MOTOR VEHICLE CRASH REPORT OVERLAY NO. 1

North Dakota Department of Transportation Drivers License & Traffic Safety DOT 2356 (Rev.06-2009)

CRASH AND GENERAL INFORMATION

A. REPORT TYPE

Original 2. Supplemental

B. CRASH TYPE

2. Non-Traffic 1. Traffic

C. CRASH SEVERITY

Fatal Non-incapacitating Injury

3. PDO 4. Incapacitating Injury

5. Prossible Only

7. Park Ranger

Y-Intersection

Roundabout

Traffic Circle

3. Non-Reportable

D. HIT AND RUN

1. Yes 2 No

AGENCY TYPE

Highway Patrol

City Police

Campus PD County Sheriff

BIA Military Police

INTERSECTION TYPE

Non-Intersection T-Intersection

Four Way Intersection 6. Five + Roads

RELATION TO ROADWAY

5. Outside Shoulder-Left (Includes Ditch) Outside Shoulder-Right (Includes Ditch)
Off Roadway Location Unknown

On Roadway Shoulder Median Gore

Parking Lot

Private Property

Alley

10. Separator

H. RELATION TO JUNCTION

Non-Junction 6. Railroad Grade Crossing Bridge

Intersection Interchange Area

Intersection Related 9. Crossover Related

Alley / Driveway Access Entrance / Exit Ramp

Other Crossing

ROADWAYGEOMETRICS

Straight (On Level) Straight (On Grade) Curve (On Level)
 Curve (On Grade)

TRAFFICWAY

Not Divided (Two-Way Traffic)

Divided Highway (Median Strip Without Barrier)
Divided Highway (Median Strip With Barrier)

One-Way Trafficway
Not Divided (with continuous left turn lane)

ACCESS CONTROL

No Control (Unlimited Access)

Full Control (Only Ramp Entry and Exit)

3. Partial Access Control

5. Hill Crest

ROAD CONDITION Normal

Under Construction / Maintenance

Soft / Defective Shoulder

Obstruction / Flood

Debris On Road Reduced Road Width Holes / Ruts / Bumps / Washout

Loose Material Surface Worn, Travel-polished

M. SURFACE TYPE (SURFACE TYPE)

Concrete

Dirt
 Brick

(IF BRIDGE DECK) Concrete Bridge Deck Asphalt Bridge Deck

Asphalt Gravel / Scoria

Metal Bridge Deck Wood Bridge Deck

SURFACE CONDITION

3. Mud / Dirt / Gravel Oil

Dry Wet

Ice / Compacted Snow

Snow

6. 7. 8. Frost Water

O. WEATHER

Rain Unknown Clear 4. Snow Cloudy

Blowing Snow

Sleet / Hail / Freezing Rain 6. Fog / Smoke / Dust Severe Wind Blowing Sand/Soil/Dirt

LIGHT

Unknown Daylight

2. Dawn 3. Dusk

Dark (Lighted) Dark (Not Lighted)

Termination Area

Intermittent or

Moving Veh.

Q1. WORK ZONE RELATED

0. Not Applicable 2. Before first warning sign

Transition Area Activity Area Advance

Q2. TYPE OF WORK ZONE

Not Applicable 2. Lane Shift / Crossover Lane Closure 3. Work on Shoulder / Median

Warning Area

Q3. WORKERS PRESENT

0. Not Applicable 1. Yes

5 Other

2. No

GENERAL INSTRUCTIONS

USE BLACK INK OR TYPE ONLY COMPLETE ALL BLOCKS UNLESS OTHERWISE DIRECTED EXCEPTIONS ARE LISTED IN

APPENDIX A OF THE OFFICERS MANUAL. ALL ITEMS WITH AN ASTERISK (*) MUST BE EXPLAINED IN THE NARRATIVE

R. UNIT CONFIGURATION

Pass. Car Pickup / Van / Utility Bus (Seats For ≥ 16, Incl. Driver)

School Bus

Motorhome / Camper

Snowmobile Off Highway Veh. (ATV) 06. 07.

08. Motorcycle

Moped Pedalcycle 10.

11. Const. Equip.12. Emergency Vehicle

Farm Equipment

Modified Vehicle

Hit and Run Vehicle

Roadway Maintenance Vehicle Other Publicly-Owned Vehicle

18.

Pedestrian
2-Axle 6-Tire Single Unit Truck / Stepvan

3 or More Axles Single Unit Truck

Single Unit Truck

Truck Tractor

Unknown Heavy Truck
Low Speed Vehicle (Golf Car. Segway)

Other Pedestrian (Wheelchair)

ATTACHMENTS

None 1. Single Trailer

CARGO BODY TYPE Not Applicable

Van / Enclosed Box Dry Bulk Cargo Tank

Liquid Bulk Cargo Tank

Gaseous Bulk Cargo Tank

Double Trailer

06. Dump 07. Concrete Mixer 08. Auto Transporter

11. Combination

09. Garbage / Refuse 10. Bus (16 Incl. Driver)

5. South

6. Southwest

12. Special Permit Load

Triple Trailer

13. Hopper 14. Pole 90. Other *

7. West

8. Northwest

12. School Zone Signs

7.

