Page 1 of 12		CONNECTIO			POLICE CRASH F	REPORT		
Number of	Motor Vehic	les: 3	Form PR	R-1 REV	July 2014.01	Casa	Number:	23-007179
	Motorcycles, etc.		Creek	C	oru (Front)		Number.	
	Non-Motoris	sts: 0	ts: 0 Crash Summary (Front)			DOT Id	entifier:	
Pedestrians, Bi	icyclists, etc.					101		
		CRASH D	ATE, TI	ME, SE	VERITY AND LOCA	TION		
Date of Crash (YYYYMMDD	) .	Time (0000-2359)	Town N	lame		Town	<b>#</b> (	Crash Severity
20230316	19	07	Hartford			64	0	
20200010	10					01	C	) Fatal 🌑 Injury 🔘 PDO
Latitude	Crash occurre	d on (street name o	<sup>·</sup> route #) at	its inter	section with (street name o	or route #)		
41.763637	397 Capitol	Av			at FLOWER ST	/BABCOCK	ST	
<u> </u>					at		-	
Longitude	If not at an In	tersection: distance	Feet	N	S,E,W name of neares	st intersecti	ng road, tov	wn line, or mile marker
-72.688743		94	O Tenths of	Mile	E of Capitol Aver	nue/Babcoc	k Street	
For all numeric fields: 99 =	'Unknown'	CF	RASH FA	CTOR	S AND CONDITION	IS		
TRAFFICWAY OWNER					FIRST HARMFUL EVEN		MANNER	OF IMPACT
01. Public Road	01	01. On Roadway		01	Non-Collision:	15	(Applies to: crashes)	multi-vehicle 01
02. Private Road	01	02. Shoulder		01	01. Overturn/Rollover	15	crasnes)	01
88. Not Applicable		03. Median			02. Fire/Explosion		01. Front To	
		04. Roadside			03. Immersion, Full or Partia	al	02. Front to	Front
<b>TRAFFICWAY CLASS</b> 01. Trafficway, On Road		05. Gore 06. Separator			04. Jackknife 05. Cargo/Equipment Loss o	r Shift	03. Angle 04. Sideswig	pe, Same Direction
02. Trafficway, Of Road	d 01	06. Separator 07. In Parking Lane of	or Zone		06. Fell/Jumped from Vehicle			pe, Opposite Direction
03. Non-Trafficway		08. Off-Roadway Loc		vn	07. Thrown or Falling Object		06. Rear To	
04. Parking Lot		09. Outside Right-of	-Way (traffic way	v)	08. Other Non-Collision		07. Rear to	
		97. Other			Collision with Person, Veh	icle	88. Not Appl 97. Other	licable
LIGHT CONDITIONS				2.11	or Non-Fixed Object:			
01. Daylight 02. Dawn	04	CRASH-SPECIFIC 01. Non-Junction	LUCAIN		09. Pedestrian		CONTRIB	TANCES, MENTAL (choose up to 3)
03. Dusk		02. Intersection		01	10. Pedal cycle/Pedal-cyclist	t	00. None	
04. Dark- Lighted		03. Intersection-Rela	ated		<ol> <li>Other Non-motorist</li> <li>Railway Vehicle (train, eng</li> </ol>	ine)	01. Weather	Conditions 99
05. Dark- Not Lighted		04. Entrance / Exit R	amp		40. Deer	,		Dbstruction(s)
06. Dark Unknown Lighting	9	05. Entrance / Exit R		i	13. Animal Other Than Deer	(live)	03. Glare	
97. Other		06. Railway Grade C 07. Crossover-Relate	•		14. Motor Vehicle in Operati	on	88. Not App	s) in Roadway
WEATHER CONDITIONS	(choose up to 2)	08. Driveway Access	eu		<ol> <li>Parked Motor Vehicle</li> <li>Struck by Falling, Shiftin</li> </ol>	a Carao or	97. Other	
01. Clear	02	09. Driveway Access	-Related		Anything Set in Motion b	v Motor	CONTRIB	UTING
02. Cloudy		10. Shared-Use Path	or Trail		Vehicle	,	CIRCUMS ROAD (choo	TANCES,
03. Fog, Smog, Smoke 04. Rain		11. Through Roadway			17. Work Zone/Maintenance	Equipment	00. None	99
05. Sleet or Hail		12. Acceleration / De	eceleration L	ane	18. Other Non-Fixed Object		01. Backup I	Due to Prior Crash
06. Freezing Rain/Drizzle	•	13. On A Bridge 14. HOV Lane			Collision with Fixed Object		02. Backup I	
07. Snow		15. Service or Rest A	Area		19. Impact Attenuator/Crash			urring Incident Due to Regular
08. Blowing Snow		16. Weigh Station			20. Bridge Overhead Structu		Congest	-
09. Severe Crosswinds 10. Blowing Sand, Soil, Di	rt	17. Other Location N		ove	21. Bridge Pier or Support		0	th/Plaza Related
88. Not Applicable		Within an Interch	0		22. Bridge Rail		05. Road Su	Irface Condition
97. Other		(median, shoulder, and 97. Other	roadside)		23. Cable Barrier		(wet,icy,s	snow, slush, etc.)
					24. Culvert 25. Curb		06. Debris	
TRAFFICWAY SURFA CONDITIONS	CE	TYPE OF INTERS	ECTION		26. Ditch		07. Ruts, Ho 08. Work Zo	-
01. Dry	04	01. Not an Intersection		01	27. Embankment			ion/maintenance/utility)
02. Wet	01	02. Four-Way Interse	ction		28. Guardrail Face			ravel-Polished Surface
03. Snow		03. T-Intersection 04. Y-Intersection			29. Guardrail End 30. Concrete Traffic Barrier			tion in Roadway
04. Slush		05. L-Intersection			31. Other Traffic Barrier			Control Device Inoperative,
05. Ice/Frost 06. Moving Water		06. Traffic Circle			32. Tree (standing)		0	, or Obscured r (none, low, soft, high)
07. Sand		07. Roundabout			33. Utility Pole/Light Suppor	t	13. Non-Hig	
08. Mud, Dirt, Gravel		08. Five-Point, or Mo	ore		34. Traffic Sign Support		88. Not App	-
09. Oil		SCHOOL BUS RE			35. Traffic Signal Support 36. Fence		97. Other	
10. Standing Water		01. No	LATED	01	37. Mailbox			
97. Other		02. Yes, a school bus	s was	01	38. Other Post, Pole or Supp	ort		
		directly involved			39. Other Fixed Object (Wall, t	building,		
		03. Yes, a school bus	s was indired	ctly	tunnel, etc.)			
		involved					 	
For all numeric fields: 99 =	= 'Unknown'	WORK	ZONE C	RASH	INFORMATION	Compl	ete all for cr	ashes occurring in a Work Zone
WORK ZONE	LOCATION			ТҮРЕ		WORK	ERS	ENFORCEMENT PRESENT
01. No		First Work Zone Warn	ing Sian		Closure	<b>PRESE</b> 01. No	NI	PRESENT 01. No
02. Yes	02. Advance W				Shift/Crossover	02. Yes		02. Yes
	03. Transition	Area			on Shoulder or Median	88. Not	Applicable	88. Not Applicable
	04. Activity Are		i		mittent or Moving Work	_		_
01	05. Termination 88. Not Applica			88. Not / 97. Othe	Applicable r			
	So. Not Applica			or. Othe		<b></b> 1	L	

