LOUISIANA UNIFORM CRASH REPORT CRASH INFORMATION

	Secondary Crash		Photos Taken	☐ Video	s Taker	1	Rev. 2	2023-2		Case #			Page		of
	mber of torists	Numb	oer of Motorists	Non-Fa	atally d Persor	16	Fatalit		Fotal Inj and Fata		Vehicles Involved		Troo	р	
-	estigating Agenc		WIOLOFISIS		ivision	15	Parish		City		Jillvolved	Latitude		Long	itude
						CRA	SH TIME I	NFORMATI	ON						
Cra	ash Date/Time		Police Notified Da	te/Time	Police	Arrive	d Date/Time	Roadway Cle	eared D	ate/Time	On Scene Inve	stigation Co	mplet	ed Da	te/Time
							ROAD INFO	ORMATION							
Hiç	ghway 🔲 Not applic	cable			Road										
Dis	stance/Direction F	rom Ir	ntersection	ot applicable	Э	Inters	ecting Road	☐ Crash was	at an inte	rsection					
						LO	CATION IN	IFORMATIO	N						
	ad Classification		Road Subtype		Property			Trafficway		-	ber of	Traffic Flo	w		
	Interstate		100 Mainline		100 Public 200 Private			Characteristic 100 Trafficway, or			section roaches	Direction X Not application	ahle		
	US highway State highway		200 On-ramp 201 Off-ramp	4	200 Private	e propert	у	101 Trafficway, no			an intersection	(not a divid		nway)	
103	Parish road		300 Frontage/service					200 Non-trafficwa	У	2 Two)		N No	rth	
	City street	 .	970 Not applicable							3 Thre		W West			E East
200	Off road/private prope	пу								4 Fou 5 Five	r e or more		S So	uth	
						IN۱	/ESTIGAT	NG OFFICE	R						
Ra	nk	First	Name				Middle Nam	ne		Last Na	me		Su	ffix	
Ва	dge #		Printed Nam	9					S	Signature	•				
					SDACI	LCIDO	NIMOTANI	CEC AND C	ONDIT	IONE					
Eir	st Harmful Event						on of First	CES AND C		er of Cra	sh				
	100 Cargo/equipmen	t loss or	shift				il Event		_	a collision		200 Front to fr	ont - he	ad on	
٦ ک	101 Fell/jumped from					100 Gore					icles in transport	300 Front to it			
Non-Collision	102 Fire/explosion						rking lane or zo	ne				400 Backing -			
ö	103 Immersion, full o 104 Jackknife	r partial				102 Medi 103 Off n	an badway, locatior	unknown		le - left ove	ertake oosite direction	401 Backing - 402 Backing -			
	105 Overturn/rollover					104 On r	oadway			ile - left into		502 Sideswipe			ection
	106 Thrown or falling	object					houlder, left side		103 Ang	, jle - right in	to flow	505 Sideswipe			
	198 Other non-collision						houlder, right side road/right-of			le - right o	vertake ndicular/other angle	980 Other			
င္ပ	200 Collision with ani 201 Collision with mo					108 Road	•	,	500 And	jle - þerþer jle - left aci	oss flow	999 Unknown			
Collision	202 Collision with par						arator/traffic islar	nd	501 Ang	le - right a	cross flow				
า with	203 Collision with per		(including bicycles)			999 Unkr	iown								
No	204 Collision with per 205 Collision with rail		nicle (train, engine)				n to Junctio		_	buting F	actor			Prin	nary
Non-Fixed	206 Collision with obj						an interchange an interchange and an interchange and an intercention or dece		100 Vio	lations vement prid	or to orach		s	econo	larv
(ed C	207 Collision with fall	ing/shitti rk zone/	ing cargo or anything s maintenance equipme	et in motion nt	I DY IVI V		eieration of dece ssover related	sieration lane		on obstruc			Ū		-u. y
Object	209 Collision with far						eway access or			er conditio					
2	297 Collision with oth						ance/exit ramp or relate		-	nicle condit ad surface	on				
	298 Collision with oth					106 Rail	way grade cross	sing	106 Roa	adway cond					
င္ပ	300 Collision with brid 301 Collision with brid						red-use path or	trail		nting condi					
Collision	302 Collision with brid	dge rail					ough roadway er location withir	an interchange		ather cond ffic control	tion				
ĭ ¥	303 Collision with cat 304 Collision with cor							der, and roadside)		n-motorist o	condition				
Ϊ÷	305 Collision with cul		anic pamer		!	999 Unk	nown			n-motorist a					
with Fixed Object	306 Collision with cur									applicable					
₽ B	307 Collision with dito 308 Collision with em		ent				ction Geome ed / skewed	etry	000 No	l Bus Re	elation				
앉	309 Collision with fen						ed / skewed ndabout / traffic (circle		s. school bu	is directly involved				
	310 Collision with gua					102 Perp	endicular	-			is indirectly involved				
	311 Collision with gua 312 Collision with imp	arurali ta pact atte	nuator/crash cushion		!	970 Not a	applicable								
	313 Collision with ma	ilbox					ction Traffic								
	314 Collision with trai					Contro									
	315 Collision with trai 316 Collision with tree					000 No c									
	317 Collision with util					100 Sign 101 Stop									
	396 Collision with oth					102 Stop	-partial								
	397 Collision with oth 398 Collision with oth		barrier object (wall, building, t	unnel. etc \		103 Yield	l applicable								
	399 Collision with unl				,	J O INUL	4Philognic								
												CRASH RE	PORT -	CRASH	SUMMARY

