CFBatch-Cover-w10

Type of Report: AUTO ACCIDENT

PayorID: FL00000058 Entity: Miami

State: FL

DATE OF LOSS: 08/14/21

LOSS STREET: 5799 NW 7TH

LOSS CITY : MIAMI

POLICE DEPT.: MIAMI PD

REPORT NUM. : 2108290058952

Image Name: FL00000058_3330945883_211112_1974430.tif



FLORIDA TRAFFIC CRASH REPORT

LONG FORM SHORT FORM UPDATE (Shaded Areas)

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

TOTAL # OF VEHICLE SECTION(S)

TOTAL # OF PERSON SECTION(S)

TOTAL # OF NARRATIVE SECTION(S)

COACILDATE	TWE OF COACH	OOLL, I L OL									
08/29/2021 CRASH IDENTIFIERS	6:00 PM		OF REPORT 9/2021		ORTING AGENCY 08290058952	CASE NUMI		V CRASH REP 32011			
COUNTY CODE CITY CODE 01 66	MIAMI-DADE		N	LACE OR CITY		and the second	CHECK IF W		NE REPORTED 1:05 PM	TIME DISPAT	CHED
6:15 PM 9	E CLEARED SCEN :30 PM	COMPLETE		ASON (If Investig	gation NOT Comple	te)			Notified By: 2 Law Enfo		2
ROADWAY INFORMATIO	N (CHOOSE ON	ILY 1 OF 4 OPTI	ONS)								
CRASH OCCURRED ON STE					11 AT STREET A 5799		2 25.77	ATITUDE 78257	-80	GITUDE 0.290367	
AT FEET MILES			l		WITH STREET, RO.	AD,HIGHWA			4	M MILEPOST	#
1	m Identifier	7 Forest Road 8 Private Road		Туре	of Shoulder		Type of Inter 1 Not at Interse	r section ction	5 Traffic Circle 6 Roundabout		
1 Interstate 2 U.S.	4 County 5 Local	9 Parking Lot		1	1 Paved 2 Unpaved	1	2 Four-Way Into 3 T-Intersection	ersection	7 Five-Point, or		
3 State	6 Tumpike/Toll	77 Other, Expl Narrative	ain in	L	3 Curb		4 Y-Intersection		77 Other, Explai	II III Nariauve	- 1
CRASH INFORMATION (C	HECK IF PICTU		П								
Light Condition	on	Weather Co		Roadway	Surface Condi	tion S	School Bus Related		Manner of Col	lision/Impac	ct
1 Daylight 5 D	ark-Not Lighted	4 Flog, S 5 Sleet/H	mog, Smoke lail/		5 Oil 6 Mud. Dirt. Grav	el	1 No			e, same direct	
	ark-Unknown nting	1 Freezing	Rain		7 Sand	" 1	2 Yes, School Bu		5 Sideswip 6 Rear to	e, Opposite Di	irection
4 Dark-Lighted 77 (Other, Explain in rative	1 Close Dirt	g Sand, Soil		8 Water (standing/moving	- 1	Directly Involved 3 Yes, School Bu		7 Pearto		
		2 Cloudy 77 Othor	Crosswinds Explain in	1 Dry 2 Wet	77 Other, Explain Narrative		Indirectly Involve		Rear 77 Other,	Explain in Nam	rative
1	i	3 Rain Narrative		4 Ice/Frost	88 Unknown			3 Angle	88 Unkno	wn	
First Harmful Eve	nt Non-	-Collision	Collision N	on-Fixed Obj	ect	Collisio	n with Fixed Object	t	First Harmfu	l Event	
<u></u>	1 Oveπur 2 Fire/Exp	n/Rollover plosion	10 Pedestrian 11 Pedalcycle		19 Impact Atteni Cusion		30 Concrete 31 Other Traffic Ba	mer	Location 10	n Roadway	
32	3 Immersi	ion	12 Railway veh	icle (train,	20 Bridge Overt 21 Bridge Pier o		 32 Tree (standing) 		20	Off Roadway	
	4 Jackkni 5 Cargo/E		engine) 13 Animal		22 Bridge Rail	a Support	33 Utility Pole/Ligh 34 Traffic Sign Sup			ihoulder fledian	
