

DO NOT WRITE IN THIS SPACE

Incident Report

Investigation Completed	<input checked="" type="checkbox"/>	Revised	<input 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 <b>NORMAN POLICE DEPARTMENT</b>	Case Number (Agency Use) <b>2017-00077698</b>	Motor Vehicles Involved <b>02</b>	Number Injured <b>00</b>	Number Killed <b>00</b>
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(2) Date of Collision (mm/dd/yyyy) <b>10192017</b>	Time <b>1130</b>	County Number and Name <b>14 CLEVELAND</b>	Nearest City or Town Number and Name <b>NORMAN</b>
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(3) Distance from Nearest City or Town Limits Mi <input type="checkbox"/> Ft <input type="checkbox"/>	Control #	Int ID	Location	East Grid	North Grid	Administrative
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(4) Street, Road or Highway <b>SHERWOOD DR</b>	Distance from (Nearest) Intersecting Street, Road or Highway <b>0045</b>	At <b>CRESTON WAY</b>
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(5) Unit <b>01</b>	Occupants <b>00</b>	Type <b>D</b>	Hit & Run <input type="checkbox"/>	CMV <input type="checkbox"/>	Last Name <b>JOHNSON</b>	First <b>DYLAN</b>	Middle	Suffix	Date of Birth (mm/dd/yyyy)	Sex <b>M</b>
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(6) Address <b>629 SHERWOOD AVE</b>	City <b>NORMAN</b>	State <b>OK</b>	Zip <b>73071</b>	Telephone (Use Area Code) <b>4053010031</b>
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(7) Driver License Number	State <b>OK</b>	Class <b>D</b>	Endorsement(s)	Restriction(s)	Inj. Sev. <b>0</b>	Type of Injury <b>0</b>	Drv./Ped. Cond. <b>00</b>	OP Use <b>00</b>
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(8) Ejected <input type="checkbox"/>	Extricated <input type="checkbox"/>	Test <input type="checkbox"/>	(% BAC) <b>0.05</b>	Transported by	To Medical Facility	License Plate Number	State <b>OK</b>	Month <b>1</b>	Year <b>2018</b>
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(9) VIN	Vehicle Year <b>1991</b>	Color <b>WHI</b>	2nd Color <b>0</b>	Make <b>GMC</b>	Model	Veh. Conf. <b>21</b>	Extent of Damage <b>3</b>
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(10) Insurance Company Name <b>PROGRESSIVE</b>	Policy Number	Insurance Telephone (Use Area Code) <b>(800) 776-4737</b>
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(11) Vehicle Removed by <b>LEFT AT SCENE</b>	Owner's Last Name	First	Middle	Suffix
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(12) Owner's Address	City	State	Zip	Towed Veh. Type Oversized Load <input type="checkbox"/> <b>00</b> Rolled <input type="checkbox"/> <b>00</b> Burned <input type="checkbox"/>	Phone present <input type="checkbox"/>	Phone in use <input type="checkbox"/>
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(13) Citation Number	Statute/Ordinance Number	Citation Number	Statute/Ordinance Number
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(14) Unit <b>02</b>	Occupants <b>01</b>	Type <b>D</b>	Hit & Run <input type="checkbox"/>	CMV <input type="checkbox"/>	Last Name <b>NORWOOD</b>	First <b>TRACEY</b>	Middle	Suffix	Date of Birth (mm/dd/yyyy)	Sex <b>M</b>
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(15) Address	City	State <b>OK</b>	Zip	Telephone (Use Area Code) <b>4053211600</b>
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(16) Driver License Number	State <b>OK</b>	Class <b>B</b>	Endorsement(s)	Restriction(s)	Inj. Sev. <b>1</b>	Type of Injury <b>0</b>	Drv./Ped. Cond. <b>01</b>	OP Use <b>02</b>
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(17) Ejected <input type="checkbox"/>	Extricated <input type="checkbox"/>	Test <input type="checkbox"/>	(% BAC) <b>0.05</b>	Transported by	To Medical Facility	License Plate Number <b>CI10842</b>	State <b>OK</b>	Month <b>12</b>	Year <b>2017</b>
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(18) VIN	Vehicle Year <b>2010</b>	Color <b>GRN</b>	2nd Color <b>0</b>	Make <b>PTRB</b>	Model	Veh. Conf. <b>06</b>	Extent of Damage <b>3</b>
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(19) Insurance Company Name	Policy Number	Insurance Telephone (Use Area Code)
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(20) Vehicle Removed by <input checked="" type="checkbox"/>	Owner's Last Name <b>CITY OF NORMAN</b>	First	Middle	Suffix
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(21) Owner's Address <b>201 W GRAY ST</b>	City <b>NORMAN</b>	State <b>OK</b>	Zip <b>73069</b>	Towed Veh. Type Oversized Load <input type="checkbox"/> <b>00</b> Rolled <input type="checkbox"/> <b>00</b> Burned <input type="checkbox"/>	Phone present <input type="checkbox"/>	Phone in use <input type="checkbox"/>
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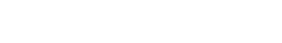
(22) Citation Number	Statute/Ordinance Number	Citation Number	Statute/Ordinance Number
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(23) Investigating Officer <b>Scott</b>	Badge Number <b>0273</b>	Trp./Div. Assigned	Trp./Div. Location	Reviewer (Init.) <b>Tuschmann</b>	Reviewer Badge Number <b>0946</b>	Date of Report (mm/dd/yyyy) <b>10192017</b>
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<b>D</b> Driver	<b>Z</b> Other Cyclist	<b>0</b> N/A	<b>4</b> Incapacitating	<b>0</b> N/A	<b>3</b> Trunk - Internal	<b>00</b> Not Applicable	<b>05</b> Under the Influence of 09 Dizzy/Faint	<b>08</b> Ill (Sick)	<b>00</b> Not Applicable	<b>05</b> Child Restraint Type Unknown	<b>10</b> Booster Seat
<b>P</b> Pedestrian	<b>C</b> Parked Car	<b>1</b> No Injury	<b>5</b> Fatal	<b>1</b> Head	<b>4</b> Arms	<b>01</b> Apparently Normal	<b>10</b> Emotional	<b>01</b> None Used	<b>06</b> Restraint Used - Type Unknown	<b>11</b> Other	<b>99</b> Unknown
<b>X</b> Pedestrian	<b>A</b> Animal	<b>2</b> Possible	<b>9</b> Unknown	<b>2</b> Trunk - External	<b>5</b> Legs	<b>02</b> Drinking - Ability Impaired	<b>06</b> Very Tired	<b>02</b> Lap Belt Only	<b>07</b> Helmet	<b>08</b> Child Restraint - Forward Facing	<b>09</b> Child Restraint - Rear Facing
<b>Conveyance</b>	<b>T</b> Train	<b>3</b> Non-Incapacitating		<b>9</b> Unknown	<b>6</b> Other	<b>03</b> Odor of Alcohol Beverage	<b>11</b> Other	<b>03</b> Shoulder Belt Only	<b>09</b> Child Restraint - Forward Facing		
<b>B</b> Bicycle					<b>3</b> Blood/Breath	<b>04</b> Illegal Drugs	<b>07</b> Sleepy	<b>04</b> Shoulder and Lap Belt			

