Division of Motor Vehicles Colorado.gov/Revenue

P06124

MAIL TO: STATE OF COLORADO MOTOR VEHICLE TRAFFIC RECORDS DENVER, CO 80261-0016

04/15/2024

## STATE OF COLORADO TRAFFIC CRASH REPORT

☐ AMENDED/SUPPI		COUNTER REPORT				PUBLIC LAND		PAGE 1	OF 6 PAGES
Case #		Agency ORI				Agency Name			
2024-202406		CODPD0000				DENVER POLICE	E DEPARTM	1ENT	
Date of Report (MM/DD/YY	(Y) Date	of Crash (MM/DD/YYYY)	Time of Crash (24	Hour)	Officer Name			Officer Nu	umber
04/15/2024	04/15	5/2024	1828		BOBOWICZ, J	OSEPH		P21060	
Date Arrived	Date	Roadway Cleared	Date Last Respond	ler Left	Signature				Detail
04/15/2024	04/15	5/2024	04/15/2024		BOBOWICZ, J	OSEPH			2/132D
Time Arrived	Time	Roadway Cleared	Time Last Respond	der Left	Agency Code	)	Invest	tigated	District Number
1835	1900		1900				at Sce	_	1/112
Number Killed Number	er injured	Total Vehicles	Total Non-Motoris	sts	Juvenile(s)	Secondary	Construct	ion	School
0 1		2	0		Involved _	Crash	Zone Rela	ated	Zone
Latitude		Longitude		Coun	ty		City		
3 9 7 8 5 5	7_ °N	_ 1 0 4 9 8	7 5 9 °W	Denv	er		DENVER		
On Road/Street:					Intersection (	Offset	01. Miles		02. Feet
N BROADWAY ST					Distance Unit	0 3	03. At the	Intersection	on
Reference Intersecting R	oad/Stre	et:			Intersection (	Offset Distance	Offset		
E 49TH AVE					.00		Direction	N S	S
HWY NUMBER		MILEPOINT			Milepoint Offs Distance Unit		01. Miles 03. At the	Milepoint	02. Feet
☐ INTERSTATE HWY	ST	ATE HWY CIT	Y ST/CNTY RD		Milepoint Offs	set Distance	Offset		
OTHER RDWY		<del>-</del>					Direction	N . S	S E W
1 OCATION 0 1 02.F	on Roadwa Ian Off Left Ian Off Rig	Side 05. Vehicle Cross			ate Property Median/Island	Number of Lanes Blocked	C	1 LAN POS	ESITION N 0 1
HARMFUL EVEN SEQUENCE		0.6	nd	3	rd	4th		Most Ha	armful Event 0 6
NON-COLLISION CRASH 01. Overturning/Rollover 44. Immersion, Full or Partia 45. Fell from Motor Vehicle 02. Other Non-Collision COLLISION WITH NON-MC 03. School Age To/From Sch 05. Pedestrian 15. Bicycle/Motorized Bicycl COLLISION WITH MOTOR TRANSPORT 06. Front to Front 07. Front to Rear	TORIST ool	08. Front to Side 09. Rear to Side 10. Rear to Rear 11. Side to Side-San 12. Side to Side-Op, COLLISION WITH 6 13. Parked Motor Ve COLLISION WITH 6 17. Domestic Anima IN 18. Wild Animal COLLISION WITH 6 19. Light Pole/Utility 20. Traffic Signal Po	posite Direction DTHER VEHICLE shicle NIMAL DBJECT Pole	21. Sig 41. Gu 42. Gu 23. Cal 24. Cor 48. Ov 49. Ov 50. Brid 26. Vel 27. Cul	ardrail Face ardrail End ble Rail nerete Highway erhead Structure erhead Structure dge Structure (N icle Debris or C vert or Headwal bankment	29. 30. 31. 32. Barrier 33. e (Bridge) 34. e (Not Bridge) 35. lot Overhead) 36. largo 37. II 38. 39.		s or Boulder ossing Equip ding ion/Traffic E Object (De	pment
ROAD CONTO	- 10		03. Curve Right 04. Unknown	R	DAD CONTOL GRA	DR - 0 1 02.	Level Uphill Hill Crest	05.	Downhill Sag/Bottom Unknown
APPROACH/OVERTAIN	ING 0	01. Approach Turn 02. Overtaking Turn	03. Not Applicable		LIGHT CONDIT	0 1 02	Daylight Dawn or Du		Dark-lighted Dark-Unlighted
ROAD DESCRIPT	ION 0	01. At Intersection 02. Driveway Access 03. Intersection Rela	ited 08. Parkir	dabout ng Lot	11. Alle 12. Sha	mp-related ey Related are-Use Path or Tra kiliary Lane	15. Expr	Block Cross ress/Manag	swalk ed/HOV Lane
CONDITION 0 1 0	1. Dry 2. Wet 3. Muddy 4. Snowy 5. Icy 6. Slushy 7. Foreign	09. Wet W/ 10. Snowy \ 11. Icy W/V 12. Slushy \ 13. Sand/G		atment reatmer ment	oo. 01. 02.	Rain 05. Sleet or Hail 06.	1st 0 0 Dust Wind Cloudy Freezing Ra	O:	2nd 8. Snow 9. Blowing Snow ing Drizzle
		TO BE FILLE	D OUT ONLY I	N THE	EVENT OF	A FATALITY			
EMERGENCY MEDICA						AFFIC CONTROL			
Time Notified	Т	ïme Arrived @ Scene	Time Arrived	@ Hos	pital	01. No Control 02. Not Function 03. Functioning	oning	06. No	nctioning Properly It Visible known