First Harmful Event	Loss or S		14 Motor Vehicl Transport	e in	23 Culvert 24 Curb		35 Traffic Signal Si	ipport	~ 60	Gore	
within Interchange	Motor Vel	hicle	15 Parked Moto		25 Ditch		36 Ohter Post, Pol Support	e or		Separator n Parking Lane	∍or
1 No	7 Thrown Object		16 Work Zone/I Equipment	Vaintainance	26 Embankmen 27 Guardrail Fa	t ce	37 Fence		Zo	ne -	ł
1 2 Yes	8 Kan int	Water/Canal	17 Struck By Fa	alling, Shifting	28 Guardrail En	d	38 Mailbox 39 Other Fixed Ob	ject (wall,	10	outside Right-o Roadside	r-way
88 Unknown	9 Other C		Cargo 18 Other <u>Non-</u> F	ived Object	29 Cable Barrie	Г	building, tunnel, et	5.)	88	Unknown	
First Harmfu	ul Event Relatio			ing Circumst	ances: Road o	Worn Trave	-Polished Surface	Contribut	ing Circumstand	es: Environ	ment
	unction			1 -	1	0 Raod Surfa	ce Condition (wet,	,			. 1
	Railway Grade Cros Entrance/Exit Ram		77	1 1		y, snow, slust 1 Obstruction		1	1 1 1		i
1 Non-Junction 15	Crossover - Relate	ed	1 None		·	2 Debris	•				1
2 Interposting 16	Shared-Use of Pat Acceleration/Dcele			Zone (construction		3 Traffic Cont	rol Device ssing or Obscured	1 None 2 Weather Co		imal(s) in Road	
3 Intersection-Related 18	Through Roadway	,		ance/utility	1	4 Non-Highw	ay Work	3 Physical Ob		ither, Explain ir ative	n
	' Other, Explain in N I Unknown	larrative		ders (none, low, s loles, Bumps		7 Otner, Expi 8 Unknown	ain in Narrative	4 Glare	, ,	nknown	
Work Zone Related		h in Work Zone	·	 	e of Work Zone	<u> </u>	Workers in Wo	ek Zono	Low Enfor	amont in 16	- Italia
THOIR COILE RELATED	1 Bef	h in Work Zone fore the First Work Z	one	• •	Closure		AAOLKEIS III AAO	IN ZUITE		cement in W Zone	JUIK
1 No		ning Sign vance Waming Area			Shift/Crossover		1 No		1 No		
1 2 Yes	3 Trai	nsition Area	- 1		t on Shoulder or Me nittent or Moving W		2 Yes			r Present	- 1
88 Unknown		ivity Area mination Area		77 Othe	er, Explain in Narrat	tive	88 Ur	iknown	Only Pr	inforcement Ve	ehicle
WITNESSES	<u> </u>						<u> </u>				
NAME					ADDRES	8	CITY & STATE		7	P CODE	
							on a contra		_	COBL	
7.5											
NAME					ADDRES	5	CITY & STATE		Z	P CODE	
NAME					ADDRESS	\$	CITY & STATE		Z	P CODE	
NON VEHICLE PROPERT	Y DAMAGE								<u> </u>	***	
VEH.# PER# PROPER	TY DAMAGE - OTI-	HER THAN VEH.	EST AMT. O	WNER'S NAME	(CHECK II	BUSINESS	ADDRESS	C	ITY & STATE	ZIP CODE	Ē]
1 BARRIE	R WALL OR GUAF	RDRAIL	45000		Ľ.		5799 NW 7TI			L 33126	
page 300 cm of 2000 000 000 000 000 000 000 000 000 0	989 B B B B B B B B B B B B B B B B B B	4.0		IRST WATCH		T 12 (12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9. 99 (114 / 11			∟ ⊘331∠6	
VEU # DED# DEGGE	TV DAK***	ICO TUALI VIII	CCT ALLT		(manua)			KARUS KRAPANS			7
VEH.# PER# PROPER	TY DAMAGE - OTH	HER THAN VEH.	EST. AMT. O	WNER'S NAME	(CHECK I	BUSINESS)	ADDRESS	C	ITY & STATE	ZIP CODE	E

