

CFBatch-Cover-w10

Type of Report: AUTO ACCIDENT

PayorID: FL00000058 Entity: Miami

State: FL

DATE OF LOSS: 09/29/21

LOSS STREET : 57TH ST

LOSS CITY : MIAMI

POLICE DEPT.: MIAMI PD

REPORT NUM. : 24533902

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3331028874

FLORIDA TRAFFIC CRASH REPORT

LONG FORM ☒ SHORT FORM ☐ UPDATE ☐

(Electronic Version)

HIGHWAY SAFETY & MOTOR VEHICLES,
TRAFFIC CRASH RECORDS
NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

Date of Crash 29/Sep/2021 09:11 AM	Time of Crash 29/Sep/2021 09:11 AM	Date of Report 29/Sep/2021 12:00 AM	Invest. Agency Report Number 2109290066523	HSMV Crash Report Number 24533902
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CRASH IDENTIFIERS

County Code 01	City Code 66	County of Crash MIAMI-DADE	Place or City of Crash MIAMI	Within City Limits Yes	Time Reported 29/Sep/2021 09:21 AM	Time Dispatched 29/Sep/2021 09:21 AM
Time on Scene 29/Sep/2021 09:24 AM	Time Cleared Scene 29/Sep/2021 10:35 AM	Completed Yes	Reason (if Investigation NOT Completed)			Notified By Law Enforcement

ROADWAY INFORMATION

Crash Occured On Street, Road, Highway NW 57TH AVE			At Street Address#	At Latitude 25.77758	and Longitude -80.288366
At Feet 156	Or Miles	Direction South	From Intersection With Street, Road, Highway NW 7TH ST	Or From Milepost #	
Road System Identifier 5 Local		Type Of Shoulder 1 Paved	Type Of Intersection 1 Not at Intersection		

CRASH INFORMATION (Check if Pictures Taken) ☐

light Condition 1 Daylight	Weather Condition 1 Clear	Roadway Surface Condition 1 Dry	School Bus Related 1 No	Manner Of Collision
First Harmful Event Type	First Harmful Event 10	First Harmful Event Location 1 On Roadway	Within Interchange No	First Harmful Event Relation to Junction 1 Non-Junction
Contributing Circumstances: Road 1 None		Contributing Circumstances: Road		Contributing Circumstances: Road
Contributing Circumstances: Environment 1 None		Contributing Circumstances: Environment		Contributing Circumstances: Environment
Work Zone Related 1 No	Crash In Work Zone	Type Of Work Zone	Workers In Work Zone	Law Enforcement In Work Zone

VEHICLE (Check if Commercial) ☐

Vehicle 1	Motor Vehicle Type 1 Vehicle in Transport	Hit and Run 1 No	Veh License Number QMUJ13	State FL	Reg. Expires	Permanent Reg.	VIN 2C3CDZAG4MH538515		
Year 2021	Make DODG	Model CHARGER	Style 2D	Color GRY	Extent of Damage Minor	Est. Damage 300	Towed Due To Damage No	Vehicle Removed By DRIVER	Rotation Driver
Insurance Company ENTERPRISE RENTAL COMPANY				Insurance Policy Number ENTERPRISE RENTAL COMPANY					
Name of Vehicle Owner (Check Box If Business) <input type="checkbox"/> WILLIAM ALFRED HELMS			Current Address (Number and Street) 4355 PACKARD DR			City and State JACKSONVILLE FL		Zip Code 32246	
Trailer One:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles
Trailer Two:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles
Vehicle Traveling:	Direction North	On Street, Road, Highway NW 57 AVE				At Est. Speed	Posted Speed 30	Total Lanes 3	
CMV Configuration			Cargo Body Type			Area of Initial Impact		Most Damaged Area	
Comm GVWR/GCWR 4 Not Applicable			Trailer Type (trailer one)		Trailer Type (trailer two)				
Haz. Mat. Release	Haz Mat. Placard	Number	Class						
Motor Carrier Name			US DOT Number						
Motor Carrier Address				City and State		Zip Code		Phone Number	
Comm/Non-Commercial	Vehicle Body Type 1 Passenger Car	Vehicle Defects (one) 1 None		Vehicle Defects (two)		Emergency Vehicle Use 1 No	Special Function of MV 1 No Special Function		
Vehicle Maneuver Action 5 Turning Right	Trafficway 4 Two-Way, Divided, Positive Median Barrier	Roadway Grade 1 Level	Roadway Alignment 1 Straight	Most Harmful Event 2 Collision with Non-Fixed Object		Most Harmful Event Detail 10 Pedestrian			
Traffic Control Device For This Vehicle 1 No Controls	First (1) Sequence of Events 2 Collision with Non-Fixed Object 10 Pedestrian		Second (2) Sequence of Events		Third (3) Sequence of Events		Fourth (4) Sequence of Events		

