

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>472229                                                                                                  |  | CRASH ID<br>--         |  | AGENCY ORI<br>AURPD  |  | AGENCY NAME<br>Aurora Police Department |  | FORM VERSION<br>—              |  |
| DATE OF CRASH<br>05/07/2024                                                                                            |  | TIME OF CRASH<br>07:46 |  | OFFICER ARRIVED<br>— |  | SCENE CLEARED<br>—                      |  | CRASH SEVERITY<br>O — Rear-End |  |
| CDOT REGION<br>—                                                                                                       |  | TPR<br>—               |  | DISTRICT<br>—        |  | DATA SOURCE<br>CDOT                     |  | RECORD STATUS<br>NEW           |  |
| 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>39.74018             |  | LONGITUDE<br>-104.80781 |  | COUNTY<br>ADAMS                                |  | CITY/TOWN<br>AURORA |  | URBAN/RURAL<br>—        |  |
| ON ROAD / STREET<br>E COLFAX AVE |  |                         |  | INTERSECTING / REFERENCE ROAD<br>N CHAMBERS RD |  |                     |  | MILEPOINT<br>—          |  |
|                                  |  |                         |  |                                                |  |                     |  | HIGHWAY #<br>040C       |  |
| ROADWAY TYPE<br>—                |  | SPEED LIMIT (MPH)<br>—  |  | TRAFFIC CONTROL<br>—                           |  | LOCATION<br>OTHER   |  | LANE POSITION<br>W01    |  |
|                                  |  |                         |  |                                                |  |                     |  | ROAD SECTION<br>306.745 |  |

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

Rear End

## VEHICLE / OCCUPANT INFORMATION

Case: 472229 — 05/07/2024 — E COLFAX AVE

## PAGE C — MOTORIZED TRAFFIC UNITS

## TRAFFIC UNIT #1

|                                                                                                      |                                    |                                |                        |                                    |                                 |                       |
|------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------|------------------------|------------------------------------|---------------------------------|-----------------------|
| VEHICLE TYPE<br>SUV                                                                                  | 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>WEST                                                                          | VEHICLE MOVEMENT<br>GOING_STRAIGHT | SPEED LIMIT (MPH)<br>35        | EST. SPEED (MPH)<br>10 | 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>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>36               | DRIVER GEND...<br>MALE | DRIVER LICENSE #<br>REDACTED — PII | INSURANCE CO.<br>REDACTED — PII |                       |
| DIRECTION OF TRAVEL<br>WEST                                                                          | VEHICLE MOVEMENT<br>SLOWING      | SPEED LIMIT (MPH)<br>35        | EST. SPEED (MPH)<br>10 | 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 |                                  |                                |                        |                                    |                                 |                       |