

1 Case Number **B080-2007-00445A** 10 Crash Occurred On: **1-287** 11 Speed Lgt: **S 6 5** 12 Route No. **428** 13 Milepost **42.8** 18 Speed Limit

2 Police Dept of **State Police** Code **2** At Intersection with Road Name Dir N E S W Feet Miles

3 Station/Precinct **Netcong Station** 14 15 19 To: 17 Cross Road Name NB EB SB WB

4 Date of Crash mm dd yy 5 Day of Week Su M Tu W Th F Sa 6 Time (use 2400 hrs) 7 Municipality Code 8 Total Killed 9 Total Injured

02 24 07 **Sa** **08 53** **1429** **01** **02** 21 Latitude 22 Longitude

23 Veh No 24 Policy No. 25 Ins Code 53 Veh No 54 Policy No. 55 Ins Code

Parked Ped Pedalcyclist Resp to Emergency Hit& Run

26 Driver's First Name Initial Last Name 29 Sex 56 Driver's First Name Initial Last Name 59 Sex

NATALIE S RAWLS **S** **SUSAN V MORRIS** **S**

27 Number and Street 30 Eyes 57 Number and Street 60 Eyes

28 City State Zip 58 City State Zip

31 State 32 Drivers License No 33 DOB mm dd yy 34 Expires mm yy 61 State 62 Drivers License No 63 DOB mm dd yy 64 Expires mm yy

35 Owner's First Name Initial Last Name 65 Owner's First Name Initial Last Name

Same As Driver

36 Number and Street 66 Number and Street

37 City State Zip 67 City State Zip

38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State 68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State

44 VIN 45 Expires 74 VIN 75 Expires

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authorit V Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authorit V Owner Driver Police

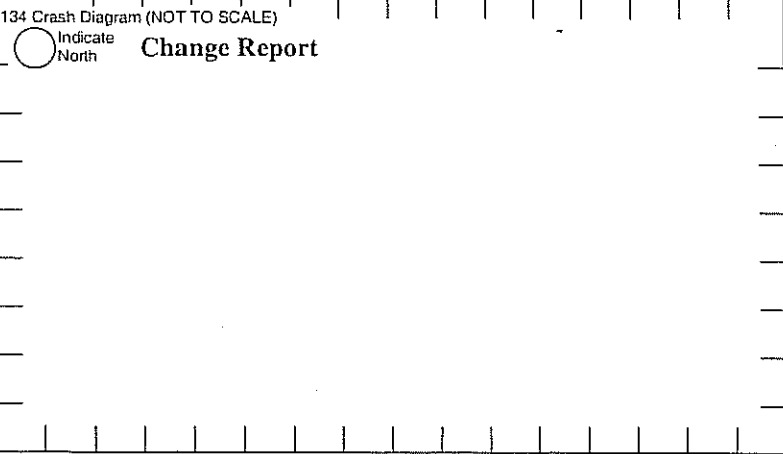
48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0. % Pending

49 Hazardous Material Name or Placard No. On Board Spill

50 Carrier No. USDOT Other

51 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs

52 Carrier name



78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0. % Pending

79 Hazardous Material Name or Placard No. On Board Spill

80 Carrier No. USDOT Other

81 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs

82 Carrier name

135 Crash Description **On 2/25/07 at 930am I was detailed to Morristown Memorial Hospital to witness the autopsy of Susan V. Morris. Medical Examiner Carlos A. Fonseca completed the autopsy. He concluded that Mrs. Morris died of Smoke Inhalation and Thermal injuries.**

136 Damage To Other Property

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature **Tr. M. Zapusek** / *Tr. J. [Signature]* 142 Badge No. **6771** 143 Reviewed By **NC** Badge No. **4949** 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

1 Case Number BD80200700445A 10 Crash Occurred On: I-287 11 Speed Lim. 56 12 Route No. 42 13 Milepost 8 18 Speed Limit 42

2 Police Dept of State Police Code 12 At Intersection with Road Name Dir N E S W of: 14 Feet Miles 15 16

3 Station/Precinct Netcong 17 Cross Road Name 19 Ramp To: From: 20 Route/Name 21 Latitude 22 Longitude

4 Date of Crash 02/24/07 5 Day of Week Su 6 Time (use 2400 hrs) 0853 7 Municipality Code 1429 8 Total Killed 0 9 Total Injured 1

23 Veh No. 24 Policy No. 25 Ins Code 53 Veh No. 54 Policy No. 55 Ins Code

Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name Susan Initial V Last Name Morris 29 Sex F 56 Driver's First Name Initial Last Name 59 Sex

27 Number and Street 30 Eyes 57 Number and Street 60 Eyes

28 City State Zip 58 City State Zip

31 State 32 Drivers License No 33 DOB mm dd yy 34 Expires mm yy 61 State 62 Drivers License No 63 DOB mm dd yy 64 Expires mm yy

35 Owner's First Name Initial Last Name Same As Driver 65 Owner's First Name Initial Last Name Same As Driver

36 Number and Street 66 Number and Street

37 City State Zip 67 City State Zip

38 Make 39 Model 40 Color 41 Year 42 Plate No. 43 State 68 Make 69 Model 70 Color 71 Year 72 Plate No. 73 State

44 VIN 45 Expires 74 VIN 75 Expires

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police

48 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0. ___ % Pending

134 Crash Diagram (NOT TO SCALE) Indicate North

49 Hazardous Material On Board Spill Name or Placard No. Change Report

50 Carrier No. USDOT Other * 78 Alcohol/Drug Test Given: No Yes Refused Type: Breath Blood Urine Results: 0. ___ % Pending

51 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 79 Hazardous Material On Board Spill Name or Placard No.

52 Carrier name 80 Carrier No. USDOT Other * 81 Commercial Vehicle Weight ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs

82 Carrier name

135 Crash Description On 2/25/07 at 930 am I was detailed to Morristown Memorial Hospital to witness the autopsy of Susan V. Morris. Medical Examiner Carlos A Fonseca completed the autopsy. He concluded that Mrs. Morris died of smoke inhalation and thermal injuries.

136 Damage To Other Property

Oper. 137 Charge Multiple Charges 138 Summons No. Oper. 139 Charge Multiple Charges 140 Summons No.

141 Officer's Signature T.P. M. [Signature] 142 Badge No. 6771 143 Reviewed By [Signature] 144 Case Status Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

1 Case Number: **B080200700445A** 10 Crash Occurred On: **I-287** SB 11 Speed Limit: **65** 12 Route No.: **287** 13 Milepost: **42.8** 18 Speed Limit: **18**

2 Police Dept of: **STATE POLICE** Code: **2** 3 Station/Precinct: **NETCONG**

4 Date of Crash: **02/24/07** 5 Day of Week: **Sa** 6 Time (use 2400 hrs): **0853** 7 Municipality Code: **1429** 8 Total Killed: **01** 9 Total Injured: **02**

23 Veh No.: **1** 24 Policy No.: **2** 25 Ins Code: **2** 53 Veh No.: **2** 54 Policy No.: **2** 55 Ins Code: **2**

Parked Ped Pedalcyclist Resp to Emergency Hit&Run

26 Driver's First Name: **NATALIE** Initial Last Name: **S RAWLS** 29 Sex: **F** 56 Driver's First Name: **SUSAN** Initial Last Name: **V MORRIS** 59 Sex: **F**

27 Number and Street: **30 Eyes** 57 Number and Street: **60 Eyes**

28 City: **State Zip** 58 City: **State Zip**

31 State: **32 Drivers License No** 33 DOB: **mm dd yy** 34 Expires: **mm yy** 61 State: **62 Drivers License No** 63 DOB: **mm dd yy** 64 Expires: **mm yy**

35 Owner's First Name: **Initial Last Name** 65 Owner's First Name: **Initial Last Name**

Same As Driver

36 Number and Street: **66 Number and Street**

37 City: **State Zip** 67 City: **State Zip**

38 Make: **39 Model** 40 Color: **41 Year** 42 Plate No.: **43 State** 68 Make: **69 Model** 70 Color: **71 Year** 72 Plate No.: **73 State**

