## FLORIDA TRAFFIC CRASH REPORT

LONG FORM

SHORT FORM UPDATE .

MAIL TO: DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING TALLAHASSEE, FL 32399-0537



TOTAL # OF NARRATIVE SECTION(S)

2 2 1

				-		_					_	
CRASH DATE							HSM	PORT NUMBER				
04   12 CRASH IDEN		9:21 AM	04/12/13	,	2013-022	102			83	517749		
COUNTY CODE		COUNTY OF CRASH		PLACE OR CIT	Y OF CRASH		CHECK IF	WITHIN		ORTED TIME DISPA	TCHED	
04	64		ELLAS		T PETERSBU	RG						
TIME ON SCENE	TIME			, REASON (If Investig	gation NOT complete)					Notified By: 1 Motoris	it 🕅	
			COMPLETED $Y$							2 Law Enforcement		
		TION (CHOOSE C		PTIONS)								
CRASH OCCURF	RED ON STRE	EET, ROAD, HIGHWAY				TREET ADI	DRESS #	AT LAT	ITUDE A	ND LONGITUI	DE	
		49 ST N										
AT FEET	MILES		W SFROM	INTERSECTION WITH					4	OR FROM MILEP	OST#	
100 Boar	d System I	<u> </u>		Tun	38 A e of Shoulder	V IN	Tur	e of Inters	section			
	I Interstate	1 County 8 Priv	est Road /ate Roadway		1 Paved			Intersection	5 Traffic			
2	2 U.S. 5	5 Local 9 Pai	king Lot ther, Explain in		2 Unpaved 3 Curb		2 Four-V 3 T-Inter	Vay Intersection	7 Five-P	pint, or More		
		' Narra			e ears		4 Y-Inter		77 Other	, Explain in Narrative	9	
	ormanon nt Conditio		Weather Cor		way Surface Co	ndition	School Bus F	Polated	Manno	of Collision/Im	nact	
1 Da	ylight	5 Dark - Not Lighted	4 Fog, S	mog, Smoke	5 Oil					4 Sideswipe, same of	•	
2 Du 3 Da	wn l	6 Dark - Unknown Lighting	5 Sleet/H Freezing	Rain	6 Mud, Dir 7 Sand		2 Yes,	School Bus y Involved	3	5 Sideswipe, Opposi		
4 Da	line Lighted I	77 Other, Explain in	Dirt	g Sand, Soil, 1 Dr	B Water (s w moving)	•	3 Yes,	School Bus	1 Front to Rear	6 Rear to Side 7 Rear to Rear		
	٤		2 Cloudy 77 Other	, Explain in 2 W	et in Narrativ	eʻ		5	2 Front to Front 3 Angle	77 Other, Explain in 88 unknown	narrative	
First Harn	nful Event		Indifative	Non - Fixed Object	00 UTIKITU		th fixed object		-	armful Event		
		1 Overturn/Rollover 2 Fire/Explosion	10 Pede 11 Peda	strian	19 Impact Atte Cushion		sh 30 Concrete Tr		Locatio			
	14	3 Immersion 4 Jackknife		ay Vehicle (train,	20 Bridge Over 21 Bridge Pier		32 Tree (stand	ng)		1 On Roadway 2 Off Roadway		
First Harr	nful Event	5 Cargo/Equipment	13 Anima	al Vehicle in Transport	22 Bridge Rail	or ouppoin	34 Traffic Sign	Support		3 Shoulder 4 Median		
within Int		6 Fell/Jumped Fron Motor Vehicle	n 15 Parke	d Motor Vehicle Zone/Maintenance	23 Culvert 24 Curb		35 Traffic Signa 36 Other Post,	al Support Pole or Suppo	ort	6 Gore 7 Separator		
	No	7 Thrown or Falling	Equipme	nt	25 Ditch 26 Embankme		37 Fence 38 Mailbox			8 In Parking La 9 Outside Right		
	yes 8 Unknown	Object 8 Ran into Water/C 9 Other Non-Collision	anal Cargo	k By Falling, Shifting	27 Guardrail F 28 Guardrail E	nd	39 Other Fixed building, tunne			10 Roadside 88 Unknown	or way	
Fir	st Harmfu	I Event Relation		Non-Fixed Object	29 Cable Barri Circumstances:		bunung, turno		ntributing C	ircumstances:		
		Inction		<b>_</b>	9 W c	rn, Travel-F	Polished Surface		Enviror			
		Railway Grade Crossi 4 Entrance/Exit Ramp	ng		icy, s	now, slush,						
1 Non - Junct	<u> </u>	5 Crossover - Related 6 Shared - Use Path or	Trail 1 None		12 De	ebris	n Roadway					
2 Intersection	ı 1	7 Acceleration/Deceler 8 Through Roadway	ation Lane 4 Work	Zone (construction/ nance/utility)	Inope		sing or Obscured	1 None		5 Animal(s) in Road		
	lley Access 7	7 Other, Explain in Nar	ative 6 Shou	Iders (none, low, soft, h	<sup>11gn)</sup> 77 O		ay Work n in Narrative		r Conditions I Obstruction(s)	77 Other, Explain in Narrative	1	
Work Zone		B Unknown		Holes, Bumps	88 Ui Vork Zone	nknown	Workers in Wo	4 Glare		88 Unknown Enforcement i	<b>n</b>	
1 No	5	1 Before	the First Work Zone		ane Closure		1 No	TK ZUNE		Work Zone		
2 Ye 88 U	es Jnknown	Warning 2 Advanc 3 Transiti	e Warning Area	2 L	ane Shift/Crossover /ork on Shoulder or M	edian	2 Yes 88 Unkn	own		1 No 2 Officer Present		
		4 Activity		4 In	termittent or Moving v Other, Explain in Narra	vork <sup>l</sup>				3 Law Enforcement Only Present	t Vehicle	
WITNESSES	;									5, . 1000m		
	NAME		ADD	RESS			CITY & STATE			ZIP CC	DDE	
	NAME		ADD	RESS			CITY & STATE			ZIP CC	DDE	
	NAME		مم۷	RESS								
			ADD				CITY & STATE			ZIP CC		
				E FOT MICH		(0)	During )	500			00005	