VEHICLE #	1 Check if	Comme		Reporting Ages 210829005	ncy Case Number 8952	er i		HSMV Cr 24532	ash Report Num	h Report Number 11				
Vehicle in Transport Parked Motor Vehicle Working Vehicle	1 VEHICLE LICENSE N	UMBER	STATE FL	REGISTRATIO		Check if Perm	3/3/		-CMH7885					
Hit and Run 1 No	YEAR MAKE		MODEL	-J	STYLE	COLOR		DAMAGE: 1 Disabling	4 Minor	2	ST. AMOUNT			
2 Yes 88 Unknown INSURANCE COMPANY (2020 FRHT		BOX TRUC		Towed due	WHITE -		2 Functional 3 None EMOVED BY	88 Unknown	tation \$2	2,500.00			
ZURICH AMERICAN INSU		BAP337	5.47		to Damage:		DRIVER		2. Ov	vner Request iver her, Explain in	Narrative 1			
NAME OF VEHICLE OWN AMAZON LOGISTICS	ER (CHECK IF BUSINESS)		CURRENT ADD	, 29			CITY & STA	VTE		ZIP VA 981				
Trailer LICENSE NUMBE One:	R STATE REGISTRA	ION EXPIR		ck if Permanent gistration	VIN			YEAR	MAKE	LENGTH	AXLES			
Trailer LICENSE NUMBE	R STATE REGISTRA	ION EXPIR		eck if Permanent	VIN.		1 2 2 1	YEAR	MAKE	LENGTH	AXLES			
VEHICLE N S	E W Off-Road L	Jnknown	ON STREET, I	ROAD, HIGHWAY	<u>Mirky ta</u>		7- 70 100, 40	T EST. SPEED	POSTED		TOTAL LANES			
TRAVELING HAZ. MAT. RELEASED	HAZ. MAT. PLACARD	NUMBER	NW 7TH S	T 25 ASS	Area of Ir	nitial Impact		20	40	Most Da	amaged Area			
1 No 2 Yes 88 Unknown	1 No 2 Yes 88 Unknown				2 3 4	5 6 7	01 18	Undercarriag		2 3	4 5 6 7			
MOTOR CARRIER NAME	OO CHIMIOWII	US DOT	NUMBER		14\	16 17 8	19 20 21 ₁	Overturn Windshield Trailer	19 20 ₁ 21	1 (15)	16 17 8			
MOTOR CARRIER ADDRI	ESS		CITY		13 12		ATE ZIP C			13 [1 HONE NUMBE	2 11 10 ER			
Vehicle Body Type	451 On a 41/abida	T	Traffi		-	Com	mercial Mot	tor Vehicle (Configuration					
17	15 Low Speed Vehicle 16 (Sport) Utility Vehicle 17 Cargo Van (10,000 lbs	1	1 Two-Way, N	•		1 Vehicle 1 for Hazard	0,000 lbs or le: ous Materials	ss Placarded	8 Tractor	Triple nore than 10,00	00 lbs (4,536 .			
1 Passenger Car	(4,536 kg) or less) 18 Motor Coach			ivided, Unprotecte	ed L	more than	nit Truck (2-axi 10,000 lbs (4,5 nit Truck (3 or i	536 kg))	10 Bus/La	not Classify arge van (seats s, including driv				
2 Passenger Van 3 Pickup 7 Motor Home	19 Other Light Trucks (10, (4,536 kg) or less)		(painted >4 fe 4 Two-Way, D Median Barrie	ivided, Positive		4 Truck Pu	illing Trailer(s) actor (bobtail)	more axioo,	11 Bus (s	eats for more t	han 15			
8 Bus 11 Motorcycle	20 Medium/Heavy Trucks than 10,000 lbs (4,536 kg) 21 Farm Labor Vehicle		5 One-Way 7 88 Unknown				actor/Semi-Trai actor/Double Tr		•	Explain in Nar	•			
12 Moped 13 All Terrain Vehicle (AT\	77 Other, Explain in Nагта	tive	65 CHRIOWI	1 Sir	er Type			Car	go Body Type					
	n/Non-Commercial		TRAILER 1	TRAILER 2 3 Ta	indem Semi Trail ink Trailer iddle Mount/Trail	10 Auto Tr	ansport		3 Van/Enclosed	13 Inte Box Contai	ermodal iner Chassis			
2 intra	rstate Carrier astate Carrier in Commerce/Government			5 Bo	at Trailer ility Trailer	Narrative 88 Unknov	- 11		4 Hopper 5 Pole-Trailer	Anothe	hicle Towing er Vehicle			
