

DO NOT WRITE IN THIS SPACE

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

Incident Report

Investigation Completed

Investigation Made at Scene

Photographs

Y	N		
X			
Y	N		
X		Revised	X
X		Fatality	X
X		Hit and Run	X

(1) Reporting Agency NORMAN POLICE DEPARTMENT		Case Number (Agency Use) 2019-00011782		Motor Vehicles Involved 02	Number Injured 00	Number Killed 00																																																																																																														
(2) Date of Collision (mm/dd/yyyy) 02/22/2019		Time 0127	County Number and Name 14 CLEVELAND	Nearest City or Town Number and Name In <input checked="" 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		Control #	Int ID	Location	East Grid	North Grid																																																																																																														
(4) Street, Road or Highway PRIVATE PROPERTY		Distance from	(Nearest) Intersecting Street, Road or Highway 1333 E LINDSEY ST																																																																																																																	
(5) Unit 01	Occupants Type 01 D	Hit & Run CMV	Last Name AVERITT	First CORY	Middle	Suffix																																																																																																														
(6) Address 1711 BEAUMONT DR		City NORMAN	State OK	Zip 73071	Telephone (Use Area Code) 3165736068																																																																																																															
(7) Driver License Number		State OK	Class D	Endorsement(s)	Restriction(s)	Inj. Sev. 1																																																																																																														
(8) Ejected 1		Extricated 1	Test 5	(% BAC) 0	Transported by	To Medical Facility																																																																																																														
(9) VIN 1 7		Vehicle Year 2008	Color RED	2nd Color 0	Make PONT	Model G6																																																																																																														
(10) Insurance Company Name STATE FARM INS		Policy Number	Insurance Telephone (Use Area Code) 8007828332																																																																																																																	
(11) Vehicle Removed by Driver <input checked="" type="checkbox"/>		Owner's Last Name	First	Middle	Suffix																																																																																																															
(12) Owner's Address		City	State	Zip	Towed Veh. Type																																																																																																															
(13) Citation Number		Statute/Ordinance Number	Citation Number	Statute/Ordinance Number	Oversized Load <input type="checkbox"/> 00																																																																																																															
(14) Unit 02		Occupants Type 01 D	Hit & Run CMV	Last Name STEVENSON	First DAVID	Middle																																																																																																														
(15) Address 201 W GRAY ST B		City NORMAN	State OK	Zip 73069	Telephone (Use Area Code) 4053211600																																																																																																															
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(23) Investigating Officer OESTERLING		Badge Number 0910	Trp/Div. Assigned	Trp/Div. Location	Reviewer (Init.) JF	Reviewer Badge Number 109239																																																																																																														
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WARNING - STATE LAW

Use of contents for commercial solicitation is unlawful

(24) Unit	Injured Witness	Passenger Prop. Owner	Pos in Veh.	Last Name	First	Middle	Suffix	DOB (mm/dd/yyyy)	Sex
00	X		00	MCDONOUGH	JACOB	F		t	M
(25)	Address			City	State	Zip	Telephone (Use Area Code)		
Same as Driver	201 W GRAY ST B			NORMAN	OK	73069	4053211600		
(26) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type		
(27) Unit	Injured Witness	Passenger Prop. Owner	Pos in Veh.	Last Name	First	Middle	Suffix	DOB (mm/dd/yyyy)	Sex
(28)	Address			City	State	Zip	Telephone (Use Area Code)		
Same as Driver									
(29) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type		
(30) Unit	Injured Witness	Passenger Prop. Owner	Pos in Veh.	Last Name	First	Middle	Suffix	DOB (mm/dd/yyyy)	Sex
(31)	Address			City	State	Zip	Telephone (Use Area Code)		
Same as Driver									
(32) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type		
(33) Unit	Injured Witness	Passenger Prop. Owner	Pos in Veh.	Last Name	First	Middle	Suffix	DOB (mm/dd/yyyy)	Sex
(34)	Address			City	State	Zip	Telephone (Use Area Code)		
Same as Driver									
(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	
(38) U.S. DOT Number	NASI Report Number	Placard Number	
	OK		
(39) Unit	Carrier Name	Address	
(40) City	State	Zip	
(41) U.S. DOT Number	NASI Report Number	Placard Number	
	OK		

