

**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: 18% 22/120 fields

**COLORADO CRASH REPORT SUMMARY**

DR3447 Format — Public Record Data — Generated by CrashStory

**PAGE A — CRASH SCENE INFORMATION**

Page 1

|                             |  |                        |  |                      |  |                                         |  |                                |               |
|-----------------------------|--|------------------------|--|----------------------|--|-----------------------------------------|--|--------------------------------|---------------|
| CASE NUMBER<br>474170       |  | CRASH ID<br>--         |  | AGENCY ORI<br>AURPD  |  | AGENCY NAME<br>Aurora Police Department |  | FORM VERSION<br>—              |               |
| DATE OF CRASH<br>06/06/2024 |  | TIME OF CRASH<br>13:06 |  | OFFICER ARRIVED<br>— |  | SCENE CLEARED<br>—                      |  | CRASH SEVERITY<br>C — Rear-End |               |
| CDOT REGION<br>—            |  | TPR<br>—               |  | DISTRICT<br>—        |  | DATA SOURCE<br>CDOT                     |  | RECORD STATUS<br>NEW           |               |
| NUMBER KILLED<br>0          |  | NUMBER INJURED<br>1    |  | TOTAL VEHICLES<br>2  |  | NON-MOTORISTS<br>0                      |  | INJURY K<br>0                  | INJURY A<br>0 |
|                             |  |                        |  |                      |  |                                         |  | INJURY B<br>0                  | INJURY C<br>1 |
|                             |  |                        |  |                      |  |                                         |  |                                |               |
| Secondary Crash             |  | Construction Zone      |  | School Zone          |  | Alcohol                                 |  | Drug                           |               |
|                             |  |                        |  | Marijuana            |  | Speed Related                           |  | Hit & Run                      |               |
|                             |  |                        |  |                      |  | Juveniles                               |  |                                |               |

**CRASH LOCATION**

|                                 |  |                         |  |                                                |                              |                     |                      |                   |                       |
|---------------------------------|--|-------------------------|--|------------------------------------------------|------------------------------|---------------------|----------------------|-------------------|-----------------------|
| LATITUDE<br>39.67489            |  | LONGITUDE<br>-104.80947 |  | COUNTY<br>ARAPAHOE                             |                              | CITY/TOWN<br>AURORA |                      | URBAN/RURAL<br>—  |                       |
| ON ROAD / STREET<br>E ILIFF AVE |  |                         |  | INTERSECTING / REFERENCE ROAD<br>S CHAMBERS RD |                              |                     | MILEPOINT<br>—       | HIGHWAY #<br>0055 |                       |
| ROADWAY TYPE<br>—               |  | SPEED LIMIT (MPH)<br>—  |  | TRAFFIC CONTROL<br>—                           | LOCATION<br>NON_INTERSECTION |                     | LANE POSITION<br>W01 |                   | ROAD SECTION<br>ILIFF |

**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: 474170 — 06/06/2024 — E ILIFF 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>34               | 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>25 | 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>62               | DRIVER GEND...<br>FEMALE | DRIVER LICENSE #<br>REDACTED — PII | INSURANCE CO.<br>REDACTED — PII |                       |
| DIRECTION OF TRAVEL<br>WEST                                                                          | VEHICLE MOVEMENT<br>STOPPED      | SPEED LIMIT (MPH)<br>35        | EST. SPEED (MPH)<br>—    | 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 |                                  |                                |                          |                                    |                                 |                       |