

DO NOT WRITE IN THIS SPACE

Incident Report

Investigation Completed

Investigation Made at Scene

Photographs

Y	N		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Revised	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fatality	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hit and Run	<input checked="" type="checkbox"/>

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

(1) Reporting Agency NORMAN POLICE DEPARTMENT		Case Number (Agency Use) 2012-11500		Motor Vehicles Involved 02	Number Injured 01	Number Killed 00
(2) Date of Collision (mm/dd/yyyy) 08/20/2012		Time 1120	County Number and Name 14 CLEVELAND	Nearest City or Town Number and Name In <input checked="" type="checkbox"/> Near <input type="checkbox"/> 20 NORMAN		
(3) Distance from Nearest City or Town Limits Mi. <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> Ft. <input type="checkbox"/>		Control #	Int ID	Location	East Grid	North Grid
(4) Street, Road or Highway 12TH AVE SE		Distance from At 0205	(Nearest) Intersecting Street, Road or Highway ALAMEDA STREET			
(5) Unit 1	Occupants 1	Type D	Hit & Run <input type="checkbox"/>	CMV <input type="checkbox"/>	Last Name ANDERSON	First LARRY
		Middle CHARLES	Suffix 	Date of Birth (mm/dd/yyyy) 03/28/1965	Sex M	
(6) Address 201 B W. GRAY ST.		City NORMAN	State OK	Zip 73069	Telephone (Use Area Code) 4053211600	
(7) Driver License Number 003956157		State OK	Class D	Endorsement(s) 	Restriction(s) 	Inj. Sev. 1
		Type of Injury 0	Drv./Ped. Cond. 01		OP Use 04	
(8) Ejected Air 1	Extricated Bag 1	Test 1	(% BAC) 5	Transported by 0	To Medical Facility 	License Plate Number 1000
		State OK	Month 12	Year 2012		
(9) VIN 3B3KA43H07H736832		Vehicle Year 2007	Color MAR	2nd Color 0	Make DODG	Model CHAR
		Veh. Conf. 02	Extent of Damage 4			
(10) Insurance Company Name 4		Policy Number 	Insurance Telephone (Use Area Code) 			
(11) Vehicle Removed by Driver <input checked="" type="checkbox"/>		Owner's Last Name CITY OF NORMAN	First 	Middle 	Suffix 	
(12) Owner's Address 201 B W. GRAY ST.		City NORMAN	State OK	Zip 73069	Towed Veh. Type Oversized Load <input type="checkbox"/> 0	
		Rolled <input type="checkbox"/>		Phone present <input type="checkbox"/>		
		Burned <input type="checkbox"/>		Phone in use <input type="checkbox"/>		
(13) Citation Number 		Statute/Ordinance Number 	Citation Number 	Statute/Ordinance Number 		
(14) Unit 02	Occupants 01	Type D	Hit & Run <input type="checkbox"/>	CMV <input type="checkbox"/>	Last Name HOLLANDSWORTH	First BRETT
		Middle K.	Suffix 	Date of Birth (mm/dd/yyyy) 10/06/1959	Sex M	
(15) Address 1905 CREIGHTON DR		City NORMAN	State OK	Zip 73071	Telephone (Use Area Code) 4057015377	
(16) Driver License Number 004732		State CO	Class R	Endorsement(s) M	Restriction(s) 	Inj. Sev. 3
		Type of Injury 13	Drv./Ped. Cond. 01		OP Use 01	
(17) Ejected Air 1	Extricated Bag 1	Test 1	(% BAC) 5	Transported by 0	To Medical Facility NORMAN REGIONAL	License Plate Number 363007
		State OK	Month 04	Year 2013		
(18) VIN 1HFSC52096A30289		Vehicle Year 2006	Color BLU	2nd Color 0	Make HOND	Model VTX
		Veh. Conf. 15	Extent of Damage 4			
(19) Insurance Company Name 2 ALLSTATE		Policy Number 0051123390409	Insurance Telephone (Use Area Code) 4053607656			
(20) Vehicle Removed by Driver <input type="checkbox"/>		Owner's Last Name A&A WRECKER SERVICE	First 	Middle 	Suffix 	
(21) Owner's Address 		City 	State 	Zip 	Towed Veh. Type Oversized Load <input type="checkbox"/>	
		Rolled <input type="checkbox"/>		Phone present <input type="checkbox"/>		
		Burned <input type="checkbox"/>		Phone in use <input type="checkbox"/>		
(22) Citation Number 		Statute/Ordinance Number 	Citation Number 	Statute/Ordinance Number 		
(23) Investigating Officer LT. CHRIS DIRCK		Badge Number 9583	Trp./Div. Assigned 	Trp./Div. Location 	Reviewer (Init.) JW	Reviewer Badge Number 0200
		Date of Report (mm/dd/yyyy) 08/21/2012				
Unit Type D Driver P Pedestrian X Pedestrian B Bicyclist		Injury Severity 0 N/A 1 No Injury 2 Possible 3 Non-Incapacitating	Type of Injury 0 N/A 1 Head 2 Trunk 3 External 4 Arms 5 Legs 6 Unknown	Driver/Pedestrian Condition 00 Not Applicable 01 Apparently Normal 02 Drinking - Ability Impaired 03 Odor of Alcohol Beverage 04 Illegal Drugs 05 Under the Influence of 09 Dizzy/Faint 06 Medications 07 Very Tired 08 Ill (Sick) 09 Emotional 10 Other 11 Unknown		Occupant Protection (OP) In Use 00 Not Applicable 01 None Used 02 Lap Belt Only 03 Shoulder Belt Only 04 Shoulder and Lap Belt 05 Child Restraint Type Unknown 06 Restraint Used - Type Unknown 07 Helmet 08 Child Restraint - Forward Facing 09 Child Restraint - Rear Facing 10 Booster Seat 11 Other 99 Unknown
Air Bag Deployed 0 Not Deployed 1 Deployed - Front 2 Deployed - Side 3 Deployed - Other (knee, air belt, etc.) 4 Deployment Unknown		Ejected 0 Not Ejected 1 Not Ejected 2 Ejected, Partially 3 Ejected, Totally 9 Unknown	Extricated 0 N/A 1 No 2 Yes	Chemical Test 0 N/A 1 Blood 2 Breath 3 Blood/Breath 4 Test Refused 5 None Given 6 Other	Extent of Damage 0 N/A 1 None 2 Minor 3 Functional 4 Disabling 9 Unknown	Insurance Verification 0 N/A 1 No 2 Owner 3 Operator 4 Exempt P Permitted
Towed Vehicle Type 00 N/A 01 Boat Trailer 02 House Trailer 03 Farm Trailer 04 Horse Trailer 05 Another Vehicle 06 Utility Trailer 07 Homestead Trailer 08 Box Trailer 09 Stock Trailer 10 Camping Trailer 11 Combination 12 Other 99 Unknown						

