

# **INSTRUCTIONS FOR COMPLETING THE FLORIDA UNIFORM TRAFFIC CRASH REPORT FORMS**

**2008**



**STATE OF FLORIDA  
Department of Highway Safety and Motor Vehicles  
Neil Kirkman Building  
Tallahassee, Florida 32399-0500**

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## **Information About Florida Traffic Crash Report Forms**

The Florida Traffic Crash Report is used by law enforcement officers in Florida to report traffic crashes to the Department of Highway Safety and Motor Vehicles. Traffic crashes can be reported by the use of two forms commonly referred to as the “Long Form” and the “Short Form.”

A Long Form Report (HSMV 90003) in its entirety includes the Narrative/Diagram report (HSMV 90005) and any necessary Update/Continuation Report form (HSMV 90004) when the following criteria are met:

- Death or personal injury,
- Leaving the scene involving damage to attended vehicles or property (F.S. 316.061 (1)),
- Driving while under the influence (F.S. 316.193),

The Short Form Report (HSMV 90006) is used to report other types of traffic crashes to the Department: a driver report if the driver is required to file a written report to the Department or as a driver exchange of information form. If form HSMV 90006 is used as a Short Form, the officer who investigates the traffic crash is only required to fill in the shaded areas. However, law enforcement agencies can require their officers to fill in additional information.

The Florida Traffic Crash Reports are completed by filling in the blanks with required information obtained from an investigation of the event. In some cases, the report displays a list of values for certain data that pertains to vehicles, drivers, pedestrians, passengers, and the scene of the traffic crash. The investigating officer is required to select and enter a value in the appropriate data field. Some data fields are constructed to accept more than one value if warranted. The values needed to complete the vehicle or pedestrian sections on forms HSMV 90003 (Long Form), HSMV 90004 (Update/Continuation), and passenger information on form HSMV 90005 (Narrative/Diagram) are located on the Long Form at the bottom of page one. The values needed to

complete the events section of these forms are displayed next to the data fields on the back of forms HSMV 90003 and HSMV 90004. The remaining data fields are completed based on the information requested at the top of each category.

It is important that those who investigate and complete crash reports are doing so uniformly to ensure accuracy of the data captured from the report and the timely submission of the report to HSMV within 10 days of completing the investigation as required by F.S. 316.066.

FLORIDA TRAFFIC CRASH REPORT

**LONG FORM**

HSMV 90003 and HSMV 90005

# Time and Location Information (HSMV 90003)

## DATE OF CRASH

DATE OF CRASH		
01	30	06

Enter the date of the traffic crash in month, day, and year order in the following manner:

- Display the month by using the numbers 01 through 12.
- Display the day by using the numbers 01 through 31.
- Display the appropriate year as required.

## TIME OF CRASH

TIME OF CRASH		
1:14	<input type="checkbox"/> AM	<input checked="" type="checkbox"/> PM

Enter the time of day or the approximate time of day the traffic crash occurred.

- Place an X in the AM or PM box.
- Midnight is considered AM and noon is considered PM. Use the 12-hour clock system to identify the time of the crash. Do NOT use the 24-hour clock system (a.k.a. military time).

## TIME OFFICER NOTIFIED

TIME OFFICER NOTIFIED		
1:18	<input type="checkbox"/> AM	<input checked="" type="checkbox"/> PM

- Enter the time of day you were notified of the traffic crash.
- Place an X in the AM or PM box.
- Midnight is considered AM and noon is considered PM. Use the 12-hour clock system to identify the time of the crash. Do NOT use the 24-hour clock system (a.k.a. military time).

## TIME OFFICER ARRIVED

TIME OFFICER ARRIVED <b>1:32</b> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM
--

Enter the time of day you arrived at the scene of the traffic crash.

- Place an X in the AM or PM box.
- Midnight is considered AM and noon is considered PM. Use the 12-hour clock system to identify the time of the crash. Do NOT use the 24-hour clock system (a.k.a. military time).

## INVESTIGATING AGENCY REPORT NUMBER

INVEST.AGENCY REPORT NUMBER <b>FHPH06OFF12345</b>
--

This space is used to identify the investigating law enforcement agency's report or file number.

- Enter the report or file number assigned by the agency.
- Enter the same investigating agency report or file number on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005.
- Enter the same investigating agency report or file number on the Florida Traffic Crash Report, Update/Continuation Report, HSMV 90004, if applicable.

## HSMV CRASH REPORT NUMBER

HSMV CRASH REPORT NUMBER <b>12345678</b>
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This space is used to identify the eight digit, pre-printed crash report number. A pre-printed crash report number appears on each Florida Traffic Crash Report, Long Form, HSMV 90003.

- Enter the same pre-printed crash report number on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005.
- Enter the same pre-printed crash report number on the Update/Continuation Report, HSMV 90004, if applicable.

**COUNTY/CITY CODE**

COUNTY/CITY CODE <b>13/55</b>
----------------------------------

This space is used to identify the county and city codes. Please refer to Appendix C for the correct county codes and Appendix D for the correct city codes.

- Enter the county and city code as required.
- Enter 00 for the city code if the traffic crash occurred outside the corporate limits of the city or in an unincorporated area.

**CITY OR TOWN**

FEET or	MILE(S)	N	S	E	W	CITY OR TOWN	(Check if in City or Town)
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	of <b>Tallahassee</b>	<input checked="" type="checkbox"/>

**Example A**

FEET or	MILE(S)	N	S	E	W	CITY OR TOWN	(Check if in City or Town)
	<b>10</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	of <b>Tallahassee</b>	<input type="checkbox"/>

**Example B**

FEET or	MILE(S)	N	S	E	W	CITY OR TOWN	(Check if in City or Town)
<b>45</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	of <b>Tallahassee</b>	<input type="checkbox"/>

**Example C**

This space is used to identify the city or town where the traffic crash occurred or the nearest city or town to the traffic crash scene.

- If the crash occurred within the corporate limits of a city (Example A).
- If mileage is used (Example B). If feet are used (Example C).
- Enter the complete name of the city or town where the traffic crash occurred if it happened within the legal boundaries of a city or town (Example A) and place an X in the box titled “Check if in City or Town”.
- If the traffic crash occurred outside the legal boundaries of a city or town, enter the approximate distance in feet or miles to the nearest city or town, the complete name of the nearest city or town, and place an X in the box that best describes the direction of travel from the nearest city or town (Examples B and C).

## COUNTY

COUNTY <b>Leon</b>
-----------------------

This space is used to identify the county where the traffic crash occurred.

- Enter the complete name of the county.

## NODE NUMBERS

AT NODE NO. or	FEET or	MILE(S)	FROM NODE NO.	NEXT NODE NO.
<b>01234</b>				<b>01235</b>

**Example A**

AT NODE NO. or	FEET or	MILE(S)	FROM NODE NO.	NEXT NODE NO.
		<b>5</b>	<b>87654</b>	<b>87653</b>

**Example B**

This space is used to identify relative node numbers (crash reference location numbers) in the vicinity of the traffic crash. Node numbers are used as a point of reference for counting the frequency of traffic crashes at the same location. The Florida Department of Transportation (state roads) and county and municipal traffic engineers (county and city roads) assign the numbers in support of an active traffic crash location system.

- Enter the node number(s) in the spaces provided. If a traffic crash occurred at a location (intersection, bridge, etc.) where a node number has been assigned, display the number in the “At Node Number” space and enter the next closest node number on the same road in the “Next Node No.” space (Example A).
- If a traffic crash occurred at a location where a node number has not been assigned, enter the node number closest to the crash location in the space titled “From Node No.”, and enter the distance in feet or miles from that node number to the crash location. Identify the next closest node number on the same roadway that is located on the opposite side of the crash scene, and enter it in the space titled “Next Node No.” (Example B).
- If node numbers are exact (Example A), then cross out the “Feet”, “Miles” and “From Node No.” boxes. If the node numbers are not exact use (Example B). In Example B, either the “Feet” or “Miles” box will have to be completed, but not both.

**NUMBER OF LANES**

NO. OF LANES <b>4</b>
--------------------------

This space is used to identify the number of clearly marked lanes on the roadway(s) of a street, road or highway.

- Enter the total number of lanes on the street, road or highway where the traffic crash occurred. Do not include turn lanes or safety zones. If impact occurred at an intersection between vehicles traveling on different streets, roads or highways, place the number of lanes of the street, road or highway with the highest class of trafficway in the space provided. The highest class of trafficway can be determined by referring to page 2 of the Florida Traffic Crash Report, HSMV 90003, under the category “Road System Identifier”. They are listed in descending rank order.

**DIVIDED/UNDIVIDED**

<b>1</b>	1. DIVIDED 2. UNDIVIDED
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This space is used to identify if a street, road or highway is classified as divided or undivided. Section 316.090 (1), Florida Statutes, identifies a divided street, road or highway as “any highway that has been divided into two or more roadways by an intervening space or by a physical barrier or clearly indicated dividing section so constructed as to impede vehicular traffic...”

Enter the number 1 or 2 in the space provided.

**ON STREET, ROAD OR HIGHWAY**

ON STREET, ROAD OR HIGHWAY <b>U.S. 90 (State Road 10 or Tennessee Street)</b>
--

This space is used to identify the name of the street, road or highway where the traffic crash occurred.

- Enter the name of the street, road or highway in the space provided. List the highest class of trafficway first. Refer to page 2 of the Florida Traffic Crash Report, HSMV 90003, under the category “Road System Identifier” to determine the class of trafficway. The list is in descending order. List the next highest classification, local names, or aliases in parentheses.
- If the traffic crash occurred in a parking lot, enter the address of the parking lot.
- If the traffic crash occurred on private property, enter “private property” and the address.

**AT THE INTERSECTION OF**

AT THE INTERSECTION OF (street, road or highway) <b>State Road 263 (Capital Circle)</b>
--

**Example A**

**FROM THE INTERSECTION OF**

FEET	MILE(S)	N	S	E	W	FROM INTERSECTION OF (street, road or highway)
	1.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US 27 (State Road 20 or Apalachee Pkwy)

**Example B**

This space is used to identify if the traffic crash occurred within the boundaries of an intersection or close to an intersection. An intersection crash is any traffic crash where the first harmful event occurs within the limits of the intersection. Section 316.003 (17), Florida Statutes, provides a general description of an intersection as “the lateral boundary lines of the roadways of two highways which join one another at, or approximately at, right angles. . .”

- If the traffic crash occurred within an intersection, enter the name of the street, road or highway that intersects with the previously identified street, road or highway (Example A).
- If the traffic crash occurred outside the boundaries of an intersection, enter the name of the nearest street, road or highway, the distance in feet or miles, and the direction from the nearest street, road or highway (Example B). List the highest class of trafficway as listed on page 2 of the Florida Traffic Crash Report, HSMV 90003, under the category “Road System Identifier”.

# Vehicle or Pedestrian Sections

## HSMV 90003

Sections 1, 2, and 3 are designed to identify vehicle, owner, driver and pedestrian information. The following instructions for entering data also apply to the vehicle or pedestrian sections on the Florida Traffic Crash Report, Update/Continuation, HSMV 90004, when it is used as a continuation report to identify more than three vehicles or pedestrians involved in the same traffic crash. The violating vehicle or pedestrian is entered in Section 1.

### THE MARGIN

Pedestrian <input type="checkbox"/>	Vehicle <input checked="" type="checkbox"/>
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This space is used to identify vehicle or pedestrian involvement.

- Place an X in the vehicle or pedestrian box. Only one box per section can be marked.

### DRIVER ACTION

DRIVER ACTION	1. Phantom 2. Hit & Run 3. N/A	<input type="text" value="3"/>
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This space is used to identify a phantom or hit-and-run driver. A phantom driver is a driver of a non-contact vehicle who leaves the scene of the traffic crash. A hit-and-run driver is a driver whose vehicle collides with another vehicle or pedestrian or causes damage to other property and leaves the scene of a traffic crash.

- Enter the number 1 in the space provided if the driver is a phantom driver.
- Enter the number 2 in the space provided if the driver is a hit-and-run driver.
- Enter the number 3 in the space provided if 1 or 2 does not apply.

## VEHICLE YEAR

YEAR <b>02</b>
-------------------

This space is used to display the last two digits of the vehicle year (manufacturer's model year) of any vehicle involved in a traffic crash.

- Enter the vehicle year in the space provided.
- Enter UK in the space provided if the vehicle year is unknown.
- If not applicable, leave blank.

## VEHICLE MAKE

MAKE <b>Chev</b>
---------------------

This space is used to identify the vehicle manufacturer's trade name (Chevrolet, BMW, Ford, etc.) of any vehicle involved in a traffic crash.

- Enter the first four letters or the complete name of the vehicle make. Do not use a model name (Impala, F-150, Stratus). For vehicles with only three letters (BMW, Kia, GMC, etc.) enter the complete name.
- Enter UK in the space provided if the vehicle make is unknown.
- If not applicable, leave blank.

## VEHICLE TYPE

TYPE <b>06</b>
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This space is used to identify the type of vehicle involved in a traffic crash. The vehicle type codes are located at the bottom of page one of the Florida Traffic Crash Report, Long Form, HSMV 90003, in the "Code Information" section.

- Enter the vehicle type code in the space provided.
- Enter UK in the space provided if the vehicle type is unknown.
- If not applicable, leave blank.

Vans that are designed to carry passengers (private or for a fee) must be identified by the vehicle type code 02 and the proper corresponding vehicle use code; namely, 01, private transportation or

02, commercial passengers. Vans that are operated for general commercial use (courier service) or for transporting cargo (work van carrying tools to the work site) must be identified by the vehicle type code 02 and the proper corresponding vehicle use code; namely, 02, commercial cargo or 15, cargo van. A vehicle that resembles a van in construction but has six tires on the ground (UPS or similar delivery van) must be coded as a truck based on the gross vehicle weight (GVW) rating of the vehicle in question.

Trucks are classified by the gross vehicle weight (GVW) rating of the unit involved in the traffic crash. There are three categories of trucks based on GVW rating: light trucks, vehicle type code 03 (single unit under 10,000 pounds), medium trucks, vehicle type code 04 (single unit 10,000 to 26,000 pounds), and heavy trucks, vehicle type code 05 (single unit over 26,000 pounds). Truck tractors (cab, bobtail) have a separate vehicle code, type 06, that must be used for identification purposes. The GVW rating appears on a label or tag affixed to single-unit trucks and truck tractors manufactured for use in the United States. The label is placed on the door or door frame next to the driver's seat.

Buses have been divided into two separate vehicle types, codes 08 and 09, based on the total number of passengers the bus was designed to legally transport. A low speed vehicle (code 15) is any 4-wheel electric vehicle that has a top speed greater than 20 miles per hour but not greater than 25 miles per hour. A low speed vehicle can be operated on streets under certain conditions, must be licensed for use on the highway, and its operator must have a valid driver's license. A golf cart is not considered a low speed vehicle. All vehicle types must have a corresponding vehicle use code.

## **VEHICLE USE**

USE <b>03</b>
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This space is used to identify additional vehicle characteristics. The vehicle use codes are located on page one of the Florida Traffic Crash Report, HSMV 90003, in the "Code Information" section.

- Enter the vehicle use code in the space provided.
- Enter UK in the space provided if the vehicle use is unknown.
- If not applicable, leave blank.

It is important that the vehicle type and vehicle use agree in terms of what the vehicle is designed to do or how it is being used. If an automobile, vehicle type 01, is being used as a taxi, then the correct vehicle use is 02 (commercial passengers). If a bus, vehicle type 09, is being used to transport students to school, then the correct vehicle use is 05 (public school bus) or 06 (private school bus). If the same type of bus is owned by or leased to a government entity for the purpose of providing transportation to citizens, even for free, then the correct vehicle use is 04 (public transportation). If the same type of bus is owned by a company for the purpose of transporting passengers for profit (Greyhound, etc.), then the correct vehicle use is 02 (commercial passengers). If a heavy truck, vehicle type 05, is designed to transport and deliver cement to a work site, then the correct vehicle use is 13 (concrete mixer).

### **VEHICLE LICENSE NUMBER**

VEH. LICENSE NUMBER <b>PEB21X</b>
--------------------------------------

This space is used to identify the vehicle license plate number of the vehicle supplying power.

- Enter the vehicle license plate number of the vehicle involved in the space provided. Enter it exactly as it appears on the license plate.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

### **STATE**

STATE <b>FL</b>
--------------------

This space is used to identify the state that issued the vehicle license plate.

- Enter the state of issuance. Please refer to Appendix E for the correct state codes.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

## VEHICLE IDENTIFICATION NUMBER

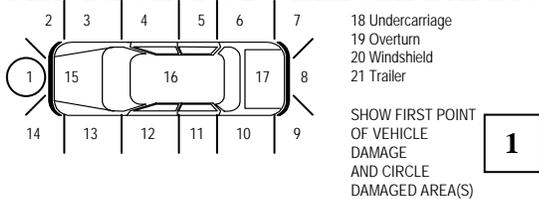
VEHICLE IDENTIFICATION NUMBER <b>1FALP20X159832594</b>
---

This space is used to identify the vehicle identification number (VIN) of the vehicle supplying power.

- Enter the complete VIN in the space provided.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

The VIN is a set of numbers generated by the vehicle manufacturer that describes the characteristics of a vehicle in a coded format. The VIN is recorded on a metal plate located at the bottom of the windshield on the driver's side of the vehicle. The VIN also appears inside the driver's door on a label affixed to the doorjamb.

## FIRST POINT OF VEHICLE DAMAGE



This space is used to identify the first point of vehicle damage and other damaged areas sustained by a vehicle in a traffic crash. The first point of vehicle damage is that part of the vehicle that first collides with another vehicle or object.

- Enter the first point of vehicle damage in the space provided by selecting the corresponding number from the diagram provided. On the diagram, circle all areas of damage including the first point of damage.
- For pedestrians, leave blank.

## **TRAILER OR TOWED VEHICLE GENERAL INFORMATION**

This record is used to identify all trailers or towed vehicles involved in traffic crashes. This information must be completed for traffic crashes involving trailers that are being towed, trailers that are unhitched (properly or improperly parked), and all other driverless towed vehicles.

Any vehicle which is being towed and guided by a driver positioned behind the steering wheel must appear in a separate vehicle or pedestrian section.

For pedestrians, leave blank.

## **TRAILER OR TOWED VEHICLE YEAR**

YEAR <b>98</b>
-------------------

This space is used to identify the model year of the trailer or towed vehicle.

- Enter the year of the trailer or towed vehicle in the space provided.
- Enter UK in the space provided if the vehicle year is unknown.
- If not applicable, leave blank.

## **TRAILER OR TOWED VEHICLE MAKE**

MAKE <b>Mack</b>
---------------------

This space is used to identify the vehicle manufacturer's trade name of a trailer or towed vehicle.

- Enter the first four letters or the complete name of the vehicle make. Do not use a model name (Impala, F-150, Stratus). For vehicles with only three letters (BMW, Kia, GMC, etc.) enter the complete name.
- Enter UK in the space provided if the vehicle make is unknown.
- If not applicable, leave blank.

**TRAILER OR TOWED VEHICLE TYPE**

TRAILER TYPE <b>01</b>
---------------------------

This space is used to identify the type of trailer or towed vehicle involved in the traffic crash. The trailer type codes are located on page one of the Florida Traffic Crash Report, HSMV 90003, in the “Code Information” section. (See Appendix B for photos of trailer types.)

- Enter the trailer type code (09 for towed vehicle) in the space provided.
- Enter UK in the space provided if the vehicle make is unknown.
- If not applicable, leave blank.

If tandem trailers (trailer type 02) are involved in a traffic crash, then the second set of trailer information must appear on the Florida Traffic Crash Report, Update/Continuation, HSMV 90004. Utility trailers (trailer type 06) also include enclosed rental trailers, horse trailers, and trailers used by lawn services. Towed vehicle (trailer type 09) applies to other driverless vehicles being towed by a wrecker or another vehicle.

**VEHICLE LICENSE NUMBER – TRAILER OR TOWED VEHICLE**

VEH. LICENSE NUMBER <b>P95XYJ</b>
--------------------------------------

This space is used to identify the vehicle license plate number of the trailer or towed vehicle.

- Enter the vehicle license plate number of the vehicle involved in the space provided.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

**STATE – TRAILER OR TOWED VEHICLE**

STATE <b>FL</b>
--------------------

This space is used to identify the state that issued the vehicle license plate to the trailer or towed vehicle.

- Enter the state of issuance. Please refer to Appendix E for the correct state codes.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

**VEHICLE IDENTIFICATION NUMBER – TRAILER OR TOWED VEHICLE**

VEHICLE IDENTIFICATION NUMBER <b>3XYG74529YY908213</b>
---

This space is used to identify the vehicle identification number (VIN) assigned to the trailer or towed vehicle.

- Enter the complete VIN in the space provided.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

The VIN is a set of numbers generated by the vehicle manufacturer that describes the characteristics of a vehicle in a coded format. The VIN is recorded on a metal plate located at the bottom of the windshield on the driver’s side of the vehicle. The VIN also appears inside the driver’s door on a label affixed to the doorjamb.

**VEHICLE TRAVELING**

VEHICLE TRAVELING	ON	AT	Est. MPH
N   S   E   W			
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<b>US 90 (State Road 10/Tennessee Street)</b>		<b>55</b>

This space is used to identify the direction and name of the street, road or highway the vehicle or pedestrian was traveling on when the traffic crash occurred. This space is also used to identify the estimated speed of the vehicle.

- Enter the name of the street, road or highway each vehicle or pedestrian was traveling on in the space provided. If the impact occurred in a parking lot or on private property, enter the address of the location.
- Enter the direction of travel on the street, road or highway prior to the impact by placing an X in the correct box.
- Enter the estimated speed of the vehicle involved in the traffic crash.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

## POSTED SPEED

Posted Speed <b>55</b>
---------------------------

This space is used to identify the posted speed for the street, road or highway the vehicle or pedestrian was traveling on at the time the traffic crash occurred.

- Enter the posted speed, or if none, the statutory required speed in the space provided.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

## ESTIMATED VEHICLE DAMAGE

EST. VEHICLE DAMAGE \$ <b>4,500</b>
--

This space is used to identify the estimated property damage sustained by a vehicle involved in a traffic crash. All estimates of damage must be displayed **numerically** and rounded off to the nearest dollar amount.

- Enter the estimated amount of damage in the space provided if the vehicle involved was damaged.
- Enter the estimated amount of damage in the space provided if the vehicle was totaled. Do not enter the word “totaled.”
- Enter “0” in the space provided if the vehicle was not damaged.
- If not applicable, leave blank.

If a vehicle owner or driver is found to be uninsured at the time of the crash, and if the driver was issued a moving traffic citation, the Bureau of Financial Responsibility may require the owner or driver to post security equal to the estimated amount of vehicle damage.

## DAMAGED SEVERITY

1. Disabling	<b>1</b>
2. Functional	
3. No Damage	

This space is used to identify to what extent a vehicle is damaged. There are three categories for assessing damage severity to a vehicle:

- Disabling damage – vehicle must be towed from the scene of the traffic crash because it is inoperable or is drivable but must be towed from the scene of the traffic crash to prevent additional damage. This does not include a drivable vehicle that is towed from the scene of the traffic crash for any other reason.
- Functional damage – vehicle is operable and is driven away from the scene of the traffic crash in its usual operating manner.
- No damage – no visible signs of damage.
  - Enter the appropriate damage severity code in the space provided.
  - If not applicable, leave blank.

A traffic crash involving only disabling damage may be reported on the Florida Traffic Crash Report, Long Form, HSMV 90003, or the Law Enforcement Short Form, HSMV 90006, as required by F.S. 316.066 (3)(a)(3).