Printed

LOUISIANA UNIFORM CRASH REPORT CRASH INFORMATION

CRASH CONDITIONS Condition Weather Conditions Environmental Conditions University Condition University	maintenance/utility)
Roadway SurfaceLight ConditionWeather ConditionsEnvironmental ConditionsCondition100 Daylight000 Clear000 None112 Ruts, holes, bumps000 Dry200 Dawn/dusk100 Blowing sand, soil, dirt100 Animal(s)113 Shoulders (none, low, sof100 Mud, dirt, gravel300 Dark - continuous street lights101 Blowing snow101 Debris114 Toll booth/plaza related101 Mud, dirt, gravel301 Dark - street lights at intersection only102 Cloudy102 Glare115 Traffic control device102 Oil103 Fog, smog, smoke103 Non-highway work116 Traffic incident103 Sand302 Dark - not lighted104 Freezing rain or freezing drizzle104 Obstructed crosswalks117 Visual obstruction(s)104 Slush399 Dark - unknown lighting105 Rain105 Obstruction in roadway118 Weather conditions	maintenance/utility)
106 Water (standing,moving) 107 Wet 980 Other 999 Unknown 108 Prior non-recurring incident 980 Other 999 Unknown 1099 Unknown 100 Regular congestion 999 Unknown 110 Related to a bus stop 111 Road surface condition (wet, icy, snow, slush, etc.) WORK ZONE CRASH INFORMATION	
Relation 000 No 100 Before the first work zone warning sign 100 Lane closure 100 Back of queue 101 Congestion (dense & slow traffic), typical 102 Heavy (dense & fast traffic) 102 Heavy (dense & fast traffic) 103 Back of queue 104 Congestion (dense & slow traffic), typical 105 Yes 106 Yes 107 Not applicable 108 Yes 109 Yes	s applicable
REVIEWING OFFICER	
Rank First Name Middle Name Last Name	Suffix
Name Name	WITNESS #
First Middle Last Suffix First Middle Last	Suffix
Address Address	
	stal Code
Phone Number Age Sex Phone Number Age Sex	
Property Type Damage Severity Owner Name Unknown Owner Phone Number	PROPERTY # er Not Collected
Owner Address Unknown	
	ROPERTY#
Property Type Damage Severity Owner Name Unknown Owner Phone Number	
Owner Address Unknown	
	ital Code
Property Type Damage Severity Owner Name Unknown Owner Phone Number	PROPERTY # er ☐ Not Collected
Owner Address	
	ital Code
Property Type 100 Private property 300 Cable barrier 301 Concrete traffic barrier 302 Guardrail end terminal 308 Other traffic barrier 309 Bridge pier or support 200 Bridge pier or support 201 Bridge pier all Property Type 300 Cable barrier 301 Concrete traffic barrier 302 Guardrail end terminal 303 Guardrail face 304 Impact attenuator/crash cushion 305 Utility pole/light support 406 Traffic signal support 407 Traffic signal support 408 Utility pole/light support 409 Utility pole/light support 409 Utility pole/light support 400 Traffic signal support 400 Utility pole/light support 400 Traffic signal support 400 Utility pole/light support 400	500) en \$500 and \$10,000)

Motor Vehicle	e #			VEHICLE INF		0#] _ [
						Case #		Pag	3	of
Check if this vehicle	1114	d Dem		DESCRIPTION AN	ID INFORMATION		. Dada Tara			
had no driver		nd Run . did not leave scene		Vehicle Type 100 Motor vehicle in transport	L		e Body Type ger Vehicles			
		s, driver and vehicle left sce	ene	101 Parked motor vehicle			senger car		103 Pick	KUD
	101 Ye	s, only driver left scene		102 Working vehicle / equipment		101 Pas	senger van / Minivan (le		104 Car	- P
VIN					☐ Unknov	VII I	ort) utility vehicle			
Model Year 🔲	Jnknown	Make	Mode	ıl	Color		ction / Farm Equipme		,	
							struction equipment (ba n equipment (tractor, co			
License Plate	Miss	ing			☐ Non-expiri	· -	Off Road / Recreation			
State	☐ Unkr	own Number		Unknown Year	Unknown		neeled motorcycle neeled motorcycle			
Owner Name	☐ Sar	ne as driver	'n			302 Mop	ed or motorizéd bicycle			
						303 All-to	errain vehicle / all-terrai Cart	in cycle (ATV / ATC)		
Owner Address	☐ Sar	ne as driver				305 Sno	wmobile			
		_					Speed Vehicle reational off-highway ve	ahicles (ROV)		
Street			City	State	Postal Code	308 Auto		shicles (IVOV)		
Insurance	Uninsure	ed at time of crash				Trucks				
Compa	nv				☐ Unknov	400 Sing n 401 Truc	gle unit truck			
						100 1140				
						D	assenger Vehicle			
						500 Moto	or home	505 School bus		
							senger van (9-15 seats) senger van (16+ seats)			
Expiration Da	ate				Unknov	vn 503 Larg	je limo `	598 Other bus /		assenger
						504 Mini	-bus	vehicle		
						Other 980 Othe	or.	999 Unknown		
		DAMAGE	:			000 0410	TOWING	ood onknown		
Damage Extent		Initial Point of Con		Damaged Areas	Tow Status		Tow Aut	hority		
000 None			_		000 Not towed		100 Owne	-		
100 Minor damage		7 8 9 10	11	7 8 9 10 11	100 Towed, but not due to 101 Towed (or will be towe			enforcement		
101 Functional damag			12		damage	a) due to diodi	980 Other			
990 Vehicle not at sce	ene				Towed By Unknown	own				
		5 4 3 2	1	5 4 3 2 1						
		☐ 000 Non-collision		☐ 001 Vehicle not at scene						
		■ 001 Vehicle not at sce	ene	■ 002 No damage						
		☐ 100 Top		☐ 100 Top						
		113 Undercarriage		☐ 113 Undercarriage						
		☐ 114 Cargo Loss ☐ 999 Unknown								
		coc cinalenti		MOTOR VEHICLE	CIRCUMSTANCE	S				
Vehicle Usage			/ehicle	Maneuver						
000 No special function	on	980 Other 1	00 Move	ements essentially straight ahead	109 Crossed median into o	pposing lane	400	Slowing to make le	it turn	
100 Bus - school (pub 101 Bus - childcare / c			01 Back		110 Crossed center line in 111 Ran off road (not while			1 Slowing to make rig 2 Slowing to stop	ht turn	
102 Bus - transit / con					200 Entering traffic lane from			2 Slowing to stop 3 Slowing for other re	ason	
103 Bus - charter / too	ur			tiating a curve	201 Entering traffic lane fro		500) Parked		1-4
104 Bus - intercity 105 Bus - shuttle			05 Overi 06 Turni		202 Entering traffic lane fro 203 Entering traffic lane fro			1 Stopped, preparing 2 Stopped, preparing		
198 Bus - other		1	07 Turni	ng right	204 Entering freeway from		500	3 Stopped in traffic		Ü
200 Farm vehicle 201 Fire truck				eling wrong way Maneuver Reason	300 Leaving traffic lane		980	Other Other	999	Unknown
202 Highway / mainte	enance			nal movement	201 Vehicle out of control,	not passing	207	7 Due to driver violat	on	
203 Mail carrier 204 Military				void other vehicle	202 Vehicle out of control,			B Due to vehicle cond		
205 Ambulance				oid non-motorist oid animal	203 For traffic control 204 Due to congestion			Due to pavement c High wind	ondition	
206 Police		1	98 To av	oid other object	205 Due to prior crash (col		980	Other		
207 Public utility 208 Non-transport em	nergency	aamiiaaa wabiala 📙	00 Passi	ing ency Vehicle Usage	206 Due to driver condition	_	999 n of Travel Before	Onknown Crash		
209 Safety service pa	atrols - inc	cident response	_	ency venicle usage emergency, non-transport		000 Not on		100 Northbound		
210 Other incident res 211 Rental truck (ove		lbs)	00 Non-	emergency transport		001 In road	lway but not in motion	300 Eastbound		
212 Towing - incident	response	e [′]		gency operation, emergency warning gency operation, emergency warning		002 Not on	trafficway	500 Southbound 700 Westbound		
213 Truck acting as c 214 Taxi	rash atte	g	70 Not a	pplicable	g equipment in use			999 Unknown		
215 Vehicle used for		, riue-rialling	99 Unkn	own						
(transportation ne	etwork co	mpany)				CRASH R	REPORT - MOTOR VEHIC	CI E DESCRIPTION A	ID IDEN	TIFICATION

