CFBatch-Cover-w10

Type of Report: AUTO ACCIDENT

PayorID: FL00000058 Entity: Miami

State: FL

DATE OF LOSS: 08/21/21

LOSS STREET: 54TH STREET

LOSS CITY : MIAMI FL

POLICE DEPT.: MIAMI

REPORT NUM. :

Image Name: FL00000058_3330928446_211112_1974415.tif



FLORIDA TRAFFIC CRASH REPORT

LONG FORM 🗸

SHORT FORM (Shaded Areas)

UPDATE

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

WAS DOT PROPERTY INVOLVED IN THIS CRASH? 2 TOTAL # OF VEHICLE SECTION(S) 2 TOTAL # OF PERSON SECTION(S) 1 **TOTAL # OF NARRATIVE SECTION(S)**

CRASH DATE	TIME OF CRASH	DATE (OF REPORT	REF	PORTING AGEN	CY CASE NU	UMBER	HSMV CR	ASH REPOR	TNUMBER		
08/21/2021 CRASH IDENTIFIERS	9:26 PM	08/21	/2021	21	0821005687	4		245315	37			
COUNTY CODE CITY CO	DDE COUNTY OF C	CRASH	2023	PLACE OR CITY MIAMI	OF CRASH			CK IF WITHIN LIMITS		REPORTED 6 PM	TIME DISPA	
TIME ON SCENE	TIME CLEARED SCE	NE CHECK IF		EASON (If Investig	gation NOT Comp	olete) .				Notified By 2 Law Enf	/: 1 Motorist	2
9:44 PM ROADWAY INFORMAT	11:15 PM	NLY 1 OF 4 OPTI	ONS)						_	Z Law Elli		
CRASH OCCURRED ON NW 54TH ST	STREET, ROAD, HIG	HWAY	-		1 AT STREET	ADDRESS	# 2	AT LATITU 25 824945	200		NGITUDE 80:208131	
AT FEET MILI	ES N	S E W	AT/FROM I	NTERSECTION \	WITH STREET, A	OAD,HIGH	WAY			4 OR FR	OM MILEPOST	#
1	stem Identifier	7 Forest Road 8 Private Road	lwav	Type	of Shoulder		Type	of Intersect t Intersection	ion	5 Traffic Circle 6 Roundabout		
1 Interstate 2 U.S.	4 County 5 Local	9 Parking Lot	-	3	1 Paved 2 Unpaved	2	2 Four-	Way Intersect	ion	7 Five-Point, o 77 Other, Expla		
3 State	6 Tumpike/Toll	77 Other, Expl Narrative	ain in		3 Curb			rsection		71 Othor, Expir	an in ridiratio	
CRASH INFORMATION				Dooduus	· Confere Con	J121 I	Cabaal Day	S-1-4-1 1			111-1	
4 2 Dusk 3 Dawn 4 Dark-Lighted	5 Dark-Not Lighted 6 Dark-Unknown Lighting 77 Other, Explain in Narrative 88 Unknown	5 Sleet/H Freezing 6 Blowing Dirt 1 Clear 7 Severe	mog, Smoke ail/ Rain g Sand, Soil Crosswinds Explain in	1 Dry 2 Wet 4 Ice/Frost	/ Surface Con 5 Oil 6 Mud, Dirt, Gr 7 Sand 8 Water (standing/movi 77 Other, Expla Narrative 88 Unknown	avel [Directly I	chool Bus	77 1 Front to R 2 Front to Fi 3 Angle	5 Sidesw 6 Rear to 7 Rear to	ipe, same direc ipe, Opposite D Side Rear Explain in Nar	ction Direction
First Harmful E		n-Collision ım/Rollover	Collision I	Non-Fixed Obj	ect 19 Impact Att	Colli	ision with Fixed	Object		First Harmf	ul Event	