## ESTIMATED TRAILER OR TOWED VEHICLE DAMAGE

EST. TRAILER DAMAGE \$ <b>1,000</b>
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This space is used to identify the estimated property damage sustained by a trailer or towed vehicle involved in a traffic crash. All estimates of damage must be displayed **numerically** and rounded off to the nearest dollar amount.

- Enter the estimated amount of damage in the space provided if the trailer or towed vehicle involved was damaged.
- Enter the estimated amount of damage in the space provided if the trailer or towed vehicle was totaled. Do not enter the word “totaled.”
- Enter a “0” in the space provided if the trailer or towed vehicle was not damaged.
- If not applicable, leave blank.

**MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)**

MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP) <b>State Farm Insurance Company</b>	POLICY NUMBER <b>SJ109-6578</b>
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This space is used to identify the motor vehicle insurance company and policy number of the vehicle owner or driver. The best source for obtaining this information is a valid motor vehicle insurance identification card, a valid insurance policy, a valid insurance binder, or a certificate of self insurance issued by the Department of Highway Safety and Motor Vehicles.

- Enter the name of the motor vehicle insurance company in the space provided.
- Enter the valid policy number, self insurance certificate number or the word “binder” in the space provided.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

**VEHICLE REMOVED BY**

VEHICLE REMOVED BY: <b>B&amp;D Towing</b>	1. Tow Rotation List 2. Tow Owner's Request	3. Driver 4. Other	<input checked="" type="checkbox"/>
--	--	-----------------------	-------------------------------------

This space is used to identify the name of the person, garage, or wrecker service that removed the vehicle from the scene of the traffic crash and how the vehicle was removed.

- Enter the name of the person, garage, or wrecker service in the space provided.
- Enter 1, 2, 3, or 4 in the box provided to indicate how the vehicle was removed from the scene of the traffic crash.
- Enter UK in the space provided if unknown.
- For pedestrians, leave blank.

**NAME OF VEHICLE OWNER**

NAME OF VEHICLE OWNER (Check Box if Same As Driver) <input type="checkbox"/> <b>Jacob B. Sampson</b>
---

This space is used to identify the owner of the vehicle involved in the traffic crash.

- Enter the first name, middle initial, and last name of the person who owns the vehicle.
- Enter only one name if joint ownership is established.
- Enter the words “Same as Driver” if the owner and driver are the same and place and X in the box provided.

- Enter the full legal name of any company or corporation that owns the vehicle.
- Enter UK in the space provided if unknown.
- For pedestrians, leave blank.

**VEHICLE OWNER CURRENT ADDRESS**

CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE
<b>9627 Main Street</b>	<b>Stuart, FL</b>	<b>32948</b>

This space is used to identify the current physical address or mailing address of the owner of the vehicle involved in the traffic crash.

- Enter the street address or mailing address, city, state abbreviation, and zip code of the person who owns the vehicle.
- If a company or corporation owns the vehicle, enter the address or mailing address, city, state abbreviation, and zip code of the company or corporation.
- Do not abbreviate the name of the city.
- Use the standard, two-letter postal abbreviation for all states.
- Enter UK in the space provided if unknown.
- For pedestrians, leave blank.

**NAME OF OWNER (Trailer or Towed Vehicle)**

NAME OF OWNER (Trailer or Towed Vehicle)
<b>J&amp;J Auto Leasing, Inc.</b>

This space is used to identify the owner of the trailer or towed vehicle.

- Enter the first name, middle initial, and last name of the person who owns the trailer or towed vehicle.
- Enter only one name if joint ownership is established.
- Enter the full legal name of any company or corporation that owns the vehicle.
- Enter UK in the space provided if unknown.
- For pedestrians, leave blank.

## TRAILER OR TOWED VEHICLE OWNER CURRENT ADDRESS

CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE
<b>8365 S. Hampton Road</b>	<b>Stuart, FL</b>	<b>32948</b>

This space is used to identify the current physical address or mailing address of the owner of the trailer or towed vehicle involved in the traffic crash.

- Enter the street address or mailing address, city, state abbreviation, and zip code of the person who owns the trailer or towed vehicle.
- If a company or corporation owns the trailer or towed vehicle, enter the address or mailing address, city, state abbreviation, and zip code of the company or corporation.
- Do not abbreviate the name of the city.
- Use the standard, two-letter postal abbreviation for all states.
- Enter UK in the space provided if unknown.
- For pedestrians, leave blank.

## NAME OF MOTOR CARRIER (Commercial Vehicle Only)

NAME OF MOTOR CARRIER (Commercial Vehicle Only)
<b>International Trucking</b>

This space is used to identify the name of the motor carrier. A motor carrier is “the business entity, individual, partnership, corporation, or religious organization responsible for the transportation of goods, property or people.”

- Enter the name of the motor carrier in the space provided. If the motor carrier is a person, enter the first name, middle initial, and last name. If the motor carrier is a company or corporation, enter the full legal name of the company or corporation.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

This space must be completed for any self-propelled vehicle – with or without a trailer – being used in commerce to transport cargo, passengers, or any vehicle displaying a hazardous material placard including a van (vehicle type code 02), a light truck with six tires on the ground (vehicle type code 03), a medium truck (vehicle type code 04), a heavy truck (vehicle type code 05), a truck-tractor (vehicle type code 06), a bus designed to transport 9 to 15 passengers (vehicle type code 08), and a bus designed to transport over 15 passengers (vehicle type code 09).

The shipping papers that drivers carry in the cab of the truck are the best source for identifying the name of the motor carrier. The name on the side of the truck can be different from the person or company responsible for the movement of the cargo or passengers. It is not unusual for a tractor and semi-trailer to display different company names.

**Example:** John Smith owns a truck-tractor (bobtail). He contracts with White Manufacturing Company to take one of its trailers loaded with its goods from New York to Los Angeles. John Smith is the motor carrier because his is the entity that has agreed to carry this particular load.

**Example:** John Smith, driving his truck-tractor, utilizes a cargo broker to obtain goods from Intermodal Incorporated Shipping Company for his return trip to New York. On the return trip, John Smith is again the carrier.

**Example:** John Smith, driving his truck-tractor, leases his services to Polyester Chemical Company. Polyester Chemical Company has a contract to transport chemicals for a company based in St. Louis and directs John Smith to deliver a semi-trailer from New York to St. Louis. In this case, Polyester Chemical Company is the motor carrier because it told John Smith to deliver the particular load.

**Example:** John Smith is driving a tractor/semi-trailer. The tractor and semi-trailer are owned by ABC Trucking, so ABC Trucking is the motor carrier.

**Example:** John Smith is driving a tractor owned by ABC Trucking which has been leased to XYZ Trucking Company. XYZ uses the tractor to pull XYZ trailers in its regular shipping service. In this case, XYZ is the motor carrier because XYZ is directing the carrying of the load.

### **MOTOR CARRIER CURRENT ADDRESS**

CURRENT ADDRESS (Number and Street)	CITY, STATE AND ZIP CODE
<b>325 151<sup>st</sup> Street North</b>	<b>Miami, FL 32948</b>

This space is used to identify the current physical address or mailing address of the owner of the motor carrier involved in the traffic crash.

- Enter the street address or mailing address, city, state abbreviation, and zip code of the motor carrier.
- Do not abbreviate the name of the city.
- Use the standard, two-letter postal abbreviation for all states.

- Enter UK in the space provided if unknown.
- If not applicable, leave blank

## US DOT OR ICC MCC IDENTIFICATION NUMBERS

US DOT or ICC MCC IDENTIFICATION NUMBERS							
0	5	9	3	1	6	4	7

This space is used to identify the United States Department of Transportation (US DOT) or the Interstate Commerce Commission Motor Carrier (ICC MC) identification number assigned to the motor carrier.

- Enter the US DOT identification number, if applicable, in the space provided. The US DOT number will have six or seven digits that are entered right-justified. Use zeros to fill any remaining boxes at the left of the series.
- Enter the ICC MC identification number, if applicable, in the space provided. The ICC MC number may have up to six digits that are entered right-justified. Use zeros to fill in any remaining boxes to the left of the series. In some cases, a motor carrier could have two or more ICC MC numbers. Officers should choose only one to record.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

A US DOT or an ICC MC identification number is issued to private fleet and for-hire vehicles involved in interstate commerce. The US DOT identification number is found only on vehicles of interstate private carriers (those trucks operating in the furtherance of any commercial enterprise). The identification number is always preceded by the abbreviation US DOT. The ICC MC identification number is found only on vehicles of interstate for-hire carriers (those in the transportation business). The identification number is usually preceded by the abbreviation ICC MC. In some cases it may be preceded by just ICC or MC. Vehicles that haul exempt commodities are not required to have a US DOT or an ICC MC number even if they travel across state lines. A motor carrier may have more than one ICC MC number. Officers should choose to record only one. State numbers are issued by a state agency to vehicles that operate either in interstate commerce or only within that state. Do not record the state number.

## NAME OF DRIVER OR PEDESTRIAN

NAME OF DRIVER (Take From Driver License)/PEDESTRIAN

**Sarah Ruth Martin**

This space is used to identify the name of the driver of the vehicle or the name of the pedestrian involved in the traffic crash. A driver is “any person who drives or is in actual physical control of a vehicle on a highway or who is exercising control of a vehicle or steering a vehicle being towed by a motor vehicle” (Florida Statute 316.003 (10)).

- Enter the first name, middle initial, and last name of the driver or pedestrian in the space provided. This format is used to display the name of a licensed driver on the Florida Driver License. It must be used even if an out of state driver license is different or if a driver does not have a driver license. If a driver has changed his or her name since the last issue date of the driver license, enter the driver’s first name, middle initial, last name, and the name change in parentheses.
- Enter the first name, middle initial, and last name of the driver if the vehicle involved in the traffic crash was illegally parked. Do not enter the name of the driver if the vehicle was legally parked and the driver’s seat was unoccupied when the collision occurred.
- Enter UK in the space provided if the name of the driver or pedestrian is unknown.

## DRIVER OR PEDESTRIAN CURRENT ADDRESS

CURRENT ADDRESS (Number and Street)

CITY, STATE AND ZIP CODE

**38625 Yulee Avenue**

**Tallahassee, FL 32399**

This space is used to identify the current physical address or mailing address of the driver of the vehicle or the pedestrian involved in the traffic crash.

- Enter the street address or mailing address, city, state abbreviation, and zip code of the driver or pedestrian in the space provided.
- Do not abbreviate the name of the city.
- Use the standard, two-letter postal abbreviation for all states.
- Enter UK in the space provided if unknown.

## **DRIVER OR PEDESTRIAN DATE OF BIRTH**

DATE OF BIRTH <b>08-16-62</b>
----------------------------------

This space is used to identify the date of birth of the driver of a vehicle or the pedestrian involved in a traffic crash.

- Enter the date of birth of the driver or pedestrian in month, day and year sequence using two digits for each.
- Enter UK in the space provided if unknown.

## **DRIVER LICENSE NUMBER**

DRIVER LICENSE NUMBER <b>M655-192-62-954-0</b>
---

This space is used to identify the driver license number of the vehicle driver.

- Enter the driver license number exactly as it appears on the driver license in the space provided.
- Enter “none” in the space provided if the vehicle driver does not have a driver license.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

The driver license number is used to identify and update the driver history record. It is very important to enter the correct driver license number on the traffic crash report and ensure that this number matches the driver license number on any traffic citations issued as a result of the traffic crash.

## **DRIVER LICENSE STATE**

STATE <b>FL</b>
--------------------

This space is used to identify the state that issued the driver license.

- Enter the state that issued the driver license in the space provided. Please refer to Appendix E for the correct state codes.
- Enter UK in the space provided if unknown.
- If not applicable, leave blank.

## DRIVER LICENSE TYPE

DL TYPE <b>1</b>
------------------------

This space is used to identify the type (class) of driver license issued to the vehicle driver. The driver license type codes are located on page one of the Florida Traffic Crash Report, HSMV 90003, in the “Code Information” section.

- Enter the driver license type in the space provided.
- Enter code 7 in the space provided if the driver license type is unknown, not required, or if a pedestrian is involved in the traffic crash.

The driver license type (class) codes verify that the driver in question has been tested and licensed to operate certain types of vehicles. Class A, B, and C driver licenses are required in order to drive commercial vehicles. A Class D driver license is required for a chauffeur license, and a Class E for an operator or restricted operator.

## DRIVER LICENSE REQUIRED ENDORSEMENTS

REQ. END. <b>1</b>
--------------------------

This space is used to identify if the driver license issued to the vehicle driver required any other special endorsements for the type of vehicle being operated. The required endorsement codes are located on page one of the Florida Traffic Crash Report, HSMV 90003, in the “Code Information” section.

- Enter a 1 in the space provided if the driver license presented is correctly endorsed. For example, the driver is operating a motorcycle and is authorized to operate a motorcycle.
- Enter a 2 in the space provided if the driver license presented is not correctly endorsed. For example, the driver is operating a motorcycle without a motorcycle endorsement.
- Enter a 3 in the space provided if an endorsement is not required. For example, the driver is operating an automobile for private transportation.
- For pedestrians, leave blank.

### ALCOHOL/DRUG TEST TYPE

ALC/DRUG TEST TYPE 1 Blood 3 Urine 5 None 2 Breath 4 Refused	<b>5</b>
--	----------

This space is used to identify the type of test a law enforcement officer required to determine if a vehicle driver or pedestrian involved in a traffic crash is under the influence of alcohol or a controlled substance.

- Enter the alcohol/drug test code in the space provided for all drivers and pedestrians.

### ALCOHOL/DRUG TEST TYPE RESULTS

RESULTS
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

This space is used to identify the results of any test a law enforcement officer required to determine if a vehicle driver or pedestrian involved in a traffic crash is under the influence of alcohol or a controlled substance.

- Enter the alcohol/drug test results in the space provided for all drivers and pedestrians.
- Enter UK in the space provided if the alcohol/drug test results are not known or if they cannot be revealed on the Florida Traffic Crash Report, HSMV 90003, for legal reasons. Use the Florida Traffic Crash Update/Continuation, HSMV 90004, to report the results when they are known or it is permissible to reveal them.
- If not applicable, leave blank.
- Enter “PEN” in the space provided if the alcohol/drug test results are pending. Use the Florida Traffic Crash Update/Continuation Report, HSMV 90004, to report the results when they are known. **Results must be listed in this space**, not explained on the narrative form.

### ALCOHOL/DRUG USE

ALC/DRUG <b>1</b>
----------------------

This space is used to identify if a vehicle driver or pedestrian had consumed alcohol or a controlled substance prior to being involved in a traffic crash. The alcohol/drug use codes are located on page one of the Florida Traffic Crash Report, HSMV 90003, in the “Code Information” section.

- Enter the appropriate alcohol/drug use code in the space provided.
- Enter a 6 in the space provided if the alcohol/drug test type results are pending. Use the Florida Traffic Crash Report, Update/Continuation, HSMV 90004, to update the alcohol/drug use when the results are obtained.

### **PHYSICAL DEFECTS**

PHYS.DEF. <b>1</b>
-----------------------

This space is used to identify any physical defects attributed to a vehicle driver or pedestrian involved in a traffic crash. The physical defects codes are located at the bottom of page one on the Florida Traffic Crash Report, Long Form, HSMV 90003, in the “Code Information” section.

- Enter the appropriate physical defect code in the space provided.

### **RESIDENCE**

RES. <b>1</b>
------------------

This space is used to identify demographic information about the vehicle driver or pedestrian. The residence codes are located at the bottom of page one on the Florida Traffic Crash Report, Long Form, HSMV 90003, in the “Code Information” section.

- Enter the appropriate residence code in the space provided.

### **RACE**

RACE <b>1</b>
------------------

This space is used to identify the race of a vehicle driver or pedestrian involved in a traffic crash. The codes are located at the bottom of page one on the Florida Traffic Crash Report, Long Form, HSMV 90003, in the “Code Information” section.

- Enter the appropriate code in the space provided.

**SEX**

SEX <b>2</b>
-----------------

This space is used to identify the gender of a vehicle driver or pedestrian involved in a traffic crash. The codes are located at the bottom of page one on the Florida Traffic Crash Report, Long Form, HSMV 90003, in the “Code Information” section.

- Enter the appropriate code in the space provided.

**INJURY SEVERITY**

INJ. <b>3</b>
------------------

This space is used to identify the severity of injuries sustained by a vehicle driver or pedestrian involved in a traffic crash. The injury codes are located on page one of the Florida Traffic Crash Report, HSMV 90003, in the “Code Information” section.

- Enter the appropriate injury code in the space provided.
- Non-incapacitating injuries are non-disabling injuries, such as lacerations, scrapes, bruises, etc. Incapacitating injuries are disabling injuries, such as broken bones, severed limbs, etc. Incapacitating injuries usually require hospitalization and transport to medical facility.
- Fatal injuries are those resulting in a death within 30 days of a traffic accident.

**SAFETY EQUIPMENT**

S. EQUIP.	
<b>2</b>	<b>4</b>

This space is used to identify the type(s) of safety equipment the driver of a vehicle was using at the time of the traffic crash. The safety equipment codes are located on page one of the Florida Traffic Crash Report, HSMV 90003, in the “Code Information” section.

- Enter the appropriate safety equipment code(s) in the space provided. Sometimes more than one type of safety equipment device was in use. For example, seatbelt/shoulder harness (code 2) and air bag – deployed (code 4). An officer should record both types of safety equipment.
- For pedestrians, leave blank.

**EJECTED**

EJECT. <b>1</b>
--------------------

This space is used to identify if the driver of a vehicle involved in a traffic crash was ejected. The ejection codes are located on page one of the Florida Traffic Crash Report, HSMV 90003, in the “Code Information” section.

- Enter the appropriate ejected code in the space provided.
- For pedestrians, leave blank.

**HAZARDOUS MATERIALS BEING TRANSPORTED**

HAZARDOUS MATERIALS BEING TRANSPORTED  1 Yes    2 No	<table border="1"> <tr> <td><b>1</b></td> </tr> </table>	<b>1</b>
<b>1</b>		

This space is used to identify if any vehicle involved in the traffic crash was carrying a hazardous material as cargo.

- Enter 1 in the space provided if a hazardous material was being carried. This does not include the fuel needed to propel the vehicle supplying power.
- Enter 2 in the space provided if a hazardous material was not being carried.
- For pedestrians, leave blank.

**PLACARDED**

PLACARDED  1 Yes    2 No	<table border="1"> <tr> <td><b>2</b></td> </tr> </table>	<b>2</b>
<b>2</b>		

This space is used to identify if the vehicle carrying a hazardous material as cargo displayed a hazardous material placard as required by federal law.

- Enter 1 in the space provided if a hazardous material placard was displayed.
- Enter 2 in the space provided if a hazardous material placard was not being displayed.
- For pedestrians, leave blank.

There are two shapes of placards – diamond or rectangular. Vehicles carrying hazardous materials are required by law to display a placard that identifies the specific name of the hazardous material

cargo. In addition, vehicles carrying hazardous materials in tank cars, cargo tanks, or portable tanks are required to display the 4-digit hazardous materials number assigned to the specific material on placards or orange panels.

### TYPE OF HAZARDOUS MATERIAL

IF YES, INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND	<input type="text"/>
---	----------------------

This space is used to identify the type of hazardous material being carried, if any.

- Enter the 4-digit number or the name of the hazardous material in the space provided. This information is extracted from the middle of the diamond shaped placard or from the rectangular shaped placard. If the 4-digit number is not displayed, the placard should have one of the following names: explosives, gases, flammable liquid, flammable solid, dangerous, oxidizer, poison, radioactive, or corrosive. Enter the 1-digit number located at the bottom of the diamond, if it is displayed, in the space provided. When multiple placards are displayed on the vehicle, enter the information from only one of the placards.
- If not applicable or for pedestrians, leave blank.

### HAZARDOUS MATERIAL SPILLED

WAS HAZARDOUS MATERIAL SPILLED?	<input type="text" value="2"/>
1 Yes    2 No	

This space is used to identify if the hazardous material (placarded cargo) was released from the cargo tank or compartment of the vehicle as a result of the traffic crash.

- Enter 1 in the space provided if hazardous material was released. (This includes large amounts of fuel spilled from a vehicle.)
- Enter 2 in the space provided if the hazardous material was not released.
- For pedestrians, leave blank.

**RECOMMEND DRIVER RE-EXAM**

RECOMMEND DRIVER RE-EXAM, IF YES EXPLAIN IN NARRATIVE	<b>2</b>
1 Yes    2 No	

This space is used to identify if the driving ability of a vehicle driver is questionable.

- Enter 1 in the space provided if the ability of the driver to operate a vehicle is questionable.
- Enter 2 in the space provided if the ability of the driver to operate a vehicle is not questionable.
- For pedestrians, leave blank.

Section 322.126 (2), (3), Florida Statutes, provides that “any physician, person, or agency having knowledge of any licensed driver’s or applicant’s mental or physical disability to drive is authorized to report such knowledge to the Department.” The decision to require the driver to submit to another driver license exam is made by the law enforcement investigator. In making this assessment, the investigator should take into account obvious driver physical defects, coordination, reflexes, and perception. If a driver’s ability is questionable, you must explain your reasons in the narrative section of the Florida Traffic Crash Narrative/Diagram Report, HSMV 90005. The explanation must be a separate notation following your crash narrative.

**DRIVER’S TELEPHONE NUMBER**

DRIVER’S PHONE NO.  (    ) UK
-------------------------------------

This space is used to identify the telephone number of the driver.

- Enter the driver’s or pedestrian’s telephone number.
- Enter UK in the space provided if unknown.
- Enter NONE in the space provided if the driver or pedestrian has no telephone number.

# Property Damage – Other Than Vehicle Section

## HSMV 90003

### PROPERTY DAMAGED OTHER THAN VEHICLES

#	PROPERTY DAMAGED – OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME ADDRESSCITY STATE ZIP
<b>1</b>	<b>Chain link fence</b>	<b>\$ 600</b>	<b>John's Drywall 13 2<sup>nd</sup> Ave Tallahassee, FL 32310</b>
<b>2</b>	<b>Oak Tree</b>	<b>\$ 300</b>	<b>City of Tallahassee 305 Park Ave Tallahassee, FL 32399</b>

This space is used to identify damage to other kinds of property. Do not record damage to a vehicle, trailer, or driverless towed vehicle in this section.

- Enter the type of property damaged, such as a fence, telephone pole, mailbox, street marker, animal, tree, or damage to cargo that was being carried by another vehicle.
- Enter the estimated damage amount rounded to the nearest dollar.
- Enter the owner's name, street or mailing address, city, state, and zip code.
- Use the standard, two-letter postal service abbreviation for all states. Please refer to Appendix E for the correct state codes.
- Use the Florida Traffic Crash Report, Update/Continuation, HSMV 90004, to record more than two instances of damage to property other than vehicles.
- If not applicable, leave blank.

## Events Section

### HSMV 90003

This section is designed to identify vehicle, driver, pedestrian, and crash scene characteristics. It is important to remember that code entries must correspond to the vehicle or pedestrian section they are intended to represent. Vehicle or pedestrian sections are identified by the number at the top of each box or series of boxes. Some vehicle or pedestrian data fields may have spaces for multiple codes. Enter the primary code in the first space and, if applicable, any subsequent codes in the remaining spaces.

