

LOUISIANA UNIFORM CRASH REPORT

CRASH INFORMATION

2021000364

<input type="checkbox"/> Secondary Crash		<input type="checkbox"/> Photos Taken		<input checked="" type="checkbox"/> Videos Taken		Rev. 2024-1		Case #		A-040404-26		Page		1		of		11									
Number of Motorists		1		Number of Non-Motorists		1		Non-Fatally Injured Persons		1		Fatalities		0		Total Injuries and Fatalities		1		Vehicles Involved		1		Troop		A	
Investigating Agency						Division			Parish			City			Latitude			Longitude									
LSP (Troop A)									East Baton Rouge			Baton Rouge			30.448151° N			91.154748° 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											
10/05/2021 2100				10/05/2021 2110				10/05/2021 2112				10/05/2021 2112				10/05/2021 2145											
ROAD INFORMATION																											
Highway <input checked="" type="checkbox"/> Not applicable						Road																					
						S ACADIAN THWY																					
Distance/Direction From Intersection <input type="checkbox"/> Not applicable										Intersecting Road <input type="checkbox"/> Crash was at an intersection																	
80.0 ft North										Government ST																	
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				S South							
104 City street				970 Not applicable												5 Five or more											
200 Off road/private property																											
INVESTIGATING OFFICER																											
Rank		First Name						Middle Name						Last Name						Suffix							
It		Eric												Newman													
Badge #				Printed Name										Signature													
789				eric										eric													
CRASH CIRCUMSTANCES AND CONDITIONS																											
First Harmful Event						204		Location of First Harmful Event						106		Manner of Crash						000					
Non-collision 100 Cargo/equipment loss or shift 101 Fell/jumped from motor vehicle 102 Fire/explosion 103 Immersion, full or partial 104 Jackknife 105 Overturn/rollover 106 Thrown or falling object 198 Other non-collision harmful event								100 Gore 101 In parking lane or zone 102 Median 103 Off roadway, location unknown 104 On roadway 105 On shoulder, left side 106 On shoulder, right side 107 Outside road/right-of-way 108 Roadside 109 Separator/traffic island 999 Unknown								000 Not a collision between two motor vehicles in transport 100 Angle - left overtake 101 Angle - left opposite direction 102 Angle - left into flow 103 Angle - right into flow 104 Angle - right overtake 105 Angle - perpendicular/other angle 500 Angle - left across flow 501 Angle - right across flow											
Collision with Non-Fixed Object 200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle (including bicycles) 204 Collision with pedestrian 205 Collision with railway vehicle (train, engine) 206 Collision with object at rest from MV in transport 207 Collision with falling/shifting cargo or anything set in motion by MV 208 Collision with work zone/maintenance equipment 209 Collision with farm equipment 297 Collision with other non-motorist 298 Collision with other non-fixed object								Relation to Junction 000 Not an interchange area 100 Acceleration or deceleration lane 101 Crossover related 102 Driveway access or related 103 Entrance/exit ramp or related 104 Intersection or related 106 Railway grade crossing 107 Shared-use path or trail 108 Through roadway 980 Other location within an interchange area (median, shoulder, and roadside) 999 Unknown						000		Contributing Factor 100 Violations 101 Movement prior to crash 102 Vision obstructions 103 Driver condition 104 Vehicle condition 105 Road surface 106 Roadway condition 107 Lighting condition 108 Weather condition 109 Traffic control 110 Non-motorist condition 111 Non-motorist action 970 Not applicable						Primary 103 Secondary 101					
Collision with Fixed Object 300 Collision with bridge overhead structure 301 Collision with bridge pier or support 302 Collision with bridge rail 303 Collision with cable barrier 304 Collision with concrete traffic barrier 305 Collision with culvert 306 Collision with curb 307 Collision with ditch 308 Collision with embankment 309 Collision with fence 310 Collision with guardrail end terminal 311 Collision with guardrail face 312 Collision with impact attenuator/crash cushion 313 Collision with mailbox 314 Collision with traffic sign support 315 Collision with traffic signal support 316 Collision with tree (standing) 317 Collision with utility pole/light support 396 Collision with other post, pole, or support 397 Collision with other traffic barrier 398 Collision with other fixed object (wall, building, tunnel, etc.) 399 Collision with unknown fixed object								Intersection Geometry 100 Angled / skewed 101 Roundabout / traffic circle 102 Perpendicular 970 Not applicable						970		School Bus Relation 000 No 100 Yes, school bus directly involved 101 Yes, school bus indirectly involved						000					
								Intersection Traffic Control 000 No controls 100 Signalized 101 Stop -all way 102 Stop -partial 103 Yield 970 Not applicable						970													