44 VIN: **45 Expires** 74 VIN: **75 Expires**

46 Vehicle Removed To: Driven Left at Scene Towed Impound Disabled 47 Authority: Owner Driver Police 76 Vehicle Removed To: Driven Left at Scene Towed Impound Disabled 77 Authority: Owner Driver Police

48 Alcohol/Drug Test: Given: No Yes Refused Type: Breath Blood Urine Results: **0** % Pending

49 Hazardous Material: On Board Spill Name or Placard No.: **50 Carrier No.** USDOT Other*

51 Commercial Vehicle Weight: ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 52 Carrier name: **53 Commercial Vehicle Weight** ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 54 Carrier name: **55 Commercial Vehicle Weight** ≤ 10,000 lbs 10,001 - 26,000 lbs ≥ 26,001 lbs 56 Carrier name:

135 Crash Description: **03/21/2007: On this date, I received a letter from the office of the Morris County Medical Examiner at Netcong Station. This letter stated that on 03/16/2007 Forensic Odontologist Mitchell Kirshbaum confirmed the identity of Susan V. Morris based on dental records comparison.**

136 Damage To Other Property: **137 Charge** Multiple Charges **138 Summons No.** **139 Charge** Multiple Charges **140 Summons No.**

141 Officer's Signature: **142 Badge No.** **6598** **143 Reviewed By** **144 Case Status** Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

1 Case Number: **B080-2007-00445A** 10 Crash Occurred On: **I-287** SB 11 Speed Lim: **5 5** 118a
 2 Police Dept of: **STATE POLICE** Code: **2** 12 Route No.: **287** 13 Milepost: **42.8** 118b
 3 Station/Precinct: **NETCONG** 14 At Intersection with Road Name Dir: 15 Feet Miles 16 N E of: S W 17 Cross Road Name: 18 Speed Limit: 119a
 4 Date of Crash: **02/24/07** 5 Day of Week: **Th** 6 Time (use 2400 hrs): **0853** 7 Municipality Code: **1429** 8 Total Killed: **01** 9 Total Injured: **02** 19 Ramp: 20 Route/Name: 21 Latitude: 22 Longitude: 119b

23 Veh No: **1** 24 Policy No.: 25 Ins Code: 53 Veh No: **2** 54 Policy No.: 55 Ins Code: 120
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run

26 Driver's First Name: **NATALIE** Initial Last Name: **S RAWLS** 29 Sex: **F** 56 Driver's First Name: **SUSAN** Initial Last Name: **V MORRIS** 59 Sex: **F** 121
 27 Number and Street: 30 Eyes: 57 Number and Street: 60 Eyes: **1**

28 City: State: Zip: 58 City: State: Zip: 122

31 State: 32 Drivers License No: 33 DOB: mm dd yy 34 Expires: mm yy 61 State: 62 Drivers License No: 63 DOB: mm dd yy 64 Expires: mm yy

35 Owner's First Name: Initial Last Name: 65 Owner's First Name: Initial Last Name: 123
 Same As Driver

36 Number and Street: 66 Number and Street: 124

37 City: State: Zip: 67 City: State: Zip: 125

38 Make: 39 Model: 40 Color: 41 Year: 42 Plate No.: 43 State: 68 Make: 69 Model: 70 Color: 71 Year: 72 Plate No.: 73 State:

44 VIN: 45 Expires: 74 VIN: 75 Expires: 126

46 Vehicle Removed To: Driven Left at Scene Towed Impound Disabled 47 Authorit: Owner Driver Police 76 Vehicle Removed To: Driven Left at Scene Towed Impound Disabled 77 Authorit: Owner Driver Police 127

48 Alcohol/Drug Test: Given: No Yes Refused Type: Breath Blood Urine Results: 0.00% Pending 134 Crash Diagram (NOT TO SCALE) Indicate North **Change Report** 78 Alcohol/Drug Test: Given: No Yes Refused Type: Breath Blood Urine Results: 0.00% Pending 128a

49 Hazardous Material: On Board Spill Name or Placard No.: 79 Hazardous Material: On Board Spill Name or Placard No.: 128b
 50 Carrier No.: USDOT Other* 80 Carrier No.: USDOT Other* 128c

51 Commercial Vehicle Weight: < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs 81 Commercial Vehicle Weight: < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs 129a
 52 Carrier name: 82 Carrier name: 129b

135 Crash Description: **8-6-07 Monday: This date the undersigned received the attached Autopsy/Toxicology report from the Morris County Medical Examiner's Office for Driver #2, Susan Morris. Dr. Fonseca listed the cause of death as "Smoke inhalation and thermal injuries" and listed the manner of death as "Accident." The Toxicology report indicates that Susan Morris had a carbon monoxide quantification of 26.1%.** 129c
 136 Damage To Other Property: 129d

Oper. 137 Charge: Multiple Charges 138 Summons No.: Oper. 139 Charge: Multiple Charges 140 Summons No.: 133

141 Officer's Signature: *[Signature]* 142 Badge No.: **5097** 143 Reviewed By: *[Signature]* Badge No.: **4121** 144 Case Status: Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

1 Case Number B080-2007-00445A
10 Crash Occurred On: I-287
11 Speed Limit 55
12 Route No. 287
13 Milepost 42.8
18 Speed Limit 18

26 Driver's First Name NATALIE
Initial Last Name S RAWLS
29 Sex F
56 Driver's First Name SUSAN
Initial Last Name V MORRIS
59 Sex F

35 Owner's First Name
Initial Last Name
65 Owner's First Name
Initial Last Name

38 Make
39 Model
40 Color
41 Year
42 Plate No.
43 State
68 Make
69 Model
70 Color
71 Year
72 Plate No.
73 State

46 Vehicle Removed To
47 Authority
76 Vehicle Removed To
77 Authority

48 Alcohol/Drug Test
134 Crash Diagram (NOT TO SCALE) Change Report
78 Alcohol/Drug Test

135 Crash Description
8-6-07: This date the undersigned received the attached Crime Scene Investigation report completed by DSFC. J. McGinniss #4080.

137 Charge
138 Summons No.
139 Charge
140 Summons No.
141 Officer's Signature
142 Badge No. 5097
143 Reviewed By
144 Case Status

Table with 10 columns (83-92) and 5 rows (A-E) for occupant information.

1 Case Number: **B080200700445A** 10 Crash Occurred On: **I-287** 11 Speed Limit: **S 55** 12 Route No.: **287** 13 Milepost: **S 42.8** 18 Speed Limit: **18**

2 Police Dept of: **STATE POLICE** Code: **2** 3 Station/Precinct: **NETCONG**

4 Date of Crash: **02/24/07** 5 Day of Week: **Sa** 6 Time (use 2400 hrs): **0853** 7 Municipality Code: **1429** 8 Total Killed: **01** 9 Total Injured: **02**

23 Veh No: **1** 24 Policy No.: **1** 25 Ins Code: **1** 53 Veh No: **2** 54 Policy No.: **2** 55 Ins Code: **2**

26 Driver's First Name: **NATALIE** Initial Last Name: **S RAWLS** 29 Sex: **F** 56 Driver's First Name: **SUSAN** Initial Last Name: **V MORRIS** 59 Sex: **F**

27 Number and Street: **1** 30 Eyes: **1** 57 Number and Street: **1** 60 Eyes: **1**

28 City: **1** State: **1** Zip: **1** 58 City: **1** State: **1** Zip: **1**

31 State: **1** 32 Drivers License No: **1** 33 DOB mm dd yy: **1/1/1** 34 Expires mm yy: **1/1/1** 61 State: **1** 62 Drivers License No: **1** 63 DOB mm dd yy: **1/1/1** 64 Expires mm yy: **1/1/1**

35 Owner's First Name: **1** Initial Last Name: **1** 65 Owner's First Name: **1** Initial Last Name: **1**

36 Number and Street: **1** 66 Number and Street: **1**

37 City: **1** State: **1** Zip: **1** 67 City: **1** State: **1** Zip: **1**

38 Make: **1** 39 Model: **1** 40 Color: **1** 41 Year: **1** 42 Plate No.: **1** 43 State: **1** 68 Make: **1** 69 Model: **1** 70 Color: **1** 71 Year: **1** 72 Plate No.: **1** 73 State: **1**