If times are unknown pro	vide nam	ne of responding servic	es:						
Approved By				I.D. N	umber			Date	

P06124

Case # Agency ORI Ag						Agency Name										
2024-	202406		c	ODPD000	00		DENVER POLICE DEPARTMENT									
TU#1 make	(Gra a lef	t turn d on N	san) v onto N Broa	was tra westbo adway d to yi	aveling ound St ar	E 49th	hbour n Ave. s proc	nd on TU# eedin	N Broa 2 (Go g thro	adwa; ld Nis ugh tl	san) v he inte	was erse	trav ectio	elin n wi	ıg	
Owner 1	Public P	roperty Da	amaged	Dam	naged Pro	pp. Last Na	ame			First	t Name					MI
Address								City				S	State	ZIP		
Damage	d Prop. D	escription														
Owner 2	Public P	roperty Da	ımaged	Dam	naged Pro	p. Last Na	ame			First	t Name					MI
Address	1							City				5	State	ZIP		ı
Damage	d Prop. D	escription														

Agency ORI																			
Hit & Run	1 0	1		202406										-		DTMENT			
WARCHT					ne											MINITINI I			
Vehicle     Soes S PACKARD AVE	riit & Ruii		,					KΑ	YLA						262-748-7758				
Driver   License Number   Driver   Dr		_ (	,							.,					ZIP			.0.5	
Driver				PACKARL	AVE						CDI	State	Sav			11/2	:4/19	95	
SAING   SAIN	Dilver Licen	130 140	IIIDCI						_	_	ODL	Otate		Liliaii					
Same								DL	JI	Violat	ion Cod	е		Citatio	n Number	Com	mon	Code	
Name										54-17	9			72027	7	371			1
Defective Head Light(c)   Defector Head Light(c)   Defective Head Li	_			ner Last I	Name								ame						MI
No Proof     No Proof     No Proof						SS							ΙΥ				ZIP		
Name	Insurance C	Compa	ny								Expirat	ion Date	9		Policy Number				
Vehicle Identification Number		te No.							У			Number	of Traile	rs: 0					
Make Model Model No Damage Trailer 2: VINI# License Plate: Disabling Damage Description of Trailer 3: VINI# Description Descri		1.6.				\	Visconsi												
Make				mber				Ye	ar									Disabling [	Domono 🗆
Disabling Damage   Disabling D				lodel				No Da	amao	еП								Disabling L	Jamage
Body Type	NISS		A	LT					annag			License	Plate:					Disabling D	Damage 🗌
Towed   Ol. Not towed   Ol. Not towed   Ol. Not towed   Ol. Not volue to Disabling Damage   Ol. Towed Dut to Disabling Damage   Ol. Now Political Plants   Ol. Disabling Damage	Body Type		C	olor			6	1	_			Trailer 3	: VIN#				_		
O1   O2   O3   O4   O4   O5   O5   O5   O5   O5   O5	4 D		G	RY			2	17				License	Plate:					Disabling D	Damage 🗌
Disabling Damage   Disabling D				a Diaablina	. Damas		2		<u></u> _	[		Trailer 4	: VIN#						
Disabling Damage	01 0	2. Towe	ed, But N	lot Due to	Disablin	g	2	-0	-	i		License	Plate:					Disabling D	Damage 🗌
To :	By:		9				Ur	nderca	rrian	۵		Trailer 5	: VIN#						
VEHICLE DEFECT/CONDITION (OFFICER OPINION ONLY)  0. No Vehicle Defects 0. Defective Head Light(s) 0. Defective Strake Tail Light(s) 0. Defective Strake Tail Light(s) 0. Defective Strake Defective (Out of Adjustment) 0. Defective Strake Defective (Out of Adjustment) 17. Cargo/Equipment Loss or Spiil 17. Cargo/Equipment Shirit 18. Parking Violation 19. Steering and Brasking 19. Steering and Archive (Describe in Narrative) 19. Steering and Archive Head Light(s) 19. Steering and Archive (Parking Violation Involved 19. A B C D E F1 F2 F3 AGE 19. O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	To:										 Severe	License	Plate:					Disabling D	Damage 🔲
OFFICER OPINION ONLY						ON						BE FIL	LED (	O TUC	NLY IN THE E	VENT	OF A	A FATALI	TY
01. Defective Head Light(s)   02. Defective Brake/Fall Light(s)   03. Defective Brake/Fall Light(s)   03. Defective Brake/Fall Light(s)   03. Defective Brake/Fall Light(s)   03. Defective Signaling Device   16. Cargo/Equipment Loss or Spill   17. Cargo/Equipment Loss or Spill   17. Parking Violation   18. Defective Tires   18. Defective Tires   19. Defective Tires Tires   19. Defective Tires Tires   19. Defective Tires Tires   19. Defective Tires T				INION C						Г		CRASH							