<b>0</b> Not Applicable	<b>4</b> Deployed - Other (knee, air bell, etc.)	<b>0</b> Not Applicable	<b>3</b> Ejected, Totally	<b>0</b> N/A	<b>0</b> N/A	<b>4</b> Test Refused	<b>0</b> N/A	<b>3</b> Functional	<b>0</b> N/A	<b>3</b> Operator	<b>0</b> N/A	<b>00</b> N/A	<b>05</b> Another Vehicle	<b>09</b> Stock Trailer
<b>1</b> Not Deployed		<b>1</b> Not Ejected	<b>9</b> Unknown	<b>1</b> No	<b>1</b> Blood	<b>5</b> None Given	<b>1</b> None	<b>4</b> Disabling	<b>1</b> No	<b>4</b> Exempt	<b>N</b> Not Permitted	<b>00</b> N/A	<b>01</b> Boat Trailer	<b>06</b> Utility Trailer
<b>2</b> Deployed - Front	<b>5</b> Deployed - Combination	<b>2</b> Ejected, Partially		<b>2</b> Yes	<b>2</b> Breath	<b>6</b> Other	<b>2</b> Minor	<b>9</b> Unknown	<b>2</b> Owner		<b>P</b> Permitted	<b>02</b> House Trailer	<b>07</b> Homemade	<b>10</b> Camping Trailer
<b>3</b> Deployed - Side	<b>9</b> Deployment Unknown											<b>03</b> Farm Trailer	<b>11</b> Combination	<b>12</b> Other
												<b>04</b> Horse Trailer	<b>08</b> Box Trailer	<b>99</b> Unknown