44 VIN: **1** 45 Expires: **1** 74 VIN: **1** 75 Expires: **1**

46 Vehicle Removed To: Driven Left at Scene Towed Impound Disabled 47 Authorit: Owner Driver Police 76 Vehicle Removed To: Driven Left at Scene Towed Impound Disabled 77 Authorit: Owner Driver Police

48 Alcohol/Drug Test: Given: No Yes Refused Type: Breath Blood Urine Results: **0** % Pending

134 Crash Diagram (NOT TO SCALE) **Change Report**

78 Alcohol/Drug Test: Given: No Yes Refused Type: Breath Blood Urine Results: **0** % Pending

49 Hazardous Material: On Board Spill Name or Placard No.: **1**

79 Hazardous Material: On Board Spill Name or Placard No.: **1**

50 Carrier No.: USDOT Other 80 Carrier No.: USDOT Other

51 Commercial Vehicle Weight: < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs 81 Commercial Vehicle Weight: < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs

52 Carrier name: **1** 82 Carrier name: **1**

135 Crash Description: **09/10/07 This date, the undersigned received the attached copy of the Morris County Prosecutor's letter, which states this case is closed. All reports have been received and reviewed. This case is considered closed.**

136 Damage To Other Property: **1**

Oper. 137 Charge Multiple Charges 138 Summons No.: **1** Oper. 139 Charge Multiple Charges 140 Summons No.: **1**

141 Officer's Signature: **TRE - BRAIN** 142 Badge No.: **6440** 143 Reviewed By: **1** Badge No.: **1** 144 Case Status: Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

NEW JERSEY STATE POLICE CRIME SCENE INVESTIGATION REPORT		CASE/CRIME Fatal Motor Vehicle Accident	
		VICTIM Susan V. Morris	CASE NUMBER H152007-62
PLACE OF COMMISSION I-287 S/B MP 42.8	MUNICIPALITY Parsippany Twp.	COUNTY Morris	DATE OF COMMISSION 2-24-07
LOCATION OF TECHNICAL SERVICE I-287 S/B MP 42.8	MUNICIPALITY Parsippany Twp.	COUNTY Morris	DATE & TIME OF SERVICE 2-24-07 9:56am
INVESTIGATING AGENCY NJSP Netcong	AGENCY INVESTIGATOR Tpr. E.J. Orellano #6598	AGENCY CASE NUMBER B0802007-445A	LAB NUMBER N/A
PHOTOGRAPHIC EXAMINATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO # <u>41</u> 35mm COLOR # _____ 35mm B&W _____ 35mm # _____ VIDEO # _____ POLAROID (list type) _____ # _____ OTHER (list type) _____		LATENT PRINT EXAMINATION EXAM: _____ YES <input checked="" type="checkbox"/> NO OBTAINED: _____ YES <input checked="" type="checkbox"/> NO	
		EVIDENCE COLLECTION _____ YES <input checked="" type="checkbox"/> NO	

NARRATIVE:

2-24-07: On this date, the undersigned was detailed to the above location to conduct a photographic examination of the above listed scene and vehicle's ref. the above ongoing investigation. Upon arrival, the undersigned commenced the photographic examination which involved taking 41-35mm color photographs depicting the scene and vehicle's.

The expended film was processed at the NJSP Forensic Photography Unit in Hamilton N.J. The negatives will be kept on file together with this report at this unit. Photographic enlargements will only be made upon request.

RANK/CSI INVESTIGATOR DSFC. J. McGinniss #4080	REPORT DATE 2-24-07	
SIGNATURE <i>DSFC J. McGinniss #4080</i>	REVIEWER & <i>[Signature] #4080</i>	
		1 OF PAGE(S)

MOTOR VEHICLE ACCIDENT DRIVER

STATEMENT

Station NETCONC Case No. 07-445ANAME: Natalie S. BrwlsADDRESS: 165 Clintonville Rd Apt 202

DLN: _____

DOB: _____

PH#: 09/20/1944 203-623-3295a 203-234-1241ENTER DATE 02/27/07 ENTER TIME _____

I was heading straight not sure what time I was in. I suddenly heard a loud back at my rear. My front seat with seat belt on jerked back and I landed on the back sit. My car was slowly going to the right. Upon impact I tried to unbuckle my seat belt. I could get seat belt off + try to push car passenger seat up. I couldn't open right back passenger door. I opened window + screamed for help. Two men came to me + open my drivers seat to release the seat belt. They tried to push drivers seat into upright position due to seat + door being broken. Their was a Barnish Rty showcat in front passenger. They put the cat on the grass. Tilted the front seat up + down and both men pulled me out. They tried to put cat back in the front seat to keep warm. The doors of all the car would not close and smashed in. The back of the car is smashed in. Upon being hit my car veered to the right. Since I couldn't get up it stopped on the shoulder. All I hope was that my carid that my car would catch fire. I smelled smoke upon impact and was terrified my car would explode. After the two men pulled me out I saw the 2 burning cars and they not going to be near me. The police arrived + ambulance. I have a lot of soreness in my lower back. I am refusing transport to hospital because I have no one to bring my cat back to the hotel. My car is totaled + I don't know if I can get my things out.

MOTOR VEHICLE ACCIDENT DRIVER

STATEMENT

Station NETCONG

Case No. 07-445A

NAME: VICTORIA MORGAN - ALCALA

ADDRESS: 27 SHEEPHILL RD BANTON TWP NJ 07005

DLN: _____

JOB: 716166

PH#: 973 257-0552

ENTER DATE _____ ENTER TIME _____

I was driving in extreme R lane
All of a sudden I see the car in front of
me not moving I did not have time to
switch lane and hit car in front of me

Victoria Alcala

2/24/07

1 Case Number: **B080-2007-00445A**
 2 Police Dept of: **STATE POLICE** Code: **2**
 3 Station/Precinct: **NETCONG**
 4 Date of Crash: mm dd yy **02 24 07** 5 Day of Week: Su M Tu W Th F (Sa) **(Sa)**
 6 Time (use 2400 hrs): **0853** 7 Municipality Code: **1429** 8 Total Killed: **01** 9 Total Injured: **02**
 10 Cr. Occurred On: **I-287** SB 11 Speed: **5** 12 Route No.: **287** 13 Milepost: **42.8** 18 Speed Limit: **29**
 14 At Intersection with Road Name Dir Feet N E S W Miles 15 16 17 Cross Road Name: **19** To: From: NB EB SB WB
 19 Ramp: 20 Route/Name: **21** Latitude: **22** Longitude: **23**

23 Veh No: **1** 24 Policy No.: **AVE-4282843** 25 Ins Code: **199** 53 Veh No: **2** 54 Policy No.: **009568022 12/01** 55 Ins Code: **012**
 Parked Ped Pedalcyclist Resp to Emergency Hit & Run
 26 Driver's First Name: **NATALIE** Initial Last Name: **S RAWLS** 29 Sex: **F** 56 Driver's First Name: **SUSAN** Initial Last Name: **V MORRIS** 59 Sex: **F**
 27 Number and Street: **165 CLINTONVILLE RD APT #202** 30 Eyes: **4** 57 Number and Street: **3 SABEY'S BEACH RD** 60 Eyes: **4**
 28 City: **NORTH HAVEN** State: **CT** Zip: **06473** 58 City: **KINNELON** State: **NJ** Zip: **07405**
 31 State: **CT** 32 Drivers License No: **2H1 572 353** 33 DOB: **09 20 44** 34 Expires: **09 12** 61 State: **NJ** 62 Drivers License No: **M6651 72785 62574** 63 DOB: **12 18 57** 64 Expires: **06 10**