	KSON#   PRO	PERTY DAMAGE - OT	HER THAN VEHICL	E EST. AMOUNT	OWNER'S NAME ···	(Check if	Business) ADDF	ESS	CITY & S	TATE ZIF	P CODE	
						(0)						
VEHICLE # PEI	RSON# PRC	PERTY DAMAGE - OT	HER THAN VEHICL	E EST. AMOUNT	OWNER'S NAME ··	(Check if	Business) ADDF	RESS	CITY & S	IAIE ZI	P CODE	

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VEHIC	IICLE # 1 Check if Comm				ercial 2013-022162				HSMV CRASH REPORT NUMBER 83517749							
1 Vehicle in Tra		VEHICLE	LICENSE NUMBER	२	STATE R	REGISTR	ATION EXPIRES									
2 Parked Moto 3 Working Veh	nicle		489TGR		FL			Registration ••			NV55MX	XSC427599				
Hit and Run 1 No	1 YE	AR	MAKE		MODEL	5	STYLE	C	OLOR	DAMAGE: 1 Disabling	4 Minor		ST.AMOUNT			
2 yes 88 Unknown		1995	BUIC		SKY POLICY NUMB		4D			2 Functional 3 None		1.Rotation				
INSURANCE C			1	INSURANCE		DER	Towed du to damag 1 No 2 Ye	e:				2.Owner Request 3.Driver				
NAME OF VEH		NONE	ness) ··		N/A		TADDRESS		-	ORIVER		4.Other, Explain in Narrative ZIP CODE				
MARTIN,								ргтг	RSBURG, FL							
TRAILER # LIC	,		REGISTRATION E		Check if Permane	ent VIN	<b>MAV 5,51</b>			YEAR	MAKE	LENGT	H AXLES			
				H	egistration ••											
TRAILER # LIC	CENSE NUM	BER STATE	REGISTRATION E		Check if Permane Registration ••					YEAR	MAKE	LENGTH AXLES				
VEHICLE	N S	E W O	ff-Road Unknown			ON S	TREET, ROAD, HIC	HWAY		ATES	ST.SPEED F	POSTED SPEE	D TOTAL LANES			
TRAVELLING	•• ••	•••••	• ••													
HAZ.MAT. RE	LEASED	HAZ.MAT PL	ACARD HA	AZ. MAT. NU	IMBER	HAZ. MA	AT. CLASS		Area of initial Impact				amaged Area			
1 No 2 yes 88 Unknown		1 No 2 yes 88 Unknown						2			dercarriage 1 Overturn					
MOTOR CARF					US DOT N	UMBER			15 16 17	<b>8</b> 20 V	Vindshield		16 17 8			
								14	4 13 12 11 10	9 .		14 13 1	2 11 10 9			
MOTOR CARF	RIER ADDRE	SS			CITY &	STATE				ZIP C	ODE	PHONE N	NUMBER			
Vehicle	Body Ty	pe			Tra	fficway	/		Commer	cial Motor	Vehicle C	Configuratio	on			
		15 Low Spee 16 (Sport) Ut	ility Vehicle		1 Two-Way, Not 2 Two-Way, Not	Divided	with a		1 Vehicle 10,000 for Hazardous Ma	Ibs or less Pla aterials	icarded 8 Ti 9 Ti	ractor/Triple ruck more than	10,000 lbs (4,536			
		17 Cargo Var (4,536 Kg) or	less)		Continuous Left 3 Two-Way, Divi painted >4 feet)	Turn Lan ided, Unp	e		2 Single-Unit True more than 10,000 3 Single-Unit True	ck (2-axle and ) lbs (4,536 kg ck (3 or more a		, Cannot Classi Bus/Large Van upants, includir	(spats for 9-15			
1 Passenger ( 2 Passenger \	Car √an	18 Motor Coa 19 Other Ligh (4,536 Kg) or	nt trucks (10,000 lbs	s	4 Two-Way, Divi Barrier	ided, posi			4 Truck Pulling T 5 Truck Tractor (I	railer(s) pobtail)	11 E occ	Bus (Seats for r upants includin	nore than 15) g driver)			
3 Pickup 7 Motor Home 8 Bus	)	20 Medium/H	leavy Trucks (more ,536 Kg) or less)	than	5 One-Way Traf 88 Unknown	-	Trailer Typ	e	6 Truck Tractor/S 7 Truck Tractor/D	ouble Truck	88 (	Other, Explain in Unknown	n Narrative			
11 Motorcycle 21 Farm labor Vehicle TR/ 12 Moped 77 Other, Explain in Narrative				TRAI	LER1 TRAIL	2 Ta	ingle Semi Trailer andem Semi Traile ank Trailer		e Trailer wed Vehicle	Ca	rgo Body 3 Van/Enclo	osed Box Cont	termodal ainer Chassis			
13 All Terrain	Comm	/Non-Comme	ercial		4 Saddle Mount/Trailer 10 Auto Transport 5 Boat Trailer 77 Other, Explain in					4 Hopper 5 Pole-Traile						
	2 Intra	state Carrier state Carrier in Commerce/Gov	ernment		6 Utility Trailer 7 House Trailer				ative nknown	6 Cargo Tar 7 Flatbed 8 Dump	(Vehicle 10,000 lbs (4,536Kg) or less not					
	4 Not	in Commerce/Othe	er Truck		Comm GVWR/GCWR				4,536-11,793 kg)	9 Concrete 10 Auto Tra	te Mixer displaying HM placard) ransport 77 Other, Explain in					
Most Harn	nful Even	1 Overturn/F	Rollover	GV			More than 16 4 Not Applica		(11,736 kg)		11 Garbage 12 Log	Refuse Narra 88 U	ative nknown			
14		2 Fire/Explo 3 Immersior 4 Jackknife			Collision No 10 Pedestria	an		Collisi 19 Impa	ion Fixed object ct Attenuator/Crash C	Cushion 30 Cor	ole Barrier hcrete Traffic	Damer .	mergency			
Soguence		5 Cargo/Equ 6 Fell/Jump	uipment Loss or Sh ed From Motor Veh	iift nicle	11 Pedalcyc 12 Railway 13 Animal		train, engine)	20 Bridg 21 Bridg	e Overhead Structure e Pier or Support	31 Oth 32 Tre	er Traffic Bar e (standing) ity Pole/Light	rrier V	/ehicle Use			