10. Improper Load   10. Improper Signaling Device   16. Cargo/Equipment Loss or Spil   17. Cargo/Equipment Loss or Spil   18. Parking   19. Steering										00.	No Avoid	dance Ma		UVER					NT
04. Brakes Defective/Out of Adjustment 17. Cargo/Equipment Shift 14. Parking) Violation 15. Other Defect(s) (Describe in Narrative)  17. Other Defect(s) (Describe in Narrative)  17. Cargo/Equipment Shift 14. Parking) Violation 15. Other Defect(s) (Describe in Narrative)  18. Other Defect(s) (Describe in Narrative)  19. Steering and Braking 03. Vehicle Fire/No Haz-Mat Cargo Not Involved (Involved Of. Describe in Narrative)  19. Steering and Braking 04. Vehicle Fire/No Haz-Mat Cargo Not Involved (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Incident  19. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Incident  19. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Incident  19. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Cargo Not Involved (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/No Haz-Mat Cargo Not Involved (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/No Haz-Mat Cargo Not Involved (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Incident  19. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Cargo Not Involved (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Cargo Not Involved (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Cargo Not Involved (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Cargo Not Involved (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Incident (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Incident (Involved Of. Other Avoidance Maneuver (Describe in Narrative) 05. Vehicle Fire/Haz-Mat Incident (Involved Of. Other Avoidance Maneuver (Describe Involved Of. Other Avoidance Maneuver (Describe Involved Of. Other Avoidance Maneuver (Describe Invo	02. Defective 03. Defective	Brake/ Signal	Tail Ligh ing Devi	it(s) ce				nt Loss	or Sp										Involved
15. Other Defect(s) (Describe in Narrative)   15. Other Defect(s) (Describe in Narrative)   17. Steering and Accelerating	04. Brakes De	efective			nt 17. (	Cargo/	Equipmer	nt Shift		09.	Steering	and Brai	king		03. Ve	ehicle Fire	No F	Haz-Mat Ca	
A	06. Sudden T	ire Fail		tions	15.0	Other D	Defect(s)		be in	11.	Steering	and Acc			In	volved			
A B C D E F1 F2 F3 AGE  0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	o7. Improper	Tiles ic	or Condi	LIONS		variati	ve)	DF	RIVE					Describe	in Narrative) U5. Ve	enicie Fire	/Haz-	-Mat Incider	nt
G1 G2 H I J K L M N SEX  AA Expired Time  A D E F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  BB Expired Time  AA Expired Date  BB Expired Time  AA Expired Date  C1 G2 H I J K L M N SEX  BB Expired Time  BB Expired Time  AA Expired Date  C3 G1 G2 H I J K L M N SEX  BB Expired Time  C4 G2 F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  C5 G1 G2 H I J K L M N SEX  BB Expired Time  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C6 G1 G2 H I J K L M N SEX  C7 B3 AGE  C8 B8 Expired Time  C8 B8 Expired Time  C9 B8 Expired Time	A	В	С	D		F1	F2				00171	11 021	71120			-	AA	Expired Da	ate