35 Owner's First Name: **THOMAS** Initial Last Name: **L KLINE** 65 Owner's First Name: **THOMAS** Initial Last Name: **L KLINE**
 Same As Driver Same As Driver
 36 Number and Street: **3 SABEY'S BEACH RD** 66 Number and Street: **3 SABEY'S BEACH RD**
 37 City: **KINNELON** State: **NJ** Zip: **07405** 67 City: **KINNELON** State: **NJ** Zip: **07405**
 38 Make: **SUBARU** 39 Model: **LEGACY** 40 Color: **WT** 41 Year: **1998** 42 Plate No.: **849943** 43 State: **CT** 68 Make: **JEEP** 69 Model: **CHEROKEE** 70 Color: **GN** 71 Year: **1996** 72 Plate No.: **MS806P** 73 State: **NJ**
 44 VIN: **4S3BG6852W7610862** 45 Expires: **07 12** 74 VIN: **1J4GZ58S9TC401311** 75 Expires: **11 07**
 46 Vehicle Removed To: Driven Left at Scene Towed Impound Disabled 47 Author: Owner Driver Police
CORIGLIANO TOWING BOONTON, NJ 76 Vehicle Removed To: Driven Left at Scene Towed Impound Disabled 77 Author: Owner Driver Police
CORIGLIANO TOWING BOONTON, NJ

48 Alcohol/Drug Test: Given: No Yes Refused Type: Breath Blood Urine Results: 0. % Pending
 134 Crash Diagram (NOT TO SCALE) Indicate North: **See attached diagram**
 49 Hazardous Material: On Board Spill Name or Placard No.: **50 Carrier No. USDOT Other**
 51 Commercial Vehicle Weight: < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs
 52 Carrier name: **53**
 78 Alcohol/Drug Test: Given: No Yes Refused Type: Breath Blood Urine Results: 0. % Pending
 79 Hazardous Material: On Board Spill Name or Placard No.: **80 Carrier No. USDOT Other**
 81 Commercial Vehicle Weight: < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs
 82 Carrier name: **83**

135 Crash Description: **INTRODUCTION:**
Vehicle #1, Vehicle #2 and Vehicle #3 were traveling southbound on Interstate 287 in the right lane. Vehicle #4 was traveling on Interstate 287 in the center lane. Driver #1 suddenly slowed down drastically, after she noticed she had missed the exit to her destination. Vehicle #2 then slowed down to a very low speed after driver #2 noticed that Vehicle #1 was barely moving in the right lane. Subsequently, Vehicle #3 struck Vehicle #2 causing it to explode and both vehicles became engulfed in flames. After the initial impact, Vehicle #2 continued to travel forward and struck Vehicle #1. Vehicle #4, was struck by debris while driving by in the center
 136 Damage To Other Property: **6**

Oper. **1** 137 Charge: **39:4-67** Multiple Charges 138 Summons No.: **SP3410616** Oper. **1** 139 Charge: **39:4-67** Multiple Charges 140 Summons No.: **6598**
 141 Officer's Signature: **Tar E. Cellano** 142 Badge No.: **6598** 143 Reviewed By: **[Signature]** Badge No.: **3097** 144 Case Status: Pending Complete

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death	
A	1	01	01	04	62	F	04	08	2	09	04	-	6406	NATALIE S RAWLS 165 CLINTONVILLE NO. HAVEN CT	
B	2	01	01	01	49	F	12	06	-	09	00	00	-	SUSAN MORRIS 3 SABEY'S BEACH RD KINNELON NJ- 2/24/07 1100	
C	3	01	01	03	40	F	02	05	2	09	09	01	6406	VICTORIA MORGAN-ALCALA 27 SHEEP HILL RD BOONTON NJ	
D	4	01	01	-	27	M	-	-	-	09	04	-	-	PETER F MOODIE 160A EASTWOOD DR CLIFTON PK NY	
E															

1 Case Number **B080-2007-00445A** 10 Ci Occurred On: **I-287** SB **5** 11 Speed **287** 118a **2**
 2 Police Dept of **STATE POLICE** Code **2** At Intersection with Road Name Dir **12 Route No.** **42** Suffix **8** 118b **-**
 3 Station/Precinct **NETCONG** Feet Miles N E S W of: 13 Milepost **18** Speed Limit **25** 119a **25**
 4 Date of Crash **02/24/07** 5 Day of Week **Th** 6 Time (use 2400 hrs) **0853** 7 Municipality Code **1429** 8 Total Killed **0** 9 Total Injured **0** 119b **-**
 23 Veh No **3** 24 Policy No **139827551 02/16** 25 Ins Code **012** 53 Veh No **4** 54 Policy No **99 2245-D21-52A** 55 Ins Code **328**

26 Driver's First Name **VICTORIA** Initial Last Name **MORGAN-ALCALA** 29 Sex **F** 56 Driver's First Name **PETER** Initial Last Name **F. MOODIE** 59 Sex **M** 120 **1**
 27 Number and Street **27 SHEEP HILL RD** 30 Eyes **I** 57 Number and Street **160A EASTWOOD DR** 60 Eyes **6** 121 **1**
 28 City **BOONTON** State **NJ** Zip **07005** 58 City **CLIFTON PARK** State **NY** Zip **12065**
 31 State **NJ** 32 Drivers License No **M6598** | **76700** | **57661** 33 DOB **07/06/66** 34 Expires **01/08** 61 State **NH** 62 Drivers License No **04ME** | **P79** | **031** 63 DOB **04/03/79** 64 Expires **04/08** 122 **-**

35 Owner's First Name **CARLOS** Initial Last Name **ALCALA** 65 Owner's First Name **PETER** Initial Last Name **F. MOODIE** 123 **-**
 36 Number and Street **27 SHEEP HILL RD** 66 Number and Street **160A EASTWOOD DR** 124 **1**
 37 City **BOONTON** State **NJ** Zip **07005** 67 City **CLIFTON PARK** State **NY** Zip **12065** 125 **1**
 38 Make **TOYOTA** 39 Model **SIENNA** 40 Color **SL** 41 Year **2004** 42 Plate No. **PKZ21C** 43 State **NJ** 68 Make **ACURA** 69 Model **MDX** 70 Color **BL** 71 Year **2003** 72 Plate No. **1851264** 73 State **NH**
 44 VIN **5TDZA22C344S052135** 45 Expires **09/07** 74 VIN **2HNYD18773H548263** 75 Expires **04/07**

46 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 47 Authority Owner Driver Police 76 Vehicle Removed To Driven Left at Scene Towed Impound Disabled 77 Authority Owner Driver Police 126 **4**
 48 Alcohol/Drug Test Given: No Yes Refused 2134 Crash Diagram (NOT TO SCALE) indicate North **See attached diagram** 78 Alcohol/Drug Test Given: No Yes Refused 127 **4**
 Type: Breath Blood Urine Results: 0. % Pending 79 Hazardous Material Name or Placard No. 128a **26**
 49 Hazardous Material Name or Placard No. On Board Spill 80 Carrier No. USDOT Other* 128b **2**
 50 Carrier No. USDOT Other* 81 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs 128c **-**
 51 Commercial Vehicle Weight < 10,000 lbs 10,001 - 26,000 lbs > 26,001 lbs 82 Carrier name 129a **26**
 52 Carrier name 129b **-**

135 Crash Description
lane at the time of the explosion. Driver #2, Susan Morris, died as result of the injuries sustained in this accident. Driver #1 and Driver #2 were transported to Saint Claire's Hospital for treatment of minor injuries. Driver #4, continued on driving south on Interstate 287. He contacted Netcong Station on 02/28/2007 and stated that he had not been injured and that his vehicle sustained minor cosmetic damage.
LOCATION:
This accident occurred on Interstate 287 South at milepost 40.8 in the right lane, in the Twp. of Parsippany. In the

136 Damage To Other Property
 Oper. **3** 137 Charge **39:4-98** Multiple Charges 138 Summons No. **SP3410618** Oper. **3** 139 Charge **39:4-98** Multiple Charges 140 Summons No. **SP3410618** 141 Officer's Signature **Tom E. Ordlow** 142 Badge No. **6598** 143 Reviewed By **[Signature]** Badge No. **5097** 144 Case Status Pending Complete 132 **2**
 133 **2**