Sequence	2nd	7 Thrown or 8 Ran into V 9 Other Nor	Falling Vater/Canal		13 Animal 14 Motor Vehicle in Transport				e Rail ert	34 Tra	ffic Sign Sup ffic Signal Su	port				
14		[40-46 Sequ	ience of Events on		16 Work Zo Equipment	ne/Mainte	enance		ankment	36 Oth 37 Fer 38 Ma	ier Post, Pole ice	or Support	1 No			
3rd	4th	40 Equipme brake failure 41 Separatio		re,	17 Struck B Anything Se Vehicle	y Falling, et in Motic			drail Face drail End	39 Oth	ier Fixed Obj a. tunnel. etc	ect (wall,	2 Yes 88 Unknown			
		42 Ran Off I	Roadway, Right	Va	18 Other No			Trof	tie Centrel Dev			,				
	U Grada	44 Cross Me 45 Cross Ce	edian enterline	1	hicle Maneu Straight Ahead			Irat	fic Control Dev	Vehicle	venicle	e Defects				
1	ay Grade	46 Downhill Roadway A		4	Turning Left Backing Turning Right	14 S	Stopped in Traffic Slowing Vegotiating a Curve			shing Signal		4	2 Suspension			
	2 Hillcrest 3 Uphill		1 Straight	6	Changing Lanes Parked	s 16 L	eaving Traffic Lane	•	Devic		1 None	1;	2 Suspension 3 Wheels 4 Windows/			
	4 Downhill 5 Sag (botton	ı)	2 Curve Right 3 Curve Left	1	0 Making U-Turn 1 Overtaking/	Narr	rative Jnknown		nool Zone Sign/ Flagr	erson (includin nan, Officer, d, etc.)	3 Tires 4 Lights (I	head, 1	/indshield 5 Mirrors			
			9 Ambula			ntercity Bus	5 Trai Signa	ffic Control 13 W	arning Sign her, Explain in	signal, tai 6 Steering 7 Wipers	а Т.	6 Truck Coupling/ railer Hitch/				
	of Motor		arm Vehicle olice axi	10 Fire Tr 11 Farm I 12 Schoo	_abor Transport	16 S	Charter/Tour Bus Shuttle Bus Farm Labor Bus		p Sign Narra		9 Exhaust	ipers Safety Chains chaust System 77 Other, Explain in Body, Doors Narrative				
VIOLATIO	NS		lilitary		t/Commuter Bus		Jnknown				11 Power		B Unknown			
PERSON #		NAME OF \	/IOLATOR		FL S	TATUTE	NUMBER		CHAR	GE		CITAT	ION NUMBER			
1		MARTIN	, MARY K			316.64	6	NO PR	ROOF OF INSUE	RANCE		264.	3-HBF			
PERSON #		NAME OF \			FL S	TATUTE	NUMBER		CHAR	GE		CITAT	ION NUMBER			
1			, MARY K			322.34(1	,	DWLS	R - W/ KNOWL				4-HBF			
PERSON #		NAME OF \	IOLATOR		FL S	TATUTE	NUMBER		CHAR	ΞE		CITAT	ION NUMBER			

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VEHICL	HICLE # 2 Check if Comm				nercial						HSMV CRA	HSMV CRASH REPORT NUMBER 83517749						
		_	LICENSE NUMBE			REGIST	TRATION F	ATION EXPIRES Check if Permanent VIN				05517747						
1 Vehicle in Trans 2 Parked Motor ve 3 Working Vehicle	ehicle e		A433KI		FL					ration ••			NX21P8	4EA92590				
Hit and Run	1 YEAR		MAKE		MODEL		STYLE			COLOR	· ·		4 Minor		ST.AMOUNT			
88 Unknown		2004	FOF		F250			РК		BLU	:  נ	2 Functional 3 None						
INSURANCE COI		,			CE POLICY NUN			Towed du to damage	e:		CLE REMC		:	1.Rotation 2.Owner Request				
		SUALTY		P	PCM00283			1 No 2 Ye	s			RIVER			in in Narrative			
			ness) ••				ENT ADDR		_		CITY &			ZIP CODE				
DUNCAN, I			REGISTRATION	EXPIRES	Check if Perma		10TH A	AV N, S'	r pe	ETERSBU	RG, FI	2 33710	MAKE	LENG	TH AXLES			
					Registration •	•												
TRAILER # LICE	NSE NUMBER	STATE	REGISTRATION	EXPIRES	Check if Perma Registration		IN					YEAR	MAKE LENGTH AXLES					
VEHICLE N TRAVELLING	N S E	W Of	f-Road Unknow	n		ON	I STREET,	ROAD, HIG	ЭНWA	ſΥ		AT ES	T.SPEED P	OSTED SPE	D TOTAL LANES			
	ASED			107 MAAT N			MAT OLA	<u>ee</u>		Area of initi	al Impact =		1	Most F	amaged Area			
HAZ.MAT. RELE	ASED	HAZ.MAT PLA 1 No 2 ves		HAZ. MAT. N	NUMBER	HAZ.	MAT. CLA	33		Area of Initi	al Impact -	7 18 Und	lercarriage 1					
2 yes 88 Unknown		2 yes 88 Unknown							_`	1 15 1 1	5 <b>1</b> 7	19 0		$^{9}\sqrt{1}$	16 17 8			
MOTOR CARRIE	R NAME				US DOT	NUMBE	К		ŀ	14 13 12		-	railer 2	<u>-••</u>				
MOTOR CARRIE	RADDRESS				CITY	& STATI	E			113 112	1 11 10	ZIP CC	DDE	1.01	NUMBER			
			1															
Vehicle B	lody Type	15 Low Speed			1 Two-Way, N	afficw ot Divide	ed	,		— 1 Vehic	le 10.000 l	bs or less Plac	carded 8 Tr	actor/Triple				
		16 (Sport) Util 17 Cargo Van	n (10,000 lbs		2 Two-Way, N Continuous Le	ot Divide ft Turn L	ed, with a .ane	,		2 Single	ardous Mat -Unit Trucl ap 10 000	(2 aylo and C		Cannot Class	10,000 lbs (4,536 sify (seats for 9-15			
1 Passenger Car	Ll r	(4,536 Kg) or 18 Motor Coa	ich	he	3 Two-Way, Di painted >4 fee 4 Two-Way, Di	<li>t) Media</li>	in .	I '		3 Single 4 Truck	-Unit Truck Pulling Tra	k (2-axie and c lbs (4,536 kg)) k (3 or more a) ailer(s) bbtail) mi-Trailer	xles) occu 11 E	upants, includ Bus (Seats for	ng driver) more than 15)			
