

**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: 30%

36/120 fields

**COLORADO CRASH REPORT SUMMARY**

DR3447 Format — Public Record Data — Generated by CrashStory

**PAGE A — CRASH SCENE INFORMATION**

Page 1

|                                                                                                                                          |                             |                     |                      |                   |                        |                                      |                           |                        |                 |               |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------|----------------------|-------------------|------------------------|--------------------------------------|---------------------------|------------------------|-----------------|---------------|
| CASE NUMBER<br>4C260930                                                                                                                  |                             | CRASH ID<br>2661723 |                      | AGENCY ORI<br>CSP |                        | AGENCY NAME<br>Colorado State Patrol |                           | FORM VERSION<br>DR3447 |                 |               |
| DATE OF CRASH<br>04/14/2026                                                                                                              | TIME OF CRASH<br>23:15      |                     | OFFICER ARRIVED<br>— |                   | SCENE CLEARED<br>—     |                                      | CRASH SEVERITY<br>0 — N/A |                        |                 |               |
| CDOT REGION<br>—                                                                                                                         | TPR<br>(All), Intermountain |                     | DISTRICT<br>—        |                   | DATA SOURCE<br>TABLEAU |                                      | RECORD STATUS<br>NEW      |                        | PROCESSING<br>— |               |
| NUMBER KILLED<br>0                                                                                                                       | NUMBER INJURED<br>0         |                     | TOTAL VEHICLES<br>1  |                   | 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 <div>■ Alcohol</div> Drug   Marijuana <div>■ Speed Related</div> Hit & Run   Juveniles |                             |                     |                      |                   |                        |                                      |                           |                        |                 |               |

**CRASH LOCATION**

|                                    |                         |                                    |  |                             |                |                    |                  |                   |  |
|------------------------------------|-------------------------|------------------------------------|--|-----------------------------|----------------|--------------------|------------------|-------------------|--|
| LATITUDE<br>39.57490               | LONGITUDE<br>-107.45093 | COUNTY<br>GARFIELD (24)            |  |                             | CITY/TOWN<br>— |                    | URBAN/RURAL<br>— |                   |  |
| ON ROAD / STREET<br>INTERSTATE 70  |                         | INTERSECTING / REFERENCE ROAD<br>— |  |                             |                | MILEPOINT<br>—     |                  | HIGHWAY #<br>—    |  |
| ROADWAY TYPE<br>Interstate Highway | SPEED LIMIT (MPH)<br>30 | TRAFFIC CONTROL<br>—               |  | LOCATION<br>At Intersection |                | LANE POSITION<br>— |                  | ROAD SECTION<br>— |  |

**HARMFUL EVENT SEQUENCE**

|                                           |                        |                          |                        |
|-------------------------------------------|------------------------|--------------------------|------------------------|
| 1ST HARMFUL EVENT<br>41 — Guardrail Face  | 2ND HARMFUL EVENT<br>— | 3RD HARMFUL EVENT<br>—   | 4TH HARMFUL EVENT<br>— |
| MOST HARMFUL EVENT<br>41 — Guardrail Face |                        | TOP TRAFFIC OFFENSE<br>— |                        |

**ROAD CHARACTERISTICS**

|                                   |                                |  |                          |  |                          |  |  |  |
|-----------------------------------|--------------------------------|--|--------------------------|--|--------------------------|--|--|--|
| ROAD CONTOUR (CURVES)<br>Straight | ROAD CONTOUR (GRADE)<br>Uphill |  | ROAD DESCRIPTION<br>Ramp |  | APPROACH/OVERTAKING<br>— |  |  |  |
| SYSTEM CODE<br>1                  | RR CROSSING<br>—               |  | CRASH TYPE GROUP<br>—    |  | COMMON CODE<br>154       |  |  |  |

**ENVIRONMENTAL CONDITIONS**

|                            |                       |  |                           |  |                          |  |  |  |
|----------------------------|-----------------------|--|---------------------------|--|--------------------------|--|--|--|
| LIGHTING<br>Dark-Unlighted | ROAD CONDITION<br>Wet |  | WEATHER (PRIMARY)<br>Rain |  | WEATHER (SECONDARY)<br>— |  |  |  |
|----------------------------|-----------------------|--|---------------------------|--|--------------------------|--|--|--|

**PAGE B — NARRATIVE**

No narrative available for this crash record. The official DR3447 report filed by the investigating officer would contain a chronological narrative describing the events.

## VEHICLE / OCCUPANT INFORMATION

Case: 4C260930 — 04/14/2026 — INTERSTATE 70

## PAGE C — MOTORIZED TRAFFIC UNITS

## TRAFFIC UNIT #1

|                                                                                                                                                                                                                                                                        |                             |                                    |                         |                                                              |                              |                                         |               |                  |                      |            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------|-------------------------|--------------------------------------------------------------|------------------------------|-----------------------------------------|---------------|------------------|----------------------|------------|
| VEHICLE TYPE<br>Motorcycle                                                                                                                                                                                                                                             | YEAR<br>—                   | MAKE<br>—                          | MODEL<br>—              | COLOR<br>—                                                   | BODY TYPE<br>—               | SPECIAL FUNCTION<br>No Special Function |               |                  |                      |            |
| VEHICLE CONDITION<br>No Defects                                                                                                                                                                                                                                        | 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>Southeast                                                                                                                                                                                                                                       | VEHICLE MOVEMENT<br>Backing |                                    | SPEED LIMIT (MPH)<br>30 |                                                              | EST. SPEED (MPH)<br>10       | STATED SPEED<br>—                       |               |                  |                      |            |
| DRIVER ACTION<br>Unknown                                                                                                                                                                                                                                               |                             | DRIVER ACTION 2<br>—               |                         | HUMAN CONTRIBUTING FACTOR<br>Age/Mobility                    |                              | AUTONOMOUS LEVEL<br>—                   |               |                  |                      |            |
| CONTRIBUTING FACTOR 1<br>Age/Mobility                                                                                                                                                                                                                                  |                             | CONTRIBUTING FACTOR 2<br>—         |                         | CONTRIBUTING FACTOR 3<br>—                                   |                              |                                         |               |                  |                      |            |
| SAFETY EQUIP AVAILABLE<br>Shoulder and Lap Belt                                                                                                                                                                                                                        |                             | SAFETY EQUIP USED<br>Properly Used |                         | SAFETY EQUIP DETAIL<br>Shoulder and Lap Belt - Properly Used |                              |                                         |               |                  |                      |            |
| Alcohol Suspected <input type="checkbox"/> Marijuana Suspected <input checked="" type="checkbox"/> Other Drugs Suspected <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Hit & Run <input type="checkbox"/> Emergency Lights <input type="checkbox"/> |                             |                                    |                         |                                                              |                              |                                         |               |                  |                      |            |
| TESTED FOR ALCOHOL<br>05                                                                                                                                                                                                                                               |                             | TESTED FOR MARIJUANA<br>05         |                         |                                                              | TESTED FOR OTHER DRUGS<br>05 |                                         |               |                  |                      |            |
| #                                                                                                                                                                                                                                                                      | SEAT POS                    | AGE                                | SEX                     | INJURY                                                       | EJECT                        | AIRBAG                                  | RESTRAINT     | HELMET           | SAFETY EQ            | IMPAIRMENT |
| 1                                                                                                                                                                                                                                                                      | Driver (Front Left)         | 55                                 | —                       | No Apparent Injury (O)                                       | No                           | Not Deployed                            | Properly Used | N/A - Cars/Tr... | Shoulder and Lap ... | A/c, MJ    |