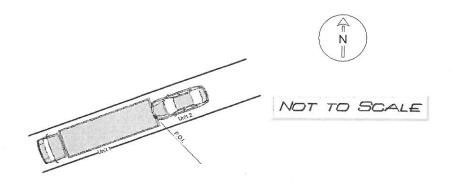
•	DO NOT WRITE IN THIS SPACE		Incident R	eport X Revised X
OFFICIAL OKLAHOM	A TRAFFIC COLL	ISION REPORT		n Made at Scene X Fatality
(1) Reporting Agency	and the state of t	Case Number (Agency Use)	Photograph	ns X Hit and Run X
NORMAN POLICE DEPARTMENT		2015-00326866	Motor Involv	Vehicles 02 Number 00 Number 6d 00 Killed 00
(2) Date of Collision (mm/dd/yyyy) Time	County Number and Name		Nearest City or Town	
11062015 1550	14 CLEVELAN	ID	In X	NORMAN
(3) Distance from Nearest City or Town Limits	Control # Int	ID Location	East Grid North	Grid Administrative
MI. N Ft S	Mi_ E W		t	
(4) Street, Road or Highway	At	ance from Mi. N	(Nearest) Intersection	ng Street, Road or Highway
(5) Unit Occupants Type Last Name	X	First Ft. S	Middle	Suffix Date of Birth (mm/dd/yyyy) Sei
01 01 D Run DANNER	City	THOMAS	State Zip	Telephone (Use Area Code)
9612 S MOA CIR	NORMAN		OK 73026	
(7) Driver License Number				Sev. Type of Injury Drv./Ped. Cond. OP Use
		OK B P	S	1 0 01 01 State Month Year
(8) Ejected Extricated Test (% BAC) Trans	ported by To N	Medical Facility	License Plate Number	State Month Year OK 00
Bag 0 1 1 5 0	Vehicl	e Year Color	2nd Color Make	Model Veh. Conf.
-	201	IO GRN	PTRB	24 Extent of Damage 2
(10) Insurance Company Name		Policy Number		Insurance Telephone (Use Area Code)
Verification 4	O	ast Name	First	Middle Suffix
(11) Vehicle Removed by	Same as	NORMAN	Filst	Wilde Sunk
X (12) Owner's Address	City	State Zip		Towed Veh. Type
201 W GRAY ST	NORMAN	OK 73	Oversize Load	Burned Phone in use
(13) Citation Number	Statute/Ordinance Number	Citation Number		Statute/Ordinance Number
02 02 D D COLUMN DIAZ		ANTHONY	DANIEL	Suffix Date of Birth (mm/dd/yyyyy) Sex 05061985 M
(15) Address	City		State Zip	Telephone (Use Area Code)
