STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL TRAFFIC COLLISION REPORT

CHF	555 Page 1 (Rev. 4-11) OPI 060	Page of							
SPECIAL	CONDITIONS NUMBER HIT & RUN CITY INJURED FELONY	JUDICIAL DISTRICT LOCAL REPORT NUMBER							
	TECHT TECHT								
	NUMBER KILLED HIT & RUN COUNTY	REPORTING DISTRICT BEAT DAY OF WEEK TOW AWAY							
	MISDEMEANOR	20 Maria (2000)							
		SMTWTFS YES NO							
U. 0.	COLLISION OCCURRED ON	MO. DAY YEAR TIME (2400) NCIC# OFFICER I.D.							
LOCATION									
\vdash	MILEPOST INFORMATION GPS COORDINATES	PHOTOGRAPHS BY: NONE							
ΑT	(Click to line out)	PHOTOGRAPHS BY: NONE							
Õ	FEET/MILES OF LATITUDE	LONGITUDE							
Q	AT INTERSECTION WITH	STATE HWY REL							
	(Click to line out) OR: FEETMILES OF	MYES MNO							
10001-04	DRIVER'S LICENSE NUMBER STATE CLASS AIR BAG SAFETY EQUIP.	VEH. YEAR MAKE/MODEL/COLOR LICENSE NUMBER STATE							
PARTY	20 8 70 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8								
1									
DRIVER	NAME (FIRST, MIDDLE, LAST)								
		OWNER'S NAME SAME AS DRIVER							
PEDES-	STREET ADDRESS	2 0.00 State Control of							
PEDES- TRIAN		CHANEDS ADDRESS							
Ш		OWNER'S ADDRESS SAME AS DRIVER							
PARKED VEHICLE	CITY/STATE/ZIP								
		DISPOSITION OF VEHICLE ON ORDERS OF: OFFICER DRIVER OTHER							
BICY-	SEX HAIR EYES HEIGHT WEIGHT BIRTHDATE RACE								
CUST	Mo. Day Year	PRIOR MECHANICAL DEFECTS: NONE APPADENT DEFED TO NADDATIVE							
Ш		NONE ALTAKENT NEI EN TO MARKATIVE							
OTHER	HOME PHONE BUSINESS PHONE	VEHICLE IDENTIFICATION NUMBER:							
		VEHICLE TYPE DESCRIBE VEHICLE DAMAGE SHADE IN DAMAGED AREA							
	INSURANCE CARRIER POLICY NUMBER	UNK. NONE MINOR							
	DIR OF ON STREET OR HIGHWAY SPEED LIMIT								
	TRAVEL	CADOT							
		CAL-T TCP/PSC MC/MX							
PARTY	DRIVER'S LICENSE NUMBER STATE CLASS AIR BAG SAFETY EQUIP.	VEH. YEAR MAKE/MODEL/COLOR LICENSE NUMBER STATE							
2									
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		OWNERS NAME SAME AS DRIVER							
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/EHICLE		DISPOSITION OF VEHICLE ON ORDERS OF: DEFICED DRIVED OTHER							
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BICY- CLIST	SEX HAIR EYES HEIGHT WEIGHT BIRTHDATE RACE Mo. Day Year								
		PRIOR MECHANICAL DEFECTS: NONE APPARENT REFER TO NARRATIVE							
OTHER	HOME PHONE BUSINESS PHONE	VEHICLE IDENTIFICATION NUMBER:							
П		VEHICLE TYPE DESCRIBE VEHICLE DAMAGE SHADE IN DAMAGED AREA							
ш	WALLEY NOT CARRIED								
	INSURANCE CARRIER POLICY NUMBER	UNK. NONE MINOR							
	T _C	MOD. MAJOR ROLL-OVER							
	DIR OF ON STREET OR HIGHWAY SPEED LIMIT	CA DOT							
	TRAVEL	CAL-T TCP/PSC MC/MX							
	DRIVER'S LICENSE NUMBER STATE CLASS AIR BAG SAFETY EQUIP.	VEH. YEAR MAKE/MODEL/COLOR UCENSE NUMBER STATE							
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DRIVER	NAME (FIRST, MIDDLE, LAST)								
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PARKED ÆHICLE	CITY/STATE/ZIP								
		DISPOSITION OF VEHICLE ON ORDERS OF: OFFICER DRIVER OTHER							
BICY-	SEX HAIR EYES HEIGHT WEIGHT BIRTHDATE RACE								
CUST	Mo. Day Year	PRIOR MECHANICAL DEFECTS: NONE ADDADENT DEFED TO NADDATIVE							
OTUES		NONE AT ANENT NEIGH TO NAMMATIVE							
OTHER	HOME PHONE BUSINESS PHONE	VEHICLE IDENTIFICATION NUMBER:							
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	DIR OF ON STREET OR HIGHWAY SPEED LIMIT								
	TRAVEL	CA DOT							
	▼	CAL-T TCP/PSC MC/MX							
PREPAR	ER'S NAME DISPATCH NOTIFIED	REVIEWER'S NAME DATE REVIEWED							
	TYES TNO TN/A								