CRASH INFORMATION

Rev. 2024-1

Case #A-040404-26

Page2of11

CRASH CONDITIONS							
Roadway Surface Condition	000	Light Condition	301	Weather Conditions	000	Environmental Conditions	000
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	103	Work Zone Type	100	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		999 Unknown	
		104 Termination area		970 Not applicable		104 Traffic control device malfunction					
		970 Not applicable		980 Other type of work zone		105 Free flow (light & fast traffic)					
		999 Unknown		999 Unknown		980 Other					
						970 Not applicable					
						999 Unknown					

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

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

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

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				
StreetCityStatePostal Code				

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				
StreetCityStatePostal Code				

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

Motor Vehicle # 1		Rev. 2024-1		Case #	A-040404-26	Page	3	of	11
DESCRIPTION AND INFORMATION									
<div>Check if this vehicle had no driver <input type="checkbox"/></div>		<div>Hit and Run 000 No, did not leave scene 100 Yes, driver and vehicle left scene 101 Yes, only driver left scene</div>		<div>000 Vehicle Type 100 Motor vehicle in transport 101 Parked motor vehicle 102 Working vehicle / equipment</div>		<div>100 Vehicle Body Type Passenger Vehicles 100 Passenger car 101 Passenger van / Minivan (less than 9 seats) 102 (Sport) utility vehicle Construction / Farm Equipment 200 Construction equipment (backhoe, bulldozer, etc.) 201 Farm equipment (tractor, combine, harvester, etc.) Cycle / Off Road / Recreation 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 Trucks 400 Single unit truck 401 Truck tractor 498 Other truck Large Passenger Vehicle 500 Motor home 501 Passenger van (9-15 seats) 502 Passenger van (16+ seats) 503 Large limo 504 Mini-bus Other 980 Other 999 Unknown</div>			
VIN <input checked="" type="checkbox"/> Unknown									
Model Year <input checked="" type="checkbox"/> Unknown		Make Acura		Model ILX		Color Green			
License Plate <input type="checkbox"/> Missing State IL <input type="checkbox"/> Unknown Number CONNR <input type="checkbox"/> Unknown Year 2020 <input type="checkbox"/> Non-expiring <input type="checkbox"/> Unknown									
Owner Name <input type="checkbox"/> Same as driver <input type="checkbox"/> Unknown Sara Conner									
Owner Address <input type="checkbox"/> Same as driver <input checked="" type="checkbox"/> Unknown Street City State Postal Code									
Insurance <input checked="" type="checkbox"/> Uninsured at time of crash Company Phone # NAIC # Policy # Expiration Date									
DAMAGE									
Damage Extent 100 000 None 100 Minor damage 101 Functional damage 102 Disabling damage 990 Vehicle not at scene		Initial Point of Contact 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 000 Non-collision <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 100 Top <input type="checkbox"/> 113 Undercarriage <input type="checkbox"/> 114 Cargo Loss <input type="checkbox"/> 999 Unknown		Damaged Areas 6 7 8 9 10 11 12 5 4 3 2 1 <input type="checkbox"/> 001 Vehicle not at scene <input type="checkbox"/> 002 No damage <input type="checkbox"/> 100 Top <input checked="" type="checkbox"/> 113 Undercarriage		TOWING			
				Tow Status 100 000 Not towed 100 Towed, but not due to disabling damage 101 Towed (or will be towed) due to disabling damage Towed By <input type="checkbox"/> Unknown		Tow Authority 101 100 Owner 101 Law enforcement 970 Not applicable 980 Other Big Tow			
MOTOR VEHICLE CIRCUMSTANCES									
Vehicle Usage 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)		Vehicle Maneuver 000 100 Going straight 101 Backing 102 Merging 103 Making U-turn 104 Negotiating a curve 106 Turning left 107 Turning right 108 Traveling wrong way		Vehicle Maneuver Reason 000 000 Normal movement 100 To avoid other vehicle 101 To avoid non-motorist 102 To avoid animal 198 To avoid other object 200 Passing		Direction of Travel Before Crash 500 000 Not on roadway 001 In roadway but not in motion 002 Not on trafficway			
				200 Leaving a parking position 300 Entering a parking position 400 Slowing 500 Parked 501 Stopped		980 Other 999 Unknown 207 Due to driver violation 208 Due to vehicle condition (failure) 209 Due to pavement condition 210 High wind 980 Other 999 Unknown			