4 Not	in Commerce/Other Truck			7 Ho	ouse Trailer 1 10,000 lbs (4	.536 kg) or less		1 No Cargo . 2 Rus	6 Cargo Tank 7 Flatbed 8 Dump	(vehic	t Applicable le 10,000 lbs kg) or less not			
Most Harmful Event	Non-Collision 1 Overturn/Rollover 2 Fire/Explosion		Comm GVWR/GCW	R 4	2 10,001-26,00 3 More than 26	00 lbs (4,536-11 5,000 lbs (11,79	,793kg)] ,	9 Concrete Mixer 10 Auto Transpo	r display	ying HM placard ner, Explain in			
	3 Immersion 4 Jackknife	L	Collision with	Non-Fixed Object	4 Not Applicable t		Fixed Object	1 .	11 Garbage/Refu 12 Log	use Narrat 88 Uni				
14	5 Cargo/Equipment Loss or 6 Fell/Jumped From Motor		10 Pedestr 11 Pedalcy	cle			ttenuator/Crash verhead Struct	n Cusnion 30	9 Cable Barrier 9 Concrete Traffi		Emergency Vehicle Use			
Sequence of Events	7 Thrown or Falling Object 8 Ran into Water/Canal 9 Other Non-Collision		13 Animal	Vehicle (train, eng	•		er or Support	32	1 Other Traffic Ba 2 Tree (standing)					
1st 2nd	[40-46 Sequence of Event	s only]	15 Parked	ehicle in Transport Motor Vehicle one/Maintenance		23 Culvert 24 Curb		34	3 Utility Pole/Ligh 4 Traffic Sign Sup 5 Traffic Signal S	oport `				
14	40 equipment Failure (blow brake failure, etc.)	n tire,	Equipment		Cargo or	25 Ditch 26 Embankr	nent	36	6 Other Post, Pol 7 Fence		1 No 2 Yes			
3rd 4th	41 Separation of Units 42 Ran Off Roadway, Right	<u></u>	Vehicle	et in Motion by Mot	tor	27 Guardrail 28 Guardrail			B Mailbox B Other Fixed Ob	ject (wall,	88 Unknown			
	43 Ran Off Roadway, Left 44 Cross Median	<u> </u>	Vehicle M	on-Fixed Object aneuver Action		Traffic	: Control De		uilding, tunnel, et		Defects			
Roadway Grade	45 Cross Centerline 46 Downhill Runaway]	1 Straight Ahe 3 Turning Left 4 Backing	14 Slowir	ed in Traffic ng tiating a Curve			This Vehicle 8 Flashing Sig		1				
2 Hillcrest 3 Uphill	Roadway Alignment	1	5 Turning Righ 6 Changing La	nt 16 Leavir	ng Traffic Lane	1 No C	Controls	9 Railway Cro Device	ssing 1 None 2 Brak	es 1	I3 Wheels			
4 Downhill 5 Sag (bottom)	1 Straight 2 Curve Right		8 Parked 10 Making U-7	77 Other,	Explain in Narra	Device	ool Zone Sign/ control	10 Person (inc Flagman, Office	er 4 Light	ts (head, V	I4 Windows/ Vindshield I5 Mirrors			
Special Functi	ion 1 No Special Function	9 Ambula	11 Overtaking ance	/Passing 14 Intercity I	Bus	Signal 6 Stop		Guard, etc.) 77 Other, Expl	lain in signal, 7 Wipe	ring 1	16 Truck Coupling Frailer Hitch/			
1 of Motor Vehic	2 Farm Vehicle 3 Police	10 Fire T 11 Farm	ruck Labor Transpor	15 Charter/1 t 16 Shuttle B	Four Bus Bus	7 Yield		Narrative 88 Unknown	9 Exha	ust System S	Safety Chains 77 Other, Explain in			
L	7 Taxi 8 Military	12 School 13 Trans	ol Bus sit/Commuter Bu	17 Farm Lal s 88 Unknowr				_			Narrative 38 Unknown			
PERSON # NAME O	DF VIOLATOR		FLS	TATUTE NUMBER			CHARC	3 E , , , , , , , , , , , , , , , , , , ,		CITATIO	N NUMBER			
PERSON # NAME O	OF VIOLATOR		FLS	TATUTE NUMBER		Page 1	CHARG	3E-		CITATIOI	NNUMBER			
		5,74		FATUTE AND ADDRESS							sil e jak k			
PERSON # NAME C	OF VIOLATOR		HLS Z	FATUTE NUMBER			CHARC	3 ℃ .		CITATION	NUMBER			

