None (no improper action) 100 Dart / dash 101 Disabled vehicle related (working on, pushing, leaving/approaching) 102 Entering/exiting parked/standing vehicle 103 Failure to obey traffic signs, signals, or officer 104 Failure to yield right-of-way 105 Improper passing 106 Improper turn/merge 107 Inattentive (talking, eating, etc.) 108 In roadway improperly (standing, lying, working, playing) 109 Not visible (dark clothing, no lighting, etc.) 110 Wrong-way riding or walking 980 Other 999 Unknown				Clothing Brightness <input type="checkbox"/> Upper <input type="checkbox"/> Lower <input type="checkbox"/> 101 100 Light 101 Dark 970 Not applicable 999 Unknown	
NON-MOTORIST MEDICAL INFORMATION							
Injury Status <input type="checkbox"/> 100 100 (K) Fatal Injury 101 (A) Suspected Serious Injury 102 (B) Suspected Minor Injury 103 (C) Possible Injury 104 (O) No Apparent Injury		Type of Medical Transportation <input type="checkbox"/> 200 000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown		EMS Response Agency Not applicable		EMS Response Run # <input type="checkbox"/> Unknown	
				Universally Unique Identifier <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Unknown		Facility Receiving Patient Woman's Hospital Baton Rouge	
NON-MOTORIST CONDITION							
Conditions at the Time of the Crash <input type="checkbox"/> 000 000 Apparently normal 100 Asleep/blacked out 101 Fatigued 102 Emotional (depressed, angry, disturbed, etc.) 103 Ill (sick), fainted 104 Physically impaired 105 Under the influence of medications/ drugs/alcohol 106 Inattentive/distracted		790 Not applicable 980 Other 999 Unknown		Distraction Action <input type="checkbox"/> 000 000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 200 Inattentive 980 Other distraction or distraction details unknown 999 Unknown if distracted		Distraction Source <input type="checkbox"/> 970 100 Hands-free mobile phone 101 Hand-held mobile phone 102 Vehicle-integrated device 198 Other electronic device 200 Passenger or other non-motorist 201 External to vehicle/non-motorist area 298 Other 970 Not applicable 999 Unknown	
Suspected Alcohol Usage <input type="checkbox"/> 000 000 No 100 Yes 999 Unknown		Test Status <input type="checkbox"/> 000 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Alcohol <input type="checkbox"/> Unknown Kit Number		Alcohol Test Type <input type="checkbox"/> 970 100 Blood 101 Blood clot 102 Blood plasma/serum 200 Breath 201 Preliminary breath test (PBT) 300 Urine 301 Vitreous 302 Liver 970 Not applicable 980 Other	
Suspected Drug Usage <input type="checkbox"/> 000 000 No 100 Yes 999 Unknown		Test Status <input type="checkbox"/> 000 000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Drug <input type="checkbox"/> Unknown Kit Number		Drug Test Type <input type="checkbox"/> 970 100 Blood 101 Urine 102 Both blood and urine 103 Saliva 198 Other 970 Not applicable 999 Unknown	
						Alcohol Test Results <input type="checkbox"/> 970 000 Results pending 001 Negative results with no actual value 100 Results received 101 Positive results with no actual value 970 Not applicable 999 Unknown	
						BAC Not applicable	
CRASH REPORT - NON-MOTORIST INFORMATION							

Scene # 1	DIAGRAM Rev. 2024-1	Case #	G-130013-21	Page	16	of	18
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CRASH DIAGRAM





NARRATIVE

Rev. 2024-1

CRASH NARRATIVE

After over 16 years of use, the current crash report form no longer meets the needs of the transportation community. A new crash report is being developed based on the Model Minimum Uniform Crash Criteria (MMUCC) guidelines and will capture the data necessary to improve highway safety in Louisiana.

A new crash reporting application called Louisiana eCrash (LA eCrash) developed by the Center for Advanced Public Safety (CAPS) at the University of Alabama will soon replace LACRASH as the state's crash reporting application. CAPS currently has their software in use in Alabama, Mississippi, and Arkansas.

LSU's Center for Analytics & Research in Transportation Safety (CARTS) will continue to support law enforcement agencies using the new LA eCrash application. CARTS will also work with your agency to provide the data schema and technical information required for those agencies choosing to use a third-party vendor approach or already have a CAD/RMS system in place. After over 16 years of use, the current crash report form no longer meets the needs of the transportation community. A new crash report is being developed based on the Model Minimum Uniform Crash Criteria (MMUCC) guidelines and will capture the data necessary to improve highway safety in Louisiana.

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

Vehicle 1 Model: other numnum  
Vehicle 1 Driver Actions: Auto-Pilot Malfunction  
Vehicle 1 Contributing Circumstances: Auto-Pilot

LOUISIANA UNIFORM CRASH REPORT

NARRATIVE

Rev. 2024-1

CRASH NARRATIVE

Vehicle 2 Driver Avoidance Maneuver: 0