

Report Number

STATE OF MAINE CRASH REPORT

UNIT PAGE

U

Unit ID	<input type="checkbox"/> Hit Run?	VIN	License Plate	State	(U1) Unit Type
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N
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T

<input type="checkbox"/> No Insurance	NAIC	Insurance Company Name	Insurance Policy Number
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(U2) Vehicle Make	Vehicle Year	(U3) Vehicle Color
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(U4) Vehicle Configuration	GVWR or GCWR <input type="checkbox"/> < 10,000 lbs. <input type="checkbox"/> 10,001 - 26,000 lbs. <input type="checkbox"/> > than 26,000 lbs.
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Vehicle Has 9 or More Seats ? <input type="checkbox"/> Yes <input type="checkbox"/> No	HAZMAT Placarded ? <input type="checkbox"/> Yes <input type="checkbox"/> No	Vehicle Travel Direction <input type="checkbox"/> Northbound <input type="checkbox"/> Southbound <input type="checkbox"/> Eastbound <input type="checkbox"/> Westbound <input type="checkbox"/> Not on Roadway <input type="checkbox"/> Unknown
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(U5) Special Function Vehicle <input type="checkbox"/> Exempt Vehicle	Emergency Vehicle Responding to Scene ? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Extent of Damage <input type="checkbox"/> No Damage Observed <input type="checkbox"/> Minor Damage <input type="checkbox"/> Functional Damage <input type="checkbox"/> Towed Due to Disabling Damage

(U6) Most Damaged Area	(U7) Most Harmful Event
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(U8) Pre Crash Actions	(U9) Contributing Circumstances - Vehicle
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(U10) Sequence of Events 1	(U10) Sequence of Events 2
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(U10) Sequence of Events 3	(U10) Sequence of Events 4
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D

<input type="checkbox"/> Driver <input type="checkbox"/> Bicycle <input type="checkbox"/> Pedestrian <input type="checkbox"/> License Number <input type="checkbox"/> Active <input type="checkbox"/> No License <input type="checkbox"/> Permit State License Class Endorsements Restrictions <input type="checkbox"/> Last Known Operator <input type="checkbox"/> Suspended

R

DRIVER Last Name	First Name	MI	DRIVER Address	City	State	Zip
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I

Citation Number	Pending <input type="checkbox"/>	Violation 1	Violation 2
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V

OWNER Last Name (skip if same as Driver)	First Name	MI	OWNER Address	City	State	Zip
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E

(D1) Driver Distracted By	(D2) Condition at Time of Crash
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R

(D3) Driver Actions at Time of Crash 1	(D3) Driver Actions at Time of Crash 2
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Alcohol Test <input type="checkbox"/> Breath <input type="checkbox"/> Urine <input type="checkbox"/> Other Chemical Test (Not Field Sobriety or PBT)	<input type="checkbox"/> Test Not Given <input type="checkbox"/> Test Refused <input type="checkbox"/> Blood <input type="checkbox"/> Alcohol Test Result Pending	Alcohol BAC Result
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Drug Test <input type="checkbox"/> Urine <input type="checkbox"/> Other	<input type="checkbox"/> Test Not Given <input type="checkbox"/> Test Refused <input type="checkbox"/> Blood	Drug Test Result <input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Pending
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(D4) Non Motorist Location at Time of Crash	(D5) Non Motorist Action Prior to Crash
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(D6) Non Motorist Action at Time of Crash 1	(D6) Non Motorist Action at Time of Crash 2
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(D7) Pedestrian Maneuvers	(D8) Bicyclist Maneuvers
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PERSON TYPE 1-Driver, 2-Passenger, 3-Pedestrian, 6-Driver/Owner, 7-Bicycle, 8-Passenger/Owner, 24-Last Known Operator 25-Last Known Operator/Owner

