

# MMUCC CRASH REPORT

## CRASH DATA ELEMENTS

<b>C1. Crash Identifier</b> <input style="width: 100%; height: 20px;" type="text"/>	<b>C2. Crash Classification</b> <b>S1 Ownership</b> <input style="width: 40px;" type="text"/> 01 Public Property 02 Private Property  <b>S2 Characteristics</b> <input style="width: 40px;" type="text"/> 01 Trafficway, On Road 02 Trafficway, Not on Road 03 Non-Trafficway  <b>S3 Secondary Crash?</b> <input style="width: 40px;" type="text"/> 01 No 02 Yes	<b>C3. Crash Date and Time</b> <b>S1 Crash Date and Time (YYYYMMDDHHMM)</b> <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td> </tr> </table> <b>S2 Time of Roadway Clearance (HHMM)</b> <table border="1" style="width: 60px; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 15%;"> </td><td style="width: 15%;"> </td><td style="width: 15%;"> </td><td style="width: 15%;"> </td> </tr> </table>																
<b>C4. Crash County</b> <input style="width: 100%; height: 20px;" type="text"/>	<b>C5. Crash City/Place (Political Jurisdiction)</b> <input style="width: 100%; height: 20px;" type="text"/>	<b>C6. Crash Location</b> Latitude (degrees.minutes.seconds + compass direction) <input style="width: 100%; height: 20px;" type="text"/>  Longitude (degrees.minutes.seconds + compass direction) <input style="width: 100%; height: 20px;" type="text"/>																
<b>C7. First Harmful Event</b> <input style="width: 40px;" type="text"/>  <b>Non-Collision Harmful Events</b> 01 Cargo/Equipment Loss or Shift 02 Fell/Jumped From Motor Vehicle 03 Fire/Explosion 04 Immersion, Full or Partial 05 Jackknife 06 Other Non-Collision 07 Overtum/Rollover 08 Thrown or Falling Object  <b>Collision With Person, Motor Vehicle, or Non-Fixed Object</b> 09 Animal ( <i>live</i> ) 10 Construction Equipment ( <i>backhoe, bulldozer, etc.</i> ) 11 Farm Equipment ( <i>tractor, combine harvester, etc.</i> ) 12 Motor Vehicle in Transport 13 Other Non-Fixed Object 14 Other Non-motorist 15 Parked Motor Vehicle 16 Pedalcycle 17 Pedestrian 18 Railway Vehicle ( <i>train, engine</i> ) 19 Strikes Object at Rest from MV in Transport 20 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle  <b>Collision With Fixed Object</b> 21 Bridge Overhead Structure 22 Bridge Pier or Support 23 Bridge Rail 24 Cable Barrier 25 Concrete Traffic Barrier 26 Culvert 27 Curb 28 Ditch 29 Embankment 30 Fence 31 Guardrail End Terminal 32 Guardrail Face 33 Impact Attenuator/Crash Cushion 34 Mailbox 35 Other Fixed Object ( <i>wall, building, tunnel, etc.</i> ) 36 Other Post, Pole, or Support 37 Other Traffic Barrier 38 Traffic Sign Support 39 Traffic Signal Support 40 Tree ( <i>standing</i> ) 41 Utility Pole/Light Support  99 Unknown	<b>C8. Location of First Harmful Event Relative to the Trafficway</b> <input style="width: 40px;" type="text"/> 01 Gore 02 In Parking Lane or Zone 03 Median 04 Off-Roadway, Location Unknown 05 On Roadway 06 On Shoulder, Left Side 07 On Shoulder, Right Side 08 Outside Road/Right-of-Way 09 Roadside 10 Separator/Traffic Island  99 Unknown  <b>C9. Manner of Crash/Collision Impact</b> <input style="width: 40px;" type="text"/> 00 Not a Collision Between Two Motor Vehicles 01 Angle 02 Front to Front 03 Front to Rear 04 Rear to Rear 05 Rear to