1134 MISSOURI ST	NORMAN	State Class Endo	73071	
1134 MISSOURI ST (16) Driver License Number		State Class Endo	73071 rsement(s) Restriction(s) Inj.	
(16) Driver License Number	NORMAN		73071 rsement(s) Restriction(s) Inj.	Sev. Type of Injury Drv /Ped. Cond. OP Use
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Trans	NORMAN	OK D	73071 rsement(s) Restriction(s) Inj.	Sev. Type of Injury Drv./Ped. Cond. OP Use 1 0 01 00
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Trans	ported by To M	OK D	73071 rsement(s) Restriction(s) Inj. License Plate Number	Sev. Type of Injury
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Transpage (18) VIN	NORMAN ported by To M	OK D e Year Color TAN	73071 rsement(s) Restriction(s) Inj. License Plate Number	Sev. Type of Injury
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Trans, Air 1 1 1 5 0. (18) VIN	ported by To M	OK D	73071 rsement(s) Restriction(s) Inj. License Plate Number	Sev. Type of Injury
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Translet (18) VIN (18) VIN (19) Insurance Verification (20) Vehicle Removed by	ported by To M Vehicle 200 Owner's Last	ledical Facility Policy Number 907343412	73071 rsement(s) Restriction(s) Inj. License Plate Number	Sev. Type of Injury Drv /Ped. Cond. OP Use 1 0 01 00 State Month Year OK 8 2016 Wodel Veh. Conf. Extent of Damage 2 Insurance Telephone (Use Area Code)
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Trans, Air Bag (18) VIN (18) VIN (19) Insurance Company Name PROGRESSIVE	ported by To M Vehicle 200	ledical Facility Policy Number 907343412	73071 rsement(s) Restriction(s) Inj. License Plate Number 2nd Color Make DODG	Sev. Type of Injury
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Transparent (18) VIN (18) VIN (19) Insurance Vorification (20) Vehicle Removed by Driver	ported by To M Vehicle 200 Owner's Last Same as	ledical Facility Policy Number 907343412	73071 rsement(s) Restriction(s) Inj. License Plate Number 2nd Color Make DODG	Sev. Type of Injury
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Transpage (18) VIN (18) VIN (19) Insurance Verification (20) Vehicle Removed by Driver X	ported by To M Vehicle 200 Same as Driver X	OK D e Year Color O9 TAN Policy Number 907343412 Name	73071 rsement(s) Restriction(s) Inj. License Plate Number 2nd Color Make DDDG First Oversize	Sev. Type of Injury Drv /Ped. Cond. OP Use 1 0 01 00 State Month Year OK 8 2016 Weh. Conf. AVEN 02 Extent of Damage Insurance Telephone (Use Area Code) (800) 776-4737 Middle Suffix Towed Veh. Type od 0 00 Rolled Phone present
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Transfer 1 1 1 5 0. (18) VIN	ported by To M Vehicle 200 Same as Driver X City Statute/Ordinance	Policy Number 907343412 Name State Citation Number	73071 rsement(s) Restriction(s) Inj. License Plate Number 2nd Color Make DODG First Oversize Load Reviewer (Init.) Reviewer	Sev. Type of Injury Drv /Ped. Cond. OP Use 1 0 01 00 State Month Year OK 8 2016 Weh. Conf. AVEN 02 Extent of Damage 2 Insurance Telephone (Use Area Code) (800) 776- 4737 Middle Suffix Towed Veh. Type ad 0 00 Rolled Phone present X Burned Phone in use Statute/Ordinance Number Date of Report (mm/dd/yyyy)
