

**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: 15%  18/120 fields

**COLORADO CRASH REPORT SUMMARY**

DR3447 Format — Public Record Data — Generated by CrashStory

**PAGE A — CRASH SCENE INFORMATION**

Page 1

|                                 |                            |                      |                       |   |                      |               |               |
|---------------------------------|----------------------------|----------------------|-----------------------|---|----------------------|---------------|---------------|
| CASE NUMBER<br>DEN-DP2016176265 |                            | CRASH ID<br>--       | AGENCY ORI<br>6       | AGENCY NAME<br>Denver Police Department | FORM VERSION<br>—    |               |               |
| DATE OF CRASH<br>03/20/2016     | TIME OF CRASH<br>12:18     | OFFICER ARRIVED<br>— | SCENE CLEARED<br>—    | CRASH SEVERITY<br><b>A — N/A</b>        |                      |               |               |
| CDOT REGION<br>—                | TPR<br>—                   | DISTRICT<br>—        | DATA SOURCE<br>ARCGIS | RECORD STATUS<br>NEW                    | PROCESSING<br>—      |               |               |
| NUMBER KILLED<br>0              | NUMBER INJURED<br><b>1</b> | TOTAL VEHICLES<br>2  | NON-MOTORISTS<br>0    | INJURY K<br>0                           | INJURY A<br><b>1</b> | 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>39.74789                   | LONGITUDE<br>-104.99826 | COUNTY<br>Denver                   | CITY/TOWN<br>Denver | URBAN/RURAL<br>—   |
| ON ROAD / STREET<br>1200 BLOCK 15TH ST |                         | INTERSECTING / REFERENCE ROAD<br>— |                     | MILEPOINT<br>—     |
| ROADWAY TYPE<br>—                      | SPEED LIMIT (MPH)<br>—  | TRAFFIC CONTROL<br>—               | LOCATION<br>OTHER   | LANE POSITION<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 - DUI/DUID . Neighborhood: Union Station. Fatality mode: . Serious injury mode: SUV

## VEHICLE / OCCUPANT INFORMATION

Case: DEN-DP2016176265 — 03/20/2016 — 1200 BLOCK 15TH ST

## 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>—                    | DRIVER GEND...<br>—         | DRIVER LICENSE #<br>REDACTED — PII | INSURANCE CO.<br>REDACTED — PII |
| DIRECTION OF TRAVEL<br>WEST   | VEHICLE MOVEMENT<br>GOING_STRAIGHT |                            | SPEED LIMIT (MPH)<br>—             | EST. SPEED (MPH)<br>—       | STATED SPEED<br>—                  |                                 |
| DRIVER ACTION<br>CARELESS_DRIVING   | 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>—           |                             |                                    |                                 |
| <input checked="" type="checkbox"/> Alcohol Suspected <input type="checkbox"/> Marijuana Suspected <input type="checkbox"/> Other Drugs Suspected <input type="checkbox"/> DUI <input type="checkbox"/> Hit & Run <input type="checkbox"/> Emergency Lights |                                    |                            |                                    |                             |                                    |                                 |
| TESTED FOR ALCOHOL<br>—   |                                    | TESTED FOR MARIJUANA<br>—  |                                    | TESTED FOR OTHER DRUGS<br>— |                                    |                                 |

## 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>WEST  | VEHICLE MOVEMENT<br>PARKED       |                            | 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>—                        |                            |                                    |                                 |
| <input type="checkbox"/> Alcohol Suspected <input type="checkbox"/> Marijuana Suspected <input type="checkbox"/> Other Drugs Suspected <input type="checkbox"/> DUI <input type="checkbox"/> Hit & Run <input type="checkbox"/> Emergency Lights |                                  |                            |   |                            |                                    |                                 |