Side 06 Sideswipe, Opposite Direction 07 Sideswipe, Same Direction  98 Other 99 Unknown  <b>C10. Source of Information</b> <b>S1 Source of Information</b> <input style="width: 40px;" type="text"/> 01 Law Enforcement Agency 02 Civilian  <b>S2 Law Enforcement Agency Identifier</b> <input style="width: 40px;" type="text"/> 9 characters NCIC Originating Agency Identifier (OAI)  999999997 Not Applicable  <b>C11. Weather Conditions (choose up to 2)</b> <input style="width: 40px;" type="text"/> 01 Blowing Sand, Soil, Dirt <input style="width: 40px;" type="text"/> 02 Blowing Snow 03 Clear 04 Cloudy 05 Fog, Smog, Smoke 06 Freezing Rain or Freezing Drizzle 07 Rain 08 Severe Crosswinds 09 Sleet or Hail 10 Snow  98 Other 99 Unknown	<b>C12. Light Condition</b> <input style="width: 40px;" type="text"/> 01 Daylight 02 Dawn/Dusk 03 Dark – Lighted 04 Dark – Not Lighted 05 Dark – Unknown Lighting  98 Other 99 Unknown  <b>C13. Roadway Surface Condition</b> <input style="width: 40px;" type="text"/> 01 Dry 02 Ice/Frost 03 Mud, Dirt, Gravel 04 Oil 05 Sand 06 Slush 07 Snow 08 Water ( <i>standing, moving</i> ) 09 Wet  98 Other 99 Unknown  <b>C14. Contributing Circumstances – Roadway Environment (choose up to 2)</b> <input style="width: 40px;" type="text"/> 00 None  01 Animal(s) 02 Debris 03 Glare 04 Non-Highway Work 05 Obstructed Crosswalks 06 Obstruction in Roadway 07 Prior Crash 08 Prior Non-Recurring Incident 09 Regular Congestion 10 Related to a Bus Stop 11 Road Surface Condition ( <i>wet, icy, snow, slush, etc.</i> ) 12 Ruts, Holes, Bumps 13 Shoulders ( <i>none, low, soft, high</i> ) 14 Toll Booth/Plaza Related 15 Traffic Control Device 16 Traffic Incident 17 Visual Obstruction(s) 18 Weather Conditions 19 Work Zone ( <i>construction/maintenance/utility</i> ) 20 Worn, Travel-polished Surface  98 Other 99 Unknown	<b>C15. Relation to Junction</b> <b>S1 Within Interchange Area?</b> <input style="width: 40px;" type="text"/> 01 No 02 Yes  99 Unknown  <b>S2 Specific Location</b> <input style="width: 40px;" type="text"/> 00 Not an Interchange Area 01 Acceleration/Deceleration Lane 02 Crossover-Related 03 Driveway Access or Related 04 Entrance/Exit Ramp or Related 05 Intersection or Related 06 Non-Junction 07 Railway Grade Crossing 08 Shared-Use Path or Trail 09 Through Roadway  10 Other Location Not Listed Above Within an Interchange Area ( <i>median, shoulder and roadside</i> )  99 Unknown  <b>C16. Type of Intersection</b> <b>S1 Number of Approaches</b> <input style="width: 40px;" type="text"/> 00 Not an Intersection 02 (2) Two 03 (3) Three 04 (4) Four 05 (5+) Five or more  <b>S2 Overall Intersection Geometry</b> <input style="width: 40px;" type="text"/> 00 Angled/Skewed 02 Roundabout/Traffic Circle 03 Perpendicular  97 Not Applicable/Not an Intersection  <b>S3 Overall Traffic Control Device</b> <input style="width: 40px;" type="text"/> 01 Signalized 02 Stop – All Way 03 Stop – Partial 04 Yield 05 No Controls  97 Not Applicable/Not an Intersection  <b>C17. School Bus-Related</b> <input style="width: 40px;" type="text"/> 01 No 02 Yes, School Bus Directly Involved 03 Yes, School Bus Indirectly Involved															

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## CRASH DATA ELEMENTS (Cont.)