SEAT ROW	SEAT POSITION	SEAT POSITION OTHER	AIRBAG DEPLOYED	RESTRAINT SYSTEM	INJURY TYPE	INJURY AREA	INJURY DEGREE
1-Front Row	1-Left (driver)	1-Sleeper Section of Cab (truck)	1-Not Applicable	1-Not Applicable	1-Amputation	1-Face	1-Fatal
2-Second Row	2-Middle	2-Other Enclosed Cargo Area	2-Not Deployed	2-None Used - Motor Vehicle Occupant	2-Bleeding	2-Head	2-Incapacitating
3-Third Row	3-Right	3-Unenclosed Cargo Area	3-Deployed - Front	3-Shoulder and Lap Belt Used	3-Broken Bones	3-Neck	3-NonIncapacitating
4-Fourth Row	4-Other	4-Trailing Unit	4-Deployed - Side	4-Shoulder Belt Only Used	4-Burns	4-Back	4-Possible Injury
5-Other Row	5-Unknown	5-Riding on Motor Vehicle Ext (non-trailing unit)	5-Deployed - Other (knee, air belt,...)	5-Lap Belt Only Used	5-Concussion	5-Arm(s)	5-No Injury
6-Unknown	6-Unknown	6-Unknown	6-Deployed - Combination	6-Restraint Used - Other	6-Shock	6-Leg(s)	
			7-Deployment - Curtain	7-Child Restraint - Forward Facing	7-Dizziness	7-Chest Stomach	INJURY INFO SOURCE
				8-Child Restraint - Rear Facing	8-Abrasion/Bruises	8-Internal	1-Officer Observation
				9-Child Restraint - Used Incorrectly	9-Complaint of Pain	9-Entire Body	2-Individual Statement
				10-Booster Seat	10-Other	10-Other	3-Medical, Paramedical Observation
				11-Child Restraint - Other			

Person Type	Include Driver, Passengers, Bicyclist, and Pedestrians	Sex (M,F,U)	DOB	Seat Pos Row	Seat Pos	Seat Pos Other	Air Bag Deployed	Ejected	Restraint System	Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Amb Code
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	Last Name, First Name, Mi														

STATE OF MAINE CRASH REPORT

Report Number		Commercial Vehicle Supplemental		No Carrier Identification Numbers <input type="checkbox"/>																											
Unit ID	USDOT Number	MC/MX Number	State Number	MCSAP Number																											
<input type="checkbox"/> Interstate Carrier		<input type="checkbox"/> Intrastate Carrier		<input type="checkbox"/> Not in Commerce-Government																											
				<input type="checkbox"/> Not in Commerce-Other Trucks (Over 10,000 lbs. GVWR/GCWR)																											
Carrier Name			Carrier Phone																												
Address		City	State	Zip																											
<input type="checkbox"/> Oversize Permit Weight		<input type="checkbox"/> Oversize Permit Length	<input type="checkbox"/> Oversize Permit Height	<input type="checkbox"/> Oversize Permit Width																											
<input type="checkbox"/> Cargo Body Type (enter one code from below)		<input type="checkbox"/> Unloaded	<input type="checkbox"/> Partially Loaded	<input type="checkbox"/> Loaded																											
1 Bus (9-15 Seats, Including Driver) 		6 Dump 		11 Pole 																											
2 Bus (16 or More Seats, Including Driver) 		7 Concrete Mixer 		12 Log 																											
3 Van/Enclosed Box 		8 Auto Transporter 		13 Intermodal Chassis 																											
4 Cargo Tank 		9 Garbage/Refuse 		14 Vehicle Towing Motor Vehicle 																											
5 Flat Bed 		10 Grain, Chips, Gravel 		15 No Cargo Body 																											
98 Other Cargo Body (not listed above)																															
<input type="checkbox"/> Commodity Code (enter one code from below) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">A General Freight</td> <td style="width: 33%;">J Fresh Produce</td> <td style="width: 33%;">S Garbage, Refuse, Trash</td> </tr> <tr> <td>B Household Goods</td> <td>K Liquids / Gases in Cargo Tank</td> <td>T U.S. Mail</td> </tr> <tr> <td>C Metal: Sheets, Coils, Rolls</td> <td>L Intermodal</td> <td>U Chemicals</td> </tr> <tr> <td>D Motor Vehicles</td> <td>M Passengers</td> <td>V Commodities, Dry Bulk</td> </tr> <tr> <td>E DriveAway / TowAway</td> <td>N Oil Field Equipment</td> <td>W Refrigerated Foods</td> </tr> <tr> <td>F Forest Products</td> <td>O Livestock</td> <td>X Beverage</td> </tr> <tr> <td>G Building Products</td> <td>P Grain, Feed, Hay</td> <td>Y Paper Products</td> </tr> <tr> <td>H Mobile Homes</td> <td>Q Coal / Coke</td> <td>Z Other</td> </tr> <tr> <td>I Machinery, Large Objects</td> <td>R Meat</td> <td></td> </tr> </table>					A General Freight	J Fresh Produce	S Garbage, Refuse, Trash	B Household Goods	K Liquids / Gases in Cargo Tank	T U.S. Mail	C Metal: Sheets, Coils, Rolls	L Intermodal	U Chemicals	D Motor Vehicles	M Passengers	V Commodities, Dry Bulk	E DriveAway / TowAway	N Oil Field Equipment	W Refrigerated Foods	F Forest Products	O Livestock	X Beverage	G Building Products	P Grain, Feed, Hay	Y Paper Products	H Mobile Homes	Q Coal / Coke	Z Other	I Machinery, Large Objects	R Meat	
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STATE OF MAINE CRASH REPORT

