

Sheet **1** of **1** Sheets

\* X000119187 \*

IY002

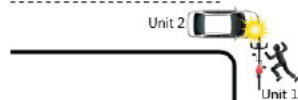
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**X000119187**

A **Diagram** and **Narrative** are required on all **Type B** crashes,  
**even if** units have been moved prior to the officer's arrival.



Jackson Street



Lang's Alley

**NARRATIVE** (Refer to vehicle by Unit No.)

Unit 1 (Pedalcyclist) stated the following in summary: He was cycling northbound on Lang's Alley at the intersection with West Jackson Street. He did not stop, and proceeded into the intersection. He did not see Unit two approaching from the west. He stated his brakes on his bicycle were not working properly. He was unable to stop his bicycle from entering the path of Unit 2. Unit 2 struck Unit 1.

Unit 2 driver stated the following in summary: She was traveling eastbound on Jackson Street approaching Lang's Alley. Unit 1 did not stop and came out of Lang's Alley traveling northbound. Unit 1 struck Unit 2.

Unit 1 was transported to BroMenn Medical Center by his mother.

**LOCAL USE ONLY**Motorist 1 Report No: **20140035903**Motorist 2 Report No: **20140035904**U1 Color: **White**U2 Color: **White**U1 Race: **W**U2 Race: **W**U1 Towed by / to: **BN Wrecker**

U2 Towed by / to:

**COMMERCIAL MOTOR VEHICLE (CMV)**

IF MORE THAN ONE CMV IS INVOLVED, USE SR 1050A  
ADDITIONAL UNITS FORMS.

A CMV is defined as any motor vehicle used to transport  
passengers or property and:

1. Has a weight rating of more than 10,000 pounds (example: truck or truck/trailer combination); or
2. Is used or designed to transport more than 15 passengers, including the driver (example: shuttle or charter bus); or
3. Is designed to carry 15 or fewer passengers and operated by a contract carrier transporting employees in the course of their employment (example: employee transporter - usually a van-type vehicle or passenger car); or
4. Is used or designed to transport between 9 and 15 passengers, including the driver, for direct compensation (example: large van used for specific purpose); or
5. Is any vehicle used to transport any hazardous material (HAZMAT) that requires placarding (example: placards will be displayed on the vehicle).

UNIT \_\_\_\_\_

CARRIER NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

USDOT NO. \_\_\_\_\_

ILLCC NO. \_\_\_\_\_

Source of above info. ☐ Side of Truck ☐ Papers ☐ Driver ☐ Log Book**Gross Vehicle Weight Rating (GVWR).**Were HAZMAT placards displayed on the vehicle ? ☐ Y ☐ N

If yes, name on placard \_\_\_\_\_

4-Digit UN no. \_\_\_\_\_ 1-digit Hazard Class no. \_\_\_\_\_

Did HAZMAT Spill from the vehicle (do not consider fuel from the vehicle's own tank) ? ☐ Y ☐ N ☐ UNKDid HAZMAT Regulations violation contribute to the crash ?  
☐ Y ☐ N ☐ UNKDid Motor Carrier Safety Regulations (MCS) violation contribute to the crash ? ☐ Y ☐ N ☐ UNK

Was a Driver/Vehicle Examination Report form completed ?

HAZMAT ☐ Y ☐ N ☐ UNK Out of Service ? ☐ Y ☐ NMCS ☐ Y ☐ N ☐ UNK Out of Service ? ☐ Y ☐ N

Form No. \_\_\_\_\_

IDOT PERMIT NO. \_\_\_\_\_ W DE LOAD ? ☐ Y ☐ N

TRAILER WIDTH(S): 0-96" 97-102" &gt;102"

TRAILER 1 ☐ ☐ ☐TRAILER 2 ☐ ☐ ☐

TRAILER LENGTH(S): 1 \_\_\_\_\_ ft TRAILER 2 \_\_\_\_\_ ft

TOTAL VEHICLE LENGTH \_\_\_\_\_ ft NO. OF AXLES \_\_\_\_\_

CRASH LOCATION: ☐ CITY OF OR ☐ NEAREST CITY

\_\_\_\_\_ MILES N E S W OR \_\_\_\_\_

CIRCLE ONE

CITY NAME

SELECT CODES FROM BACK COVER OF CRASH BOOKLET:

VEHICLE CONFIGURATION \_\_\_\_\_

CARGO BODY TYPE \_\_\_\_\_ LOAD TYPE \_\_\_\_\_