

**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: 14%

17/120 fields

**COLORADO CRASH REPORT SUMMARY**

DR3447 Format — Public Record Data — Generated by CrashStory

**PAGE A — CRASH SCENE INFORMATION**

Page 1

|                             |                        |                 |                      |                     |                    |                                         |                                 |                   |               |               |
|-----------------------------|------------------------|-----------------|----------------------|---------------------|--------------------|-----------------------------------------|---------------------------------|-------------------|---------------|---------------|
| CASE NUMBER<br>423327       |                        | CRASH ID<br>- - |                      | AGENCY ORI<br>AURPD |                    | AGENCY NAME<br>Aurora Police Department |                                 | FORM VERSION<br>— |               |               |
| DATE OF CRASH<br>01/26/2024 | TIME OF CRASH<br>14:52 |                 | OFFICER ARRIVED<br>— |                     | SCENE CLEARED<br>— |                                         | CRASH SEVERITY<br>O — Broadside |                   |               |               |
| CDOT REGION<br>—            | TPR<br>—               | DISTRICT<br>—   |                      | DATA SOURCE<br>CDOT |                    | RECORD STATUS<br>NEW                    |                                 | PROCESSING<br>—   |               |               |
| NUMBER KILLED<br>0          | NUMBER INJURED<br>0    |                 | TOTAL VEHICLES<br>2  |                     | NON-MOTORISTS<br>0 |                                         | INJURY K<br>0                   | INJURY A<br>0     | INJURY B<br>0 | INJURY C<br>0 |

Secondary Crash   Construction Zone   School Zone   Alcohol   Drug   Marijuana   Speed Related   Hit &amp; Run   Juveniles

**CRASH LOCATION**

|                                  |                         |                                              |  |                             |                     |                      |                   |                         |
|----------------------------------|-------------------------|----------------------------------------------|--|-----------------------------|---------------------|----------------------|-------------------|-------------------------|
| LATITUDE<br>39.74010             | LONGITUDE<br>-104.85409 | COUNTY<br>ARAPAHOE                           |  |                             | CITY/TOWN<br>AURORA |                      | URBAN/RURAL<br>—  |                         |
| ON ROAD / STREET<br>E COLFAX AVE |                         | INTERSECTING / REFERENCE ROAD<br>N MOLINE ST |  |                             | MILEPOINT<br>—      |                      | HIGHWAY #<br>040C |                         |
| ROADWAY TYPE<br>—                | SPEED LIMIT (MPH)<br>—  | TRAFFIC CONTROL<br>—                         |  | LOCATION<br>AT_INTERSECTION |                     | LANE POSITION<br>W01 |                   | ROAD SECTION<br>305.232 |

**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**

Broadside

## VEHICLE / OCCUPANT INFORMATION

Case: 423327 — 01/26/2024 — E COLFAX AVE

## 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>20               | DRIVER GEND...<br>MALE | DRIVER LICENSE #<br>REDACTED — PII | INSURANCE CO.<br>REDACTED — PII |                       |
| DIRECTION OF TRAVEL<br>EAST                                                                          | VEHICLE MOVEMENT<br>GOING_STRAIGHT | SPEED LIMIT (MPH)<br>35        | EST. SPEED (MPH)<br>35 | 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 |                                    |                                |                        |                                    |                                 |                       |

## TRAFFIC UNIT #2

|                                                                                                      |                                    |                                |                        |                                    |                                 |                       |
|------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------|------------------------|------------------------------------|---------------------------------|-----------------------|
| VEHICLE TYPE<br>PICKUP_TRUCK                                                                         | 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>45               | DRIVER GEND...<br>MALE | DRIVER LICENSE #<br>REDACTED — PII | INSURANCE CO.<br>REDACTED — PII |                       |
| DIRECTION OF TRAVEL<br>NORTH                                                                         | VEHICLE MOVEMENT<br>GOING_STRAIGHT | SPEED LIMIT (MPH)<br>35        | EST. SPEED (MPH)<br>35 | 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 |                                    |                                |                        |                                    |                                 |                       |