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death
A														
B														
C														
D														
E														

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: <u>STATE POLICE</u> Code: <u>2</u> Station: <u>NETCONG</u> Case No: <u>B080-2007-00445A</u>
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(Refer to vehicle by number)

	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants If Deceased, Date & Time of Death
A	83	84	85	86	87	88	89	90	91	92	93	94	95	
L														
L														
I														
N														
V														
O														
L														
V														
E														
D														

135 Crash Description

vicinity of the accident, I-287 consists of one southbound exit ramp for exit 42 (Parsippany Rd), three southbound travel lanes and three northbound travel lanes. The north and southbound lanes are divided by 25 foot center median that includes two guide rails, one running parallel along each of the left shoulders of both the north and southbound lanes. All lanes are made of black top and in good condition, being free of any debris or roadway defects that would have contributed to the cause of this accident. All travel lanes are approximately 12 feet in width and are clearly divided by white painted skip lines. The left shoulder, which is approximately 5 feet in width, is clearly separated from the left travel lane by a solid painted yellow line, whereas the right shoulder, which is approximately 13 feet in width, is clearly separated from the right travel lane by a solid painted white line. The exit 42 ramp is also clearly marked with solid painted white lines and a large Department of Transportation street sign. At the time of the accident, the weather was clear and the roadway was dry.

STATEMENT:

Driver #1 initially stated to the undersigned at the scene: " I was driving very slow, going at about 45 mph in the right lane when the other car hit me from behind, I don't know what happened ". She completed a written statement at the scene, see attachment #1 (1 page). She then provided a formal recorded statement to Tpr. C. Rohel #6929 at Netcong Station on the same day, which is yet to be transcribed.

Driver #2 Deceased.

Driver #3 initially stated to the undersigned at scene: " I saw the Jeep stopped in the right lane, I crashed into it and I saw an explosion, I don't know what happened after that". She completed a written statement at the scene, see attachment #2 (1 page). She then provided a formal recorded Statement to Tpr. J. Sepede #6531 at Netcong Station the same day, which is yet to be transcribed.

Driver#4, Peter Moodie, 160 Eastwood Dr, Clifton Park, NY, contacted the undersigned via telephone on 02/25/2007. He stated in effect: " I was driving in the center lane at the time of the accident. I saw the station wagon stopped in the right lane, and the Jeep stopped or was moving very slow right behind it. I also saw the Toyota minivan in the right lane and wondered if the driver was going to stop for the 2 vehicles ahead. The minivan didn't stop and hit the Jeep in the right

T.A.E. Cradler

Officer's Signature

6598

Badge Number

New Jersey Police Crash Investigation
Report
Motor Vehicle Crash Description

Police Dept: STATE POLICE Code: 2
Station: NETCONG Case No: B080-2007-00445A

(Refer to vehicle by number)

A L L I N V O L V E D	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Dept	Hosp Code	Names & Addresses of Occupants If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	
F														
G														
H														
I														
J														

135 Crash Description

lane. The Jeep was pushed forward into the station wagon. I didn't see anything else because I was trying to make my way through the fire. Pieces of debris hit my vehicle". Mr. Moodie came in to Netcong Station on 02/28/2007 and provided a written statement. See attachment #3 (1 page). He then provided a formal recorded statement to the undersigned, which is yet to be transcribed.

Witness #1, Karin K. Logue, 5 laurel Trail, Kinnelon, NJ, was contacted by the undersigned via telephone. She stated in effect: " I was driving in the exit ramp at the time of the accident. I saw the white station wagon stopped in the right lane and then I saw the Jeep hit it in the back. After that I saw the Jeep explode. I did not see a 3rd vehicle involved in this accident". Tpr. J. Sepede obtained a formal recorded statement from Mrs. Logue on the same day, which is yet to be transcribed.

AT THE SCENE INVESTIGATION:

I was advised of this accident via State Police radio at 0853 hours. I approached the scene from the south and arrived at 0910 hours.

Upon arrival to the scene I observed all vehicles at their final uncontrolled resting positions. Parsippany Fire Department and Parsippany First Aid Squad were on scene. I observed a vehicle later identified as Vehicle #1 on the right shoulder of the southbound lanes, facing south. I later observed another vehicle, later identified as Vehicle #2, in the center lane of I-287 southbound, facing north, burned in its entirety and smoking with the Fire Department still attending. I also observed a deceased burnt body, later identified as Driver #2, laying across the front passenger seat. I then observed another vehicle, later identified as Vehicle #3, in the right lane of I-287 facing south and partially burned. All lanes of traffic were blocked by the vehicles involved and debris. Traffic was being diverted off exit 42 of I-287 southbound.

I proceeded to obtain written statements from Driver #1 and Driver #3 while Parsippany First Aid Squad was administering medical attention to them. Driver #1 refused further medical attention and was then relayed to Netcong Station in order to obtain a tape recorded statement from her. Driver #3 was relayed to Saint Claire's Hospital, via Parsippany FAS for further treatment of her injuries and was requested to respond to Netcong Station after her release.

Tan E. Occhino

Officer's Signature

6598

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: <u>STATE POLICE</u> Code: <u>2</u> Station: <u>NETCONG</u> Case No: <u>B080-2007-00445A</u>
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(Refer to vehicle by number)

ALL INVOLVED	Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants If Deceased, Date & Time of Death
	83	84	85	86	87	88	89	90	91	92	93	94	95	
F														
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I														
J														

135 Crash Description

Netcong Station was advised of the condition of Driver #2 and subsequently notified Criminal Investigating Office, Fatal Accident Unit, Morris County Prosecutor's Office and the Medical Examiner's Office.

Inspection of the scene revealed a tire mark from the right southbound lane to the right southbound shoulder, originating from vehicle #1's right rear tire. The area surrounding Vehicle #2 and the engine compartment of Vehicle #3 was covered with fire suppressing foam, water and debris. No tire marks were visible under those substances. Observation of the right lane behind Vehicle #3 did not produce any tire marks, which would make one believe that Driver #3 did not attempt to stop prior to the initial impact. Gouge marks were found, however, north of Vehicle #3, indicating the point of impact between Vehicle #3 and Vehicle #2. Vehicle #1 was then inspected and found to be a white 1998 Subaru Legacy station wagon, 5 door hatch, bearing CT registration 849943. It was equipped with an automatic transmission which was in the "Drive" gear and the odometer read 124,019 miles. Heavy damage was noted to the rear end of the vehicle. The rear compartment of the vehicle and its contents were crushed inward towards the front of the vehicle. All four tires remained inflated and in good condition. It should be noted, however, that the rear right tire was locked due to vehicle damage.

Inspection of the interior of the vehicle revealed that the driver seat was in the upright position and very close to the steering wheel even for the height characteristics of Driver #1. The driver's seatbelt was a 3 point system and fully retracted. The belt moved freely and buckled securely.

Vehicle #2 was then inspected and found to be a dark color Jeep Cherokee, 5 door hatch, bearing NJ registration MS806P, equipped with a manual transmission. Damage was noted to the front of the vehicle, the rear of the vehicle and rear undercarriage of the vehicle, no other information is available for this vehicle, due to the extent of damage caused by the fire, which engulfed the entire vehicle.

Vehicle #3 was then inspected and found to be a silver Toyota Sienna minivan, 3 door hatch, bearing NJ registration PKZ21C, equipped with an automatic transmission. Damage was noted to the front of the vehicle, the hood and windshield of the vehicle. The speedometer was stopped at 70 mph and the tachometer was stopped at 2000 RPM. The driver side and the front passenger side air bags were deployed. The front left tire and the front right tire were melted and the rear left tire and the rear right tire were inflated and in good condition.

TRE E. ORLANDO

Officer's Signature

6598

Badge Number

New Jersey Police Crash Investigation
 Report
 Motor Vehicle Crash Description

Police Dept: STATE POLICE Code: 2
 Station: NETCONG Case No: B080-2007-00445A

(Refer to vehicle by number)

Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants If Deceased, Date & Time of Death
A													
L													
L													
I													
N													
V													
O													
L													
V													
E													
D													

135 Crash Description

Inspection of the interior of the vehicle revealed that the front section was burned and that the driver's seatbelt was a 3 point system and fully retracted. The belt moved freely and locked securely. No other information from this vehicle is available due to the damage caused by the fire.