#### CONTRIBUTING CAUSES DRIVER/PEDESTRIAN

CONTRIBUTING CAUSES – DRIVER/PEDESTRIAN			
	1	2	3
01 No Improper Driving/Action			
02 Careless Driving (Explain in Narrative)	<b>77</b>	<b>01</b>	<input type="text"/>
03 Failed to Yield Right-of-Way	<input type="text"/>	<input type="text"/>	<input type="text"/>
04 Improper Backing	<input type="text"/>	<input type="text"/>	<input type="text"/>
05 Improper Lane Change	<input type="text"/>	<input type="text"/>	<input type="text"/>
06 Improper Turn	<input type="text"/>	<input type="text"/>	<input type="text"/>
07 Alcohol – Under Influence	<input type="text"/>	<input type="text"/>	<input type="text"/>
08 Drugs – Under Influence	<input type="text"/>	<input type="text"/>	<input type="text"/>
09 Alcohol & Drugs – Under Influence	<input type="text"/>	<input type="text"/>	<input type="text"/>
10 Followed Too Closely			
11 Disregarded Traffic Signal			
12 Exceeded Safe Speed Limit			
13 Disregarded Stop Sign			
14 Failed To Maintain Equip./Vehicle			
15 Improper Passing			
16 Drove Left of Center			
17 Exceeded Stated Speed Limit			
18 Obstructing Traffic			
		19 Improper Load	
		20 Disregarded Other Traffic Control	
		21 Driving Wrong Side/Way	
		22 Fleeing Police	
		23 Vehicle Modified	
		24 Driver Distraction	
		77 All Other (Explain in Narrative)	

This classification is used to identify improper driver or pedestrian action(s) that may have contributed to the traffic crash. The codes are listed vertically for each driver or pedestrian.

- Enter the primary contributing cause code in the first box for each driver or pedestrian. This must be completed for each driver or pedestrian. For example, if section 1 driver’s vehicle rear-ended section 2 driver’s vehicle, the officer might conclude that the main contributing cause of the crash was section 1 driver’s failure to use due care. The officer would record the primary contributing cause in the first box for section 1 driver as code 77 (see example) because no code is designated for failure to use due care. The officer would then make a notation in the narrative explaining code 77 as “failure to use due care”. In this example,

section 2 driver was not driving improperly; therefore, the officer would record code 01 for section 2 driver (see example).

- If applicable, enter additional contributing cause codes (up to three maximum) for each driver or pedestrian.
- If code 02, 24, or 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain and identify the contributing factors. This notation must be listed separately below the last sentence of the narrative section.
- Leave each box that is not used blank.

### VEHICLE DEFECT

VEHICLE DEFECT			
	1	2	3
01 No Defects			
02 Def. Brakes			
03 Worn/Smooth Tires	<b>02</b>	<b>01</b>	
04 Defective/Improper Lights			
05 Puncture/Blowout			
06 Steering Mech.			
07 Windshield Wipers			
08 Equipment/Vehicle Defect	77 All Other (Explain in Narrative)		

This classification is used to identify vehicle mechanical and equipment defects.

- Enter the primary vehicle defect code in the first box for each vehicle.
- If applicable, enter additional vehicle defect codes for each vehicle.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.
- Leave each box that is not used blank.

### VEHICLE MOVEMENT

VEHICLE MOVEMENT			
	1	2	3
01 Straight Ahead			
02 Slowing/Stopped/Stalled	<b>01</b>	<b>02</b>	
03 Making Left Turn			
04 Backing			
05 Making Right Turn		11 Passing	
06 Changing Lanes		12 Driverless or	
07 Entering/Leaving/Parking Space		Runaway Vehicle	
08 Properly Parked		77 All Other (Explain	
09 Improperly Parked		(In Narrative)	
10 Making U-Turn			

This classification is used to identify vehicle movement of each vehicle prior to the time of crash.

- Enter the vehicle movement code in the space provided.

- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.
- Leave each box that is not used blank.

### VEHICLE SPECIAL FUNCTIONS

VEHICLE SPECIAL FUNCTIONS			
	1	2	3
1 None			
2 Farm			
3 Police Pursuit	<b>1</b>	<b>1</b>	
4 Recreational			
5 Emergency Operation			
6 Construction/Maintenance			

This classification is used to identify special operating conditions of a vehicle involved in a traffic crash.

- Enter the special function code in the space provided.
- Leave each box that is not used blank.

### SOURCE OF CARRIER INFORMATION

SOURCE OF CARRIER INFORMATION			
	1	2	3
1 Not Applicable			
2 Shipping Papers			
3 Vehicle Side	<b>2</b>	<b>1</b>	
4 Driver			
5 Other			

This classification is used to identify the means used to obtain the name and address of the motor carrier who was responsible for directing the movement of cargo or passengers.

- Enter the carrier information code in the space provided.
- If code 5 is used, explain and identify the source of carrier information in the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005.

## POINT OF COLLISION

POINT OF COLLISION			
	1	2	3
01 On Road			
02 Not On Road			
03 Shoulder	<b>01</b>	<b>01</b>	
04 Median			
05 Turn Lane			

This classification is used to identify where the first point of contact between vehicles or pedestrians occurred.

- Enter the point of collision code in the space provided.
- Leave each box that is not used blank.

## WORK AREA

WORK AREA			
	1	2	3
01 None			
02 Nearby			
03 Entered	<b>01</b>	<b>01</b>	

This classification is used to identify the proximity of a work area to a traffic crash involving a vehicle or pedestrian.

- Enter the work area code in the space provided.
- Leave each box that is not used blank.
- A work area is defined as that area designated by the presence of a flag person, cones, barricades, drums, arrow boards, pavement markings, signage or other traffic control used to separate workers and their equipment from other functions. This includes work areas related to servicing manholes, tree trimming, road work, and other activities that may have some influence on traffic. The presence of workers at the time of the crash is not needed to define the work area. The work area codes should be used in the following manner: None (01), no work area relevant to the traffic crash scene; nearby (02), designated work area in the vicinity of the traffic crash; and entered (03), during the sequence of events related to the traffic crash, one or more of the involved vehicles or pedestrians were within the boundaries of a designated work area.

**PEDESTRIAN ACTION**

PEDESTRIAN ACTION		1	2	3
01 Crossing Not at Intersection	07 Working in Road			
02 Crossing at Mid-block Crosswalk	08 Standing/Playing in Road			4
03 Crossing at Intersection	09 Standing in Pedestrian Island			
04 Walking Along Road With Traffic	77 All Other (Explain in Narrative)			
05 Walking Along Road Against Traffic	88 Unknown			
06 Working on Vehicle in Road				

This classification is used to identify what the pedestrian was doing prior to the traffic crash.

- Enter the pedestrian action code in the space provided. Ensure that the pedestrian action code is placed only in the vehicle or pedestrian section in which it pertains. In the example above, if sections 1 and 2 are vehicles and section 3 is a pedestrian, leave the spaces for section 1 and 2 blank and the appropriate pedestrian action code in the section 3 box.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.
- Leave each box that is not used blank.

**LOCATION TYPE**

LOCATION TYPE	
1 Primarily Business	1
2 Primarily Residential	
3 Open Country	

This classification is used to describe specific land use characteristics in the area of the traffic crash.

- Enter the location type code in the space provided. If the area of the crash is primarily surrounded by businesses, then code 1 would be used. If the area of the crash is primarily surrounded by homes, then code 2 would be used. If the area of the crash is primarily surrounded by woodlands, then code 3 would be used.

**FIRST/SUBSEQUENT HARMFUL EVENT(S)**

FIRST/SUBSEQUENT HARMFUL EVENT(S)			1	2	3
01 Collision With MV in Transport (Rear End)	15 Collision With Animal	29 MV Ran Into Ditch/Culvert	<b>01</b>	<b>01</b>	
02 Collision With MV in Transport (Head On)	16 MV Hit Sign/Sign Post	30 Ran Off Road Into Water			
03 Collision With MV in Transport (Angle)	17 MV Hit Utility/Pole/Light Pole	31 Overturned			
04 Collision With MV in Transport (Left Turn)	18 MV Hit Guardrail	32 Occupant Fell From Vehicle			
05 Collision With MV in Transport (Right Turn)	19 MV Hit Fence	33 Tractor/Trailer Jackknifed			
06 Collision With MV in Transport (Sideswipe)	20 MV Hit Concrete Barrier Wall	34 Fire			
07 Collision With MV in Transport (Backed Into)	21 MV Hit Bridge/Pier/Abutment/Rail	35 Explosion			
08 Collision With Parked Car	22 MV Hit Tree/Shrubbery	36 Downhill Runaway			
09 Collision With MV on Roadway	23 Collision With Construction Barricade Sign	37 Cargo Loss or Shift			
10 Collision With Pedestrian	24 Collision With Traffic Gate	38 Separation of Units			
11 Collision With Bicycle	25 Collision With Crash Attenuators	39 Median Crossover			
12 Collision With Bicycle (Bike Lane)	26 Collision With Fixed Object Above Road	77 All Other (Explain In Narrative)			
13 Collision With Moped	27 MV Hit Other Fixed Object				
14 Collision With Train	28 Collision With Moveable Object On Road				

This classification is used to identify the first and subsequent harmful events for each vehicle or pedestrian.

- Enter the first (primary) harmful event in the space provided for each vehicle or pedestrian.
- If applicable, enter any subsequent harmful events in the spaces provided.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.
- Leave each box that is not used blank.
- Please note code 09 should state "Collision with MV on Other Roadway." The word "other" was omitted on the crash form 90003, January 2002 revision.

**ROAD SYSTEM IDENTIFIER**

ROAD SYSTEM IDENTIFIER		
01 Interstate	07 Forest Road	<b>02</b>
02 U.S.	08 Private Roadway	
03 State	77 All Other (Explain In Narrative)	
04 County		
05 Local		
06 Turnpike/Toll		

This classification is used to identify the primary road system on which the traffic crash occurred. Use the highest road system classification assigned to a particular street, road or highway.

- Enter the road system identifier code in the space provided. The list provided is in descending order for codes 01 through 08.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.

- The road system identifier code 06 (turnpike/toll) must be entered for various urban expressway toll facilities as well as the Florida Turnpike.

### LIGHTING CONDITION

LIGHTING CONDITION	
01 Daylight	<b>01</b>
02 Dusk	
03 Dawn	
04 Dark (Street Light)	
05 Dark (No Street Light)	
88 Unknown	

This classification is used to identify the lighting condition at the time of the traffic crash.

- Enter the lighting condition code in the space provided.

### ROAD SURFACE CONDITION

ROAD SURFACE CONDITION	
01 Dry	<b>01</b>
02 Wet	
03 Slippery	
04 Icy	
77 All Other	
(Explain In Narrative)	

This classification is used to identify the surface condition of the street, road or highway at the time of the traffic crash.

- Enter the road surface condition code in the space provided.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.

### WEATHER CONDITIONS

WEATHER	
01 Clear	<b>03</b>
02 Cloudy	
03 Rain	
04 Fog	
77 All Other	
(Explain In Narrative)	

This classification is used to identify the weather conditions at the time of the traffic crash.

- Enter the weather condition code at the time of the crash in the space provided.

- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.

**ROAD SURFACE TYPE**

ROAD SURFACE TYPE	
01 Slag/Gravel/Stone	<b>02</b>
02 Blacktop	
03 Brick/Block	
04 Concrete	
05 Dirt	
77 All Other (Explain In Narrative)	

This classification is used to identify the surface construction of the street, road or highway on which the traffic crash occurred.

- Enter the road surface type code in the space provided.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.

**ROAD CONDITIONS AT TIME OF CRASH**

ROAD CONDITIONS AT TIME OF CRASH	
01 No Defects	<b>01</b>
02 Obstruction With Warning	
03 Obstruction Without Warning	
04 Road Under Repair/Construction	<input type="text"/>
05 Loose Surface Materials	
06 Shoulders – Soft/Low/High	
07 Holes/Ruts/Unsafe Paved Edge	
08 Standing Water	
09 Worn/Polished Road Surface	<input type="text"/>
77 All Other (Explain In Narrative)	

This classification is used to identify the road conditions of the street, road or highway on which the traffic crash occurred.

- Enter road condition(s) in the space(s) provided.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.
- Leave each box that is not used blank.
- If codes 07, 08, or 09 are documented, then the officer should contact the proper authorities (city, county, or state) to notify them of the hazards.

## VISION OBSTRUCTED

VISION OBSTRUCTED	
01 Vision Not Obstructed	<b>01</b>
02 Inclement Weather	
03 Parked/Stopped Vehicle	
04 Trees/Crops/Bushes	
05 Load On Vehicle	
06 Building/Fixed Object	
07 Signs/Billboards	
08 Fog	
09 Smoke	77 All Other (Explain In In Narrative)
10 Glare	

This classification is used to identify if the driver's or pedestrian's vision was obstructed prior to the traffic crash.

- Enter the vision obstructed code(s) in the space(s) provided.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.
- Leave each box that is not used blank.

## TRAFFIC CONTROL

TRAFFIC CONTROL	
01 No Control	<b>01</b>
02 Special Speed Zone	
03 Speed Control Sign	
04 School Zone	
05 Traffic Signal	11 Posted No U-Turn
06 Stop Sign	12 No Passing Zone
07 Yield Sign	77 All Other (Explain In Narrative)
08 Flashing Light	
09 Railroad Signal	
10 Officer/Guard/Flagperson	

This classification is used to identify traffic control devices in the immediate area of the traffic crash.

- Enter the traffic control code(s) in the space(s) provided.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.
- Leave each box that is not used blank.

## SITE LOCATION

SITE LOCATION		
01 Not At Intersection/RR X-ing/Bridge	<b>01</b>	
02 At Intersection		
03 Influenced By Intersection		
04 Driveway Access		
05 Railroad		11 Private Property
06 Bridge		12 Toll Booth
07 Entrance Ramp		13 Public Bus Stop Zone
08 Exit Ramp		77 All Other (Explain In
09 Parking Lot – Public		Narrative)
10 Parking Lot – Private		

This classification is used to identify the site location traffic crash.

- Enter the site location code in the space provided.
- If code 77 is used, a separate notation **must** be made on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005, to explain. This notation must be listed separately below the last sentence of the narrative section.

## TRAFFICWAY CHARACTER

TRAFFICWAY CHARACTER	
01 Straight – Level	<b>01</b>
02 Straight – Upgrade/ Downgrade	
03 Curve – Level	
04 Curve – Upgrade/ Downgrade	

This classification is used to identify the characteristics of the trafficway in the area of the traffic crash.

- Enter the trafficway (roadway) character code in the space provided.

## TYPE SHOULDER

TYPE SHOULDER	
01 Paved	<b>01</b>
02 Unpaved	
03 Curb	

This classification is used to identify the type of roadway shoulder in the area of the traffic crash.

- Enter the type of shoulder code in the space provided.
- If there are two types of shoulders, such as paved and curbed, then choose the shoulder type that is closest in proximity to the traffic crash point of impact location.

## VIOLATOR(S)

Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	<b>1</b>	<b>Ruth Ann Martin</b>	<b>316.185</b>	<b>Failed to Use Due Care – Special Hazards (rain)</b>	<b>AHG1234</b>
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

This classification is used to identify each vehicle driver or pedestrian who was given a citation for a traffic violation by the law enforcement officer who investigated the traffic crash.

- In the spaces provided, enter the correct section number, the name of the violator (driver or pedestrian) who was given the traffic citation, the Florida Statute number, the type of charge, and the citation number.
- If more than four citations are issued, then list the subsequent citations in the violator data fields on the Florida Traffic Crash Report, Narrative/Diagram, HSMV 90005. Additional violator data fields appear on the Florida Traffic Crash Report, Update/Continuation, HSMV 90004, if needed.
- Leave each box that is not used blank.

The section number must correspond to the driver or pedestrian who was issued a traffic citation. If a vehicle owner (who was not driving) or a passenger is issued a citation for an infraction, do not enter that information in the violator data fields.

# Narrative/Diagram

## HSMV 90005

This report is used to describe and diagram the traffic crash scene and to identify passengers. It is always used in conjunction with the Florida Traffic Crash Report, Long Form, HSMV 90003. The date of the traffic crash, the county/city code, the investigating agency report number, and the HSMV pre-printed crash report number must be identical on the Long Form and Narrative/Diagram pages.

### TIME EMS NOTIFIED (Fatalities only)

TIME EMS NOTIFIED (FATALITIES ONLY)		
<b>12:16</b>	<input type="checkbox"/> AM	<input checked="" type="checkbox"/> PM

Enter the time of day that emergency medical services were notified of the traffic crash if it involves a fatality.

- Place an X in the AM or PM box.
- Midnight is considered AM and noon is considered PM. Use the 12-hour clock system to identify the time EMS was notified of the traffic crash. **Do NOT** use the 24-hour clock system (a.k.a. military time).

### TIME EMS ARRIVED (Fatalities only)

TIME EMS ARRIVED (FATALITIES ONLY)		
<b>12:30</b>	<input type="checkbox"/> AM	<input checked="" type="checkbox"/> PM

Enter the time of day that emergency medical services arrived at the traffic crash scene if it involves a fatality.

- Place an X in the AM or PM box.
- Midnight is considered AM and noon is considered PM. Use the 12-hour clock system to identify the time EMS was notified of the traffic crash. **DO NOT** use the 24-hour clock system (a.k.a. military time).

**DATE OF CRASH**

DATE OF CRASH		
01	18	06

Enter the date of the traffic crash in month, day, and year order in the following manner:

- Display the month by using the numbers 01 through 12.
- Display the day by using the numbers 01 through 31.
- Display the appropriate year as required.
- The date of the crash must be identical to the date of the crash on page one of the Florida Traffic Crash Report, Long Form, HSMV 90003.

**COUNTY/CITY CODE**

COUNTY/CITY CODE
<b>13/00</b>

This space is used to identify the county and city codes. Please refer to Appendix C for the correct county codes and Appendix D for the correct city codes.

- Enter the county and city code as required.
- Enter 00 for the city code if the traffic crash occurred outside the corporate limits of the city or in an unincorporated area.
- The county/city code must be identical to the county/city code on page one of the Florida Traffic Crash Report, Long Form, HSMV 90003.

**INVESTIGATING AGENCY REPORT NUMBER**

INVEST.AGENCY REPORT NUMBER
<b>FHPH06OFF12345</b>

This space is used to identify the investigating law enforcement agency’s report or file number.

- Enter the report or file number assigned by the agency.
- The investigating agency report or file number must be identical to the investigating agency report or file number on page one of the Florida Traffic Crash Report, Long Form, HSMV 90003.
- Enter the same investigating agency report or file number on the Florida Traffic Crash Report, Update/Continuation Report, HSMV 90004, if applicable.

**HSMV CRASH REPORT NUMBER**

HSMV CRASH REPORT NUMBER <b>12345678</b>
---

This space is used to identify the eight digit, pre-printed crash report number. A pre-printed crash report number appears on each Florida Traffic Crash Report, Long Form, HSMV 90003.

- In the space provided, enter the same HSMV pre-printed crash report number as provided on page one of the Florida Traffic Crash Report, Long Form, HSMV 90003.
- Enter the same pre-printed crash report number on the Update/Continuation Report, HSMV 90004, if applicable.

**NARRATIVE**

(NARRATIVE)
<b>Vehicle #1 was traveling south on State Road 263 (Capital Circle) directly behind Vehicle #2. Vehicle #2 driver slowed due to traffic slowing ahead. Vehicle #1 driver observed Vehicle #2 slowing and took evasive action by braking and skidding approximately 26 feet. As a result, the front of Vehicle #1 collided with the rear of Vehicle #2. Upon my arrival, both vehicles were at final rest on the west shoulder of State Road 263 facing south.</b>

Describe what happened prior to, at, and post collision for each vehicle and pedestrian in a chronological sequence of events. Ensure that the correct section number is used when referring to specific vehicles, drivers or pedestrians. If additional space is needed, use Florida Traffic Crash Report, Update/Continuation, HSMV 90004.

**PASSENGERS**

SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.		EJECT.
<b>1</b>	<b>1</b>	<b>Abraham J. Ross</b>	<b>1298 Lilac Court</b>	<b>Bishop, FL</b>	<b>32852</b>	<b>12/04/80</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>5</b>	<b>1</b>

This space is used to identify all passengers riding within or on a vehicle. This includes passengers riding in the back of a pickup truck and people riding illegally on the exterior of the vehicle. The passenger information must be provided for all passengers regardless of injuries or non-injuries.

- Enter the correct section number. This number must be identical to the vehicle or pedestrian section number controlling the vehicle the passenger was riding in or on at the time of the traffic crash.
- Enter the passenger number(s) for all passengers riding in or on the same vehicle.
- Enter the name, current address, city, state, and zip code for each passenger.
- Enter the date of birth for each passenger.

- Enter the elements for identifying the race, sex, location, injury, safety equipment, and ejected codes for each passenger. The codes are located on page one of the Florida Traffic Crash Report, Long Form, HSMV 90003, in the “Code Information” section.
- Use the Florida Traffic Crash Report, Update/Continuation, HSMV 90004, if more space is needed for additional passengers.

**VIOLATOR(S)**

Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

This classification is used to identify each vehicle driver or pedestrian who was given a citation for a traffic violation by the law enforcement officer who investigated the traffic crash. This section is used for additional violations not listed on page 2 of the Florida Traffic Crash Report, Long Form, HSMV 9003. Do not re-enter the same violations.

- In the spaces provided, enter the correct section number, the name of the violator (driver or pedestrian) who was given the traffic citation, the Florida Statute number, the type of charge, and the citation number.
- If there are no additional violations, leave blank.
- Additional violator data fields appear on the Florida Traffic Crash Report, Update/Continuation, HSMV 90004, if needed.

The section number must correspond to the driver or pedestrian who was issued a traffic citation. If a vehicle owner (who was not driving) or a passenger is issued a citation for an infraction, do not enter that information in the violator data fields.

**WITNESS NAME**

WITNESS NAME (1)	CURRENT ADDRESS	CITY & STATE	ZIP CODE
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This space is used to identify anyone who witnessed the traffic crash.

- Enter the name, current address, city, state, and zip code for each witness.
- If there are no witnesses, leave blank.

**FIRST AID GIVEN BY**

FIRST AID GIVEN BY – NAME	1. Physician or Nurse 4. Certified 1 <sup>st</sup> Aider	2. Paramedic or EMT 5. Other	3. Police Officer	<b>2</b>
<b>Leon County EMS</b>				

This space is used to identify if first aid was administered at the scene of the traffic crash.

- If a rescue unit responds to the traffic crash scene, enter the name of the rescue unit that provided first aid. An individual name is not necessary. For example, Leon County EMS is sufficient with code 2.
- Enter the name of the person administering first aid and the code (1, 3, or 4) that best identifies him/her.
- If code 5 is used, enter the name of the person in the space provided.

**INJURED TAKEN TO**

INJURED TAKEN TO: <b>Tallahassee Memorial Hospital</b>
---

This space is used to identify the name of the hospital or facility that received the injured drivers, pedestrians, or passengers.

- Enter the complete name of the hospital or facility.
- If emergency medical personnel (EMS) responded to the traffic crash scene to provide first aid to the injured parties but the parties refused to go to a medical facility with EMS, then enter “Refused transport” in the space provided.

**BY – NAME**

BY – NAME <b>Leon County EMS</b>
-------------------------------------

This space is used to identify the name of the person or agency that transported the injured drivers, pedestrians, or passengers to a medical facility or hospital.

- Enter the complete name of the person or agency.
- Enter “N/A” if the injured parties refused transport to a medical facility or hospital.

### WAS INVESTIGATION MADE AT SCENE

WAS INVESTIGATION MADE AT SCENE?	1. YES 2. NO	<b>1</b>	IF NO, THEN WHY?
--	-----------------	----------	------------------

This space is used to identify if the investigation was made at the traffic crash scene.

