This report has been redacted to prevent the disclosure of personally identifiable information. THIS REPORT IS FOR THE USE OF THE DIVISION OF MOTOR VEHICLES. THE DATA IS COLLECTED FOR DMV-349 (Rev. 1/09) STATISTICAL ANALYSIS AND SUBSEQUENT HIGHWAY SAFETY PROGRAMMING. DETERMINATIONS OF "FAULT" ARE THE RESPONSIBILITY OF INSURERS OR OF THE STATE'S COURTS. 0 Do not write in these spaces 2 9 No. of Units Involved Form $\underline{1}$ of $\underline{1}$ Supplemental Report X Non-Reportable Date Received by DMV Date County Time Local Use/Patrol Area 3 02/04/2014 **WAKE** 08:33 P14015855 10 X In 33 Relation to Crash 21 **RALEIGH** outside municipality or 3 Roadway Surface Miles Occurred Х 300 ft. on MCDOWELL ST (R.R. Crossing # Miles Ramp or N S E W 35.7695N Service Road Latitude S SAUNDER ST SOUTH ST 1 toward 21 -78.6447W Longitude X From Use Highway Number, Street Na Use Highway Number, Street Name or Adjacent County or State Line N S E W Altitude **OTHER** PEDESTRIAN HIT & RUN COMMERCIAL UNIT # 2 X VEHICLE PEDESTRIAN HUNKINS HUNKINS Driver JULIE Driver ELENA **NIKOLAYEVNA PLAKHOTNIKOVA** Middle 2 Address 5420 RHETT DR Address1609 HARMONT DR 12 City RALEIGH City RALEIGH NC Zip 27606-9600 NC 27603-4937 State State 0 H (919) 859-4841 Same Address on Driver's H (919) 641-0194 Same Address on Driver's 13 Phone Phone License? X Yes No License? X Yes No w(919) 522-3931 Numbers Numbers D.L.# REDACTED State NC D.L.# REDACTED D.L. NC С С 2 Class Class CDL License CDL License REDACTED 34 Vision 35 Physical 36 D.L. DOB REDACTED 34 Vision 0 35 Physical 36 D.L n 1 1 0 DOB Obstruction Condition Obstruction Condition 39 Results 40 Vehicle 39 Results 40 Vehicle 15 0 0 0 Drugs Suspected Drugs Test (if known) Seizure (DWI) **Drugs Suspected** Drugs Test (if known) Seizure (DWI) 1 Owner ELENA JULIE ANN **HUNKINS NIKOLAYEVNA PLAKHOTNIKOVA** 16 Same as Driver? Same as Driver? Address 5420 RHETT DR Address1609 HARMONT DR Same Address as Driver? 17 Same Address as Driver? 8 City RALEIGH NC City RALEIGH NC 27606-9600 27603-4937 State Zip State Zip Plate Plate Plate Plate Plate # BDA7162 NC 18 Plate # AMX5378 2014 State Year Year 4T1BF1FK7CU610167 5TDYK3EH8CS074099 VIN VIN 19 Х 41 Vehicle 42 Vehicle Vehicle TOYOTA 41 Vehicle 42 Vehicle Vehicle Vehicle Vehicle 2012 TOYOTA Yes Yes Style (Type) Make Style (Type) Drivable Make Drivable Year Year No 44 Estimated 44 Estimated 43 TAD BD-1 43 TAD FD-1 \$450.00 \$350.00 Insurance STATE FARM Insurance PROGRESSIVE Company 205 6144C0133S Company Policy # 12249028 20 COMMERCIAL VEHICLE: Cargo, Carrier Name, Address, Source Carrier Identification Numbers, GVWR, Axles Same Address as owner? Source: 45 Cargo Body Type Axles on Vehicle Truck Including Trailers Shippi IFTA# State State # ng Gross Vehicular Driver Fleet # Weight Rating 25 26 27 28 29 30 32 31 21 22 23 24 Unit 1-Drv 1, Ped 1, etc. 1 W 2 2 5 Veh# 1 Towed To/By 1 1 В 2 Unit 2-Drv 2, Ped 2, etc. W F 2 2 5 ee above Veh# 2 Towed To/By: 1 1 1 1 С D Ε G