WARNING - STATE LAW

Use of contents for commercial solicitation is unlawful

(24) Unit	Injured <input type="checkbox"/> Witness <input checked="" type="checkbox"/> Passenger <input type="checkbox"/> Prop. Owner <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
01			NEWELL	JENNIFER	S		04021970	F
(25) Address	City	State	Zip	Telephone (Use Area Code)				
201 B W GRAY ST.	NORMAN	OK	73069	4053211600				
(26) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type	
(27) Unit	Injured <input type="checkbox"/> Witness <input checked="" type="checkbox"/> Passenger <input type="checkbox"/> Prop. Owner <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
			REYNOLDS	SCOTT	E		10251949	M
(28) Address	City	State	Zip	Telephone (Use Area Code)				
32261 DUTTON RD	WANETTE	OK	74878	4058994476				
(29) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type	
(30) Unit	Injured <input type="checkbox"/> Witness <input type="checkbox"/> Passenger <input type="checkbox"/> Prop. Owner <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
(31) Address	City	State	Zip	Telephone (Use Area Code)				
(32) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type	
(33) Unit	Injured <input type="checkbox"/> Witness <input type="checkbox"/> Passenger <input type="checkbox"/> Prop. Owner <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
(34) Address	City	State	Zip	Telephone (Use Area Code)				
(35) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type	

Complete information below if this vehicle is being used for COMMERCE/BUSINESS and has a GVWR/GCWR IN EXCESS OF 10,000 LBS., or has a HAZMAT PLACARD, or is a BUS WITH SEATING FOR NINE OR MORE INCLUDING THE DRIVER

(36) Unit	Carrier Name	Address									
(37) City	State	Zip	GVWR	0 - 10K lbs.	Axle Qty.	Cargo Body	Vehicle Use				
			GCWR	10,001 - 26K lbs.			Interstate Commerce				
				26K+ lbs.			Intrastate Commerce				
(38) U.S. DOT Number	NASI Report Number	Placard Number	Haz. Mat. Class	Haz. Mat. Involved	Haz. Mat. Release						
	OK			Yes	Yes						
				No	No						
(39) Unit	Carrier Name	Address									
(40) City	State	Zip	GVWR	0 - 10K lbs.	Axle Qty.	Cargo Body	Vehicle Use				
			GCWR	10,001 - 26K lbs.			Interstate Commerce				
				26K+ lbs.			Intrastate Commerce				
(41) U.S. DOT Number	NASI Report Number	Placard Number	Haz. Mat. Class	Haz. Mat. Involved	Haz. Mat. Release						
	OK			Yes	Yes						
				No	No						

