

FLORIDA TRAFFIC CRASH REPORT

LONG FORM ☒ SHORT FORM ☐ UPDATE ☐

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

(Electronic Version)

Date of Crash 15/Nov/2018 12:21 PM	Time of Crash 15/Nov/2018 12:21 PM	Date of Report 15/Nov/2018 12:00 AM	Invest. Agency Report Number 18-15103	HSMV Crash Report Number 87922679
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CRASH IDENTIFIERS

County Code 42	City Code 62	County of Crash MARTIN	Place or City of Crash STUART	Within City Limits Yes	Time Reported 15/Nov/2018 12:22 PM	Time Dispatched 15/Nov/2018 12:24 PM
Time on Scene 15/Nov/2018 12:27 PM	Time Cleared Scene 15/Nov/2018 01:26 PM	Completed Yes	Reason (if Investigation NOT Completed)			Notified By Law Enforcement

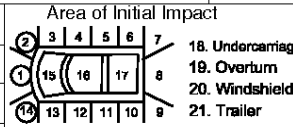
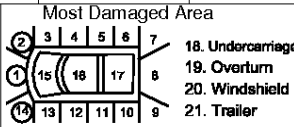
ROADWAY INFORMATION

Crash Occured On Street, Road, Highway US HWY 1	At Street Address#	At Latitude	and	Longitude
At Feet 100	Or Miles	Direction North	From Intersection With Street, Road, Highway SE INDIAN ST	Or From Milepost #
Road System Identifier 2 U.S.	Type Of Shoulder 3 Curb	Type Of Intersection 2 Four-Way Intersection		

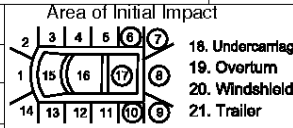
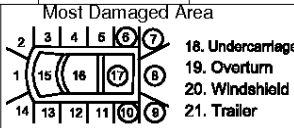
CRASH INFORMATION (Check if Pictures Taken) ☐

Light Condition 1 Daylight	Weather Condition 1 Clear	Roadway Surface Condition 1 Dry	School Bus Related 1 No	Manner Of Collision 1 Front to Rear
First Harmful Event Type	First Harmful Event 14	First Harmful Event Location 1 On Roadway	Within Interchange No	First Harmful Event Relation to Junction 3 Intersection.Related
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 CFJM19		State FL		Reg. Expires 03/Nov/2019		Permanent Reg.		VIN 1MEFM55S8YA634585					
Year 2000	Make MERC	Model	Style	4D	Color GLD	Extent of Damage Disabling		Est. Damage 2000		Towed Due To Damage Yes		Vehicle Removed By KAUFS		Rotation Rotation					
Insurance Company GEICO INDEMNITY COMPANY								Insurance Policy Number 4537189419											
Name of Vehicle Owner (Check Box If Business) MARLENE K WHEALTON					Current Address (Number and Street) 2112 NE PELICAN TER					City and State JENSEN BEACH FL					Zip Code 34957				
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 South		On Street, Road, Highway US HWY 1								At Est. Speed 45		Posted Speed 45		Total Lanes 6				
CMV Configuration					Cargo Body Type					Area of Initial Impact					Most Damaged Area				
Comm GVWR/GCWR					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 1 Straight Ahead		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 14 Motor Vehicle in Transport					
Traffic Control Device For This Vehicle 5 Traffic Control Signal				First (1) Sequence of Events 2 Collision with Non-Fixed Object 14 Motor Vehicle in Transport				Second (2) Sequence of Events				Third (3) Sequence of Events				Fourth (4) Sequence of Events			

VEHICLE (Check if Commercial) ☐

Vehicle 2	Motor Vehicle Type 1 Vehicle in Transport		Hit and Run 1 No		Veh License Number BVMV56		State FL		Reg. Expires 15/Dec/2018		Permanent Reg.		VIN 1ZVBP8AM7B5107022						
Year 2011	Make FORD	Model	Style 2D	Color BLU	Extent of Damage Disabling		Est. Damage 5000		Towed Due To Damage Yes		Vehicle Removed By KAUFS		Rotation Rotation						
Insurance Company GEICO GENERAL INSURANCE COMPANY							Insurance Policy Number 4406912875												
Name of Vehicle Owner (Check Box If Business) MICHAEL RYAN HARTSOCK				Current Address (Number and Street) 8723 SE SANDCASTLE CIR				City and State HOBE SOUND FL				Zip Code 33455							
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 South	On Street, Road, Highway US HWY 1							At Est. Speed 0		Posted Speed 45	Total Lanes 6							
CMV Configuration				Cargo Body Type			Area of Initial Impact					Most Damaged Area							
Comm GVWR/GCWR				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) 1 None			Emergency Vehicle Use 1 No		Special Function of MV 1 No Special Function							