- Enter the number 1 in the space provided if the investigation was made at the traffic crash scene.
- Enter the number 2 in the space provided if investigation was conducted elsewhere. Then, enter the address of the location where the investigation was conducted and why it was completed there.

### IS INVESTIGATION COMPLETE

IS INVESTIGATION COMPLETE?	1. YES 2. NO	<b>1</b>	IF NO, THEN WHY?
----------------------------------	-----------------	----------	------------------

This space is used to identify if the investigation is complete.

- Enter the number 1 in the space provided if the investigation is complete.
- Enter the number 2 in the space provided if the investigation is not closed and then explain why it is not complete. The crash report should be updated within 30 days if it is not closed and then updated each 30 days thereafter until the report is closed.

### DATE OF REPORT

DATE OF REPORT		
<b>01</b>	<b>31</b>	<b>06</b>

This space is used to identify the date the traffic crash report was completed.

- Enter the date the report was completed in month, day, and year sequence using two digits for each character.

**PHOTOS TAKEN**

PHOTOS TAKEN	1. YES	<input type="checkbox"/>	IF YES, BY WHOM?	<input type="checkbox"/>
	2. NO	<input checked="" type="checkbox"/>	1. INVESTIGATING AGENCY	
			2. OTHER	

This space is used to identify if photographs were taken at the scene of the traffic crash and if so, by whom.

- Enter the number 1 in the space provided if photos were taken.
- Enter the number 2 in the space provided if photos were not taken.
- Enter the number 1 in the space provided if the investigating agency took the photos. If not applicable, leave blank.
- Enter the number 2 in the space provided if anyone other than the investigating agency took the photos. If not applicable, leave blank.

**BY – NAME**

INVESTIGATOR – RANK & SIGNATURE	ID/BADGE NUMBER	DEPARTMENT	FHP	SO	PD	OTHER
Ofc. Isaiah Hue	0312/1695	Justice Police Department	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

This space is used to identify you as the investigator and your agency as the investigating law enforcement agency.

- Enter your name, rank, and signature in the space provided.
- Enter your ID or badge number.
- Enter the complete name of your department and place an X in the correct box.

**DIAGRAM**

This space is used to draw the traffic crash scene. The diagram should be prepared based on the standard operating procedures of the submitting agency. However, at a minimum, the following information must be documented:

- Location of crash (road names).
- Roadway width of each lane and roadway markings.
- North directional arrow being placed upward or to the right when looking at the page.
- Any physical evidence on the roadway (skid marks, ruts, holes, standing water, etc.).
- Each vehicle’s position prior to, at, and post crash. This would include where the vehicle was located at final rest upon the officer’s arrival on the scene even if the vehicle was moved.

**FLORIDA TRAFFIC CRASH FORM**

**UPDATE/CONTINUATION**

HSMV 90004

# Update/Continuation

## HSMV 90004

This report is used to update or upgrade information previously recorded on a Florida Traffic Crash Report, Long Form, HSMV 90003. (This form will not be used to update information on a Short Form but can be used to continue information from the original crash report.) This report also functions as a continuation report to identify additional vehicle, driver, pedestrian, passenger, property damage other than vehicles, and crash scene characteristics if more than three vehicles or pedestrians are involved in the same traffic crash. When completing this section, it is important to remember that code entries must correspond to the vehicle or pedestrian section they are intended to represent and must be entered in the appropriate field(s) that are being updated. Also, all open investigations must be updated every 30 days until the investigation is closed.

Refer to the procedures for entering data on the Long Form and Narrative/Diagram when completing this form.

### UPDATE

<b>FLORIDA TRAFFIC CRASH REPORT</b>	
<input checked="" type="checkbox"/> <b>UPDATE</b>	<input type="checkbox"/> <b>CONTINUATION</b>
<small>MAIL TO: DEPT. OF HIGHWAY SAFETY &amp; MOTOR VEHICLES, TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500</small>	

Provide the following information when this form is used to update a vehicle or pedestrian section. Only the updated information and data to link the Update/Continuation report with the Long Form and Narrative/Diagram are required.

- Enter an X in the box marked “Update.”
- Enter the date of the crash. The date should be identical to the date of the crash on the Florida Traffic Crash Report, Long Form, HSMV 90003, and Narrative/Diagram, HSMV 90005 unless the date of the crash is being corrected.
- Enter the county/city code. The code should be identical to county/city codes on the Florida Traffic Crash Report, Long Form, HSMV 90003, and Narrative/Diagram, HSMV 90005 unless the county/city code is being corrected.

- Enter the investigating agency report number. The number must be identical to the investigating agency report or file number on the Florida Traffic Crash Report, Long Form, HSMV 90003, and Narrative/Diagram, HSMV 90005.
- Enter the eight digit, pre-printed HSMV Crash Report Number. The number must be identical to the pre-printed HSMV Crash report number on the Florida Traffic Crash Report, Long Form, HSMV 90003, and Narrative/Diagram, HSMV 90005.
- Enter the vehicle or pedestrian section number that you intend to update.
- Enter the updated information. For example, alcohol/drug test results from .000 to .010. Any information that is not updated should be left blank.
- Enter rank, name, and signature of officer.
- Enter your ID or badge number.
- Enter the complete name of your department and place and X in the appropriate box.
- Enter the page numbers starting with number 5 for the Long Form (if no Continuation form was used in the original report) or number 7 (if a Continuation form was used in the original report). Each time a report is updated, the sequence of the page numbers must be continued in the proper chronological order.

SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CO	DATE OF BIRTH	RACE	SEX	LOC	INJ	\$ EQUIP.	EJECT.
------	-------	------------------	-----------------	--------------	--------	---------------	------	-----	-----	-----	-----------	--------

#	PROPERTY DAMAGED – OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
		\$					

**CONTINUATION**

<b>FLORIDA TRAFFIC CRASH REPORT</b>	
<input type="checkbox"/> <b>UPDATE</b>	<input checked="" type="checkbox"/> <b>CONTINUATION</b>
MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500	

Provide the following information when this form is used as a continuation report.

- Enter an X in the box marked “Continuation.”

- Enter the date of the crash. The date must be identical to the date of the crash on the Florida Traffic Crash Report, Long Form, HSMV 90003, and Narrative/Diagram, HSMV 90005.
- Enter the county/city code. The code must be identical to county/city codes on the Florida Traffic Crash Report, Long Form, HSMV 90003, and Narrative/Diagram, HSMV 90005.
- Enter the investigating agency report number. The number must be identical to the investigating agency report or file number on the Florida Traffic Crash Report, Long Form, HSMV 90003, and Narrative/Diagram, HSMV 90005.
- Enter the eight digit, pre-printed HSMV Crash Report Number. The number must be identical to the pre-printed HSMV Crash report number on the Florida Traffic Crash Report, Long Form, HSMV 90003, and Narrative/Diagram, HSMV 90005.
- Enter the section number for the vehicle or pedestrian.
- Enter additional vehicle, pedestrian, property damage other than vehicle, or passenger information as previously outlined in this manual.
- Enter rank, name, and signature of officer.
- Enter your ID or badge number.
- Enter the complete name of your department and place and X in the appropriate box.
- Enter the page numbers starting with number 5 for the Long Form or number 7 if a continuation form was used in the original report, and number 3 for the Short Form.

**FLORIDA TRAFFIC CRASH REPORT**

**SHORT FORM**

**DRIVER REPORT OF TRAFFIC CRASH  
DRIVER EXCHANGE OF INFORMATION**

**HSMV 90006**

# **Law Enforcement Short Form Report, Driver Report of Traffic Crash, Driver Exchange of Information HSMV 90006**

This form is used as a Law Enforcement Short Form Report, Driver Report of Traffic Crash, or Driver Exchange of Information form. Time and location data are entered based on the instructions previously outlined for the Long Form Report. The vehicle and pedestrian sections should be completed based on the information requested for each field. Completion of the events data (back of Sheet 1) of the Short Form is the same as the Long Form.

**The Update/Continuation form can be used with the Short Form Report only to continue information from the original crash report and not to update it after transmittal to HSMV.**

This form is used to report all traffic crashes to the department that do not require completion of a Florida Traffic Crash Report, Long Form, HSMV 90003, by a law enforcement officer. A Short Form Report is prepared (Sheet 1) if the officer at the scene of the traffic crash decides to report the traffic crash to the department. The reporting officer is only required to fill in the shaded areas. Additional data can be entered if it is required by the reporting officer's agency.

- Place an X in the box at the top of Sheet 1 that identifies the form as a Law Enforcement Short Form Report.
- Place an X in the box at the bottom of Sheet 1 that states, "No further action is required by you. Report is completed by law enforcement agency."

After completion, the investigating officer should distribute the remaining copies (Sheets 2, 3, and 4) to the driver(s).

If the officer decides not to report the crash, then the driver(s) must complete the form and send a copy to the department.

- The officer should remove Sheet 1 and place an X in the box at the top that identifies the report as a Driver Report of Traffic Crash.
- Place an X in the box at the bottom of Sheet 1 that states, "You must read and comply with the instructions on the back of this page."

Use this form as a driver exchange of information when a Long Form is completed. If this form is not used as a driver exchange, then the officer must provide each driver and/or pedestrian with the

other party's driver and vehicle information. Also, this form may be used as a driver exchange of information form when completing the Long Form Report.

# Appendix A

## Glossary

**\*\* These definitions are per Florida State Statute 316.003. \*\***  
**For other definitions not defined by Florida State Statute 316.003 please see Appendix F for other useful terms.**

**AUTHORIZED EMERGENCY VEHICLES**--Vehicles of the fire department (fire patrol), police vehicles, and such ambulances and emergency vehicles of municipal departments, public service corporations operated by private corporations, the Department of Environmental Protection, the Department of Health, and the Department of Transportation as are designated or authorized by their respective department or the chief of police of an incorporated city or any sheriff of any of the various counties

**BICYCLE**--Every vehicle propelled solely by human power, and every motorized bicycle propelled by a combination of human power and an electric helper motor capable of propelling the vehicle at a speed of not more than 20 miles per hour on level ground upon which any person may ride, having two tandem wheels, and including any device generally recognized as a bicycle though equipped with two front or two rear wheels. The term does not include such a vehicle with a seat height of no more than 25 inches from the ground when the seat is adjusted to its highest position or a scooter or similar device. No person under the age of 16 may operate or ride upon a motorized bicycle.

**BICYCLE PATH**--Any road, path, or way that is open to bicycle travel, which road, path, or way is physically separated from motorized vehicular traffic by an open space or by a barrier and is located either within the highway right-of-way or within an independent right-of-way.

**BUS**--Any motor vehicle designed for carrying more than 10 passengers and used for the transportation of persons and any motor vehicle, other than a taxicab, designed and used for the transportation of persons for compensation.

**BUSINESS DISTRICT**--The territory contiguous to, and including, a highway when 50 percent or more of the frontage thereon, for a distance of 300 feet or more, is occupied by buildings in use for business.

**COMMERCIAL MOTOR VEHICLE** --Any self-propelled or towed vehicle used on the public highways in commerce to transport passengers or cargo, if such vehicle:

- (a) Has a gross vehicle weight rating of 10,000 pounds or more;
- (b) Is designed to transport more than 15 passengers, including the driver; or
- (c) Is used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Act, as amended (49 U.S.C. ss. 1801 et seq.).

**CROSSWALK**--

- (a) That part of a roadway at an intersection included within the connections of the lateral lines of the sidewalks on opposite sides of the highway, measured from the curbs or, in the absence of curbs, from the edges of the traversable roadway.
- (b) Any portion of a roadway at an intersection or elsewhere distinctly indicated for pedestrian crossing by lines or other markings on the surface.

**DAYTIME**--The period from a half hour before sunrise to a half hour after sunset. Nighttime means at any other hour.

**DEPARTMENT**--The Department of Highway Safety and Motor Vehicles as defined in s. 20.24. Any reference herein to Department of Transportation shall be construed as referring to the Department of Transportation, defined in s. 20.23, or the appropriate division thereof.

**DRIVER**--Any person who drives or is in actual physical control of a vehicle on a highway or who is exercising control of a vehicle or steering a vehicle being towed by a motor vehicle.

**ELECTRIC PERSONAL ASSISTIVE MOBILITY DEVICE**--Any self-balancing, two-nontandem-wheeled device, designed to transport only one person, with an electric propulsion system with average power of 750 watts (1 horsepower), the maximum speed of which, on a paved level surface when powered solely by such a propulsion system while being ridden by an operator who weighs 170 pounds, is less than 20 miles per hour. Electric personal assistive mobility devices are not vehicles as defined in this section.

**FARM TRACTOR**--Any motor vehicle designed and used primarily as a farm implement for drawing plows, mowing machines, and other implements of husbandry.

**GOLF CART**--A motor vehicle designed and manufactured for operation on a golf course for sporting or recreational purposes.

**HAZARDOUS MATERIAL** --Any substance or material which has been determined by the secretary of the United States Department of Transportation to be capable of imposing an unreasonable risk to health, safety, and property. This term includes hazardous waste as defined in s. 403.703(21).

**INTERSECTION** --

(a) The area embraced within the prolongation or connection of the lateral curblines; or, if none, then the lateral boundary lines of the roadways of two highways which join one another at, or approximately at, right angles; or the area within which vehicles traveling upon different highways joining at any other angle may come in conflict.

(b) Where a highway includes two roadways 30 feet or more apart, then every crossing of each roadway of such divided highway by an intersecting highway shall be regarded as a separate intersection. In the event such intersecting highway also includes two roadways 30 feet or more apart, then every crossing of two roadways of such highways shall be regarded as a separate intersection.

**LANED HIGHWAY**--A highway the roadway of which is divided into two or more clearly marked lanes for vehicular traffic.

**LIMITED ACCESS FACILITY**--A street or highway especially designed for through traffic and over, from, or to which owners or occupants of abutting land or other persons have no right or easement, or only a limited right or easement, of access, light, air, or view by reason of the fact that their property abuts upon such limited access facility or for any other reason. Such highways or

streets may be parkways from which trucks, buses, and other commercial vehicles are excluded; or they may be freeways open to use by all customary forms of street and highway traffic.

**MOPED**--Any vehicle with pedals to permit propulsion by human power, having a seat or saddle for the use of the rider and designed to travel on not more than three wheels; with a motor rated not in excess of 2 brake horsepower and not capable of propelling the vehicle at a speed greater than 30 miles per hour on level ground; and with a power-drive system that functions directly or automatically without clutching or shifting gears by the operator after the drive system is engaged. If an internal combustion engine is used, the displacement may not exceed 50 cubic centimeters.

**MOTOR VEHICLE**--Any self-propelled vehicle not operated upon rails or guideway, but not including any bicycle, motorized scooter, electric personal assistive mobility device, or moped.

**MOTORCYCLE**--Any motor vehicle having a seat or saddle for the use of the rider and designed to travel on not more than three wheels in contact with the ground, but excluding a tractor or a moped.

**MOTORIZED SCOOTER**--Any vehicle not having a seat or saddle for the use of the rider, designed to travel on not more than three wheels, and not capable of propelling the vehicle at a speed greater than 30 miles per hour on level ground.

**NONPUBLIC SECTOR BUS**--Any bus which is used for the transportation of persons for compensation and which is not owned, leased, operated, or controlled by a municipal, county, or state government or a governmentally owned or managed nonprofit corporation.

**OFFICIAL TRAFFIC CONTROL DEVICES**--All signs, signals, markings, and devices, not inconsistent with this chapter, placed or erected by authority of a public body or official having jurisdiction for the purpose of regulating, warning, or guiding traffic.

**OFFICIAL TRAFFIC CONTROL SIGNAL**--Any device, whether manually, electrically, or mechanically operated, by which traffic is alternately directed to stop and permitted to proceed.

**OPERATOR**--Any person who is in actual physical control of a motor vehicle upon the highway, or who is exercising control over or steering a vehicle being towed by a motor vehicle.

**OWNER**--A person who holds the legal title of a vehicle, or, in the event a vehicle is the subject of an agreement for the conditional sale or lease thereof with the right of purchase upon performance of the conditions stated in the agreement and with an immediate right of possession vested in the conditional vendee or lessee, or in the event a mortgagor of a vehicle is entitled to possession, then such conditional vendee, or lessee, or mortgagor shall be deemed the owner, for the purposes of this chapter.

**PARK OR PARKING** --The standing of a vehicle, whether occupied or not, otherwise than temporarily for the purpose of and while actually engaged in loading or unloading merchandise or passengers as may be permitted by law under this chapter.

**PEDESTRIAN**--Any person afoot.

**PERSON**--Any natural person, firm, co-partnership, association, or corporation.

**POLE TRAILER**--Any vehicle without motive power designed to be drawn by another vehicle and attached to the towing vehicle by means of a reach or pole, or by being boomed or otherwise secured to the towing vehicle, and ordinarily used for transporting long or irregularly shaped loads such as poles, pipes, or structural members capable, generally, of sustaining themselves as beams between the supporting connections.

**POLICE OFFICER**--Any officer authorized to direct or regulate traffic or to make arrests for violations of traffic regulations, including Florida highway patrol officers, sheriffs, deputy sheriffs, and municipal police officers.

**PRIVATE ROAD OR DRIVEWAY**--Except as otherwise provided in paragraph (53)(b), any privately owned way or place used for vehicular travel by the owner and those having express or implied permission from the owner, but not by other persons.

**RAILROAD SIGN OR SIGNAL**--Any sign, signal, or device erected by authority of a public body or official, or by a railroad, and intended to give notice of the presence of railroad tracks or the approach of a railroad train.

**RESIDENCE DISTRICT**--The territory contiguous to, and including, a highway, not comprising a business district, when the property on such highway, for a distance of 300 feet or more, is, in the main, improved with residences or residences and buildings in use for business.

**RIGHT-OF-WAY**--The right of one vehicle or pedestrian to proceed in a lawful manner in preference to another vehicle or pedestrian approaching under such circumstances of direction, speed, and proximity as to give rise to danger of collision unless one grants precedence to the other.

**ROAD TRACTOR**--Any motor vehicle designed and used for drawing other vehicles and not so constructed as to carry any load thereon, either independently or as any part of the weight of a vehicle or load so drawn.

**ROADWAY**--That portion of a highway improved, designed, or ordinarily used for vehicular travel, exclusive of the berm or shoulder. In the event a highway includes two or more separate roadways, the term "roadway" as used herein refers to any such roadway separately, but not to all such roadways collectively.

**SADDLE MOUNT**--An arrangement whereby the front wheels of one vehicle rest in a secured position upon another vehicle. All of the wheels of the towing vehicle are upon the ground and only the rear wheels of the towed vehicle rest upon the ground.

**SAFETY ZONE**--The area or space officially set apart within a roadway for the exclusive use of pedestrians and protected or so marked by adequate signs or authorized pavement markings as to be plainly visible at all times while set apart as a safety zone.

**SCHOOL BUS**--Any motor vehicle that complies with the color and identification requirements of chapter 1006 and is used to transport children to or from public or private school or in connection with school activities, but not including buses operated by common carriers in urban transportation

of school children. The term "school" includes all preelementary, elementary, secondary, and postsecondary schools.

**SEMITRAILER**--Any vehicle with or without motive power, other than a pole trailer, designed for carrying persons or property and for being drawn by a motor vehicle and so constructed that some part of its weight and that of its load rests upon, or is carried by, another vehicle.

**SIDEWALK**--That portion of a street between the curblines, or the lateral lines, of a roadway and the adjacent property lines, intended for use by pedestrians.

**SPECIAL MOBILE EQUIPMENT**--Any vehicle not designed or used primarily for the transportation of persons or property and only incidentally operated or moved over a highway, including, but not limited to, ditchdigging apparatus, well-boring apparatus, and road construction and maintenance machinery, such as asphalt spreaders, bituminous mixers, bucket loaders, tractors other than truck tractors, ditchers, leveling graders, finishing machines, motor graders, road rollers, scarifiers, earthmoving carryalls and scrapers, power shovels and draglines, and self-propelled cranes and earthmoving equipment. The term does not include house trailers, dump trucks, truck-mounted transit mixers, cranes or shovels, or other vehicles designed for the transportation of persons or property to which machinery has been attached.

**STAND OR STANDING**--The halting of a vehicle, whether occupied or not, otherwise than temporarily, for the purpose of, and while actually engaged in, receiving or discharging passengers, as may be permitted by law under this chapter.

**STATE ROAD**--Any highway designated as a state-maintained road by the Department of Transportation.

**STOP**--When required, complete cessation from movement.

**STOP OR STOPPING**--When prohibited, any halting, even momentarily, of a vehicle, whether occupied or not, except when necessary to avoid conflict with other traffic or to comply with the directions of a law enforcement officer or traffic control sign or signal.

**STRAIGHT TRUCK**--Any truck on which the cargo unit and the motive power unit are located on the same frame so as to form a single, rigid unit.

**STREET OR HIGHWAY**--

- (a) The entire width between the boundary lines of every way or place of whatever nature when any part thereof is open to the use of the public for purposes of vehicular traffic;
- (b) The entire width between the boundary lines of any privately owned way or place used for vehicular travel by the owner and those having express or implied permission from the owner, but not by other persons, or any limited access road owned or controlled by a special district, whenever, by written agreement entered into under s. 316.006(2)(b) or (3)(b), a county or municipality exercises traffic control jurisdiction over said way or place;
- (c) Any area, such as a runway, taxiway, ramp, clear zone, or parking lot, within the boundary of any airport owned by the state, a county, a municipality, or a political subdivision, which area is used for vehicular traffic but which is not open for vehicular operation by the general public; or

(d) Any way or place used for vehicular traffic on a controlled access basis within a mobile home park recreation district which has been created under s. 418.30 and the recreational facilities of which district are open to the general public.

**TANDEM AXLE**--Any two axles whose centers are more than 40 inches but not more than 96 inches apart and are individually attached to or articulated from, or both, a common attachment to the vehicle, including a connecting mechanism designed to equalize the load between axles.

**TANDEM TRAILER TRUCK**--Any combination of a truck tractor, semitrailer, and trailer coupled together so as to operate as a complete unit.

**TANDEM TRAILER TRUCK HIGHWAY NETWORK**--A highway network consisting primarily of four or more lanes, including all interstate highways; highways designated by the United States Department of Transportation as elements of the National Network; and any street or highway designated by the Florida Department of Transportation for use by tandem trailer trucks, in accordance with s. 316.515, except roads on which truck traffic was specifically prohibited on January 6, 1983.

**THROUGH HIGHWAY**--Any highway or portion thereof on which vehicular traffic is given the right-of-way and at the entrances to which vehicular traffic from intersecting highways is required to yield right-of-way to vehicles on such through highway in obedience to either a stop sign or yield sign, or otherwise in obedience to law.

**TRAFFIC**--Pedestrians, ridden or herded animals, and vehicles, streetcars, and other conveyances either singly or together while using any street or highway for purposes of travel.

**TRAILER**--Any vehicle with or without motive power, other than a pole trailer, designed for carrying persons or property and for being drawn by a motor vehicle.

**TRUCK** --Any motor vehicle designed, used, or maintained primarily for the transportation of property.

**TRUCK TRACTOR** --Any motor vehicle designed and used primarily for drawing other vehicles and not so constructed as to carry a load other than a part of the weight of the vehicle and load so drawn.

**VEHICLE** --Every device, in, upon, or by which any person or property is or may be transported or drawn upon a highway, excepting devices used exclusively upon stationary rails or tracks.

**WORK ZONE AREA** --The area and its approaches on any state-maintained highway, county-maintained highway, or municipal street where construction, repair, maintenance, or other street-related or highway-related work is being performed or where one or more lanes is closed to traffic.

