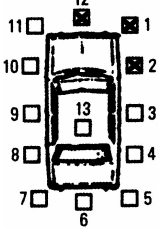
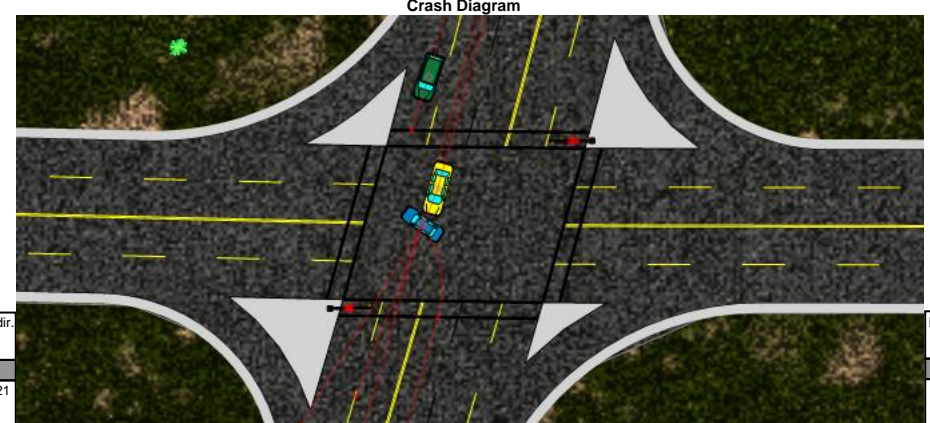
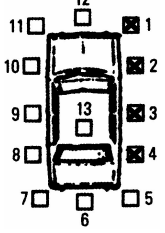


# Police Crash Report

Crash date		MM / DD / YYYY		Day of week		Military time (24 hr. clock)		County of crash				Official DMV use																							
1		1		2		2004		Tue		1723		Highland																							
<input checked="" type="checkbox"/> City of								Landmark at scene				GPS Lat.																							
<input type="checkbox"/> Town of Monterey																																			
1 Location of crash (route/street)								Railroad crossing ID no. (if within 150 ft.)				GPS. Long.		Mile marker number		Local case number																			
17th Street																652011																			
<input checked="" type="checkbox"/> at intersection with or _____ miles _____ feet _____ of Briarhurst Dr												Location of crash (route/street)		Number of vehicles																					
														2																					
Vehicle No. 1												Vehicle No. 2 (or pedestrian <input type="checkbox"/> )																							
Driver's name (last, first, middle)						Driver fled scene <input type="checkbox"/>		Yrs. dr. experience		Driver's name (last, first, middle)						Driver fled scene <input type="checkbox"/>		Yrs. dr. experience																	
Thomilin, Lee								12		Bone, Chris								3																	
Address (street and no.)												Address (street and no.)																							
1880 Araphoe Stree												#321 6044 Wilson Ave																							
City						State		ZIP		City						State		ZIP																	
Monterey						VA		23523		Monterey						VA		26587																	
Birth date		MM / DD / YYYY		Gender		Driver's license number		<input type="checkbox"/> DL <input type="checkbox"/> CDL		State		Birth date		MM / DD / YYYY		Gender		Driver's license number		<input type="checkbox"/> DL <input type="checkbox"/> CDL		State													
08		12		1964		M		55498876512		VA		04		23		1983		F		124448866868665		VA													
Vehicle owner's name (last, first, middle) or Commercial motor carrier												<input checked="" type="checkbox"/> same as driver		Vehicle owner's name (last, first, middle) or Commercial motor carrier												<input checked="" type="checkbox"/> same as driver									
Address (street and no.)												Address (street and no.)																							
City						State		ZIP		City						State		ZIP																	
A Veh. type		Veh. year		Veh. make		Veh. model		CMV		Towed		A Veh. type		Veh. year		Veh. make		Veh. model		CMV		Towed													
1		1999		dodge		Viper		<input type="checkbox"/>		<input type="checkbox"/>		2		2002		Toyota		truck		<input type="checkbox"/>		<input checked="" type="checkbox"/>													
Vehicle plate number				State		B EMV type		C EMV in service		Approximate repair cost		Vehicle plate number				State		B EMV type		C EMV in service		Approximate repair cost													
5889954-45588-4545118				VA		1		3				124457-98788655-56854				VA																			
VIN												VIN																							
U.S. DOT no. or VA no.						Placard no. and class or name						U.S. DOT no. or VA no.						Placard no. and class or name																	
No. of axles		Truck cover		GVWR		10,000 and under		10,001 to 26,000		over 26,000		HAZMAT		Oversize		Cargo spill		Override		Underride															
Y <input type="checkbox"/> N <input type="checkbox"/>		Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>													
Vehicle no. 1 damage												Name of insurance company (not agent)				Vehicle no. 2 damage												Name of insurance company (not agent)							
Check impact area(s)												Monterey Insurance Inc.				Check impact area(s)												Downtown Insurance							
Circle Initial impact																Circle Initial impact																			
																																			
See back of FR300T																								See back of FR300T											
Speed		Limit		Max safe		Lane dir.		Speed		Limit		Max safe		Lane dir.		Speed		Limit		Max safe		Lane dir.													
38		30						30		30						30		30																	
Passengers age count												Passengers age count				Passengers age count												Passengers age count							
Less 6		6-17		18-21		Over 21		Less 6		6-17		18-21		Over 21		Less 6		6-17		18-21		Over 21													
Damage to property other than vehicles				Approximate repair cost				Object struck (tree, fence, etc.)				Property owner's name (last, first, middle) and address																							
Crash description																																			
Offenses charged driver																																			
Careless Driving																																			
12		13		14		15		16		17		18		19		20		Names of injured (If deceased give date of death)				EMS transport		Date of death MM/DD/YYYY											
Investigating officer		Badge/code no.				Agency/department name and code no.				Reviewing officer				Report file date																					
John Fredrickson		67468594				Monterey Police Department				Greg Truman				11   12   2004																					