

**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: 37%  44/120 fields

**COLORADO CRASH REPORT SUMMARY**

DR3447 Format — Public Record Data — Generated by CrashStory

**PAGE A — CRASH SCENE INFORMATION**

Page 1

CASE NUMBER 25G018148		CRASH ID 2636865	AGENCY ORI GRYPD	AGENCY NAME Greeley Police Department	FORM VERSION DR3447		
DATE OF CRASH 12/06/2025	TIME OF CRASH 10:03	OFFICER ARRIVED —	SCENE CLEARED —	CRASH SEVERITY O — N/A			
CDOT REGION —	TPR (All), Greater Denver Ar...	DISTRICT —	DATA SOURCE TABLEAU	RECORD STATUS NEW	PROCESSING —		
NUMBER KILLED 0	NUMBER INJURED 0	TOTAL VEHICLES 2	NON-MOTORISTS 0	INJURY K 0	INJURY A 0	INJURY B 0	INJURY C 0

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

**CRASH LOCATION**

LATITUDE 40.42464	LONGITUDE -104.68550	COUNTY WELD (03)	CITY/TOWN GREELEY	URBAN/RURAL —	
ON ROAD / STREET 5TH AVE		INTERSECTING / REFERENCE ROAD 8TH ST		MILEPOINT —	HIGHWAY # 0570
ROADWAY TYPE City Street	SPEED LIMIT (MPH) —	TRAFFIC CONTROL —	LOCATION At Intersection	LANE POSITION —	ROAD SECTION AV

**HARMFUL EVENT SEQUENCE**

1ST HARMFUL EVENT 13 — Parked Car	2ND HARMFUL EVENT —	3RD HARMFUL EVENT —	4TH HARMFUL EVENT —
MOST HARMFUL EVENT <b>13 — Parked Vehicle</b>		TOP TRAFFIC OFFENSE —	

**ROAD CHARACTERISTICS**

ROAD CONTOUR (CURVES) Straight	ROAD CONTOUR (GRADE) Level	ROAD DESCRIPTION Non-Intersection	APPROACH/OVERTAKING —
SYSTEM CODE 7	RR CROSSING —	CRASH TYPE GROUP Parked Car	COMMON CODE —

**ENVIRONMENTAL CONDITIONS**

LIGHTING Dark-Lighted	ROAD CONDITION Dry	WEATHER (PRIMARY) Clear	WEATHER (SECONDARY) —
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**PAGE B — NARRATIVE**

Parked Car

## VEHICLE / OCCUPANT INFORMATION

Case: 25G018148 — 12/06/2025 — 5TH AVE

**PAGE C — MOTORIZED TRAFFIC UNITS**

**TRAFFIC UNIT #1 — HIT AND RUN**

VEHICLE TYPE Farm Equipment	YEAR —	MAKE —	MODEL —	COLOR —	BODY TYPE —	SPECIAL FUNCTION —				
VEHICLE CONDITION —	DAMAGE DESCRIPTION —		TOWED No	TRAILERS —	PERMITTED —					
DRIVER NAME REDACTED — PII	DRIVER ADDRESS REDACTED — PII		DRIVER AGE —	DRIVER GEND... —	DRIVER LICENSE # REDACTED — PII	INSURANCE CO. REDACTED — PII				
DIRECTION OF TRAVEL Northeast	VEHICLE MOVEMENT Going Straight		SPEED LIMIT (MPH) —	EST. SPEED (MPH) —	STATED SPEED —					
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 Not Used		SAFETY EQUIP DETAIL Unknown							
Alcohol Suspected <input type="checkbox"/> <b>■ Marijuana Suspected</b> <input checked="" type="checkbox"/> Other Drugs Suspected <input type="checkbox"/> DUI <input type="checkbox"/> <b>■ Hit &amp; Run</b> <input checked="" type="checkbox"/> Emergency Lights <input type="checkbox"/>										
TESTED FOR ALCOHOL —		TESTED FOR MARIJUANA —			TESTED FOR OTHER DRUGS —					
#	SEAT POS	AGE	SEX	INJURY	EJECT	AIRBAG	RESTRAINT	HELMET	SAFETY EQ	IMPAIRMENT
1	Driver (Front Left)	—	—	No Apparent Injury (O)	No	Other Deployed	Unknown	Unknown	Unknown	<b>MJ</b>

**TRAFFIC UNIT #2**

VEHICLE TYPE Truck – Single Unit	YEAR —	MAKE —	MODEL —	COLOR —	BODY TYPE —	SPECIAL FUNCTION No Special Function				
VEHICLE CONDITION No Defects	DAMAGE DESCRIPTION —		TOWED No	TRAILERS —	PERMITTED —					
DRIVER NAME REDACTED — PII	DRIVER ADDRESS REDACTED — PII		DRIVER AGE —	DRIVER GEND... —	DRIVER LICENSE # REDACTED — PII	INSURANCE CO. REDACTED — PII				
DIRECTION OF TRAVEL Northeast	VEHICLE MOVEMENT Parked		SPEED LIMIT (MPH) 30	EST. SPEED (MPH) —	STATED SPEED —					
DRIVER ACTION No Contributing Action	DRIVER ACTION 2 —		HUMAN CONTRIBUTING FACTOR No Contributing Factor		AUTONOMOUS LEVEL —					
CONTRIBUTING FACTOR 1 No Contributing Factor		CONTRIBUTING FACTOR 2 —		CONTRIBUTING FACTOR 3 —						
SAFETY EQUIP AVAILABLE —	SAFETY EQUIP USED —		SAFETY EQUIP DETAIL Unknown							
Alcohol Suspected <input type="checkbox"/> Marijuana Suspected <input type="checkbox"/> Other Drugs Suspected <input type="checkbox"/> DUI <input type="checkbox"/> Hit & Run <input checked="" type="checkbox"/> Emergency Lights <input type="checkbox"/>										
#	SEAT POS	AGE	SEX	INJURY	EJECT	AIRBAG	RESTRAINT	HELMET	SAFETY EQ	IMPAIRMENT
1	Unknown	—	—	No Apparent Injury (O)	No	—	—	—	Unknown	—