PERSON# 1						Agency Case Nu 0058952	mber					rash Report 2011	Number			
1 Driver 2 Non-Motorist 3 Passenger	VEHICLE # NAME 1 JANKA	RLOS		RASH	AN	RODRIGI	JEZ.				PHO	NE NUMBER	2	F	Check if Recomme Oriver Re	
CURRENT ADDRESS (Numb	per and Street)			нс	OMEST	EAD			CITY &	STATE				ODE		
DATE OF BIRTH	SEX:	DR	IVERS LICENSE				STATE		EXPIRES	FL	INJURY	SEVERITY	(INJ) 4 (no	33 apacitati		
08/04/1999	1 Male 2 Female 88 Unknown		-362-436-99	-284-0			FL		08/04/	2023	1 None 2 Possi		5 Fa		30 days	3
DL Type	Required Endo	rsement	s	1st	4 11-	DRIVER Driv	ers Actio		ime of Cr			3rd		Conditi		
1 A 2 B 3 C 4 D/Chauffeur 5 E/Operator	3 1 Yes 2 No			1	2 Op	Contribution Action erated MV in Cara gent Manner				ed other Tr	raffic]	Time of Crash		1
6 E/Oper-Rest 7 None	3 No Req. Endo	orsement			4 Imp	led to Yield Rìght- proper Backing proper Turn	of-Way	Mar	rkings	ed Other R ecting/Ove			3 A	pparently sleep or f (sick) or	atigued	
Driver Distracted	(explain i	nside the \	e)	2nd	10 F	illowed too Close	ly		ering	ecung/Ove	#1		6 S 7 P	eizuré, E hysically	oilespsy, I Impaired	
2 Electronic Commu Devices (cell phone	unication (outside t e, etc. in narrativ	il Distraction he vehicle (e)			12 Di	an Red Light rove too Fast for I an Stop Sign	Conditions	to V	Vind, Slipp	or Avoided Dery Surfac		4th	ang 9 U	ry, disturl nder the	(depressi ped, etc.) Influence	of
3 Other Electronic D (navigation device,	Device 6 Texting DVD player) 7 Inattent	ive		L!	15 lm 17 Ex	proper Passing ceeded Posted S		Roa 31 (adway, etc Operated I	MV in Erra			77 (Drugs/Ald plain in N	
DRIVER VISION OBSTRU						rong Side of Wro ailed to Keep in P				igreessive Itributing A				JIKIJOWI		
1 Vision Not Obs 2 Inclement Wea 3 Parked/Stoppe	ather 6 Building/Fixed	Object 1			 -	1		_	DI	RIVER O	R PASS	SENGER	L			
4 Trees/Crops/B	ushes 8 Fog	ir	77 All Other, Expl n Narrative	iain 		Helmet Use		[Eye Prof	,	EP) 3	Restra (RS)	int Syst	ems	
Motor Vehicle Seating P	DRIVER OR PASSE Position: LOCA		SEAT ROW	OTHER	₹	Motor	r-Complia cycle Heln er Helmet	net		1 Yes 2 No 3 Not	Applicab	- Į└	Applicable	e (non-m	otorist)	
Seat Row	Other (LOC)		1 1			3 No I	Helmet					2 Nor 3 Sho	e Used - ulder and	Motor Vel Lap Belt	nicle Öcci Used	upant
1 Left 1 Front 2 Midde 2 Second	1Not Applicable 2 Sleeper Section of 3 Other Enclosed C			Eiect	tion (E	JECT)	Air Ba	g Deplo	yed	5 Deplo		f 5 Lap	ulder Belt Belt Only traint Use	Used		
77 Other 3 Third (explain in 4 Fourth narrative) 77 Other Roy	4 Unenclosed Carg				2	Not Ejected Ejected, Totally Ejected,	2	2 Not D	pplicable eployed	(knee, ai 6 Deplo Combina	yed-	7 Chil 8 Chil	d Restrair d Restrair	it System	- Forwar	d Facing
narrative) 77 Other Rov 88 Unknown 88 Unknown	6 Riding on Motor \ trailing unit)	/ehicle E	exterior (non-		1 р 4	artially Not Applicable		3 Deplo 4 Deplo	yed-Front yed-Side	t 7 Deploy 88 Deplo Unknown	yment	100	ster Seat ild Restra ner, Expla			
	88 Unknown			<u> </u>	N	ON-MOTORIS	<u> </u>			UTIKITOWI						
