

**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>444847                                                                                                  |  | CRASH ID<br>--         |  | AGENCY ORI<br>AURPD  |  | AGENCY NAME<br>Aurora Police Department |  | FORM VERSION<br>—                    |               |                 |               |
| DATE OF CRASH<br>04/09/2024                                                                                            |  | TIME OF CRASH<br>16:04 |  | OFFICER ARRIVED<br>— |  | SCENE CLEARED<br>—                      |  | CRASH SEVERITY<br>O — SIDESWIPE SAME |               |                 |               |
| 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 & Run   Juveniles |  |                        |  |                      |  |                                         |  |                                      |               |                 |               |

**CRASH LOCATION**

|                                  |  |                         |  |                                             |  |                              |                |                      |  |
|----------------------------------|--|-------------------------|--|---------------------------------------------|--|------------------------------|----------------|----------------------|--|
| LATITUDE<br>39.74014             |  | LONGITUDE<br>-104.77814 |  | COUNTY<br>Arapahoe                          |  | CITY/TOWN<br>Aurora          |                | URBAN/RURAL<br>—     |  |
| ON ROAD / STREET<br>E COLFAX AVE |  |                         |  | INTERSECTING / REFERENCE ROAD<br>N TOWER RD |  |                              | MILEPOINT<br>— | HIGHWAY #<br>040C    |  |
| ROADWAY TYPE<br>—                |  | SPEED LIMIT (MPH)<br>—  |  | TRAFFIC CONTROL<br>—                        |  | LOCATION<br>NON_INTERSECTION |                | LANE POSITION<br>W02 |  |
| ROAD SECTION<br>309.044          |  |                         |  |                                             |  |                              |                |                      |  |

**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**

Sideswipe Same Direction

## VEHICLE / OCCUPANT INFORMATION

Case: 444847 — 04/09/2024 — 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>29                   | DRIVER GEND...<br>MALE | DRIVER LICENSE #<br>REDACTED — PII |
| INSURANCE CO.<br>REDACTED — PII                                                            |                         | DIRECTION OF TRAVEL<br>WEST      |             | VEHICLE MOVEMENT<br>CHANGING_LANES |                        | SPEED LIMIT (MPH)<br>55            |
| EST. SPEED (MPH)<br>20                                                                     |                         | 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>OTHER                                                                      | 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>36                   | DRIVER GEND...<br>FEMALE | DRIVER LICENSE #<br>REDACTED — PII |
| INSURANCE CO.<br>REDACTED — PII                                                            |                         | DIRECTION OF TRAVEL<br>WEST      |             | VEHICLE MOVEMENT<br>GOING_STRAIGHT |                          | SPEED LIMIT (MPH)<br>55            |
| EST. SPEED (MPH)<br>45                                                                     |                         | 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 |                         |                                  |             |                                    |                          |                                    |