Printed Revision

Motor Vehicle #	7		VEHICLE I	NFOF ev. 2023-2	RMATIO	N						Г	
							Case #			Page		of	
		Dista	MOTOR VEHICL					n an Defende					
	k Data (Feet)		nce Traveled After Im	іраст (ге	et) 🔲 Unkr		000 None	ng Defects				L	
Front Left Front Righ	t Not applicab Unknown		L. I. Lee				100 Brakes						
			cle Lighting eadlights off		L		101 Exhaust : 102 Body, do	•					
Rear Left Rear Righ	t	100 He	adlights on				103 Steering						
		101 Da 999 Un	ytime running lights				104 Power tra 105 Suspensi						
	Traffic Co	entrol Device Type					106 Tires 107 Wheels						
		<u> </u>		Device	es Inoperat	tive	108 Headligh						
	ontrol Device Ty	<u> </u>	Devices Present		r Missing		109 Tail lights 110 Signal lig						
000 None		ailroad crossing ude gates)	1	1			111 All lights						
100 Person (including flagger	, 301 Flashing s	school zone signal					112 Window / 113 Mirrors	windshield					
law enforcement, crossin guard, etc)	g 302 Flashing t 303 Lane use	raffic control signal control signal	2	2			114 Wipers	P 77 7 19 19	, , , , ,				
,	304 Ramp me		3	3			115 Truck cou 980 Other	upling / trailer hitch /	satety chair	1S			
200 Bicycle crossing sign 201 Curve Ahead warning sign	305 Traffic cor n 398 Other sign						999 Unknown	1					
202 Intersection Ahead	,		4	4		-	Automatio	n System Leve	l Present				
warning sign 203 Pedestrian crossing sign	400 Bicycle cr 401 Pedestria		Traffic Signal Status				000 No auton 100 Driver as						
204 Railroad crossing sign	402 Railroad o		100 Red signal on		L		100 Driver as						
205 Reduce Speed Ahead warning sign	403 School zo 404 Yellow no		200 Yellow signal on 300 Green signal on				102 Condition 103 High auto	nal automation					
206 School zone sign 207 Stop sign	405 White or y 406 Solid whit	vellow dash line	970 Not applicable				103 Flight autor						
208 Yield sign	498 Other pav	ement marking	999 Unknown				199 Automati 999 Unknown	on level unknown					
298 Other warning sign	(excluding	g edgelines, s, or lane lines)						n System Leve	I Engaged	d			
		s, or latte littes)					000 No auton					_	
980 Other	999 Unknown	1	D				100 Driver as 101 Partial au						
Trafficway Division 000 Not divided 100) Divided.		Barrier Type 000 None 100 Cable ba	rrier	L		102 Condition	nal automation					
001 Not divided,	flush median (grea		101 Concrete	barrier (e.	g. Jersey barri		103 High auto 104 Full autor						
	Divided, raised me Divided, depressed		102 Earth em 103 Guardrail				199 Automati	on level unknown					
999	9 Unknown		980 Other										
	Number of Through Lanes	Number of Auxiliary Lanes			d Travel		HOV Lane	Presence		HOV Lane	Relati	on	
000 Not on trafficway 100 Level	i iii Ougii Lailes	Auxiliary Lanes	•	000 Not on 100 One-w			000 None pre	esent ed barrier, flush (grea		000 No 100 Yes			
101 Uphill 102 Hillcrest			100 Straight	200 Two-w	<u>, </u>			, raised or depresse		100 165			
103 Downhill			101 Curve left 102 Curve right	Speed Li	i mit 🔲 Unkr	nown		rated, painted paver s, post-mounted deli					
104 Sag (bottom)					☐ N/A		markings	s, post-mounted den	ricators				
			MOTOR VE	HICLE	EVENTS	5							
Sequence of Events	1 2	3	4						Most	Harmful Ev	ent		
Non-Harmful Events 000 Cross centerline		005 Ra	ın off roadway left		300 Collision	with h		ollision with Fix		t on with other p	nost noli	or	
001 Cross median		006 Ra	in off roadway right		301 Collision	with b	ridge pier or s		suppo	rt .	•		
002 End departure (T-intersection 003 Downhill runaway	ction, dead-end, etc.		entering roadway paration of units		302 Collision					on with other tr on with other fi			
004 Equipment failure (blown	tire, brake failure, e		her non-harmful event		304 Collision	with c	oncrete traffic		(wall, b	ouilding, tunne	I, etc.)		
					305 Collision				399 Collisio	on with unknov	vn fixed	lobje	:ct
Non-Collision Events			Vehicle / Non-Fixed (•	307 Collision	with d	itch						
100 Cargo/equipment loss or 101 Fell/jumped from motor v		ollision with animal (live ollision with motor vehic			308 Collision 309 Collision								
102 Fire/explosion	202 Cd	ollision with parked mot	or vehicle		310 Collision			erminal					
103 Immersion, full or partial 104 Jackknife		ollision with pedalcycle ollision with pedestrian	(including bicycles)		311 Collision 312 Collision			tor/crash cushion					
105 Overturn/rollover	205 Cd	ollision with railway veh			313 Collision			nort					
106 Thrown or falling object 198 Other non-collision harm		ollision with object at re ollision with falling, shift	st from MV in transport ing cargo, or		314 Collision 315 Collision		• .	•					
	an	ything set in motion by	MV		316 Collision 317 Collision	with tr	ee (standing)						
		ollision with work zone/i Ollision with farm equipr	maintenance equipment ment		OTT COMBION	will U	unty pole/light	. σαμμυτι					
	297 Cd	ollision with other non-n	notorist										
	298 Cc	ollision with other non-fi	xed object										
							CRA	SH REPORT - MOTO	R VEHICLE	CIRCUMSTANC	ES ANI	D EVE	ENTS