TRAFFIC COLLISION CODING Page CHP 555 Page 2 (Rev. 4-11) OPI 060 DATE OF COLLISION (MO. DAY NCIC# OFFICER LD NUMBER OWNER'S NAME OWNER'S ADDRESS NOTIFIED **PROPERTY** YES NO DAMAGE DESCRIPTION OF DAMAGE SEATING POSITION SAFETY EQUIPMENT INATTENTION CODES AIR BAG B - UNKNOWN CELLPHONE HANDHELD OCCUPANTS CHILD RESTRAINT A - NONE IN VEHICLE B - UNKNOWN Q - IN VEHICLE USED R - IN VEHICLE NOT USED L - AIR BAG DEPLOYED B - CELLPHONE HANDSFREE ٨ M - AIR BAG NOT DEPLOYED C - ELECTRONIC EQUIPMENT LAP BELT USED - IN VEHICLE USE UNKNOWN N - OTHER P - NOT REQUIRED D - LAP BELT NOT LISED T - IN VEHICLE IMPROPER USE E - SMOKING - DRIVER E - SHOULDER HARNESS USED F-EATING U - NONE IN VEHICLE 1 2 3 **EJECTED FROM VEHICLE** 2 TO 6 - PASSENGERS F - SHOULDER HARNESS NOT USED G - CHILDREN - STATION WAGON REAR 0 - NOT EJECTED 4 5 6 G - LAP/SHOULDER HARNESS USED M / C BICYCLE HELMET H - ANIMALS I - PERSONAL HYGIENE 8 - REAR OCC. TRK, OR VAN H - LAP/SHOULDER HARNESS NOT USED 1 - FULLY EJECTED PASSENGER DRIVER 9 - POSITION UNKNOWN 2 - PARTIALLY EJECTED J - PASSIVE RESTRAINT USED V-NO X-NO J-READING 7 0 - OTHER 3 - UNKNOWN K - PASSIVE RESTRAINT NOT USED W-YES Y - YES K - OTHER P - NOT REQUIRED ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (*) SHOULD BE EXPLAINED IN THE NARRATIVE PRIMARY COLLISION FACTOR LIST NUMBER (#) OF PARTY AT FAULT MOVEMENT PRECEDING COLLISION 2 3 TRAFFIC CONTROL DEVICES 2 SPECIAL INFORMATION A CONTROLS FUNCTIONING A HAZARDOUS MATERIAL A STOPPED CITED **B** CONTROLS NOT FUNCTIONING* **B** CELL PHONE HANDHELD IN USE **B** PROCEEDING STRAIGHT B OTHER IMPROPER DRIVING* C CONTROLS OBSCURED C RAN OFF ROAD C CELL PHONE HANDSFREE IN USE D NO CONTROLS PRESENT / FACTOR* D CELL PHONE NOT IN USE **D** MAKING RIGHT TURN C OTHER THAN DRIVER* TYPE OF COLLISION E SCHOOL BUS RELATED E MAKING LEFT TURN D UNKNOWN* A HEAD-ON F 75 FT MOTORTRUCK COMBO F MAKING U TURN B SIDE SWIPE G 32 FT TRAILER COMBO G BACKING C REAR END Н H SLOWING / STOPPING WEATHER (MARK 1 TO 2 ITEMS) D BROADSIDE П PASSING OTHER VEHICLE E HIT OBJECT J J CHANGING LANES B CLOUDY