Report Number

Narrative / Diagram Supplemental

Sample

F

FIRST PAGE CODING GUIDE

(F1) TYPE OF CRASH		(F2) TYPE OF LOCATION	
1 Object in Road	11 Jackknife	1 Straight Road	11 Open Field
2 Rear End / Sideswipe	12 Rollover	2 Curved Road	12 Gravel Pit
3 Head-on / Sideswipe	13 Fire	3 Three Leg Intersection	13 Woods
4 Intersection Movement	14 Submersion	4 Four Leg Intersection	14 Lake/Pond
5 Pedestrians	15 Thrown or Falling Object	5 Five or More Leg Intersection	15 River/Stream
6 Train	16 Bear	6 Driveways	16 Ocean
7 Went Off Road	17 Deer	7 Bridges	17 Parking Lot
8 All Other Animal	18 Moose	8 Interchanges	18 Private Way
9 Bicycle	19 Turkey	9 Other	19 Cross Over
10 Other		10 Trail	20 Railroad Crossing
			21 Traffic Circle/Roundabout
(F3) WEATHER CONDITION		(F4) LIGHT CONDITION	
1 Clear	7 Blowing Snow	1 Daylight	7 Unknown
2 Cloudy	8 Severe Crosswinds	2 Dawn	
3 Fog, Smog, Smoke	9 Blowing Sand, Soil, Dirt	3 Dusk	
4 Rain	10 Other	4 Dark - Lighted	
5 Sleet, Hail (Freezing Rain or Drizzle)		5 Dark - Not Lighted	
6 Snow		6 Dark - Unknown Lighting	
(F5) ROAD GRADE		(F6) ROAD SURFACE CONDITION	
1 Level		1 Dry	7 Sand
2 On Grade		2 Wet	8 Mud, Dirt, Gravel
3 Top of Hill		3 Snow	9 Oil
4 Bottom of Hill		4 Slush	10 Other
5 Other		5 Ice/Frost	11 Unknown
		6 Water (Standing, Moving)	
(F7) TRAFFIC CONTROL DEVICE			
1 Traffic Signals (Stop and Go)	6 Yield Sign	11 R.R. Crossing Device	
2 Traffic Signals (Flashing)	7 Curve Warning Sign	12 No Passing Zone	
3 Advisory/Warning Sign	8 Officer, Flagman, School Patrol	13 None	
4 Stop Signs - All Approaches	9 School Bus Stop Arm	14 Other	
5 Stop Signs - Other	10 School Zone Sign		
(F8) LOCATION OF FIRST HARMFUL EVENT			
1 On Roadway	4 Roadside	7 In Parking Lane or Zone (Not Parking Lot)	
2 Shoulder	5 Gore	8 Parking Lot / Off Roadway / Location Unknown	
3 Median	6 Separator	9 Outside Right-of-Way(trafficway)	
(F9) CONTRIBUTING CIRCUMSTANCES - ENVIRONMENT			
1 None	3 Physical Obstructions	5 Animal(s) in Roadway	
2 Weather	4 Glare	6 Other	
(F10) CONTRIBUTING CIRCUMSTANCES - ROAD			
1 None	7 Obstruction in Roadway		
2 Road Surface Condition (Wet, Icy, Snow, Slush, etc.)	8 Traffic Control Device Inoperative, Missing or Obscured		
3 Debris	9 Shoulders (None, Low, Soft, High)		
4 Rut, Holes, Bumps	10 Non-Highway Work		
5 Work Zones (Construction / Maintenance / Utility)	11 Other		
6 Worn, Travel-Polished Surface			
(F11) LOCATION OF CRASH RELATED TO WORK ZONE		(F12) TYPE OF WORK ZONE	
1 Before the First Work Zone Warning Sign		1 Lane Closure	
2 Advance Warning Area		2 Lane Shift/Crossover	
3 Transition Area		3 Work on Shoulder or Median	
4 Activity Area		4 Intermittent or Moving Work	
5 Termination Area		5 Other	