First Harmful Even within Interchange 1 No 2 Yes 88 Unknown	2 Fire/E) 3 Immer 4 Jackkr 5 Cargo, Loss or 6 Fell/Ju 6 Motor Ve 7 Throwi	xplosion sion sion iffe //Equipment Shift mped From shicle n or Falling t Water/Canal Collision	10 Pedestrain 11 Pedalcycle 12 Railway vel engine) 13 Animal 14 Motor Vehic Transport 15 Parked Mot 16 Work Zone/ Equipment 17 Struck By F Cargo 18 Other Non-I	cle in tor Vehicle /Maintainance falling, Shifting	Cusion 20 Bridge Ov 21 Bridge Pal 22 Bridge Ra 23 Culvert 24 Curb 25 Ditch 26 Embankm 27 Guardrail I 28 Guardrail I 29 Cable Bar	erhead Struc r or Support l ent eace End	31 Other Toture 32 Tree (s 33 Utility F 34 Traffic 5 35 Traffic 5 36 Ohter F Support 37 Fence 38 Mailbox	Traffic Barrier tanding) Pole/Light Sup Sign Support Signal Suppor Post, Pole or C	t	1 3 4 6 6 7 8 Z 9 11	On Roadway Off Roadway Shoulder Median Gore Separator In Parking Lan one Outside Right- B Roadside B Unknown	
First Har	mful Event Relation	on to	Contribu	ting Circumst	ances: Road		avel-Polished Surfa	200	ontributing	Circumstan	ces: Enviro	nment
1 Non-Junction 2 Intersection 3 Intersection-Related 4 Driveway/Alley Access Related	Junction 5 Railway Grade Cro 14 Entrance/Exit Ra 15 Crossover - Rela 16 Shared-Use of P. 17 Acceleration/Dcel 18 Through Roadwa 77 Other, Explain in 88 Unknown	mp ted ath or Trail leration Lane ly	mainter 6 Shou	a Zone (construction nance/utility Iders (none, low, Holes, Bumps		icy, snow, s 11 Obstruct 12 Debris 13 Traffic C Inoperative 14 Non-Hig	ction in Roadway Control Device Missing or Obscu Thway Work Explain in Narrative	1 N 1 red 2 W 3 P	one /eather Cond hysical Obstra lare	litions 77 uction(s) Na	nimal(s) in Roa Other, Explain rrative Unknown	,
Work Zone Related		sh in Work Zone efore the First Work Z	one		e of Work Zor Closure	e	Workers	in Work Z	one	Law Enfo	rcement in V Zone	Nork
1 No 2 Yes 88 Unknown	2 Ac 3 Tr 4 Ac	ning Sign Ivance Warning Area ansition Area ctivity Area armination Area		2 Lane 3 Work 4 Intern	Closure Shift/Crossover on Shoulder or I nittent or Moving er, Explain in Nar	Work		1 No 2 Yes 88 Unknow	'n	3Law	er Present Enforcement V	/ehicle
WITNESSES			•		A					-		
NAME					ADDRE		CITY/8	STATE			ZIP CODE	
NAME					ADDRE	SS	CITY 8	STATE			ZIP CODE	
NAME	and a			111111	ADDRE	SS	CITY 8	STATE			ZIP CODE	
NON VEHICLE PROPE	RTY DAMAGE OT	HERTRANIVED	EST. AMT.	SVAJA I PERSONA POSTA		TE ELICINE	.00(
VER.# FER.# PROF	ENTEDAMAGE - UT	FIER I HAN VER	LST. AWIT.	OWNER'S NAME	(CHECK	IF BUSINE	.55) ADE	RESS	CIT	Y&STATE	ZIP COD	Ŀ
VEH # PER # PROF	PERTY DAMAGE - OT	HER THAN VEH,	EST AMT.	OWNER'S NAME	(CHECK	IF BUSINE	SS) ADD	DRESS	CIT	Y&STATE	ZIP COD	ıΕ