### CONNECTICUT UNIFORM POLICE CRASH REPORT

	Form PR-1 R	EV July 2014.01	se Number: 23-00	7179		
	Crash Sun		Tidentifier: Far DOT use anly			
	DI	AGRAM				
Vehicles were moved prior to polic	Not To Scale			Flower Street		
	ΝΑ	RRATIVE				
Officers Na Narrative	arrative: Describe any unusual circumstar	ices associated with the crash, including of number and/or non-motorist number	ficer's observations.			
While on scene, I observed a black Honda Civic (TU1) in the middle of the roadway upside down laying on its roof. Part of TU1 was overtaking the yellow center line and obstructing the oncoming traffic lane. TU1's driver side door was still open and it had significant damage all around with its airbags deployed. Responding officers pointed me in the direction of the operator of TU1, who was being attended to by Hartford Fire. Operator of TU1 reported she could not remember what happened during the collision or how her vehicle ended up on its roof. She explained she was the sole operator of TU1, I could smell the strong odor of an alcoholic beverage emanating from her breath. Additionally, as I spoke to the operator she had a difficult time staying focused. Due to the operator demonstrating obvious signs of an impaired driver the Hartford Police Traffic Division Was requested to further evaluate her level of impairment. Hartford Police Traffic Division Officer Greely arrived on scene						
		I				
Related Incident Number	Officer First Name Hariz	Officer Last Name Mustajbasic	Badge Number 1790	Police Agency Code CT0006400		
Case Status O - Open C - Signature:	1	Supervisor: Hunyadi, Christoph	ner	1552		
Closed Date & Time:						

С This report is a revision to a previously submitted report

Date & Time:

Date & Time:

Page 3 of 12

## CONNECTICUT UNIFORM POLICE CRASH REPORT Form PR-1 REV July 2014.01

**Appendix A: Narrative Continued** 

Complete this sheet if more space is needed for the narrative

Case Number: DOT Identifier: For DOT use only

23-007179

### NARRATIVE CONTINUED (i)

and conducted a Field Sobriety Test on operator of TU1 (Please Reference Case # 23-007181 for further details).

Operator of TU1 did not report any injuries from this incident. Operator of TU1 was evaluated by AMR 901 on scene. Operator of TU1 declined further medical evaluation.

TU1 sustained disabling damages as a result of this incident. TU1 had notable damages all around, including the roof. TU1 was incidentally towed from the scene by Capitol Towing.

While on scene, parked TU3 was located on scene with damage to its driver side rear tire. It was reported that TU3 was unoccupied during the time of the collision.

Operator of TU2 was later located on scene. Operator of TU2 reported the following: He was traveling westbound on Capitol Avenue when TU1 rolled into his vehicle from the opposite direction striking TU2's driver side area.

Operator of TU2 reported he felt pain to his chest as a result of the collision. Operator of TU2 was evaluated by AMR 927 on scene, but declined further medical attention. TU2 sustained damages to the driver side fender area, and the driver side front door. TU2 towed by Corona Auto Parts, INC due to not having an active insurance policy.

Operator of TU2 admitted to not having active auto insurance policy for his vehicle since he recently purchased it. Operator of TU2 was issued an infraction ticket for violation of C.G.S Sec. 14-213b, Illegal Operation of Motor Vehicle Without Minimum Insurance.

During the course of the investigation, video footage of the incident was obtained. While watching the video, I observed TU1 traveling eastbound on Capitol Avenue. As TU1 continues traveling eastbound its observed veering into parked TU3, striking TU3's driver side rear tire area. The impact of the collision causes TU1 to roll over toward the oncoming traffic making contact with TU2's driver side area, as TU2 was traveling westbound on Capitol Avenue.

The video footage of this incident was tagged as evidence and remanded to Hartford Police Property Room under HPD property receipt # BB 038242.

As a result of this investigation it was determined that TU1 was the contributing factor for the collision, and was found to be in violation of C.G.S Sec. 14-236, Failure to Drive in Proper Lane. Due to not having video footage access while on scene no further action was taken.

End of report.

