

**PUBLIC RECORD SUMMARY — NOT AN OFFICIAL REPORT**

This document recreates the Colorado DR3447 Investigator's Traffic Crash Report format using publicly available crash data. It is not a legal document. To obtain the official report, contact the investigating agency. PII fields are redacted per CRS 24-72-204.

Data Coverage: 17%

20/120 fields

**COLORADO CRASH REPORT SUMMARY**

DR3447 Format — Public Record Data — Generated by CrashStory

**PAGE A — CRASH SCENE INFORMATION**

Page 1

|                                                                                                                        |                        |                |                      |                     |                     |                                         |                                  |                   |                 |               |
|------------------------------------------------------------------------------------------------------------------------|------------------------|----------------|----------------------|---------------------|---------------------|-----------------------------------------|----------------------------------|-------------------|-----------------|---------------|
| CASE NUMBER<br>1253325                                                                                                 |                        | CRASH ID<br>-- |                      | AGENCY ORI<br>AURPD |                     | AGENCY NAME<br>Aurora Police Department |                                  | FORM VERSION<br>— |                 |               |
| DATE OF CRASH<br>11/29/2024                                                                                            | TIME OF CRASH<br>17:49 |                | OFFICER ARRIVED<br>— |                     | SCENE CLEARED<br>—  |                                         | CRASH SEVERITY<br>B — Pedestrian |                   |                 |               |
| CDOT REGION<br>—                                                                                                       | TPR<br>—               |                | DISTRICT<br>—        |                     | DATA SOURCE<br>CDOT |                                         | RECORD STATUS<br>NEW             |                   | PROCESSING<br>— |               |
| NUMBER KILLED<br>0                                                                                                     | NUMBER INJURED<br>3    |                | TOTAL VEHICLES<br>1  |                     | NON-MOTORISTS<br>0  |                                         | INJURY K<br>0                    | INJURY A<br>0     | INJURY B<br>3   | INJURY C<br>0 |
| Secondary Crash   Construction Zone   School Zone   Alcohol   Drug   Marijuana   Speed Related   Hit & Run   Juveniles |                        |                |                      |                     |                     |                                         |                                  |                   |                 |               |

**CRASH LOCATION**

|                                  |  |                         |  |                                                   |                             |                     |                      |                  |                       |
|----------------------------------|--|-------------------------|--|---------------------------------------------------|-----------------------------|---------------------|----------------------|------------------|-----------------------|
| LATITUDE<br>39.70783             |  | LONGITUDE<br>-104.81931 |  | COUNTY<br>ARAPAHOE                                |                             | CITY/TOWN<br>AURORA |                      | URBAN/RURAL<br>— |                       |
| ON ROAD / STREET<br>S SABLE BLVD |  |                         |  | INTERSECTING / REFERENCE ROAD<br>E CENTREPOINT DR |                             |                     |                      | MILEPOINT<br>—   | HIGHWAY #<br>0055     |
| ROADWAY TYPE<br>—                |  | SPEED LIMIT (MPH)<br>—  |  | TRAFFIC CONTROL<br>—                              | LOCATION<br>AT_INTERSECTION |                     | LANE POSITION<br>N02 |                  | ROAD SECTION<br>SABLE |

**HARMFUL EVENT SEQUENCE**

|                         |  |                        |  |                          |  |                        |  |
|-------------------------|--|------------------------|--|--------------------------|--|------------------------|--|
| 1ST HARMFUL EVENT<br>—  |  | 2ND HARMFUL EVENT<br>— |  | 3RD HARMFUL EVENT<br>—   |  | 4TH HARMFUL EVENT<br>— |  |
| MOST HARMFUL EVENT<br>— |  |                        |  | TOP TRAFFIC OFFENSE<br>— |  |                        |  |

**ROAD CHARACTERISTICS**

|                            |  |                           |  |                       |  |                          |  |  |  |
|----------------------------|--|---------------------------|--|-----------------------|--|--------------------------|--|--|--|
| ROAD CONTOUR (CURVES)<br>— |  | ROAD CONTOUR (GRADE)<br>— |  | ROAD DESCRIPTION<br>— |  | APPROACH/OVERTAKING<br>— |  |  |  |
| SYSTEM CODE<br>—           |  | RR CROSSING<br>—          |  | CRASH TYPE GROUP<br>— |  | COMMON CODE<br>—         |  |  |  |

**ENVIRONMENTAL CONDITIONS**

|               |  |                     |  |                        |  |                          |  |  |  |
|---------------|--|---------------------|--|------------------------|--|--------------------------|--|--|--|
| LIGHTING<br>— |  | ROAD CONDITION<br>— |  | WEATHER (PRIMARY)<br>— |  | WEATHER (SECONDARY)<br>— |  |  |  |
|---------------|--|---------------------|--|------------------------|--|--------------------------|--|--|--|

**PAGE B — NARRATIVE**

Pedestrian

## VEHICLE / OCCUPANT INFORMATION

Case: 1253325 — 11/29/2024 — S SABLE BLVD

## PAGE C — MOTORIZED TRAFFIC UNITS

## TRAFFIC UNIT #1

|                                                                                                      |                                  |                                |                          |                                    |                                 |                       |
|------------------------------------------------------------------------------------------------------|----------------------------------|--------------------------------|--------------------------|------------------------------------|---------------------------------|-----------------------|
| VEHICLE TYPE<br>PASSENGER_CAR                                                                        | YEAR<br>—                        | MAKE<br>—                      | MODEL<br>—               | COLOR<br>—                         | BODY TYPE<br>—                  | SPECIAL FUNCTION<br>— |
| VEHICLE CONDITION<br>—                                                                               | DAMAGE DESCRIPTION<br>—          | TOWED<br>No                    | TRAILERS<br>—            | PERMITTED<br>—                     |                                 |                       |
| DRIVER NAME<br>REDACTED — PII                                                                        | DRIVER ADDRESS<br>REDACTED — PII | DRIVER AGE<br>52               | DRIVER GEND...<br>FEMALE | DRIVER LICENSE #<br>REDACTED — PII | INSURANCE CO.<br>REDACTED — PII |                       |
| DIRECTION OF TRAVEL<br>EAST                                                                          | VEHICLE MOVEMENT<br>LEFT_TURN    | SPEED LIMIT (MPH)<br>35        | EST. SPEED (MPH)<br>5    | STATED SPEED<br>—                  |                                 |                       |
| DRIVER ACTION<br>—                                                                                   | DRIVER ACTION 2<br>—             | HUMAN CONTRIBUTING FACTOR<br>— |                          |                                    | AUTONOMOUS LEVEL<br>—           |                       |
| CONTRIBUTING FACTOR 1<br>—                                                                           |                                  | CONTRIBUTING FACTOR 2<br>—     |                          |                                    | CONTRIBUTING FACTOR 3<br>—      |                       |
| SAFETY EQUIP AVAILABLE<br>—                                                                          | SAFETY EQUIP USED<br>—           | SAFETY EQUIP DETAIL<br>—       |                          |                                    |                                 |                       |
| Alcohol Suspected   Marijuana Suspected   Other Drugs Suspected   DUI   Hit & Run   Emergency Lights |                                  |                                |                          |                                    |                                 |                       |