HSMV 90010 S

1 7 Page ______ of ____

VEHICLE#	Check if (Commercial [210821005	ncy Case Numbe 5 <mark>6874</mark>	r		115MV Cr 24531	ash Report Nun 537	nber	
Vehicle in Transport Parked Motor Vehicle Working Vehicle	1 VEHICLE LICENSE NU AE27848	JMBER ST.	REGISTRATIO 2 09/30/2021		Check if Perm Registration	anen	IN FDXE4FS8E	3DB21527		
Hit and Run 1 No 2 Yes 88 Unknown	YEAR MAKE 2011 FORD	MODEL ECOLIN	IER	STYLE UTILITY	COLOR WHITE -		DAMAGE: 1 Disabling 2 Functional 3 None	4 Minor 88 Unknown	1 2 11	T. AMOUNT 00.00
INSURANCE COMPANY (I SELF INSURED	ORIVĒR)	INSURANCE POLI	CYNUMBER	Towed due to Damage: 1 No 2 Yes	1	VEHICLE WAND	REMOVED BY	1. R 2. O 3. D 4. O	otation wner Request river ther, Explain in N	arrative 3
NAME OF VEHICLE OWNE	ER (CHECK IF BUSINESS)	CURRENT PO BOX 2	ADDRESS 1508			CITY & S	-0.00 Mar W.		AZ 8503	36
Trailer LICENSE NUMBE One:	R STATE REGISTRAT	ION EXPIRES	Check if Permanent Registration	VIN		<u> </u>	YEAR	MAKE	LENGTH	AXLES
Trailer LICENSE NUMBE Two:	R STATE REGISTRATI	ION EXPIRES	Check if Permanent Registration	VIN			YEAR	MAKE	LENGTH	AXLES
VEHICLE N S		☐ NW 7T	ET, ROAD, HIGHWAY H AVENUE		70-ir		AT EST. SPEEL	POSTED 35	4	OTAL LANES
HAZ, MAT, RELEASED 1 No 2 Yes 88 Unknown MOTOR CARRIER NAME	HAZ. MAT. PLACARD 1 No 2 Yes 88 Unknown	NUMBER US DOT NUMBER	CLASS	2 3 4	5 6 7 16 17 8 11 10 9	01 18 19 20 21	Overturn Windshield	19	2 3 4	15 6 7 16 17 8 2 11 10 9
MOTOR CARRIER ADDRE	ESS		CITY		ST	ATE ZIF	CODE		PHONE NUMBER	₹
Vehicle Body Type 19 1 Passenger Car 2 Passenger Van 3 Pickup 7 Motor Home 8 Bus 11 Motorcycle	15 Low Speed Vehicle 16 (Sport) Utility Vehicle 17 Cargo Van (10,000 lbs (4,536 kg) or less) 18 Motor Coach 19 Other Light Trucks (10,0 (4,536 kg) or less) 20 Medium/Heavy Trucks (than 10,000 lbs (4,536 kg)) 21 Farm Labor Vehicle	1 1 Two-\ 2 Two-\ Continu 3 Two-\ (painted 4 Two-\ Median	Nay Trafficway		1 Vehicle 1 for Hazard 2 Single-U more than 3 Single-U 4 Truck Pu 5 Truck Tra 6 Truck Tra	0,000 lbs or ous Material nit Truck (2∹ 10,000 lbs (axle and GVWR 4,536 kg)) or more axles) s) [) Tailer	8 Tracto 9 Truck kg), Car 10 Bus/l occupar 11 Bus (occupar	r/Triple more than 10,000 nnot Classify Large van (seats ints, including drive seats for more thats, including drive ts, including drive r, Explain in Narra	for 9-15 er) an 15 er)