0 2         F         0 0         0 8         0 0         0 0         0 7         0 0         F         EMS Trip #         Taken To           A         D         E         F1         F2         F3         AGE         (Passenger) Name/Address         AA         Expired Date           G1         G2         H         I         J         K         L         M         N         SEX         EMS Trip #         Taken To           A         D         E         F1         F2         F3         AGE         (Passenger) Name/Address         AA         Expired Date           G1         G2         H         I         J         K         L         M         N         SEX           BB         Expired Time         EMS Trip #         Taken To         AA         Expired Time           G1         G2         H         I         J         K         L         M         N         SEX           G1         G2         H         I         J         K         L         M         N         SEX    BB     Expired Time     BB     Expired Time	0 1	0 0	00	00	0 0	В	0 1	A	2	В	DRI	VER NAM	/IE AND	ADDRE	SS ARE ABOVE				
A D E F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  BB Expired Time  A D E F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  C1 G2 H I J K L M N SEX  BB Expired Time  C3 G2 H I J K L M N SEX  BB Expired Time  C4 D E F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  C5 G1 G2 H I J K L M N SEX  BB Expired Time  C6 A D E F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  C6 A D E F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  C6 BB Expired Time  C6 BB Expired Time					K	L		N	1		AC Tain			Talean	Т-	_	ВВ	Expired Tir	me
G1 G2 H I J K L M N SEX  EMS Trip # Taken To  A D E F1 F2 F3 AGE  (Passenger) Name/Address  AA Expired Date  BB Expired Time  BB Expired Time  EMS Trip # Taken To  BB Expired Time  BB Expired Time  A D E F1 F2 F3 AGE  (Passenger) Name/Address  AA Expired Date  A Expired Date  BB Expired Time  A EMS Trip # Taken To  BB Expired Time  A Expired Date  BB Expired Time	0 2 F		0 8	0 0	0 0	00		0 0	LF		viS Trip	#		такеп	1 10		$\perp$		
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A D E F1 F2 F3 AGE (Passenger) Name/Address  G1 G2 H I J K L M N SEX  AA Expired Date  BB Expired Time  A D E F1 F2 F3 AGE (Passenger) Name/Address  BB Expired Time  A D E F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  AA Expired Date  BB Expired Time  BB Expired Time									Ш							L	Щ		
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G1 G2 H I J K L M N SEX  BB Expired Time  A D E F1 F2 F3 AGE (Passenger) Name/Address  AA Expired Date  G1 G2 H I J K L M N SEX  BB Expired Time  BB Expired Time						Щ			<u>                                     </u>					Tuken	. 10	_	$\perp$		
A D E F1 F2 F3 AGE (Passenger) Name/Address  G1 G2 H I J K L M N SEX  EMS Trip # Taken To  AA Expired Date  BB Expired Time	A	1		D	E	F1	F2	F3	AG	E (Pa	ssenger	) Name/A	ddress				AA	Expired Da	ate
A D E F1 F2 F3 AGE (Passenger) Name/Address  G1 G2 H I J K L M N SEX  EMS Trip # Taken To  AA Expired Date  BB Expired Time	C4 C2	4		<u> </u>		Ļ		L	<u></u>							L	DD.	Evnirod Tir	
G1 G2 H I J K L M N SEX  BB Expired Time	G1 G2	1	T			Ė		IN I	15		MS Trip	#		Taken	То			Expired 11	iie .
G1 G2 H I J K L M N SEX  BB Expired Time					F	F1	F2	F3	AG	┚╚			ddress			-	ΔΔ	Evnirad D	ato
		7							1	Ī'' "	cocinger	, ranie/	ui 000					Expired Da	ale
	G1 G2	H		J	K	L	M	N	SE	X						L	BB	Expired Tir	me
											MS Trip	#		Taken	То				

Traffic Case #		Agency ODI		Aganay Name	
01		Agency ORI		Agency Name	_
Unit # 2024-20240	6	CODPD0000		DENVER POLICE DEPARTMENT	
	GENERAL VEHICLE FIEI	.DS		CARRIER 01. Interstate	04. Not in Commerce
0 5 VEHICLE TYPE	03. Non-School Bus (9 occu	oants 15. Farm Equip		TYPE 02. Intrastate	
	or more including driver)	in 20. Working Ve	ehicle/Equipment	03. Governm	complete only the
CMV SECTIONS REQUIRED	commerce 04. Transit Bus	OTHER VEHIC	CLE	Vehicle	underlined fields below.)
01. Medium/Heavy Trucks GVWR/		17. Light Rail		GROSS VEHICLE WEIGHT	
GCWR between 10,001 and	VEHICLES UNDER THE GI	/WR/ 21. Heavy Trai 23. Off Highwa		RATING/GROSS COMBINATION	
16,000 27. Medium/Heavy Trucks GVWR/	GCWR THRESHOLD 05. Passenger Car/Passeng			WEIGHT RATING	Enter number of pounds.