Position in Vehicle	Vehicle Configuration	Cargo Body Type
	00. N/A 	00. N/A
	01. Passenger Veh.-2 Dr. 	01. Bus 9-15 seats
	02. Passenger Veh.-4 Dr. 	02. Bus 16+ seats
	03. Passenger Veh. Conv. 	03. Van / Enclosed Box / Stock Trailer
	04. Pickup 	04. Cargo Tank
	05. Single Unit Truck, 2 axles 	05. Flatbed
	06. Single Unit Truck, 3+ axles 	06. Intermodal
	07. School Bus 	07. Dump Truck/Trailer
	08. Truck/Trailer 	08. Concrete Mixer
	09. Truck-Tractor (Bobtail) 	09. Auto Transporter
	10. Truck-Tractor/Semi-Trailer 	10. Garbage/Refuse
	11. Truck-Tractor/Double 	11. Hopper (grain/chips/gravel)
	12. Truck-Tractor/Triple 	12. Pole Trailer
	13. Bus/Large Van 9-15 occupants including driver 	13. Log Trailer
	14. Bus 16+ occupants including driver 	14. Vehicle Towing Vehicle
	15. Motorcycle 	15. Other
	16. Motor Scooter/Moped 	16. Motor Home
	17. Motor Home 	17. Motor Home
	18. Farm Machinery 	18. Farm Machinery
	19. ATV 	19. ATV
	20. SUV 	20. SUV
	21. Passenger Van 	21. Passenger Van
	22. Truck more than 10,000 lbs., Cannot Classify 	22. Truck more than 10,000 lbs., Cannot Classify
	23. Truck 10,000 lbs. or Less 	23. Truck 10,000 lbs. or Less
	24. Other 	24. Other
	25. Unknown 	25. Unknown



Unit				Total Lanes in Roadway		Legal Speed		Actions Prior to Collision		Pedestrian / Pedalcyclist Only		Location at Time of Collision		Safety Equip.		Unit Number of Vehicle Striking	
This unit will correspond to 'Unit 1'				01		00		00									
This unit will correspond to 'Unit 2'				02		00		00									

