

DO NOT WRITE IN THIS SPACE

Incident Report

| | | | |
|-----------------------------|-------------------------------------|-------------|-------------------------------------|
| Investigation Completed | <input checked="" type="checkbox"/> | Revised | <input checked="" type="checkbox"/> |
| Investigation Made at Scene | <input checked="" type="checkbox"/> | Fatality | <input checked="" type="checkbox"/> |
| Photographs | <input checked="" type="checkbox"/> | Hit and Run | <input checked="" type="checkbox"/> |

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

| | | | | | | |
|---|------------------------|--|--|---|-------------------------------------|--------------------------------------|
| (1) Reporting Agency NORMAN POLICE DEPARTMENT | | Case Number (Agency Use) 2018-00030398 | | Motor Vehicles Involved 02 | Number Injured 00 | Number Killed 00 |
| (2) Date of Collision (mm/dd/yyyy) 04232018 | | Time 1533 | County Number and Name 14 CLEVELAND | Nearest City or Town Number and Name NORMAN | | |
| (3) Distance from Nearest City or Town Limits | | Control # | Int ID | Location | East Grid | North Grid |
| (4) Street, Road or Highway N PORTER AVE | | Distance from | (Nearest) Intersecting Street, Road or Highway E RONINSON ST | | | |
| (5) Unit 01 | Occupants 01 | Type D | Last Name LOEFFELHOLZ | | First GARY | Middle |
| (6) Address 201 W GRAY ST | | City NORMAN | State OK | Zip 73069 | Telephone (Use Area Code) | |
| (7) Driver License Number | | State OK | Class A | Endorsement(s) | Restriction(s) | Inj. Sev. 1 |
| (8) Ejected 1 | | Extricated 1 | Test 1 | (% BAC) 0 | Transported by | To Medical Facility |
| (9) VIN 1GC2KVCGBZ317274 | | Vehicle Year 2011 | Color WHI | 2nd Color 0 | Make CHEV | Model SI LV |
| (10) Insurance Company Name 4 | | Policy Number | State OK | Month 12 | Year 2018 | Insurance Telephone (Use Area Code) |
| (11) Vehicle Removed by X | | Owner's Last Name CITY OF NORMAN #174 | | First | Middle | Suffix |
| (12) Owner's Address 1301 DA VINCI ST | | City NORMAN | State OK | Zip 73069 | Oversized Load 0 | Towed Veh. Type 00 |
| (13) Citation Number 636291 | | Statute/Ordinance Number M20-520 | Citation Number | Statute/Ordinance Number | Insurance Telephone (Use Area Code) | |
| (14) Unit 02 | Occupants 03 | Type D | Last Name THOMAS | | First SKYLAR | Middle |
| (15) Address | | City TX | State TX | Zip | Telephone (Use Area Code) | |
| (16) Driver License Number | | State TX | Class C | Endorsement(s) | Restriction(s) | Inj. Sev. 1 |
| (17) Ejected 1 | | Extricated 1 | Test 1 | (% BAC) 0 | Transported by | To Medical Facility |
| (18) VIN | | Vehicle Year 2008 | Color RED | 2nd Color 0 | Make HOND | Model ACCO |
| (19) Insurance Company Name 2 STATE FARM | | Policy Number | State TX | Month 8 | Year 2018 | Insurance Telephone (Use Area Code) |
| (20) Vehicle Removed by X | | Owner's Last Name | | First | Middle | Suffix |
| (21) Owner's Address | | City | State | Zip | Oversized Load 0 | Towed Veh. Type 00 |
| (22) Citation Number | | Statute/Ordinance Number | Citation Number | Statute/Ordinance Number | Insurance Telephone (Use Area Code) | |
| (23) Investigating Officer Hicks | | Badge Number 1712 | Trp/Div. Assigned | Trp/Div. Location | Reviewer (Init) Fletcher | Reviewer Badge Number 0903 |
| Date of Report (mm/dd/yyyy) 4232018 | | | | | | |