Page 4 of 12	CONNECTIO		M POLICE CRASH	REPOR	т
Motor Vehicl	e ID: 1	Form PR-1 RI	EV July 2014.01	Case	Number: 23-007179
Number of Occupants in Veh (indudingthe		<b>otor Vehicle Ir</b> Complete One She	nformation (Front) eet Per Motor Vehicle	DOT la Far	dentifier: DOTuseonly
	MO	FOR VEHICLE I	NFORMATION (ii)		
VIN: 19XFC1F75GE212454		VIN	missing or removed	Plate #:	AU88069 Invalid Plate
Make: HONDA	Color: BLK	Drive	er Evaded Responsibility	Plate State:	
Model: Civic EX	Year: 2016	Dir	rection of Travel		
			I,S,E,W		Total lanes in roadway: 2
Totad on which vehicle was travering.	Capitol Avenue	<u> </u>	Vehicle was not		Bike Lanes/sharrows present
	MO				
For all numeric fields: 99 = 'Unknown'			CRASH INFORMATION	N	
SEQUENCE OF EVENTS (choose up to four, in chronological order)	MOTOR VEHICLE 01. Straight Ahead		BODY TYPE 01. Passenger Car		MOTOR VEHICLE TYPE 01. Motor Vehicle in Operation
Non-Collision	02. Negotiating a Cur	ve 99	02. (Sport) Utility Vehicle	01	02. Parked Motor Vehicle 01
01. Overturn/Rollover 02. Fire / Explosion	03. Backing 04. Changing Lanes		03. Passenger Van 04. Cargo Van (<10,000 lbs gv	wr)	03. Working Vehicle/Equipment 04. Non-Collision Vehicle
03. Immersion, Full or Partial	05. Overtaking/Passin	g Motor Vehicle	05. Pickup		TRAFFICWAY DESCRIPTION
04. Jackknife 05. Cargo/Equipment Loss or Shift	06. Turning Right 07. Turning Left		06. Motor Home 07. School Bus		01. Two-Way, Not Divided 03
06. Equipment Failure (blown tire, brake failure,	08. Making U-Turn		08. Transit Bus		02. Two-Way, not Divided w/ a Continuous Left Turn Lane
etc.) 07. Separation of Units	09. Leaving Traffic La 10. Entering Traffic L		09. Motor Coach 10. Other Bus		03. Two-Way, Divided, Unprotected
08. Ran Off Roadway Right	11. Slowing	ane	11. Motorcycle		(Painted >4 Feet) Median 04. Two-Way, Divided, Positive Median
09. Ran Off Roadway Left 10. Cross Median	12. Parked 13. Stopped in Traffic		12. Moped 13. Low Speed Vehicle		Barrier
11. Cross Center Line	14. Overtaking/Passin	g Cyclist	14. Golf Cart		05. One-Way Trafficway 88. Not Applicable
12. Downhill Runaway 13. Fell/Jumped From Motor Vehicle	15. Wrong Way or Wro	•	15. All Terrain Vehicle (AT) 16. Snowmobile	/)	ROADWAY GRADE
14. Reentering Roadway	16. Traveling in Bike I 97. Other	Lane	17. Other Light Trucks (10,0)	00 lbs GVWR or	01. Level 01 02. Uphill
15. Thrown or Falling Object 16. Other Non-Collision			<ul><li>less)</li><li>18. Medium/Heavy Trucks</li></ul>		03. Hill Crest
Collision With Person, Motor Vehicle, or Non-Fixed Object	CONTRIBUTING CIRCUMSTANCES		(more than 10,000 lbs GVWR) 97. Other		04. Downhill 05. Sag <i>(bottom)</i>
17. Pedestrian	MOTOR VEHICLE		MOTOR VEHICLE DAM	AGE	ROADWAY ALIGNMENT
<ol> <li>Pedal Cycle/Pedal-Cyclist</li> <li>Other Non-motorist</li> </ol>	00. None 01. Brakes	99	12		01. Straight 01
20. Railway Vehicle (train, engine)	02. Exhaust System		11 12	1	02. Curve Left 03. Curve Right
21. Animal <i>(live)</i> 22. Motor Vehicle in Motion	03. Body, Doors 04. Steering		10 11 1	$\lambda_2$	TRAFFIC CONTROL DEVICE TYPE
23. Parked Motor Vehicle	05. Power Train		10 2	7	01. No Control Device 03 02. Person (flagger, law
<ol> <li>Struck By Falling, Shifting Cargo or Anything Set in Motion By Motor Vehicle</li> </ol>	06. Suspension		9 9 3	3	enforcement, crossing guard, etc.) 03. Traffic Control Signal
25. Work Zone/Maintenance Equipment	08. Wheels			1	04. Flashing traffic Control Signal
26. Other Non-Fixed Object Collision With Fixed Object	09. Lights (Head, signal, 10. Windows/Windshie		7 5	1	05. School Zone Sign/Device
27. Impact Attenuator/Crash Cushion	11. Mirrors	au	8 6	Y	06. Stop Sign 07. Yield Sign
28. Bridge Overhead Structure	12. Wipers	ailan Llitah	7 6	5	08. Warning Sign
29. Bridge Pier or Support 30. Bridge Rail 1 <sup>st</sup> 23	<ol> <li>Truck Coupling/Tr /Safety Chains</li> </ol>	aller Hitch			09. Railway Crossing Device 10. Marked Uncontrolled Crosswalk
31. Cable Barrier 32. Culvert 2nd 22	88. Not Applicable		Use diagram above for values See user guide for other vehic		11. Pedestrian Button
32. Culvert <b>2</b> <sup>nd</sup> 22	97. Other POSTED/STATUTO	DRY SPEED	Initial Contact Point 13. Non-Collision	01	12. Bicycle Detection 97. Other
34. Ditch <b>3</b> rd 88	LIMIT (record the posted/statutor		14. Top		TRAFFIC CONTROL DEVICE
35. Embankment 36. Guardrail Face <u>a</u> th 88	01. Not Posted		16. Cargo Loss		FUNCTIONAL?
37. Guardrail End	10, 15, 20, 25, 30, 35, 50, 55, 60, 65, 70, 75,		Damaged Areas (choose up to	<sub>3)</sub> 17	02. Yes
38. Concrete Traffic Barrier     Most       39. Other Traffic Barrier     Harmful       Event     Event	88. Not Applicable	-	00. None 14. Top		03. Missing 88. Not Applicable
40. Tree (standing)	TOWED 01. Towed Due to Disa	bling Domogo	15. Undercarriage 17. All Areas		
41. Utility Pole 23 42. Traffic Sign Support	02. Towed, But Not Du	• •	88. Not Applicable		
43. Traffic Signal Support	Damage		EXTENT OF DAMAGE		-
44. Other Post, Pole, or Support 45. Fence	03. Not Towed	01	01. No Visible Damage	04	
46. Mailbox	TOWED TO		02. Minor Damage 03. Functional Damage	04	
47. Other Fixed Object (wall, building, tunnel, etc.)	Capitol Towing		03. Functional Damage 04. Disabling Damage		
48. Light Support 88. Not applicable					
		INSURANCE IN	FORMATION		
INSURANCE COMPANY		INSURANCE POLI			INSURANCE EXPIRATION DATE (yyyymmdd)
Liberty		AOV 212 219 7	719		
		1			

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# CONNECTICUT UNIFORM POLICE CRASH REPORT Form PR-1 REV July 2014.01

	Form PR-1 REV July 2014.01	Case Number:	23-007179
	Motor Vehicle Information (Back) Complete One Sheet Per Motor Vehicle	DOT Identifier: For DOT use only	
	MOTOR VEHICLE OWNERSHIP INFORMA		
Vehicle Owner Name (Last, First, Middle, Suffix)	Information same as drive		
Steinman, David			
Street Address or Post Office Box 111 Shore Drive			
City Branf ord	State/Prov Country CT		Postal Code 06405
Email Address (optional)	Phone (opt	tional)	
SPECIAL VEHICLE FUNCTION         01. No Special Function         02. Taxi         03. Vehicle Used as School Bus         04. Vehicle Used as Other Bus         05. Military         06. Police         07. Ambulance         08. Fire Truck         09. Non-Transport Emergency         10. Incident Response Services Vehicle	EMERGENCY VEHICLE 01. Non-Emergency Situation, Not Transporting Patie 02. Non-Emergency Transport of Passenger 03. Emergency Operation, Emergency Warning Equip 04. Emergency Operation, Emergency Warning Equip 88. Not Applicable  PROPERTY DAMAG	ment Not in Use ment in Use 02. School 03. Transit 04. Intercit 05. Charter 06. Shuttle 88. Not App	/Commuter y /Tour
NATURE AND EXTENT OF DAMAGE TO PROPER			
NAME OF OWNER OF PROPERTY 1			RELATED TO:
ADDRESS			
СІТҮ	STATE:	POSTAL CODE:	
NATURE AND EXTENT OF DAMAGE TO PROPER	TY 2		
NAME OF OWNER OF PROPERTY 2			RELATED TO:
ADDRESS			
CITY	STATE:	POSTAL CODE:	
NATURE AND EXTENT OF DAMAGE TO PROPERT	TY 3		
NAME OF OWNER OF PROPERTY 3			RELATED TO:
ADDRESS			
CITY	STATE:	POSTAL CODE:	