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46 Name o	of EMS	3													
47 Injured by EMS to	Taker	ı 									47 Injured Taken by EMS to				
			(Treatment Facility and City or Town)									(Treatment Facility and City or Town)			

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48 POINTS OF INTIAL Unit # 1	15		VEHICLE INFO.	Veh # 1	Veh # 2	ROADWAY INFO.		WORK ZONE RELATED			
CONTACT (Write in Codes) Unit # 2	2		60 Authorized Speed Limit	35	35	69 Road Feature	0	78 Work Zone Area	1	5	
CRASH SEQUENCE (Unit Level)	Unit # 1	Unit # 2	61 Estimate of Original Traveling Speed	15	15	70 Road Character	1	79 Work Activity	 		
49 Vehicle Maneuver/Action	4	4	62 Estimate of Speed at Impact	4	7	71 Road Classification	5	80 Work Area Marked	-		
50 Non-Motorist Action	 	 	63 Tire Impressions Before Impact (ft.)	0	0	72 Road Surface Type	3	81 Crash Location	 		
51 Non-Motorist Location Prior to Impact	 	-	64 Distance travelled After Impact (ft.)	0	0	73 Road Configuration	3	TRAILER INFO.	Unit# 1	Unit# 2	
52 Crash Sequence - First Event for this	21	21	65 Emergency Vehicle Use	+	 	74 Access Control	2	82 Trailer Type	0	0	
Unit 53 Crash Sequence - Second Event	 	- -	66 Post Crash Fire (if 'Yes' check block)	┼┯	+	75 Number of Lanes	8	1st Trailer No. Axles	-	 	
54 Crash Sequence - Third Event	├	 	67 School Bus - Contact Vehicle	┼┾┼	╀┾┽	76 Traffic Control Type	0	Width (inches)		 	
55 Crash Sequence - Fourth Event	 	 	68 School Bus - Noncontact Vehicle	┼┼┼	╀┼	77 Traffic Control Oper	ļ Ť	Length (feet)		<u> </u>	
56 Most Harmful Event for this Unit	21	21			Ш			2nd Trailer No. Axles			
57 Distance/Direction of Object Struck	1	1	COMMERCIAL VEHICLE: Hazardor Haz Mat Placard Yes	us Material Inv		Unit	$\langle \rangle$	Width (inches) Length (feet)	<u> </u>	↓	
58 Vehicle Underride/Override	3	3	Hazardous Cargo	4-4	digit placard n		er from	83 Unit #			
59 Vehicle Defects	0	0	Released (Does not include fuel fro	rom fuel tank)	anie nom ulan	nond of box bottom of dial	illollu	Overwidth Trailer and Overwidth	Overwidth F	Permit #	
GG VOINGIG BOIGGIG			Carrying Haz Mat Yes	No _				Mobilehome			
	70 St	PALE	T DAWS		Î	MCDOW		SOUTH ST	R ST		
Unit # 1 was X Traveling Parked Facing	X N S	E W	on MCDOWELL ST	L	Jnit#2 was		X D	on MCDOWEL	<u>L ST</u>		
NARRATIVE (include pertinent is listed elsewhere of VEHICLE 2 FAILED TO RI	n the form)		VEHICLE I WAS SEC EED. VEHICLE 2 THEN CO) WITH V	<u>(EHICLE 1.</u>		State Estimated Property? Damage \$	VER OF		
				WITNESSE	≣S			Ш			
Name			Address				Phone I	No			
Name			Address				Phone N	No.			
			TR/	AFFIC VIOLAT	TION(S)						
Name			Charge(s) (Citation # optional)								
Name			Address								
Officer Name			Officer Number		Department			n	ate of Report		
OFFICER M R						EPARTMENT	NC09		2/04/2014	. <u> </u>	