WARNING - STATE LAW Use of contents for commercial solicitation is unlawful

| | | | | | | | | | | | | | | |
|----------------------------------|--|---|--|--------------------------------------|--|---------|--|---------------------------|--|----------------|--|---------------------|--|---------------|
| (24) Unit | | Pos in Veh. | | Last Name | | First | | Middle | | Suffix | | DOB(mm/dd/yyyy) | | Sex |
| 02 | | 21 | | TARA | | | | | | | | | | F |
| Injured <input type="checkbox"/> | | Passenger <input checked="" type="checkbox"/> | | Prop. Owner <input type="checkbox"/> | | | | | | | | | | |
| Witness <input type="checkbox"/> | | | | | | | | | | | | | | |
| (25) Address | | City | | State | | Zip | | Telephone (Use Area Code) | | | | | | |
| WASHINGTON | | DC | | 20011 | | | | | | | | | | |
| (26) Injury Severity / Type | | OP Use | | Air Bag | | Ejected | | Extricated | | Transported by | | To Medical Facility | | Property Type |
| 1 0 | | 04 | | 1 1 | | 1 1 | | | | | | | | |
| (27) Unit | | Pos in Veh. | | Last Name | | First | | Middle | | Suffix | | DOB(mm/dd/yyyy) | | Sex |
| 02 | | 13 | | NADJA | | | | | | | | | | F |
| Injured <input type="checkbox"/> | | Passenger <input checked="" type="checkbox"/> | | Prop. Owner <input type="checkbox"/> | | | | | | | | | | |
| Witness <input type="checkbox"/> | | | | | | | | | | | | | | |
| (28) Address | | City | | State | | Zip | | Telephone (Use Area Code) | | | | | | |
| WASHINGTON | | DC | | 20011 | | | | | | | | | | |
| (29) Injury Severity / Type | | OP Use | | Air Bag | | Ejected | | Extricated | | Transported by | | To Medical Facility | | Property Type |
| 1 0 | | 04 | | 1 1 | | 1 1 | | | | | | | | |
| (30) Unit | | Pos in Veh. | | Last Name | | First | | Middle | | Suffix | | DOB(mm/dd/yyyy) | | Sex |
| | | | | | | | | | | | | | | |
| Injured <input type="checkbox"/> | | Passenger <input type="checkbox"/> | | Prop. Owner <input type="checkbox"/> | | | | | | | | | | |
| Witness <input type="checkbox"/> | | | | | | | | | | | | | | |
| (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 | | Pos in Veh. | | Last Name | | First | | Middle | | Suffix | | DOB(mm/dd/yyyy) | | Sex |
| | | | | | | | | | | | | | | |
| Injured <input type="checkbox"/> | | Passenger <input type="checkbox"/> | | Prop. Owner <input type="checkbox"/> | | | | | | | | | | |
| Witness <input type="checkbox"/> | | | | | | | | | | | | | | |
| (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 | | Axle Qty. | | Cargo Body | | Vehicle Use | | | |
| | | | | | | 0 - 10K lbs. | | | | | | Interstate Commerce | | <input type="checkbox"/> | |
| | | | | | | 10,001 - 26K lbs. | | | | | | Intrastate Commerce | | <input type="checkbox"/> | |
| | | | | | | 26K+ lbs. | | | | | | Other Non-Commercial | | <input type="checkbox"/> | |
| (38) U.S. DOT Number | | NASI Report Number | | Placard Number | | Haz. Mat. Class | | Haz. Mat. Involved | | Haz. Mat. Release | | Government | | <input type="checkbox"/> | |
| | | OK | | | | | | Yes <input type="checkbox"/> | | Yes <input type="checkbox"/> | | | | | |
| | | | | | | | | No <input type="checkbox"/> | | No <input type="checkbox"/> | | | | | |
| (39) Unit | | Carrier Name | | Address | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| (40) City | | State | | Zip | | GVWR | | Axle Qty. | | Cargo Body | | Vehicle Use | | | |
| | | | | | | 0 - 10K lbs. | | | | | | Interstate Commerce | | <input type="checkbox"/> | |
| | | | | | | 10,001 - 26K lbs. | | | | | | Intrastate Commerce | | <input type="checkbox"/> | |
| | | | | | | 26K+ lbs. | | | | | | Other Non-Commercial | | <input type="checkbox"/> | |
| (41) U.S. DOT Number | | NASI Report Number | | Placard Number | | Haz. Mat. Class | | Haz. Mat. Involved | | Haz. Mat. Release | | Government | | <input type="checkbox"/> | |
| | | OK | | | | | | Yes <input type="checkbox"/> | | Yes <input type="checkbox"/> | | | | | |
| | | | | | | | | No <input type="checkbox"/> | | No <input type="checkbox"/> | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--|---|--------------------|-------------------------|-------------------|--|---------|-------------------------|-----------------------------|----------------|---------|--------------------------|--------------------------------|-------------------------|-------------------|------------|--------------------------|----------------|--|--------------------------------|--------------------------|--|-----------------------------|---------------------------------|--|--|-----------|--|--|--|-------------|--|---------|----------------|---------------------------------|--------------------|------------------------|------------------|-------------------|--------------------|-----------------|--|----------------------|----------------------------|----------------|--------------------|-----------|-------------|--|-------------|