1 Intel 2 Intra 3 Not	n/Non-Commercial restate Carrier istate Carrier in Commerce/Government in Commerce/Other Truck Non-Collision 1 Overtum/Rollover 2 Fire/Explosion 3 Immersion 4 Jackknife	Comm GVWR/6	R 1 TRAILER 2 2 T. 3 T. 5	ingle Semi Trailer andem Semi Trailer andem Mount/Traile oat Trailer tiller trailer tiller trailer ouse Trailer 1 10,000 lbs (4, 2 10,001-26,00 3 More than 26, 4 Not Applicable ct	9 Towed V 10 Auto Tr 77 Other, E Narrative 88 Unknov 536 kg) or less 0 lbs (4,536-1 ,000 lbs (11,75)	ehicle ansport Explain in vn	1 No Cargo 2 Bus	go Body Typ 3 Van/Enclosed 4 Hopper 5 Pole-Trailer 6 Cargo Tank 7 Flatbed 8 Dump 9 Concrete Mix 10 Auto Transp 11 Garbage/Re 12 Log	13 Interior	er Chassis cle Towing r Vehicle Applicable 10,000 lbs kg) or less not ng HM placard ar, Explain in re nown
Sequence of Events 1st 2nd 14 3rd 4th	5 Cargo/Equipment Loss or 6 Fell/Jumped From Motor V 7 Thrown or Falling Object 8 Ran into Water/Canal 9 Other Non-Collision [40-46 Sequence of Events 40 equipment Failure (blown brake failure, etc.) 41 Separation of Units 42 Ran Off Roadway, Right 43 Ran Off Roadway, Left	Pehicle	otor Vehicle in Transpor arked Motor Vehicle fork Zone/Maintenance oment ruck By Falling, Shifting ling Set in Motion by Mo	t Cargo or	19 Impact A 20 Bridge O 21 Bridge Pi 22 Bridge R 23 Culvert 24 Curb 25 Ditch 26 Embankr 27 Guardrai 28 Guardrai	verhead Stri ier or Suppo ail ment I Face	ash Cushion 3 ucture 3 nt 3 3 3 3 3 3 3 3 3 3	9 Cable Barrier 1 Other Traffic E 2 Tree (standing 3 Utility Pole/Lig 4 Traffic Signal 6 Other Post, Po 7 Fence 8 Mailbox 9 Other Fixed O uilding, tunnel, 6	Barrier g), ht Support support support ole, or Support	Emergency Vehicle Use 1 1 No 2 Yes 88 Unknown
Roadway Grade 1 Level 2 Hillcrest 3 Uphill 4 Downhill 5 Sag (bottom) Special Funct of Motor Vehic	44 Cross Median 45 Cross Centerline 46 Downhill Runaway Roadway Alignment 1 Straight 2 Curve Right 3 Curve Left ion 1 No Special Function 2 Farm Vehicle 3 Police	Vehic 1 Straigl 3 Turnin 4 Backir 5 Turnin 6 Chang 8 Parke 10 Maki 11 Over 9 Ambulance 10 Fire Truck 11 Farm Labor Tra	Nameuver Action 14 Stop 25 Charles 15 Negro 16 Leave 17 Enter 17 Chee 18 Unkrataking/Passing 14 Intercity 15 Charter, Insport 16 Shuttle	ped in Traffic ing stitating a Curve ing Traffic Lane ring Traffic Lane r, Explain in Narra iown Bus Trour Bus Bus	1 No () 4 Scho	Controls cool Zone Sig fic Control	Device For This Vehicl 8 Flashing Sig 9 Railway Cro Device 10 Person (in Flagman, Offi Guard, etc.) 77 Other, Exp Narrative 88 Unknown	gnal 1 Not 2 Bra 3 Tire 4 Light signs and alain in 7 Wij 9 Ext 10 Be	kes 13 es 14 hts (head, W II, tail) 15 ering 16 oers Tr aust System Sa ody, Doors 77	Wheels Windows/ Windshield Mirrors Truck Coupling Aller Hitch/ Afety Chains Other, Explain in
1 WANDY PERSON # NAME O	7 Taxi 8 Military DF VIOLATOR DF VIOLATOR OF VIOLATOR	12 School Bus 13 Transit/Commu	FL STATUTE NUMBE	CARE	LESS DRIVIN	G CHA	IRGE IRGE		CITATION AF2GJ5E CITATION	