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Vehicle Maneuver Action 13 Stopped in Traffic	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 14 Motor Vehicle in Transport
Traffic Control Device For This Vehicle 5 Traffic Control Signal	First (1) Sequence of Events 2 Collision with Non-Fixed Object	Second (2) Sequence of Events	Third (3) Sequence of Events	Fourth (4) Sequence of Events	
	14 Motor Vehicle in Transport				

PERSON RECORD

Person# 1	Description 1 Driver	Vehicle # 1	Name MARLENE K WHEALTON	Date of Birth 03/Nov/1964	Sex 2 Female	Phone Number 7722098662	Re-Exam
Address 2112 NE PELICAN TER	City JENSEN BEACH	State FL	Zip Code 34957				
Driver License Number W435551649030	State FL	Expires 03/Nov/2020	DL Type 5 E/Operator	Req. End. 3 No Req Endorsement	Injury Severity 2 Possible	Ejection 1 Not Ejected	
Restraint System 3 Shoulder and Lap Belt Used	Air Bag Deployed 2 Not Deployed	Helmet Use 3 No Helmet	Eye Protection 3 Not Applicable	Seating Location Seat 1 Left	Seating Location Row 1 Front	Seating Location Other 1 Not Applicable	
Drivers Actions at Time of Crash (first) 10 Followed too Closely	Drivers Actions at Time of Crash (second)				Driver Distracted By 4 Other Inside the Vehicle (explain in narrative)	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
Source of Transport to Medical Facility 1 Not Transported	EMS Agency Name or ID MARTIN COUNTY FIRE RESCUE	EMS Run Number 19689	Medical Facility Transported To				

PERSON RECORD

Person# 2	Description 1 Driver	Vehicle # 2	Name MICHAEL R HARTSOCK	Date of Birth 15/Dec/1992	Sex 1 Male	Phone Number 7724865739	Re-Exam
Address 8723 SE SANDCASTLE CIR	City HOBE SOUND	State FL	Zip Code 33455				
Driver License Number H632556924550	State FL	Expires 15/Dec/2025	DL Type 5 E/Operator	Req. End. 3 No Req Endorsement	Injury Severity 2 Possible	Ejection 1 Not Ejected	
Restraint System 3 Shoulder and Lap Belt Used	Air Bag Deployed 2 Not Deployed	Helmet Use 3 No Helmet	Eye Protection 3 Not Applicable	Seating Location Seat 1 Left	Seating Location Row 1 Front	Seating Location Other 1 Not Applicable	
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
Source of Transport to Medical Facility 1 Not Transported	EMS Agency Name or ID MARTIN COUNTY FIRE RESCUE	EMS Run Number 19689	Medical Facility Transported To				

VIOLATIONS

Person# 1	Name MARLENE K WHEALTON	Florida Statute Number 316.0895(1)	Charge FOLLOWING TOO CLOSELY	Citation A3DLV4P
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NARRATIVE

<p>When I arrived on scene D1 and D2 were still seated in their vehicles and V1 and V2 were in their original crash position. V2 was stopped in the middle lane of South bound US HWY 1 about 100 feet North of INDIAN ST. V2 had heavy rear end damage. V1 was stopped behind V2 and significant front end damage. D1 stated she was having chest pain and D2 said he felt OK, but was shaken up. Fire Rescue responded to render aid to D1 and D2.</p> <p>D2 stated that he was driving V2 South on US HWY 1 in the middle lane. D1 said as he approached the intersection at SE INDIAN ST the traffic light turned red and traffic ahead of him stopped. D2 stated he applied his brakes and stopped.</p> <p>D2 stated that V1 suddenly impacted the rear of V2. D2 stated that the impact was hard.</p> <p>D1 stated she was driving V1 South bound on US HWY 1 in the middle lane behind V2. D1 stated that she was driving the speed limit and approaching SE INDIAN ST. D1 stated that she took her eyes off the road to light a cigarette and when she looked up V2 was stopped in front of her. D1 said she applied the brakes, but could not stop in time. D1 said that V1 then rear ended V2.</p> <p>After being checked out by Fire Rescue both parties refused to be transported.</p> <p>Kauuffs Towing removed V1 and V2 from the scene.</p> <p>Based on my crash investigation I believe D1 was following V1 too closely and did not allow enough space to slow V1 down. D1 was issued at UTC for following too closely.</p>

REPORTING OFFICER

ID/Badge # 161	Rank and Name Off. Jordan Grose	Department Stuart Police Department	Type of Department PD
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