| <h3>Position in Vehicle</h3> <p>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</p> <p>See manual for additional seating examples</p> | <h3>Vehicle Configuration</h3> <table style="width:100%;"> <tr> <td>00. N/A</td> <td>07. School Bus</td> <td>13. Bus/Large Van 9-15 occupants including driver</td> <td>18. Farm Machinery</td> </tr> <tr> <td>01. Passenger Veh.-2 Dr</td> <td>08. Truck/Trailer</td> <td>14. Bus 16+ occupants including driver</td> <td>19. ATV</td> </tr> <tr> <td>02. Passenger Veh.-4 Dr</td> <td>09. Truck-Tractor (Bobtail)</td> <td>15. Motorcycle</td> <td>20. SUV</td> </tr> <tr> <td>03. Passenger Veh. Conv.</td> <td>10. Truck-Tractor/Semi-Trailer</td> <td>16. Motor Scooter/Moped</td> <td>21. Passenger Van</td> </tr> <tr> <td>04. Pickup</td> <td>11. Truck-Tractor/Double</td> <td>17. Motor Home</td> <td>22. Truck more than 10,000 lbs., Cannot Classify</td> </tr> <tr> <td>05. Single Unit Truck, 2 axles</td> <td>12. Truck-Tractor/Triple</td> <td></td> <td>23. Van 10,000 lbs. or Less</td> </tr> <tr> <td>06. Single Unit Truck, 3+ axles</td> <td></td> <td></td> <td>24. Other</td> </tr> <tr> <td></td> <td></td> <td></td> <td>99. Unknown</td> </tr> </table> | 00. N/A | 07. School Bus | 13. Bus/Large Van 9-15 occupants including driver | 18. Farm Machinery | 01. Passenger Veh.-2 Dr | 08. Truck/Trailer | 14. Bus 16+ occupants including driver | 19. ATV | 02. Passenger Veh.-4 Dr | 09. Truck-Tractor (Bobtail) | 15. Motorcycle | 20. SUV | 03. Passenger Veh. Conv. | 10. Truck-Tractor/Semi-Trailer | 16. Motor Scooter/Moped | 21. Passenger Van | 04. Pickup | 11. Truck-Tractor/Double | 17. Motor Home | 22. Truck more than 10,000 lbs., Cannot Classify | 05. Single Unit Truck, 2 axles | 12. Truck-Tractor/Triple | | 23. Van 10,000 lbs. or Less | 06. Single Unit Truck, 3+ axles | | | 24. Other | | | | 99. Unknown | <h3>Cargo Body Type</h3> <table style="width:100%;"> <tr> <td>00. N/A</td> <td>06. Intermodal</td> <td>11. Hopper (grain/chips/gravel)</td> </tr> <tr> <td>01. Bus 9-15 seats</td> <td>07. Dump Truck/Trailer</td> <td>12. Pole Trailer</td> </tr> <tr> <td>02. Bus 16+ seats</td> <td>08. Concrete Mixer</td> <td>13. Log Trailer</td> </tr> <tr> <td>03. Van / Enclosed Box / Stock Trailer</td> <td>09. Auto Transporter</td> <td>14. Vehicle Towing Vehicle</td> </tr> <tr> <td>04. Cargo Tank</td> <td>10. Garbage/Refuse</td> <td>15. Other</td> </tr> <tr> <td>05. Flatbed</td> <td></td> <td>99. Unknown</td> </tr> </table> | 00. N/A | 06. Intermodal | 11. Hopper (grain/chips/gravel) | 01. Bus 9-15 seats | 07. Dump Truck/Trailer | 12. Pole Trailer | 02. Bus 16+ seats | 08. Concrete Mixer | 13. Log Trailer | 03. Van / Enclosed Box / Stock Trailer | 09. Auto Transporter | 14. Vehicle Towing Vehicle | 04. Cargo Tank | 10. Garbage/Refuse | 15. Other | 05. Flatbed | | 99. Unknown |
| 00. N/A | 07. School Bus | 13. Bus/Large Van 9-15 occupants including driver | 18. Farm Machinery | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 01. Passenger Veh.-2 Dr | 08. Truck/Trailer | 14. Bus 16+ occupants including driver | 19. ATV | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 02. Passenger Veh.-4 Dr | 09. Truck-Tractor (Bobtail) | 15. Motorcycle | 20. SUV | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 03. Passenger Veh. Conv. | 10. Truck-Tractor/Semi-Trailer | 16. Motor Scooter/Moped | 21. Passenger Van | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 04. Pickup | 11. Truck-Tractor/Double | 17. Motor Home | 22. Truck more than 10,000 lbs., Cannot Classify | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 05. Single Unit Truck, 2 axles | 12. Truck-Tractor/Triple | | 23. Van 10,000 lbs. or Less | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 06. Single Unit Truck, 3+ axles | | | 24. Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | 99. Unknown | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 00. N/A | 06. Intermodal | 11. Hopper (grain/chips/gravel) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 01. Bus 9-15 seats | 07. Dump Truck/Trailer | 12. Pole Trailer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 02. Bus 16+ seats | 08. Concrete Mixer | 13. Log Trailer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 03. Van / Enclosed Box / Stock Trailer | 09. Auto Transporter | 14. Vehicle Towing Vehicle | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 04. Cargo Tank | 10. Garbage/Refuse | 15. Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 05. Flatbed | | 99. Unknown | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Table with columns: Unit, Total Lanes in Roadway, Legal Speed, Pedestrian / Pedalcyclist Only (Actions Prior to Collision, 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)
Type of Work Zone, Location of the Work Zone Collision, Workers Present