Page 6 of 12	C <u>ONNE</u> CT		RM POLICE CRASH	I REPOR	т
Motor Vehicl	e ID: 2	Form PR-1	REV July 2014.01	Case	Number: 23-007179
Number of Occupants in Veh (induding the		<b>Notor Vehicle</b> Complete One S	Information (Front) Sheet Per Motor Vehicle	DOT I Fa	dentifier: • DOT use only
	М	OTOR VEHICLE	INFORMATION (ii)		
VIN: 5LMFU28R23LJ04644			N missing or removed	Plate #:	Invalid Plate
Make: LINCOLN-CONTINENTAL	Color: BLK		iver Evaded Responsibility	Plate State:	
Model: Navigator	Year: 2003		Direction of Travel	Flate State.	
			N,S,E,W		Total lance in markening
Road on which vehicle was traveling:	Capitol Avenue		W Vehicle was no		Total lanes in roadway: 2
			Unknown direc		Bike Lanes/sharrows present
For all numeric fields: 99 = 'Unknown'	Μ	OTOR VEHICLI	E CRASH INFORMATIC	ON	
SEQUENCE OF EVENTS (choose up to four, in chronological order)	MOTOR VEHICL	E ACTION	BODY TYPE		MOTOR VEHICLE TYPE
Non-Collision	01. Straight Ahead 02. Negotiating a 0	Curve 99	01. Passenger Car 02. (Sport) Utility Vehicle	02	01. Motor Vehicle in Operation 02. Parked Motor Vehicle 01
01. Overturn/Rollover	03. Backing		03. Passenger Van		03. Working Vehicle/Equipment
02. Fire / Explosion 03. Immersion, Full or Partial	04. Changing Lane 05. Overtaking/Pas		04. Cargo Van (<10,000 lbs 05. Pickup	gvwr)	04. Non-Collision Vehicle TRAFFICWAY DESCRIPTION
04. Jackknife	06. Turning Right	sing motor veniere	06. Motor Home		01. Two-Way, Not Divided 03
05. Cargo/Equipment Loss or Shift	07. Turning Left		07. School Bus 08. Transit Bus		02. Two-Way, not Divided w/
06. Equipment Failure (blown tire, brake failure, etc.)	08. Making U-Turn 09. Leaving Traffic	Lane	09. Motor Coach		a Continuous Left Turn Lane 03. Two-Way, Divided, Unprotected
07. Separation of Units 08. Ran Off Roadway Right	10. Entering Traffic		10. Other Bus		(Painted >4 Feet) Median
09. Ran Off Roadway Left	11. Slowing 12. Parked		11. Motorcycle 12. Moped		04. Two-Way, Divided, Positive Median Barrier
10. Cross Median 11. Cross Center Line	13. Stopped in Traf		13. Low Speed Vehicle		05. One-Way Trafficway
12. Downhill Runaway	14. Overtaking/Pas 15. Wrong Way or V		14. Golf Cart 15. All Terrain Vehicle (A	TV)	88. Not Applicable
13. Fell/Jumped From Motor Vehicle	16. Traveling in Bil	•	16. Snowmobile	,	ROADWAY GRADE
<ol> <li>Reentering Roadway</li> <li>Thrown or Falling Object</li> </ol>	97. Other		17. Other Light Trucks (10, less)	,000 lbs GVWR or	02. Uphill
16. Other Non-Collision			18. Medium/Heavy Trucks (more than 10,000 lbs GVW)	0)	03. Hill Crest 04. Downhill
Collision With Person, Motor Vehicle, or Non-Fixed Object	CONTRIBUTING CIRCUMSTANC	ES	97. Other	к)	05. Sag (bottom)
<ol> <li>Pedestrian</li> <li>Pedal Cycle/Pedal-Cyclist</li> </ol>	MOTOR VEHICL 00. None		MOTOR VEHICLE DAI	MAGE	ROADWAY ALIGNMENT
19. Other Non-motorist	01. Brakes	00	12	1	01. Straight 01 02. Curve Left
20. Railway Vehicle (train, engine)	02. Exhaust System		11 12	Ń	03. Curve Right
<ul><li>21. Animal (live)</li><li>22. Motor Vehicle in Motion</li></ul>	03. Body, Doors 04. Steering		10 11 / 1	2	TRAFFIC CONTROL DEVICE TYPE       01. No Control Device
23. Parked Motor Vehicle	05. Power Train		10 2	H	02. Person (flagger, law
24. Struck By Falling, Shifting Cargo or Anything Set in Motion By Motor Vehicle	06. Suspension 07. Tires		9 9 3	3	enforcement, crossing guard, etc.) 03. Traffic Control Signal
25. Work Zone/Maintenance Equipment	08. Wheels		8 4	$1 \rightarrow$	04. Flashing traffic Control Signal
26. Other Non-Fixed Object Collision With Fixed Object	09. Lights (Head, sig 10. Windows/Winds		8 7 5	1 /4	05. School Zone Sign/Device 06. Stop Sign
27. Impact Attenuator/Crash Cushion	11. Mirrors		6	X	07. Yield Sign
28. Bridge Overhead Structure	12. Wipers 13. Truck Coupling	/Trailer Hitch	7	5	08. Warning Sign
29. Bridge Pier or Support 30. Bridge Rail 1 <sup>st</sup> 22	/Safety Chains				09. Railway Crossing Device 10. Marked Uncontrolled Crosswalk
31. Cable Barrier 32. Culvert <b>2</b> nd 88	88. Not Applicable 97. Other		Use diagram above for valu See user guide for other vel	es 1-12 hicle diagrams.	11. Pedestrian Button
32. Culvert 2 <sup>nd</sup> 88 33. Curb	POSTED/STATU	TORY SPEED	Initial Contact Point 13. Non-Collision	03	12. Bicycle Detection 97. Other
34. Ditch <b>3</b> rd 88	LIMIT	tory value as miles per ho	14. Top		TRAFFIC CONTROL DEVICE
35. Embankment 36. Guardrail Faceth 88	01. Not Posted		16. Cargo Loss		FUNCTIONAL?
37. Guardrail End	10, 15, 20, 25, 30, 35, 50, 55, 60, 65, 70, 55		Damaged Areas (choose up a	to 3) 03	01. No 02 02. Yes
38. Concrete Traffic Barrier Most 39. Other Traffic Barrier Harmful	88. Not Applicable	0, 00, 00	00. None 14. Top		03. Missing 88. Not Applicable
40. Tree (standing)	TOWED		15. Undercarriage 17. All Areas		
41. Utility Pole 88 42. Traffic Sign Support	01. Towed Due to D 02. Towed, But Not	• •	88. Not Applicable		
43. Traffic Signal Support	Damage		- EXTENT OF DAMAGE		4
44. Other Post, Pole, or Support	03. Not Towed	02	01. No Visible Damage		
45. Fence 46. Mailbox	TOWED TO		02. Minor Damage	02	
47. Other Fixed Object (wall, building, tunnel,	Coronas Auto F	Parts	03. Functional Damage 04. Disabling Damage		
etc.) 48. Light Support			En Elousing Dunago		
88. Not applicable					
		INSURANCE	NFORMATION		
INSURANCE COMPANY		INSURANCE PO			INSURANCE EXPIRATION DATE (yyyymmdd)
No Insurance		No Insurance			
		1			

