

**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: 12%

14/120 fields

**COLORADO CRASH REPORT SUMMARY**

DR3447 Format — Public Record Data — Generated by CrashStory

**PAGE A — CRASH SCENE INFORMATION**

Page 1

|                                                                                                                        |                        |                      |  |                       |  |                                         |               |                   |               |
|------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------|--|-----------------------|--|-----------------------------------------|---------------|-------------------|---------------|
| CASE NUMBER<br>DEN-DP2015606712                                                                                        |                        | CRASH ID<br>--       |  | AGENCY ORI<br>3       |  | AGENCY NAME<br>Denver Police Department |               | FORM VERSION<br>— |               |
| DATE OF CRASH<br>10/17/2015                                                                                            | TIME OF CRASH<br>03:46 | OFFICER ARRIVED<br>— |  | SCENE CLEARED<br>—    |  | CRASH SEVERITY<br>0 — N/A               |               |                   |               |
| CDOT REGION<br>—                                                                                                       | TPR<br>—               | DISTRICT<br>—        |  | DATA SOURCE<br>ARCGIS |  | 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>39.71478              | LONGITUDE<br>-104.98753 | COUNTY<br>Denver                              | CITY/TOWN<br>Denver |                    | URBAN/RURAL<br>—  |
| ON ROAD / STREET<br>S BROADWAY ST |                         | INTERSECTING / REFERENCE ROAD<br>E BAYAUD AVE |                     | MILEPOINT<br>—     | HIGHWAY #<br>—    |
| ROADWAY TYPE<br>—                 | SPEED LIMIT (MPH)<br>—  | TRAFFIC CONTROL<br>—                          | LOCATION<br>OTHER   | LANE POSITION<br>— | ROAD SECTION<br>— |

**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**

TRAF - ACCIDENT . Neighborhood: Baker. Fatality mode: . Serious injury mode:

## PUBLIC RECORD SUMMARY — NOT AN OFFICIAL REPORT

## VEHICLE / OCCUPANT INFORMATION

Case: DEN-DP2015606712 — 10/17/2015 — S BROADWAY ST

## 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>—                    | DRIVER GEND...<br>—   | DRIVER LICENSE #<br>REDACTED — PII | INSURANCE CO.<br>REDACTED — PII |                       |
| DIRECTION OF TRAVEL<br>WEST                                                                          | VEHICLE MOVEMENT<br>RIGHT_TURN   | SPEED LIMIT (MPH)<br>—             | EST. SPEED (MPH)<br>— | STATED SPEED<br>—                  |                                 |                       |
| DRIVER ACTION<br>OTHER                                                                               | DRIVER ACTION 2<br>—             | HUMAN CONTRIBUTING FACTOR<br>OTHER |                       |                                    | 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>—                                 | DRIVER GEND...<br>—   | DRIVER LICENSE #<br>REDACTED — PII | INSURANCE CO.<br>REDACTED — PII |                       |
| DIRECTION OF TRAVEL<br>SOUTH                                                                         | VEHICLE MOVEMENT<br>GOING_STRAIGHT | SPEED LIMIT (MPH)<br>—                          | EST. SPEED (MPH)<br>— | STATED SPEED<br>—                  |                                 |                       |
| DRIVER ACTION<br>OTHER                                                                               | DRIVER ACTION 2<br>—               | HUMAN CONTRIBUTING FACTOR<br>NO_APPARENT_FACTOR |                       |                                    | 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 |                                    |                                                 |                       |                                    |                                 |                       |