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Transport	NORMAN Ported by To M Vehicle 200 Same as Driver X City Statute/Ordinance Number Badge Number Trp/Div. As 1330	OK D Idedical Facility Policy Number 907343412 Name State Zip Citation Number Ssigned Trp/Div. Location	73071 rsement(s) Restriction(s) Inj. License Plate Number 2nd Color Make DODG First Oversize Load	Sev. Type of Injury Drv./Ped. Cond. OP Use 1 0 01 00 State Month Year OK 8 2016 Woh. Conf. AVEN 02 Extent of Damage 2 Insurance Telephone (Use Area Code) (800) 776-4737 Middle Suffix Towed Veh. Type ad 0 00 Rolled Phone present X Burned Phone in use Statute/Ordinance Number Badge Number Date of Report (mm/dd/yyyy)
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Transfer (18) VIN (18) VIN (19) Insurance Company Name Insurance Verification (20) Vehicle Removed by Driver X (21) Owner's Address (22) Citation Number (23) Investigating Officer	Same as Driver X Statute/Ordinance Number Badge Number Trp/Div. As 1 Trunk - 1 Head 1 Internal 2 Trink - 4 Arms 1 02 Drink - 102 Drink -	Policy Number 907343412 Name State Zip Citation Number State Zip Citation Number State Zip Driver/Pedestrian Condition Applicable arently Normal (ang Abitty Impaired of Alcohof Beverage 0 0 Very Tired 1 Drugs 10 Drugs Or Siegey 1 Color (ang Abitty Impaired of Alcohof Beverage 0 0 Very Tired 1 Drugs Or Siegey 1 Color (ang Abitty Impaired of Alcohof Beverage 0 0 Very Tired 1 Drugs Or Siegey 1 Color (ang Abitty Impaired of Alcohof Beverage 0 0 Very Tired 1 Drugs)	Reviewer (Init.)	Sev. Type of Injury Drv / Ped. Cond. OP Use 1 0 01 00 State Month Year OK 8 2016 Woh. Conf. AVEN 02 Extent of Damage 2 Insurance Telephone (Use Area Code) (800) 776-4737 Middle Suffix Towed Veh. Type ad 0 00 Rolled Phone present X Burned Phone in use Phone in use 10 Booster Seat 11 Other 90 Only Of Hemet 10 Schild Restraint Used - Type Unknown 06 Restraint Used - Type Unknown 10 Booster Seat 11 Other 90 Unknown 28 Child Restraint - Forward Facing 10 Unknown 29 Bet 10 Child Restraint - Forward Facing 10 Unknown 20 Unknown 2
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Trans, Air Bag 1 1 1 1 5 0. (18) VIN	ported by To M Vehicle 200 200 City Statute/Ordinance Number Badge Number Trp/Div. A 1330 Type of Injury O Not. Arms External S Legs 10 Johnson Od Allegi 20 Johnson O	Policy Number 907343412 Name State Zip Citation Number State Zip Citation Number State Signed Trp/Div. Location Driver/Pedestrian Condition Applicable Of Location Driver/Pedestrian Condition State Signed State Of Signed State State State Signed State State Signed State Of Signed	Reviewer (Init.)	Sev. Type of Injury Drv /Ped. Cond. OP Use 1 0 01 00 State Month Year OK 8 2016 Weh. Conf. AVEN 02 Extent of Damage 2 Insurance Telephone (Use Area Code) (800) 776-4737 Middle Suffix Towed Veh. Type d 0 00 Rolled Phone present Phone in use Statute/Ordinance Number Badge Number Date of Report (mm/dd/yyyy) 1162015 Occupant Protection (OP) In Use 05 Child Restraint Use 1-Type Unknown 06 Restraint Used 1-Type Unknown 07 Helmet 09 Unknown 07 Helmet 09 Child Restraint - Forward Facing 09 Drild Restraint - Forward Facing 09 Drild Restraint - Forward Facing 09 Unknown 09 Restraint Used 1-Type Unknown 09 Restraint Used 1-Type Unknown 09 Restraint Used 1-Type Unknown 09 Child Restraint - Forward Facing 09 Drild Restraint - Forward Facin
