

## Vehicle Table

Field	Right Justify	From	To	Length	Notes
Year		1	4	4	
County Code		5	6	2	
Municipality Code		7	8	2	
Department Case Number		9	31	23	
Comma		32	32	1	
Vehicle Number	Y	33	34	2	
Comma		35	35	1	
Insurance Company Code		36	39	4	
Comma		40	40	1	
Owner State		41	42	2	
Comma		43	43	1	
Make of Vehicle		44	73	30	
Comma		74	74	1	
Model of Vehicle		75	94	20	
Comma		95	95	1	
Color of Vehicle		96	98	3	
Comma		99	99	1	
Year of Vehicle		100	103	4	
Comma		104	104	1	
License Plate State		105	106	2	
Comma		107	107	1	
Vehicle Weight Rating		108	108	1	
Comma		109	109	1	
Towed		110	110	1	
Comma		111	111	1	
Removed By		112	113	2	
Comma		114	114	1	
Initial Impact Location	Y	115	116	2	
Comma		117	117	1	
Principal Damage Location	Y	118	119	2	
Comma		120	120	1	
Traffic Controls Present		121	122	2	
Comma		123	123	1	
Vehicle Type		124	125	2	
Comma		126	126	1	
Vehicle Use		127	128	2	

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Comma		129	129	1	
Special Function Vehicles		130	131	2	
Comma		132	132	1	
Cargo Body Type		133	134	2	
Comma		135	135	1	
Contributing Circumstances 1		136	137	2	
Comma		138	138	1	
Contributing Circumstances 2		139	140	2	
Comma		141	141	1	
Direction of Travel		142	143	2	
Comma		144	144	1	
Pre- Crash Action		145	146	2	
Comma		147	147	1	
First Sequence of Events		148	149	2	
Comma		150	150	1	
Second Sequence of Events		151	152	2	
Comma		153	153	1	
Third Sequence of Events		154	155	2	
Comma		156	156	1	
Fourth Sequence of Events		157	158	2	
Comma		159	159	1	
Oversize/Overweight Permit		160	161	2	
Comma		162	162	1	
HazMat Status		163	163	1	
Comma		164	164	1	
HazMat Placard		165	174	10	
Comma		175	175	1	
USDOT / Other Flag		176	176	1	
Comma		177	177	1	
USDOT / OTHER Number		178	187	10	
Comma		188	188	1	
Carrier Name		189	238	50	
Comma		239	239	1	
Hit & Run Driver Flag		240	240	1	