Non-Motorist Desc 1 Pedestrian 2 Other Pedestrian (wh	eelchari, person in a	1 in	Non-Motorist Le Itersection - Mark Itersection - Unm	ked Cross	walk		8 Sidewal 9 Median 10 Drivew	/Crossin	-		Action	Prior to Cra	5 Walki		g on Side Other (wo	
building, skater, pedest 3 Bicyclist 4 Other Cyclist	nan conveyance, etc.	3 in 4 M	itersection - Othe lidblock - Marked	er4 Midblood d Crosswal	ck - Ma Ik	irked Crosswalk	11 Shared 12 Non-Ti	d-Úse Pa rafficway	ath or Trail Area	2 Wait	sing Roa	idway oss Roadway	playing 7 Adjac	etc.) ent to Ra	odway (e	-
5 Occupant of Motor Ve (parked, etc.)	· 1	6 Bi	ravel Lane - Othe icycle Lane noulder/Roadside		n		77 Other, 88 Unkno		in Narrativ	ve 3 Wall Roadw	king/Cycli vay with 1	ing Along Fraffic (in or	8 Going	er, mediar to or froing in Tra	m School	(K-12)
6 Occupant of a Non-M Transportation Device 7 Unknown Type of Nor	 		1No Im	otorist Ac		Circumstances				4 Walk	ent to trav king/Cycli vay Again	ng Along Ing Traffic (in	(incider 10 Non	t respons e	se)	41
1 None Safety Equipmer		1s1 	3 Failur	Dash e to Yield I e to Obev						or adja	cent to tr	ravel lane)	88 Unki		n in Narra	live
3 Protective Pads Used	6 Not Applicable 77 Other, Explain	2nd	. Signals	. or Officer	7	/ (standing.	Vehicle				11 Impro	per Turn/Mer per Passing	_			
(elbows, knees, shins, etc.) 4 Reflective Clothing (jacket, backpack, etc.)	in Narrative 88 Unknown	_	lying, w 6 Disab	orking, pla	iying) e Relat	ed (working		ole (dark	ng, eating, clothing,	no ·	12 Wrong 77 Other, 88 Unkno	g-Way Riding Explain in N Own	or Walkin arrative	g		
	LCOHOL TESTED:	ALCOH	OL TEST TYPE:		ALCC	HOL/DRUG/E	MS	PECTE	<u> </u>	ORUG TES	STED:	IDRUG	TEST TY	PE-DRI	IG TEST	RESULT:
ALCOHOL USE: 1	I Test Not Given 2 Test Refused	3 Urine	2 Breath	TEST 1 PEN	RESUI NDING	.T:	DRU 1 No	G USE:		1 Test Not 2 Test Refu	Given used	1 Bloc 3 Urin	e	1 P	ositive egative	
88 Unknown	3 Test Given38 Unknown, if Tested	77 Other, in Narrati	ive	88 UN	MPLET	νN —— —		nknown	1 11	3 Test Give 88 Unknow	vn, if Test		n in Narra	tive 88 I		<u> </u>
SOURCE OF TRANSPORT TO 1 Not Transported 2 EMS 3 Law Enforcement	MEDICAL FACILITY		ENCY NAME OF F MIAMI FIRE R			1	N NUMBE	R			- 1	EDICAL FAC			TED TO	
77 Other, Explain in Narrative	88 Unknown	CITY OF	- WIAWI FIRE R		ADDITE	21073 ONAL PASSENG		-					EWORIAL			
PERSON # VEHICLE # NAME						DATE OF BIRTH	INJ	SEX	LOC: S	R	0	EJECT	HU	EP	ABD	RS
CURRENT ADDRESS (Numb	er and Street)		.	CIT	Y		ــــــــــــــــــــــــــــــــــــــ	ļ	<u> </u>	STATE	1		ZIP C	ODE	L	i
		Tauc			,	<u>, </u>										
SOURCE OF TRANSPORT TO 1 Not Transported 2 EMS 3 Law Enforcement Narrative 88 Unknown		EMS	S AGENCY NAM	IE OR ID			EMS	RUN N	UMBER		N	MEDICAL FAC	CILITY TR	ANSPOF	TED TO	
PERSON # VEHICLE # NAME	<u></u> _					DATE OF BIRTH	INJ	SEX	LOC: S	R	T°	EJECT	HU	EP	ABD	RS
CURRENT ADDRESS (Numb	er and Street)			СІТ					<u></u>	STATE			ZIP C	ODF		L
					-]						
SOURCE OF TRANSPORT TO 1 Not Transported 2 EMS 3 Law Enforcement Narrative 88 Unknown		EMS	S AGENCY NAM	E OR ID			EMS	RUN N	UMBER		Ν	EDICAL FAC	CILITY TR.	ANSPOR	TED TO	