(16) Driver License Number (17) Ejected Extricated Test (% BAC) Transing and the second part of the second	ported by To M Vehicle 200 200 City Statute/Ordinance Number Badge Number Trp/Div. A 1330 Type of Injury O Nya 3 Trunk- 11 Hea 3 Trunk- 11 Hea 3 Trunk- 12 Trunk- 4 Arms External 5 Legs 10 Vohown Q4 Illegi gleded, 0 N/A 0 N/A 4 1 No 1 Blood 5 Chemics	Policy Number State Zip Citation Number State Zip Citation Number State Zip Citation Number State Zip Of Location Driver/Pedestrian Condition State Zip Of Judget the of Internations of Alcohol Beverage of Service of Service of Alcohol Beverage of Service of	Reviewer (Init.) Bolin Sit (Sick) Dizzyfroint O Dizzyfr	Sev. Type of Injury Drv /Ped. Cond. OP Use 1 0 01 00 State Month Year OK 8 2016 Weh. Conf. AVEN 02 Extent of Damage 2 Insurance Telephone (Use Area Code) (800) 776-4737 Middle Suffix Towed Veh. Type d 0 00 Rolled Phone present X Burned Phone in use Statute/Ordinance Number Date of Report (mm/dd/yyyy) 1162015 Occupant Protection (OP) In Use 05 Child Restraint Vaje Unknown 06 Restraint Used -Type Unknown 07 Helmet 10 Set Tailler 08 Unknown 07 Helmet 10 Combination 11 Other 99 Unknown 08 Rolled Restraint - Forward Facing 11 Other 11 Other 11 Combination 12 House 12 House Trailler 08 Unkilly Trailler 11 Combination 12 Children 12 Character 11 Combination 11 Combination 11 Combination 11 Combination 11 Combination 12 Children 12 Character 11 Combination 12 Character 11 Charact

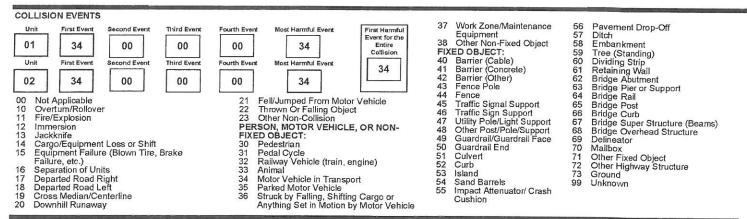
Case Number 2015-00326866			Pg 2 of 4			
(24) Unit Pos in Veh. Last Name 102 Injured Passenger X 13 TYLER	First	Middle	Suffix DOB(mm/dd/yyyy) Sex			
Witness Prop. Owner	SHERETTA	KENNETE	10261979 F			
(25) Address Same as			hone (Use Area Code)			
Driver 401 CHAUTAUQUA AVE 6	NORMAN		05) 937- 4359			
	ported by	Γο Medical Facility	Property Type			
(27) Unit Pos in Veh. Last Name	First	Middle	Suffix DOB (mm/dd/yyyy) Sex			
Witness Prop. Owner						
(28) Address Same as	City	State Zip Teleph	none (Use Area Code)			
Driver						
(29) Injury Severity / Type OP Use Air Bag Ejected Extricated Transp	oorted by	o Medical Facility	Property Type			
(30) Unit Pos in Veh. Last Name	First	Middle	Suffix DÖB (mm/dd/yyyy) Sex			
Witness Prop. Owner						
(31) Address Same as	City	State Zip Telephi	one (Use Area Code)			
Driver						
(32) Injury Severity / Type OP Use Air Bag Ejected Extricated Transp	orted by	o Medical Facility	Property Type			
(33) Unit Pos in Veh. Last Name	First	Middle	Suffix DOB(mm/dd/yyyy) Sex			
Witness Prop. Owner][]			
(34) Address Same as	City	itate Zip Telepho	one (Use Area Code)			
Driver						
(35) Injury Severity / Type OP Use Air Bag Ejected Extricated Transp	orted by	o Medical Facility	Property Type			
Complete information below if this vehicle is bein	g used for COMMERCE/BU	SINESS and has a G	VWR/GCWR IN EXCESS			
OF 10,000 LBS., or has a HAZMAT PLACARD, or	s a BUS WITH SEATING FO	R NINE OR MORE IN	ICLUDING THE DRIVER			
(36) Unit Carrier Name	Address					
(37) City	State Zip Gvw	0 - 10K lbs. Axle Qty	y. Cargo Body Vehicle Use			
	GCW	10,001 - 26K lbs.	Interstate Commerce			
(38) U.S. DOT Number NASI Report Number	Placard Number Haz. I		Infrastate Commerce			
OK			Yes Other Non-Commercial No Government			
(39) Unit Carrier Name	Address					