# Appendix B

## Trailers



01 – Single Semi Trailer



02 – Tandem Semi Trailer



03 – Tank Trailer



04 – Flatbed

04 – Saddle mount



05 – Boat Trailer



Note: A jet ski is registered as a boat and therefore is carried on a boat trailer.

Jet Ski Trailer



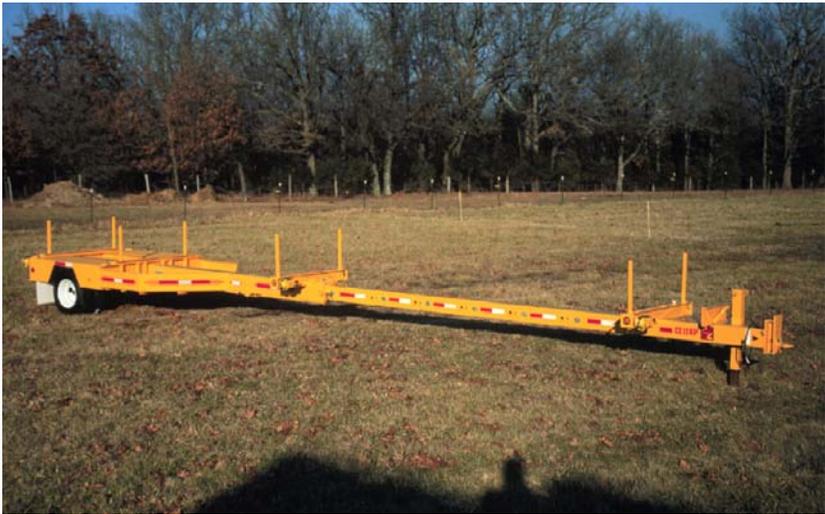
Crashes involving a trailer carrying a jet ski should be listed as “05”.



06 – Utility Trailers



07 – House Trailer



08 – Pole Trailer



09 – Towed Vehicle



10 – Auto Transport

77 – Other



77 - Cargo Trailer



77 - Concession Trailer

# Appendix C

## County Codes

<b>County</b>	<b>County Code</b>	<b>County</b>	<b>County Code</b>
Alachua	11	Lee	18
Baker	52	Leon	13
Bay	23	Levy	39
Bradford	45	Liberty	67
Brevard	19	Madison	35
Broward	10	Manatee	15
Calhoun	58	Marion	14
Charlotte	53	Martin	42
Citrus	47	Miami-Dade	01
Clay	48	Monroe	38
Collier	64	Nassau	41
Columbia	29	Okaloosa	43
DeSoto	34	Okeechobee	57
Dixie	54	Orange	07
Duval	2	Osceola	26
Escambia	9	Palm Beach	06
Flagler	61	Pasco	28
Franklin	59	Pinellas	04
Gadsden	21	Polk	05
Gilchrist	55	Putnam	22
Glades	60	Santa Rosa	33
Gulf	66	Sarasota	16
Hamilton	56	Seminole	17
Hardee	30	St. Johns	20
Hendry	49	St. Lucie	24
Hernando	40	Sumter	44
Highlands	27	Suwannee	31
Hillsborough	3	Taylor	37
Holmes	51	Union	63
Indian River	32	Volusia	08
Jackson	25	Wakulla	65
Jefferson	46	Walton	36
Lafayette	62	Washington	50
Lake	12	Unknown	68

# Appendix D

## City Codes

<b>City Name</b>	<b>City Code</b>	<b>City Name</b>	<b>City Code</b>
Alachua	30	Boca Chica NAS	50
Alford	28	Boca Raton	32
Altamonte Springs	30	Bonifay	30
Altha	30	Bonita Springs	30
Anna Maria	30	Bowling Green	40
Apalachicola	30	Boynton Beach	34
Apopka	30	Bradenton	32
Arcadia	30	Bradenton Beach	34
Archer	32	Brandon	39
Astatula	28	Branford	30
Atlantic Beach	30	Brent	28
Atlantis	28	Briny Breezes	36
Auburndale	30	Bristol	30
Aventura	29	Broadview	37
Avon Park	30	Bronson	30
Azalea Park	44	Brooker	35
Bal Harbor	30	Brooksville	30
Baldwin	32	Browardale	29
Bartow	32	Browns Village	47
Bascom	52	Buena Vista	28
Bay Harbor Islands	32	Bunche Park	45
Bay Lake	31	Bunnell	30
Bayard	34	Bushnell	30
Bayshore Gardens	48	Callahan	30
Bayview	28	Calloway	30
Beacon Square	26	Canova Beach	28
Bell	44	Cantonment	30
Belle Glade	30	Cape Canaveral	30
Belle Isle	32	Cape Coral	41
Belleair	30	Carol City	37
Belleair Beach	32	Carrabelle	32
Belleair Bluffs	34	Carver Ranch Estates	39
Belleview	30	Caryville	20
Belvedere Homes	31	Casselberry	32
Bethune-Cookman College	62	Cecil Field NAS	48
Beverly Beach	28	Cedar Grove	32
Biscayne Gardens	33	Cedar Hammock/Brad. Sh.	35
Biscayne Park	34	Cedar Key	32
Blountstown	32	Center Hill	32
Boca Chica	48	Century	32

<b>City Name</b>	<b>City Code</b>	<b>City Name</b>	<b>City Code</b>
Chattahoochee	30	Daytona Beach Shores	32
Chiefland	34	DeBary	34
Chipley	30	Deerfield Beach	36
Cinco Bayou	28	Defuniak Springs	40
Clair-Mel	38	DeLand	36
Clearwater	36	DeLeon Springs	39
Clermont	30	Delray Beach	40
Clewiston	40	Deltona	37
Cloud Lake	38	Dept. of Agriculture	31
Cocoa	32	Destin	55
Cocoa Beach	34	Dinsmore	36
Cocoa West	49	Doctors Inlet	38
Coconut Creek	28	Doral	55
Coconut Grove	36	Dundee	36
Coleman	34	Dunedin	38
Collier Manor/Cresthaven	35	Dunnellon	32
Combee Settlement	31	E. Lake Orient Park	46
Conway	47	Eagle Lake	38
Cooper City	30	Eagle Peak	40
Coral Gables	38	East Auburndale	33
Coral Springs	31	East Naples	56
Coral Way Village	40	East Richey Lakes	34
Corry Field NAS	66	Eastpoint	31
Cottondale	30	Eatonville	34
Crawfordville	30	Eau Gallie	36
Crescent City	30	Ebro	40
Crestview	30	Eckerd College	72
Cross City	40	Edgewater	38
Cross City AF Station	45	Edgewood	35
Crystal River	40	Eglin	34
Cutler Bay	36	Eglin AFB (Okaloosa County)	62
Cutler Ridge	42	Eglin AFB (Santa Rosa County)	54
Cypress Gardens	37	Eglin AFB (Walton County)	50
Dade City	30	Egypt Lake	47
Dade County School P D	31	El Portal	44
Dania Beach	32	Ellyson Field NAS	68
Davenport	34	Englewood (Charlotte County)	52
Davie	34	Englewood (Sarasota County)	47
Daytona Beach	30	Escambia NAS	72
Daytona Beach Airport	33	Esto	32

<b>City Name</b>	<b>City Code</b>	<b>City Name</b>	<b>City Code</b>
Eustis	32	Golfview	26
Everglades	40	Goulds	52
Fairview Shores	36	Graceville	40
Fanning Spgs. (Gilchrist County)	46	Grand Ridge	42
Fanning Springs (Levy County)	42	Green Cove Springs	40
Fellsmere	36	Greenacres City	42
Fernandina Beach	40	Greensboro	32
Flagler Beach	40	Greenville	30
Floral	54	Gretna	34
Florida A & M University	30	Groveland	36
Florida Atlantic University	95	Gulf Breeze	40
Florida City	46	Gulf Gate Estates	38
Florida Institute of Technology	56	Gulf Stream	44
Florida International University	99	Gulfport	40
Florida Memorial College	30	Hacienda	41
Florida School for Deaf/Blind	51	Haines City	46
Florida Southern College	64	Hallendale	40
Florida State University	40	Hampton	37
Fort Lauderdale	38	Hastings	40
Fort Meade	44	Havana	40
Fort Myers	40	Haverhill	46
Fort Myers Beach	42	Hawthorne	36
Fort Myers SE	43	Hialeah	54
Fort Myers SW	46	Hialeah Gardens	56
Fort Myers Village/Pine Manor	44	High Springs	38
Fort Pierce	40	Highland Beach	48
Fort Pierce NW	30	Highland Park	31
Fort Walton Beach	32	Highland Park Village	43
Fort White	50	Hillcrest Heights	47
Franklin County	59	Hilliard	42
Freeport	52	Hillsboro Beach	42
Frostproof	42	Hobe Sound	39
Fruitland Park	34	Holden Hills	49
Gainesville	34	Holly Hill	40
Gifford	38	Hollywood	44
Glen Ridge	41	Hollywood Ridge Farm	46
Glen St. Mary	50	Holmes Beach	36
Golden Beach	48	Homestead	58
Golden Glades	50	Homestead AFB	59
Golf Village	24	Homosassa Springs	41

<b>City Name</b>	<b>City Code</b>	<b>City Name</b>	<b>City Code</b>
Horseshoe Beach	50	La Belle	50
Howey-in-the-Hills	38	La Crosse	39
Hypoluxo	50	Lady Lake	40
Immokalee	50	Lake Alfred	48
Indialantic	38	Lake Buena Vista	53
Indian Creek Village	60	Lake Butler	40
Indian Harbour Beach	40	Lake Carroll	48
Indian River Shores	40	Lake City	51
Indian Rocks Beach	42	Lake Clark Shores	58
Indian Shores	74	Lake Forest	47
Indiantown	40	Lake Hamilton	50
Inglis	40	Lake Helen	42
Interlachen	35	Lake Holloway	53
Inverness	42	Lake Magdalene	49
Islamorada	30	Lake Mary	38
Islandia	61	Lake Park	60
Jacksonville	38	Lake Placid	40
Jacksonville Beach	40	Lake Wales	54
Jacksonville NAS	50	Lake Worth	62
Jacksonville University	46	Lakeland	52
Jasmine Estates	32	Land O' Lakes	35
Jasper	40	Lantana	64
Jay	42	Largo	46
Jennings	42	Lauderdale by the Sea	48
Jensen Beach	41	Lauderdale Lakes	50
June Park	47	Lauderhill	52
Juno Beach	52	Laurel Hill	44
Jupiter	54	Lawtey	39
Jupiter Inlet Colony	56	Layton	44
Jupiter Island	42	Lazy Lake Village	54
Kendall	63	Lealman	47
Kennedy Space Center	64	Lee	32
Kenneth City	44	Lee Co. Airport Police	56
Kensington Park	39	Lee Field NAS	46
Key Biscayne	62	Leesburg	42
Key Colony Beach	40	Lehigh Acres	45
Key Largo	41	Leisure City	65
Key West	42	Leto	44
Keystone Heights	42	Lighthouse Point	56
Kissimmee	40	Live Oak	40

<b>City Name</b>	<b>City Code</b>	<b>City Name</b>	<b>City Code</b>
Lockhart	51	Miami TP	67
Longboat Key (Manatee County)	38	Micanopy	40
Longboat Key (Sarasota County)	40	Miccosukee Indian Reservation	73
Longwood	40	Middleburg	48
Lynn Haven	34	Midway	45
Macclenny	60	Milton	50
MacDill AFB	58	Mims	41
Maderia Beach	48	Minneola	52
Madison	40	Miramar	62
Maitland	40	Monticello	40
Malabar	60	Montverde	53
Malone	46	Moore Haven	40
Manalapan	66	Mount Dora (Lake County)	54
Mandarin	42	Mount Dora (Orange County)	39
Mangonia Park	68	Mulberry	56
Marathon	45	Munson Island	46
Margate	60	Myrtle Grove	40
Marianna	50	Naples	52
Marineland	42	Naranja	74
Mary Esther	40	Neptune Beach	44
Mascotte	50	New Port Richey	40
Mayo	40	New Smyrna Beach	44
Mayport NAS	52	Newberry	42
McCoy AFB	56	Niceville	42
McIntosh	34	Nokomis/Laurel	41
Medley	64	North Andrews Garden	67
Melbourne	42	North Bay	76
Melbourne AA	66	North Bay Village	78
Melbourne Beach	44	North Fort Myers	47
Melbourne Village	65	North Lauderdale	63
Melrose Park	61	North Miami	80
Memphis	44	North Miami Beach	82
Merritt Island	45	North Naples	54
Mexico Beach	40	North Palm Beach	70
Miami	66	North Port	48
Miami Beach	68	North Redington Beach	50
Miami Gardens	57	Norwood	71
Miami Lakes	69	Oak Hill	46
Miami Shores	70	Oakland	41
Miami Springs	72	Oakland Park	64

<b>City Name</b>	<b>City Code</b>	<b>City Name</b>	<b>City Code</b>
Ocala	40	Palmetto Estates	79
Ocean Breeze Park	50	Panama City	50
Ocean City	36	Panama City Beach	62
Ocean Ridge	72	Parker	51
Ocean Ridge Park	52	Parkland	71
Ocoee	42	Parrish	43
Ojus	83	Patrick AFB	48
Okaloosa County Airprt	33	Paxton	60
Okeechobee	50	Pembroke Park	66
Oldsmar	52	Pembroke Pines	68
Olympia Heights	77	Penny Farms	47
Oneco	40	Pensacola	50
Opa Locka	84	Perrine	85
Orange City	48	Perry	50
Orange Park	44	Pierson	52
Orchid	42	Pine Crest Village	35
Orlando	46	Pine Hills	48
Orlando AFB	58	Pinellas Co Campus P D	78
Orlando TP	57	Pinellas Park	54
Orlando Transit Authority	33	Pinewood	81
Orlovista	43	Plant City	40
Ormond Beach	50	Plantation	70
Ormond By The Sea	41	Plantation Key	43
Otter Creek	41	Polk City	60
Oviedo	44	Pompano Beach	72
Pahokee	74	Pompano Beach Hlnds	65
Painter Hill	44	Ponce De Leon	40
Palatka	40	Ponce Inlet	54
Palm Bay	46	Ponte Vedra	46
Palm Beach	76	Port Charlotte (Charlotte County)	54
Palm Beach AFB	75	Port Charlotte (Sarasota County)	42
Palm Beach Gardens	78	Port Orange	56
Palm Beach School Bd.	96	Port Richey	50
Palm Beach Shores	80	Port Salerno	54
Palm City	53	Port St. Joe	40
Palm River/Clair Mel	51	Port St. Lucie (Martin County)	56
Palm Shores	62	Port St. Lucie (St. Lucie County)	50
Palm Springs	82	Port Washington	62
Palmetto	42	Progress Village	42
Palmetto Bay	51	Punta Gorda	50

<b>City Name</b>	<b>City Code</b>	<b>City Name</b>	<b>City Code</b>
Quincy	50	Sneads	51
Raiford	41	Sopchoppy	60
Reddick	42	South Bay	88
Redington Beach	56	South Daytona	60
Redington Shores	58	South Miami	87
Richmond Heights	86	South Miami Heights	95
Ridgewood Heights	52	South Palm Beach	90
Riveria Beach	84	South Pasadena	62
Riverland	69	South Patrick Shores	51
Rockledge	50	South Peninsula	61
Rocky Creek	43	Springfield	52
Royal Palm Beach	86	St. Augustine	50
Ruskin	45	St. Augustine Beach	52
Safety Harbor	60	St. Cloud	50
Samoset	46	St. Leo	62
San Antonio	60	St. Lucie Village	52
Sanford	60	St. Marks	62
Sanibel	50	St. Pete/Clearwater Airport	65
Santa Rosa Beach	42	St. Petersburg	64
Sante Fe Community College	31	St. Petersburg Beach	66
Sarasota	50	Starke	40
Sarasota S	43	Steinhatchee	40
Sarasota SE	49	Stetson University	64
Sarasota Springs	44	Stuart	62
Sarasota-Manatee Air	51	Sunny Isles	88
Satellite Beach	52	Sunrise	76
Saufley Field NAS	70	Surfside	89
Sea Ranch Lakes	74	Sweetwater	90
Sebastian	50	Sweetwater Creek	41
Sebring	50	Tallahassee	50
Sebring Airport	51	Tamarac	77
Seminole	76	Tampa	50
Seminole Indian Reservation	75	Tampa International Airport	60
Seminole Park	61	Tarpon Springs	68
Seville	58	Tavares	60
Sewalls Point	60	Tavernier	52
Shalimar	46	Temple Terrace	52
Siesta Key	45	Tequesta Village	92
Silver Springs Shore	50	Tice	55
Sky Lake	45	Titusville	54

<b>City Name</b>	<b>City Code</b>	<b>City Name</b>	<b>City Code</b>
Treasure Island	70	West Hollywood	78
Trenton	50	West Melbourne	43
Tyndall AFB	60	West Miami	93
Uleta	96	West Palm Beach	94
Umatilla	62	West Pensacola	63
Unincorporated	0	West Winter Haven	55
Unincorporated Count	91	Weston	79
Union Park	70	Westview	98
Univ. of Central Florida	55	Westville	36
Univ. of Florida	50	Westwood Lakes	97
Univ. of Miami	94	Wewahitchka	52
Univ. of North Florida	60	White Springs	60
Univ. of South Florida	54	Whiting Field	52
Univ. of Tampa	56	Wildwood	62
Univ. of West Florida	64	Williston	60
Valparaiso	60	Wilton Manors	80
Venice	60	Windermere	50
Venice South	46	Winston	35
Vernon	50	Winter Garden	52
Vero Beach	52	Winter Haven	62
Vero Beach South	54	Winter Park	54
Village of Pinecrest	35	Winter Springs	70
Virginia Gardens	92	Worthing Springs	50
Wabasso	60	Yankeetown	62
Wahneta	61	Yulee	60
Wakulla	64	Zephyrhills	70
Waldo	60	Zolfo Springs	80
Ward Ridge	50		
Warrington	62		
Watertown	49		
Wauchula	60		
Wausua	60		
Webster	60		
Weekiwachee	40		
Welaka	60		
Wellington	89		
West Bradenton	50		
West Eau Gallie	53		
West End	39		
West Gate	93		

# Appendix E

## State Codes

<u>State</u>		
<u>Abbrev.</u>	<u>State Name</u>	<u>Country</u>
AG	AGUASCALIENTES	M
AL	ALABAMA	U
AK	ALASKA	U
AB	ALBERTA	C
AS	AMERICAN SAMOA	O
AZ	ARIZONA	U
AR	ARKANSAS	U
BN	BAJA CALIFORNIA NORTE	M
BS	BAJA CALIFORNIA SUR	M
BZ	BELIZE	O
BC	BRITISH COLUMBIA	C
CA	CALIFORNIA	U
CP	CAMPECHE	M
CZ	CANAL ZONE	M
CS	CHIAPAS	M
CI	CHIHUAHUA	M
CH	COAHUILA	M
CL	COLIMA	M
CO	COLORADO	U
CT	CONNECTICUT	U
CR	COSTA RICA	O
DE	DELAWARE	U
DC	DISTRICT OF COLUMBIA	U
DF	DISTRITO FEDERAL	M
DG	DURANGO	M
ES	EL SALVADOR	O
FL	FLORIDA	U
GA	GEORGIA	U
GU	GUAM	U
GJ	GUANAJUATO	M
GT	GUATEMALA	O
GE	GUERRERO	M
HI	HAWAII	U
HD	HIDALGO	M
HO	HONDURAS	O
ID	IDAHO	U
IL	ILLINOIS	U
IN	INDIANA	U
IA	IOWA	U
JA	JALISCO	M
KS	KANSAS	U
KY	KENTUCKY	U
LA	LOUISIANA	U
ME	MAINE	U
MB	MANITOBA	C

MD	MARYLAND	U
MA	MASSACHUSETTS	U
MX	MEXICO	M
MI	MICHIGAN	U
MC	MICHOACAN	M
MN	MINNESOTA	U
MS	MISSISSIPPI	U
MO	MISSOURI	U
MT	MONTANA	U
MR	MORELOS	M
NA	NAYARIT	M
NE	NEBRASKA	U
NV	NEVADA	U
NB	NEW BRUNSWICK	C
NH	NEW HAMPSHIRE	U
NJ	NEW JERSEY	U
NM	NEW MEXICO	U
NY	NEW YORK	U
NF	NEWFOUNDLAND	C
NI	NICARAGUA	O
NC	NORTH CAROLINA	U
ND	NORTH DAKOTA	U
NT	NORTHWEST TERRITORIES	C
NS	NOVA SCOTIA	C
NL	NUEVO LEON	M
OA	OAXACE	M
OH	OHIO	U
OK	OKLAHOMA	U
ON	ONTARIO	C
OR	OREGON	U
OT	OTHER	O
PN	PANAMA	O
PA	PENNSYLVANIA	U
PE	PRINCE EDWARD	C
PU	PUEBLA	M
PR	PUERTO RICO	U
PQ	QUEBEC	C
QE	QUERETARO	M
QI	QUINTANA ROO	M
RI	RHODE ISLAND	U
SL	SAN LUIS POTOSI	M
SK	SASKATCHEWAN	C
SI	SINALOA	M
SO	SONORA	M
SC	SOUTH CAROLINA	U
SD	SOUTH DAKOTA	U
TB	TABASCO	M
TA	TAMAULIBAS	M

TN	TENNESSEE	U
TX	TEXAS	U
TL	TLAXCALA	M
UK	UNKNOWN	O
UT	UTAH	U
VC	VERACRUZ	M
VT	VERMONT	U
VI	VIRGIN ISLANDS	U
VA	VIRGINIA	U
WA	WASHINGTON	U
WV	WEST VIRGINIA	U
WI	WISCONSIN	U
WY	WYOMING	U
YU	YUCATAN	M
YT	YUKON TERRITORY	C
ZA	ZACATECAS	M

# Appendix F

## Other Useful Terms

**\*\* These terms are per the National Highway Traffic Safety Administration \*\***

**AIR BAG DEPLOYED** -- Deployment status of an air bag relative to position of the occupant.

**ALCOHOL** -- The percent of alcohol concentration.

**ALCOHOL/DRUG INVOLVEMENT** -- Investigating police officer's assessment of whether alcohol or drug use was suspected or demonstrated to be present by test for any vehicle driver or non-motorist in the crash.

**ALCOHOL/DRUG SUSPECTED** -- Investigating police officer's assessment of whether alcohol or drugs were used by the vehicle driver or non-motorist.

**ANGLE - MANNER OF IMPACT** -- A crash where two vehicles impact at an angle. For example, the left front of one vehicle impacts the side of another vehicle.

**ANIMAL** -- Creatures which have the capacity for movement and motor response to stimulation but are not human beings.

**APPROACHING OR LEAVING VEHICLE** -- Physical movement in the direction of or in the direction away from the vehicle.

**AT INTERSECTION BUT NO CROSSWALK** -- At an area which contains a crossing or connection of two or more roadways not classified as a driveway access but without the street crossing distinctly indicated for pedestrian crossing by lines or other markings on the surface of the roadway.

**AUTO TRANSPORTER** -- A single-unit truck, truck/trailer, or tractor/semi-trailer having a cargo body specifically designed to transport other motor vehicles.

**BACKING** -- A start from a parked or stopped position in the direction of the rear of the vehicle.

**BARRIER** -- A device which provides a physical limitation through which a vehicle would not normally pass and is designed to contain or redirect an errant vehicle.

**BRIDGE** -- A structure, including supports, carrying a roadway, railroad, etc. over an obstruction such as water, a railway, or another roadway, having an opening of 20 feet or more measured along the center of the structure.

**BRIDGE - OVERHEAD STRUCTURE** -- Any part of a bridge that is over the reference or subject roadway. In crash reporting, this typically refers to the beams or other structural elements supporting a bridge deck.