Position in Vehicle 00. Not Applicable 18. Front Row - Other 28. Second Row - Other 38. Third Row - Other 48. Fourth Row - Other 50. Sleeper Section of Truck Cab See manual for additional seating examples	Vehicle Configuration 00. N/A 01. Passenger Veh.-2 Dr 02. Passenger Veh.-4 Dr 03. Passenger Veh. Conv. 04. Pickup 05. Single Unit Truck, 2 axles 06. Single Unit Truck, 3+ axles 07. School Bus 08. Truck/Trailer 09. Truck-Tractor (Bobtail) 10. Truck-Tractor/ Semi-Trailer 11. Truck-Tractor/ Double 12. Truck-Tractor/ Triple 13. Bus/Large Van 9-15 occupants including driver 14. Bus 16+ occupants including driver 15. Motorcycle 16. Motor Scooter/ Moped 17. Motor Home 18. Farm Machinery 19. ATV 20. SUV 21. Passenger Van 22. Truck more than 10,000 lbs., Cannot Classify 23. Van 10,000 lbs. or Less 24. Other 99. Unknown	Cargo Body Type 00. N/A 01. Bus 9-15 seats 02. Bus 16+ seats 03. Van / Enclosed Box / Stock Trailer 04. Cargo Tank 05. Flatbed 06. Intermodal 07. Dump Truck/ Trailer 08. Concrete Mixer 09. Auto Transporter 10. Garbage/Refuse 11. Hopper (grain/ chips/gravel) 12. Pole Trailer 13. Log Trailer 14. Vehicle Towing Vehicle 15. Other 99. Unknown
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Unit		Total Lanes in Roadway	Legal Speed	Pedestrian / Pedalcyclist Only		Location at Time of Collision	Safety Equip.	Unit Number of Vehicle Striking	Was the collision in or near a construction, maintenance or utility work zone? (If yes, complete this section)		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
This unit will correspond to 'Unit 1'	1	04	40										
This unit will correspond to 'Unit 2'	2	04	40										
Light		What Vehicle Was Going to Do		Unit 1		Unit 2		Underride/Override		Unit 1		Unit 2	
1 Daylight		00 Not Applicable		02		01		0 Not Applicable					
2 Dark-Not Lighted		01 Go Ahead						1 No Underride or Override					
3 Dark-Lighted		02 Turn Left						2 Underride, Compartment Intrusion					
4 Dawn		03 Turn Right						3 Underride, No Compartment Intrusion					
5 Dusk		04 Make "U" Turn						4 Underride, Compartment Intrusion Unknown					
6 Dark-Unknown		05 Stop						5 Override, Motor Vehicle in Transport					
7 Lighting		06 Slow for Cause						6 Override, Other Motor Vehicle					
8 Other		07 Start from Park/Stop						9 Unknown					
9 Unknown		08 Change Lanes											
Weather		What Vehicle Did		Unit 1		Unit 2		Traffic Control		Unit 1		Unit 2	
01 Clear		00 Not Applicable		02		01		00 No Control		00		00	
02 Fog/Smog/Smoke		01 Went Ahead						01 Stop Sign					
03 Cloudy		02 Turned Left						02 Traffic Signal					
04 Rain		03 Turned Right						03 Flashing Traffic Signal					
05 Snow		04 Entered "U" Turn						04 School Zone Signs					
06 Sleet/Hail (Freezing Rain/Drizzle)		05 Stopped						05 Yield Sign					
07 Severe Crosswind		06 Slowed						06 Warning Sign					
08 Blowing Snow		07 Started From Park/Stop						07 Railroad Advance Warning Sign					
09 Blowing Sand, Soil, Dirt		08 Entered Other Lane						08 Railroad Cross Bucks					
10 Other		09 Overtaking						09 Railroad Gates					
99 Unknown		10 Passing						10 Railroad Signal					
Locality		Visibility Obscured by		Unit 1		Unit 2		Road Surface Conditions		Unit 1		Unit 2	
1 Residential		00 Not Applicable		02		01		01 Dry		01		01	
2 Business		01 Trees						02 Wet					
3 Industrial		02 Embankment						03 Ice/Frost					
4 School		03 Building						04 Snow					
5 Not Built-up		04 Signs						05 Mud, Dirt, Gravel					
6 Mixed Use		05 Parked Vehicles						06 Slush					
7 Other		06 High Weeds						07 Water (standing, moving)					
9 Unknown		07 Fences						08 Sand					
Type of Intersection		Road Character		Unit 1		Unit 2		Road Alignment		Unit 1		Unit 2	
0 Not an Intersection		1 Level		00		00		1 Straight		1		1	
1 Y-Intersection		2 Hillcrest						2 Curve - Left					
2 T-Intersection		3 Uphill						3 Curve - Right					
3 Four-Way Intersection		4 Downhill											
4 Five-Point or More Intersection as Part of Interchange		5 Sag (bottom)											
5 Traffic Circle		Road Surface Type		Unit 1		Unit 2							
6 Roundabout		1 Concrete		0		0		1 Asphalt		2		2	
9 Unknown		2 Asphalt						3 Gravel					
Incident Type		Driver Distracted by		Unit 1		Unit 2		Road Surface Type		Unit 1		Unit 2	
00 Not an Incident		0 Not Applicable/None		0		0		1 Concrete		2		2	
51 Private Property		1 Electronic Communication Devices						2 Asphalt					
52 Deliberate Intent		2 Other Electronic Device						3 Gravel					
53													