LOUISIANA UNIFORM CRASH REPORT
VEHICLE INFORMATION

2021000364

Motor Vehicle # 1		Rev. 2024-1		Case # A-040404-26		Page 4 of 11	
MOTOR VEHICLE CIRCUMSTANCES							
Skidmark Data (Feet)		Distance Traveled After Impact (Feet) <input type="checkbox"/> Unknown		Contributing Defects		000	
Front Left	Front Right	<input checked="" type="checkbox"/> Not applicable or measured <input type="checkbox"/> Unknown		200		000 None	
				Vehicle Lighting		100 Brakes	
Rear Left	Rear Right			000 Headlights off		101 Exhaust system	
				100 Headlights on		102 Body, doors	
				101 Daytime running lights		103 Steering	
				999 Unknown		104 Power train	
Traffic Control Device Types and Statuses				105 Suspension			
Traffic Control Device Types		Devices Present		Devices Inoperative or Missing		106 Tires	
000 None	300 Flashing railroad crossing (may include gates)	1 203	1 000	107 Wheels		108 Headlights	
100 Person (including flagger, law enforcement, crossing guard, etc)	301 Flashing school zone signal	2 298	2	108 Headlights		109 Tail lights	
200 Bicycle crossing sign	302 Flashing traffic control signal	3	3	110 Signal lights		111 All lights	
201 Curve Ahead warning sign	303 Lane use control signal	4	4	112 Window / windshield		113 Mirrors	
202 Intersection Ahead warning sign	304 Ramp meter signal	Traffic Signal Status		970		114 Wipers	
203 Pedestrian crossing sign	305 Traffic control signal	100 Red signal on		101 Partial automation		115 Truck coupling / trailer hitch / safety chains	
204 Railroad crossing sign	398 Other signal	200 Yellow signal on		102 Conditional automation		980 Other	
205 Reduce Speed Ahead warning sign	400 Bicycle crossing	300 Green signal on		103 High automation		999 Unknown	
206 School zone sign	401 Pedestrian crossing	970 Not applicable		104 Full automation		Automation System Level Present	
207 Stop sign	402 Railroad crossing	999 Unknown		199 Automation level unknown		999	
208 Yield sign	403 School zone			999 Unknown		Automation System Level Engaged	
298 Other warning sign	404 Yellow no passing line			000 No automation		999	
	405 White or yellow dash line			100 Driver assistance			
	406 Solid white lane line			101 Partial automation			
	498 Other pavement marking (excluding edgelines, centerlines, or lane lines)			102 Conditional automation			
980 Other	999 Unknown			103 High automation			
Trafficway Division		000		Barrier Type		000	
000 Not divided	100 Divided, flush median (greater than 4 ft wide)	000 None		100 Cable barrier		101 Partial automation	
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 Conditional automation	
	102 Divided, depressed median	103 Guardrail		104 Full automation		103 High automation	
	999 Unknown	980 Other		199 Automation level unknown		104 Full automation	
Roadway Grade	100	Number of Through Lanes	Number of Auxiliary Lanes	Roadway Alignment	100	Permitted Travel	200
000 Not on trafficway		4	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						40	
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				Most Harmful Event			
1 006 2 204 3 4				204			
Non-Harmful Events				Collision with Fixed Object			
000 Cross centerline 001 Cross median 002 End departure (T-intersection, dead-end, etc.) 003 Downhill runaway 004 Equipment failure (blown tire, brake failure, etc.)				005 Ran off roadway left 006 Ran off roadway right 007 Reentering roadway 008 Separation of units 098 Other non-harmful event			
Non-Collision Events				Collision with Person / Vehicle / Non-Fixed Object			
100 Cargo/equipment loss or shift 101 Fell/jumped from motor vehicle 102 Fire/explosion 103 Immersion, full or partial 104 Jackknife 105 Overturn/rollover 106 Thrown or falling object 198 Other non-collision harmful event				200 Collision with animal (live) 201 Collision with motor vehicle in transport 202 Collision with parked motor vehicle 203 Collision with pedalcycle (including bicycles) 204 Collision with pedestrian 205 Collision with railway vehicle (train, engine) 206 Collision with object at rest from MV in transport 207 Collision with falling, shifting cargo, or anything set in motion by MV 208 Collision with work zone/maintenance equipment 209 Collision with farm equipment 297 Collision with other non-motorist 298 Collision with other non-fixed object			
				300 Collision with bridge overhead structure 301 Collision with bridge pier or support 302 Collision with bridge rail 303 Collision with cable barrier 304 Collision with concrete traffic barrier 305 Collision with culvert 306 Collision with curb 307 Collision with ditch 308 Collision with embankment 309 Collision with fence 310 Collision with guardrail end terminal 311 Collision with guardrail face 312 Collision with impact attenuator/crash cushion 313 Collision with mailbox 314 Collision with traffic sign support 315 Collision with traffic signal support 316 Collision with tree (standing) 317 Collision with utility pole/light support			
				396 Collision with other post,pole,or support 397 Collision with other traffic barrier 398 Collision with other fixed object (wall, building, tunnel, etc.) 399 Collision with unknown fixed object			
CRASH REPORT - MOTOR VEHICLE CIRCUMSTANCES AND EVENTS							