**BRIDGE - PIER OR ABUTMENT** -- A bridge pier is a support for a bridge structure other than at the ends. A bridge abutment is the end support for a bridge.

**BRIDGE - RAIL** -- A barrier attached to a bridge deck or a bridge parapet to restrain vehicles, pedestrians or other users.

**CARGO BODY TYPE** -- Coded for buses and trucks over 10,000 pounds GVWR.

**CARGO/LOSS OR SHIFT** -- The release of the goods being transported from the cargo compartment of the truck, or the change in the position of the goods within the cargo compartment.

**CARGO RELEASED** -- The goods being transported by truck spilled out of the vehicle cargo compartment.

**CARGO TANK** -- A single-unit truck, truck/trailer, or tractor/semi-trailer having a cargo body designed to transport either dry bulk (fly ash, etc.), liquid bulk (gasoline, milk, etc.), or gas bulk (propane, etc.).

**CARRIER IDENTIFICATION NUMBER** -- A unique number, found on the power unit, and assigned by the U.S. Department of Transportation, Interstate Commerce Commission, or by the state to a motor carrier.

**CARRIER NAME** -- The name of an individual, partnership, or corporation responsible for the transportation of persons or property.

**CARRIER NAME SOURCE** -- Where the name of the motor carrier was noted, be it the power unit of the truck, the trailer, the shipping papers, or other documents.

**CARRIER STREET ADDRESS** -- The street address of the carrier.

**CHANGING LANES** -- A vehicle shift from one traffic lane to another traffic lane moving in the same direction.

**CHILD SAFETY SEAT USED** -- Child passenger was seated in a child safety seat. This does not imply correct use or placement of the child safety seat.

**CITED** -- Receipt of a motor vehicle citation for actions as a result of a motor vehicle crash.

**CLEAR** -- Free from clouds, fog, smoke.

**CLOUDY** -- Overcast with clouds. (Cloud - a visible mass of particles of water or ice in the form of fog, mist, or haze suspended usually at a considerable height in the air.)

**COLLISION** -- A vehicle crash in which the first harmful event is a collision of a vehicle in transport with another vehicle, other property, animal or pedestrian.

**COLLISION WITH FIXED OBJECT** -- A collision crash in which the first harmful event is the striking of a fixed object by a vehicle in transport.

**COLLISION WITH OBJECT NOT FIXED** -- A collision crash in which the first harmful event is the striking by a vehicle in transport of an object that is not fixed.

**CONCRETE MIXER** -- A single-unit truck with a body specifically designed to mix or agitate concrete.

**CONSTRUCTION ZONE** -- See Work Zone.

**CONTRIBUTING CIRCUMSTANCES, DRIVER** -- The actions of the driver which may have contributed to the crash.

**CONTRIBUTING CIRCUMSTANCES, ENVIRONMENT** -- Apparent environmental conditions which contributed to the crash.

**CONTRIBUTING CIRCUMSTANCES, NON-MOTORIST** -- The actions of the non-motorist which may have contributed to the crash.

**CONTRIBUTING CIRCUMSTANCES, ROAD** -- Apparent condition of the road which contributed to the crash.

**CRASH CITY/PLACE** -- The city/place in which the crash occurred.

**CRASH COUNTY** -- The county in which the crash occurred.

**CRASH DATE AND TIME** -- The date (year, month, and day) and time (hour and minute) at which the crash occurred.

**CRASH ROADWAY LOCATION** -- Exact location on the roadway indicating where the crash occurred.

**CRASH SEVERITY** -- The severity of a crash based on the most severe injury to any person involved in the crash.

**CROSSOVER** -- Area in the median of a divided roadway where vehicles are permitted to travel cross the opposing lanes of traffic or do a U-turn.

**CULVERT** -- An enclosed structure providing free passage of water under a roadway with a clear opening of 20 feet or less measured along the center of the roadway.

**CURB** -- A raised edge or border to a roadway. Curbs may be constructed of concrete, asphalt, or wood and typically have a face height of less than 9 inches.

**DARK - LIGHTED ROADWAY** -- It is dark but the roadway is lighted by lights designed and installed to illuminate the roadway. This is not lighting from store front, house lamps, etc.

**DARK - ROADWAY NOT LIGHTED** -- It is dark and the roadway is not lighted by lights designed and installed to illuminate the roadway.

**DARK - UNKNOWN ROADWAY LIGHTING** -- It is dark and it is unknown if the roadway was lighted by lights designed and installed to illuminate the roadway.

**DART OUT** -- Pedestrian enters street quickly and is struck by or walks or runs into a moving vehicle.

**DATE AND TIME CRASH REPORTED TO POLICE AGENCY** -- The date and time at which the call was placed notifying the police agency about the crash.

**DATE OF BIRTH** --Year, month, and day of birth of person involved in crash.

**DAWN** -- The first appearance of light in the morning.

**DAYLIGHT** -- The light of day.

**DEBRIS** -- The remains of something broken or destroyed.

**DEPLOYED AIR BAG-DRIVER** -- Driver air bag out of its cover and protruding into driver compartment. Bag is fully or partially deflated or inflated.

**DEPLOYED AIR BAG-FRONT SEAT PASSENGER** -- Front seat passenger air bag out of its cover and protruding into front seat passenger compartment. Bag is fully or partially deflated or inflated.

**DEPLOYED SIDE AIR BAG** -- Air bag on side of vehicle is out of its cover and protruding into occupant compartment. Bag is fully or partially deflated or inflated.

**DEPLOYMENT OF AIR BAG** -- Air bag out of its cover and protruding into occupant compartment. Bag is fully or partially deflated or inflated.

**DEPLOYMENT OF AIR BAG UNKNOWN** -- Not known if air bag is out of its cover and protruding into occupant compartment.

**DIRECTION OF TRAVEL BEFORE CRASH** -- The direction of a vehicle's normal, general travel on the roadway before the crash. Notice that this is not a compass direction but a direction consistent with the designated direction of the road. For example, the direction of a state designated north-south highway must be either northbound or southbound even though a vehicle may have been traveling due east as a result of a short segment of the highway having an east-west orientation.

**DISABLING DAMAGE** -- Damage which precludes departure of the vehicle from the scene of the crash in its usual operating manner after simple repairs.

**DISREGARDED TRAFFIC SIGNS, SIGNALS, ROAD MARKINGS** -- Driver failed to comply with the instructions directed by traffic signs, signals, or road markings.

**DITCH** -- Channel dug into the ground.

**DOWNHILL RUNAWAY** -- A motor vehicle that is moving down a hill without the ability to stop.

**DRIVER** -- An occupant who is in actual physical control of a vehicle or, for an out-of-control vehicle, an occupant who was in control until control was lost.

**DRIVER CONDITION** -- The condition of the driver which may have contributed to the crash.

**DRIVER DISTRACTED** -- Determination that occupant who is in actual physical control of a vehicle had his/her attention diverted from driving.

**DRIVER LICENSE CLASS** -- The type of commercial or noncommercial vehicle that a licensed driver has been examined on and/or approved to operate.

**DRIVER LICENSE NUMBER** -- A unique number assigned by the authorizing agent issuing a driver license to the individual.

**DRIVER LICENSE RESTRICTIONS** -- Restrictions assigned to an individual's driver license by the license examiner.

**DRIVER LICENSE STATE/PROVINCE** -- The geographic or political entity issuing a driver license.

**DRIVER LICENSE STATUS** -- The current status of an individual's driver license.

**DRIVER NAME** -- The full name of the individual driver.

**DRIVEWAY** -- A roadway providing access to property adjacent to a trafficway.

**DRIVEWAY ACCESS CROSSWALK** -- Crosswalk on roadway providing access to property adjacent to a trafficway.

**DRIVING TOO FAST FOR CONDITIONS** -- Traveling at a speed that was unsafe for the road, weather, traffic or other environmental conditions at the time.

**DRUGS** -- Indication of the presence of drugs through drug testing.

**DRY** -- Free from water or liquid.

**DUMP TRUCK** -- A truck which can be tilted or otherwise manipulated to discharge its load by gravity.

**DUSK** -- The darker part of twilight at night.

**EJECTION** -- The location of each occupant's body as being completely or partially thrown from the vehicle as a result of a crash.

**EMBANKMENT** -- A structure of soil or rock above the original ground upon which a structure is constructed.

**EMERGENCY USE** -- Indicates vehicles, such as military, police, ambulance, fire, etc., which are on an emergency response. Emergency refers to a vehicle that is traveling with physical emergency signals in use, siren sounding, etc.

**ENTERING OR CROSSING SPECIFIED LOCATION** -- Non-occupant went into or crossed over a specific identified area that either was or was not part of the trafficway or roadway.

**ENTERING TRAFFIC LANE** -- Physical presence in trafficway.

**EXCEEDED AUTHORIZED SPEED LIMIT** -- Driver was operating vehicle faster than posted speed limit at time of crash.

**FAILURE TO KEEP IN PROPER LANE OR RUNNING OFF ROAD** -- Driver did not maintain position in appropriate travel lane or moved off that part of a trafficway which includes both the roadway and any shoulder alongside the roadway.

**FAILURE TO OBEY TRAFFIC SIGNS, SIGNALS, OR OFFICER** -- Non-motorist did not comply with the instructions directed by traffic signs, signals, or a police officer at the scene.

**FAILED TO YIELD RIGHT OF WAY** -- Driver did not give way to another vehicle or non-occupant as required.

**FATAL INJURY** -- Any injury that results in death within a 30 day period after the crash occurred.

**FIRE/EXPLOSION** -- Fire/explosion which was the cause or product of the crash.

**FIRST EVENT** -- Occurrence which was the first thing that happened to the vehicle, relevant to the crash.

**FIRST HARMFUL EVENT** -- The injury or damage producing event which characterizes the crash type and identifies the nature of the first harmful event.

**FLATBED** -- A single-unit truck, truck/trailer, or tractor/semi-trailer whose body is without sides or roof, with or without readily removable stakes which may be tied together with chains, slats, or panels.

**FOG, SMOG, SMOKE** -- Fog - a vapor condensed to fine particles of water suspended in the lower atmosphere that differs from cloud only in being near the ground. Smog - a fog made heavier and darker by smoke and chemical fumes. Smoke - the suspension of solid particles of combustion in the atmosphere.

**FOLLOWED TOO CLOSELY** -- Driver was positioned too near another vehicle or non-occupant to permit safe response to any change in movement or behavior of the other vehicle or non-occupant.

**FRONT SEAT - LEFT SIDE** -- Driver seat for motor vehicle or motorcycle.

**FRONT SEAT - RIGHT SIDE** -- Passenger seat to right of driver and next to the door.

**FRONT SEAT - MIDDLE** -- Passenger seat between driver and right seat passenger.

**FUNCTIONAL DAMAGE** -- Damage which is not disabling, but affects operation of the vehicle or its parts.

**GLARE** -- A harsh uncomfortably bright light.

**GRADE** -- The inclination of a roadway, expressed in the rate of rise or fall in feet per 100 feet of horizontal distance.

**GRAIN/CHIPS/GRAVEL TRUCK** -- Truck with closed sides and bottom to carry grain, chips, gravel, etc.

**GROSS VEHICLE WEIGHT RATING OF POWER UNIT** -- A gross vehicle weight rating (GVWR) is a value specified by the manufacturer for the power unit of a motor vehicle.

**GUARDRAIL** -- A longitudinal barrier consisting of posts and rails or cables.

**HAZARDOUS MATERIALS** -- Any substance or material which has been determined by the U.S. Secretary of Transportation to be capable of posing an unreasonable risk to health, safety, and property when transported in commerce and which has been so designed under regulations of the US DOT.

**HAZARDOUS MATERIALS PLACARD (CARGO ONLY)** -- A diamond shaped sign that must be affixed to any motor vehicle that carries hazardous materials usually contains a four digit number in the middle of the placard and a one digit number at the bottom that indicate the hazard class and specific material being carried.

**HAZARDOUS MATERIALS RELEASED INVOLVEMENT (CARGO ONLY)** -- Indication whether hazardous materials were released from the cargo compartment.

**HEAD-ON - MANNER OF IMPACT** -- A crash where the front end of two vehicles impact.

**HELMET USED** -- Safety helmet was worn by non-motorist or driver.

**HIGHWAY, STREET OR ROAD** -- A general term denoting a public way for purpose of vehicular travel, including the entire area within the right-of-way.

**HIGHWAY TRAFFIC SIGN POST** -- A pole, post, or structure constructed to support a highway sign intended to guide, regulate, or inform highway users.

**HOLES** -- An opening in the road.

**IMPACT ATTENUATOR/CRASH CUSHION** -- A barrier at a spot location, less than 25 feet, designed to prevent an errant vehicle from impacting a fixed object hazard by gradually decelerating the vehicle to a safe stop or by redirecting the vehicle away from the hazard.

**IMPROPER ACTION** -- Action contrary to motor vehicle rules.

**IMPROPER CROSSING** -- Crossing a trafficway against the rules.

**IN ROADWAY** -- Physically located in that part of trafficway designed, improved, and ordinarily used for motor vehicle travel.

**INJURY DESCRIPTION** -- Type of injury.

**INTERSECTION TYPE** -- The type of intersection at which two or more roadways intersect at the same level.

**JACKKNIFE** -- An event involving a truck pulling a semi-trailer or semi-trailers and trailers where the trailing unit(s) and the pulling vehicle rotate with respect to each other.

**LANE** -- A strip of roadway used for a single line of vehicles.

**LANE LINE** -- A pavement marking used to separate traffic traveling in the same direction. Lane lines are normally 4 to 6 inches wide.

**LAP BELT ONLY USED** -- Use of or presence of only a lap safety belt either because vehicle is equipped only with lap belt or because shoulder belt is not in use.

**LIGHT TRUCK WITH ONLY FOUR TIRES** -- Trucks (van, mini-van, panel, pickup, sport utility) of 10,000 pounds gross vehicle weight rating or less.

**LIGHTING** -- Non-motorist use of lights on his/her person or on a vehicle not in transport or transport vehicles other than motor vehicle as safety equipment.

**LOGBOOK** -- A document carried in the truck cab or bus in which commercial motor vehicle drivers must enter their record of duty status for each 24 hour period using methods proscribed by the US DOT.

**LYING/ILLEGALLY IN ROADWAY** -- Person physically located in that part of trafficway designed, improved, and ordinarily used for motor vehicle travel.

**MADE IMPROPER TURN** -- Driver turned vehicle incorrectly or not suitably to the circumstances.

**MAINTENANCE ZONE** -- See Work Zone.

**MARKED CROSSWALK AT INTERSECTION** -- That portion of the roadway at the intersection that is distinctly indicated for pedestrian crossing by lines or other markings on the surface of the roadway.

**MEDIAN** -- The portion of a divided highway separating the traveled way for traffic in opposing directions.

**MOST HARMFUL EVENT FOR THIS VEHICLE** -- Event which produced the most severe injury or greatest property damage for this vehicle.

**MOTOR HOME** -- A van where a frame-mounted recreational unit is added behind the driver or cab area or mounted on a bus/truck chassis.

**MOTOR VEHICLE IN TRANSPORT** -- Motor vehicle - any motorized (mechanically or electrically powered) road vehicle not operated on rails. In Transport - means in motion or on a roadway. Inclusions: motor vehicle in traffic on a highway, driverless motor vehicle in motion, motionless motor vehicle abandoned on a roadway, disable motor vehicle on a roadway, etc.

**MOTORCYCLE** -- A two- or three-wheeled motor vehicle designed to transport one or two people.

**MOTORIST** -- Any occupant of a motor vehicle in transport.

**NO ACCESS CONTROL** -- Includes all sections that do not meet the criteria for full or partial access control.

**NO IMPROPER DRIVING** -- Driver operated vehicle in an apparently correct manner.

**NON-FATAL INJURY** -- Bodily harm to a person.

**NON-HIGHWAY WORK** -- Work on the roadside but not related to the roadway. For example, workers mowing the roadside, utility workers working on utility poles adjacent to roadway.

**NON-INTERSECTION CROSSWALK** -- A portion of the roadway, not at an intersection, that is distinctly indicated for pedestrian crossing by lines or other markings on the surface of the roadway.

**NON-MOTORIST** -- Any person other than an occupant of a motor vehicle in transport. This includes pedestrians, occupants of other motor vehicles not in transport and occupants of transport vehicles other than motor vehicles.

**NON-MOTORIST ACTION** -- The actions of the non-motorist prior to the crash.

**NON-MOTORIST LOCATION PRIOR TO IMPACT** -- The non-motorist's location with respect to the roadway prior to impact.

**NON-MOTORIST SAFETY EQUIPMENT** -- The safety equipment(s) used by the non-motorist, including retro-reflective clothing, lighting, protective pads, helmet, etc.

**OBSTRUCTION IN ROADWAY** -- A blockage in roadway.

**OCCUPANT PROTECTION SYSTEM USE** -- The restraint equipment in use by occupant at the time of the crash, or the helmet use by a motorcyclist.

**OFF RAMP** -- An auxiliary roadway used for leaving through-traffic lanes.

**ON RAMP** -- An auxiliary roadway used for entering through-traffic lanes.

**OPERATING DEFECTIVE EQUIPMENT (DRIVER)** -- Vehicle in transport or any part or component of vehicle in transport is deficient, faulty, incomplete or incapacitated.

**OPERATING VEHICLE IN ERRATIC, RECKLESS, CARELESS, NEGLIGENT OR AGGRESSIVE MANNER** -- Operating the vehicle without regard to the safety of occupants, non-occupants or property.

**OTHER NON-FIXED OBJECT - COLLISION WITH** -- A collision with an object other than a motor vehicle in transit, a pedestrian, an other road vehicle in transit, a parked motor vehicle, a railway vehicle, a pedalcycle, an animal, or a fixed object.

**OVERCORRECTING/OVERSTEERING** -- Wide swing of vehicle to right or left because of sliding, etc. or to compensate for obstacle in roadway.

**OVERHEAD SIGN SUPPORT** -- A pole, post, or structure constructed to support a sign which is over a roadway.

**OVERTAKING/PASSING** -- A vehicle that moves from behind a vehicle to in front of the same vehicle.

**OVERTURN/ROLLOVER** -- A vehicle that has overturned at least 90 degrees to its side.

**PARKED MOTOR VEHICLE** -- A motor vehicle not in transport.

**PARTIALLY EJECTED** -- The location of an occupant's body not completely thrown from the vehicle as a result of a crash.

**PASSENGER** -- Occupant of vehicle other than the driver of the vehicle.

**PAVEMENT MARKINGS** -- Markings set into the surface of, applied upon, or attached to the pavement for the purpose of regulating, warning, or guiding traffic. Markings are typically paint or plastic but may be devices of various materials.

**PEDALCYCLIST** -- Any occupant of a pedalcycle (bicycle, tricycle, unicycle, pedal car).

**PEDESTRIAN** -- Any person on foot on a roadway.

**PHYSICAL IMPAIRMENT** -- A condition that results in some decrease in a physical ability.

**PHYSICAL OBSTRUCTION - CONTRIBUTING CIRCUMSTANCES** -- An object which blocked sight and contributed to the crash. (For example, bush, tree, etc.)

**PLACARD NUMBER** -- A number included on the hazardous material placard displayed on trucks that are carrying hazardous materials. Many placards have two numbers, a four-digit number in the middle, and a one digit number at the bottom.

**PLAYING OR WORKING ON VEHICLE** -- Non-motorist touching vehicle.

**POINT OF IMPACT** -- The portion of the vehicle that impacted first in a crash.

**POLE TRAILER** -- A trailer designed to be attached to the towing vehicle by means of a reach or pole, or by being boomed or otherwise secured to the towing road vehicle, and ordinarily used for carrying property of a long or irregular shape.

**PROPERTY DAMAGE ONLY** -- Crash in which at least one vehicle is damaged but no occupants or non-motorists are injured.

**RAILWAY CROSSING DEVICE** -- Any sign, signal, or gate which warns of on-coming trains or train tracks crossing the roadway.

**RAILWAY GRADE CROSSING** -- A intersection between a roadway and train tracks which cross each other at the same level (Grade).

**RAILWAY VEHICLE** -- Any land vehicle (e.g., train, engine) that is (1) designed primarily for, or in use for, moving persons or property from one place to another on rails and (2) not in use on a land way other than a railway.

**RAILWAY VEHICLE – COLLISION WITH** -- A collision crash in which the first harmful event is the collision of a road vehicle in transport and railway vehicle (e.g., train, engine).

**RAISED PAVEMENT MARKER** -- An individual unit marker, reflectorized or nonreflectorized, generally less than one-inch in height, attached to and extending above the normal pavement surface for the purpose of regulating, warning, or guiding traffic.

**RAN OFF ROAD** -- Failure of the driver to keep the vehicle within the roadway traffic lanes.

**REAR-END - MANNER OF IMPACT** -- A crash where the front of one vehicle impacts the back of another vehicle.

**RELATION TO ROADWAY** -- The location of the first harmful event as it relates to its position within or outside the trafficway.

**RIDING ON VEHICLE EXTERIOR** -- Person outside of vehicle (on hood, running board, trunk, non-trailing unit, etc.) while riding.

**ROAD SURFACE CONDITION** -- The roadway surface condition at the time and place of a crash.

**ROAD UNDER CONSTRUCTION/MAINTENANCE** -- Roadway being constructed or resurfaced.

**ROADSIDE** -- The outermost part of the trafficway from the property line to other boundary in to the edge of the first road.

**ROADWAY** -- That part of a trafficway designed, improved, and ordinary used for motor vehicle travel or, where various classes of motor vehicle are segregated, that part of a trafficway used by a particular class. Separate roadways may be provided for northbound and southbound traffic or for trucks and automobiles. Bridle paths and bicycle paths are not included in this definition.

**ROADWAY - CRASH ON** -- (1) a collision crash in which the initial point of contact between colliding units in the first harmful event is within a roadway or (2) a non-collision crash in which the road vehicle involved was partly or entirely on the roadway at the time of the first harmful event.

**ROADWAY LIGHTING** -- The type of roadway illumination on the roadway.

**ROADWAY SURFACE CONDITION** -- The roadway surface conditions at the time and place of a crash.

**RUT** -- Track worn by wheel or by habitual passage in the road.

**SAND, MUD, DIRT, OIL, GRAVEL** -- Sand - loose granular material resulting from the disintegration of rock on the road. Mud - slimy sticky mixture of soil and water on the road. Dirt - loosed or packed soil on the road. Oil - substance that is liquid and soluble in ether but not in water. Gravel – loose rounded fragments of rock on the road.

**SCHOOL BUS** -- A motor vehicle used for the transportation of any school pupil at or below the 12th-grade level to or from a public or private school or school-related activity, if it is externally identifiable by the color yellow, the words “school bus”, flashing red lights are located on the front and rear, and identifying lettering on both sides indicating the school or school district served, or the company operating the bus.

**SCHOOL ZONE SIGNS** -- Signs which change the speed limit on road adjacent to schools on school days, signs which give advance warning of school and signs which warn of children crossing the road.

**SEATING POSITION** -- Location of occupant in, on, or outside of the motor vehicle prior to the impact of a crash.

**SECOND EVENT** -- Occurrence which was the second thing that happened to the vehicle in question that was relevant to the crash.

**SEPARATION OF UNITS** -- When the truck or truck tractor becomes separated from the semi-trailer and/or trailer(s) they are pulling.

**SEQUENCE OF EVENTS** -- The events in sequence for this vehicle.

**SHIPPING PAPERS (TRUCK)** -- The documents carried in the cab of the truck or truck tractor that indicates the cargo being carried and other motor carrier responsible for the movement of the cargo.