	11					
(40) City	State Zip GvW	Q 0 - 10K lbs. Axle Qty				
	Gow	10,001 - 26K lbs.	Interstate Commerce			
(41) U.S. DOT Number NASI Report Number	Placard Number Haz.		z. Mat. Release Other Non-Commercial			
[OK		homos	Yes Other Non-Commercial			
Position in Vehicle	Vohiale Configuration		D. I. T			
Position in vehicle	Vehicle Configuration	I v 🔺	go Body Type			
(55) (53) (53)	Andrea damps 1	00. N/A				
(1)(12(13)	07. School Bus 13. Bus/Large Van 9-15 occupants M	arm achinery	06. Intermodal 11. Hopper (grain/			
(21)(22)(23) (21)(22)(23) (55) (01) Passenger Veh2 Dr	including driver	01. Bus 9-15 seats	chips/gravel)			
02. Passenger	08. Truck/Trailer		T 00			
(1) (2) (3) Passenger	14. Bus 16+ 19. AT	· · · · · · · · · · · · · · · · · · ·	07. Dump Truck/			
5) or 52 2 Ven. Conv.	09. Truck-Tractor occupants including driver (Bobtail)	02. Bus 16+ seats	Trailer 12. Pole Trailer			
(5) (5) (5)	(BODICAII)	JV				
04. Pickup	10 Truck-Tractor/	03 1/25 /	T 00			
	10. Truck-Tractor/ Semi-Trailer 15. Motorcycle	Enclosed Box /	08. Concrete Mixer 13. Log Trailer			
00. Not Applicable 18. Front Row - Other		Stock Trailer				
28. Second Row - Other O5. Single Unit Truck, 2 axles	11. Truck-Tractor/	an 10,000				
48. Fourth Row - Other 50. Sleeper Section of Truck	Moped Cla	assify 04 Cargo Tank	9. Auto Transporter 14. Vehicle Towing Vehicle			
Cab Cab		n 10,000 . or Less	venicie			
See manual for additional 96. Single Unit Truck, 3+ axles	12. Truck-Tractor/ 24. Ot	ner	15. Other			
Truck, 54 axies	17. Motor Home 99. Un		0. Garbage/Refuse 99. Unknown			
		01/1	WIND HIMMAN, KEWALIUL			

Case Number 2015-00	0326866	OFFICIAL OKL	AHOMA TRAFFIC	CCOLLISION REPORT Pg 3 of 4
Unit	Total Lanes Legal Actions Pric	Pedestrian / Pedalcyclist Only or Location at Time Safety Unit Nuit of Collision Equip. Vehicle		nor near a construction, maintenance or utility Yes Inche? (If yes, complete this section)
This unit will correspond to 'Unit 1'	01 25		Type of Wor	1
This unit will correspond to 'Unit 2'	01 25		1 Lane Closure 2 Lane Shift/Crossov	
Light	1 What Unit 1 Unit 2	Underride/	3 Work on Shoulder of 4 Intermittent or Moving 9 Unknown	
1 Daylight 2 Dark-Not Lighted	Was Going 11 12	Override 0 Not Applicable		5 Termination Area 9 Unknown
3 Dark-Lighted 4 Dawn	00 Not Applicable 01 Go Ahead	1 No Underride or Override 2 Underride, Compartment	Work	ers Present Yes No Unknown
5 Dusk 6 Dark-Unknown Lighting	02 Turn Left 03 Turn Right 04 Make "U" Turn	Intrusion 3 Underride, No	Trafficway Unit 1 Unit 2	Unsare / Unlawful
7 Other 9 Unknown	05 Stop 06 Slow for Cause	Compartment Intrusion 4 Underride, Compartment Intrusion Unknown	0 Not Applicable	FAILED TO YIELD 49 Tires
Weather 01	07 Start from Park/Stop 08 Change Lanes	5 Override, Motor Vehicle in Transport	1 One Way 2 Two-Way - Not Divided 3 Two-Way - Divided	01 From Stop Sign 50 Suspension 02 From Yield Sign 51 Headlights 03 Private Drive 52 Tail Lights
01 Clear	09 Overtake 10 Pass 11 Back	6 Override, Other Motor Vehicle 9 Unknown	4 Two-Way - Divided - Positive Median Barrier	03 Private Drive 52 Tail Lights 04 County Road at 53 Stop Lights Through Highway 54 Wheel
02 Fog/Smog/Smoke 03 Cloudy 04 Rain	12 Remain Stopped 13 Remain Parked	Traffic Unit 1 Unit 2	5 Turn Lane 6 Ramp / Loop	05 From Signal Light 55 Exhaust System 06 From Alley 56 Windshield Wipers 07 To Pedestrian 57 Other Mechanical Defects