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#### CONNECTICUT UNIFORM POLICE CRASH REPORT Form PR-1 REV July 2014.01

23-007179 **Case Number:** Motor Vehicle Information (Back) Complete One Sheet Per Motor Vehicle DOT Identifier: For DOT use only MOTOR VEHICLE OWNERSHIP INFORMATION Vehicle Owner Name (Last, First, Middle, Suffix) Information same as driver Green, John Street Address or Post Office Box 5 Acton Street City State/Prov Postal Code Country Branf ord СТ 06405 Email Address (optional) Phone (optional) SPECIAL VEHICLE FUNCTION EMERGENCY VEHICLE BUS USE 01. No Special Function 01. Not A Bus 01. Non-Emergency Situation, Not Transporting Patient 01 88 02. Taxi 02 School 02. Non-Emergency Transport of Passenger 03. Vehicle Used as School Bus 03. Emergency Operation, Emergency Warning Equipment Not in Use 03. Transit/Commuter 04. Vehicle Used as Other Bus 04. Emergency Operation, Emergency Warning Equipment in Use 04. Intercity 05. Charter/Tour 05. Military 88. Not Applicable 06. Shuttle 06. Police 88. Not Applicable 07. Ambulance 08. Fire Truck 09. Non-Transport Emergency 10. Incident Response Services Vehicle PROPERTY DAMAGED Complete if public or private property other than vehicles were damaged in the crash NATURE AND EXTENT OF DAMAGE TO PROPERTY 1 NAME OF OWNER OF PROPERTY 1 RELATED TO: ADDRESS CITY STATE: POSTAL CODE: NATURE AND EXTENT OF DAMAGE TO PROPERTY 2 NAME OF OWNER OF PROPERTY 2 RELATED TO: ADDRESS СІТҮ STATE: POSTAL CODE: NATURE AND EXTENT OF DAMAGE TO PROPERTY 3 NAME OF OWNER OF PROPERTY 3 RELATED TO: ADDRESS СІТҮ STATE: POSTAL CODE:

Page 8 of 12	CONNECTIO		POLICE CRASH	REPOR	т
Motor Vehicle	e ID: <sup>3</sup>	Form PR-1 RE	EV July 2014.01	Case	Number: 23-007179
Number of Occupants in Veh (including the		tor Vehicle In Complete One She	nformation (Front) eet Per Motor Vehicle	DOT Io For	dentifier: DOTusearly
	MO	OR VEHICLE I	NFORMATION (ii)		
VIN: 1FM5K8AR5DG163504		VIN	missing or removed	Plate #	XLVR61 Invalid Plate
Make: FORD	Color: BLK		er Evaded Responsibility	Plate State:	
			ection of Travel	Plate State:	
Model: Explorer	Year: 2013	N	I,S,E,W		
Road on which vehicle was traveling:			Vehicle was not	in roadway	Total lanes in roadway:
			Unknown direct	ion	Bike Lanes/sharrows present
For all numeric fields: 99 = 'Unknown'	MO	TOR VEHICLE (	CRASH INFORMATIO	Ν	
SEQUENCE OF EVENTS	MOTOR VEHICLE	ACTION	BODY TYPE		MOTOR VEHICLE TYPE
(choose up to four, in chronological order) Non-Collision	01. Straight Ahead 02. Negotiating a Cur	12	01. Passenger Car 02. (Sport) Utility Vehicle	02	01. Motor Vehicle in Operation 02 02. Parked Motor Vehicle 02
01. Overturn/Rollover	03. Backing		03. Passenger Van		03. Working Vehicle/Equipment
02. Fire / Explosion	04. Changing Lanes		04. Cargo Van (<10,000 lbs g	vwr)	04. Non-Collision Vehicle
03. Immersion, Full or Partial 04. Jackknife	05. Overtaking/Passin 06. Turning Right	g Motor Vehicle	05. Pickup 06. Motor Home		
05. Cargo/Equipment Loss or Shift	07. Turning Left		07. School Bus		01. Two-Way, Not Divided 03 02. Two-Way, not Divided w/
06. Equipment Failure (blown tire, brake failure, etc.)	08. Making U-Turn		08. Transit Bus 09. Motor Coach		a Continuous Left Turn Lane
07. Separation of Units	09. Leaving Traffic La 10. Entering Traffic La		10. Other Bus		03. Two-Way, Divided, Unprotected (Painted >4 Feet) Median
08. Ran Off Roadway Right 09. Ran Off Roadway Left	11. Slowing		11. Motorcycle		04. Two-Way, Divided, Positive Median
10. Cross Median	12. Parked 13. Stopped in Traffic		12. Moped 13. Low Speed Vehicle		Barrier 05. One-Way Trafficway
11. Cross Center Line 12. Downhill Runaway	14. Overtaking/Passin	g Cyclist	14. Golf Cart		88. Not Applicable
13. Fell/Jumped From Motor Vehicle	15. Wrong Way or Wro 16. Traveling in Bike I	•	15. All Terrain Vehicle (AT 16. Snowmobile	V)	ROADWAY GRADE
14. Reentering Roadway	97. Other		17. Other Light Trucks (10,0	000 lbs GVWR or	01. Level 01 02. Uphill
15. Thrown or Falling Object 16. Other Non-Collision			<sup>less)</sup> 18. Medium/Heavy Trucks		03. Hill Crest
Collision With Person, Motor Vehicle, or Non-Fixed Object	CONTRIBUTING CIRCUMSTANCES		(more than 10,000 lbs GVWR) 97. Other	)	04. Downhill 05. Sag <i>(bottom)</i>
17. Pedestrian	MOTOR VEHICLE		MOTOR VEHICLE DAM	AGE	ROADWAY ALIGNMENT
18. Pedal Cycle/Pedal-Cyclist 19. Other Non-motorist	00. None 01. Brakes		12		01. Straight 01
20. Railway Vehicle (train, engine)	02. Exhaust System		11	1	02. Curve Left 03. Curve Right
21. Animal (live)	03. Body, Doors		10 12	$\lambda$ ,	TRAFFIC CONTROL DEVICE TYPE
22. Motor Vehicle in Motion 23. Parked Motor Vehicle	04. Steering 05. Power Train			7	01. No Control Device 03 02. Person (flagger, law
24. Struck By Falling, Shifting Cargo or	06. Suspension		9 9 3	13	enforcement, crossing guard, etc.)
Anything Set in Motion By Motor Vehicle 25. Work Zone/Maintenance Equipment	07. Tires 08. Wheels		9 9 3		03. Traffic Control Signal 04. Flashing traffic Control Signal
26. Other Non-Fixed Object	09. Lights (Head, signal,			7.	05. School Zone Sign/Device
Collision With Fixed Object 27. Impact Attenuator/Crash Cushion	10. Windows/Windshie 11. Mirrors	ld	8	Y.	06. Stop Sign 07. Yield Sign
28. Bridge Overhead Structure	12. Wipers		7	5	08. Warning Sign
29. Bridge Pier or Support	<ol> <li>Truck Coupling/Tr /Safety Chains</li> </ol>	ailer Hitch	6		09. Railway Crossing Device
31. Cable Barrier	88. Not Applicable		Use diagram above for value See user guide for other vehi		10. Marked Uncontrolled Crosswalk 11. Pedestrian Button
32. Culvert <b>2</b> <sup>nd</sup> 88	97. Other		Initial Contact Point	07	12. Bicycle Detection
33. Curb 34. Ditch <b>3</b> rd 88	POSTED/STATUTO		13. Non-Collision 14. Top	01	97. Other TRAFFIC CONTROL DEVICE
35. Embankment	(record the posted/statutor) 01. Not Posted	y value as miles per hour)	15. Undercarriage 16. Cargo Loss		FUNCTIONAL?
36. Guardrail Face <b>4</b> <sup>th</sup> 88 37. Guardrail End	10, 15, 20, 25, 30, 35,		Domogod Arono (	2) 07	01. No 02. Yes
38. Concrete Traffic Barrier Most	50, 55, 60, 65, 70, 75, 88. Not Applicable	80, 85	Damaged Areas (choose up to 00. None	3)	03. Missing
39. Other Traffic Barrier     Harmful Event       40. Tree (standing)	TOWED		14. Top 15. Undercarriage		88. Not Applicable
41. Utility Pole 22	01. Towed Due to Disa	abling Damage	17. All Areas 88. Not Applicable		
42. Traffic Sign Support	02. Towed, But Not Du Damage	e to Disabling			
<ol> <li>43. Traffic Signal Support</li> <li>44. Other Post, Pole, or Support</li> </ol>	03. Not Towed		EXTENT OF DAMAGE		
45. Fence			01. No Visible Damage	04	
46. Mailbox 47. Other Fixed Object (wall, building, tunnel,	TOWED TO		02. Minor Damage 03. Functional Damage		
etc.)			04. Disabling Damage		
48. Light Support 88. Not applicable					
		INSURANCE IN	FORMATION		
INSURANCE COMPANY		INSURANCE POLIC			INSURANCE EXPIRATION DATE
StateFarm		127 7432C0930			(yyyymmdd)

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# CONNECTICUT UNIFORM POLICE CRASH REPORT Form PR-1 REV July 2014.01

	Form PR-1 REV July 2014.01	Case Number: 23-007179
	Motor Vehicle Information (Back) Complete One Sheet Per Motor Vehicle	DOT Identifier: For DOT use only
	MOTOR VEHICLE OWNERSHIP INFORMATION	
Vehicle Owner Name (Last, First, Middle, Suffix)	Information same as driver	
Bella Contracting Services LLC		
Street Address or Post Office Box 1424 Abbott Road		
City Branf ord	State/Prov Country CT	Postal Code 06405
Email Address (optional)	Phone (optional)	
SPECIAL VEHICLE FUNCTION         01. No Special Function         02. Taxi         03. Vehicle Used as School Bus         04. Vehicle Used as Other Bus         05. Military         06. Police         07. Ambulance         08. Fire Truck         09. Non-Transport Emergency         10. Incident Response Services Vehicle		
NAME OF OWNER OF PROPERTY 1		RELATED TO:
ADDRESS		
СІТҮ	STATE: PO	STAL CODE:
NATURE AND EXTENT OF DAMAGE TO PROPERT	TY 2	
NAME OF OWNER OF PROPERTY 2		RELATED TO:
ADDRESS		
СІТҮ	STATE: PO	STAL CODE:
NATURE AND EXTENT OF DAMAGE TO PROPERT	ГҮ З	
NAME OF OWNER OF PROPERTY 3		RELATED TO:
ADDRESS		
СІТҮ	STATE: PO	STAL CODE:

Page 10 of 12 CONNECTICUT UNIFORM POLICE CRASH REPORT Motor Vehicle 1 Form PR-1 REV July 2014.01 22.007170							
				Case Number: 23-007179			
Per	rson ID:	1 <b>M</b>		le Driver Inforn One Sheet Per Dri		DOT Identit For DOT us	iier: ealy
Name (Last, First, Come Middle, Suffix):	y, Robin				GENDER 01. Male 02. Female	02	DATE OF BIRTH(YYYYMMDD) 19670916
Street Address or PO Box:	Shore Drive	,			99. Unknown		Date of Birth is unknown
City: Branford	:	State CT Prov:	Postal 064 Code:	05 Phone/En (optional)			
LICENSE INFO	Fo	or all numeric field	's:99 = 'Unknowr	, DRIV	er inform	ATION	
LICENSE NUMBER	EJEC	CTION		SEATING POSITION	I FIRST DIGIT	DRIVER ACTIONS (	choose up to four)
094702525		lot Ejected jected, Partially	99	1 Front Row	11	01. No Contributing	
STATE		jected, Totally				02. Ran Off Roadway 03. Failed to Yield F	
	88. N	lot Applicable				04. Ran Red Light	
СТ	BES	TRAINT SYSTEM		SECOND DIGIT		05. Ran Stop Sign 06. Disregarded Oth	er Traffic Sign
DRIVER LICENSE JURISDI	CTION	IRAINT STSTEM Ione Used-Motor V	/ehicle Occupant	_1. Left Seat (usually		07. Disregarded Oth	
01. Not Licensed 02 02. State 02	2 01. S	Shoulder and Lap B	elt Used	or motorcycle driver vehicles and some fo		08. Improper Turn 09. Improper Backing	, <u> </u>
03. Tribal Nation		Shoulder Belt Only ap Belt Only Used	Used	<ul><li>_2. Middle Seat</li><li>3. Right Seat</li></ul>		10. Improper Passin	
04. U.S. Government		Restraint Used Typ	e Unknown	_8. Other Seat		11. Wrong Side or W	
05. Canadian Province 06. Mexican State		lot Applicable				12. Followed Too Cl 13. Failed to Keep in	•
07. International License (or		Iner			D		e in Reckless Aggressive Manner
than Mexico and Canada) 08. Valid License (other cou			04		1	15. Operated Motor Negligent, or Er	Vehicle in Inattentive, Careless
88. Not Applicable				5	-7		ded Due to Wind, Motor Vehicle,
	HEL	MET USE		000	108 8	-	orist in Roadway, etc.
LICENSE CLASS	-	lo Helmet		1 20 20 20	12	<ol> <li>17. Over-Correcting</li> <li>18. Overtaking Cycli</li> </ol>	
00 None	02 1	)OT-Compliant Mo lelmet, Other Than				88. Not Applicable	
01. Class A	4	lotorcycle Helmet	201 Compilain	1000	112 5	97. Other Contributi	ng Action
02. Class B 03. Class C		lelmet, Unknown if	DOT-Compliant	000	103	DRIVER DISTRACT	ED BY
04. Class D	88. N	lot Applicable	88		⊒⊁	01. Not Distracted	99
05. Class M				-00)-		02. Manually Operat	ing an
88. Not Applicable	AIRE			(55)			s-Free Electronic Device
COMMERCIAL LICENSE		lot Deployed Deployed-Front	99	× ×		04. Talking on Hand 05. Other Activity, E	Held Electronic Device
01. No 02. Yes		eployed-Side				06. Passenger	
		Deployed-Curtain		-155			Vehicle (eating, hygiene, etc.)
		)eployed-Other )eployed-Combinat	ion		ş	08. Outside the Vehi	IE OF CRASH (choose up to 2)
A - Activity Vehicles	88. N	lot Applicable				01. Apparently Norm	· · · ·
F - Taxi, Livery, Motor C	SDEI	ED RELATED		U		02. Physically Impai	
H - Hazardous Material	01. N		00	2		03. Emotional (depr	
M - Motorcycles		Racing	99			04. III, <i>(sick)</i> Fainted 05. Asleep or Fatigu	
N - Tank Vehicles		Exceeded Speed Lin Too Fast for Condit					nce (Medications/Drugs/Alcohol)
P - Passenger				66)		97. Other 99. Unknown	
Q - Fire Fighting Vehic	les			INJURY AND			
S - School Bus	INJU	IRY STATUS	TRAN	SPORTED TO			
T - Double/Triple Traile		atal Injury	FIRST	CAL FACILITY BY			·
V - Student Transportat		uspected Serious I		Transported	EMS RUN NU		
X - Combination of Tank Vehicle and Hazard		uspected Minor Inj ossible Injury		S Air S Ground	INTENDED R	RECEIVING FACILITY	
Materials		o Apparent	C 03. EW	01			
	In	jury		orcement			
		ENT ACTIONS	97. Oth	ler		DRUG/ALCOHOL	
	IOLATION ST	AIUIES			01. Test No		01. Blood
00. None Taken 01. Verbal Warning					01. Test No 02. Test Re	03	01. Blood 03
02. Written Warning					03. Test Giv		03. Breath
03. Infraction					99. Unknow	n if lested	88. Not Applicable 97. Other
04. Arrest/Summons					DRUG TES	ST STATUS	TYPE OF DRUG TEST
04					01. Test No	01	01. Blood 88
					02. Test Re 03. Test Gi		02. Urine 88. Not Applicable
					99. Unknow		97. Other