F OVERTURNED K K PARKING MANEUVER C RAINING G VEHICLE / PEDESTRIAN L ENTERING TRAFFIC M OTHER UNSAFE TURNING **D** SNOWING H OTHER* M E FOG / VISIBILITY N N XING INTO OPPOSING LANE F OTHER*: MOTOR VEHICLE INVOLVED WITH 0 O PARKED G WIND P MERGING A NON - COLLISION LIGHTING **B** PEDESTRIAN Q TRAVELING WRONG WAY A DAYLIGHT C OTHER MOTOR VEHICLE R OTHER* OTHER ASSOCIATED FACTOR(S) 2 3 1 (MARK 1 TO 2 ITEMS) B DUSK-DAWN D MOTOR VEHICLE ON OTHER ROADWAY A VC SECTION VIOLATION: □NO C DARK - STREET LIGHTS E PARKED MOTOR VEHICLE D DARK - NO STREET LIGHTS F TRAIN B VC SECTION VIOLATION: □NO E DARK-STREET LIGHTS NOT G BICYCLE FUNCTIONING* H ANIMAL SOBRIETY - DRUG C VC SECTION VIOLATION: ROADWAY SURFACE CITED YE 1 2 3 **PHYSICAL** (MARK 1 TO 2 ITEMS) A DRY FIXED OBJECT: า้พอ B WET A HAD NOT BEEN DRINKING C SNOWY - ICY J OTHER OBJECT: **E** VISION OBSCUREMENT B HBD - UNDER THE INFLUENCE D SLIPPERY (MUDDY, OILY, ETC.) F INATTENTION*: C HBD - NOT UNDER INFLUENCE* G STOP & GO TRAFFIC D HBD - IMPAIRMENT UNKNOWN* ROADWAY CONDITIONS (MARK 1 TO 2 ITEMS) PEDESTRIAN'S ACTIONS H ENTERING / LEAVING RAMP E UNDER DRUG INFLUENCE* A HOLES, DEEP RUT* A NO PEDESTRIANS INVOLVED PREVIOUS COLLISION F IMPAIRMENT - PHYSICAL* B LOOSE MATERIAL ON ROADWAY' J UNFAMILIAR WITH ROAD **G** IMPAIRMENT NOT KNOWN B CROSSING IN CROSSWALK-AT INTERSECTION CITED C OBSTRUCTION ON ROADWAY* K DEFECTIVE VEH. EQUIP. H NOT APPLICABLE D CONSTRUCTION - REPAIR ZONE CROSSING IN CROSSWALK - NOT I SLEEPY / FATIGUED* ☐YES AT INTERSECTION E REDUCED ROADWAY WIDTH F FLOODED* D CROSSING - NOT IN CROSSWALK L UNINVOLVED VEHICLE G OTHER* E IN ROAD - INCLUDES SHOULDER M OTHER* H NO UNUSUAL CONDITIONS F NOT IN ROAD N NONE APPARENT G APPROACHING / LEAVING SCHOOL BUS O RUNAWAY VEHICL SKETCH MISCELLANEOUS INDICATE NORTH NOTE: Click in the SKETCH and INDICATE

NORTH fields to import a graphic. If a separate page is used, indicate the location of the sketch here.

STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL INJURED / WITNESS / PASSENGERS

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