STATE OF NEW JERSEY POLICE ACCIDENT REPORT

• EXPLAIN IN ACCIDENT DESCRIPTION

IF A QUESTION DOES NOT APPLY, ENTER A DASH (–)

IF AN ANSWER IS UNKNOWN, ENTER 0 or 00

PEDESTRIAN MANEUVER (1)

0. Crossing/Entering Roadway at Intersection
02 Crossing/Entering Roadway Not at Intersection
03 Walking on Road w/Traffic
04 Walking on Road Against Traffic
05 Playing in Road
06 Standing in Road
07 Getting On or Off Vehicle
08 Pushing or Working on Veh.
09 Other Working in Roadway
10 Approaching or Leaving School Bus
11 Coming from Behind Parked Vehicle
12 Other •

TRAFFIC CONTROLS (2 Veh. 1, 3 Veh. 2)

01 Police Officer
02 R.R. Watchman, Gates, Etc.
03 Traffic Signal
04 Lane Markings
05 Channelization-Painted
06 Channelization-Physical
07 Warning Signal
08 Stop Sign
09 Yield Sign
10 Flagman
11 No Control Present
12 Other •

ROAD SYSTEM (4)

1 Interstate
2 State Highway
3 State/Interstate Authority
4 State Park or Inst.
5 County
6 Co. Auth. Park or Institution
7 Municipal
8 Private Property
9 U.S. Government Property

ROAD CHARACTER (5)

1 Straight and Level
2 Straight and Grade
3 Straight at Hillcrest
4 Curve and Level
5 Curve and Grade
6 Curve and Hillcrest

ROAD SURFACE TYPE (6)

1 Concrete
2 Blacktop
3 Gravel
4 Steel Grid
5 Dirt
6 Other •

SURFACE CONDITION (7)

1 Dry
2 Wet
3 Snowy
4 Icy
5 Other •

WEATHER (8)

1 Clear
2 Rain
3 Snow
4 Fog
5 Other •

OVERSIZE/OVERWEIGHT PERMIT? (COMM. VEHICLES ONLY) (9 Veh. 1, 10 Veh. 2)

1 Yes
2 No

VEHICLE TYPE (11 Veh. 1, 12 Veh. 2)

01 Passenger Car/Station Wagon/Minivan
02 Pass. Car w/Trailer
03 Recreation Vehicle
04 Taxicab/Limo.
05 Motorcycle
06 Moped
07 Pickup/Sport Utility
08 Van/Step Van
09 Fire/Rescue Vehicle
10 Police Vehicle
11 Ambulance
12 Bus
13 School Bus
14 Single Unit Truck (2 axle)
15 Single Unit Truck (3+ axles)
16 Truck/Trailer
17 Truck/Tractor (Bobtail)
18 Tractor/Semi-Trailer
19 Tractor/Doubles
20 Tractor/Triples
21 Heavy Truck-Other
22 Other •

CARGO BODY TYPE (13 Veh. 1, 14 Veh. 2)

1 Bus
2 Van/Enclosed Box
3 Cargo Tank
4 Flatbed
5 Dump
6 Concrete Mixer
7 Auto Transporter
8 Garbage/Refuse
9 Other • (i.e. multiple body types)

ROAD DIVIDED BY (15)

1 Guide Rail
2 Concrete Bar.
3 Concrete Isle
4 Grass Med.
5 None
6 Other •

IS ROAD UNDER CONSTRUCTION? (16)

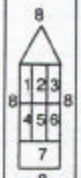
1 Yes
2 No
3 Workers Present

WHICH VEHICLE OCCUPIED?

1 Veh. 1
2 Veh. 2
B Pedalcycle
P Pedestrian
O Other •

POSITION IN/ON VEHICLE

0 Unknown
1 Driver
2 thru 7 Passengers
8 Riding/Hanging on Outside



VICTIM'S PHYSICAL COND.