2 Passenger Var 3 Pickup	า	(4,536 Kg) or	it trucks (10,000 l less) eavy Trucks (mo		Barrier 5 One-Way Tra			ailer Typ	e	5 Truck 6 Truck	Tractor (bo Tractor/Se	obtail) mi-Trailer	0CCI 77 (	upants includi Other, Explain	ng driver)			
7 Motor Home 8 Bus 11 Motorcycle		10,000 lbs (4, 21 Farm labor	,536 Kg) or less) r Vehicle		88 Unknown AILER1 TRAI	LER2 1	l 1 Single Se	emi Trailer		Pole Trailer	Tactor/Do	Car	go Body	Type 131	ntermodal			
12 Moped 13 All Terrain Ve	. ,	77 Other, Exp 88 Unknown	lain in Narrative		3 Tank Trailer 9 T 4 Saddle Mount/Trailer 10				Towed Vehicle Auto Transpo			3 Van/Enclo 4 Hopper	osed Box Container Chassis 14 Vehicle Towing					
	1 Interstat		rcial		5 Boat Trailer 77 Ot				77 Other, Explain in 5 Pole-Trailer Another Vehicle 6 Cargo Tank 15 Not Applicable									
	2 Intrastat 3 Not in C	e Carrier ommerce/Gove ommerce/Othe	ernment	-	7 House Trailer				88 Unknown 1 No Cargo 7 Flatbec 2 Bus 8 Dump					(Vehicle 10,000 lbs (4,536Kg) or less not				
Most Harmfu		Non-Coll			2 10,000-26,00				000 lbs (4,536-11,793 kg) 10 Aut ,000 lbs (11,736 kg) 11 Gau				9 Concrete M 10 Auto Trar 11 Garbage/					
		1 Overturn/R 2 Fire/Explos	Rollover sion		Collision N	on - Fi	4	Not Applica	ble	lision Fixed			12 Log	88	Jnknown			
14		3 Immersion 4 Jackknife		bift	10 Pedest 11 Pedalc	rian vcle	-		19 Im	pact Attenuato	r/Crash Cu	shion 30 Con	le Barrier crete Traffic er Traffic Bar	Damei ,	Emergency Vehicle Use			
Sequence of	f Events	6 Fell/Jumpe	ipment Loss or S ed From Motor V Falling	ehicle	12 Railwa 13 Animal	y Vehicl	e (train, en	gine)	21 Bri	idge Overnead idge Pier or Su idge Rail	ipport	32 Tree 33 Utilit	e (standing) tv Pole/Light	Support				
1st	2nd	7 Thrown or 8 Ran into W 9 Other Non-	/ater/Čanal -Collision		15 Parked	Motor \		t	23 Cu 24 Cu	ilvert irb		34 Trafi 35 Trafi	fic Sign Supp fic Signal Su	pport or Support				
14			nt Failure (blown		16 Work Z Equipmen 17 Struck	t			25 Ditch 36 Other Post, Pole or Support 26 Embankment 37 Fence 1 No 27 Guardrail Face 38 Mailbox 2 Yos									
3rd	4th	brake failure 41 Separatio	e, etc.)	- /	Anything S Vehicle	Set in Mo	ng, Shifting otion by Mc	otor		ardrail End		39 Othe	er Fixed Obje g, tunnel, etc	ect (wall, .)	2 Yes 88 Unknown			
		42 Ran Off R 43 ran Off R	Roadway, Right oadway, Left	v	18 Other Mane				Tr	affic Cont	rol Devi	ce For	Vehicle	Defects				
Roadway	Grade	44 Cross Me 45 Cross Ce 46 Downhill	nterline		1 Straight Ahead 3 Turning Left	b	3 Stopped	in Traffic	''			/ehicle		2010010				
1 Le	evel F	Roadway A	,		4 Backing 5 Turning Right	1	4 Slowing	ing a Curve		1	8 Flas	hing Signal			2 Suspension			
3 U	lillcrest Iphill		1 Straight		6 Changing Lan 8 Parked	es 1	6 Leaving 7 7 Other, Ex	Traffic Lane		No Controls	Device		1 None 2 Brakes		3 Wheels 4 Windows/			
	ownhill ag (bottom)		2 Curve Right 3 Curve Left		10 Making U-Tu 11 Overtaking/	rn N	larrative 8 Unknowr		4 S	School Zone S	<sup>ign/</sup> Flagm	son (including an, Officer,	4 Lights (h	iead,	Vindshield 5 Mirrors			
Sr			n 9 Ambu	Passing lance		4 Intercity I		5 T Sig	Fraffic Control gnal		, etc.) Irning Sign Ier, Explain in	signal, tail 6 Steering	-	6 Truck Coupling/ railer Hitch/				
	Motor Vel	hicle <sup>2 Fa</sup> 3 Po	arm Vehicle olice		n Labor Transpor	rt 1	5 Charter/T 6 Shuttle B	Bus	6 5	Stop Sign Yield Sign	Narrati 88 Uni	ve	7 Wipers 9 Exhaust	System	Safety Chains 7 Other, Explain in			
		7 Ta 8 Mi	axi ilitary	12 Scho 13 Tran	sit/Commuter Bu		7 Farm Lat 8 Unknowr						10 Body, E 11 Power		Narrative 88 Unknown			
VIOLATIONS PERSON #		NAME OF V	/IOLATOR		FL	STATU	TE NUMBE	R			CHARG	E		CITA	TION NUMBER			
			-											2				
PERSON #		NAME OF V	/IOLATOR		FL	STATU	TE NUMBE	R			CHARG	E		CITA	TION NUMBER			
PERSON #		NAME OF V	IOLATOR		FL	STATU	TE NUMBE	R			CHARG	E		CITA	TION NUMBER			
-	_						-	-		_	_		-					

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						REPORTING AGENCY CASE NUMBER				HSMV CRASH REPORT NUMBER						
PERSON # 1						2013-022162				83517749						
1 Driver					PHO	PHONE NUMBER Check if										
2 Non-Motorist 3 Passenger	1 1	RTIN MARV	к			(727) 623-2512 Recommend Driver Re-exam										