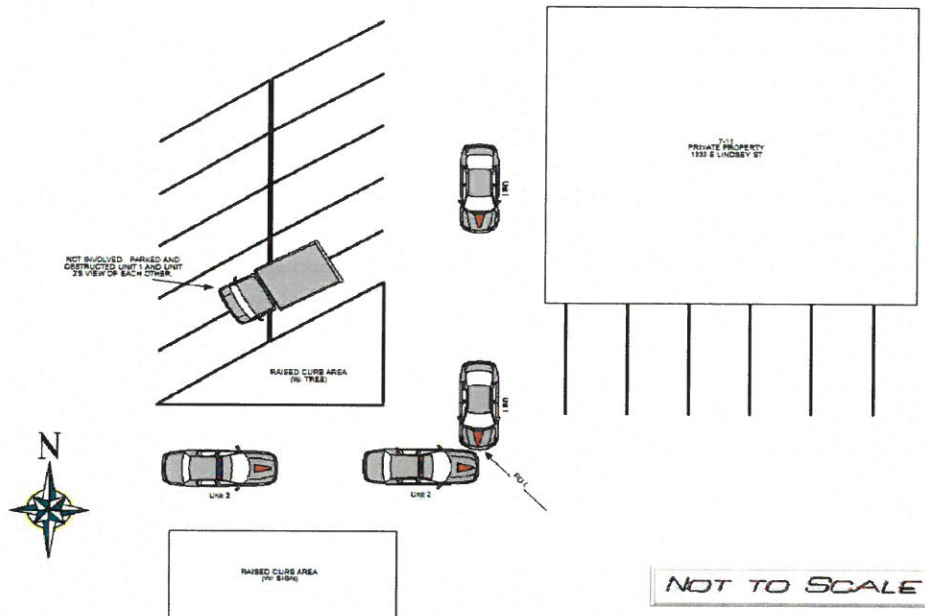
Light 1 Daylight 2 Dark-Not Lighted 3 Dark-Lighted 4 Dawn 5 Dusk 6 Dark-Unknown 7 Lighting 8 Other 9 Unknown		3	What Vehicle Was Going to Do Unit 1: 01 Unit 2: 01		Underride/Override Unit 1: Unit 2:	
Weather 01 Clear 02 Fog/Smog/Smoke 03 Cloudy 04 Rain 05 Snow 06 Sleet/Hail (Freezing Rain/Drizzle) 07 Severe Crosswind 08 Blowing Snow 09 Blowing Sand, Soil, Dirt 10 Other 99 Unknown		01	What Vehicle Did Unit 1: 01 Unit 2: 01		Traffic Control Unit 1: 00 Unit 2: 00	
Locality 1 Residential 2 Business 3 Industrial 4 School 5 Not Built-up 6 Mixed Use 7 Other 9 Unknown		2	What Vehicle Did Unit 1: 01 Unit 2: 01		Road Surface Conditions Unit 1: 02 Unit 2: 02	
Type of Intersection 0 Not an Intersection 1 Y-Intersection 2 T-Intersection 3 Four-Way Intersection 4 Five-Point or More Intersection as Part of Interchange 5 Traffic Circle 6 Roundabout 9 Unknown		0	Visibility Obscured by Unit 1: 05 Unit 2: 05		Road Character Grade Unit 1: 1 Unit 2: 1 Alignment Unit 1: 0 Unit 2: 0	
Incident Type 00 Not an Incident 01 Private Property 02 Deliberate Intent 03 Medical Condition 04 Legal Intervention 05 Suicide 06 Drowning 07 Other		51	Driver Distracted by Unit 1: 0 Unit 2: 0		Road Surface Type Unit 1: 2 Unit 2: 2	
Location of First Harmful Event 01 On Roadway 02 Shoulder 03 Median 04 Roadside 05 Gore 06 Separator 07 Parking Lane/Zone 08 Off Roadway, Location Unknown 09 Outside Right-of-Way 10 Other 99 Unknown		10	Driver Distracted by Unit 1: 0 Unit 2: 0		Road Surface Type Unit 1: 2 Unit 2: 2	

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"/>	
Type of Work Zone 1 Lane Closure 2 Lane Shift/Crossover 3 Work on Shoulder or Median 4 Intermittent or Moving Work 9 Unknown	Location of the Work Zone Collision 1 Before the First Work Zone Warning Sign 2 Advance Warning Area 3 Transition Area 4 Activity Area 5 Termination Area 9 Unknown
Workers Present Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>	

