SEATING

Unit 1

1	2	3
4	5	6
7	8	9

10
11

Other Involved Unit
(Circle One)
12 - Pedestrian
13 - Rider of Domestic Animal
14 - Occ. of Non-Motorized Vehicle
15 - Victim of Other Circumstance/ Codes Not Applicable

Other Involved Safety Equipment

Unit 2

1	2	3
4	5	6
7	8	9

10
11

Other Involved Unit
(Circle One)
12 - Pedestrian
13 - Rider of Domestic Animal
14 - Occ. of Non-Motorized Vehicle
15 - Victim of Other Circumstance/ Codes Not Applicable

Other Involved Safety Equipment

CODES

SAFETY EQUIPMENT

01 - None Installed
95 - Not Applicable
98 - Unknown (Any Type)

Lap Belt Only
11 - Fastened
12 - Not Fastened

Lap/Shoulder Harness
21 - Lap Only Used
22 - Neither Used
23 - Shoulder Only Used
24 - Both Used

Motorcycle Helmet
31 - None Used
32 - Used

Air Bags
41 - Deployed, Belts Used
42 - Not Deployed, Belts Used
43 - Deployed, Belts Not Used
44 - Not Deployed, Belts Not Used

Child Restraints
81 - Child Restraint Used
82 - Other Restraint Used
83 - None Used

Pedal Cycle/Pedestrian
91 - Contrasting Clothing
92 - Non-contrasting Clothing

VICTIMS

N/A ☐

Name	Address	Unit No	Seat Pos.	Injury Type	Age	Sex	Ejection	First Aid By
Taken To	Taken By							
Name	Address							
Taken To	Taken By							

CODES

Injury Type
K - Killed
B - Bruise/Abrasion/Swelling
A - Visible or Carried from Scene
C - Not Visible—Has Pain/Faint

Ejected
N - Not
F - Fully
P - Partially
T - Trapped
U - Unknown
A - Not Applicable

First Aid By
A - Ambulance Attended
D - Doctor
M - Paramedic
O - Other
P - Police
U - Unknown
N - None

NARRATIVE AND DIAGRAM

Officer's Opinion of What Happened:

ROADWAY ENVIRONMENT

N/A 1 ☐
N/A 2 ☐

For Each Roadway Environment Field, Circle One Entry for Each Involved Unit:

Unit 1
Unit 2

Contributing Road Defects
4 - None
1 - Shoulders Low
2 - Shoulders High
3 - Holes, Bumps, Etc.
8 - Other

Surface Construction
1 - Asphalt
2 - Concrete
3 - Brick
4 - Unpaved
8 - Other

Condition
1 - Dry
2 - Wet
3 - Icy
4 - Snowy/Slushy
5 - Muddy
8 - Other

Accident In Or Related To Road Construction Zone?
Yes Yes
No No

Material In Roadway (Contributing)
1 - None
2 - Rocks
3 - Trees/Limbs
4 - Dirt
5 - Gravel
6 - Oil/Petrol
8 - Other

Material Source
1 - Not Applicable
2 - Natural Environment
3 - Dropped From Vehicle
4 - Already in Road, But Fell From Vehicle
8 - Other
9 - Unknown

Character
1 - Straight—Level
2 - Straight—Down Grade
3 - Straight—Up Grade
4 - Straight—Hillcrest
5 - Curve—Level
6 - Curve—Down Grade
7 - Curve—Up Grade
8 - Curve—Hillcrest

Vision Obscured By:
97 - Not Obscured
1 - Buildings
2 - Signboard
3 - Trees, Crops, Bushes
4 - Blowing Snow/Sand
5 - Hillcrest
6 - Curve in Road
7 - Fog
8 - Parked Vehicle
9 - Moving Vehicle(s)
10 - Blinded by Sunlight
11 - Fire/Smoke
12 - Dust
13 - Blinded by Headlights
14 - Embankment
15 - Rain on Windshield
16 - Snow on Windshield
98 - Other
99 - Unknown

Traffic Control
1 - Police Officer
2 - R.R. Crossing Gates
3 - R.R. Flashing Lights
4 - R.R. Cross Bucks/Pave. Mark
5 - Pedestrian Control
6 - Traffic Signal
7 - Flashing Beacon
8 - Stop Sign
9 - Yield Sign
10 - Lane Control Device
11 - Flagger
12 - No Passing Zone
97 - None
98 - Other

Traffic Control Functioning
Yes Yes
No No
N/A N/A

DOT Railroad Crossing No.

Opposing Lanes Separated By:
97 - None
1 - Paved Surface
2 - Unpaved Surface
3 - Broken Painted Line
4 - Solid Painted Line
5 - Concrete Barrier
6 - Metal Guard Rail
7 - Fence
98 - Other Barrier

Trafficway Lanes
1 - One Lane
2 - Two Lanes
3 - Three Lanes
4 - Four Lanes
5 - Five Lanes
6 - Six Lanes or More

One-Way Street
Yes Yes
No No

INVESTIGATION

Light
1 - Daylight
2 - Dawn
3 - Dusk
4 - Darkness—Road Not Lit
5 - Darkness—Road Lit

Weather
1 - Clear
2 - Cloudy
3 - Rain
4 - Snow
5 - Sleet/Hail
6 - Crosswind
7 - Fog
8 - Other

Locale
1 - Open Country
2 - Residential
3 - Shop'g or Business
4 - Mfg. or Industrial
5 - School
6 - Playground
8 - Other

Non-Vehicular Property Damage
1 - None Visible
2 - Light
3 - Moderate
4 - Severe

Property Damage Description
Description:
Owner:
Address:

Time Police Notified	Time Police Arrived	Time EMS Arrived	Name of Photographer
AM PM MT	AM PM MT	AM PM MT	

Witness Full Name	Address	Telephone
Witness Full Name	Address	Telephone

Name of Investigating Officer	Officer ID	Agency ORI	Supervisor Reviewed
Name of Other Investigating Officer(s) at Scene	Officer ID	Agency ORI	

The data on this report reflects my best knowledge, opinion and belief covering the accident, but no warrant is made as to the factual accuracy thereof.

Signature of Investigating Officer

Date