3 Passenger 1 MARTIN, MARY K CURRENT ADDRESS (Number and Street) CITY & STATE									(//	27) 025-		ZIP CC				
6565 5TH AV S					S	ST PETERS	SBURG, I	FL				33707				
	EX: Male	DRIVER	LICENSE NUMBE	R		STATE	EXPIRES		IURY SE' lone	VERITY (IN	J) 4 Incapaci	tating				
07/00/1049 2F	emale 2	M635	591487490			FL		2 F	ossible	o oitotin o	5 Fatal (wi	thin 30 days)				
0110311310	Unknown	111000			DRIVER	12		31	lon-incap	acitating	6 NON-TRA	ffic Fatality				
DL Type	Require	ed Endors	ements	1st	Drivers /	Actions at Ti	ime of Cra	ish		3rd						
1 A 2 B 3 C 4 D/Chauffe	eur 1	Yes 2 No			1 No Contributing 2 Operated MV ir	Action	26 Ran off F 27 Disregar	Roadway	Troffic	510		ition At of Crash				
5 E/Operate 6 E/Oper -	or   3	No Req. End	orsement	2	Negligent Manne	r	Sign					ently Normal				
7 None					3 Failed to Yield 4 Improper Backi	Right-of-Way ng	28 Disregar Markings				3 Aslee	p or Fatigued k) or Fainted				
1 Not Distra	r Distracted By	(explain in	ide the Vehicle narrative)	2nd	6 Improper Turn 10 Followed too	Closelv	29 Over-Co Steering	•		4th	6 Seizu	re, Epilepsy, E cally Impaired	Blackout			
	c Communication ell phone, etc.)		e Vehicle, explain	6	11 Ran Red Ligh 12 Drove too Fas	t	30 Swerved to Wind, Sli			.	8 Emoti	onal (depress listurbed, etc.)	sion,			
3 Other Ele	device, DVD player)	in narrative 6 Texting	,		13 Ran Stop Sigr	ו	Object, Non Roadway, e	-Motorist			9 Under	the influence	of			
	n Obstructions	7 Inattentiv 88 Unknov			15 Improper Pase 17 Exceed Poste	d Speed	31 Operated	d MV in E			77 Othe	ions/Drugs/Al r, Explain in N				
1 Vision No	ot Obscured	5 Load on Ve			21 Wrong Side o 25 Failed to Keep		Reckless or 77 Other Co			er	88 Unkr	nown				
2 Inclemen 3 Parked/S	topped Vehicle	6 Building /Fix 7 Signs/Billbo	ed Object 10 Glar ards 77 All C	e └─ ther, Explain			DF	RIVER O	R PASS	ENGER						
4 Trees/Cro	ops/Bushes	8 Fog	in Narra		Helmet	t Use (HU)	Eye I	Protect	ion (EF	')		straint Sys	stems			
Motor Vehicle Se		R PASSEN				1 DOT-Complian Motorcycle Heln	nt	1 Yes			(RS	5)				
	•	(LOCATIC		/ OTHER		2 Other Helmet	net	2 No 3 Not	Applicabl	e 1 Not	Applicable (	non-motorist) tor Vehicle O	coupant			
Seat Row	Other				-   -	3 No Helmet Air Bag Dep					ulder and La ulder Belt O	p Belt Used	ccupan			
1 Left 1 Front 2 Middle 2 Second	1 Not Applicable 2 Sleeper Sectio 3 Other Enclosed 4 Unenclosed Ca	n of Truck Cat		Fiec		(ABD)	Joyeu	5 Deploye (knee, air	ed-Other belt. etc.	, 5 Lap	Belt Only Us	sed				
3 Right 3 Third	3 Other Enclosed 4 Unenclosed Ca	d Cargo Area argo Area			1 Not Ejected	1 Not	t Applicable	6 Deploye Combina	ed-	7 Chil	d Restraint S	Type Unknow System - Forw	ard Facing			
(explain in 77 Other narrative) 88 Unkno	Row 5 Trailing Unit	or Vehicle Exte	rior (non-		2 Ejectéd, Totally 3 Ejected, Partially	2 Not		7 Doplow	d-Curtai	' 9 Boo	ster Seat	Sýstem - Rear	-			
88 Unknown	trailing unit) 88 Unknown				4 Not Applicable 88 Unknown	4 De	ployed-Side	Unknown	ment	10 Ch 77 Oth	ild Restraint ner, Explain	Type Unknov in Narrative	vn			
					NON-MOTORIS	Т										
Non-Mo 1 Pedestria	otorist Description	n			ocation At Tim				A	ction Pri	or to Cra		Sidowalk			
2 Other Pe	destrian (wheelchair, p		2 Inters		rked Crosswalk 9	Sidewalk Median/Crossing					6 In Roa	ig/Cycling on dway Other	(working,			
building, sl 3 Bicyclist	kater, pedestrian conve	yance, etc.)		ection - Other ock - Marked (		Driveway Acces Shared-Use Pa						nt to Roadwa	y (e.g.,			
4 Other Cy		n Transport		I Lane - Other	Location 12	Non-Trafficway Other, Explain	Area		ng Roadw to Cross	/ay s Roadway		, median) to or from Sch	nool (K-12)			
(parked, et	tc.)	·	7 Shou	der/Roadside	88	Unknown		3 Walkin Roadway	g/Cycling		9 Workir	ng in Trafficwa response)	ay `´´			
Transporta	t of a Non-Motor Vehicl		No		t Actions/Circu	Imstances		adjacent	to travel	lane)	10 None		o motivo			
	n Type of Non-Motorist		1st	2 Dart/	Dash				Against	Traffic (in o			anauve			
1 None	Equipment 5 Lighting			4 Failu	re to Yield Right-of-V re to Obey Traffic Sig	Vay jns,	l	adjacent	to travel	lane)						
2 Helmet 3 Protective Pads Use	6 Not Applicab				s, or Officer adway Improperly (s	tanding Vehic	tering/Exiting		-		per Turn/Me per Passing					