Reporting Agency Case Number 2108290058952

HSMV Crash Report Number 24532011

R\$

ABD

TYPE OF DEPT.
POLICE DEPARTMENT

(PD)

PRIOR TO THE CRASH VEHICLE # 1 WAS TRAVELING WESTBOUND ON NW 7TH ST APPROACHING NW 58TH AVE IN THE SECOND LANE.

ACCORDING TO DRIVER OF VEHICLE # 1, A GHOST VEHICLE CUT HIM OFF AND ALSO SLAMMED IT'S BRAKES. DRIVER OF VEHICLE # 1 IN ORDER TO AVOID A COLLISION SWERVED TO THE RIGHT HOWEVER CONTINUED TRAVELING NORTH THROUGH THE PARKING LOT EVENTUALLY COMING TO A COMPLETE STOP ONCE IT COLLIDED WITH THE INCIDENT'S LOCATION WALL.

DRIVER OF VEHICLE # 1 SUSTAINED A POSSIBLE BROKEN LEFT WRIST AND WAS TRANSPORTED VIA CITY OF MIAMI FIRE RESCUE # 11 ALARM # 21073672 TO JACKSON MEMORIAL HOSPITAL WEST.

DUE TO EVIDENCE OBTAINED ON SCENE AND STATEMENTS GATHERED DRIVER OF VEHICLE #1 WILL NOT BE DEEMED AT FAULT.

CURRENT ADDRESS (Number and Street)	CITY	SŢATE	ZIP CODE
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 89 Unknown	AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO
PERSON # VEHICLE # NAME	DATE OF BIR	TH INJ SEX LOC:S R	D EJECT HU EP ABD RS
CURRENT ADDRESS (Number and Street)	CITY	STATE	ZIP CODE
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown	AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO
ADDITIONAL VIOLATIONS			
PERSON# NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
PERSON# NAME OF VIOLATOR	FLSTATUTE NUMBER	CHARGE 1	CITATION NUMBER

ADDITIONAL PASSENGERS

DATE OF BIRTH INJ

SEX

LOC: S

DEPARTMENT

MIAMI POLICE DEPARTMENT

EJECT

RANK

POLICE OFFICER

OFFICER NAME

J.MESA

REPORTING OFFICER

ID/BADGE#

42800

PERSON # VEHICLE # NAME

57 N	799
	NW 7TH ST
NOT TO SCALE	
•	

HSMV 90010 S

5 5 Page _____ of ____