

Do not write in these spaces

2

No. of Units Involved Form 1 of 2 Supplemental Report Non-Reportable

1 Date 7/5/2005 County 13 Time 1 7 1 5 Local Use/Patrol Area 0705200502 Date Received by DMV

2 1 Location 33 Relation to Roadway Surface 1 Crash occurred In Raleigh Municipality or 2 5 Miles outside municipality

3 1 Unit# 1 Vehicle Driver Sheldon Brent Harding Address 8482 S Dawson St City Raleigh State NC Zip 27602


4 2 Unit# 2 Vehicle Driver Heidi Don Smith Address 1-1445 McGill Road City Raleigh State NC Zip 27604

6 2 Owner Sheldon Brent Harding Same as Driver? 8482 S Dawson St City Raleigh State NC Zip 27602

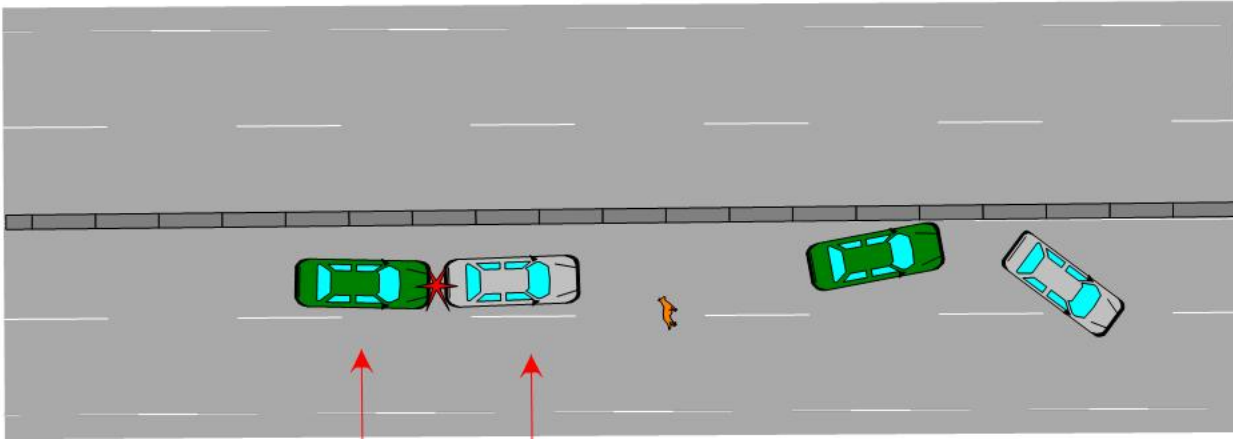
20 COMMERCIAL VEHICLE: Cargo, Carrier Name, Address, Source Carrier Identification Numbers, GVWR, Axles

Table with columns A-H and rows 01-05. Names and Addresses for All Persons (Unit 1/Unit 2 Drv, Ped, etc.)

46 Name of EMS 47 Injured Taken by EMS to (Treatment Facility and City or Town)

48 POINTS OF INITIAL CONTACT (Write in Codes) Unit# <u>1</u> <u>14,15,16</u> Unit# <u>2</u> <u>1,2</u>			VEHICLE INFO. Veh.# <u>1</u> Veh.# <u>2</u>		ROADWAY INFO.		WORK ZONE RELATED	
CRASH SEQUENCE (Unit Level) Unit# <u>1</u> Unit# <u>2</u>			60 Authorized Speed Limit		69 Road Feature		78 Workzone Area	
49 Vehicle Maneuver/Action			61 Estimate of Original Traveling Speed		70 Road Character		79 Work Activity	
50 Non-Motorist Action			62 Estimate of Speed at Impact		71 Road Classification		80 Work Area Marked	
51 Non-Motorist Location Prior to Impact			63 Tire Impressions Before Impact (ft.)		72 Road Surface Type		81 Crash Location	
52 Crash Sequence - First Event for This Unit			64 Distance Traveled After Impact (ft.)		73 Road Configuration		TRAILER INFO. Unit# _____ Unit# _____	
53 Crash Sequence - Second Event			65 Emergency Vehicle Use		74 Access Control		82 Trailer Type	
54 Crash Sequence - Third Event			66 Post Crash Fire (if "Yes" check block)		75 Number of Lanes		1st Trailer No. Axles	
55 Crash Sequence - Fourth Event			67 School Bus - Contact Vehicle		76 Traffic Control Type		Width (inches)	
56 Most Harmful Event for This Unit			68 School Bus - Noncontact Vehicle		77 Traffic Control Oper		Length (feet)	
57 Distance/Direction to Object Struck			COMMERCIAL VEHICLE: Hazardous Materials Involvement Haz Mat Placard <input type="checkbox"/> Yes <input type="checkbox"/> No From Placard indicate:  Hazardous Cargo <input type="checkbox"/> Yes <input type="checkbox"/> No 4-digit placard number or name from diamond box 1-digit number from bottom of diamond Released (does not include fuel from tank) _____ Carrying Haz Mat <input type="checkbox"/> Yes <input type="checkbox"/> No _____				83 Unit# _____	
58 Vehicle Underride/Override							Overwidth Trailer and Overwidth Mobile Home	
59 Vehicle Defects							Overwidth Permit # _____	

84 **DIAGRAM**



Unit# 1 was: Traveling Parked Facing N S E W on HWY 40

Unit# 2 was: Traveling Parked Facing N S E W on HWY 40

85 **NARRATIVE**

(Include pertinent and unusual aspects, which are not listed elsewhere on the form)

Veh1 was traveling East bound on the highway when a deer began to cross the roadway. Veh1 began slowing so avoid hitting the deer. Veh2 was following too closely to Veh1 and was approximately 10MPH over the speed limit. Veh2 couldnt stop in time and rear ended Veh1 pushing Veh1 into the middle of the road and itself into the center median.

86 Type/Owner _____ Owner Address _____ Phone _____ State _____ Property? Estimated Damage \$ _____

WITNESSES

Name Carey Tyra McCaw Address 98335 York Ave Raleigh NC 27602 Phone No. (9 1 9) 3 5 4 6 1 3 2

Name _____ Address _____ Phone No. (_____) _____

TRAFFIC VIOLATION(S)

Name Heidi Don Smith Charge(s) Following too close
 (Citation # optional)

Name _____ Charge(s) _____

Officer Name Trent McDonald Officer Number c99 Department Raleigh Police Department Date of Report 7/6/2005