(elbows, knees, shins	. etc.) in Narrative	ain	2nd	lying, w	orking, playing	8 Ina	ttentive (talkir t Visible (dark			12 Wron	g-Way Ridin	g or Walking				
4 Reflective Clothing ( backpack, etc.)	ljacket, 88 Unknown			on, pus	bled Vehicle Related shing, leaving/approa		ng, etc.)	olouning,	110	88 Unkno	, Explain in N own	varrative				
				AL	COHOL / DRUG /	EMS										
SUSPECTED ALCOHOL USE:	ALCOHOL TESTED:			OHOL TRESULT:	BAC	SUSPECTED DRUG USE:		UG TESTE			G TEST TYPE:	DRUG TES	ST RESULT:			
1 No	1 Test Not Given 2 Test Refused	1 Blood 2 Breath	ı    1F	ending		1 No		Fest Not C Fest Refu		1 Bl 3 uri	ine	2 Negati	ve			
2 Yes 88 Unknown	3 Test Given 88 Unknown, if Tested	3 Urine 77 Othe		Completed	L	2 Yes l 88 Unknown		Fest Giver Unknowr			Other,	U 3 Pendir live 88 Unkn				
SOURCE OF TRANSPO		Narrativ	EMS AGENCY NA			EMS RUN NUI				ŭ .	ANSPORTEI					
1 Not Transported			ENIS AGENCTINA				VIDER	IVIE	DICAL F	ACILITTIK	ANSPURIE	510				
2 EMS 3 Law Enforc 77 Other, Explain in Nar																
				ADD	ITIONAL PASSE				1000		FIFOT					
PERSON # VEHICLE #	NAME					DATEO	F BIRTH	U SEX	LOC:S	R O	EJECT	HU EP A	ABD RS			
			nd Street)		CITY	& STATE					ZII	P CODE				
	CURRENT ADDRI															
	CURRENT ADDRI															
SOURCE OF TRANSPO			EMS AGENCY	NAME OR ID		EMS RUN NUI	MBER	ME	DICAL F	ACILITY TR	ANSPORTEI	D T O				
1 Not Transported 2 EMS 3 Law Enforce	ORT TO MEDICAL FACIL		EMS AGENCY	NAME OR ID		EMS RUN NUI	MBER	ME	DICAL F	ACILITY TR	ANSPORTEI	D T O				
1 Not Transported 2 EMS 3 Law Enford 77 Other, Explain in Nar	RT TO MEDICAL FACIL rement rrative 88 Unknown		EMS AGENCY	NAME OR ID									ABD   BZ			
1 Not Transported 2 EMS 3 Law Enforce	RT TO MEDICAL FACIL rement rrative 88 Unknown		EMS AGENCY	NAME OR ID			MBER		DICAL F	ACILITY TR			ABD RS			
1 Not Transported 2 EMS 3 Law Enford 77 Other, Explain in Nar	DRT TO MEDICAL FACIL mement rative 88 Unknown NAME			NAME OR ID		DATE O					EJECT	HU EP A	ABD RS			
1 Not Transported 2 EMS 3 Law Enford 77 Other, Explain in Nar	RT TO MEDICAL FACIL rement rrative 88 Unknown			NAME OR ID	CITY						EJECT		ABD RS			
1 Not Transported 2 EMS 3 Law Enforc 77 Other, Explain in Nar PERSON # VEHICLE #	ORT TO MEDICAL FACIL rement 88 Unknown NAME CURRENT ADDRI	ITY	nd Street)		CITY	DATE O	F BIRTH IN	U SEX	LOC:S	R O	EJECT	HU EP A	ABD RS			
1 Not Transported 2 EMS 3 Law Enforc 77 Other, Explain in Nar PERSON # VEHICLE # SOURCE OF TRANSPO	ORT TO MEDICAL FACIL rement 88 Unknown NAME CURRENT ADDRI	ITY			CITY	DATE O	F BIRTH IN	U SEX	LOC:S	R O	EJECT	HU EP A	ABD RS			
1 Not Transported 2 EMS 3 Law Enforc 77 Other, Explain in Nar PERSON # VEHICLE #	ORT TO MEDICAL FACIL rement 88 Unknown NAME CURRENT ADDRI ORT TO MEDICAL FACIL rement	ITY	nd Street)		CITY	DATE O	F BIRTH IN	U SEX	LOC:S	R O	EJECT	HU EP A	ABD RS			

					AGENCY CASE NUME	BER I	HSMV CRASH REPORT NUMBER						
PERSON #	2				2013-022162		83517749						
1 Driver	VEHICLE # NA	ME					PHONE NUMBER Check if						
2 Non-Motorist 3 Passenger	1 2		DUNCAN.	BARRY M			(727) 323-3228 Recommend Driver Re-exam						
	CURRENT ADDRESS	(Number and Street)	Derteint,		& STATE			ZIP CODE					
5250 10TH AV	N			STI	PETERSBURG	FL		33710					
DATE OF BIRTH S	EX:	DRIVER LICENSE NUMBE	ER		STATE EXPIRES	INJUF	RY SEVERITY (IN.	J)					
02/04/1040 2	Male 1	UK			UK	1 Non 2 Pos	sible	4 Incapacitating 5 Fatal (within 30 days)					
	3 Unknown	UK		DRIVER	<b>UK</b>	3 Non	-incapacitating	6 Non-Traffic Fatality					
DL Type	Required I	Endorsements	1st		ons at Time of C	rash	3rd	Condition At					
1 A 2 B 3 0 4 D/Chauf		3	1 Nc	Contributing Act		f Roadway arded other Tra		Condition At Time of Crash					
5 E/Opera 6 E/Oper -		Req. Endorsement	Neg	perated MV in Car ligent Manner	Sign	arded Other Ro		1 Apparently Normal					
7 None	er Distracted By 4	Other Inside the Vehicle	4 lm	iled to Yield Right proper Backing	Markings	Correcting/Over		3 Asleep or Fatigued 5 III (sick) or Fainted					
1 Not Dist	racted	explain in narrative) 5 External Distraction	10 F	proper Turn ollowed too Close	elv Steering	ed or Avoided :		6 Seizure, Epilepsy, Blackout 7 Physically Impaired					
Devices (c	ell phone, etc.)	outside the Vehicle, explain narrative)	12 D	an Red Light Prove too Fast for	Conditions to Wind, S	Slippery Surfac		8 Emotional (depression, angry, disturbed, etc.)					