PERSON # 1	Reporting Agency Case Nur 2108210056874	nber		HSMV Crash Report Nu 24531537	
1 Driver 2 Non-Motorist 3 Passenger VEHICLE # NAME WANDY	BORGES			PHONE NUMBER (786) 414-5646	Check if Recommend Driver Re-exam
CURRENT ADDRESS (Number and Street) 8921 NE 2 AVE REAR	EL PORTAL		CITY & STATE		ZIP CODE 33138
DATE OF BIRTH SEX: 1 Male DRIVERS LICENSE NL	JMBER	STATE	EXPIRES	INJURY SEVERITY (IN- 1 None	J) 4 Incapacitating
08/02/1980 2 Fernale 88 Unknown B-622-880-80-28		FL	08/02/2022	2 Possible 3 Non-Incapacitating	5 Fatal (within 30 days) 1 6 Non-Traffic Fatality
5 1 A 2 B 3 C 4 D/Chauffeur 5 E/Operator 6 E/Oper-Rest 7 None 3 No Req. Endorsement	1st DRIVER Drive 3 1 No Contribution Actio 2 Operated MV in Care Negligent Manner 3 Failed to Yield Right- 4 Improper Backing 6 Improper Turn	elss or 27 Si of-Way 28 Ma	Time of Crash 5 Ran off Roadway 7 Disregarded other Tri gn 8 Disregarded Other R arkings 9 Over-Correcting/Ove	oad	Condition At Time of Crash 1 Apparently Normal 3 Asleep or Fatigued 5 III (sick) or Fainted
1 Tributation (2 Electronic Communication Devices (cell phone, etc. 3 Other Electronic Device (navigation device, DVD player) (navigation device, DVD player) 5 Exting 7 Inattentive 88 Unknown	2nd 10 Followed too Closel 11 Ran Red Light 12 Drove too Fast for C 13 Ran Stop Sign 17 Exceeded Posted S 21 Wrong Side of Wrot 25 Failed to Keep in Pr	y 30 Conditions to On Speed 31 ng Way Re	eering Swerved or Avoided: Wind, Slippery Surfac bject, Non-Motorist in badway, etc. Operated MV in Erral eckless or Agreessive Other Contributing Ac	: Due 4th e, MV, Lic, Manner	6 Seizure, Epilespsy, Blackout 7 Physically Impaired 8 Emotional (depression, angry, disturbed, etc.) 9 Under the Influence of Medications/Drugs/Alcohol 77 Other, Explain in Narrative 88 Unknown
1 Vision Not Obscured 2 Inclement Weather 3 Parked/Stopped Vehicle 4 Trees/Crops/Bushes 5 Load on Vehicle 9 Smoke 6 Building/Fixed Object 7 Signs/Billboards 77 All Other, Explain in Narrative in Narrative	Helmet Use	(HU)		R PASSENGER	Restraint Systems
Motor Vehicle Seating Position: Seat Row Other 1 Left 1 Front 2 Midde 2 Second 2 Sleeper Section of Truck Cab	1 DOT Motord 2 Othe 3 No h	-Compliant cycle Helmet er Helmet	1 Yes 2 No 3 Not.	Applicable 1 Not Ap 2 None I 3 Should 4 Should yed-Other 5 Lap Be	(RS) pplicable (non-motorist) Used - Motor Vehicle Occupant der and Lap Belt Used der Belt Only Used elt Only Used
3 Right 2 Second 3 Other Enclosed Cargo Area 4 Unenclosed Cargo Area 5 Trailing Unit 6 Riding on Motor Vehicle Exterior (nontrailing unit) 88 Unknown 1 Second 2 Second 3 Other Enclosed Cargo Area 5 Trailing Unit 6 Riding on Motor Vehicle Exterior (nontrailing unit) 88 Unknown	Telepton (EJECT) 1 Not Ejected 2 Ejected, Totally 3 Ejected, Partially 4 Not Applicable 88 Unknown NON-MOTORIST	2 Not 3 Dep 4 Dep	Applicable Deployed loyed-Front loyed-Side (knee, ai 6 Deploy Combina 7 Deploy 88 Deplo Unknowr	yed- kition 9 Booste 10 Child 77 Other	Restraint Type Unknown r, Explain in Narrative
1 Pedestrian 2 Other Pedestrian (wheelchari, person in a building, skater, pedestrian conveyance, etc. 3 Bicyclist 4 Other Cyclist 5 Occupant of Motor Vehicle Not in Transport (parked, etc.) 6 Occupant of a Non-Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist 1 Intersection - Marked 2 Intersection - Other In General Street Content of Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist 1 Intersection - Marked 2 Intersection - Marked Crest Content of Street Con	Crosswalk ed Crosswalk Midblock - Marked Crosswalk osswalk ocation Fist Actions/Circumstances per Action	8 Sidewalk 9 Median/Crossi 10 Driveway Acc 11 Shared-Use 12 Non-Trafficwa 77 Other, Explai 88 Unknown	cess Path or Trail ay Area 1 Cros ay Area 2 Wait n in Narrative Roadw adjace Roadw Roadw Roadw Roadw	sing Roadway ing to Cross Roadway ing/Cycling Along vay with Traffic (in or int to travel lane) vay Against Traffic (in	5 Walking/Cycling on Sidewalk 6 In Roadway Other (working, playing, etc.) 7 Adjacent to Raodway (e.g., shoulder, median) 8 Going to or from School (K-12) 9 Working in Trafficway (incident response) 10 None 77 Other, Explain in Narrative 88 Unknown
2 Heimet 3 Heimet 6 Not Applicable 2 2nd Signals, or 5 In Roadw (elbows, knees, shins, etc.) 4 Reflective Clothing (jacket, backpack, etc.) 2nd Signals, or 5 In Roadw lying, working 6 Disabled on, pushing	Officer vay Improperly (standing, ng, playing) Vehicle Related (working g, leaving/approaching) ALCOHOL/DRUG/E	Vehicle 3 Inattentive (talk 9 Not Visible (dar ighting, etc.) IMS	king, eating, etc) rk clothing, no	10 Improper Turn/Merge 11 Improper Passing 12 Wrong-Way Riding or 77 Other, Explain in Nam 88 Unknown	r Walking rative
ALCOHOL USE: 1 1 Test Not Given 1 Blood 2 Breath 3 Unine 2 Test Given 77 Other, Explain 77 Other, Explain	TEST RESULT: 1 PENDING 2 COMPLETED 88 UNKNOWN	AC SUSPECTI DRUG USE 1 No 2 Yes 88 Unknow	1 Test Not 2 Test Refu 3 Test Give	Given 1 Blood used 3 Urine en 77 Othel vn, if Tested Explain i	2 Negative
1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown					
PERSON # VEHICLE # NAME	ADDITIONAL PASSENG DATE OF BIRTH		LOC: S R	O EJECT	HU EP ABD RS
CURRENT ADDRESS (Number and Street)	CITY	_!!	STATE	1. 1	ZIP CODE
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown	DR ID	EMS RUN	NUMBER	MEDICAL FACIL	LITY TRANSPORTED TO
PERSON # VEHICLE # NAME	DATE OF BIRTH	INJ SEX	LOC: S R	O EJECT	HÛ EP ABD RS
CURRENT ADDRESS (Number and Street)	CITY	I ,	STATE	<u>* ,* </u>	ZIP CODE
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain In Narrative 88 Unknown	DR ID	EMS RUN	NUMBER	MEDICAL FACIL	LITY TRANSPORTED TO