### C18. Work Zone-Related (Construction/Maintenance/Utility)

<b>S1</b> Was the crash in a construction, maintenance, or utility work zone or was it related to activity within a work zone? <input style="float: right;" type="checkbox"/> 01 No 02 Yes 99 Unknown	<b>S2</b> Location of the Crash <input style="float: right;" type="checkbox"/> 01 Before the First Work Zone Warning Sign 02 Advance Warning Area 03 Transition Area 04 Activity Area 05 Termination Area 98 Not Applicable/Not Within or Related to a Work Zone	<b>S3</b> Type of Work Zone <input style="float: right;" type="checkbox"/> 01 Lane Closure 02 Lane Shift/Crossover 03 Work on Shoulder or Median 04 Intermittent or Moving Work 05 Other Type of Work Zone 98 Not Applicable/Not Within or Related to a Work Zone	<b>S4</b> Workers Present <input style="float: right;" type="checkbox"/> 01 No 02 Yes 98 Not Applicable/Not Within or Related to a Work Zone 99 Unknown	<b>S5</b> Law Enforcement Present <input style="float: right;" type="checkbox"/> 01 No 02 Yes 98 Not Applicable/Not Within or Related to a Work Zone
<b>C19. Crash Severity</b> <input style="float: right;" type="checkbox"/> 01 (K) Fatal Injury** 02 (A) Suspected Serious Injury 03 (B) Suspected Minor Injury 04 (C) Possible Injury 05 (O) Property Damage-Only 99 Unknown **If attribute is selected the Fatal Crash Section must be completed.	<b>C20. Number of Motor Vehicles Involved</b> <input style="float: right;" type="checkbox"/> <b>C21. Number of Motorists</b> <input style="float: right;" type="checkbox"/> <b>C22. Number of Non-Motorists</b> <input style="float: right;" type="checkbox"/> <b>C23. Number of Non-Fatally Injured Persons</b> <input style="float: right;" type="checkbox"/> <b>C24. Number of Fatalities</b> <input style="float: right;" type="checkbox"/>	<b>C25. Alcohol Involvement</b> <input style="float: right;" type="checkbox"/> 01 No 02 Yes 99 Unknown	<b>C26. Drug Involvement</b> <input style="float: right;" type="checkbox"/> 01 No 02 Yes 99 Unknown	<b>C27. Day of Week</b> <input style="float: right;" type="checkbox"/> 01 Sunday 02 Monday 03 Tuesday 04 Wednesday 05 Thursday 06 Friday 07 Saturday

**CRASH DESCRIPTION:**

**CRASH DIAGRAM:**

# MMUCC CRASH REPORT

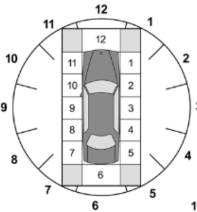
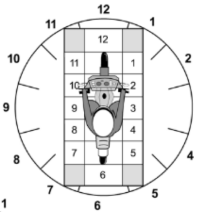
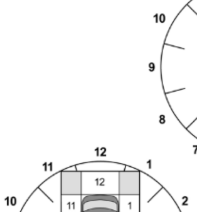
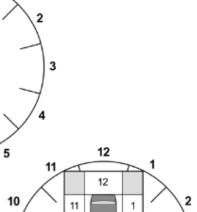
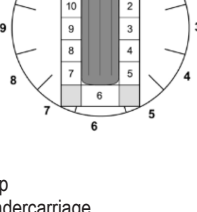
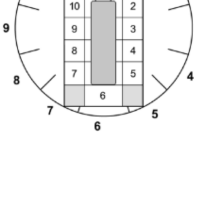
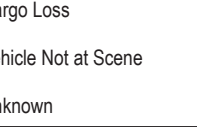