Case Number 2012-11500

Latitude				
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Longitude				
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Railroad Crossing Number

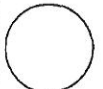
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Roadway Orientation

Unit Number	01	NE	E	SW
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Unit Number	02	NE	S	SW
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Indicate North
by Arrow

COLLISION EVENTS

Unit	First Event	Second Event	Third Event	Fourth Event	Most Harmful Event	First Harmful Event for the Entire Collision
1	34	00	00	00	34	34
Unit	First Event	Second Event	Third Event	Fourth Event	Most Harmful Event	
2	34	00	00	00	34	

00 Not Applicable
10 Overturn/Rollover
11 Fire/Explosion
12 Immersion
13 Jackknife
14 Cargo/Equipment Loss or Shift
15 Equipment Failure (Blown Tire, Brake Failure, etc.)
16 Separation of Units
17 Departed Road Right
18 Departed Road Left
19 Cross Median/Centerline
20 Downhill Runaway

21 Fell/Jumped From Motor Vehicle
22 Thrown Or Falling Object
23 Other Non-Collision
PERSON, MOTOR VEHICLE, OR NON-FIXED OBJECT:
30 Pedestrian
31 Pedal Cycle
32 Railway Vehicle (train, engine)
33 Animal
34 Motor Vehicle in Transport
35 Parked Motor Vehicle
36 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle

- | | |
|-------------------------------------|-----------------------------------|
| 37 Work Zone/Maintenance Equipment | 56 Pavement Drop-Off |
| 38 Other Non-Fixed Object | 57 Ditch |
| FIXED OBJECT: | 58 Embankment |
| 40 Barrier (Cable) | 59 Tree (Standing) |
| 41 Barrier (Concrete) | 60 Dividing Strip |
| 42 Barrier (Other) | 61 Retaining Wall |
| 43 Fence Pole | 62 Bridge Abutment |
| 44 Fence | 63 Bridge Pier or Support |
| 45 Traffic Signal Support | 64 Bridge Rail |
| 46 Traffic Sign Support | 65 Bridge Post |
| 47 Utility Pole/Light Support | 66 Bridge Curb |
| 48 Other Post/Pole/Support | 67 Bridge Super Structure (Beams) |
| 49 Guardrail/Guardrail Face | 68 Bridge Overhead Structure |
| 50 Guardrail End | 69 Delineator |
| 51 Culvert | 70 Mailbox |
| 52 Curb | 71 Other Fixed Object |
| 53 Island | 72 Other Highway Structure |
| 54 Sand Barrels | 73 Ground |
| 55 Impact Attenuator/ Crash Cushion | 99 Unknown |

Remarks

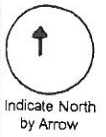
THE DRIVER OF UNIT 1 WAS PULLING OUT OF A PRIVATE DRIVE ONTO 12TH AVE SE TO GO NORTH BOUND. UNIT 2 WAS TRAVELING SOUTH ON 12TH AVE SE IN THE INSIDE LANE. THE DRIVER OF UNIT 1 SAID HE DID NOT SEE UNIT 2 WHEN HE STARTED HIS TURN AND DURING HIS TURN HE SAW UNIT 2 AND TRIED TO SPEED UP TO AVOID UNIT 2. UNIT 2 ENDED UP STRIKING THE DRIVER'S SIDE REAR QUARTER PANEL. THE DRIVER OF UNIT 2 SAID WHEN UNIT 1 PULLED OUT IN FRONT OF HIM HE TRIED TO BRAKE AND THEN LAID DOWN HIS MOTORCYCLE TO TRY TO AVOID THE COLLISION. POI WAS APPX. 205' SOUTH OF ALAMEDA'S SOUTH CURB LINE AND 20'11" EAST OF 12TH AVE. SE WEST CURB LINE.

This report is based on the officer's investigation of this collision. This report may contain the opinion of the officer.

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT
DIAGRAM SUPPLEMENTAL

Case Number 2012-11500

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Not To Scale