UNITS CODING GUIDE

(U2) VEHICLE MAKE	(U1) UNIT TYPE		
1 ACURA	1 Passenger Car	10 Other Bus	19 ATV - (3 wheel)
2 ALFA ROMEO	2 (Sport) Utility Vehicle	11 Motorcycle	20 ATV - (2 wheel)
3 AMERICAN MOTORS	3 Passenger Van	12 Moped	21 Snowmobile
4 ASUNA	4 Cargo Van (10K lbs or Less)	13 Low Speed Vehicle	22 Pedestrian
5 AUDI	5 Pickup	14 Autocycle	23 Bicyclist
6 AUSTIN	6 Motor Home	15 Experimental	24 Witness
7 BMW	7 School Bus	16 Other Light Trucks (10,000 lbs or Less)	25 Other
8 BUICK	8 Transit Bus	17 Medium/Heavy Trucks (More than 10,000 lbs)	
9 CADILLAC	9 Motor Coach	18 ATV - (4 wheel)	
10 CAPRI			
11 CHEVROLET	(U3) VEHICLE COLOR		
12 CHRYSLER	1 Black	3 Burgundy	5 Green
13 DAEWOO	2 Beige	4 Blue	6 Gold
14 DAIHATSU			7 Brown
15 DODGE			8 Grey, Silver
16 EAGLE			9 Purple, Orange, Other
17 FIAT			10 Red
18 FORD			11 Maroon
19 FREIGHTLINER			12 Cream
20 FWD			13 White
21 GEO			14 Yellow
22 GM			
23 GMC			
24 HARLEY DAVIDSON	(U4) VEHICLE CONFIGURATION (see vehicle configuration diagram - V)		
25 HINO	1 Passenger Car (only if vehicle has Hazardous Materials Placard)	9 Truck/Trailer(s) [Single-Unit Truck with Trailer(s)]	
26 HONDA	2 Light Truck (only if vehicle has Hazardous Materials Placard)	10 Truck Tractor (without trailer, bobtail or saddle mount)	
27 HYUNDAI	3 Bus (seats for 9-15 people, including driver)	11 Tractor/Semi-Trailer (one trailer - 5 axles)	
28 INFINITI	4 Bus (seats for 16 people or more, including driver)	12 Tractor/Semi-Trailer (one trailer - 6 axles)	
29 INTERNATIONAL	5 Single-Unit Truck (2 axles, 6 tires)	13 Tractor/Semi-Trailer (one trailer - All other axle configurations)	
30 ISUZU	6 Single-Unit Truck (3 axles)	14 Tractor/Doubles (two trailers)	
31 IVECO	7 Single-Unit Truck (4 axles with rear tri-axle)	15 Tractor/Triples (three trailers)	
32 JAGUAR	8 Single-Unit Truck (5 or more axles)	99 Other Truck Greater Than 10,000 lbs. (not listed above)	
33 JEEP			
34 JENSEN	(U5) SPECIAL FUNCTION VEHICLE		
35 KAWASAKI	1 No Special Function	4 Vehicle Used as Other Bus	7 Ambulance
36 KENWORTH	2 Taxi	5 Military	8 Fire Truck
37 KIA	3 Vehicle Used as School Bus	6 Police	
38 LADA			
39 LANCIA			
40 LAND ROVER			
41 LEXUS			
42 LINCOLN			
43 MACK			
44 MAZDA			
45 MERCEDES BENZ			
46 MERCURY			
47 MERKUR			
48 MG			
49 MITSUBISHI			
50 NISSAN			
51 OLDSMOBILE			
52 OPEL			
53 OSHKOSH			
54 PASSPORT			
55 PETERBILT			
56 PEUGEOT			
57 PLYMOUTH			
58 PONTIAC			
59 PORSCHE			
60 RENAULT			
61 SAAB			
62 SATURN			
63 SSI			
64 STERLING			
65 SUBARU			
66 SUZUKI			
67 TOYOTA			
68 TRIUMPH			
69 VOLKSWAGEN			
70 VOLVO			
71 WHITE			
72 WHITEGMC			
73 WINNEBAGO			
74 YAMAHA			
75 YUGO			
99 OTHER			
	(U6) MOST DAMAGED AREA (see vehicle damage area diagram - V)		
	1 Front Passenger Corner	7 Rear Driver Side	12 Front
	2 Front Passenger Quarter Panel	8 Rear Driver Quarter Panel	13 Top/Roof
	3 Center Passenger Side	9 Center Driver Side	14 Undercarriage
	4 Rear Passenger Quarter Panel	10 Front Driver Quarter Panel	15 Non-Collision
	5 Rear Passenger Corner	11 Front Driver Corner	16 Unknown