Reporting Agency Case Number 2108210056874

HSMV Crash Report Number 24531537

VEHICLE 1 WAS TRAVELING SOUTH ON NW 7TH AVENUE APPROACHING NW 54TH STREET. VEHICLE 2 WAS TRAVELING NORTH ON NW 7TH AVENUE APPROACHING NW 54TH STREET. DRIVER OF VEHICLE 1 ATTEMPTED TO MAKE A LEFT TURN ONTO NW 54TH STREET AND FAILED TO YIELD THE RIGHT OF WAY TO VEHICLE 2 CAUSING VEHICLE 1'S FRONT CENTER BUMPER TO COLLIDE WITH VEHICLE 2'S FRONT LEFT FENDER. PASSENGER OF VEHICLE 2 WAS TRANSPORTED BY RESCUE 29, ALARM #21071271 TO JMH FOR MINOR INJURIES TO HER HEAD, LIP, AND CHEST. VEHICLE 1 CITED. BOTH PARTIES WERE ISSUED DRIVERS EXCHANGE. ADDITIONAL PASSENGERS PERSON # VEHICLE # NAME DATE OF BIRTH INJ LOC: S EJECT RS 8/28/1987 **BORGES** 3 3 ALAIN CURRENT ADDRESS (Number and Street) CITY STATE ZIP CODE EL PORTAL FL 33138 8921 NE 2ND AVENUE SOURCE OF TRANSPORT TO MEDICAL FACILITY

1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in
Narrative 88 Unknown MEDICAL FACILITY TRANSPORTED TO EMS AGENCY NAME OR ID EMS RUN NUMBER 1 DATE OF BIRTH PERSON # VEHICLE # NAME INJ SEX LOC: S ÉJECT ABD RS BURTON 2/2/1990 2 2 3 6 3 WANDA CITY CURRENT ADDRESS (Number and Street) STATE ZIP CODE FL 146 NW 13TH STREET MIAMI 33147 SOURCE OF TRANSPORT TO MEDICAL FACILITY EMS RUN NUMBER MEDICAL FACILITY TRANSPORTED TO MS AGENCY NAME OR ID 2 1 Not Transported 2 EMS 3 Law Er Narrative 88 Unknown CITY OF MIAMI RESCUE 21071271 **JMH ADDITIONAL VIOLATIONS** PERSON# NAME OF VIOLATOR FL STATUTE NUMBER CHARGE CITATION NUMBER FL STATUTE NUMBER CHARGE CITATION NUMBER PERSON# NAME OF VIOLATOR REPORTING OFFICER