Revision Printed LOUISIANA UNIFORM CRASH REPORT VEHICLE INFORMATION Motor Vehicle # Case # Page **COMMERCIAL MOTOR VEHICLE INFORMATION Vehicle Configuration Hazardous Materials Placard** 000 Had no placard and not carrying hazardous materials 000 Vehicles 10,000 lbs or less 999 Unknown 300 Single-unit truck (2-axle and GVWR > 10,000 lbs.) 001 Had a placard, not carrying hazardous materials 301 Single-unit truck (3 or more axles) 100 Carried hazardous material that required placarding 100 Vehicles 10,000 lbs or less 302 Truck pulling trailer(s) 999 Unknown 200 Carried hazardous materials without placard 303 Truck tractor (bobtail) placarded for hazardous materials **Hazardous Material ID** 304 Truck tractor/semi-trailer 305 Truck tractor/double 200 Bus/large van **Hazardous Material Class** (seats 9-15 occupants, including driver) 306 Truck tractor/triple 307 Truck more than 10,000 lbs., cannot classify 201 Bus 1 Explosives 970 Not applicable (seats more than 15 occupants, including driver) 2 Gas 999 Unknown Cargo Body Type Special Sizing 3 Flammable liquids 4 Other flammable substances ■ 000 No special sizing 000 No cargo body 5 Oxidizing substances and organic peroxides ■ 100 Over-height 6 Toxic (poisonous) and infectious substances 100 Bus 105 Flatbed 109 Log ■ 101 Over-length 7 Radioactive material 101 Auto transporter 106 Garbage / refuse 110 Pole trailer 8 Corrosives ■ 102 Over-weight 102 Cargo tank 107 Grain / chips / gravel 111 Van / enclosed box 9 Miscellaneous dangerous goods 103 Concrete mixer 108 Intermodal container chassis 112 Vehicle towing another vehicle ■ 103 Over-width 104 Dump ☐ 999 Unknown **Hazardous Materials Released** from Vehicle Cargo Compartment 970 Not applicable 980 Other 999 Unknown 000 No, hazardous materials not released 100 Yes, hazardous materials released Load Permitted Number **Motor Carrier Type** Motor Carrier Identification 970 Not applicable of Axles 000 Personal vehicle 100 US DOT number 000 Non-permitted load ☐ Unknown Motor Carrier Name Unknown 101 State number 001 Not in commerce: government 100 Permitted load 002 Not in commerce: 970 Not applicable personal rental truck or bus 999 Unknown/unable to determine 970 Not applicable 098 Not in commerce: other Motor Carrier ID Number (not a qualifying vehicle) 100 Interstate carrier 999 Unknown State 101 Intrastate carrier Motor Carrier Address ☐ Unknown Motor Carrier Phone Number Unknown State Postal Code GVWR/GCWR **Commodity Hauled** 100 Light (less than 10,000 lbs.GVWR/GCWR) 101 Medium (10.001 - 26.000 lbs GVWR/GCWR) 102 Heavy (greater than 26,000 lbs GVWR/GCWR) 970 Not applicable (not a qualifying vehicle) 999 Unknown TRAILER INFORMATION **TRAILER#** VIN Unknown Number of Axles Unknown Year Unknown Make Unknown Model ■ Unknown Non-expiring Unknown Number ■ Unknown ■ Unknown State Year TRAILER INFORMATION **TRAILER#** VIN Unknown Number of Axles Unknown Year Unknown Make Model Unknown ■ Unknown ■ Non-expiring ■ Unknown ■ Unknown Number Unknown Year State **TRAILER#** TRAILER INFORMATION VIN Unknown Number of Axles Unknown Year Unknown Make ☐ Unknown Model Unknown License Plate ☐ Missing ■ Non-expiring

Unknown

Year

■ Unknown

CRASH REPORT - COMMERCIAL MOTOR VEHICLE DESCRIPTION AND IDENTIFICATION

State

■ Unknown

Number

Revision	1	Prin	ited						M CRASH		PORT	Г							
Moto	or Vehicle	#]			[NFC ov. 202	ORMATION	V	Case #	,				一.	age	of	
							DRIVER II	NEO	RMATION		Ouse #					_ '	age	01	
Name	ПUr	nknowr	า				DINIVER	VI C	MMATION	Age	□ Unl	known	Sex		R	ace			
													100 Fema		10		erican Ind		
									0 "				101 Male 999 Unkn		10		ka Native In or Pac		nder
First Address	□ Ur	nknowr	า	Mida	lle	L	ast		Suffix	Pho	ne Num	ber		ot Collec	ted 10)2 Blad	k	no ioiai	1001
																03 Whi 30 Oth			
Street					Citv		State	Postal	Code						99	99 Unk	nown		
	Respond	der			City		State	rustai	Code	Dat	e of Birt	h		Unknow	n E	thnici	ty		
000 No 100 EMS		olice ow ope	rator						980 Other 999 Unknown							00 Hisp	anic r than His	nania	
100 EMS				.e. mainter	nance work	kers, safety service pati	rol operators, etc.)		333 OHKHOWH							99 Unkr		spariic	
						DR	IVER LICEN	ISE	INFORMATI	ON									
License						License Class			Driver Licens	-	•		_ `		Driver	r Lice	nse Sta	tus	
100 Valid li 000 Not lic			04 Susp 99 Unkn			000 None 100 Class A			100 Non-CDL dr 101 Non-CDL re			anse	100 Valid	-			anceled o		d
001 Cance	eled or denie		oo onki	OWII		101 Class B			(learner's pe	ermit, t	emporary/l	imited,	TO I LOUI	mor o po		002 Ex	pired	ı	
002 Expire 003 Revok						102 Class C 200 Light commercial	/chauffeur (LA clas	s D)	graduated of 200 Commercial							003 Re	evoked Ispended		
License	Number			License	State	300 Motorcycle only	,	- /	970 Not applicab		(-	,					her (not		
						400 Regular driver lice 970 Not applicable	ense (LA class E)										ot applica nknown	ble (no	CDL)
Endorse	ements or	1 Lice	nse		Endors	ement Complianc	e		Restrictions of	n Lic	cense		ļ			999 01	IKNOWN		
□ 000 N	lone/not app	olicable				ndorsements required t													
□ 100 H	Η - Hazardoι	us matei	rials			orsements required, cor orsements required, not													
☐ 101 N	l - Tank veh	icle				orsements required, cor nown if endorsements re													
□ 102 P	- Passenge	er			JJJ Oliki	iowii ii endorsements n	oquilou												
☐ 103 S	S - School																		
☐ 104 T	- Double/tri	iple trail	ers																
□ 105 X	(- Combinat	tion of ta	ank vehi	cle and															
h	azardous m	aterials																	
□ 200 N	Л - Motorcyle	е							Alcohol Interl	ock E	Proconce	<u> </u>							_
l l	Other non-co		al licens	se					000 No	ock i		ot applica	able						
	endorsement	ts							100 Yes		999 U	nknown							
☐ 999 U	JIKHOWH																		
Coating	Position					DRIVER S	Restraint Sys		AFETY INFO)RM	ATION								
							1 .			,	002 No heli	mat					070 N	lot anni	licable
Standa	rd Vehicle	e Seat	s	Other	Seating	Positions	1001 None used -	- 111010	or vehicle occupant		JUZ INO HEI	met					980 (lot appl Other	licable
Dl	Front		111.		enclosed c	argo area or vehicle exterior	100 Booster seat		tem – forward facir				motorcycle iant motore		met		999 L	Jnknow	n
	eft Middle 00 101	102	Unk 199	(nor	n-trailing u		102 Child restrain	nt syst	tem – rear facing	2			T-complian			lmet			
1		-	299	800 Trai		on of cab (truck)	103 Child restrain		tem – type unknow	'n									
1	00 201	202	 	898 Oth	er enclose	d cargo area	105 Shoulder and	d lap b	oelt used						_				
1	00 301	302	399	970 Not 999 Unk	applicable nown)	106 Shoulder bel 107 Stretcher	it only	usea							•	ication r use?	of	
1	00 401	402	499				108 Wheelchair 199 Restraint use	od tv	no unknown						000	No No			
1	00 501	502	599				133 Nestraini use	eu – ty	ype unknown) Yes) Unkno	own		
Unk 6	00 601	602	699																
A: =	- ·										-	_		ı			•		
	s Deploye			_								Ejection 000 Not			_	t ricat) No	ion		
	Not deployed		ch off		970 Not ap	oplicable yment unknown						100 Ejed	cted, partia		100	Trapp	ed and ex		
		ou - SWIL	on UII	<u></u>	oss nehio	yment unknown							cted, totally applicable			Trapp Unkno	ed but no wn	t extrica	ated
100	Front Side											999 Unk							