Trafficway Unit 1: 8 Unit 2: 8 0 Not Applicable 1 One Way 2 Two-Way - Not Divided 3 Two-Way - Divided 4 Two-Way - Divided - Positive Median Barrier 5 Turn Lane 6 Ramp / Loop 7 Driveway 8 Alley / Parking Lot 9 Unknown	Unsafe / Unlawful Contributing Factors Unit 1: 00 Unit 2: 00 FAILED TO YIELD 01 From Stop Sign 02 From Yield Sign 03 Private Drive 04 County Road at Through Highway 05 From Signal Light 06 From Alley 07 To Pedestrian 08 To Vehicle on Right 09 To Vehicle in Intersection 10 To Emergency Vehicles 12 Other FOLLOWED TOO CLOSELY 13 Human Element 14 Traffic Condition 15 Weather Condition UNSAFE SPEED 16 Driver's Ability (Aged) 17 Inexperienced Driver - Young 18 Exceeding Legal Limit 19 For Traffic Conditions 20 For Type of Roadway (Gravel, Dirt, etc.) 21 For Ice or Snow on Roadway 22 Rain or Wet Roadway 23 Wind 24 Other Weather Conditions 25 Vehicle Condition 26 View Obstruction 27 On Curve/Turn 28 Impeding Traffic 29 Other IMPROPER TURN 30 From Wrong Lane 31 From Direct Course 32 Right 33 Left 34 Turn About/U-Turn 35 To Enter Private Drive 36 In Front of Oncoming Traffic 37 Other CHANGED LANES UNSAFELY 38 STOPPED IN TRAFFIC LANE FAILED TO STOP 40 For Stop Sign 41 For Traffic Signal 42 For School Bus 43 For Railroad Gates/Signal 44 For Officer/Flagman 45 At Sidewalk/Stopline 46 Other UNSAFE VEHICLE 47 Brakes 48 Steering
Vehicle Removal Unit 1: 4 Unit 2: 4 0 Not Applicable 1 Towed Due to Vehicle Damage 2 Towed For Reasons Other Than Damage 3 Remained at Scene 4 Driven from Scene 9 Unknown	Vehicle Condition Unit 1: 01 Unit 2: 01 00 Not Applicable 01 Apparently Normal 02 Brakes 03 Headlights 04 Steering 05 Tail Lights 06 Brake Lights 07 Tires/Wheels 08 Suspension 09 Signal lights 10 Windows 11 Truck Coupling/Trailer Hitch/Safety Chains 12 Mirrors 13 Wipers 14 Power Train
Special Function of Vehicle Unit 1: 00 Unit 2: 08 00 Not Applicable 01 School Bus 02 Transit Bus 03 Intercity Bus 04 Charter Bus 05 Other Bus 06 Military 07 OHP 08 Other Police 09 Other Law Enforcement 10 Ambulance 11 Fire Truck 12 Public Owned Vehicle 13 Highway Equipment 14 Special Mobilized Machine 15 Other	Emergency Vehicle Responding to an Emergency Unit 1: 0 Unit 2: 2 0 N/A 1 Yes 2 No 9 Unknown

Point of First Contact on Vehicle Unit 1: 01 Unit 2: 11 Most Damaged Area Unit 1: 01 Unit 2: 11	00 Not Applicable 13 Top 14 Undercarriage 99 Unknown
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Latitude		Longitude		Railroad Crossing Number		Roadway Orientation	Unit Number	01	NE	SW	0	Unit Number	02	NE	SW	0
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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
Unit	First Event	Second Event	Third Event	Fourth Event	Most Harmful Event	
02	34	00	00	00	34	

00 Not Applicable	21 Fell/Jumped From Motor Vehicle
10 Overtum/Rollover	22 Thrown Or Falling Object
11 Fire/Explosion	23 Other Non-Collision
12 Immersion	PERSON, MOTOR VEHICLE, OR NON-FIXED OBJECT:
13 Jackknife	30 Pedestrian
14 Cargo/Equipment Loss or Shift	31 Pedal Cycle
15 Equipment Failure (Blown Tire, Brake Failure, etc.)	32 Railway Vehicle (train, engine)
16 Separation of Units	33 Animal
17 Departed Road Right	34 Motor Vehicle in Transport
18 Departed Road Left	35 Parked Motor Vehicle
19 Cross Median/Centerline	36 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle
20 Downhill Runaway	

- | | |
|-------------------------------------|-----------------------------------|
| 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

UNIT 1 WAS TRAVELING SB THROUGH THE PARKING LOT AT 1333 E LINDSEY ST.

UNIT 2 WAS TRAVELING EB THROUGH THE PARKING LOT JUST WEST AND SOUTH OF UNIT 1.

THERE WAS A RENT-A-CENTER BOX TRUCK PARKED BLOCKING BOTH UNIT 1 AND UNIT 2'S VIEWS OF EACH OTHER.

UNIT 1'S FRONT PASSENGER'S SIDE BUMPER STRUCK UNIT 2'S FRONT DRIVER'S SIDE BUMPER.

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