1 Killed
2 Incapacitated
3 Moderate Injury
4 Complaint of Pain

EJECTION FROM VEHICLE

1 Not Ejected
2 Partial Ejection
3 Ejected
4 Trapped

LOCATION OF MOST SEVERE PHYSICAL INJURY

01 Head
02 Face
03 Eye
04 Neck
05 Chest
06 Back
07 Shoulder-Upper Arm
08 Elbow/Lower Arm/Hand
09 Abdomen/Pelvis
10 Hip-Upper Leg
11 Knee/Lower Leg/Foot
12 Entire Body

TYPE OF MOST SEVERE PHYSICAL INJURY

1 Amputation
2 Concussion
3 Internal
4 Bleeding
5 Contusion/Bruise/Abrasion
6 Burn
7 Fracture/Dislocation
8 Complaint of Pain
9 None Visible

SAFETY EQUIPMENT

01 None Used
02 Lap Belt
03 Harness
04 Lap Belt & Harness
05 Child Restraint
06 Helmet
07 Passive Restraint
08 Airbag
09 Airbag & Seat Belts
10 Other •

APPARENT CONTRIBUTING CIRCUMSTANCES (Human, Vehicle, Environmental Factors)

01 Unsafe Speed
02 Driver Inattention
03 Failed to Obey Traffic Control Device
04 Failed to Yield Right of Way to Vehicle/Pedestrian
05 Improper Lane Change
06 Improper Passing
07 Improper Use of Turn Signals/Failure to Signal
08 Improper Turning
09 Following Too Closely
10 Backing Unsafely
11 Dazzling, Improper, or No Lights
12 Wrong Way, One Way Road
13 Improper Parking
14 Pedestrian's/Bicyclist's Actions
15 Vehicle Defect •
16 Animal's Action
17 Defective Shoulder
18 View/Obstruction/Limited •
19 Water Puddles
20 Obstruction/Debris on Road •
21 Improper/Inadequate Lane Marking •
22 Other Roadway Defects •
23 Traffic Control Device Defective/Missing •
24 Failure to Keep Right
25 None
26 Other •

NUMBER OF AXLES

Veh. 1 28
Veh. 2 29
Veh. 1 30
Veh. 2 31

DIRECTION OF TRAVEL

N 1, E 2, S 3, W 4

Veh. 1 32
Veh. 2 33

LIGHT CONDITION

1 Daylight
2 Dawn or Dusk
3 Dark (St. Lights On)
4 Dark (St. Lights Off)
5 Dark (No St. Lights)

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PHYSICAL STATUS

1 Apparently Normal
2 Had Been Drinking
3 Physical Handicaps
4 Illness
5 Fatigued
6 Apparently Asleep
7 Using Drugs
8 Other •

Veh. 1 35
Veh. 2 36
Ped. 37

PRE-ACCIDENT VEHICLE ACTION

01 Going Straight Ahead
02 Making Right Turn
03 Making Left Turn
04 Making U Turn
05 Starting from Parking
06 Starting in Traffic
07 Slowing or Stopping
08 Stopped in Traffic
09 Parking
10 Parked
11 Changing Lanes
12 Merging
13 Backing
14 Driverless/Moving
15 Other •

Veh. 1 38
Veh. 2 39

SEQUENCE OF EVENTS (Select up to 4 for each vehicle)

Non-Collision
01 Overturn (Rollover)
02 Fire/Explosion
03 Immersion
04 Jackknife
05 Ran Off Road
06 Downhill Runaway
07 Cargo Loss or Shift
08 Separation of Units
09 Other Non-Collision

Collision w/Non-Fixed Object
10 Pedalcycle
11 Pedestrian
12 Railway Train
13 Animal
14 MV in Transport
15 MV in Transport, Other Roadway
16 Parked MV
17 Other Object (Non-Fixed)

Collision w/Fixed Object
18 Impact Attenuator
19 Bridge/Pier/Abutment
20 Bridge Parapet End
21 Bridge Rail
22 Guide Rail
23 Median Barrier
24 Traffic Sign Post
25 Overhead Sign Support
26 Light Standard
27 Utility Pole
28 Other Post
29 Culvert
30 Curb
31 Ditch
32 Embankment
33 Fence
34 Tree
35 Other Fixed Object
36 Unknown

Vehicle 1 Events: 1st 40a, 2nd 40b, 3rd 40c, 4th 40d

Vehicle 2 Events: 1st 41a, 2nd 41b, 3rd 41c, 4th 41d

COLLISION TYPE (w/Other MV)

1 Same Direction –Rear End
2 Same Direction –Sideswipe
3 Angle
4 Head-On
5 Left Turn
6 Struck Parked Vehicle
7 Other •

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TOTAL NUMBER OF VEHICLES INVOLVED IN ACCIDENT

122

17 AGE SEX 18 19 20 21 22 23 24 AVAIL. 25 USED 26 AMBULANCE RUN NUMBER 27

	17	18	19	20	21	22	23	24	25	26	27	NAMES & ADDRESSES OF OCCUPANTS—IF DECEASED DATE & TIME OF DEATH
A												
B												
C												
D												
E												