Light (1-9), What Vehicle Was Going to Do (00-19), Underdrive/Override (0-9)

Weather (01-10), What Vehicle Did (00-19), Traffic Control (00-13)

Locality (1-9), Road Surface Conditions (01-14)

Type of Intersection (0-9), Visibility Obscured by (00-10), Incident Type (00-58)

Location of First Harmful Event (01-10), Road Character (Grade, Road Alignment), Road Surface Type (1-9)

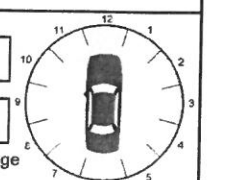
Driver Distracted by (0-9), Road Surface Type (1-9), Emergency Vehicle Responding to an Emergency (0-1)

Trafficway (Unit 1: 2, Unit 2: 2), Unsafe / Unlawful Contributing Factors (Unit 1: 84, Unit 2: 98)

Vehicle Removal (Unit 1: 4, Unit 2: 4), Vehicle Condition (Unit 1: 01, Unit 2: 01)

Special Function of Vehicle (Unit 1: 00, Unit 2: 00), Point of First Contact on Vehicle (Unit 1: 02, Unit 2: 11)

Most Damaged Area (Unit 1: 02, Unit 2: 11), Emergency Vehicle Responding to an Emergency (0-1)