**SHOULDER** -- That part of a trafficway contiguous with the roadway for emergency use, for accommodation of stopped road vehicles, and for lateral support of the roadway structure.

**SHOULDER AND LAP BELT USED** -- In a two part occupant restraint system, both the shoulder belt and lap belt portions are connected to a buckle.

**SHOULDER BELT ONLY USED** -- In a two part occupant restraint system, only the shoulder belt portion is connected to a buckle.

**SHOULDERS LOW, SOFT, OR HIGH** -- A shoulder with a different height than that of the roadway.

**SIDESWIPE, SAME DIRECTION - MANNER OF IMPACT** -- A crash where two vehicles traveling the same direction and impact on the side.

**SIDESWIPE, OPPOSITE DIRECTION - MANNER OF IMPACT** -- A crash where two vehicles traveling the opposite direction and impact on the side.

**SIDEWALK** -- The portion of a highway, other than the roadway, set apart by curbs, barriers, markings or other delineation for exclusive use by pedestrians.

**SINGLE-UNIT TRUCK (3-OR-MORE AXLES)** -- A power unit that includes a permanently mounted cargo body (also called a straight truck) that has three or more axles.

**SINGLE-UNIT TRUCK (2-AXLE, 6- TIRE)** -- A power unit that includes a permanently mounted cargo body (also called a straight truck) that has only two axles and at least six tires on the ground.

**SLOPE** -- The change in the elevation of an element of the roadway per unit of horizontal length, may be expressed as a percent or a ratio.

**STANDING** -- Non-motorist not in movement on the roadway.

**STOPPED IN TRAFFIC** -- Vehicle stopped in traffic at the time of the crash.

**SWERVING OR AVOIDING DUE TO WIND, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC.** -- Defensive driver action to defend against an apparent danger in, on, or due to the condition of the roadway or the presence of vehicle or object or non-motorist in the roadway in order to avoid a crash.

**TEST GIVEN, RESULTS UNKNOWN** -- Person administered test for drug/alcohol presence, but outcome of test not known.

**TEST REFUSED** -- Person refused to take drug/alcohol test.

**TEST RESULT** -- Outcome of test for drug presence indicating, if drugs present, which type is present.

**THROUGH TRAVELED WAY** -- The portion of the roadway for the movement of vehicles, exclusive of shoulders and auxiliary lanes.

**TRACTOR/SEMI-TRAILER** -- A truck tractor that is pulling a semi-trailer.

**TRACTOR/TRIPLES** -- A truck tractor that is pulling a single semi-trailer and two full trailers.

**TRAFFIC CIRCLE/ROUNDABOUT** -- An intersection of roads where vehicles must travel around a circle to continue on the same road or to any intersecting road.

**TRAFFIC CONTROL DEVICE - INOPERATIVE OR MISSING** -- A traffic control device which is not working or is not present.

**TRAFFIC CONTROL SIGNAL** -- A device which controls traffic movements by illuminating systematically a green, yellow, or red light.

**TRAFFICWAY** -- Any land way open to the public as a matter of right or custom for moving persons or property from one place to another.

**TRAILER LICENSE PLATE NUMBER** -- The number or other characters, exactly as displayed, on the registration plate or tag affixed to the trailer.

**TRAILER REGISTRATION STATE AND YEAR** -- The State, commonwealth, territory, foreign country, Indian nation, U.S. Government, etc. issuing the registration plate and the year of registration as indicated on the registration plate displayed on the trailer.

**TRANSPORTED TO MEDICAL FACILITY BY** -- Type and identity of unit providing transport to medical facility receiving patient.

**TRUCK TRACTOR (BOBTAIL)** -- A motor vehicle consisting of a single motorized transport device designed primarily for pulling semitrailers.

**TRUCK/TRAILER** -- A motor vehicle combination consisting of a single unit truck and a trailer (a vehicle designed for carrying property and so constructed that no part of its weight rests upon or is carried by the towing road vehicle).

**UNDERRIDE/OVERRIDE** -- An underride refers to a vehicle sliding under another vehicle during a crash. An Override refers to a vehicle riding up over another vehicle. Both can occur with a parked vehicle.

**UTILITY POLE** -- A pole or post constructed for the primary function of supporting an electric line, telephone line or other electrical-electronic transmission line or cable.

**UTILITY ZONE** -- See Work Zone.

**VAN/ENCLOSED BOX** -- A single-unit truck, truck/trailer, or tractor/semi-trailer having an enclosed body integral to the frame of the vehicle.

**VEHICLE AUTHORIZED SPEED LIMIT** -- Authorized speed limit for the vehicle at the time of the crash. The authorization may be indicated by the posted speed limit, blinking sign at construction zones, etc.

**VEHICLE BODY TYPE** -- The general configuration or shape of a vehicle distinguished by characteristics such as number of doors, seats, windows, roof line, hard top or convertible.

**VEHICLE CONFIGURATION** -- Indicates the general configuration of vehicle.

**VEHICLE IDENTIFICATION NUMBER** -- A unique combination of alphanumeric characters assigned to a specific vehicle and formulated by the manufacturer.

**VEHICLE LICENSE PLATE NUMBER** -- The number or other characters, exactly as displayed, on the registration plate or tag affixed to the vehicle. For combination trucks, vehicle plate number is obtained from the power unit or tractor.

**VEHICLE MAKE** -- The distinctive (coded) name applied to a group of vehicles by a manufacturer. This information also can be obtained separately from the Vehicle Registration File.

**VEHICLE MODEL YEAR** -- The year which is assigned to a vehicle by the manufacturer. Usually it is the year in which the model change occurs. This information also can be obtained separately from the Vehicle Registration File.

**VEHICLE REGISTRATION STATE AND YEAR** -- The State, commonwealth, territory, foreign country, Indian nation, U.S. Government, etc. issuing the registration plate and the year of registration as indicated on the registration plate displayed on the vehicle.

**WARNING SIGNS** -- Signs used to warn traffic of existing or potentially hazardous conditions on or adjacent to a road.

**WATER (STANDING, MOVING)** -- Water in the road either standing still or moving which is there because of flooding.

**WEATHER CONDITION** -- The prevailing atmospheric conditions that existed at the time of a crash.

**WORK ZONE** -- A section of road marked to warn motorists that construction, maintenance, repair or utility work is being done. A work zone extends from the first warning sign to the end construction (work) sign or the last traffic control device. Work zones may or may not involve workers or equipment on or near the road. A work zone may be stationary (such as repairing a water line) or moving (such as re-stripping the centerline); it may be short term (such as pothole patching) or long term (such as building a new bridge).

**WORK ZONE RELATED** -- A crash that occurs in or near a work zone or involves vehicles slowed or stopped because of the work zone even if the first harmful event was before the first warning sign.

**WORN, TRAVEL-POLISHED SURFACE** -- A road surface which is well used and shiny.

Appendix G

Long Form

HSMV-90003

# FLORIDA TRAFFIC CRASH REPORT

## LONG FORM

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

DO NOT WRITE IN THIS SPACE

Time & Location	DATE OF CRASH	TIME OF CRASH	TIME OFFICER NOTIFIED	TIME OFFICER ARRIVED	INVEST. AGENCY REPORT NUMBER	HSMV CRASH REPORT NUMBER <b>76063003</b>	
	COUNTY / CITY CODE	FEET or MILE(S)	N S E W	CITY OR TOWN	(Check if in City or Town)	COUNTY	
	AT NODE NO.	FEET or MILE(S)	FROM NODE NO.	NEXT NODE NO.	NO. OF LANES	1. DIVIDED 2. UNDIVIDED	ON STREET, ROAD OR HIGHWAY
	AT THE INTERSECTION OF (street, road or highway)	FEET	MILE(S)	N S E W	FROM INTERSECTION OF (street, road or highway)		

Section 1 Vehicle Pedestrian	DRIVER ACTION	1. Phantom 2. Hit & Run 3. N/A	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	18. Undercarriage 19. Overturn 20. Windshield 21. Trailer			
	TRAILER OR TOWED VEHICLE INFORMATION									SHOW FIRST POINT OF VEHICLE				
	VEHICLE TRAVELLING	ON	AT	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE	1. Disabling 2. Functional 3. No Damage	EST. TRAILER DAMAGE	DAMAGE AND CIRCLE	DAMAGED AREA(S)				
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)		POLICY NUMBER	VEHICLE REMOVED BY:		1. Tow Rotation List	3. Driver							
	NAME OF VEHICLE OWNER (Check Box If Same As Driver)	<input type="checkbox"/>	CURRENT ADDRESS (Number and Street)	CITY AND STATE		ZIP CODE								
	NAME OF OWNER (Trailer or Towed Vehicle)		CURRENT ADDRESS (Number and Street)	CITY AND STATE		ZIP CODE								
	NAME OF MOTOR CARRIER (Commercial Vehicle Only)		CURRENT ADDRESS (Number and Street)	CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBERS								
	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN		CURRENT ADDRESS (Number and Street)	CITY, STATE & ZIP CODE		DATE OF BIRTH								
	DRIVER LICENSE NUMBER	STATE	DL TYPE	REQ. END.	ALC/DRUG TEST TYPE	RESULTS	ALC/DRUG	PHYS. DEF.	RES.	RACE	SEX	INJ.	S. EQUIP.	EJECT.
	HAZARDOUS MATERIALS BEING TRANSPORTED	PLACARDED	IF YES, INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND			WAS HAZARDOUS MATERIAL SPILLED?	RECOMMEND DRIVER RE-EXAM, IF YES EXPLAIN IN NARRATIVE	DRIVER'S PHONE NO.						

Section 2 Vehicle Pedestrian	DRIVER ACTION	1. Phantom 2. Hit & Run 3. N/A	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	18. Undercarriage 19. Overturn 20. Windshield 21. Trailer			
	TRAILER OR TOWED VEHICLE INFORMATION									SHOW FIRST POINT OF VEHICLE				
	VEHICLE TRAVELLING	ON	AT	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE	1. Disabling 2. Functional 3. No Damage	EST. TRAILER DAMAGE	DAMAGE AND CIRCLE	DAMAGED AREA(S)				
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)		POLICY NUMBER	VEHICLE REMOVED BY:		1. Tow Rotation List	3. Driver							
	NAME OF VEHICLE OWNER (Check Box If Same As Driver)	<input type="checkbox"/>	CURRENT ADDRESS (Number and Street)	CITY AND STATE		ZIP CODE								
	NAME OF OWNER (Trailer or Towed Vehicle)		CURRENT ADDRESS (Number and Street)	CITY AND STATE		ZIP CODE								
	NAME OF MOTOR CARRIER (Commercial Vehicle Only)		CURRENT ADDRESS (Number and Street)	CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBERS								
	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN		CURRENT ADDRESS (Number and Street)	CITY, STATE & ZIP CODE		DATE OF BIRTH								
	DRIVER LICENSE NUMBER	STATE	DL TYPE	REQ. END.	ALC/DRUG TEST TYPE	RESULTS	ALC/DRUG	PHYS. DEF.	RES.	RACE	SEX	INJ.	S. EQUIP.	EJECT.
	WAS HAZARDOUS MATERIAL BEING TRANSPORTED	PLACARDED	IF YES, INDICATE NAME OR FOUR DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND			WAS HAZARDOUS MATERIAL SPILLED?	RECOMMEND DRIVER RE-EXAM, IF YES EXPLAIN IN NARRATIVE	DRIVER'S PHONE NO.						

Code Information	VEHICLE TYPE	VEHICLE USE	TRAILER TYPE	RESIDENCE (Driver / Ped.)	PHYSICAL DEFECTS	ALCOHOL / DRUG USE	LOCATION IN VEHICLE
	01 Automobile	01 Private Transportation	01 Single Semi Trailer	1 County of Crash	1 No Defects Known	1 Not Drinking or Using Drugs	1 Front Left
	02 Van	02 Commercial Passengers	02 Tandem Semi Trailer	2 Elsewhere in State	2 Eyesight Defect	2 Alcohol - Under Influence	2 Front Center
	03 Light Truck / P.U. - 2 or 4 rear tires	03 Commercial Cargo	03 Tank Trailer	3 Non-Resident Out of State	3 Fatigue / Asleep	3 Drugs - Under Influence	3 Front Right
	04 Medium Truck - 4 rear tires	04 Public Transportation	04 Saddle Mount / Flatbed	4 Foreign 5 Unknown	4 Hearing Defect	4 Alcohol & Drugs - Under Influence	4 Rear Left
	05 Heavy Truck - 2 or more rear axles	05 Public School Bus	05 Boat Trailer	DL TYPE	5 Illness	5 Had Been Drinking	5 Rear Center
	06 Truck Tractor (Cab-Bootal)	06 Private School Bus	06 Utility Trailer	1 A 2 B 3 C	6 Seizure, Epilepsy, Blackout	6 Pending ALC/DRUG Test Results	6 Rear Right
	07 Motor Home (RV)	07 Ambulance	07 House Trailer	1 White	7 Other Physical Defect		7 In Body Of Truck
	08 Bus (driver + seats for 9-15)	08 Law Enforcement	08 Pole Trailer	2 Black	INJURY SEVERITY	SAFETY EQUIPMENT IN USE	8 Bus Passenger
	09 Bus (driver + seats for over 15)	09 Fire / Rescue	09 Towed Vehicle	3 Hispanic	1 None	1 Not In use	9 Other
10 Bicycle	10 Military	10 Auto Transport	4 Other	2 Possible	2 Seat Belt / Shoulder Harness		
11 Motorcycle	11 Other Government	77 Other	REQUIRED ENDORSEMENTS	3 Non-Incapacitating	3 Child Restraint		
12 Moped	12 Dump		1 Yes	4 Incapacitating	4 Air Bag - Deployed		
13 All Terrain Vehicle	13 Concrete Mixer		2 No	5 Fatal (Within 30 Days)	5 Air Bag - Not Deployed		
14 Train	14 Garbage or Refuse		3 No Endorsement Required	6 Non-Traffic Fatality	6 Safety Helmet		
15 Low Speed Vehicle	15 Cargo Van				7 Eye Protection		
77 Other	77 Other						
							EJECTED
							1 No
							2 Yes
							3 Partial

DRIVER ACTION 1. Phantom <input type="checkbox"/> 2. Hit & Run <input type="checkbox"/> 3. N/A <input type="checkbox"/>	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER						
	TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE										
VEHICLE TRAVELLING N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/>		ON	AT	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE	1. Disabling <input type="checkbox"/> 2. Functional <input type="checkbox"/> 3. No Damage <input type="checkbox"/>	EST. TRAILER DAMAGE	18. Undercarriage <input type="checkbox"/> 19. Overturn <input type="checkbox"/> 20. Windshield <input type="checkbox"/> 21. Trailer <input type="checkbox"/> SHOW FIRST POINT OF DAMAGE AND CIRCLE DAMAGED AREA(S)				
MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)				POLICY NUMBER		VEHICLE REMOVED BY:		1. Tow Rotation List <input type="checkbox"/> 2. Tow Owner's Request <input type="checkbox"/> 3. Driver <input type="checkbox"/> 4. Other <input type="checkbox"/>					
NAME OF VEHICLE OWNER (Check Box If Same As Driver) <input type="checkbox"/>		CURRENT ADDRESS (Number and Street)			CITY AND STATE		ZIP CODE						
NAME OF OWNER (Trailer or Towed Vehicle)		CURRENT ADDRESS (Number and Street)			CITY AND STATE		ZIP CODE						
NAME OF MOTOR CARRIER (Commercial Vehicle Only)		CURRENT ADDRESS (Number and Street)			CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBERS						
NAME OF DRIVER (Take From Driver License) / PEDESTRIAN		CURRENT ADDRESS (Number and Street)			CITY, STATE & ZIP CODE		DATE OF BIRTH						
DRIVER LICENSE NUMBER	STATE	DL TYPE	REQ. END.	ALC/DRUG TEST TYPE 1 Blood 3 Urine 5 None 2 Breath 4 Refused	RESULTS	ALC/DRUG	PHYS. DEF.	RES.	RACE	SEX	INJ.	S. EQUIP.	EJECT.
HAZARDOUS MATERIALS BEING TRANSPORTED	PLACARDED	IF YES, INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND.				WAS HAZARDOUS MATERIAL SPILLED?	RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE	DRIVER'S PHONE NO. ( )					

# 1	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
# 2	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

<b>CONTRIBUTING CAUSES - DRIVER / PEDESTRIAN</b> 01 No Improper Driving / Action <input type="checkbox"/> 02 Careless Driving (Explain in Narrative) <input type="checkbox"/> 03 Failed To Yield Right - of - Way <input type="checkbox"/> 04 Improper Backing <input type="checkbox"/> 05 Improper Lane Change <input type="checkbox"/> 06 Improper Turn <input type="checkbox"/> 07 Alcohol - Under Influence <input type="checkbox"/> 08 Drugs - Under Influence <input type="checkbox"/> 09 Alcohol & Drugs - Under Influence <input type="checkbox"/> 10 Followed Too Closely <input type="checkbox"/> 11 Disregarded Traffic Signal <input type="checkbox"/> 12 Exceeded Safe Speed Limit <input type="checkbox"/> 13 Disregarded Stop Sign <input type="checkbox"/> 14 Failed To Maintain Equip. / Vehicle <input type="checkbox"/> 15 Improper Passing <input type="checkbox"/> 16 Drove Left of Center <input type="checkbox"/> 17 Exceeded Stated Speed Limit <input type="checkbox"/> 18 Obstructing Traffic <input type="checkbox"/>			<b>VEHICLE DEFECT</b> 01 No Defects <input type="checkbox"/> 02 Def. Brakes <input type="checkbox"/> 03 Worn / Smooth Tires <input type="checkbox"/> 04 Defective / Improper Lights <input type="checkbox"/> 05 Puncture / Blowout <input type="checkbox"/> 06 Steering Mech. <input type="checkbox"/> 07 Windshield Wipers <input type="checkbox"/> 08 Equipment / Vehicle Defect <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>			<b>VEHICLE MOVEMENT</b> 01 Straight Ahead <input type="checkbox"/> 02 Slowing / Stopped / Stalled <input type="checkbox"/> 03 Making Left Turn <input type="checkbox"/> 04 Backing <input type="checkbox"/> 05 Making Right Turn <input type="checkbox"/> 06 Changing Lanes <input type="checkbox"/> 07 Entering / Leaving / Parking Space <input type="checkbox"/> 08 Properly Parked <input type="checkbox"/> 09 Improperly Parked <input type="checkbox"/> 10 Making U-Turn <input type="checkbox"/>			<b>VEHICLE SPECIAL FUNCTIONS</b> 1 None <input type="checkbox"/> 2 Farm <input type="checkbox"/> 3 Police Pursuit <input type="checkbox"/> 4 Recreational <input type="checkbox"/> 5 Emergency Operation <input type="checkbox"/> 6 Construction / Maintenance <input type="checkbox"/>		
19 Improper Load <input type="checkbox"/> 20 Disregarded Other Traffic Control <input type="checkbox"/> 21 Driving Wrong Side / Way <input type="checkbox"/> 22 Fleeing Police <input type="checkbox"/> 23 Vehicle Modified <input type="checkbox"/> 24 Driver Distraction (Explain in Narrative) <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>			<b>POINT OF COLLISION</b> 01 On Road <input type="checkbox"/> 02 Not On Road <input type="checkbox"/> 03 Shoulder <input type="checkbox"/> 04 Median <input type="checkbox"/> 05 Turn Lane <input type="checkbox"/>			<b>PEDESTRIAN ACTION</b> 01 Crossing Not at Intersection <input type="checkbox"/> 02 Crossing at Mid-block Crosswalk <input type="checkbox"/> 03 Crossing at Intersection <input type="checkbox"/> 04 Walking Along Road With Traffic <input type="checkbox"/> 05 Walking Along Road Against Traffic <input type="checkbox"/> 06 Working on Vehicle In Road <input type="checkbox"/> 07 Working In Road <input type="checkbox"/> 08 Standing/Playing In Road <input type="checkbox"/> 09 Standing In Pedestrian Island <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/> 88 Unknown <input type="checkbox"/>			<b>SOURCE OF CARRIER INFORMATION</b> 1 Not Applicable <input type="checkbox"/> 2 Shipping Papers <input type="checkbox"/> 3 Vehicle Side <input type="checkbox"/> 4 Driver <input type="checkbox"/> 5 Other <input type="checkbox"/>		
			<b>WORK AREA</b> 01 None <input type="checkbox"/> 02 Nearby <input type="checkbox"/> 03 Entered <input type="checkbox"/>			<b>LOCATION TYPE</b> 1 Primarily Business <input type="checkbox"/> 2 Primarily Residential <input type="checkbox"/> 3 Open Country <input type="checkbox"/>					

<b>FIRST / SUBSEQUENT HARMFUL EVENT(S)</b> 01 Collision With MV in Transport( Rear End) <input type="checkbox"/> 02 Collision With MV in Transport( Head On) <input type="checkbox"/> 03 Collision With MV in Transport( Angle) <input type="checkbox"/> 04 Collision With MV in Transport( Left Turn) <input type="checkbox"/> 05 Collision With MV in Transport( Right Turn) <input type="checkbox"/> 06 Collision With MV in Transport( Sideswipe) <input type="checkbox"/> 07 Collision With MV in Transport( Backed Into) <input type="checkbox"/> 08 Collision With Parked Car <input type="checkbox"/> 09 Collision With MV on Roadway <input type="checkbox"/> 10 Collision With Pedestrian <input type="checkbox"/> 11 Collision With Bicycle <input type="checkbox"/> 12 Collision With Bicycle (Bike Lane) <input type="checkbox"/> 13 Collision With Moped <input type="checkbox"/> 14 Collision With Train <input type="checkbox"/>			15 Collision With Animal <input type="checkbox"/> 16 MV Hit Sign / Sign Post <input type="checkbox"/> 17 MV Hit Utility Pole / Light Pole <input type="checkbox"/> 18 MV Hit Guardrail <input type="checkbox"/> 19 MV Hit Fence <input type="checkbox"/> 20 MV Hit Concrete Barrier Wall <input type="checkbox"/> 21 MV Hit Bridge/Pier/Abutment/Rail <input type="checkbox"/> 22 MV Hit Tree /Shrubbery <input type="checkbox"/> 23 Collision With Construction Barricade Sign <input type="checkbox"/> 24 Collision With Traffic Gate <input type="checkbox"/> 25 Collision With Crash Attenuators <input type="checkbox"/> 26 Collision With Fixed Object Above Road <input type="checkbox"/> 27 MV Hit Other Fixed Object <input type="checkbox"/> 28 Collision With Moveable Object On Road <input type="checkbox"/>			29 MV Ran Into Ditch/Culvert <input type="checkbox"/> 30 Ran Off Road Into Water <input type="checkbox"/> 31 Overturned <input type="checkbox"/> 32 Occupant Fell From Vehicle <input type="checkbox"/> 33 Tractor/Trailer Jackknifed <input type="checkbox"/> 34 Fire <input type="checkbox"/> 35 Explosion <input type="checkbox"/> 36 Downhill Runaway <input type="checkbox"/> 37 Cargo Loss or Shift <input type="checkbox"/> 38 Separation of Units <input type="checkbox"/> 39 Median Crossover <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>			<b>ROAD SYSTEM IDENTIFIER</b> 01 Interstate <input type="checkbox"/> 02 U.S. <input type="checkbox"/> 03 State <input type="checkbox"/> 04 County <input type="checkbox"/> 05 Local <input type="checkbox"/> 06 Turnpike / Toll <input type="checkbox"/> 07 Forest Road <input type="checkbox"/> 08 Private Roadway <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>			<b>LIGHTING CONDITION</b> 01 Daylight <input type="checkbox"/> 02 Dusk <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dark (Street Light) <input type="checkbox"/> 05 Dark (No Street Light) <input type="checkbox"/> 88 Unknown <input type="checkbox"/>		
			<b>ROAD SURFACE CONDITION</b> 01 Dry <input type="checkbox"/> 02 Wet <input type="checkbox"/> 03 Slippery <input type="checkbox"/> 04 Icy <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>			<b>WEATHER</b> 01 Clear <input type="checkbox"/> 02 Cloudy <input type="checkbox"/> 03 Rain <input type="checkbox"/> 04 Fog <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>			<b>ROAD SURFACE TYPE</b> 01 Slag/Gravel/Stone <input type="checkbox"/> 02 Blacktop <input type="checkbox"/> 03 Brick/Block <input type="checkbox"/> 04 Concrete <input type="checkbox"/> 05 Dirt <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>					