	6 Rear		
	(U7) MOST HARMFUL EVENT		
	1 Overturn / Rollover	15 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Veh.	28 Guardrail End
	2 Fire / Explosion	16 Work Zone / Maintenance Equipment	29 Concrete Traffic Barrier
	3 Immersion	17 Other Non-Fixed Object	30 Other Traffic Barrier
	4 Jackknife	18 Impact Attenuator / Crash Cushion	31 Tree (Standing)
	5 Cargo / Equipment Loss Or Shift	19 Bridge Overhead Structure	32 Utility Pole / Light Support
	6 Fell / Jumped From Motor Vehicle	20 Bridge Pier or Support	33 Traffic Sign Support
	7 Thrown or Falling Object	21 Bridge Rail	34 Traffic Signal Support
	8 Other Non-Collision	22 Cable Barrier	35 Fence
	9 Pedestrian	23 Culvert	36 Mailbox
	10 Pedalcycle	24 Curb	37 Other Post Pole or Support
	11 Railway Vehicle - Train, Engine	25 Ditch	38 Other Fixed Object (wall, building, tunnel, etc.)
	12 Animal	26 Embankment	39 Unknown
	13 Motor Vehicle in Transport	27 Guardrail Face	40 Gate or Cable
	14 Parked Motor Vehicle		41 Pressure Ridge
	(U8) PRE CRASH ACTIONS		
	1 Following roadway	9 Starting in traffic	17 Changing Lanes
	2 Wrong way into opposing traffic	10 Slowing in traffic	18 Overtaking Passing
	3 Right turn on red	11 Stopped in traffic	19 Merging
	4 Left turn on red	12 Entering parked position	20 Backing
	5 Making right turn	13 Parked Legally	30 Other Vehicle Action
	6 Making left turn	14 Parked Illegally	31 Following Trail
	7 Making U turn	15 Avoiding Vehicle Object, Pedestrian, Animal in Road	99 Unknown
	8 Starting from parked	16 Skidding	
	(U9) CONTRIBUTING CIRCUMSTANCES - VEHICLE		
	1 None	6 Power Train	11 Windows/Windshield
	2 Brakes	7 Suspension	12 Mirrors
	3 Exhaust System	8 Tires	13 Wipers
	4 Body, Doors	9 Wheels	14 Truck Coupling / Trailer Hitch / Safety Chains
	5 Steering	10 Lights (head, signal, tail, brake)	15 Other
	(U10) SEQUENCE OF EVENTS		
	1 Overturn / Rollover	18 Pedalcycle	34 Embankment
	2 Fire / Explosion	19 Railway Vehicle (train, engine)	35 Guardrail Face
	3 Immersion	20 Animal	36 Guardrail End
	4 Jackknife	21 Motor Vehicle In Transport	37 Concrete Traffic Barrier
	5 Cargo / Equipment Loss or Shift	22 Parked Motor Vehicle	38 Other Traffic Barrier
	6 Equipment Failure (blown tire, brake failure, etc.)	23 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Veh.	39 Tree (standing)
	7 Separation of Units	24 Work Zone/Maintenance Equipment	40 Utility Pole/Light Support
	8 Went Off Roadway Right	25 Other Non-Fixed Object	41 Traffic Sign Support
	9 Went Off Roadway Left	26 Impact Attenuator/Crash Cushion	42 Traffic Signal Support
	10 Cross Median	27 Bridge Overhead Structure	43 Other Post, Pole, or Support
	11 Cross Centerline	28 Bridge Pier or Support	44 Fence
	12 Downhill Runaway	29 Bridge Rail	45 Mailbox
	13 Fell/Jumped From Motor Vehicle	30 Cable Guardrail Barrier	46 Other Fixed Object (wall, building, tunnel, etc.)
	14 Reentering Roadway	31 Culvert	47 Unknown
	15 Thrown or Falling Object	32 Curb	48 Gate or Cable
	16 Other Non-Collision	33 Ditch	49 Pressure Ridge
	17 Pedestrian		50 No Other Events