■ 100 Front ■ 101 Side ■ 102 Curtain

103 Other (knee, air belt, etc.)

LOUISIANA UNIFORM CRASH REPORT

Motor Vehicl	e #					DF	RIVEF	RINFO		ATION		J.(.)					
								Rev. 2023	3-2		C	ase #			Page		of
					-	n	EMS R	esponse	Agen	су							
	arioue Iniu					/n											
					333 OTKITOV	/11	EMS R	esponse	Run #	! □ Un	nknown						
		200 L	aw enf	orcement				•		_							
				7													
Medical Unique	Identifie	er	L	Not appli	cable 🔲 U	nknown	Facility	Receivii	ng Pat	ient							
					DRI	/FR C	ודוחואר	ΙΟΝ ΔΝ	D CIF	RCHMS	TANC	FS					
Conditions at Ti	me of C	rash		Distraction	on Action			Distract	ion S	ource					Speeding Re	latio	n
000 Apparently norma	al	Ī	\equiv	000 Not dis	stracted					obile phone		Passenger	or other non-	motorist	000 No		L
	out	L								obile phone			vehicle/non-r	notorist area	100 Exceeded s	oeed I	imit
	hasse						ne etc)	102 Vehic 198 Other		rated device		Other Not applica	hle		101 Racing 102 Too fast for	condit	rions
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103 III (sick), fainted								Vision C	Dbscu	rement					1		
			۱	999 Unkno	wn distraction			000 None				105 Emb			linded by sun glare		
of medications/dr	rugs/alcoh	nol								etc. on wind therwise ob		106 Sign 107 Hillcr			istracted by neon I n field of view	ights	
106 Inattentive/distraction		Not applic	able							ed by load			ed vehicles	II	i ileid oi view		
								103 Trees		s, etc.			ng vehicles	980 O			
Suspected				Alcohol	□ Hakaawa	Alcoho	I Tost T	104 Buildi	ng			110 Blind	led by headlig	ghts 999 U	nknown	Тр/	AC
Alcohol		L	— .		U OHKHOWH			ype		300 Urine	970 N	L lot applicab	_	ılts pending		⊣"	10
Usage	001 Test	refused	<u> </u>	Number						301 Vitreous					ith no actual value		
000 No						102 Blood	d plasma/s	serum	3	302 Liver				ilts received			
	th						970 Not a		h no actual value								
								ath test (PE	BT)				999 Unkr				
000 Apparently normal 100 Asleep/blacked out 100 Talking / listening 101 Hat 101 Fat 101 Fat 101 Fat 102 Emotional (depressed, angry, disturbed, etc.) 101 Manually operating a device (e.g., texting, dialing, playing game, etc.) 198 C (e.g., texting, dialing, playing game, etc.) 198 C (a.g., texting, dialing, playing game, etc.) 198 C (a.g., texting, dialing, playing game, etc.) 100 Fat 101 Fat											Drug 1	Test Resu	ults				
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		or Crasn	1						_	oidance N No avoidan			000 Trackin	sion Stabili	ity		
000 NO CONTIDUCTION	Clion									INO avoidani	ice maner	2461			y - rotation less tha	an 30	degrees
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Not applicable									103	Braking and	d steering	left	980 Other v	ehicle loss of			
										Braking and		right	999 Unknov	vn			
										Braking (loo Braking (no							
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,									000	041							
										Other Unknown							
	ded due to	wind,slip	pery su	urface,moto	r vehicle,object,	non-motor	ist in road	way,etc.		OTHER TOWN							
115 Wrong side or wr	ong way																
980 Other contributing	g action																
999 Unknown																	
								CITATIO	DNS								