Motor Vehicle #1

Rev. 2024-1

Case #A-040404-26

Page5of11

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 placard999 Unknown

Hazardous Material IDN/A

Hazardous Material Class970

1 Explosives970 Not applicable
2 Gas999 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 Compartment970

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

Cargo Body Type970

000 No cargo body
100 Bus
101 Auto transporter
102 Cargo tank
103 Concrete mixer
104 Dump
970 Not applicable
980 Other
999 Unknown

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

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 Name☐ Unknown

Motor Carrier ID Number

Motor Carrier Address☐ Unknown

Motor Carrier Phone Number☐ Unknown

StreetCityStatePostal Code

GVWR/GCWR100

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 INFORMATIONTRAILER #

VIN☐ Unknown

Number of Axles☐ Unknown

Year☐ Unknown

Make☐ Unknown

Model☐ Unknown

License Plate☐ Missing

☐ Non-expiring

State☐ Unknown

Number☐ Unknown

Year☐ Unknown

☐ Unknown

TRAILER INFORMATIONTRAILER #

VIN☐ Unknown

Number of Axles☐ Unknown

Year☐ Unknown

Make☐ Unknown

Model☐ Unknown

License Plate☐ Missing

☐ Non-expiring

State☐ Unknown

Number☐ Unknown

Year☐ Unknown

☐ Unknown

TRAILER INFORMATIONTRAILER #

VIN☐ Unknown

Number of Axles☐ Unknown

Year☐ Unknown

Make☐ Unknown

Model☐ Unknown

License Plate☐ Missing

☐ Non-expiring

State☐ Unknown

Number☐ Unknown

Year☐ Unknown

☐ Unknown

Motor Vehicle # 1		DRIVER INFORMATION		Rev. 2024-1	Case #	A-040404-26	Page	6	of	11																																								
DRIVER INFORMATION																																																		
Name <input type="checkbox"/> Unknown Sara Conner <small>First Middle Last Suffix</small>					Age <input checked="" type="checkbox"/> Unknown	Sex 100 Female 101 Male 999 Unknown	100	Race 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown																																										
Address <input checked="" type="checkbox"/> Unknown <small>Street City State Postal Code</small>					Phone Number <input type="checkbox"/> Not Collected 555-555-1234																																													
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 100 Hispanic 101 Other than Hispanic 999 Unknown																																											
DRIVER LICENSE INFORMATION																																																		
License Status 100 Valid license 004 Suspended 000 Not licensed 999 Unknown 001 Canceled or denied 002 Expired 003 Revoked		999	License Class 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		970	Driver License Type 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		970	Commercial Driver License Status 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		License State																																																
Endorsements on License <input type="checkbox"/> 000 None/not applicable <input type="checkbox"/> 100 H - Hazardous materials <input type="checkbox"/> 101 N - Tank vehicle <input type="checkbox"/> 102 P - Passenger <input type="checkbox"/> 103 S - School <input type="checkbox"/> 104 T - Double/triple trailers <input type="checkbox"/> 105 X - Combination of tank vehicle and hazardous materials <input type="checkbox"/> 200 M - Motorcycle <input type="checkbox"/> 298 Other non-commercial license endorsements <input checked="" type="checkbox"/> 999 Unknown		Endorsement Compliance 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	Restrictions on License 999 - Unknown																																													
				Alcohol Interlock Presence 000 No 970 Not applicable 100 Yes 999 Unknown																																														
DRIVER SEATING AND SAFETY INFORMATION																																																		
Seating Position 100		Restraint Systems Used 999																																																
Standard Vehicle Seats		Other Seating Positions																																																
<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	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		001 None used – motor vehicle occupant 002 No helmet 970 Not applicable 100 Booster seat 200 DOT-compliant motorcycle helmet 980 Other 101 Child restraint system – forward facing 201 Not DOT-compliant motorcycle helmet 999 Unknown 102 Child restraint system – rear facing 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						
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																																														
				Any indication of improper use? 000 No 100 Yes 999 Unknown																																														
Air Bags Deployed <input checked="" type="checkbox"/> 000 Not deployed <input type="checkbox"/> 970 Not applicable <input type="checkbox"/> 001 Not deployed - switch off <input type="checkbox"/> 999 Deployment unknown <input type="checkbox"/> 100 Front <input type="checkbox"/> 101 Side <input type="checkbox"/> 102 Curtain <input type="checkbox"/> 103 Other (knee, air belt, etc.)					Ejection 000 Not ejected 100 Ejected, partially 101 Ejected, totally 970 Not applicable 999 Unknown		000	Extrication 000 No 100 Trapped and extricated 101 Trapped but not extricated 999 Unknown																																										

Motor Vehicle #1

Rev. 2024-1

Case #A-040404-26

Page7 of 11

Injury Status104

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 Transportation000

000 Not transported
100 EMS air
101 EMS ground
200 Law enforcement
980 Other
999 Unknown

EMS Response Agency

Not applicable

EMS Response Run #

☐ Unknown

Universally Unique Identifier

☒ Not applicable☐ Unknown

Facility Receiving Patient

Not applicable

Conditions at Time of Crash105

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

Distraction Action999

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

Distraction Source970

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

Speeding Relation100

000 No
100 Exceeded speed limit
101 Racing
102 Too fast for conditions
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