GCWR 16,001 or over	07. Pickup Truck/Utility Van	25. Low Speed		TOTAL NUMBER OF AXLES Enter the total number of axles	
02. School Bus (all school buses)	09. SUV		cle Type (Describe	including truck and trailer.	
	11. Motor Home	in Narrative		including truck and trailer.	
	12. Motorcycle	16. Unknown (	(Hit and Run Only)	01. Passenger Car (only if HM	VEHICLE
	28. Autocycle			placarded)	CONFIGURATION
SPECIAL FUNCTION OF	MOTOR VEHICLE IN TRANS	SPORT			08. Truck Tractor and Semi-
0 0	09. Ambulance	18. Public Utilit	ty	placarded) 03. Bus/Limousine	Trailer  9. Truck Tractor and Double
00. No Special Function	10. Police	19. Military		04. Single-unit Truck (2 axles)	Trailers
01. Vehicle Transporting Students	11. Fire Truck	20. Rental Truc	ck		10. Truck Tractor and Triple
To/From School	<ol> <li>Non-Transport Emergend Services Vehicle</li> </ol>		ed for Electronic	more axles)	Trailers
02. Bus – Transit	13. Safety Service		g (Uber, Lyft etc.)		11. Other (Describe in
03. Bus – Charter	Patrols - Incident Respon		cribe in Narrative)	07. Truck Tractor (Bobtail)	Narrative)
04. Bus – Shuttle 05. Bus – Other	14. Towing - Incident Respor			01. Bus/ Limousine (seats	CARGO
06. Construction Equipment	15. Other Incident Response			9-15 occupants, including	BODY TYPE
07. Farm Equipment	16. Highway/Maintenance	Emergency Li	ights	the driver) 02. Bus/Limousine (seats 16 or 1	10. Grain, Chips, Gravel
08. Farm Vehicle	17. Truck Acting as Crash Atte	Activated Activated			11. Pole
DIRECTION OF TRAVEL	DDIOD TO IMPACT (DDIO	TO TURNING MOVE	MENT		12. Intermodal Container
0 1 01. North 03. Ea	- PRIOR TO IMPACT (PRIOF ast 05. South	07. West	MENI)	03. Van/Enclosed Box 1	<ol><li>Vehicle Towing another</li></ol>
	outheast 06. Southwes			04. Cargo Tank	Vehicle
0 1 VEHICLE MOVEMENT -	PRIOR TO IMPACT				14. Fire Apparatus
	06. Making U-Turn	12. Swerve/Av	oidance		l5. Ambulance l6. No Cargo Body
	07. Passing	13. Weaving			17. Other (Describe in
01. Going Straight 02. Slowing	08. Backing	14. Out of Con		09. Garbage Refuse	Narrative)
03. Stopped in Traffic	<ol> <li>Entering/Leaving Parked Position</li> </ol>	15. Traveled W	vrong vvay raffic Way/Merge	SEQUENCE OF	
04. Making Right Turn	10. Parked	18. Negotiating		CRASH EVENTS	
05. Making Left Turn	11. Changing Lanes	16, Other (Des	scribe in Narrative)	1st	2nd 3rd 4th
ROADWAY SPEED LIMIT	ESTIMATED VEHICLE SF		STATED SPEED	NON-COLLISION C	COLLISION
30 <sub>MPF</sub>		5 <sub>MPH</sub>	15 <sub>MPH</sub>	01. Ran Off the Road 1	11. Pedestrian
			. MPH		12. Motor Vehicle in Transport
03 BRIVER ACTIO	NS (OFFICER OPINION ONL		2.1.1		13. Parked Motor Vehicle 14. Train
	07. Improper Turn 08. Turned from Wrong Lane	17. Careless D	ext field can not be		15. Pedal Cycle
1st 2nd	Position Position	coded "00"		06. Explosion or Fire	(Bicycle, Tricycle, etc.)
00. No Contributing Action	10. Lane Violation	18. Speeding	,		16. Animal
02. Impeded Traffic	11. Improper Passing on Le		or Conditions		17. Fixed Object
03. Failed to Yield ROW	12. Improper Passing on Rig				18. Work Zone
04. Disregard Stop Sign	13. Followed Too Closely		ecting/Over-Steering		Maintenance Equipment  19. Other Movable Object
05. Failed to Stop at Signal 06. Disregarded Other Device/	<ol> <li>Improper Backing</li> <li>Signaling Violation</li> </ol>		equired Chains tributing Action		20. Other (Describe in
Sign/Markings	16. Reckless Driving		in Narrative)	Narrative)	Narrative)
	- MOST APPARENT HUMAI			HAZARDOUS MATERIALS - PLA	
(OFFICE	ER OPINION ONLY)			Did the vehicle have a hazardous	
1st 2nd 3rd	09. Physical Disability	23. Distracted/	Manipulating	00. No 01. Yes 02. Requi	ired but Missing
00. No Apparent Contributing Factor	11. Distracted/Other Occupa	nt Vehicle Co		HAZARDOUS MATERIALS - RE	LEASE
02. Asleep or Fatigued	<ol><li>Age/Driver Ability</li></ol>	<ol><li>Distracted/</li></ol>	Other Interior	Was hazardous cargo from the place	
03. Medical 04. Driver Inexperience	17. Looked/Did Not See	25. Distracted/	Other Exterior	(Do not count fuel from the vehicle	e fuel tank)
05. Aggressive Driving	18. Talking on Phone/Holdin			00, No 01, Yes	
06. Driver Unfamiliar With Area	<ol> <li>Talking on Phone/Hands</li> <li>Manipulating Electronic D</li> </ol>			HAZARDOUS MATERIALS - CO	DE
07. Driver Emotionally Upset	21. Distracted Eating/Drinkin		in Narrative)	Enter the four digit number from the placard. If no number	
08. Evading Law Enforcement	22. Distracted/Smoking	28. Illness		on the placard enter the four	1369
Officer				digit Identification number from	1005
0 0 AUTONOMOUS VEHICL	E CAPABILITY			the shipping paper(s).	