CRASH REPORT - DRIVER CONDITION AND CIRCUMSTANCES

LOUISIANA UNIFORM CRASH REPORT PASSENGER INFORMATION

Total # of Passenge	ers			PAS	SSENGE	R INFORMAT	ION					
Total # Of Fassering	513				R	ev. 2023-2	Case	#			Page	of
				Р	ASSENGE	R INFORMATIO	N					
MOTOR VEHICLE #	PASSENGER	#			AUULINUL	I IIII OIIIIAIIO						
Name Unkno		"					Date of	Birth Age		Sex		Race
										100 Fem		
First	Middle			1:	ast	Suffix				101 Male 999 Unk		
Address Unkno				Lo	151	Sullix		l	Pho	ne Number		Ethnicity
											Collected	
Street			City			State	Postal C	ode				
Air Bags Deployed		Injury Stat	us Ir	ncident	Responder	Restraint System	Any indicati	on	Seat	ting Positior	Ejection	Extrication
☐ 000 Not deployed	☐ 970 Not applicable						of improper	000 No 100 Yes				
☐ 001 Not deployed	☐ 999 Unknown						use?	999 Unknowr				
- switch off	Type of	Medical	☐ No		EMS Respor	se Agency	•			lity Receivir	g Patient	
■ 100 Front	Medical	Unique		plicable								
☐ 101 Side	Transportation	Identifier	∐ Un	nknown	EMO Danas	B # 🗖 !!!			_			
☐ 102 Curtain					EWS Respor	nse Run # 🔲 Unkn	own					
☐ 103 Other												
MOTOR VEHICLE #	PASSENGER	#										
Name Unkno	own						Date of	Birtn Age		Sex	. 1	касе
										100 Fem 101 Male		
First	Middle			Lá	ast	Suffix				999 Unk	nown	
Address Unkno	own								Pho	ne Number		Ethnicity
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Street	-		^",			<u> </u>	1		<u> </u>		T=	<u> </u>
Air Bags Deployed		Injury Stat	us Ir	ncident	Responder	Restraint System	Any indicati of improper	on 000 No	Seat	ting Position	Ejection	Extrication
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- switch off	Type of Medical	Medical Unique	☐ No	ot oplicable	EMS Respor	ise Agency			Faci	lity Receivir	ig Patient	
100 Front	Transportation			nknown								
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102 Curtain					· .	_						
MOTOR VEHICLE #		#					Dete of	Dinth Ann		Cov		Pess
		#					Date of	Birth Age		Sex 100 Fem	ale	Race
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MOTOR VEHICLE # Name	own <i>Middl</i> e	#		La	ast	Suffix	Date of	Birth Age	Pho	100 Fem 101 Mal 999 Unk	nown	
MOTOR VEHICLE # Name Unkno	own <i>Middl</i> e	#		La	ast	Suffix	Date of	Birth Age	Pho	100 Fem 101 Male	nown Not	Race Ethnicity
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Non-Motoris	t #			NON-		T INFORM	ATIO	N				
					Rev.	2023-2		Case #			Page	of
				NO	N-MOTORIS	T INFORMAT	TION					
Name Ur	nknown							Unknown	Sex 100 Female	\Box	Race O American Ir	
First		Middle		1.	ast	Suffix			101 Male 999 Unknown	10	Alaska Nati 01 Asian or Pa	-
	nknown	ivildale		Lo	151	Sumx	Phon	ne Number	☐ Not Co	10 98	02 Black 03 White 80 Other 99 Unknown	
Street	1	C	City		State Po	ostal Code	D. (. f.B.: (l.				
Incident Respond						980 Other	Date	of Birth	☐ Unkr		thnicity 00 Hispanic	
100 EMS 03 To	ow operator	e. maintenance	workers, safety se	ervice patrol	operators, etc.)	999 Unknown				10	00 Hispanic 01 Other than F 99 Unknown	Hispanic
				NON	-MOTORIST	CIRCUMSTA	NCES					
Non-Motorist Tyl 100 Bicyclist 198 Other cyclist 200 Pedestrian 298 Other pedestrian person in a build personal convey 300 Occupant of a no transportation de	n (wheelchair, ling, skater, rance, etc.) on-motor vehicle		12 o'clock) 3 o'clock) 6 o'clock) o'clock)	101 Inters 102 Inters 103 Media 104 Midbl 105 Shou 106 Trave	section - marked crosection - unmarked of section - other an/crossing island ock - marked crossider/roadside al lane - other location of the section - other location - other locat	crosswalk 201 \$ 202 0 203 0 walk 204 \$ 205 0	Shared land On-street boon-street boonstreet boons On-street boonstreet boons	uffered bike lan	301 302 303 980		icway area use path or trail	
Struck by Vehicle	e #			K-12)		100 Helmet 101 Protective page 102 Reflective we	•		hins, etc.)	103 Light 104 Refle	-	80 Other 99 Unknown
Action Prior to C	rash	1999 OHAHO		ircumsta	nces At Time o	of Crash			Clot	hing Bri	ghtness	Upper
000 None 100 Adjacent to road 101 Crossing roadwa 102 Waiting to cross 103 Walking/cycling a (in or adjacent to 104 Walking/cycling a (in or adjacent to 105 Walking/cycling a 106 Working in traffic 198 In roadway -othe 1990 Utbrown	lway (e.g.,should ay roadway along roadway a o travel lane) along roadway v o travel lane) on sidewalk cway (incident re	against traffic	000 None (no ir 100 Dart / dash 101 Disabled ve (working or 102 Entering/ex 103 Failure to o 104 Failure to o 105 Improper tu 106 Improper tu 107 Inattentive 108 In roadway	ehicle relate n, pushing, l iting parked bey traffic s ield right-of- assing urn/merge (talking, eat	d eaving/approaching l/standing vehicle igns, signals, or offi way ing, etc.)	109 Not visi 110 Wrong- I) 980 Other	way riding	lothing, no lighti or walking	100 Li 101 D 970 N	ight		Lower
				1011111	TODIOT ME		377A-37	O				
Injury Status 100 (K) Fatal Injury 101 (A) Suspected S	Gerious Injury 1	000 Not transpor	ical Transport ted		EMS Respons	DICAL INFO	RMATI	ON	EMS	Respor	nse Run #	Unknown
102 (B) Suspected M 103 (C) Possible Inju 104 (O) No Apparent	ıry 2 t Injury 9	01 EMS ground 200 Law enforce 980 Other 999 Unknown			Medical Uniq	ue Identifier	☐ Not ☐ Unk		cility Receivin	g Patier	nt	
				N	ON-MOTORI	IST CONDITION	ON					
Conditions at the	e Time of the	Crash			raction Action			Distr	action Source)		
100 Apparently normal 100 Asleep/blacked of 101 Fatigued 102 Emotional (depre 103 III (sick), fainted 104 Physically impaired 105 Under the influent drugs/alcohol 106 Inattentive/distract	out essed, angry, dis ed ce of medication	980 999 turbed, etc.)	Not applicable Other Unknown	100 - 101 ! 200 ! 980 (Not distracted Falking / listening Manually operating dialing, playing gam nattentive Other distraction Unknown distraction	,	ing,	101 H 102 V 198 O 200 P 201 E 298 O 970 N	ands-free mobile p and-held mobile p ehicle-integrated of ther electronic dev assenger or other xternal to vehicle/n ther ot applicable nknown	hone levice vice non-motol		
Usage 000 No 100 Yes 999 Unknown	Test Status 000 Test not gi 001 Test refuse 100 Test given 999 Unknown i	ven Kit Num f tested	ber	100 Blo 101 Blo 102 Blo 200 Bro 201 Pro	ood clot ood plasma/serum eath eliminary breath tes	300 Urine 301 Vitreo 302 Liver 970 Not ap t (PBT) 980 Other		100 Results r 101 Positive 970 Not appli 999 Unknowr	pending results with no ac received results with no act cable		BAC	
	Test Status 000 Test not gi 001 Test refuse 100 Test given 999 Unknown i	ven Kit Num		100 Blo 101 Uri	ine th blood and urine liva	970 Not applicable 999 Unknown	,	Drug Test		REPORT -	NON-MOTORIS	T INFORMATION