000

Suspected Alcohol Usage100

000 No
100 Yes
999 Unknown

Test Status100

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

Alcohol Kit Number

xyz123

Alcohol Test Type100

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

Alcohol Test Results000

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

Suspected Drug Usage000

000 No
100 Yes
999 Unknown

Test Status000

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

Drug Kit Number

Drug Test Type970

100 Blood
101 Urine
102 Both blood and urine
103 Saliva
198 Other
970 Not applicable
999 Unknown

Drug Test Results

Not applicable

Driver Actions at Time of Crash

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

980 Other contributing action
999 Unknown

102

108

109

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

Avoidance Maneuver000

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

Pre-Collision Stability999

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

123: 32:61: Maximum speed limit

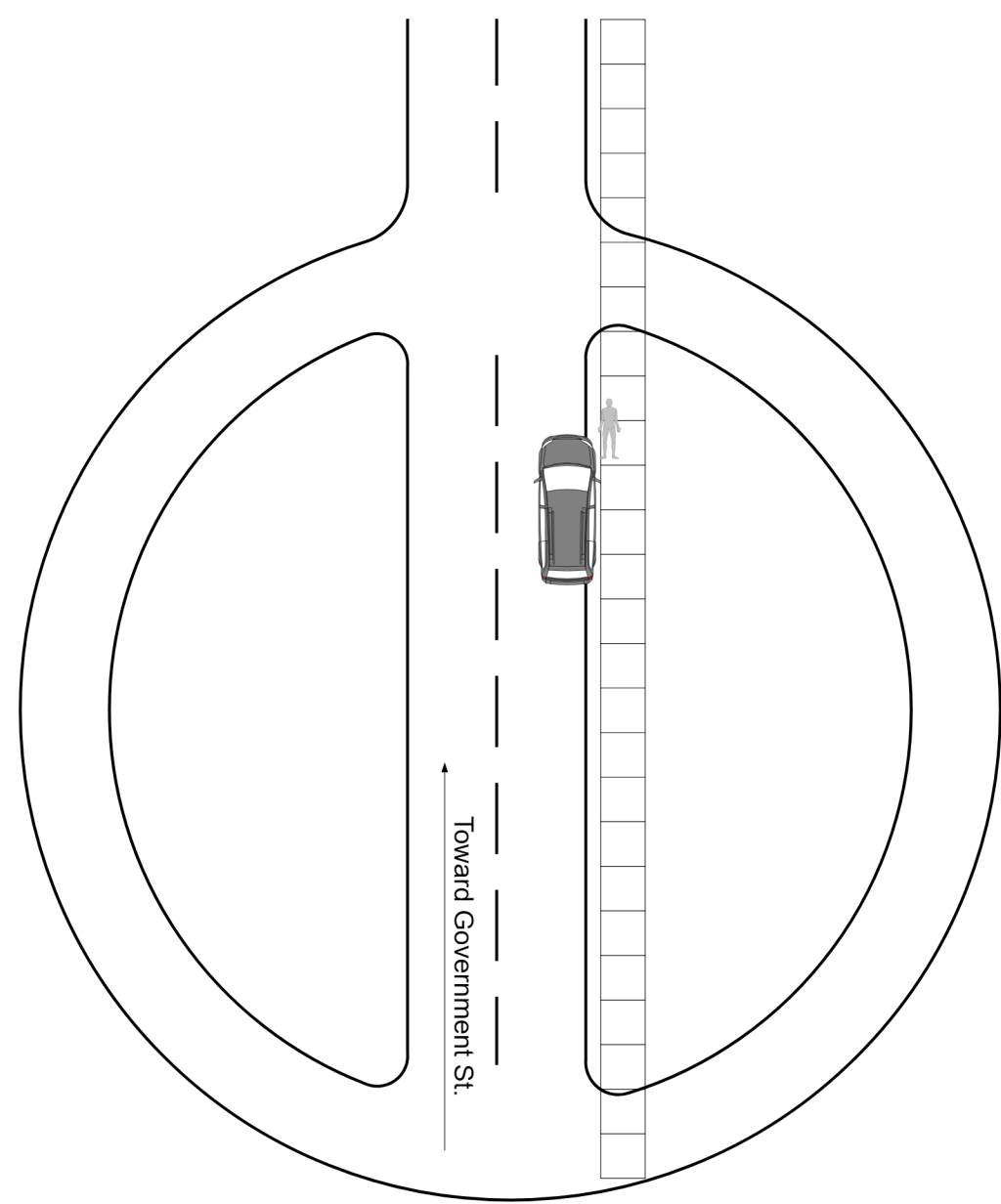
CRASH REPORT - DRIVER CONDITION AND CIRCUMSTANCES

LOUISIANA UNIFORM CRASH REPORT
NON-MOTORIST INFORMATION

Non-Motorist # 1		Rev. 2024-1		Case #	A-040404-26		Page	8	of	11									
NON-MOTORIST INFORMATION																			
Name <input checked="" type="checkbox"/> Unknown				Age <input checked="" type="checkbox"/> Unknown		Sex 100 Female 101 Male 999 Unknown		101		Race 100 American Indian or Alaska Native 101 Asian or Pacific Islander 102 Black 103 White 980 Other 999 Unknown									
Address <input checked="" type="checkbox"/> Unknown				Phone Number <input checked="" type="checkbox"/> Not Collected															
First Middle Last Suffix				Street City State Postal Code															
Incident Responder				000		Date of Birth <input checked="" type="checkbox"/> Unknown		101		Ethnicity 100 Hispanic 101 Other than Hispanic 999 Unknown									
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.)																			
NON-MOTORIST CIRCUMSTANCES																			
Non-Motorist Type		200		Initial		100		Location		303									
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 100 Going to or from school (K-12) 101 Going to or from transit 970 Not applicable 999 Unknown		999		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		100		Actions or Circumstances At Time of Crash		109		Clothing Brightness		Upper 101 Lower 101									