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



(24) Unit	Injured <input type="checkbox"/>	Passenger <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
(25) Address	City		State		Zip		Telephone (Use Area Code)		
(26) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility		Property Type	
(27) Unit	Injured <input type="checkbox"/>	Passenger <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB (mm/dd/yyyy)	Sex
(28) Address	City		State		Zip		Telephone (Use Area Code)		
(29) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility		Property Type	
(30) Unit	Injured <input type="checkbox"/>	Passenger <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"/>	Passenger <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	
(38) U.S. DOT Number	NASI Report Number	Placard Number	Haz. Mat. Class
	OK		
(39) Unit	Carrier Name	Address	
(40) City	State	Zip	
(41) U.S. DOT Number	NASI Report Number	Placard Number	Haz. Mat. Class
	OK		

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

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

Light
1 Daylight
2 Dark-Not Lighted
3 Dark-Lighted
4 Dawn
5 Dusk
6 Dark-Unknown
7 Lighting
8 Other
9 Unknown

What Vehicle Was Going to Do
00 Not Applicable
01 Go Ahead
02 Turn Left
03 Turn Right
04 Make "U" Turn
05 Stop
06 Slow for Cause
07 Start from Park/Stop
08 Change Lanes
09 Overtake
10 Pass
11 Back
12 Remain Stopped
13 Remain Parked
14 Enter/Merge in Traffic
15 Negotiate a Curve
16 Park
17 Other
99 Unknown

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

Underdrive/Override
0 Not Applicable
1 No Underdrive or Override
2 Underdrive, Compartment Intrusion
3 Underdrive, No Compartment Intrusion
4 Underdrive, Compartment Intrusion Unknown
5 Override, Motor Vehicle in Transport
6 Override, Other Motor Vehicle
9 Unknown

Trafficway
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
98 73
FAILED TO YIELD
49 Tires
50 Suspension
51 Headlights
52 Tail Lights
53 Stop Lights
54 Wheel
55 Exhaust System
56 Windshield Wipers
57 Other Mechanical Defects
LEFT OF CENTER
58 In Meeting
59 No Passing Zone (Unmarked)
60 Marked Zone
61 Other
IMPROPER OVERTAKING FOLLOWED TOO CLOSELY
62 In Marked Zone
63 On Hill/Curve
64 At Intersection
65 Without Sufficient Clearance
66 Other
IMPROPER PARKING
67 On Roadway
68 Where Prohibited
69 Other
INATTENTION
70 Distracted by Passenger in Vehicle
71 Other Distraction Inside Vehicle
72 Distraction From Outside Vehicle
73 Other
WRONG WAY
74 On One Way
75 On Exit Ramp
76 On Entrance Ramp
77 Other
IMPROPER START FROM
78 Parked Position
79 Other
80 ALCOHOL-DUI/DWI
81 DRUG-DUI
OTHER IMPROPER ACT/ MOVEMENT
82 Failed to Signal
83 Disregarded Warning Signal
84 Improper Use of Lane
85 Improper Backing
86 Apparently Sleepy
87 Failed to Secure Load
88 Other/Unknown
UNKN/NO IMPROPER ACT
89 Deer in Roadway
90 Animal in Roadway
91 Domestic Animal in Rdwy
92 Avoiding Other Vehicle
93 Avoiding Pedestrian
94 Object/Debris in Roadway
95 Defect in Roadway
96 Abnormal Traffic Control
97 Improper Bicyclist Action
98 NO IMPROPER ACTION BY DRIVER
99 PEDESTRIAN ACTION

Locality
1 Residential
2 Business
3 Industrial
4 School
5 Not Built-up
6 Mixed Use
7 Other
9 Unknown

Traffic Control
00 No Control
01 Stop Sign
02 Traffic Signal
03 Flashing Traffic Signal
04 School Zone Signs
05 Yield Sign
06 Warning Sign
07 Railroad Advance Warning Sign
08 Railroad Cross Bucks
09 Railroad Gates
10 Railroad Signal
11 No Passing Zone
12 Person (including flagger, law enforcement, crossing guard, etc.)
13 Abnormal Control
14 Other
99 Unknown