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		•		ev. 2023-2	Case #	Page of
			NON-VEHICULAR	PROPERTY DAMA	GE	PROPERTY#
Property Type	Damage Severity	Owner Name	Unknown			ner Phone Number Not Collected
Owner Address	Unknown	<u> </u>				
Street				City		State Postal Code
			NON-VEHICULAR	PROPERTY DAMA	GE	PROPERTY #
Property Type	Damage Severity	Owner Name	☐ Unknown		Ow	rner Phone Number
Owner Address	☐ Unknown					
Street			NON VEHICLE AR	City		State Postal Code
Property Type	Damage Severity	Owner Name	Unknown	PROPERTY DAMA		PROPERTY # oner Phone Number Not Collected
Owner Address	☐ Unknown					
Street				City		State Postal Code
			NON-VEHICULAR	PROPERTY DAMA	GE	PROPERTY #
Property Type	Damage Severity	Owner Name	Unknown		Ow	ner Phone Number Not Collected
Owner Address	☐ Unknown				·	
Street			NON VEHICLE AD	City		State Postal Code
manager Turns	Damaga Savarity	Owner Neme		PROPERTY DAMA		PROPERTY#
Property Type	Damage Severity	Owner Name	Unknown		Ow	ner Phone Number
Owner Address	☐ Unknown					
Street			NON-VEHICIII AR	City PROPERTY DAMA		State Postal Code PROPERTY #
Property Type	Damage Severity	Owner Name	Unknown	THOI ENTI DAMA		ner Phone Number Not Collected
Owner Address	Unknown	<u> </u>				
Street				City		State Postal Code
				PROPERTY DAMA		PROPERTY #
Property Type	Damage Severity	Owner Name	☐ Unknown		Ow	ner Phone Number Not Collected
Owner Address	Unknown					
Street			NON-VEHICIII AR	City PROPERTY DAMA		State Postal Code PROPERTY #
Property Type	Damage Severity	Owner Name	Unknown	PROPERTI BANKA		ner Phone Number Not Collected
Owner Address	☐ Unknown				<u> </u>	
Street				City		State Postal Code
Proporty Trees			PROPERTY	DAMAGE CODES		Damago Soverity
Property Type 00 Private property	300 Cable barrie	er 30	03 Guardrail face	400 Traffic sign support	598 Other state property	Damage Severity 100 Light (less than \$500)
00 Bridge overhead st 01 Bridge pier or supp 02 Bridge rail	301 Concrete tra ructure 302 Guardrail er	affic barrier 30	14 Impact attenuator/crash cushion 18 Other traffic barrier		980 Other	101 Moderate (between \$500 and \$10,000) 102 Severe (over \$10,000)

CRASH REPORT - NON-VEHICULAR PROPERTY DAMAGE

Revision		Printed			LOUISIA	ANA UNII	_	_		PORT				
Train	#					TRAIN	SUPF Rev. 202	PLEMEN 3-2	T	Case #			Page	of
						TRAIN	INFO	RMATION		Oase #			1 age	OI
Train Type 100 Railroad train 101 Streetcar		ID#	☐ Not Appl	icable	Unknown	Lead Eng		☐ Uni	known	Serial #	Unkno	□ 000 N □ 100 H	t Equipment lone leadlight function litch lights function	
Make Unk	nown		Туре 🔲	Unknown	# of	Engines 🔲	Unknow	# of Cars	☐ Uni	known Data	Recorder Spee	102 F	lorn functional sell functional event data record	
			RACK INF	ORMATI							RNING DEV			
DOT Crossin		☐ Ui	ot Applicable nknown		Crossing S Material 100 Rubber m 101 Asphalt 102 Wood		000	Flashing lights		☐ 000 N ☐ 100 S			ive Warning 000 None 100 Lights flashir 101 Bell ringing	
Sets of Track	(S Spe	eed Limit	Crossing 100 Public 101 Private	Type	103 Concrete 104 Gravel		980	Crossbuck Other		□ 102 A □ 980 C	Active advance warr Other		102 Gates down 980 Other	
								ORMATIC	N					
Train in Motion 000 No 100 Yes			on crossing		ar# □ Not/	Applicable	Unknown			Struck Ca Type				
Collision Type 100 Frontal 101 Side/backing			over crossing I on crossing	Struck Car Posit	tion			☐ Not Appl ☐ Unknow		Distance 1 After Impa	act E	☐ Not Applica		ted Speed Braking
Hazardous M	,	als Placar	rd		Hazar	dous Materia	al Class	<u> </u>			Hazardous Ma	miles	leased	
000 Had no placa 001 Had a placar 100 Carried haza 200 Carried haza 999 Unknown Hazardous M	rd, not o ardous ardous	carrying haz material that materials wit	ardous material t required placar	S	4 Other 5 Oxidi 6 Toxid 7 Radid 8 Corrd	mable liquids flammable subsizing substances (poisonous) and pactive material sives	and orgar d infectiou rous good	nic peroxides s substances	970 Not 999 Unk	applicable known	from Train Ca 000 No, hazardou 100 Yes, hazardou 970 Not applicable	s materials no us materials r	ot released	
Name [] Unki	nown		Address Street	Unknow	n				City		State	Postal	Code
Name [] Unki	nown		Address	Unknow		ACK O	WNER						
				Street						City		State	Postal	Code
Name [] Unł	known	Middle					SINEER I no engineer	Cer	rtification N	lumber 🔲 Ur	100	Ace American India Alaska Native Asian or Pacifi	
Address Street		known		City		State	e Postal		Pho	one Numbe	er Not Col	103	2 Black 3 White 0 Other 9 Unknown	
100 EMS	102 Po 103 To		980 Other	999 Unknow	1	atrol operators o	1	Sex 00 Female 01 Male	Age	Unknown	Date of Birth	☐ Unknown	100 Hispanic 101 Other tha	an Hispanic
Injury Status 100 (K) Fatal Inju 101 (A) Suspecte 102 (B) Suspecte 103 (C) Possible 104 (O) No Appa Medical Uniq	iry ed Serio ed Mino Injury irent Inj	or Injury jury	Type of Me 000 Not transp 100 EMS air 101 EMS grou 200 Law enfor	ported	sportation 980 Other 999 Unknown	EMS Res	sponse		Unknow	n				
												CRASH R	PORT - TRAIN IN	IFORMATION I