## VEHICLE DATA ELEMENTS

<b>V1. Vehicle Identification Number (VIN)</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<b>V3. Motor Vehicle Registration State and Year</b> <b>S1 Identifier</b> <input style="width: 40px;" type="text"/> 00 No Driver Present  <i>Appendix E State Identifier</i> <i>Appendix F State, foreign country, U.S. government, Indian Nation, etc.)</i>  99 Unknown  <b>S2 Motor Vehicle Registration</b> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> Year of Motor Vehicle Registration (YYYY)	<b>V4. Motor Vehicle License Plate Number</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>  <b>V5. Motor Vehicle Make</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>  <b>V6. Motor Vehicle Model Year (YYYY)</b> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>  <b>V7. Motor Vehicle Model</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
<b>V2. Motor Vehicle Unit Type and Number</b> <b>S1 Type</b> <input style="width: 40px;" type="text"/> <b>S2 Number</b> <input style="width: 40px;" type="text"/> 01 Motor Vehicle in Transport 02 Parked Motor Vehicle 03 Working Vehicle/Equipment	<b>V8. Motor Vehicle Body Type Category</b> <b>S1 Body Type Category</b> <input style="width: 40px;" type="text"/> <b>S2 Number of Trailing Units</b> <input style="width: 40px;" type="text"/> 01 All-Terrain Vehicle/ All-Terrain Cycle (ATV/ATC) 02 Golf Cart 03 Snowmobile 04 Low Speed Vehicle 05 Moped or motorized bicycle 06 Recreational Off-Highway Vehicles (ROV) 07 2-Wheeled Motorcycle 08 3-Wheeled Motorcycle 09 Autocycle  10 Passenger Car 11 Passenger Van (< 9 seats) 12 (Sport) Utility Vehicle 13 Pickup 14 Cargo Van** 15 Construction Equipment (backhoe, bulldozer, etc.) 16 Farm Equipment (tractor, combine harvester, etc.)  17 Single-Unit Truck** 18 Truck Tractor**  19 Motor Home 20 9- or 12-Passenger Van** 21 15-Passenger Van** 22 Large Limo** 23 Mini-bus** 24 School Bus** 25 Transit Bus** 26 Motorcoach**  27 Other Bus Type** 28 Other Trucks  98 Other  <b>S3 Vehicle Size</b> <input style="width: 40px;" type="text"/> <i>Note: GVWR is used for single-unit trucks and other body types. GCWR is used for combination trucks or any vehicle with a trailing unit</i> 01 Light (Less than 10,000 lbs. GVWR/GCWR) 02 Medium (10,001 – 26,000 lbs. GVWR/GCWR)** 03 Heavy (Greater than 26,000 lbs. GVWR/GCWR)**  <b>S4 Did this motor vehicle display a hazardous materials (HM) placard?</b> <input style="width: 40px;" type="text"/> 01 No 02 Yes**  **If attribute is selected from Subfield 1, 3 or 4, the Large Vehicle/Hazardous Materials Section must be completed.	<b>V10. Special Function of Motor Vehicle in Transport</b> <input style="width: 40px;" type="text"/> 00 No Special Function 01 Bus – School (Public or Private) 02 Bus – Childcare/Daycare 03 Bus – Transit/Commuter 04 Bus – Charter/Tour 05 Bus – Intercity 06 Bus – Shuttle 07 Bus – Other  08 Farm Vehicle 09 Fire Truck 10 Highway/Maintenance 11 Mail Carrier 12 Military  13 Ambulance 14 Police 15 Public Utility 16 Non-Transport Emergency Services Vehicle 17 Safety Service Patrols – Incident Response 18 Other Incident Response  19 Rental Truck (Over 10,000 lbs.) 20 Towing – Incident Response 21 Truck Acting as Crash Attenuator  22 Taxi 23 Vehicle Used for Electronic Ride-hailing (transportation network company)  98 Other 99 Unknown  <b>V11. Emergency Motor Vehicle Use</b> <input style="width: 40px;" type="text"/> 01 Non-Emergency, Non-Transport 02 Non-Emergency Transport 03 Emergency Operation, Emergency Warning Equipment Not in Use 04 Emergency Operation, Emergency Warning Equipment in Use  97 Not Applicable 99 Unknown	<b>V12. Motor Vehicle Posted/Statutory Speed Limit</b> <input style="width: 40px;" type="text"/> xx Posted/Statutory Value (miles per hour) 97 Not Applicable 99 Unknown  <b>V13. Direction of Travel Before Crash</b> <input style="width: 40px;" type="text"/> 00 Not on Roadway 01 Northbound 03 Eastbound 06 Southbound 09 Westbound 99 Unknown  <b>V14. Trafficway Description</b> <b>S1 Travel Directions</b> <input style="width: 40px;" type="text"/> 01 One-Way 02 Two-Way  <b>S2 Divided?</b> <input style="width: 40px;" type="text"/> 00 Not Divided 01 Not Divided, With a Continuous Left-Turn Lane 02 Divided, Flush Median (greater than 4ft wide) 03 Divided, Raised Median (curbed) 04 Divided, Depressed Median 99 Unknown  <b>S3 Barrier Type</b> <input style="width: 40px;" type="text"/> 00 No Barrier 01 Cable Barrier 02 Concrete Barrier (e.g. Jersey Barrier) 03 Earth Embankment 04 Guardrail  98 Other  <b>S4 HOV/HOT Lanes</b> <input style="width: 40px;" type="text"/> 00 None present 01 Separated, Barrier, Flush (greater than 4ft wide), Raised or Depressed Median 02 Not Separated, Painted Pavement Markings, Post-Mounted Delineators  <b>S5 Crash Related to HOV/HOT Lane?</b> <input style="width: 40px;" type="text"/> 01 No 02 Yes
<b>V9. Total Occupants in Motor Vehicle</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			