INVESTIGATION REVEALED:

Driver #1, who possesses a valid Connecticut Driver's License, was operating a white 1998 Subaru Legacy passenger vehicle. She was the sole occupant of the vehicle and was restrained. Driver #1 had been traveling south on Interstate 287 in the right lane, attempting to locate the Red Roof Inn on Route 46 in Parsippany, off of exit 42 of I-287. Passing exit 42, Driver #1 slowed down dramatically in the right lane.

Driver #2, who possessed a valid New Jersey Driver's License, was operating a 1996 Jeep Cherokee, southbound on Interstate 287 in the right lane, behind Vehicle #1. She was the sole occupant of the vehicle and it is unknown whether she was restrained or not. As Vehicle #2 continued traveling south, Driver #2 encountered Driver #1 slowing dramatically. Driver #2 reacted by also slowing.

Driver #3, who possesses a valid New Jersey Driver's License, was operating a silver 2004 Toyota Sienna minivan, southbound on Interstate 287 in the right lane, behind Vehicle #2. She was the sole occupant of the vehicle and was properly restrained. As vehicle #3 continued traveling southbound, she failed to observe the slowing of Vehicle #1 and Vehicle #2 and as result, struck the rear of Vehicle #2. Upon striking Vehicle #2, the front portion of Vehicle #3 went underneath the rear of Vehicle #2, rupturing the gas tank and causing both, Vehicle #2 and Vehicle #3, to become engulfed in flames. Simultaneously, with this impact, Vehicle #2 was pushed into the rear of Vehicle #1, causing Vehicle #1 to run off the traveled portion of the roadway and onto the right shoulder. As a result of the impacts, Vehicle #2 rotated in a counterclockwise direction and came to an uncontrolled final rest position in the center lane, facing north. Vehicle #2 remained fully engulfed in flames. Vehicle #3 came to a final uncontrolled rest position in the right lane facing southbound, as Vehicle #2 also remained engulfed in flames. While driving in the center lane at the time of the accident, Vehicle #4 was struck by debris, as a result of the collision and explosion of Vehicle #1, Vehicle #2 and Vehicle #3. There was cosmetic damage to the right front fender of Vehicle #4 observed on the passenger side on 02/28/2007 when Driver #4

Paul E. Orellano

Officer's Signature

6598

Badge Number

New Jersey Police Crash Investigation Report Motor Vehicle Crash Description	Police Dept: <u>STATE POLICE</u> Code: <u>2</u> Station: <u>NETCONG</u> Case No: <u>B080200700445A</u>
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(Refer to vehicle by number)

Veh Occ	Pos In/On	Eject	Phys Cond	Age	Sex	Loc Inj	Type Inj	Ref Med	Equip Avail	Equip Used	Bag Depl	Hosp Code	Names & Addresses of Occupants # Deceased, Date & Time of Death
83	84	85	86	87	88	89	90	91	92	93	94	95	

ALL INVOLVED

135 Crash Description

came in to Netcong Station in order to provide a written and tape recorded statement.

As a result of this collision, Driver #1 suffered minor injuries and refused further medical attention. Driver #1 was subsequently issued summonses for Obstructing Traffic (39:4-67 SP3410616) and Careless Driving (39:4-97 SP3410617). Driver #2 perished within her vehicle and was pronounced at 1100 hours by Doctor Fonseca of Morristown Memorial Hospital. Driver #3 was able to exit her vehicle and was relayed to Saint Claire's Hospital in Denville for further treatment of her injuries which included a contusion to the forehead and complaint of pain on the neck and back. Driver #3 was subsequently issued summonses for Speeding (39:4-98 SP3410618) and Careless Driving (39:4-97 SP3410619).

CONCLUSION:

This accident was caused by Driver #3, who was operating a Toyota Sienna in the right lane of I-287 South, by failing to stop upon encountering Vehicle #2 stopped or traveling at a very low speed in the same lane. Driver #1 was also responsible by carelessly and drastically slowing down in the right lane to a very low speed, obstructing the path of travel of Vehicle #2 and causing it to slow down drastically as well. Vehicle #3 struck Vehicle #2 in the rear, causing it to explode and pushing it forward. Vehicle #2 and Vehicle #3 became engulfed in flames as a result of the explosion. Vehicle #2 then struck Vehicle #1 and spun around into the center lane. Vehicle #1 traveled forward into the right shoulder. Vehicle #4 was traveling on I-287 in the center lane at the time at the accident and was struck by debris as a result of the collision and explosion of Vehicle #1, Vehicle #2 and Vehicle #3.

EXPLANATION OF BOXES:

- Box #118a (Page 1): Obstruction of traffic.
- Box #121 (Page 1): Physical status for driver #2 is pending Toxicology results.
- Box #118a (Page 2): Driver #3 failed to observe vehicles #1 & #2 in the roadway.
- Box #133 (Page 1): Vehicle #2 was totaled due to fire damage.

T. E. Orellano

Officer's Signature

6598

Badge Number

B0802007445A
Netcong Station

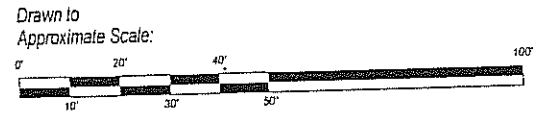
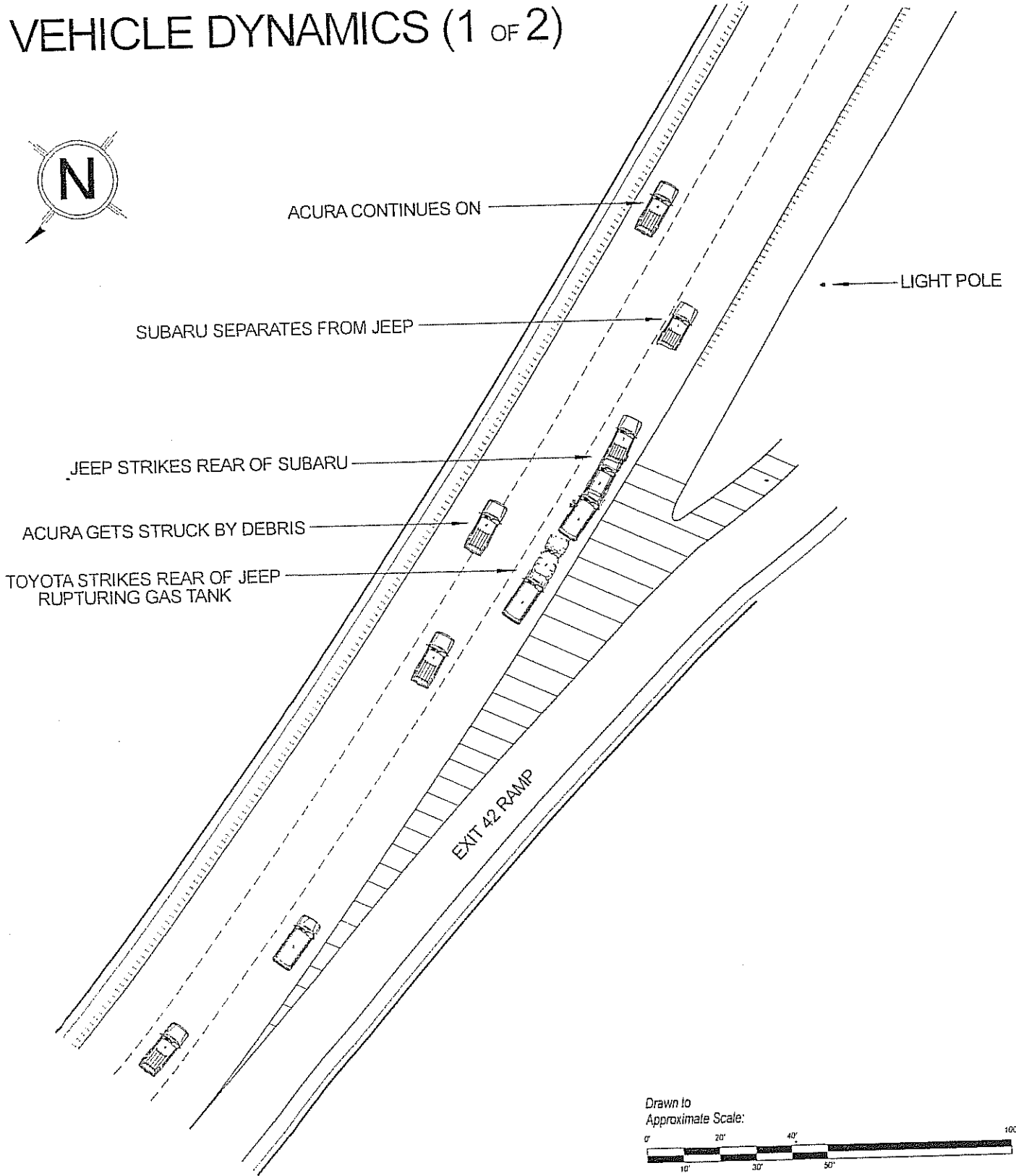
February 24, 2007
0853 Hours