	03. Conditional Automation			HAZARDOUS MATERIALS - CL	ASS
00. No Automation	04. High Automation	Driver Cede	ed 🗆	Enter the one digit number	<b>A</b>
01. Driver Assistance	05. Full Automation	Control of V		taken from the bottom of the	8
02. Partial Automation	06. Unknown			placard.	1369
	CMV FIELDS			1	3
Carrier Name	OMV PIELDS			LIQUID HAZARDOUS MATERIA	IS
Carrier Ivallie				Enter the amount of bulk liquid ca	
					,001 to 6,000 gallons
Address					
		Dot #		02. 1,001 to 2,000 galloris 07. 0	,001 to 7,000 gallons
		Dot #		03. 2,001 to 3,000 gallons 08. 7	,001 to 8,000 gallons
		Dot #		03. 2,001 to 3,000 gallons 08. 7 04. 3,001 to 4,000 gallons 09. 8	
Over Height  Over Weigh	t Over Length	Dot # Over Width	Permitted	03. 2,001 to 3,000 gallons 08. 7	,001 to 8,000 gallons

Traffic Unit # 0 2	Case	# 24-202	2406				"	ency ODPE					-	y Name ER POLICE DEPA	DTMENT			
			st Nam	16				st Na					MI	Phone	KINENI			
Hit & Run [	ALVA	RADO	TORRE	ES			N	DEL										
Non-Contact Vehicle		,	eet Ad DWAY				Cit	ty ENVE	R				State	ZIP 802160000	DOE	3 25/19	57	
Driver Licens			DWAI				_	licen		CDL	State	Sex	Email	00210000	00/2	23/13		
920051140	oc realinge							iver	_	В	co	М	Lillan					
Primary Viola	ation						DI	JI	Viol	ation Code	 e		Citatio	n Number	Com	mon	Code	
Same Name	Vehicle C	Owner	Last N	lame							First Na	ame						МІ
Same Addr.	Vehicle C	Owner	Street	Addre	SS						City				State	ZIP		•
Insurance Co								Non-	e Proof	00/40/	ion Date 2024	Э		Policy Number 960712633				
License Plate	e No.				S	State or C	Countr				Number	of Traile	re: 0					
ALVB44						Colorado							15. 0					
Vehicle Ident			er				Ye	ar			Trailer 1	: VIN#						
1N4AL21E09	N489801	_									License						Disabling [	Damage 🗌
Make		Mod	el				No D	amag	ge [		Trailer 2							
NISS		ALT				2		1		( 1	License						Disabling [	Damage 🗌
Body Type		Colo	r			hai	7				Trailer 3	: VIN#						
4 D		GLD				2	( (		1	1 1	License	Plate:					Disabling [	Damage 🗌
	. Not towed . Towed Di		isabling	Damag	e	2			!\		Trailer 4	: VIN#						
00 02	. Towed, B Damage	ut Not I	Due to	Disablin	g	2	-	İ		1 1	License	Plate:					Disabling D	Damage 🔲
Ву:						H	nderca	rrian			Trailer 5	: VIN#						
To:										3. Severe	License	Plate:					Disabling D	Damage 🗌
VE VE	HICLE	DEFE	CT/CO	NDITIO	ON	i. oligin		odon			BE FII	LED	OUT O	NLY IN THE E	VENT	OF A		
1 00	FFICER								ı		CRASH						AZARDOL	
00. No Vehicle 01. Defective H		(-)				nical Failu						MANE	UVER				OLVEMEN	NT L
02. Defective E	Brake/Tail I	Light(s)	)	10.1	mprop	cted Wind er Load			0	00. No Avoid 07. Braking		aneuver		01. N	o Fire/Ha	z-Mat	/lat Cargo Cargo Not	Involved