Vehicle Removal
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
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
15 Other
13 Wipers
99 Unknown
14 Power Train

Type of Intersection
0 Not an Intersection
2 Y-Intersection
3 T-Intersection
4 Four-Way Intersection
5 Five-Point or More Intersection as Part of Interchange
7 Traffic Circle
8 Roundabout
9 Unknown

Road Surface Conditions
01 Dry
02 Wet
03 Ice/Frost
04 Snow
05 Mud, Dirt, Gravel
06 Slush
07 Water (standing, moving)
08 Sand
09 Oil
10 Other
99 Unknown

Special Function of Vehicle
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

Point of First Contact on Vehicle
07 04
Most Damaged Area
07 04
00 Not Applicable
13 Top
14 Undercarriage
99 Unknown

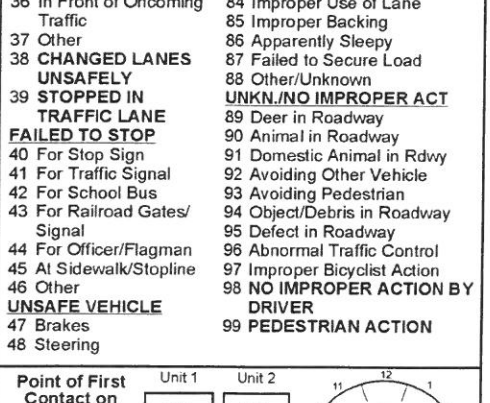
Visibility Obscured by
00 Not Applicable
01 Trees
02 Embankment
03 Building
04 Signs
05 Parked Vehicles
06 High Weeds
07 Fences
08 Shrubbery
09 Ice, Snow or Frost on Windows
10 Smoke
11 Fog
12 Dust
13 Rain
14 Sun
15 Other
99 Unknown

Road Character
Grade
1 Level
2 Hillcrest
3 Uphill
4 Downhill
5 Sag (bottom)
Road Alignment
1 Straight
2 Curve - Left
3 Curve - Right

Driver Distracted by
0 Not Applicable/None
1 Electronic Communication Devices
2 Other Electronic Device
3 Other Inside Vehicle
4 Other Outside Vehicle
9 Unknown

Road Surface Type
1 Concrete
2 Asphalt
3 Gravel
4 Dirt
5 Brick
6 Other
9 Unknown

Emergency Vehicle Responding to an Emergency
0 N/A
1 Yes
2 No
9 Unknown

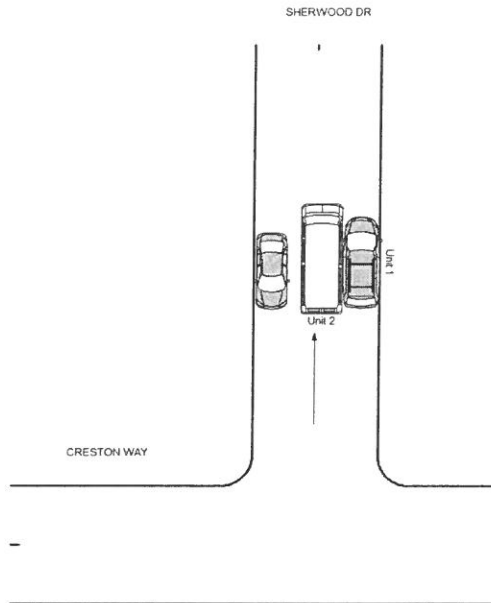


Latitude

Longitude N

Railroad Crossing Number W

Roadway Orientation Unit Number **01** 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**

V1 WAS LEGALLY PARKED. V2 WAS NB ON SHERWOOD IN A CITY OF NORMAN SANITATION TRUCK. V2 STRUCK THE LEFT REAR OF V1. V2 LEFT THE SCENE HOWEVER HE DID NOT REALIZE HE HIT THE VEHICLE. V2 DRIVER WAS LOCATED AND REPORT WAS COMPLETED. APPROXIMATE POI IS 45' N OF N CURBLINE OF CRESTON WAY AND 8' W OF E CURBLINE OF SHERWOOD.

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