D

DRIVER CODING GUIDE

(D1) DRIVER DISTRACTED

- | | |
|--|-----------|
| 1 Not Distracted | 6 Unknown |
| 2 Electronic Communication Devices (Cell Phone, Pager, etc.) | |
| 3 Other Electronic Devices (Navigation Device, Palm Pilot, Entertainment Device, etc.) | |
| 4 Other Inside the Vehicle (Eating, Reading, Grooming, Smoking, Passengers, etc.) | |
| 5 External Distraction (outside the vehicle) | |

(D2) CONDITION AT TIME OF CRASH

- | | |
|---|--|
| 1 Apparently Normal | 5 Asleep or Fatigued |
| 2 Physically Impaired or Handicapped | 6 Under the Influence of Medications/Drugs/Alcohol |
| 3 Emotional (Depressed, Angry, Disturbed, etc.) | 7 Other |
| 4 Ill (Sick) | |

(D3) DRIVER ACTIONS AT TIME OF CRASH

- | | |
|-----------------------------------|---|
| 1 No Contributing Action | 12 Improper Passing |
| 2 Ran Off Roadway | 13 Wrong Way |
| 3 Failed to Yield Right-of-Way | 14 Followed Too Closely |
| 4 Ran Red Light | 15 Failed to Keep in Proper Lane |
| 5 Ran Stop Sign | 16 Operated Motor Vehicle in Erratic, Reckless, Careless, Negligent or Aggressive Manner |
| 6 Disregarded Other Traffic Sign | 17 Swerved or Avoided Due to Wind, Slippery Surface, Motor Vehicle, Object, Non-Motorist in Roadway |
| 7 Disregarded Other Road Markings | 18 Over-Correcting/Over-Steering |
| 8 Exceeded Posted Speed Limit | 19 Other Contributing Action |
| 9 Drove Too Fast For Conditions | 20 Unknown |
| 10 Improper Turn | |
| 11 Improper Backing | |