03. Defective S 04. Brakes Def			ustmen			Equipmer Equipmer				)8. Steering )9. Steering		king			o Fire/Ha ehicle Fire		Incident laz-Mat Ca	rgo
05. Defective T 06. Sudden Tir						g Violation Defect(s) (		be in	1	Accelera     Steering	ating				ehicle Fire	e/Haz-l	Mat Cargo I	Vot
07. Improper T		ndition	is		Varrati				Ö	6. Other Av	oidance M	laneuver	(Describe	in Narrative) 05. V		e/Haz-	Mat Incider	nt
A	В	С	D	Е	F1	F2	DI F3	RIVE		CCUPAI	NT DE1	AILS			_			
01		00	0 0	00	В	01	A	6		DBI	/ED NA	AE AND	A DDDE	SS ARE ABOVE		AA	Expired Da	ate
G1 G2	H		J	K	<u>_</u>	M	N	SE		DIKI	VEIVINA	IL AND	ADDILL	SS ARE ABOVE	L	BB	Expired Tir	mo
0 2 F		0 8	00	00	0 0	0 7	00			EMS Trip	#		Taken		$\neg$		Expired 11	ilie
A			D	E	F1	F2	F3	AG		DHMC 61 Passenger	) Name/A	ddress	Luthe	ran	— P	AA	Expired Da	ate
		Ī	Ī	$\bar{\Box}$	Ė				Ī,	uooengen	, riamon	idai 000			I		Expired Da	ate
G1 G2	н	1	J	K	_	M	N	SE	X						⊢	BB	Expired Tir	me
		Ħ	Ī		Ē		Π̈́	1	100	EMS Trip	#		Taken	То				
A			D	E	F1	F2	F3	AG	E (F	Passenger	) Name/A	ddress			— P	AA	Expired Da	ate
		Ī	$\overline{\Box}$	$\bar{\Box}$	Ė				Ī,		,				l		Expired De	ato
G1 G2	н	l	J	K	_	M	N	SE	X						L	BB	Expired Tir	me
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A			D	E	F1	F2	F3	Δ.		Passenger	Name/A	ddress			— <b>┡</b>	ΛΛ.	Expired Da	ato
		Ī						AG	<u> </u>	assenger	, Hame/P					AA	Expired Da	ale
G1 G2	н		J	K	Ļ	M	N	SE	x						L	BB	Expired Tir	me
G1 G2		$\dot{\Box}$					IN I		100	EMS Trip	#		Taken	То			EADIIOU III	
	0 1 111	1 111		n 1 1	II .	101	H	11.1	1.0				1			1 1	1	

Troffic Coos #		Azanau ODI		Aganay Nama	
Traffic Unit # 0 2 Case # 2024-202406		Agency ORI		Agency Name	_
Unit # 2024-202406		CODPD0000		DENVER POLICE DEPARTMENT	
	GENERAL VEHICLE FIEL	DS		CARRIER 01. Interstate	04. Not in Commerce
0 5 VEHICLE TYPE 03	. Non-School Bus (9 occup	ants 15. Farm Equ		TYPE 02. Intrastate	
03	or more including driver) i	n 20. Working	Vehicle/Equipment	03. Governme	complete only the
CMV SECTIONS REQUIRED	commerce Transit Bus	OTHER VEH		Vehicle	underlined fields below.)
U1. Medium/Heavy Trucks GVVVR/		17. Light Rai		GROSS VEHICLE WEIGHT	
	HICLES UNDER THE GV		ain vay Vehicle/ATV	RATING/GROSS COMBINATION	
16,000 27. Medium/Heavy Trucks GVWR/ 05	GCWR THRESHOLD  i. Passenger Car/Passenge			WEIGHT RATING	Enter number of pounds.
	. Pickup Truck/Utility Van	25. Low Spec		TOTAL NUMBER OF AXLES Enter the total number of axles	
	), SUV		hicle Type (Describe	including truck and trailer.	
	. Motor Home	in Narrati		moduling truck and trailer.	
