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

CASE NUMBER	CRASH ID	AGENCY ORI	AGENCY NAME	FORM VERSION
457087	- -	BLDPD	Boulder Police Department	—

DATE OF CRASH	TIME OF CRASH	OFFICER ARRIVED	SCENE CLEARED	CRASH SEVERITY
02/05/2024	22:38	—	—	K — N/A

CDOT REGION	TPR	DISTRICT	DATA SOURCE	RECORD STATUS	PROCESSING
—	—	—	CDOT	NEW	—

NUMBER KILLED	NUMBER INJURED	TOTAL VEHICLES	NON-MOTORISTS	INJURY K	INJURY A	INJURY B	INJURY C
1	0	1	0	1	0	0	0

Secondary Crash · Construction Zone · School Zone · ■ Alcohol · Drug · Marijuana · Speed Related · Hit & Run · Juveniles

CRASH LOCATION

LATITUDE	LONGITUDE	COUNTY	CITY/TOWN	URBAN/RURAL
40.03784	-105.25369	BOULDER	BOULDER	—

ON ROAD / STREET	INTERSECTING / REFERENCE ROAD	MILEPOINT	HIGHWAY #
DIAGONAL HIGHWAY	30TH ST	—	119B

ROADWAY TYPE	SPEED LIMIT (MPH)	TRAFFIC CONTROL	LOCATION	LANE POSITION	ROAD SECTION
—	—	—	AT_INTERSECTION	W03	44.51

HARMFUL EVENT SEQUENCE

1ST HARMFUL EVENT	2ND HARMFUL EVENT	3RD HARMFUL EVENT	4TH HARMFUL EVENT
—	—	—	—

MOST HARMFUL EVENT	TOP TRAFFIC OFFENSE
—	—

ROAD CHARACTERISTICS

ROAD CONTOUR (CURVES)	ROAD CONTOUR (GRADE)	ROAD DESCRIPTION	APPROACH/OVERTAKING
—	—	—	—

SYSTEM CODE	RR CROSSING	CRASH TYPE GROUP	COMMON CODE
—	—	—	—

ENVIRONMENTAL CONDITIONS

LIGHTING	ROAD CONDITION	WEATHER (PRIMARY)	WEATHER (SECONDARY)
—	—	—	—

EMS INFORMATION (FATAL CRASH)

EMS NOTIFIED	EMS ARRIVED	ARRIVED HOSPITAL	EMS SERVICE
—	—	—	—

PAGE B — NARRATIVE

Other Fixed Object

VEHICLE / OCCUPANT INFORMATION

Case: 457087 — 02/05/2024 — DIAGONAL HIGHWAY

PAGE C — MOTORIZED TRAFFIC UNITS

TRAFFIC UNIT #1

VEHICLE TYPE	YEAR	MAKE	MODEL	COLOR	BODY TYPE	SPECIAL FUNCTION
PASSENGER_CAR	—	—	—	—	—	—

VEHICLE CONDITION	DAMAGE DESCRIPTION	TOWED	TRAILERS	PERMITTED
—	—	No	—	—

DRIVER NAME	DRIVER ADDRESS	DRIVER AGE	DRIVER GEND...	DRIVER LICENSE #	INSURANCE CO.
REDACTED — PII	REDACTED — PII	24	FEMALE	REDACTED — PII	REDACTED — PII

DIRECTION OF TRAVEL	VEHICLE MOVEMENT	SPEED LIMIT (MPH)	EST. SPEED (MPH)	STATED SPEED
NORTH	GOING_STRAIGHT	35	60	—

DRIVER ACTION	DRIVER ACTION 2	HUMAN CONTRIBUTING FACTOR	AUTONOMOUS LEVEL
—	—	—	—

CONTRIBUTING FACTOR 1	CONTRIBUTING FACTOR 2	CONTRIBUTING FACTOR 3
—	—	—

SAFETY EQUIP AVAILABLE	SAFETY EQUIP USED	SAFETY EQUIP DETAIL
—	—	—

■ **Alcohol Suspected** Marijuana Suspected Other Drugs Suspected DUI Hit & Run Emergency Lights

TESTED FOR ALCOHOL	TESTED FOR MARIJUANA	TESTED FOR OTHER DRUGS
—	—	—