# MMUCC CRASH REPORT

## VEHICLE DATA ELEMENTS (Cont.)

<p><b>V15. Total Lanes in Roadway</b></p> <p><b>Undivided Trafficways</b> <i>(specify 2 values)</i></p> <p>xx Enter the total through lanes in both directions, excluding auxiliary lanes <input style="width: 40px;" type="text"/></p> <p>yy Enter the total through lanes in both directions, excluding auxiliary lanes <input style="width: 40px;" type="text"/></p> <p>97 Not Applicable</p> <p><b>Divided Trafficways</b> <i>(specify 2 values)</i></p> <p>xx Enter the total through lanes in the vehicle's direction, excluding auxiliary lanes <input style="width: 40px;" type="text"/></p> <p>yy Enter the total auxiliary lanes in the vehicle's direction <input style="width: 40px;" type="text"/></p> <p>97 Not Applicable</p>	<p><b>V17. Traffic Control Device Type</b></p> <p><b>S1 TCD Type(s)</b> <i>(choose up to 4)</i></p> <p>00 No Controls <input style="width: 40px;" type="text"/></p> <p>01 Person <i>(including flagger, law enforcement, crossing guard, etc.)</i> <input style="width: 40px;" type="text"/></p> <p><b>Signs</b></p> <p>02 Bicycle Crossing Sign <input style="width: 40px;" type="text"/></p> <p>03 "Curve Ahead" Warning Sign <input style="width: 40px;" type="text"/></p> <p>04 "Intersection Ahead" Warning Sign <input style="width: 40px;" type="text"/></p> <p>05 Other Warning Sign <input style="width: 40px;" type="text"/></p> <p>06 Pedestrian Crossing Sign <input style="width: 40px;" type="text"/></p> <p>07 Railroad Crossing Sign <input style="width: 40px;" type="text"/></p> <p>08 "Reduce Speed Ahead" Warning Sign <input style="width: 40px;" type="text"/></p> <p>09 School Zone Sign <input style="width: 40px;" type="text"/></p> <p>10 Stop Sign <input style="width: 40px;" type="text"/></p> <p>11 Yield Sign <input style="width: 40px;" type="text"/></p> <p><b>Signals</b></p> <p>12 Flashing Railroad Crossing Signal <i>(may include gates)</i> <input style="width: 40px;" type="text"/></p> <p>13 Flashing School Zone Signal <input style="width: 40px;" type="text"/></p> <p>14 Flashing Traffic Control Signal <input style="width: 40px;" type="text"/></p> <p>15 Lane Use Control Signal <input style="width: 40px;" type="text"/></p> <p>16 Other Signal <input style="width: 40px;" type="text"/></p> <p>17 Ramp Meter Signal <input style="width: 40px;" type="text"/></p> <p>18 Traffic Control Signal <input style="width: 40px;" type="text"/></p> <p><b>Pavement