PERSON RECORD

Person# 1	Description 1 Driver	Vehicle # 1	Name WILLIAM ALFRED HELMS	Date of Birth 30/Dec/1957	Sex 1 Male	Phone Number 9043180995	Re-Exam No
Address 4355 PACKARD DR		City JACKSONVILLE	State FL	Zip Code 32246			
Driver License Number H-452-921-57-470-0	State FL	Expires 30/Dec/2029	DL Type 5 E/Operator	Req. End. 3 No Req Endorsement	Injury Severity 1 None	Ejection 1 Not Ejected	

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Restraint System 3 Shoulder and Lap Belt Used	Air Bag Deployed 2 Not Deployed	Helmet Use	Eye Protection	Seating Location Seat 1 Left	Seating Location Row 1 Front	Seating Location Other		
Drivers Actions at Time of Crash (first) 1 No Contributing Action		Drivers Actions at Time of Crash (second)			Driver Distracted By 1 Not Distracted	Vision Obstruction 1 Vision Not Obscured		
Drivers Actions at Time of Crash (third)		Drivers Actions at Time of Crash (fourth)			Drivers Condition at Time of Crash 1 Apparently Normal			
Suspected Alcohol Use 1 No	Alcohol Tested	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 No	Drug Tested	Drug Test Type	Drug Test Result
Source of Transport to Medical Facility 1 Not Transported		EMS Agency Name or ID		EMS Run Number		Medical Facility Transported To		

PERSON RECORD

Person# 2	Description 2 Non-Motorist	Name ELGA LUISA TAMAYO			Date of Birth 16/Mar/1939		Sex 2 Female	Injury Severity 1 None		Phone Number
Address 725 NW 57TH AVE APT 1305		City MIAMI		State FL			Zip Code 33126			
Non-Motorist Description Detail 1 Pedestrian		Non-Motorist Action Prior to Crash 7 Adjacent to Roadway (e.g., shoulder, median)					Non-Motorist Location at Time of Crash 5 Travel Lane - Other Location			
Non-Motorist Actions/Circumstance (First) 12 Wrong-Way Riding or Walking		Non-Motorist Actions/Circumstance (Second)		Non-Motorist Safety Equipment (One) 1 None			Non-Motorist Safety Equipment (Two)			
Suspected Alcohol Use 1 No	Alcohol Tested	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 No	Drug Tested		Drug Test Type	Drug Test Result	
Source of Transport to Medical Facility 2 EMS		EMS Agency Name or ID 21082273		EMS Run Number 21082273			Medical Facility Transported To JACKSON WEST			

VIOLATIONS

Person# 2	Name ELGA LUISA TAMAYO	Florida Statute Number 316.130(14)	Charge PEDESTRIAN CROSSED INTERSECTION DIAGONALLY	Citation AF8F5HE
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NARRATIVE

Driver of veh#1 was exiting Hampton Hotel located at 777 NW 57 ave proceeding to make a right turn Northbound on NW 57 Ave from NW 7 ST. Non motorist pedestrian advised she was on the sidewalk (not proceeding into a traffic lane), standstill when veh #1 hit her. Driver of veh #1 advised the pedestrian was traveling diagonally from East to West on NW 7 ST while crossing the Northbound travel lanes. Rescue/ Engine 11, Alarm # 21082273, Captain Deglace responded and transport the pedestrian to Jackson West. AIU 611, IBM 7024 was contacted and notified. Contact was made with the Pedestrian at Jackson West Hospital. No surveillance was available at the time.

REPORTING OFFICER

ID/Badge # 41766	Rank and Name OFC A.SANCHEZ	Department MIAMI POLICE DEPARTMENT	Type of Department PD
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NOT TO SCALE