<sub>Page</sub> 11 of 12		(	CONNECT	ICUT UNIFO				DRT		
Motor	r Vehicle ID	-	]	Form PR-1	REV July 2	2014.01	l	Case Nu	mber: 23-007179	
Pe	erson ID	2	M	otor Vehicl	<b>e Driver In</b> One Sheet Pei			DOT Iden Far DO	ntifier: Tuseonly	
Name (Last, First, Gree Middle, Suffix):	en, John					0	ENDER 1. Male 2. Female	01	DATE OF BIRTH(YY 1977111	
Street Address 5 Ador PO Box:	CTON ST						9. Unknown		Date of Birth is	unknown
City: Hartford		State or Prov	r: CT	Postal 0612 Code:		one/Email			+	
LICENSE INFO	0	For all	numorio fiold	s:99 = 'Unknown		DRIVER		ATION		
LICENSE NUMBER	E	EJECTIO		5. 55 - Olikilowii	SEATING POS	SITION FI	RST DIGIT	DRIVER ACTION	<b>IS</b> (choose up to four)	
118518999		01. Not Ej	ected d, Partially	01	1 Front Row		11	01. No Contributi	•	99
STATE	C	03. Ejecte	ed, Totally					02. Ran Off Road 03. Failed to Yiel	d Right-of-Way	
-	٤	38. Not Ap	oplicable					04. Ran Red Ligh 05. Ran Stop Sigr		
DRIVER LICENSE JURISI		RESTRAI	NT SYSTEM		SECOND DIGI			06. Disregarded	Other Traffic Sign	
01. Not Licensed			Used-Motor V der and Lap Be	ehicle Occupant	_1. Left Seat (a	e driver exc	ept for postal	08. Improper Turr	Other Road Markings า	
02. State 03. Tribal Nation			der Belt Only I				n vehicles)	09. Improper Back	0	
04. U.S. Government		•	elt Only Used aint Used Type		_3. Right Seat 8. Other Seat			10. Improper Pase 11. Wrong Side of	•	
05. Canadian Province		38. Not Ap	•••	e onklown	_0. Other Seat	L		12. Followed Too		
06. Mexican State 07. International License (		97. Other				0		13. Failed to Kee 14. Operated Veh	p in Proper Lane iicle in Reckless Aggres:	sive Manner
than Mexico and Canad 08. Valid License (other co				04	T	T			or Vehicle in Inattentive,	Careless
88. Not Applicable	Sund y )				F				Erratic Manner voided Due to Wind, Moto	or Vehicle,
	ŀ	HELMET	USE		61	000	B) III		Motorist in Roadway, etc.	
LICENSE CLASS		01. No He			HI			18. Overtaking Cy	ing/Over-Steering yclist	
00. None			•	torcycle Helmet DOT-Compliant			Car, sw	88. Not Applicabl		
01. Class A 02. Class B		Motor	cycle Helmet		n -	100	N. Ya	97. Other Contrib	Juling Action	
03. Class C		04. Helme 38. Not Ap		DOT-Compliant		691		DRIVER DISTRA	ACTED BY	
04. Class D		. NOL A	phoabic	88	Ç	(55)		01. Not Distracte 02. Manually Ope		01
05. Class M 88. Not Applicable		AIRBAG				0		Electronic Co	ommunication Device (Te.	5, ,
COMMERCIAL LICENSE		01. Not De	eployed			(55)		•	ands-Free Electronic Dev and-Held Electronic Devi	
01. No			yed-Front	01				05. Other Activity	, Electronic Device	
02. Yes		)3. Deploy )4. Deploy	yed-Side yed-Curtain		,			06. Passenger 07. Other Inside t	the Vehicle <i>(eating, hygie</i>	ne. etc.)
ENDORSEMENTS	C	)5. Deploy	yed-Other			<u>سے</u>	2	08. Outside the V		.,,
A - Activity Vehicles		06. Deploy 38. Not Ap	yed-Combinati	ion			Moto	CONDITION AT	TIME OF CRASH (choose	e up to 2)
F - Taxi, Livery, Motor	Coach					11 (1	2	01. Apparently No 02. Physically Imp		01
H - Hazardous Materi	ais	SPEED RI 01. No	ELATED		-				epressed, angry, etc.)	
M - Motorcycles		02. Racing	g	99		20		04. III, <i>(sick)</i> Fain		
N - Tank Vehicles			ded Speed Lin ast for Conditi			1		05. Asleep or Fat 06. Under the infl	luence <i>(Medications/Drugs</i>	s/Alcohol)
P - Passenger		. 10011				(66)		97. Other		
Q - Fire Fighting Veh	nicles	_						99. Unknown		
S - School Bus	1	NJURY S	STATUS		PORTED TO					
T - Double/Triple Tra	H	K. Fatal Iı	njury	FIRST MEDIC	AL FACILITY	вү		-		
V - Student Transport		•	cted Serious Ir cted Minor Inju		Transported		MS RUN NU	-		
X - Combination of Ta Vehicle and Hazar Materials	rdouo	C. Possib			Ground	I _	NTENDED R	ECEIVING FACILI	ΤY	
Materials	(	O. No App	barent	04. Law	0	- 1				
		Injury		97. Othe	rcement er					
	INFORCE	EMENT	ACTIONS	TAKEN			D	RUG/ALCOHO	OL INFORMATION	
	VIOLATION							TEST STATUS	TYPE OF ALCOHO	L TEST
00. None Taken							01. Test Not	01	01. Blood	88
01. Verbal Warning							02. Test Ret 03. Test Giv		02. Urine 03. Breath	
02. Written Warning 03. Infraction							99. Unknowr		88. Not Applicable	
04. Arrest/Summons							DRUG TES	T STATUS	97. Other TYPE OF DRUG TE	ST
03							01. Test Not		01. Blood	88
							02. Test Ret 03. Test Giv	fused	02. Urine 88. Not Applicable	
							99. Unknowr		97. Other	

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#### Number of Witnesses:

1

### CONNECTICUT UNIFORM POLICE CRASH REPORT

Form PR-1 REV July 2014.01

Case Number:

DOT Identifier: For DOT use only

Appendix E: Witness Complete this sheet for all witnesses to the crash

Please complete this Appendix form for witnesses to a crash. Each Appendix form can document information for up to three witnesses. Multiple forms can be used if necessary. Actual witness statements should be collected on department statement sheets and witnesses should be identified using unique Person ID Numbers.

PERSON ID 3	WITNESS INFORMATION	
NAME: DURAN, IVETTE		<b>WITNESS STATEMENT TYPE</b> (choose all that apply; max 2)
ADDRESS: 54, Adelaide Street	01. No Statement Taken 02. Provided Written Statement	
CITY: Hartford	STATE CT POSTAL 06106 or PROV: CODE:	-       03. Willing to Provide a Written Statement         04. Oral Statement Only
DATE OF BIRTH (YYYYMMDD): 19990414	Date of Birth is unknown	-
WITNESS STATEMENT SOURCE (choose all that apply; max 4)		WITNESS OBSERVATION VERIFICATION (choose all that apply; max 3)
01. Observed Crash Occur 02. Overheard Statements by Person Involved 03. Observed illegal activities by persons involved in	a the crash prior to police arrival	01. Sight Lines Verified By Reporting Officer 02. Sight Lines Verified By Other Officer
<ol> <li>Observed other illegal behavior by a vehicle invo occurring</li> <li>Not Applicable</li> </ol>	olved in the crash or resulting in the crash	03. Sight Lines Confirmed by Other Witness 04. Verification Not Possible 05. Verification Not Undertaken
PERSON ID		
NAME:		(choose all that apply; max 2)
ADDRESS:		01. No Statement Taken 02. Provided Written Statement 03. Willing to Provide a Written Statement
CITY:	STATE POSTAL or PROV: CODE:	04. Oral Statement Only 05. Statement Confirmed by other Witness
DATE OF BIRTH (YYYYMMDD):	Date of Birth is unknown	-
WITNESS STATEMENT SOURCE (choose all that apply; max 4)		WITNESS OBSERVATION VERIFICATION (choose all that apply; max 3)
01. Observed Crash Occur 02. Overheard Statements by Person Involved		01. Sight Lines Verified By Reporting Officer
<ul><li>03. Observed illegal activities by persons involved in</li><li>04. Observed other illegal behavior by a vehicle invo</li><li>occurring</li></ul>		02. Sight Lines Verified By Other Officer         03. Sight Lines Confirmed by Other Witness         04. Verification Not Possible
88. Not Applicable		05. Verification Not Undertaken
PERSON ID		
NAME:		WITNESS STATEMENT TYPE (choose all that apply; max 2)
ADDRESS:		01. No Statement Taken 02. Provided Written Statement
CITY:	STATE POSTAL or PROV: CODE:	03. Willing to Provide a Written Statement         04. Oral Statement Only         05. Statement Confirmed by other Witness
	Date of Birth is unknown	
WITNESS STATEMENT SOURCE (choose all that apply; max 4)		WITNESS OBSERVATION VERIFICATION (choose all that apply; max 3)
01. Observed Crash Occur 02. Overheard Statements by Person Involved 03. Observed illegal activities by persons involved in 04. Observed other illegal behavior by a vehicle invo		01. Sight Lines Verified By Reporting         Officer         02. Sight Lines Verified By Other Officer         03. Sight Lines Confirmed by Other Witness
occurring 88. Not Applicable		04. Verification Not Possible

23-007179