	dovice DVD playor) 6	5 Texting 7 Inattentive	15 Ir	an Stop Sign	Roadway	, etc.		9 Under the influence of Medications/Drugs/Alcohol					
		38 Unknown	21 V	xceed Posted Sp Vrong Side of Wro	ong Way Reckless	ted MV in Errat or Aggressive	Manner	77 Other, Explain in Narrative 88 Unknown					
2 Inclement	nt Weather 6 Bu	bad on Vehicle 9 Smok uilding /Fixed Object 10 Glar	ke 25 F e	ailed to Keep in F	Proper Lane 77 Other	Contributing Ac							
3 Parked/S 4 Trees/Ci	Stopped Vehicle 7 Si rops/Bushes 8 Fo		Other, Explain ative	Holmot Lo		Protection		Restraint Systems					
	DRIVER OR P	•		Helmet Us	DT-Compliant	1 Yes		(RS)					
Motor Vehicle S	eating Position:	LOCATION: SEAT ROV (LOC)	V OTHER	Moto	brcycle Helmet	2 No 3 Not Ap	nliashla 1 Not /	Applicable (non-motorist) 9 Used - Motor Vehicle Occupant					
Seat Row	Other			3 No	Helmet	5 NOL AP		ulder and Lap Belt Used					
1 Left 1 Front 2 Middle 2 Secon	1 Not Applicable 2 Sleeper Section of	Truck Cab			Bag Deployed	5 Deployed- (knee, air be	Other 5 Lap	ulder Belt Only Used Belt Only Used					
3 Right 3 Third	3 Other Enclosed Car 4 Unenclosed Cargo	rgo Area	Ejection (E	ected	1 Not Applicable	6 Deployed-	7 Child	raint Used - Type Unknown Restraint System - Forward Faci					
(explain in 77 Othe narrative) 88 Unkr	r Row 5 Trailing Unit		3 Ejecte	d, Totally d, Partially	2 Not Deployed 3 Deployed-From	7 Deployed-	Curtain 8 Child	d Restraint System - Rear Facing ster Seat					
88 Unknown	trailing unit) 88 Unknown	,	4 Not Ap 88 Unkr	oplicable own	4 Deployed-Side	Unknown	10 Chi	ld Restraint Type Unknown er, Explain in Narrative					
				-MOTORIST									
1 Pedestr	otorist Description		Motorist Location section - Marked Cross				Action Price	or to Crash 5 Walking/Cycling on Sidewall					
2 Other P	edestrian (wheelchair, perso skater, pedestrian conveyanc	n in a	section - Unmarked Crusection - Other	osswalk 9 Medi	an/Crossing Island			6 In Roadway Other (working playing, etc.)					