ID/BADGE#	RANK	OFFICER NAME	DEPARTMENT	TYPE OF DEPT.
45301	OFC	PETRUZZI		POLICE DEPARTMENT (PD)

HSMV 90010 S

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VEHICLE # 2 Check if C	commercial 🔲	210821005	ncy Case Number 6874		HSMV Ci 24531	rash Report Numbe 1 537	ar .	
1 Vehicle in Transport 2 Parked Motor Vehicle 3 Working Vehicle	MBER STATE FL		ON EXPIRES Che	ck if Permanent				
Hit and Run 1 No 2 Yes 88 Unknown	MODEL PILOT		STYLE I DOOR SEDAN	COLOR RED - RED	DAMAGE: 1 Disabling 2 Functional 3 None	4 Minor 88 Unknown	1 \$1,500.00	ſΤ
INSURANCE COMPANY (DRIVER) INFINITY AUTO INSURANCE	INSURANCE POLICY 109901133676001		Towed due to Damage: 1 No 2 Yes	2 1	HICLE REMOVED BY	1. Rota 2. Own 3. Drive 4. Othe	ation ler Request er er, Explain in Narrative	2
NAME OF VEHICLE OWNER (CHECK IF BUSINESS) EDWIN NATHANIEL SMITH	CURRENT AD 1337 NW 68TI	When the Markey residence in the second		CIT MIA	TY & STATE Ami	FL	ZIP - 33147	
Trailer LICENSE NUMBER STATE REGISTRATION One:		Check if Permanent Registration	VIN		YEAR	MAKE	LENGTH AXLE	:S
Trailer LICENSE NUMBER STATE REGISTRATION	F	Check if Permanent Registration	VIN		YEAR	MAKE	LENGTH AXLE	:S
VEHICLE N S E W Off-Road Un	NW 7TH	T, ROAD, HIGHWAY AVENUE			AT EST. SPEE	POSTED SF	PEED TOTAL LANE 4	ES
HAZ. MAT. PLACARD 1 No 2 Yes 88 Unknown MOTOR CARRIER NAME MOTOR CARRIER ADDRESS	US DOT NUMBER	CLASS	Area of Initial I 2 3 4 5 1 15 16 14 13 12 11	17 8 14 9	18 Undercarriag 19 Overturn 20 Windshield 21 Trailer	19 1 20 21	Most Damaged Area 2 3 4 5 6 1 15 (16 17 14 13 12 11 10 ONE NUMBER	7/8/9
Vohiala Badu Tuna					<u> </u>		ONE NOWBER	
15 Low Speed Vehicle 16 (Sport) Utility Vehicle 17 Cargo Van (10,000 lbs (4,536 kg) or less) 1 Passenger Car 2 Passenger Van 3 Pickup 7 Motor Home 8 Bus 10 Motor Home 12 Moped 13 All Terrain Vehicle (ATV) 19 Chrer Light Trucks (10,000 lbs (4,536 kg)) 11 Motorcycle 12 Moped 13 All Terrain Vehicle (ATV) 10 More Commercial 1 Interstate Carrier 2 Intrastate Carrier 3 Not in Commerce/Government 4 Not in Commerce/Other Truck Most Harmful Event 1 Overtum/Rollover 2 Fire/Explosion	1 Two-Way, 2 Two-Way, Continuous 3 Two-Way, (painted >4 4 Two-Way, Median Bar 5 One-Way, 88 Unknow	y Trafficway yn Trail 1 Sir 2 Ta TRAILER 2 3 Ta 4 Sa 5 Bo 6 Uti 7 Ho	er Type ngle Semi Trailer ndern Semi Trailer 1 ddle Mount/Trailer 1 at Trailer	Vehicle 10,000 or Hazardous Mi single-Unit Trunore than 10,000 Single-Unit Trunore than 10,000 Single-Unit Trunore than 10,000 Truck Pulling Tr Truck Tractor/S Truck Tractor/S Truck Tractor/C Pole Trailer Towed Vehicle O Auto Transpor 7 Other, Explain larrative 8 Unknown Kg) or less (4,536-11,793kg	ck (2-axle and GVWR 0 lbs (4,536 kg)) ck (3 or more axles) railer(s) bobtail) semi-Trailer 0ouble Truck Car rt n in 1 No Cargo 2 Bus g)	8 Tractor/II 9 Truck mo kg), Canno 10 Bus/Lar occupants, 11 Bus (sea	re than 10,000 lbs (4,536 t Classify ge van (seats for 9-15 including driver) ats for more than 15 including driver) explain in Narrative n	s not card
3 Immersion 4 Jackknife 5 Cargo/Equipment Loss or S 6 Fell/Jumped From Motor Ve 7 Thrown or Falling Object 8 Ran into Water/Canal 9 Other Non-Collision 1st 2nd 14	hift 10 Pedes hicle 11 Pedals 12 Railwa 13 Anima 14 Motor 15 Parket 16 Work 17 Struck Anything Vehicle 18 Other	cycle ay Vehicle (train, eng a) Vehicle in Transport d Motor Vehicle Zone/Maintenance nt t By Falling, Shifting of Set in Motion by Mot Non-Fixed Object	19 ine) 20 21 22 23 24 25 Cargo or 26 or 27 28	Bridge Overhea Bridge Pier or S Bridge Rail Culvert Curb Ditch Embankment Guardrail Face Guardrail End	tor/Crash Cushion and Structure 3. Support 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	11 Garbage/Refus 12 Log 9 Cable Barrier 0 Concrete Traffic I 1 Other Traffic Barr 2 Tree (standing) 3 Utility Pole/Light I 4 Traffic Sign Supp 5 Traffic Signal Sup 6 Other Post, Pole, 7 Fence 8 Mailbox 9 Other Fixed Obje uilding, tunnel, etc.	Barrier der Support or Support or Support or Support ot (wall,	Use
Roadway Grade 1 Level 2 Hillcrest 3 Uphill 4 Downhill Runaway 1 Sag (bottom) 1 Special Function of Motor Vehicle 1 At Cross Median 45 Cross Centerline 46 Downhill Runaway 1 Straight 2 Curve Right 3 Curve Left 1 No Special Function 2 Farm Vehicle 3 Police 7 Taxi 8 Military	Vehicle II 1 Straight At 3 Turning Le 4 Backing 5 Turning Ri 6 Changing II 8 Parked 10 Making U 11 Overtakin 9 Ambulance 10 Fire Truck 11 Farm Labor Transpo	eft 14 Slowin 15 Negot ght 16 Leavin Lanes 17 Enterin 77 Other, J-Turn 88 Unkno- ng/Passing 14 Intercity E 15 Charter/I ort 16 Shuttle B 17 Farm La8	ed in Traffic giating a Curve giating a Curve ng Traffic Lane ng Traffic Lane Explain in Narrative wn Bus our Bus us	1 No Controls 4 School Zon Device 5 Traffic Cont Signal 6 Stop Sign 7 Yield Sign	ne Sign/ Device 10 Person (ind	gnal 1 None 2 Brakes 3 Tires 4 Lights signal, tal 6 Steerir 7 Wipers	(head, Windows/ Windshield aii) 15 Mirrors 16 Truck Cou 17 Trailer Hitch/ Safety Chains 17 Other, Exp Narrative	upling s plain in
VIOLATIONS PERSON# NAME OF VIOLATOR PERSON# NAME OF VIOLATOR PERSON# NAME OF VIOLATOR		STATUTE NUMBER STATUTE NUMBER STATUTE NUMBER			CHARGE CHARGE CHARGE		CITATION NUMBER CITATION NUMBER CITATION NUMBER	