	. Motorcycle	16. Unknown	(Hit and Run Only)	01. Passenger Car (only if HM	VEHICLE
28	B. Autocycle			placarded)	CONFIGURATION
SPECIAL FUNCTION OF MO	OTOR VEHICLE IN TRANS	PORT			8. Truck Tractor and Semi-
	. Ambulance	18, Public Uti	ility	placarded) 03. Bus/Limousine 09	Trailer  9. Truck Tractor and Double
	. Police	19. Military		04. Single-unit Truck (2 axles)	Trailers
01 Vehicle Transporting Students	. Fire Truck	20. Rental Tr	uck		Truck Tractor and Triple
10/From School	<ul> <li>Non-Transport Emergency Services Vehicle</li> </ul>		sed for Electronic	more axles)	Trailers
02. Bus – Transit	. Safety Service		ing (Uber, Lyft etc.)		Other (Describe in
03. Bus – Charter	Patrols - Incident Respons		escribe in Narrative)	07. Truck Tractor (Bobtail)	Narrative)
	. Towing - Incident Respons	se		01. Bus/ Limousine (seats	CARGO
06 Construction Equipment 15	Other Incident Response			9-15 occupants, including	BODY TYPE
07 Form Equipment	. Highway/Maintenance	Emergency	Lights	the driver) 02. Bus/Limousine (seats 16 or 10	0. Grain, Chips, Gravel
08. Farm Vehicle	. Truck Acting as Crash Atter	Activated			1. Pole
DIRECTION OF TRAVEL D	DIOD TO IMPACT (DDIOD	TO TURNING MOV	CRECKIT)		2. Intermodal Container
0 5 DIRECTION OF TRAVEL - P	05. South	07. West	EMENI)	03. Van/Enclosed Box 13	<ol><li>Vehicle Towing another</li></ol>
02. Northeast 04. South		08. Northwes	st	04. Cargo Tank	Vehicle
0 1 VEHICLE MOVEMENT - PRI	OR TO IMPACT				4. Fire Apparatus
06	6. Making U-Turn	12. Swerve/A	Avoidance		5. Ambulance 6. No Cargo Body
	. Passing	13. Weaving			7. Other (Describe in
	B. Backing	14. Out of Co		09. Garbage Refuse	Narrative)
03. Stopped in Traffic	). Entering/Leaving Parked Position	15. Traveled	Traffic Way/Merge	SEQUENCE OF	
	). Parked	18. Negotiati		CRASH EVENTS	
	. Changing Lanes	16. Other (De	escribe in Narrative)	1st	2nd 3rd 4th
ROADWAY SPEED LIMIT	ESTIMATED VEHICLE SPE		S STATED SPEED	NON-COLLISION C	OLLISION
30 <sub>MPH</sub>	3	OMPH	30 MPH	01. Ran Off the Road 11	1. Pedestrian
			MPF		2. Motor Vehicle in Transport
1   0   0   1   1   1	(OFFICER OPINION ONLY		Dili		Parked Motor Vehicle     Train
	<ol> <li>Improper Turn</li> <li>Turned from Wrong Lane</li> </ol>	17. Careless	next field can not be		5. Pedal Cycle
1st 2nd 08	Position Position	coded "0		06. Explosion or Fire	(Bicycle, Tricycle, etc.)
00. No Contributing Action 10	). Lane Violation	18. Speeding		07. Separation of Units 16	6. Animal
	. Improper Passing on Left		for Conditions		7. Fixed Object
	. Improper Passing on Rigi				8. Work Zone
	Followed Too Closely		rrecting/Over-Steering	09. Equipment Failure (Tires, etc.)	Maintenance Equipment 9. Other Movable Object
	l. Improper Backing 5. Signaling Violation		Required Chains ontributing Action		Other (Describe in
	6. Reckless Driving		e in Narrative)	Narrative)	Narrative)
DRIVER - M	OST APPARENT HUMAN	-		HAZARDOUS MATERIALS - PLA	CARDS
	OPINION ONLY)			Did the vehicle have a hazardous	
1st 2nd 3rd no	Physical Disability	23 Distracte	d/Manipulating	00. No 01. Yes 02. Requir	red but Missing
00. No Apparent Contributing Factor 11	. Distracted/Other Occupan	t Vehicle C		HAZARDOUS MATERIALS - REL	EASE
02. Asleep or Fatigued 16	i. Age/Driver Ability		d/Other Interior	Was hazardous cargo from the place	arded truck released?
	'. Looked/Did Not See		d/Other Exterior	(Do not count fuel from the vehicle	fuel tank)
	. Talking on Phone/Holding			00. No 01. Yes	
	). Talking on Phone/Hands f ). Manipulating Electronic De			HAZARDOUS MATERIALS - COL	DE
O7 Dian Franking Bulliant	. Distracted Eating/Drinking		e in Narrative)	Enter the four digit number	
08. Evading Law Enforcement 22	. Distracted/Smoking	28. Illness	o in realitativo)	from the placard. If no number on the placard enter the four	1369
Officer				digit Identification number from	1309
0 0 AUTONOMOUS VEHICLE C	APABILITY			the shipping paper(s).	
	3. Conditional Automation			HAZARDOUS MATERIALS - CLA	ASS
	High Automation	Driver Ced	ded	Enter the one digit number	
	. Full Automation	Control of		taken from the bottom of the	8
02. Partial Automation 06	i. Unknown			placard.	<u>1369</u> ▶ □
	CMV FIELDS			•	3
Carrier Name	ONIV FIELDS			LIQUID HAZARDOUS MATERIAL	\$
Carrier Ivanie				Enter the amount of bulk liquid car	
					001 to 6,000 gallons
Address		Dot #			001 to 7,000 gallons
, , , , , , , , , , , , , , , , , , , ,					001 to 8,000 gallons
The state of the s					
				04. 3,001 to 4,000 gallons 09. 8,0	001 gallons and over
Over Height Over Weight	Over Length	Over Width	Permitted		