000 None 100 Adjacent to roadway (e.g., shoulder, median) 101 Crossing roadway 102 Waiting to cross roadway 103 Walking/cycling along roadway against traffic (in or adjacent to travel lane) 104 Walking/cycling along roadway with traffic (in or adjacent to travel lane) 105 Walking/cycling on sidewalk 106 Working in trafficway (incident response) 198 In roadway -other 980 Other 999 Unknown				000 None (no improper action) 100 Dart / dash 101 Disabled vehicle related (working on, pushing, leaving/approaching) 102 Entering/exiting parked/standing vehicle 103 Failure to obey traffic signs, signals, or officer 104 Failure to yield right-of-way 105 Improper passing 106 Improper turn/merge 107 Inattentive (talking, eating, etc.) 108 In roadway improperly (standing, lying, working, playing)		109 Not visible (dark clothing, no lighting, etc.) 110 Wrong-way riding or walking 980 Other 999 Unknown		100 Light 101 Dark 970 Not applicable 999 Unknown											
NON-MOTORIST MEDICAL INFORMATION																			
Injury Status		102		Type of Medical Transportation		000		EMS Response Agency		EMS Response Run # <input type="checkbox"/> Unknown									
100 (K) Fatal Injury 101 (A) Suspected Serious Injury 102 (B) Suspected Minor Injury 103 (C) Possible Injury 104 (O) No Apparent Injury		000 Not transported 100 EMS air 101 EMS ground 200 Law enforcement 980 Other 999 Unknown				Not applicable		Universally Unique Identifier <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Unknown		Facility Receiving Patient Not applicable									
NON-MOTORIST CONDITION																			
Conditions at the Time of the Crash		102		Distraction Action		000		Distraction Source		970									
000 Apparently normal 100 Asleep/blacked out 101 Fatigued 102 Emotional (depressed, angry, disturbed, etc.) 103 Ill (sick), fainted 104 Physically impaired 105 Under the influence of medications/ drugs/alcohol 106 Inattentive/distracted		970 Not applicable 980 Other 999 Unknown		000 Not distracted 100 Talking / listening 101 Manually operating a device (texting, typing, dialing, playing game, etc.) 200 Inattentive 980 Other distraction 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											
Suspected Alcohol Usage		000		Test Status		000		Alcohol <input type="checkbox"/> Unknown		Alcohol Test Type		970		Alcohol Test Results		970		BAC	
000 No 100 Yes 999 Unknown		000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Alcohol Kit Number				100 Blood 101 Blood clot 102 Blood plasma/serum 200 Breath 201 Preliminary breath test (PBT)		300 Urine 301 Vitreous 302 Liver 970 Not applicable 980 Other		000 Results pending 001 Negative results with no actual value 100 Results received 101 Positive results with no actual value 970 Not applicable 999 Unknown							