3 Bicyclis 4 Other C	t	4 Midbl	lock - Marked Crosswa	alk 11 Sha	red-Use Path or Trail	1 Crossing	Roadway	7 Adjacent to Roadway (e.g., shoulder, median)					
5 Occupa	nt of Motor Vehicle Not in Tra	ansport 6 Bicyc	el Lane - Other Location de Lane Ider/Roadside	77 Oth	12 Non-Trafficway Area 77 Other, Explain in Narrative 88 Unknown 3 Walking/Cycling Along 9 Working in Trafficway								
	nt of a Non-Motor Vehicle		on-Motorist Acti			Roadway w	ith Traffic (in or	(incident response) 10 None					
Transport 7 Unknow	ation Device n Type of Non-Motorist		1 No Improper		77 Other, Explain in Narrative								
Safety	Equipment	1st	2 Dart/Dash 3 Failure to Yie	ld Right-of-Way		adjacent to	ganist franci (in or						
1 None 2 Helmet	5 Lighting 6 Not Applicable		Signals, or Offi		7 Entering/Exiting Parked/Standing 10 Improper Turn/Merge								
3 Protective Pads Us (elbows, knees, shin	ed 77 Other, Explain	2nd	5 In Roadway I lying, working,	Improperly (standing, Vehicle 8 Inattentive (talking, eating, etc) 11 Improper Passing 12 Wrong-Way Biding or Walking									
4 Reflective Clothing backpack, etc.)	(jacket, 88 Unknown			nicle Related (wor aving/approaching		ark clothing, no	77 Other, 88 Unkno	Explain in Narrative					
,,				L/DRUG/EM									
SUSPECTED	ALCOHOL TESTED:		COHOL	BAC S		DRUG TESTED:		TEST TYPE: DRUG TEST RESUL					
ALCOHOL USE:	1 Test Not Given 2 Test Refused	2 Breath 1 F	ST RESULT:	1	No	1 Test Not Give 2 Test Refused	y 3 uri	ne 2 Negative					
2 Yes 88 Unknown	3 Test Given 88 Unknown, if Tested		Completed Unknown			3 Test Given 88 Unknown, if		ther, 3 Pending ain in Narrative 88 Unknown					
	DRT TO MEDICAL FACILITY	Narrative		FA	//S RUN NUMBER		CAL FACILITY TRA	ANSPORTED TO					
1 Not Transported 2 EMS 3 Law Enforce					En Monden								
77 Other, Explain in Na	rrative 88 Unknown												
PERSON # VEHICLE #	NAME		ADDITION	AL PASSENGE	DATE OF BIRTH	INJ SEX L	.OC:S. R . O	EJECT HU EP ABD R					
	CURRENT ADDRESS	(Number and Street)		CITY & S	TATE			ZIP CODE					
		(,											
	ORT TO MEDICAL FACILITY	EMS AGENCY		EN	IS RUN NUMBER	MEDI	CAL FACILITY TRA						
1 Not Transported	ſ				NON NOWIDER	WILDI	UNLI NULII I IKI						
2 EMS 3 Law Enfor 77 Other, Explain in Na	rrative 88 Unknown							· · · · · · · · · · · · · · · · · · ·					
PERSON # VEHICLE #	NAME				DATE OF BIRTH	INJ SEX L	OC:S R O	EJECT HU EP ABD R					
						1 1		ZIP CODE					
	CURRENT ADDRESS	(Number and Street)		CITY & S	IAIE			EII GODE					
	CURRENT ADDRESS	(Number and Street)		CITYAS	IAIE								
	CURRENT ADDRESS	(Number and Street) EMS AGENCY	NAME OR ID		IATE //S RUN NUMBER	MEDI	CAL FACILITY TRA						
SOURCE OF TRANSP 1 Not Transported 2 EMS 3 Law Enfor 77 Other, Explain in Na	ORT TO MEDICAL FACILITY		NAME OR ID			MEDI	CAL FACILITY TRA						

VI KAS N ON 49 ST N, SOUTH OF 38 AV N IN THE INSIDE TIRU LARE. V2 MAS N ON 49 ST N, SOUTH         SSU1/49           OF 49 ST N IN THE CURB LARE. VI ATTEMPTED TO RICHT TURN FROM THE CENTER THRU LARE TO A         PRIVIATE PARATING LOT ON THE RAST SIDE OF 49 ST N. AS VI TURNED, V2 STRUCK THE RIGHT SIDE           OF VI WITH THE FRONT OF V2.         THERE WERE NO INJURIES.         END           OF VI WITH THE FRONT OF V2.         THERE WERE NO INJURIES.         END           END         STRUCK THE FRONT OF V2.         THERE WERE NO INJURIES.           END         STRUCK THE FRONT OF V2.         THERE WERE NO INJURIES.           END         STRUCK THE FRONT OF V2.         THERE WERE NO INJURIES.           END         STRUCK THE FRONT OF V2.         THERE WERE NO INJURIES.           END         STRUCK THE FRONT OF V2.         THERE WERE NO INJURIES.           END         STRUCK THE COMPANY STRUCK THE S			NARRATIVE	REPORTI	REPORTING AGENCY CASE NUMBER					HSMV CRASH REPORT NUMBER						
					2013-022162						83517749					
	V1 WAS	S N ON	49 ST N, SOUTH OF 38 AV N IN	THE INSIDE	THRU LANE.	V	2 WAS	5 N	ON	49	ST 1	N,	SOU	TH		
END						), V	2 STE	RUCI	K TI	HE	RIGH	ΤS	IDE			
ADDITIONAL PASSENGERS           PERGON IN VENCE IT MANE           DURE OF FINISHING AND STORE           DURE DOWN AND STORE           D	OF V1	WITH	THE FRONT OF V2. THERE WERE N	IO INJURIES.	•											
ADDITIONAL PASSENGERS           PERGON IN VENCE IT MANE           DURE OF FINISHING AND STORE           DURE DOWN AND STORE           D	FND															
PERSON # VEHICLE # NAME       DATE OF BIRTH       INU       SEX       LOC:S       R       O       EJECT       HU       EP       ABD       RS         CURRENT ADDRESS (Number and Street)       CITY & STATE       ZIP CODE         SOURCE OF TRANSPORT TO MEDICAL FACILITY       EMS AGENCY NAME OR ID       EMS RUN NUMBER       MEDICAL FACILITY TRANSPORTED TO       INTEROPHY CODE         Y DHICLE # NAME       DATE OF BIRTH       INJ       SEX       LOC:S       R       O       EJECT       HU       EP       ABD       RS         Y DHICLE # NAME       EMS AGENCY NAME OR ID       EMS RUN NUMBER       MEDICAL FACILITY TRANSPORTED TO       INTEROPHY	BND															
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PERSON # VEHICLE # NAME       DATE OF BIRTH       INU       SEX       LOC:S       R       O       EJECT       HU       EP       ABD       RS         CURRENT ADDRESS (Number and Street)       CITY & STATE       ZIP CODE         SOURCE OF TRANSPORT TO MEDICAL FACILITY       EMS AGENCY NAME OR ID       EMS RUN NUMBER       MEDICAL FACILITY TRANSPORTED TO       INTEROPHY CODE         Y DHICLE # NAME       DATE OF BIRTH       INJ       SEX       LOC:S       R       O       EJECT       HU       EP       ABD       RS         Y DHICLE # NAME       EMS AGENCY NAME OR ID       EMS RUN NUMBER       MEDICAL FACILITY TRANSPORTED TO       INTEROPHY																
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