FLORIDA TRAFFIC CRASH DRIVER INFORMATION EXCHANGE

This Traffic Crash Report can be purchased online at: www.FloridaCrashPortal.com

Crash Number	IDana	ting Aganay										
88298636	FLOR	ting Agency IDA HIGHWAY PA	TROL									
CRASH IDENTIFIERS												
County of Crash MIAMI-DADE		City or Place of C	rash	Cit	ty Limits Crash	Date/Time 2020 11:00 AM		Reporte	d Date/Time 020 11:02 AM			
Roadway Description for Loc			ILD		02/14/	2020 11.00 AIVI		02/14/20	020 11.02 AIVI			
VEHICLE	AVENUE)											
Year Make		Model		Color	State	License Numb	per R	Registratio	on Expires Perm	nanent VIN		
Owner First Name	Owner Mid	COROLLA dle Name	IOwner L	SiL ast Name	FL	JZEU60 Owner Suffix		9/17/2020	if not Person)	stration 2T1Bl	JRHE0JC967	572
GABRIELA Address	of sections consider		ZAPATA Address Other	A				· ·				
925 NW 202 AVE PEMBROKE PINES FL 33029-0000												o C
Owner Phone Number	Owner	Phone Number (ot		Insurance (NATIONAL	Company SECURITY INS	S CO				Policy Number 176903-01952		
Trailer License Number One	State	Reg. Expires	Permaner NO	nt Reg. V	IN		Ye	ear	Make		Length	Axles
Trailer License Number Two	State	Reg. Expires	Permaner NO	nt Reg. V	IN		Ye	ear	Make	William Control	Length	Axles
VEHICLE												
V02 Year Make TOYT		Model COROLLA IM		Color BLU	State FL	License Numb HGLF08		Registratio	n Expires Perm	nanent VIN stration JTNK	ARJE8HJ523	580
Owner First Name ELVIS	Owner Mid	dle Name		ast Name O GONZAL		Owner Suffix			if not Person)	Stration Prints		,,,,
Address 7404 SW 162PL Address Oth								City State Zip Cot MIAMI FL 33193-			Zip Code 33193-3133	3
Owner Phone Number	Owner	Phone Number (ot		Insurance (GEICO	Company				Insurance 4503003	Policy Number		
Trailer License Number One	State	Reg. Expires	Permaner NO		IN		Ye	ear	Make	011	Length	Axles
Trailer License Number Two	State	Reg. Expires	Permaner NO	nt Reg. VI	IN		Ye	ear	Make		Length	Axles
VEHICLE												
V03 Year Make MAZD	ξ	Model 6		Color	State FL	License Numb CSSH04		Registratio		nanent VIN stration 1YVH.	Z8BH1C5M19	9454
Owner First Name MILTON	Owner Mide	dle Name	Owner L BRIONE	ast Name		Owner Suffix			if not Person)	ocide.on		
Address 854 NW 87 AVE 408	Address Other					City MIAMI			Zip Code 33172-3443	3		
Owner Phone Number	Owner	Phone Number (otl	ner)	Insurance C	Company JTO INS CO		1		Insurance UAD073	Policy Number	1001120111	
Trailer License Number One	State	Reg. Expires	Permaner NO		IN INCOM		Ye	ear	Make	040202	Length	Axles
Trailer License Number	State	Reg. Expires	Permaner	nt Reg. VI	IN		Ye	ear	Make		Length	Axles
PERSON RECORD			1110						1			
Person Type DRIVER		NM# Vehicle	# First Name			Middle Name			Last Name ZAPATA		Suffix	
Address 925 NW 202 AVE		1	Address Other			1	Ic	City	KE PINES	State	Zip Code	
Phone Number	Phone	Number (other)		Other Com	ments (Write In)		PEIVIBRUI	VE PINES	FL	33029	
PERSON RECORD												
Person Type DRIVER		NM# Vehicle V02	# First Name ELVIS	е		Middle Name			Last Name BLANCO GON	ZALEZ	Suffix	
Address 7404 SW 162PL			Address Other				IC	City MAMI		State	Zip Code 33193	
Phone Number	Phone	Number (other)		Other Com	ments (Write In)				1 -		
PERSON RECORD												
Person Type DRIVER		NM# Vehicle V03	# First Name TAMARA	е		Middle Name			Last Name ENAMORADO	CONCEPCION	Suffix	
Address 854 NW 87 AVE #408			Address Other		***************************************		I C	City MAMI		State FL	Zip Code 33172	
Phone Number	Phone	Number (other)		Other Com	ments (Write In)						
REPORTING OFFICE	₹									<u> </u>		
ID Number Rank TROOPER	Na	ame R.FEBLES		Troop / Po	ost		Officer .	Agency	VAY PATROL		one Number 5-470-2500	
12000 INCOPER	L.			1-			I - CORRE	2	I MINOL	30.	S +7 U-2000	