(D4) NON-MOTORIST LOCATION AT TIME OF CRASH

- | | | |
|-------------------------------------|--------------------------|-----------------------------|
| 1 Intersection – Marked Crosswalk | 6 Bicycle Lane | 11 Shared-Use Path or Trail |
| 2 Intersection – Unmarked Crosswalk | 7 Shoulder/Roadside | 12 Non-Trafficway Area |
| 3 Intersection – Other | 8 Sidewalk | 13 Other |
| 4 Midblock – Marked Crosswalk | 9 Median/Crossing Island | 14 Unknown |
| 5 Travel Lane – Other Location | 10 Driveway Access | |

(D5) NON-MOTORIST ACTION PRIOR TO CRASH

- | | |
|--|--|
| 1 Crossing Roadway | 8 Getting On/Off School Bus |
| 2 Waiting to Cross Roadway | 9 Going to or from School (K-12) |
| 3 Walking/Cycling Along Roadway with Traffic (In or Adjacent to Travel) | 10 Responder Working in Trafficway (Incident Response) |
| 4 Walking/Cycling Along Roadway Against Traffic (In or Adjacent to Travel) | 11 Other |
| 5 Walking/Cycling on Sidewalk | 12 None |
| 6 In Roadway – Other (Working, Playing, Etc.) | 13 Unknown |
| 7 Adjacent to Roadway (e.g., Shoulder, Median) | |

(D6) NON-MOTORIST ACTION AT TIME OF CRASH

- | | |
|---|--|
| 1 No Improper Action | 8 Inattentive (Talking, Eating, Etc.) |
| 2 Dart/Dash | 9 Not Visible (Dark Clothing, No Lighting, Etc.) |
| 3 Failure to Yield Right-Of-Way | 10 Improper Turn/Merge |
| 4 Failure to Obey Traffic Signs, Signals, or Officer | 11 Improper Passing |
| 5 In Roadway Improperly (Standing, Lying, Working, Playing) | 12 Wrong-Way Riding or Walking |
| 6 Disabled Vehicle Related (Working on, Pushing, Leaving/Approaching) | 13 Other |
| 7 Entering/Exiting Parked/Standing Vehicle | 14 Unknown |

(D7) PEDESTRIAN MANEUVERS

- | | | |
|---------------------------------------|-----------------------------------|--------------------------------|
| 1 Crossing with Signal | 7 Standing in road | 13 Playing in road |
| 2 Crossing against Signal | 8 Emerging from behind parked car | 14 Not in road |
| 3 Crossing Marked Crosswalk no signal | 9 Child getting on/off School Bus | 15 Following Trail |
| 4 Crossing No Signal or Crosswalk | 10 Getting on/off Vehicle | 16 Walking on Sidewalk |
| 5 Walking in road with traffic | 11 Pushing or working on vehicle | 17 Walking Adjacent to Roadway |
| 6 Walking in road against traffic | 12 Working in road | 18 Walking to/from School |
| | | 19 Other Pedestrian Action |

(D8) BICYCLIST MANEUVERS

- | | | |
|------------------------------------|--------------------------------|---|
| 1 Bicycle - Riding with traffic | 4 Bicycle - Making Left turn | 7 Bicycle - Slowing, Stopping, Starting in Road |
| 2 Bicycle - Riding against Traffic | 5 Bicycle - Making U turn | 8 Bicycle - Other Bicyclist Action |
| 3 Bicycle - Making Right turn | 6 Bicycle - Riding Across Road | 99 Unknown |