05 Snow 06 Sleet/Hail (Freezing	14 Enter/Merge in Traffic 15 Negotiate a Curve 16 Park	Control 00 00	7 Driveway 8 Alley / Parking Lot 9 Unknown	07 To Pedestrian 57 Other Mechanical Defects 08 To Vehicle on Right 09 To Vehicle in 58 In Meeting
Rain/Drizzle) 07 Severe Crosswind	17 Other 99 Unknown	01 Stop Sign 02 Traffic Signal	Vehicle Unit 1 Unit 2	Intersection 59 No Passing Zone (Unmarked) 10 To Emergency Vehicles 61 Other
08 Blowing Snow 09 Blowing Sand, Soil, Dirt	What Unit 1 Unit 2 Vehicle Did 11 12	03 Flashing Traffic Signal 04 School Zone Signs 05 Yield Sign	Removal 4 4	12 Other IMPROPER OVERTAKING FOLLOWED TOO 62 In Marked Zone
10 Other 99 Unknown	00 Not Applicable	06 Warning Sign 07 Railroad Advance	0 Not Applicable 1 Towed Due to	CLOSELY 13 Human Element 14 Traffic Condition 63 On Hill/Curve 64 At Intersection 65 Without Sufficient Clearance
Locality 2	01 Went Ahead 02 Turned Left 03 Turned Right	Warning Sign 08 Railroad Cross Bucks	Vehicle Damage 2 Towed For Reasons Other Than Damage	15 Weather Condition 66 Other UNSAFE SPEED IMPROPER PARKING
1 Residential 2 Business	04 Entered "U" Turn 05 Stopped	09 Railroad Gates 10 Railroad Signal 11 No Passing Zone	3 Remained at Scene 4 Driven from Scene 9 Unknown	16 Driver's Ability (Aged) 67 On Roadway 17 Inexperienced Driver - 68 Where Prohibited Young 69 Other
3 Industrial 4 School	06 Slowed 07 Started From Park/Stop 08 Entered Other Lane	12 Person (including flagger, law enforcement, crossing	9 Unknown Unit 1 Unit 2	18 Exceeding Legal Limit INATTENTION 19 For Traffic Conditions 70 Distracted by Passenger in
5 Not Built-up 6 Mixed Use 7 Other	09 Overtaking 10 Passing	guard, etc.) 13 Abnormal Control 14 Other	Vehicle Condition 01 01	20 For Type of Roadway Vehicle (Gravel, Dirt, etc.) 71 Other Distraction Inside 21 For Ice or Snow on Vehicle
9 Unknown	11 Backed 12 Remained Stopped 13 Remained Parked	99 Unknown	00 Not Applicable 01 Apparently Normal	Roadway 72 Distraction From Outside 22 Rain or Wet Roadway Vehicle
Type of Intersection 0	14 Entered/Merged 15 Departed Rdwy-Right	Road Unit 1 Unit 2 Surface 04	02 Brakes 03 Headlights	23 Wind
0 Not an Intersection 2 Y-Intersection 3 T-Intersection	16 Departed Rdwy-Left 17 Swerved Right	Conditions 01 01	04 Steering 05 Tail Lights 06 Brake Lights	25 Vehicle Condition 75 On Exit Ramp 76 On Entrance Ramp
4 Four-Way Intersection	18 Swerved Left 19 Parked 20 Other	02 Wet 03 Ice/Frost	07 Tires/Wheels 08 Suspension	27 On Curve/Turm
5 Five-Point or More 6 Intersection as Part of Interchange	99 Unknown Visibility Unit 1 Unit 2	04 Snow 05 Mud, Dirt, Gravel 06 Slush	09 Signal lights 10 Windows	IMPROPER TURN 79 Other 30 From Wrong Lane 80 ALCOHOL-DUI/DWI
7 Traffic Circle 8 Roundabout	Visibility Unit 1 Unit 2 Obscured by 15 00	07 Water (standing, moving) 08 Sand	11 Truck Coupling/Trailer Hitch/Safety Chains 12 Mirrors 15 Other	31 From Direct Course 81 DRUG-DUI 32 Right OTHER IMPROPER ACT/ MOVEMENT
9 Unknown	00 Not Applicable 01 Trees	09 Oil 10 Other 99 Unknown	13 Wipers 99 Unknown 14 Power Train	34 Turn About/U-Turn 82 Failed to Signal 85 To Enter Private Drive 83 Disregarded Warning Signal