<b>ROAD CONDITIONS AT TIME OF CRASH</b> 01 No Defects <input type="checkbox"/> 02 Obstruction With Warning <input type="checkbox"/> 03 Obstruction Without Warning <input type="checkbox"/> 04 Road Under Repair / Construction <input type="checkbox"/> 05 Loose Surface Materials <input type="checkbox"/> 06 Shoulders - Soft / Low / High <input type="checkbox"/> 07 Holes / Ruts / Unsafe Paved Edge <input type="checkbox"/> 08 Standing Water <input type="checkbox"/> 09 Worn / Polished Road Surface <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>		<b>VISION OBSTRUCTED</b> 01 Vision Not Obscured <input type="checkbox"/> 02 Inclement Weather <input type="checkbox"/> 03 Parked / Stopped Vehicle <input type="checkbox"/> 04 Trees / Crops / Bushes <input type="checkbox"/> 05 Load On Vehicle <input type="checkbox"/> 06 Building / Fixed Object <input type="checkbox"/> 07 Signs / Billboards <input type="checkbox"/> 08 Fog <input type="checkbox"/> 09 Smoke <input type="checkbox"/> 10 Glare <input type="checkbox"/> 77 All Other (Explain in Narrative) <input type="checkbox"/>		<b>TRAFFIC CONTROL</b> 01 No Control <input type="checkbox"/> 02 Special Speed Zone <input type="checkbox"/> 03 Speed Control Sign <input type="checkbox"/> 04 School Zone <input type="checkbox"/> 05 Traffic Signal <input type="checkbox"/> 06 Stop Sign <input type="checkbox"/> 07 Yield Sign <input type="checkbox"/> 08 Flashing Light <input type="checkbox"/> 09 Railroad Signal <input type="checkbox"/> 10 Officer / Guard / Flagperson <input type="checkbox"/>		<b>SITE LOCATION</b> 01 Not At Intersection / RR X-ing / Bridge <input type="checkbox"/> 02 At Intersection <input type="checkbox"/> 03 Influenced By Intersection <input type="checkbox"/> 04 Driveway Access <input type="checkbox"/> 05 Railroad <input type="checkbox"/> 06 Bridge <input type="checkbox"/> 07 Entrance Ramp <input type="checkbox"/> 08 Exit Ramp <input type="checkbox"/> 09 Parking Lot - Public <input type="checkbox"/> 10 Parking Lot - Private <input type="checkbox"/>		<b>TRAFFICWAY CHARACTER</b> 01. Straight - Level <input type="checkbox"/> 02. Straight - Upgrade / Downgrade <input type="checkbox"/> 03. Curve - Level <input type="checkbox"/> 04. Curve - Upgrade / Downgrade <input type="checkbox"/> <b>TYPE SHOULDER</b> 01. Paved <input type="checkbox"/> 02. Unpaved <input type="checkbox"/> 03. Curb <input type="checkbox"/>	
--	--	---	--	---	--	--	--	--	--

Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

Appendix H

Update/Continuation Form

HSMV-90004

# FLORIDA TRAFFIC CRASH REPORT

UPDATE  CONTINUATION

DO NOT WRITE IN THIS SPACE

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

DATE OF CRASH	COUNTY / CITY CODE	INVEST. AGENCY REPORT NUMBER	HSMV CRASH REPORT NUMBER
---------------	--------------------	------------------------------	--------------------------

<b>S e c t i o n</b>	DRIVER ACTION 1. Phantom <input type="checkbox"/> 2. Hit & Run <input type="checkbox"/> 3. N/A <input type="checkbox"/>	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td> </tr> <tr> <td>1</td><td>15</td><td>16</td><td>17</td><td>8</td><td></td> </tr> <tr> <td>14</td><td>13</td><td>12</td><td>11</td><td>10</td><td>9</td> </tr> </table>	2	3	4	5	6	7	1	15	16	17	8		14	13	12	11	10	9	18. Undercarriage 19. Overturn 20. Windshield 21. Trailer SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)
	2	3	4	5	6	7																						
1	15	16	17	8																								
14	13	12	11	10	9																							
TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE		EST. MPH		Posted Speed	EST. VEHICLE DAMAGE		1. Disabling <input type="checkbox"/> 2. Functional <input type="checkbox"/> 3. No Damage <input type="checkbox"/>	EST. TRAILER DAMAGE	1. Tow Rotation List <input type="checkbox"/> 2. Tow Owner's Request <input type="checkbox"/> 3. Driver <input type="checkbox"/> 4. Other <input type="checkbox"/>																	
<b>P e d e s t r i a n</b>	VEHICLE TRAVELLING N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/>		ON AT		Est. MPH		Posted Speed	EST. VEHICLE DAMAGE		1. Disabling <input type="checkbox"/> 2. Functional <input type="checkbox"/> 3. No Damage <input type="checkbox"/>	EST. TRAILER DAMAGE	DAMAGE AND CIRCLE DAMAGED AREA(S)																
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)			POLICY NUMBER			VEHICLE REMOVED BY:																					
NAME OF VEHICLE OWNER (Check Box If Same As Driver) <input type="checkbox"/>			CURRENT ADDRESS (Number and Street)			CITY AND STATE			ZIP CODE																			
NAME OF OWNER (Trailer or Towed Vehicle)			CURRENT ADDRESS (Number and Street)			CITY AND STATE			ZIP CODE																			
NAME OF MOTOR CARRIER (Commercial Vehicle Only)			CURRENT ADDRESS (Number and Street)			CITY, STATE AND ZIP CODE			US DOT or ICC MC IDENTIFICATION NUMBERS																			
NAME OF DRIVER (Take From Driver License) / PEDESTRIAN			CURRENT ADDRESS (Number and Street)			CITY, STATE & ZIP CODE			DATE OF BIRTH																			
DRIVER LICENSE NUMBER		STATE	DL TYPE	REQ. END.	ALC/DRUG TEST TYPE 1 Blood 3 Urine 5 None 2 Breath 4 Refused		RESULTS	ALC/DRUG	PHYS.DEF.	RES.	RACE	SEX	INJ.	S. EQUIP.	EJECT.													
HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No <input type="checkbox"/>		PLACARDED 1 Yes 2 No <input type="checkbox"/>	IF YES, INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND.				WAS HAZARDOUS MATERIAL SPILLED? 1 Yes 2 No <input type="checkbox"/>	RECOMMEND DRIVER RE-EXAM, IF YES EXPLAIN IN NARRATIVE		DRIVER'S PHONE NO. ( )																		

<b>S e c t i o n</b>	DRIVER ACTION 1. Phantom <input type="checkbox"/> 2. Hit & Run <input type="checkbox"/> 3. N/A <input type="checkbox"/>	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td> </tr> <tr> <td>1</td><td>15</td><td>16</td><td>17</td><td>8</td><td></td> </tr> <tr> <td>14</td><td>13</td><td>12</td><td>11</td><td>10</td><td>9</td> </tr> </table>	2	3	4	5	6	7	1	15	16	17	8		14	13	12	11	10	9	18. Undercarriage 19. Overturn 20. Windshield 21. Trailer SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)
	2	3	4	5	6	7																						
1	15	16	17	8																								
14	13	12	11	10	9																							
TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE		Est. MPH		Posted Speed	EST. VEHICLE DAMAGE		1. Disabling <input type="checkbox"/> 2. Functional <input type="checkbox"/> 3. No Damage <input type="checkbox"/>	EST. TRAILER DAMAGE	1. Tow Rotation List <input type="checkbox"/> 2. Tow Owner's Request <input type="checkbox"/> 3. Driver <input type="checkbox"/> 4. Other <input type="checkbox"/>																	
<b>P e d e s t r i a n</b>	VEHICLE TRAVELLING N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/>		ON AT		Est. MPH		Posted Speed	EST. VEHICLE DAMAGE		1. Disabling <input type="checkbox"/> 2. Functional <input type="checkbox"/> 3. No Damage <input type="checkbox"/>	EST. TRAILER DAMAGE	DAMAGE AND CIRCLE DAMAGED AREA(S)																
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)			POLICY NUMBER			VEHICLE REMOVED BY:																					
NAME OF VEHICLE OWNER (Check Box If Same As Driver) <input type="checkbox"/>			CURRENT ADDRESS (Number and Street)			CITY AND STATE			ZIP CODE																			
NAME OF OWNER (Trailer or Towed Vehicle)			CURRENT ADDRESS (Number and Street)			CITY AND STATE			ZIP CODE																			
NAME OF MOTOR CARRIER (Commercial Vehicle Only)			CURRENT ADDRESS (Number and Street)			CITY, STATE AND ZIP CODE			US DOT or ICC MC IDENTIFICATION NUMBERS																			
NAME OF DRIVER (Take From Driver License) / PEDESTRIAN			CURRENT ADDRESS (Number and Street)			CITY, STATE & ZIP CODE			DATE OF BIRTH																			
DRIVER LICENSE NUMBER		STATE	DL TYPE	REQ. END.	ALC/DRUG TEST TYPE 1 Blood 3 Urine 5 None 2 Breath 4 Refused		RESULTS	ALC/DRUG	PHYS.DEF.	RES.	RACE	SEX	INJ.	S. EQUIP.	EJECT.													
HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No <input type="checkbox"/>		PLACARDED 1 Yes 2 No <input type="checkbox"/>	IF YES, INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND.				WAS HAZARDOUS MATERIAL SPILLED? 1 Yes 2 No <input type="checkbox"/>	RECOMMEND DRIVER RE-EXAM, IF YES EXPLAIN IN NARRATIVE		DRIVER'S PHONE NO. ( )																		

PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
	\$					
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
	\$					
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
	\$					
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
	\$					

WITNESS NAME (1)	CURRENT ADDRESS	CITY & STATE	ZIP CODE	WITNESS NAME (2)	CURRENT ADDRESS	CITY & STATE	ZIP CODE		
WAS INVESTIGATION MADE AT SCENE? 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF NO, THEN WHERE?	IS INVESTIGATION COMPLETE? 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF NO, THEN WHY?	DATE OF REPORT	PHOTOS TAKEN 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF YES, BY WHOM? 1. INVESTIGATING AGENCY <input type="checkbox"/> 2. OTHER			
INVESTIGATOR - RANK & SIGNATURE			ID/BADGE NUMBER	DEPARTMENT		FHP <input type="checkbox"/>	SO <input type="checkbox"/>	PD <input type="checkbox"/>	OTHER <input type="checkbox"/>

<b>CONTRIBUTING CAUSES - DRIVER / PEDESTRIAN</b>		<b>VEHICLE DEFECT</b>		<b>VEHICLE MOVEMENT</b>		<b>VEHICLE SPECIAL FUNCTIONS</b>	
01 No Improper Driving / Action	<input type="checkbox"/>	01 No Defects	<input type="checkbox"/>	01 Straight Ahead	<input type="checkbox"/>	1 None	<input type="checkbox"/>
02 Careless Driving (Explain In Narrative)	<input type="checkbox"/>	02 Def. Brakes	<input type="checkbox"/>	02 Slowing / Stopped / Stalled	<input type="checkbox"/>	2 Farm	<input type="checkbox"/>
03 Failed To Yield Right - of - Way	<input type="checkbox"/>	03 Worn / Smooth Tires	<input type="checkbox"/>	03 Making Left Turn	<input type="checkbox"/>	3 Police Pursuit	<input type="checkbox"/>
04 Improper Backing	<input type="checkbox"/>	04 Defective / Improper Lights	<input type="checkbox"/>	04 Backing	<input type="checkbox"/>	4 Recreational	<input type="checkbox"/>
05 Improper Lane Change	<input type="checkbox"/>	05 Puncture / Blowout	<input type="checkbox"/>	05 Making Right Turn	<input type="checkbox"/>	5 Emergency Operation	<input type="checkbox"/>
06 Improper Turn	<input type="checkbox"/>	06 Steering Mech.	<input type="checkbox"/>	06 Changing Lanes	<input type="checkbox"/>	6 Construction / Maintenance	<input type="checkbox"/>
07 Alcohol - Under Influence	<input type="checkbox"/>	07 Windshield Wipers	<input type="checkbox"/>	07 Entering / Leaving / Parking Space	11 Passing	<b>SOURCE OF CARRIER INFORMATION</b>	
08 Drugs - Under Influence	<input type="checkbox"/>	08 Equipment / Vehicle Defect	77 All Other (Explain In Narrative)	08 Properly Parked	12 Driverless or Runaway Vehicle	1 Not Applicable	<input type="checkbox"/>
09 Alcohol & Drugs - Under Influence	<input type="checkbox"/>	<b>POINT OF COLLISION</b>		09 Improperly Parked	77 All Other (Explain In Narrative)	2 Shipping Papers	<input type="checkbox"/>
10 Followed Too Closely	<input type="checkbox"/>	01 On Road	<input type="checkbox"/>	10 Making U-Turn		3 Vehicle Side	<input type="checkbox"/>
11 Disregarded Traffic Signal	<input type="checkbox"/>	02 Not On Road	<input type="checkbox"/>	<b>PEDESTRIAN ACTION</b>		4 Driver	<input type="checkbox"/>
12 Exceeded Safe Speed Limit	19 Improper Load	03 Shoulder	<input type="checkbox"/>	01 Crossing Not at Intersection	07 Working In Road	5 Other	<input type="checkbox"/>
13 Disregarded Stop Sign	20 Disregarded Other Traffic Control	04 Median	<input type="checkbox"/>	02 Crossing at Mid-block Crosswalk			<input type="checkbox"/>
14 Failed To Maintain Equip. / Vehicle	21 Driving Wrong Side / Way	05 Turn Lane	<input type="checkbox"/>	03 Crossing at Intersection	08 Standing/Playing In Road		<input type="checkbox"/>
15 Improper Passing	22 Fleeing Police	<b>WORK AREA</b>		04 Walking Along Road With Traffic	09 Standing In Pedestrian Island		<input type="checkbox"/>
16 Drove Left of Center	23 Vehicle Modified	01 None	<input type="checkbox"/>	05 Walking Along Road Against Traffic	77 All Other (Explain In Narrative)		<input type="checkbox"/>
17 Exceeded Stated Speed Limit	24 Driver Distraction ( Explain In Narrative)	02 Nearby	<input type="checkbox"/>	06 Working on Vehicle In Road	88 Unknown		<input type="checkbox"/>
18 Obstructing Traffic	77 All Other (Explain In Narrative)	03 Entered	<input type="checkbox"/>				<input type="checkbox"/>

<b>FIRST / SUBSEQUENT HARMFUL EVENT(S)</b>			
01 Collision With MV in Transport( Rear End)	15 Collision With Animal	29 MV Ran Into Ditch/Culvert	<input type="checkbox"/>
02 Collision With MV in Transport( Head On)	16 MV Hit Sign / Sign Post	30 Ran Off Road Into Water	<input type="checkbox"/>
03 Collision With MV in Transport( Angle)	17 MV Hit Utility Pole / Light Pole	31 Overturned	<input type="checkbox"/>
04 Collision With MV in Transport( Left Turn)	18 MV Hit Guardrail	32 Occupant Fell From Vehicle	<input type="checkbox"/>
05 Collision With MV in Transport( Right Turn)	19 MV Hit Fence	33 Tractor/Trailer Jackknifed	<input type="checkbox"/>
06 Collision With MV in Transport( Sideswipe)	20 MV Hit Concrete Barrier Wall	34 Fire	<input type="checkbox"/>
07 Collision With MV in Transport( Backed Into)	21 MV Hit Bridge/Pier/Abutment/Rail	35 Explosion	<input type="checkbox"/>
08 Collision With Parked Car	22 MV Hit Tree /Shrubbery	36 Downhill Runaway	<input type="checkbox"/>
09 Collision With MV on Roadway	23 Collision With Construction Barricade Sign	37 Cargo Loss or Shift	<input type="checkbox"/>
10 Collision With Pedestrian	24 Collision With Traffic Gate	38 Separation of Units	<input type="checkbox"/>
11 Collision With Bicycle	25 Collision With Crash Attenuators	39 Median Crossover	<input type="checkbox"/>
12 Collision With Bicycle (Bike Lane)	26 Collision With Fixed Object Above Road	77 All Other (Explain In Narrative)	<input type="checkbox"/>
13 Collision With Moped	27 MV Hit Other Fixed Object		<input type="checkbox"/>
14 Collision With Train	28 Collision With Moveable Object On Road		<input type="checkbox"/>

( ADDITIONAL NARRATIVE )

(Empty area for additional narrative)

**ADDITIONAL PASSENGERS**

SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.

<b>Violator(s)</b>	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

# Appendix I

## Narrative/Diagram Form

HSMV-90005

# FLORIDA TRAFFIC CRASH REPORT NARRATIVE/DIAGRAM

MAIL TO: DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS SECTION, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

DO NOT WRITE IN THIS SPACE

TIME EMS NOTIFIED (FATALITIES ONLY) <input type="checkbox"/> AM <input type="checkbox"/> PM	TIME EMS ARRIVED (FATALITIES ONLY) <input type="checkbox"/> AM <input type="checkbox"/> PM	DATE OF CRASH	COUNTY / CITY CODE	INVEST. AGENCY REPORT NUMBER	HSMV CRASH REPORT NUMBER
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(NARRATIVE)

SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.

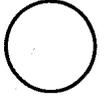
<b>Violator(s)</b>	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

WITNESS NAME (1)	CURRENT ADDRESS	CITY & STATE	ZIP CODE	WITNESS NAME (2)	CURRENT ADDRESS	CITY & STATE	ZIP CODE
------------------	-----------------	--------------	----------	------------------	-----------------	--------------	----------

FIRST AID GIVEN BY - NAME	1. Physician or Nurse 2. Paramedic or EMT 3. Police Officer 4. Certified 1st Aider 5. Other	INJURED TAKEN TO:	BY - NAME
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WAS INVESTIGATION MADE AT SCENE? 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF NO, THEN WHERE?	IS INVESTIGATION COMPLETE? 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF NO, THEN WHY?	DATE OF REPORT	PHOTOS TAKEN 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF YES, BY WHOM? 1. INVESTIGATING AGENCY <input type="checkbox"/> 2. OTHER <input type="checkbox"/>		
INVESTIGATOR - RANK & SIGNATURE		ID/BADGE NUMBER	DEPARTMENT		FHP	SO	PD	OTHER
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DIAGRAM



INDICATE NORTH  
WITH ARROW

Appendix J

Short Form

HSMV-90006

- LAW ENFORCEMENT SHORT FORM REPORT
- DRIVER REPORT OF TRAFFIC CRASH
- DRIVER EXCHANGE OF INFORMATION

DO NOT WRITE IN THIS SPACE

11301506

Time & Location	DATE OF CRASH		TIME OF CRASH		TIME OFFICER NOTIFIED		TIME OFFICER ARRIVED		INVEST. AGENCY REPORT NUMBER		HSMV CRASH REPORT NUMBER				
	COUNTY / CITY CODE		FEET or MILE(S)		N S E W		CITY OR TOWN		(Check if in City or Town)		COUNTY				
Time & Location	AT NODE NO.		FEET or MILE(S)		FROM NODE NO.		NEXT NODE NO.		NO. OF LANES		1. DIVIDED 2. UNDIVIDED				
	AT THE INTERSECTION OF		FEET or MILE(S)		N S E W		FROM INTERSECTION OF		N S E W						
Section 1	YEAR		MAKE (chev, ford, etc.)		TYPE (car, truck, bicycle, etc.)		VEH. LICENSE NUMBER		STATE		VEHICLE IDENTIFICATION NUMBER				
	Check Areas Of Vehicle Damage		Front	R / Front	L / Front	R / Side	L / Side	Rear	R / Rear	L / Rear	EST. VEHICLE DAMAGE		VEHICLE REMOVED BY:		
Section 2	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)		POLICY NUMBER												
	NAME OF VEHICLE OWNER (Check Box If Same As Driver)		CURRENT ADDRESS (Number and Street)					CITY AND STATE			ZIP CODE				
Section 3	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN		CURRENT ADDRESS (Number and Street)					CITY AND STATE			ZIP CODE				
	DRIVER LICENSE NUMBER		STATE	DL TYPE	DRIVER / PEDESTRIAN HOME PHONE (Area Code)		DRIVER / PEDESTRIAN BUSINESS PHONE (Area Code)		RACE	SEX	DATE OF BIRTH				
Section 3	NUMBER OF PASSENGERS		NAME OF PASSENGER		CURRENT ADDRESS (Number and Street)					CITY AND STATE		ZIP CODE			
	YEAR		MAKE (chev, ford, etc.)		TYPE (car, truck, bicycle, etc.)		VEH. LICENSE NUMBER		STATE		VEHICLE IDENTIFICATION NUMBER				
Section 3	Check Areas Of Vehicle Damage		Front	R / Front	L / Front	R / Side	L / Side	Rear	R / Rear	L / Rear	EST. VEHICLE DAMAGE		VEHICLE REMOVED BY:		
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)		POLICY NUMBER												
Section 3	NAME OF VEHICLE OWNER (Check Box If Same As Driver)		CURRENT ADDRESS (Number and Street)					CITY AND STATE			ZIP CODE				
	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN		CURRENT ADDRESS (Number and Street)					CITY AND STATE			ZIP CODE				
Section 3	DRIVER LICENSE NUMBER		STATE	DL TYPE	DRIVER / PEDESTRIAN HOME PHONE (Area Code)		DRIVER / PEDESTRIAN BUSINESS PHONE (Area Code)		RACE	SEX	DATE OF BIRTH				
	NUMBER OF PASSENGERS		NAME OF PASSENGER		CURRENT ADDRESS (Number and Street)					CITY AND STATE		ZIP CODE			
Violator(s)	SECTION #	NAME OF VIOLATOR				FL STATUTE NUMBER		CHARGE			CITATION NUMBER				
	SECTION #	NAME OF VIOLATOR				FL STATUTE NUMBER		CHARGE			CITATION NUMBER				
	SECTION #	NAME OF VIOLATOR				FL STATUTE NUMBER		CHARGE			CITATION NUMBER				
#	PROPERTY DAMAGED - OTHER THAN VEHICLES					EST. AMOUNT		OWNER'S NAME		ADDRESS		CITY	STATE	ZIP	
WITNESS NAME (1)		CURRENT ADDRESS			CITY & STATE		ZIP CODE		WITNESS NAME (2)		CURRENT ADDRESS		CITY & STATE		ZIP CODE
INVESTIGATOR - RANK & SIGNATURE					ID/BADGE NUMBER		DEPARTMENT			FHP		SO	PD	OTHER	

YOU MUST READ AND COMPLY WITH THE INSTRUCTIONS ON THE BACK OF THIS FORM.  
 NO FURTHER ACTION REQUIRED BY YOU, REPORT COMPLETED BY LAW ENFORCEMENT AGENCY.