Interstate 287
Milepost 42.8 South

Parsippany Township
Morris County

Weather: Clear
Road Surface: Dry

VEHICLE DYNAMICS (1 OF 2)



B0802007445A
Netcong Station

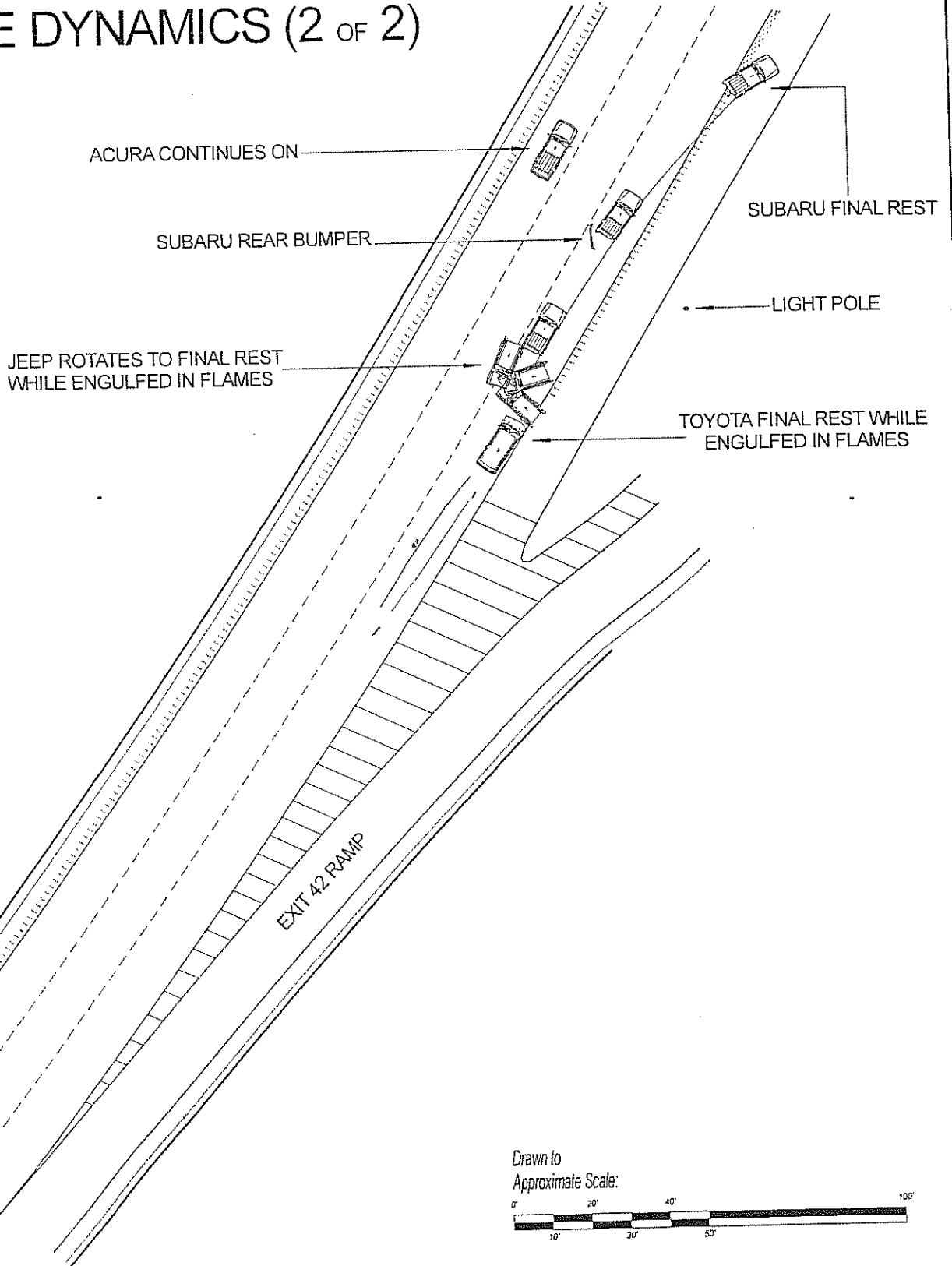
February 24, 2007
0853 Hours

Interstate 287
Milepost 42.8 South

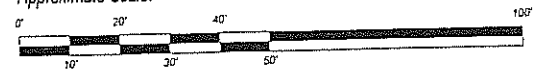
Parsippany Township
Morris County

Weather: Clear
Road Surface: Dry

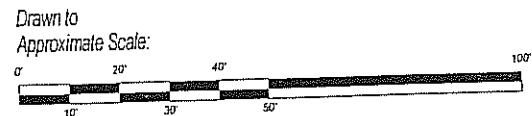
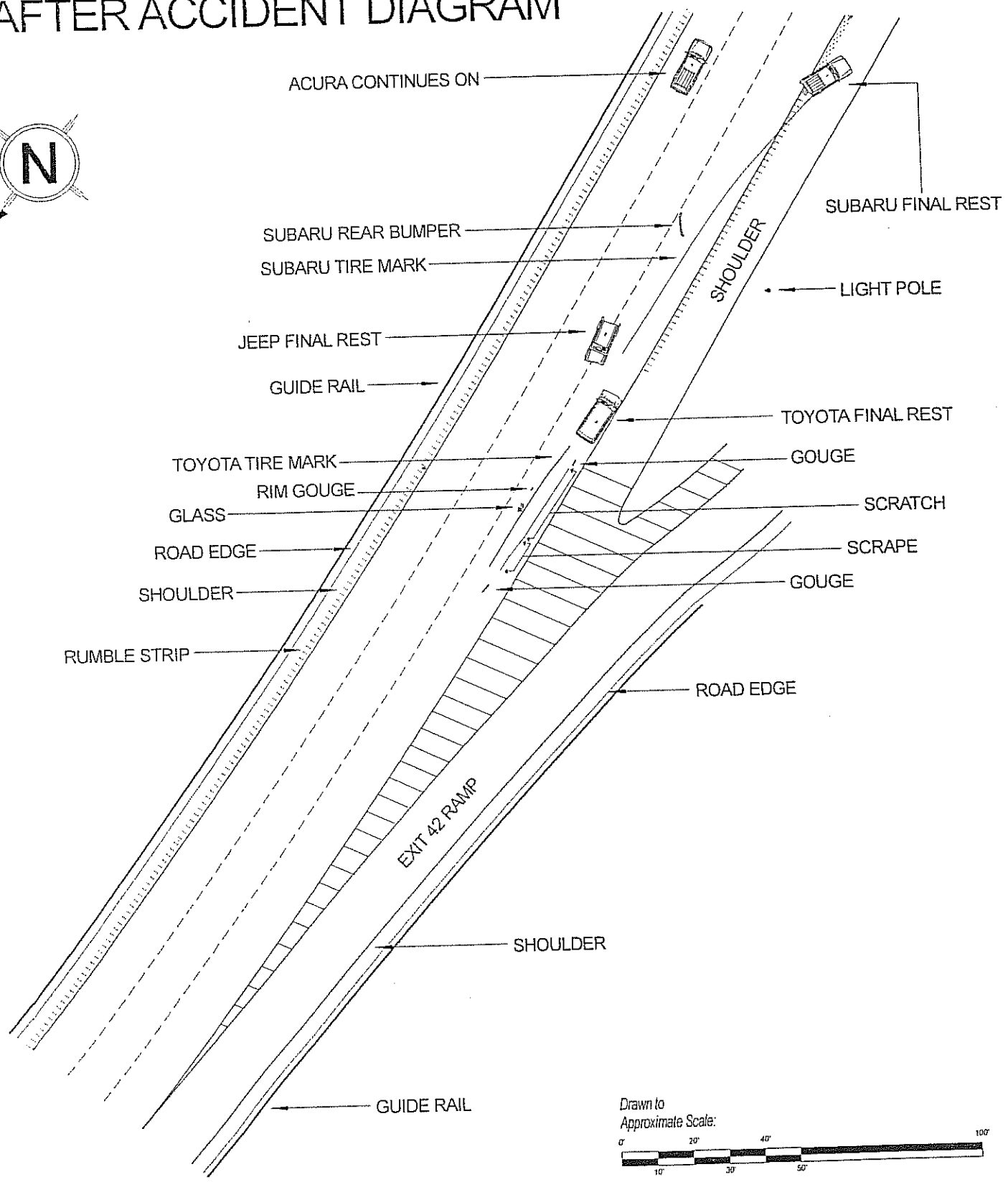
VEHICLE DYNAMICS (2 OF 2)