Latitude

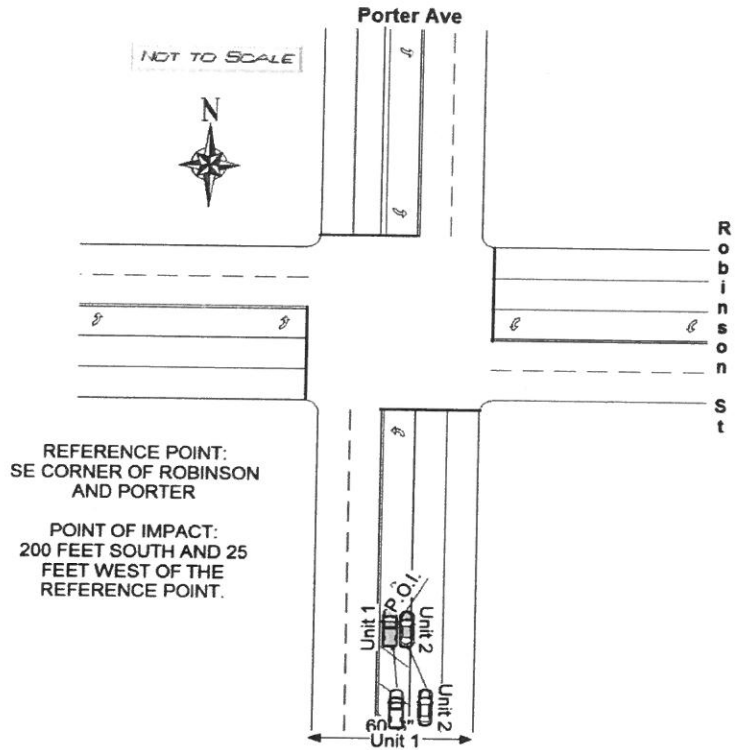
Longitude N W

Railroad Crossing Number

Roadway Orientation

Unit Number 01 NE SW N

Unit Number 02 NE SW N



COLLISION EVENTS

| Unit | First Event | Second Event | Third Event | Fourth Event | Most Harmful Event | First Harmful Event for the Entire Collision |
|------|-------------|--------------|-------------|--------------|--------------------|--|
| 01 | 34 | 00 | 00 | 00 | 34 | 34 |
| 02 | 34 | 00 | 00 | 00 | 34 | |

- 00 Not Applicable
- 10 Overtum/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
- 38 Other Non-Fixed Object
- FIXED OBJECT:**
- 40 Barrier (Cable)
- 41 Barrier (Concrete)
- 42 Barrier (Other)
- 43 Fence Pole
- 44 Fence
- 45 Traffic Signal Support
- 46 Traffic Sign Support
- 47 Utility Pole/Light Support
- 48 Other Post/Pole/Support
- 49 Guardrail/Guardrail Face
- 50 Guardrail End
- 51 Culvert
- 52 Curb
- 53 Island
- 54 Sand Barrels
- 55 Impact Attenuator/ Crash Cushion
- 56 Pavement Drop-Off
- 57 Ditch
- 58 Embankment
- 59 Tree (Standing)
- 60 Dividing Strip
- 61 Retaining Wall
- 62 Bridge Abutment
- 63 Bridge Pier or Support
- 64 Bridge Rail
- 65 Bridge Post
- 66 Bridge Curb
- 67 Bridge Super Structure (Beams)
- 68 Bridge Overhead Structure
- 69 Delineator
- 70 Mailbox
- 71 Other Fixed Object
- 72 Other Highway Structure
- 73 Ground
- 99 Unknown

Remarks

UNIT #1 AND UNIT #2 WERE BOTH TRAVELING NORTH ON PORTER TOWARDS ROBINSON IN THE MEDIAN LANE. UNIT #1 MOVED INTO THE THE CENTER AREA MARKED BY DOUBLE YELLOW LINES AND DIAGONAL YELLOW LINES TO GET INTO THE LEFT TURN LANE FOR WESTBOUOTD ROBINSON. UNIT #2 THEN WENT TO ENTER THE TURN LANE FOR WESTBOUND ROBINSON AT THE LANE ENTERENCE AND COLLIDED WITH UNIT #1. UNIT #1 WAS DRIVING IN AN UNAUTHORIZED AREA AND ATTEMPTING TO GET IN FRONT OF UNIT #2 IN THE TURN LANE.

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