VEHICLE CONFIGURATION AND DAMAGE

VEHICLE CONFIGURATION

Bus (9-15 Seats, Including Driver)



Truck/Trailer (Single-Unit Truck Pulling a Trailer)



Bus (16 or More Seats, Including Driver)



Truck Tractor (Bobtail)



Single-Unit (2 Axles, 6 Tires)



Tractor/Semi Trailer (One Trailer)



Single-Unit (3 or More Axles)



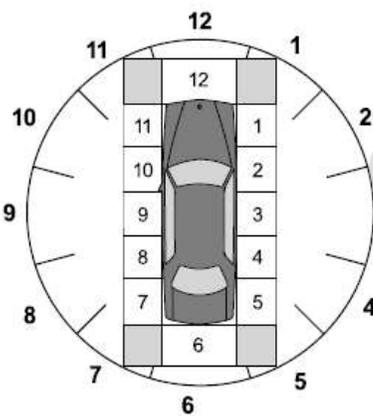
Truck Tractor/Double (Two Trailers)



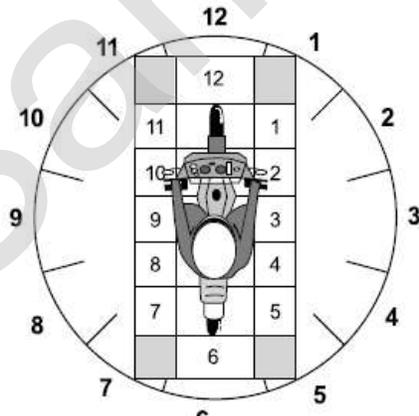
Truck Tractor/Triple (Three Trailers)



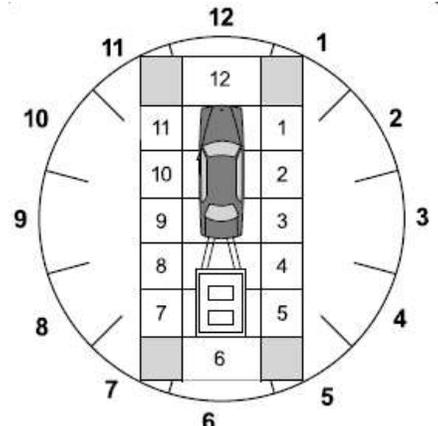
VEHICLE DAMAGE AREA



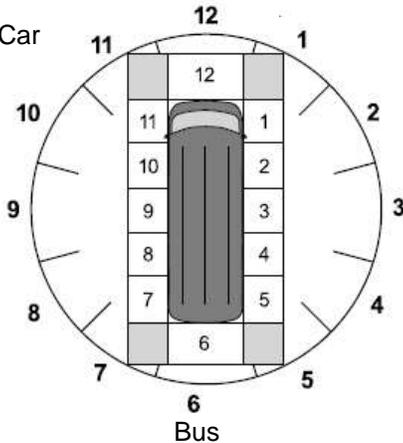
Passenger Car



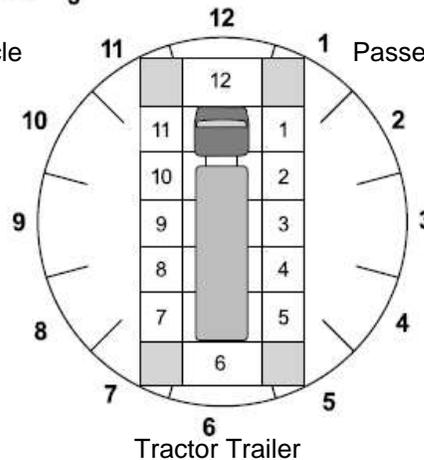
Motorcycle



Passenger Car with Trailer



Bus



Tractor Trailer

AMBULANCE CODES

Table with 5 columns of ambulance codes and names, ranging from 1 to 1001. Includes entries like 'Not Transported', 'Act Ambulance', 'East Grand Ambulance Service', etc.