Drawn to
Approximate Scale:



AFTER ACCIDENT DIAGRAM



Apparent Contributing Circumstances				
Driver/Pedalcyclist Actions (01 - 29) 01 Unsafe Speed 02 Driver Inattention * 03 Failed To Obey Traffic Control Device 04 Failed To Yield ROW to Vehicle/Pedes. 05 Improper Lane Change 06 Improper Passing 07 Improper Use/Failed to Use Turn Signal 08 Improper Turning 09 Following Too Closely 10 Backing Unsafely 11 Improper Use/No Lights 12 Wrong Way 13 Improper Parking 14 Failure To Keep Right 25 None 29 Other Driver/Pedalcyclist Action	Vehicle Factors (31 - 49) 31 Defective Lights * 32 Brakes * 33 Steering * 34 Tires * 35 Wheels * 36 Windows/ Windshield * 37 Mirrors * 38 Wipers * 39 Veh Coupling/Hitch/Safety Chains * 49 Other Vehicle Factor Road / Environ. Factors (51 - 69) 51 Road Surface Condition * 52 Obstruction/Debris In Road * 53 Ruts, Holes, Bumps * 54 Control Device Defective or Missing * 55 Improper Work Zone * 56 Physical Obstructions (viewing, etc) * 57 Animals in Roadway * 58 Improper/Inadequate Lane Markings * 59 Sunglare * 69 Other Roadway Factors	Pedestrian Factors (71 - 89) 71 Failed To Obey Traffic Control Device 72 Crossing Where Prohibited 73 Dark Clothing/Low Visibili. / to Driver 74 Inattentive * 75 Failure to Yield ROW 76 Walking on Wrong Side of Road 77 Walking in Road When Sidewalk Present 78 Running/Darting Across Traffic 85 None 89 Other Pedestrian Factors Apparent Physical Status 01 Apparently Normal 02 Alcohol Use 03 Drug Use (Illicit) * 04 Medication * 05 Alcohol & Drug/Medication Use * 06 Physical Handicaps 07 Illness 08 Fatigue 09 Fell Asleep Cell Phone In Use By Driver 01 Handheld 02 Hands Free	Veh 1 118a Veh 1 118b Veh 2 119a Veh 2 119b Veh 1 120 Veh 2 121 Veh 1 122 Veh 2 123 Veh 1 124 Veh 2 125 Veh 1 126 Veh 2 127 Veh 1 128a Veh 1 128b Veh 1 128c Veh 1 128d Veh 2 129a Veh 2 129b Veh 2 129c Veh 2 129d Veh 1 130 Veh 1 131 Veh 1 132 Veh 2 133 Veh 2 134	
Vehicle / Pedalcyclist Action (01-29)		Pedestrian Action (31-49)		Pre-Crash Action
01 Going Straight Ahead 02 Making Right Turn (not turn on red) 03 Making Left Turn 04 Making U Turn 05 Starting From Parking 06 Starting in Traffic 07 Slowing or Stopping 08 Stopped in Traffic 09 Parking 10 Parked 11 Changing Lanes 12 Merging/Entering Traf Lane 13 Backing 14 Driverless / Moving 15 Passing 16 Negotiating Curve 17 Driving on Shoulder 18 Right Turn on Red 29 Other Veh/Cyclist Action *		31 Pedestrian Off Road 32 Walking To/From School 33 Walking/Jogging with Traffic 34 Walking/Jogging Against Traffic 35 Playing in Road 36 Standing/Lying/Kneeling in Road 37 Getting On/ Off Vehicle 38 Pushing/Working on Vehicle 39 Other Working in Roadway 40 Approaching/Leaving Schoolbus 41 Coming From Behind Parked Veh. 42 (reserved)		At Intersection 43 Crossing at "marked" Crosswalk 44 Crossing at "unmarked" Crosswalk At Mid-Block 45 Crossing at "marked" Crosswalk 46 Crossing / Jaywalking 49 Other Pedestrian Action *
01 Police Officer 02 RR Watchman, Gates, etc 03 Traffic Signal 04 Lane Markings 05 Channelization - Painted 06 Channelization - Physical 07 Warning Signal 08 Stop Sign 09 Yield Sign 10 Flagman 11 No Control Present 12 Flashing Traffic Control 13 School Zone (Signs/Controls) 14 Adult Crossing Guard		Traffic Controls		
Non Collision (01 - 19)		Sequence of Events (select up to 4 for each vehicle)		
01 Overtum / Rollover 02 Fire / Explosion 03 Immersion 04 Jackknife 05 Ran Off Road - Right 06 Ran Off Road - Left 07 Crossed Median / Centerline 08 Downhill Runaway 09 Cargo / Equipment Loss or Shift 10 Separation of Units 11 Fell / Jumped From Vehicle 12 Thrown / Falling Object 13 Equipment Failure 19 Other Non Collision		Collision w/ Person, MV, or Non-Fixed Object (21 - 39) 21 Pedalcyclist 22 Pedestrian 23 Train / Trolley / Other Railcar 24 Deer 25 Other Animal 26 MV in Transport 27 MV in Transport, Other Roadway 28 Parked MV 29 Work Zone or Maint. Equipment 30 Struck By Object Set in Motion By MV 39 Other Non-Fixed Object		
		Collision w/ Fixed Object (41 - 89) 41 Impact Attenuator / Crash Cushion 42 Bridge Overhead Structure 43 Bridge Pier or Support 44 Bridge Parapet End 45 Bridge Rail 46 Guardrail Face 47 Guardrail End 48 Concrete Traffic Barrier 49 Other Traffic Barrier 50 Traffic Sign Support 51 Traffic Signal Standard 52 Utility Pole 53 Light Standard 54 Other Post, Pole, Support 55 Culvert 56 Curb 57 Ditch 58 Embankment 59 Fence 60 Tree 61 Mailbox 62 Fire Hydrant 69 Other Fixed Object		
Clockpoint Diagram				
		13 Roof 14 Undercarriage 15 Overtumned 17 None Visible		Vehicle Impact Area
				Initial Impact Veh 1 130 Principal Damage Veh 1 131 Initial Impact Veh 1 132 Principal Damage Veh 2 133