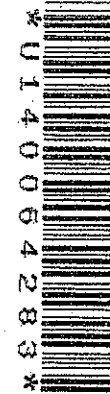


# ILLINOIS TRAFFIC CRASH REPORT

Sheet 1 of 1 Sheets



\*P0J13\*



\*U140064283\*

DRAC	PEOV	TRFD	TRFC	WEAT	ORVA	VIS	VEED	LIHT	COLL	MAV	PPA	PPL
1	12	3	1	1	1	1	1	1	2	1	5	1
U1	U2	U1	U1	U1	U2	U1	U2	U1	U1	U2	U1	U2

INVESTIGATING AGENCY: **McLean County Sheriff's Office**

DAMAGE TO ANY ONE PERSONS: ☐ \$501 - \$1,500 ☐ \$1,501 - \$5,000 ☐ OVER \$5,000

VEHICLE / PROPERTY: ☐ OVER \$1,500

TYPE OF REPORT: ☐ ON SCENE ☒ NOT ON SCENE (DESK REPORT)

INJURY AND / OR TOW DUE TO CRASH: ☐ A No Injury / Drive Away ☒ B Injury and / or Tow Due to Crash

AGENCY CRASH REPORT NO: **151291**

ADDRESS NO.: **2525 NORTH N.D.**

HIGHWAY or STREET NAME: **2525 NORTH N.D.**

CITY: **McLean**

COUNTY: **McLean**

TOWNSHIP: **Money Creek**

INTERSECTION: ☐ RELATED ☐ PRIVATE ☒ HIT & RUN ☐ Y ☒ N

DATE OF CRASH: **10/30/2015**

TIME: **11:15**

AM/PM: ☒ AM ☐ PM

NUMBER MOTOR VEHICLES INVOLVED: **1**

LARS CODE: **1**

NAME: **ALBERTA / DOROTHY J.**

DRIVER: ☒ PARKED ☐ DRIVERLESS ☐ PED ☐ PEOL ☐ EQUES ☐ NAV ☐ NOV

AT INTERSECTION WITH: **2525 NORTH N.D.**

STREET ADDRESS: **2525 NORTH N.D.**

CITY: **McLean**

STATE: **IL**

ZIP: **62525**

SEX: **F**

SAFT: **2**

AIR: **4**

PLATE NO.: **TOYOTA**

STATE: **IL**

YEAR: **2001**

CIRCLE NUMBER(S) FOR DAMAGED AREAS: **10 - UNDER CARRIAGE 11 - TOTAL (ALL AREAS) 12 - OTHER 99 - UNKNOWN**

POINT OF FIRST CONTACT: **1**

INSURANCE CO.: **ALLIED INSURANCE CO.**

POLICY NO.: **SAD**

NAME: **HOJTERMAN / FRANCOIS, NOEL**

DRIVER: ☐ PARKED ☐ DRIVERLESS ☐ PED ☒ PEOL ☐ EQUES ☐ NAV ☐ NOV

STREET ADDRESS: **HOJTERMAN / FRANCOIS, NOEL**

CITY: **McLean**

STATE: **IL**

ZIP: **62525**

SEX: **M**

SAFT: **4**

AIR: **3**

PLATE NO.: **STATE**

STATE: **IL**

YEAR: **2001**

CIRCLE NUMBER(S) FOR DAMAGED AREAS: **10 - UNDER CARRIAGE 11 - TOTAL (ALL AREAS) 12 - OTHER 99 - UNKNOWN**

POINT OF FIRST CONTACT: **1**

INSURANCE CO.: **ALLIED INSURANCE CO.**

POLICY NO.: **SAD**

OWNER ADDRESS (STREET, CITY, STATE, ZIP): **3 N 30**

VEHICLE OWNER (LAST, FIRST MI.): **3 N 30**

PHONE: **3 N 30**

POLICY NO.: **3 N 30**

INSURANCE CO.: **3 N 30**

UNIT	DRAC	PEOV	TRFD	TRFC	WEAT	ORVA	VIS	VEED	LIHT	COLL	MAV	PPA	PPL
1	12	3	1	1	1	1	1	1	1	2	1	5	1
U1	U2	U1	U1	U1	U1	U2	U1	U2	U1	U1	U2	U1	U2

REMEMBER TO USE BLACK INK, PRESS HARD, PRINT LEGIBLY AND COMPLETE ALL REQUIRED FIELDS!

OFFICER ID: **12876**

SIGNATURE: **[Signature]**

BEAT / DIST: **2/21**

SUPERVISOR: **[Signature]**

CITATION NO.: **134888**

DATE POLICE NOTIFIED: **10/30/2015**

TIME NOTIFIED: **11:19**

AM/PM: ☒ AM ☐ PM

WORKERS PRESENT? ☒ Y ☐ N

U140064283

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

Not to Scale

SS 22 NRD

1925 East Rd.

Placard

INDICATE NORTH  
BY ARROW

NARRATIVE (Refer to vehicle by Unit No.)

Unit 1 was traveling North on 1925 East Rd. when it struck

Unit 2. Unit 2 was traveling from the roadway, Unit 1 came to a stop 300 ft. Down the road, with Unit 2's vehicle trapped under Unit 1.

LOCAL USE ONLY

U1 Color 48ccv

U2 Color Black

U1 Towed by / to

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 designated 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).

CARRIER NAME

ADDRESS

CITY/STATE/ZIP

USDOT NO.

ILCC 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.

DOT PERMIT NO. \_\_\_\_\_ WIDE 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 \_\_\_\_\_

SELECT CODES FROM BACK COVER OF CRASH BOOKLET:

VEHICLE CONFIGURATION

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