Incident Type 00 00 Not an Incident	02 Embankment 03 Building	Road Character	Special Unit 1 Unit 2	36 In Front of Oncoming 84 Improper Use of Lane 85 Improper Backing 37 Other 86 Apparently Sleepy
51 Private Property 52 Deliberate Intent	04 Signs 05 Parked Vehicles 06 High Weeds	Grade Unit 1 Unit 2	of Vehicle 00 00	38 CHANGED LANES 87 Failed to Secure Load UNSAFELY 88 Other/Unknown
53 Medical Condition 54 Legal Intervention 55 Suicide	07 Fences 08 Shrubbery	2 Hillcrest 1 1 1 3 Uphill	01 School Bus 02 Transit Bus	39 STOPPED IN
57 Drowning 58 Other	09 Ice, Snow or Frost on Windows 10 Smoke	4 Downhill 5 Sag (bottom)	03 Intercity Bus 04 Charter Bus 05 Other Bus	40 For Stop Sign 91 Domestic Animal in Rdwy 41 For Traffic Signal 92 Avoiding Other Vehicle
Location of First Harmful 01	11 Fog 12 Dust	Road Unit 1 Unit 2	06 Military 07 OHP	42 For School Bus 93 Avoiding Pedestrian 43 For Railroad Gates/ 94 Object/Debris in Roadway Signal 95 Defect in Roadway
Event 01 On Roadway	13 Rain 14 Sun	1 Straight 1 1 2 Curve - Left	08 Other Police 09 Other Law Enforcement 10 Ambulance	44 For Officer/Flagman 96 Abnormal Traffic Control 45 At Sidewalk/Stopline 97 Improper Bicyclist Action
02 Shoulder 03 Median	15 Other 99 Unknown	3 Curve - Right	11 Fire Truck 12 Public Owned Vehicle	46 Other 98 NO IMPROPER ACTION BY UNSAFE VEHICLE DRIVER 99 PEDESTRIAN ACTION
04 Roadside 05 Gore 06 Separator	Driver Unit 1 Unit 2 Distracted by 0 0	Road Unit 1 Unit 2 Surface 7 Type 2 2 2	13 Highway Equipment 14 Special Mobilized Machine 15 Other 99 Unknown	48 Steering Point of First Unit 1 Unit 2 12 1
07 Parking Lane/Zone 08 Off Roadway,	0 Not Applicable/None	1 Concrete	Emergency Unit 1 Unit 2	Contact on Vehicle 06 12 19
Location Unknown 09 Outside Right-of Way	Electronic Communication Devices Other Electronic Device	2 Asphalt 3 Gravel 4 Dirt	Vehicle Responding to an Emergency	Most Damaged Of 12
10 Other 99 Unknown	Other Inside Vehicle Other Outside Vehicle	5 Brick 6 Other	0 N/A 2 No 1 Yes 9 Unknown	00 Not Applicable 14 Undercarriage
	9 Unknown	9 Unknown		13 Top 99 Unknown 7 6 5 S OPS: 0192-03 REV 0107 OF 4 Collision Report 2015-00326866 Page 3 OF 4

. . .

Case Number	2015-00326866								-			
Latitude		Longitude		Railroad Crossing Number	Roadwa	y Orientat	tion		Pg	_4	of _	4
		N	W		Unit Number	01	NE SW	N	Unit Number	02	N E S W	w





Remarks

On said date and time I was dispatched to a non-injury accident in the alleyway directly north of 111 North Peters Ave. I arrived on scene and contacted the driver of U1. U1 driver stated that he was driving a City of Norman sanitation truck and was dumping the dumpsters in the alleyway. Due to overhead powerline U1 driver stated that he had to pull forward to clear the power lines to be able to dump the dumpster. After dumping the dumpster U1 driver stated that he checked his mirrors and saw a silver truck in his mirrors. U1 driver then began to back up down the alleyway to replace the dumpster and contacted the front of U2. U1 driver stated that he could not see U2 due to them being directly behind him. U2 stated that he was traveling down the alleyway and saw U1 pull forward and followed U1. U2 driver stated that he then saw U1 begin to back up and attempted to back up to avoid contact but was struck by U1 in the front of U2.

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