13. Warning Signs

99. Unknown

V. ORIGINAL DIRECTION OF TRAVEL

North 2. Northeast

Stop Sign

02. No Passing Zone

03. Flashing Beacon

05. Flatbed / Platform

01

06. RR Crossina

07. Officer / Flagperson 08. Traffic Barrie 09. Yield Sian

11. Control Not Visible / Broken

04. RR Signals With Gates 05. RR Signals Only

W. TRAFFIC CONTROL

X. OBSERVATIONS

00. None

00. None

01. Need Signing 02. Trees / Shrubs / Tall Grass / Crops 03. Pavement Markings

04. Hill / Curve 05. Narrow Bridge / Roadway 06. Rough Road

14. Speed Limit15. Sight Obstruction*

Non-Collision With Motor Vehicle in Transport

Angle (Same Direction)
Angle (Opposite Direction) 10. Right Angl 11. Rear to Side

AA. SEQUENCE OF EVENTS

COLLISION WITH OBJECT - NOT FIXED

Pedestrian Pedalcycle

06. Deer 07. Other Large Game 08. Farm Animal

Other Object (Not Fixed) 12. Work Zone / Maintenance Equipment

NON-COLLISION

21. Fire / Explosion 22. Immersion 23. Jackknife

26. Separation of Units 27. Ran off Roadway

COLLISION WITH FIXED OBJECT

30. Impact Attenuator 31. Bridge / Pier / Abutment

32. Bridge Parapet End 33. Bridge Rail 34. Guardrail Face

35. Guardrail End 36. Median Barrier (Concrete Traffic Barrier)

37. Highway Traffic Sign Post 38. Overhead Sign Support 39. Luminaire / Light Support

40. Utility Post 41. Other Post / Pole / Support 42. Culvert

43 Curb 44. Ditch 45. Embankment 46. Fence 47. Mail Box

48. Tree 49. Other Fixed Object 50. Bridge Overhead Structure 51. Other Traffic Barrier 52. Traffic Signal Support

11. Angle (Direction Not Specified)

99. Unknown

08. Traffic Signals

09. Clearance Height 10. Road Maintenance 11. Delineators / Bridge Markings

12. Guardrail 13. Geometrics

MANNER OF COLLISION

Angle (Not Specific)) Rear-End

Head-On

Sideswipe (Same Direction)

5.

Sideswipe (Opposite Direction)

Rear-to-Rear

Z. FIRST HARMFUL EVENT

MOST HARMFUL EVENT

01. Motor Vehicle in Transport 02. Motor Vehicle in Transport in Other Rdwy

05. Railway Train

Small Animal Parked Motor Vehicle

19. Fell / Jumped from Vehicle 20. Overturn / Rollover

24. Downhill Runaway 25. Cargo Loss or Shift

28. Other Non-Collision 29. Thrown / Falling Object

MOTOR VEHICLE CRASH REPORT OVERLAY NO. 2

11. Front Seat-Left Side (Motorcycle Driver)

OCCUPANT, WITNESS, AND PROPERTY INFORMATION

12. Front Seat-Middle

OCCUPANT SEAT POSITION

Passenger in Other Enclosed Passenger or Cargo Area (Non-Trailing Unit) Passenger in Unenclosed Passenger or Cargo Area (Non-Trailing Unit) 13. Front Seat-Right Side Second Seat-Left Side (Motorcycle Passenger) Second Seat-Middle Riding on Vehicle Exterior (Non-Trailing Unit) 56 22 Passenger in Trailing Unit Bus Passenger Damage Prop. (Public) Damage Prop. (Private) Second Seat-Middle Second Seat-Right Side Third Row-Left Side (Motorcycle Passenger) 31. Third Row-Middle 95. 32. 33. Third row-Right Side41. Fourth Row - Left Side Witness 42. Fourth Row - Middle 43. Fourth Row - Right Side Unknown AGE - In Years (Code 00 for infants under 1 year, 99 for unknown.) SEX F - Female M - Male U - Unknown ALCOHOL/OTHER DRUG INVOLVEMENT (ADI) 0. Neither Alcohol nor Other Drugs Present 2. Yes (Other Drugs Present) 9. Unknown Yes (Alcohol Present) 3. Yes (Alcohol and Other Drugs Present) **ALCOHOL TESTING (AT)** 994 Test Refused 996 Test Given (Results Unknown) 0.14 AC is Coded 014 993 Field Sobriety Test Only 995 Test Not Given OTHER DRUG TESTING (DT) 2. Drugs Reported (If So, Specify *) 0. Not Given 8. Test Refused 1. No Drugs Reported 7. Test Given (Results Unknown) *Identify results for the five regulated substances: Marijuana, Cocaine, Opiates, Amphetamines, & PCP. SAFETY EQUIPMENT/RESTRAINTS 98. Not Applicable 99. Restraint Use Unknown 00. Not Installed 01. Not in Use 02. Lap Belt Only CHILD RESTRAINTS Child Not Restrained Child Restraint System - Forward Facing Child Restraint System - Forward Facing Shoulder Belt Only or Automatic Belt Improperly Used 04. Lap and Shoulder Belts Automatic Belts (Properly Used) Child Restraint System - Rear Facing 06. Equipment Failed Booster Seat Child Restraint Type Unknown Helmet Worn **AIR BAG** 5. Deployed - Other (knee, air belt) 0. Not Applicable / None 3. Deployed - Front 2. Airbag Not Deployed 4. Deployed - Side 4. Deployed - Combination INJURY CLASS. Incapacitating 3. Non-Incapacitating None Fatal Possible / Claimed TAKEN TO MEDICAL FACALITY 1. Yes 2. No 3. Unknown **EJECTED/EXTRICATED** 0. Not Applicable 3. Partially Ejected Not Eiected 9. Unknown Totally Ejected

50. Sleeper Section of Cab (Truck)

Do not list operator / pedestrian name and address. List

where fatalities and injuries were taken.

UNIT NUMBER

MOTOR VEHICLE CRASH REPORT OVERLAY NO. 3

ACTION SEQUENCE, CITATIONS, AND DAMAGE

A Summary By Unit Number, of the Sequence of Actions, Events, Contributing Factors, Citations, and Vehicle Damage.