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			TRAIN CO			la.			
Name	Unknown		☐ This train had	d no conductor		Alask	rican Indian or a Native n or Pacific Isla	102 Black 103 White ander 980 Other	999 Unknown
irst Address	Unknown	Middle	Last		Suffix	101 Asiai	I UI Facilic Isia	Phone Number	■ Not Collected
tuui 055	_ Chikhowh							i none ramber	I Not Collected
treet	esponder	City		Sex	State Age	Postal (rth □ Unknown	Ethnicity
00 No	102 Police	980 Other 999 Unknown		100 Female	_Age 🗀	OTIKITOWIT	Date of Bi	TUI OIIKIIOWII	100 Hispanic
00 EMS	103 Tow operator			101 Male					101 Other than Hispanic
njury Stat	<u> </u>	Type of Medical Transportation	EMS Respons						I I I I I I I I I I I I I I I I I I I
00 (K) Fatal		000 Not transported 980 Other	_ Elvio Respons	e Agency					
)1 (A) Suspe	ected Serious Injury	100 EMS air 999 Unknown							
12 (B) Suspe 13 (C) Possi	ected Minor Injury	101 EMS ground 200 Law enforcement	EMS Respons	e Run#	Unknown				
	pparent Injury	200 Law emorcement							
	nique Identifier	☐ Not applicable ☐ Unknown	Facility Receiv	ving Patient					
		P/	ASSENGER II	NFORMATI	ON				
ASSENG	ER#			4811//48					
ame	Unknown					Race			
	_					100 Amei	ican Indian or	102 Black	999 Unknown
							a Native	103 White	
idress	Unknown	Middle	Last		Suffix	101 Asiai	or Pacific Isla	Phone Number	■ Not Collected
iui ess	☐ OHKHOWH							Phone Number	I Not Collected
reet		City		1-	State	Postal (I=
ocident Ro 10 No	esponder 102 Police	000 Other 000 Halmania		Sex 100 Female	Age 🗆	Unknown	Date of Bi	rth 🔲 Unknown	Ethnicity 100 Hispanic
00 INO 00 EMS	103 Tow operator	980 Other 999 Unknown		100 Female					101 Other than Hispanic
11 Fire		(i.e. maintenance workers, safety service natrol	_	999 Unknown					999 Unknown
ijury Stat		Type of Medical Transportation	EMS Respons	e Agency					
)0 (K) Fatal)1 (A) Suspe	Injury ected Serious Injury	000 Not transported 980 Other 100 EMS air 999 Unknown							
)2 (B) Suspe	ected Minor Injury	101 EMS ground	EMS Respons	e Run #	Unknown				
03 (C) Possi	ible Injury pparent Injury	200 Law enforcement							
	nique Identifier	☐ Not applicable ☐ Unknown	Facility Receiv	ving Patient					
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ипте	- OHKHOWH					100 Amer	ican Indian or	102 Black	999 Unknown
						Alask	a Native	103 White	ood ommonii
st	— …	Middle	Last		Suffix	101 Asiar	or Pacific Isla		
ddress	Unknown							Phone Number	■ Not Collected
reet		City			State	Postal (
	esponder	000 04		Sex	Age 🗆	Unknown	Date of Bi	rth 🔲 Unknown	Ethnicity
00 No 00 EMS	10 Police 10 Tow operator	980 Other 999 Unknown		100 Female 101 Male					100 Hispanic 101 Other than Hispanic
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jury Stat		Type of Medical Transportation	EMS Respons	e Agency					
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	ected Serious Injury ected Minor Injury	100 EMS air 999 Unknown 101 EMS ground	EMS Respons	e Run#⊓	Unknown				
)3 (C) Possi	ible Injury	200 Law enforcement			J.II. III WIII				
	pparent Injury		<u> </u>						
ledical Ur	nique Identifier	☐ Not applicable ☐ Unknown	Facility Receiv	ving Patient					
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Total # of	Train Passengers]	Т		PPLEME		-			1 -	
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			PA	ASSENGER	INFORMAT	ION					
TRAIN # Name	PASSENGI Unknown	ER#					Race				
Name	- Olikilowii						1	ican Indian or	102 Black	99	9 Unknown
								a Native or Pacific Isla	103 White		
Address	Unknown	Middle		Last		Suffix	101 Asiai	I UI Facilic Isla	Phone Number	r	Collected
	_									_	
Street			City			State	Postal (ode.			
Incident R	esponder		Oily		Sex	Age 🔲			rth 🔲 Unknown	Ethnicity	
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101 Fire		(i.e. maintenance workers, safet	v service patrol	operators, etc.)	999 Unknown					999 Unknow	
Injury Stat		Type of Medical Transp		EMS Respo	nse Agency						
100 (K) Fatal 101 (A) Suspe	Injury ected Serious Injury		Other Unknown								
102 (B) Suspe	ected Minor Injury	101 EMS ground		EMS Respo	nse Run #	Unknown					
103 (C) Possi 104 (O) No Ap		200 Law enforcement									
Medical Ur	nique Identifier	■ Not applicable	Unknown	Facility Rec	eiving Patient						
TRAIN#	PASSENG	ER#									
Name	OHKHOWH						100 Amou	isan Indian au	100 Dlask	00	O I Independen
							1	rican Indian or ka Native	102 Black 103 White	95	99 Unknown
First		Middle		Last		Suffix	101 Asiar	or Pacific Isla			
Address	Unknown								Phone Number	r ∐ Not	Collected
Street Incident Re	esnonder		City		Sex	State	Postal o		rth 🔲 Unknown	Ethnicity	
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100 EMS 101 Fire	10 Tow operator	(i.e. maintenance workers, safet	v service natrol	operators etc.)	101 Male 999 Unknown					101 Other th	an Hispanic n
Injury Stat		Type of Medical Transp		EMS Respo						TOOO OTINIOW	
100 (K) Fatal	Injury		Other	1							
	ected Serious Injury ected Minor Injury	100 EMS air 999 101 EMS ground	Unknown	EMS Respo	nse Run #	Unknown					
103 (C) Possi 104 (O) No Ap	ble Injury	200 Law enforcement			-						
. , .	nique Identifier	☐ Not applicable	Unknown	Facility Rec	eiving Patient						
	1				g : 3						
TRAIN#	PASSENGI	ER#									
Humo	- OHIMIOWII						Nuov				
								rican Indian or		99	9 Unknown
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101 Fire	10 Transportation	(i.e. maintenance workers, safet		. ,	999 Unknown					999 Unknow	
Injury Stat		Type of Medical Transported 980		EMS Respo	nse Agency						
	ected Serious Injury	100 EMS air 999	Other Unknown								
102 (B) Suspe 103 (C) Possi	ected Minor Injury	101 EMS ground 200 Law enforcement		EMS Respo	nse Run #	Unknown					
	pparent Injury	200 Law Gillordelliell									

Facility Receiving Patient

■ Not applicable

Unknown

Medical Unique Identifier

Total # of Witnesses				NESSES v. 2023-2			- m.m
					Case #		Page of
				NESSES			_
			WITNESS #				WITNESS #
Name				Name			
First	Middle	Last	Suffix	First	Middle	Last	Suffix
Address				Address			
City		State	Postal Code	City		State	Postal Code
Phone Number		Age	Sex	Phone Number		Age	Sex
			WITNESS#				WITNESS #
Name				Name			
First Address	Middle	Last	Suffix	First Address	Middle	Last	Suffix
Address				Address			
O:t-		04-4-	Dantal Oada	0:4		04-4-	Dantal Carlo
City		State	Postal Code	City		State	Postal Code
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		•	•	•		C	RASH REPORT - WITNESSES

Revision Scene #	Printed	LOUISIANA UNIFORM CRASH REPORT DIAGRAM		
Scene #		Rev. 2023-2 Case #	Page	ı
		CRASH DIAGRAM		

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LOUISIANA UNIFORM CRASH REPORT NARRATIVE

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LOUISIANA UNIFORM CRASH REPORT PHOTOS

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