Suspected Drug Usage		000		Test Status		000		Drug <input type="checkbox"/> Unknown		Drug Test Type		970		Drug Test Results					
000 No 100 Yes 999 Unknown		000 Test not given 001 Test refused 100 Test given 999 Unknown if tested		Drug Kit Number				100 Blood 101 Urine 102 Both blood and urine 103 Saliva 198 Other		970 Not applicable 999 Unknown		Not applicable							
CRASH REPORT - NON-MOTORIST INFORMATION																			

Scene # 1	DIAGRAM Rev. 2024-1	Case # A-040404-26	Page 9	of 11
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CRASH DIAGRAM



Not To Scale

LOUISIANA UNIFORM CRASH REPORT
NARRATIVE

Rev. 2024-1

Case #

A-040404-26

Page

10

of

11

CRASH NARRATIVE

The LACRASH software system is used by law enforcement agencies throughout the state of Louisiana to electronically capture motor vehicle accident reporting information.

LACRASH was developed to enhance the paper uniform motor vehicle traffic crash report form in the state of Louisiana. By electronically reproducing the crash report form, the LACRASH software allows officers to enter accident reporting information using a laptop in their patrol car or a desktop computer in their office. The electronic submission of the data helps to collect traffic crash reporting information in a timelier manner. With the added benefits of software edits, GPS devices, and card swipes, information collected using LACRASH is more accurate and complete.

Designed by the Center for Analytics & Research in Transportation Safety (CARTS) at Louisiana State University, the LACRASH system was initially released in December 2004 with a hand full of agencies going online January 1, 2005. As of December 2021, roughly 250 Louisiana law enforcement agencies were using LACRASH (most using version 2.0 SP1) with new and old agencies continually being added\upgraded as needed.

CARTS also analyzes the motor vehicle accident data and produces Louisiana Crash Data and Statistical Reports using data collected from the LACRASH application.

We invite you to browse our website to learn more about LACRASH. If you would like any additional information, please contact us at (225) 578-0366 or email us at lacrash@lsu.edu

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

NARRATIVE

Rev. 2024-1

CRASH NARRATIVE

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Vehicle 1 Traffic Control Devices Present: Work Zone