PERSON # 2	Reporting Agency Case Nul 2108210056874	nber		SMV Crash Report Nu 24531537	mber
	NATHANIEL SMITH			PHONE NUMBER (786) 800-4670	Check if Recommend Driver Re-exam
CURRENT ADDRESS (Number and Street) 1337 NW 68TH TER	MAMI		CITY & STATE		ZIP CODE
DATE OF BIRTH SEX: DRIVERS LICENSE N		STATE	FL EXPIRES II	NJURY SEVERITY (IN.	33147
1 Male 2 Female 88 Unknown S-530-214-88-24		FL		None Possible Non-Incapacitating	7 4 Incapacitating 5 Fatal (within 30 days) 6 Non-Traffic Fatality
DL Type 1 A 2 B 3 C 4 D/Chauffeur 5 E/Operator 6 E/Oper-Rest 7 None Driver Distracted By 1 Not Distracted 2 Electronic Communication Devices (cell phone, etc. 3 Other Electronic Device (navigation device, DVD player) DRIVER VISION OBSTRUCTIONS Required Endorsements 1 Yes 2 No 3 No Req. Endorsement 4 Other Inside the Vehicle (explain in narrative) 5 External Distraction (outside the vehicle, explain in narrative) 6 Texting 7 Inattentive 88 Unknown	1st DRIVER Driv 1 No Contribution Actic 2 Operated MV in Care Negligent Manner 3 Failed to Yield Right- 4 Improper Backing 6 Improper Turn 2nd 10 Followed too Closel 11 Ran Red Light 12 Drove too Fast for C 13 Ran Stop Sign 15 Improper Passing 17 Exceeded Posted S 21 Wrong Side of Wror 25 Failed to Keep in Pr	Siss or Signature of Signature	Ran off Roadway Disregarded other Traft	oue 4th MV,	Condition At Time of Crash 1 Apparently Normal 3 Asleep or Fatigued 5 Ill (sick) or Fainted 6 Seizure, Epilespsy, Blackout 7 Physically Impaired 8 Emotional (depression, angry, disturbed, etc.) 9 Under the Influence of Medications/Drugs/Alcohol 77 Other, Explain in Narrative 88 Unknown
1 Vision Not Obscured 2 Inclement Weather 3 Parked/Stopped Vehicle 7 Signs/Billiboards 7 All Other Explain			DRIVER OR	PASSENGER	
4 Trees/Crops/Bushes 8 Fog in Narrative DRIVER OR PASSENGER Motor Vehicle Seating Position: LOCATION: SEAT ROW C	Ejection (EJECT) 1 Not Ejected 2 Ejected, Totally 3 Ejected, Totally 4 Not Applicable 88 Unknown	Compliant tycle Helmet r Helmet leilmet Air Bag Depli 6 1 Not. 2 Not. 1 3 Depli 4 Depli	oyed 1 Yes 2 No 3 Not Ap 5 Deployed (knee, air b 6 Deployed combinatio oyed-Front 7 Deployed loyed-Side 88 Deployn Unknown	plicable 1 Not Apr 2 None L 3 Should 4 Should 4 Should 4 Should 5 Lap Be 16t, etc.) 6 Restrai 7 Child R 8 Child R 9 Boostel pent 10 Child 10 Child	Restraint Systems (RS) plicable (non-motorist) Josed - Motor Vehicle Occupant er and Lap Belt Used er Belt Only Used to Only Used to Used - Type Unknown estraint System - Forward Facing estraint System - Rear Facing r Seat Restraint Type Unknown Explain in Narrative
1 Pedestrian 2 Other Pedestrian (wheelchar, person in a building, skater, pedestrian conveyance, etc. 3 Bicyclist 4 Other Cyclist 5 Occupant of Motor Vehicle Not in Transport (parked, etc.) 6 Occupant of a Non-Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist 1 Intersection - Marked 2 Intersection - Unmarks 3 Intersection - Other A 4 Midblock - Marked Crc 5 Travel Lane - Other Lc 6 Bicycle Lane - Other Lc 6 Bicycle Lane 7 shoulder/Roadside 1 Non-Motor 2 Dart/Dash	Crosswalk ed Crosswalk Midblock - Marked Crosswalk osswalk ocation ist Actions/Circumstances oer Action 1 Yeld Right-of-Way	3 Sidewalk 9 Median/Crossir 10 Driveway Acc 11 Shared-Use F12 Non-Trafficwa 77 Other, Explair 38 Unknown	ng Island ess 'ath or Trail y Area 1 in Narrative 3 Walking Roadway adjacent 4 Walking Roadway	ng Roadway y to Cross Roadway y with Traffic (in or to travel lane) g/Cycling Along / Against Traffic (in Traffic	i Walking/Cycling on Sidewalk In Roadway — Other (working, lalaying, etc.) Adjacent to Raodway (e.g., houlder, median) I Going to or from School (K-12) Working in Trafficway ncident response) O None 7 Other, Explain in Narrative 8 Unknown
2 Helmet 3 Lighting 1 Signified 1 Signified 2 Signified 2 Signified 3 Protective Pads Used (elbows, knees, shins, etc.) 4 Reflective Clothing (jacket, 88 Unknown 6 Disabled 1 Signified 5 Signified 5 Signified 5 Signified 5 Signified 6 Signified 1	ay Improperly (standing, ng, playing) Vehicle Related (working	ehicle Inattentive (talki Not Visible (darl ghting, etc.)	ing, eating, etc) 12 k clothing, no 77	Improper Turn/Merge Improper Passing Wrong-Way Riding or Other, Explain in Narra Unknown	
ALCOHOL USE: 1 1 Test Not Given 2 Test Refused 3 Urine 77 Other, Explain in Narrative 1 SOURCE OF TRANSPORT TO MEDICAL FACILITY EMS AGENCY NAME OR ID	ALCOHOL TEST RESULT: 1 PENDING 2 COMPLETED 88 UNKNOWN EMS RUN	C SUSPECTE DRUG USE 1 No 2 Yes 88 Unknowr	1 Test Not Given	ven 1 Blood 3 Urine 77 Other, if Tested Explain in	ST TYPE: DRUG TEST RESULT: 1 Positive 2 Negative 3 Pending Narrative 88 Unknown Y TRANSPORTED TO
1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown					
PERSON # VEHICLE # NAME	ADDITIONAL PASSENGE DATE OF BIRTH	INJ SEX	LOC: S R	O EJECT H	U EP ABD RS
CURRENT ADDRESS (Number and Street)	CITY		STATE		ZIP CODE '
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 1 Law Enforcement 77 Other, Explain in Narrative 89 Unknown		EMS RUN N	IUMBER	MEDICAL FACILI	TY TRANSPORTED TO
PERSON # VEHICLE # NAME	DATE OF BIRTH	INJ SEX	LOC: S R	O EJECT H	J 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 89 Unknown	R ID	EMS RUN N	UMBER	MEDICAL FACILIT	TY TRANSPORTED TO