Markings</b></p> <p>19 Bicycle Crossing <input style="width: 40px;" type="text"/></p> <p>20 Other Pavement Marking <i>(excluding edgelines, centerlines, or lane lines)</i> <input style="width: 40px;" type="text"/></p> <p>21 Pedestrian Crossing <input style="width: 40px;" type="text"/></p> <p>22 Railroad Crossing <input style="width: 40px;" type="text"/></p> <p>23 School Zone <input style="width: 40px;" type="text"/></p> <p>98 Other <input style="width: 40px;" type="text"/></p> <p>99 Unknown <input style="width: 40px;" type="text"/></p>	<p><b>V18. Motor Vehicle Maneuver/Action</b> <input style="width: 40px;" type="text"/></p> <p>01 Backing <input style="width: 40px;" type="text"/></p> <p>02 Changing Lanes <input style="width: 40px;" type="text"/></p> <p>03 Entering Traffic Lane <input style="width: 40px;" type="text"/></p> <p>04 Leaving Traffic Lane <input style="width: 40px;" type="text"/></p> <p>05 Making U-Turn <input style="width: 40px;" type="text"/></p> <p>06 Movements Essentially Straight Ahead <input style="width: 40px;" type="text"/></p> <p>07 Negotiating a Curve <input style="width: 40px;" type="text"/></p> <p>08 Overtaking/Passing <input style="width: 40px;" type="text"/></p> <p>09 Parked <input style="width: 40px;" type="text"/></p> <p>10 Slowing <input style="width: 40px;" type="text"/></p> <p>11 Stopped in Traffic <input style="width: 40px;" type="text"/></p> <p>12 Turning Left <input style="width: 40px;" type="text"/></p> <p>13 Turning Right <input style="width: 40px;" type="text"/></p> <p>98 Other <input style="width: 40px;" type="text"/></p> <p>99 Unknown <input style="width: 40px;" type="text"/></p>
<p><b>V16. Roadway Alignment and Grade</b></p> <p><b>S1 Horizontal Alignment</b> <input style="width: 40px;" type="text"/></p> <p>01 Straight</p> <p>02 Curve Left</p> <p>03 Curve Right</p> <p><b>S2 Grade</b> <input style="width: 40px;" type="text"/></p> <p>01 Level</p> <p>02 Uphill</p> <p>03 Hillcrest</p> <p>04 Downhill</p> <p>05 Sag <i>(bottom)</i></p>		

<p><b>V19. Vehicle Damage</b></p> <p><b>S1 Initial Point of Contact</b> <input style="width: 40px;" type="text"/></p> <p>00 Non-Collision</p> <p>01 </p> <p>02 </p> <p>03 </p> <p>04 </p> <p>05 </p> <p>06 </p> <p>07 </p> <p>08 </p> <p>09 </p> <p>10 </p> <p>11 </p> <p>12 </p> <p>13 Top</p> <p>14 Undercarriage</p> <p>15 Cargo Loss</p> <p>16 Vehicle Not at Scene</p> <p>99 Unknown</p>	<p><b>S2 Location of Damaged Area(s)</b> <i>(choose up to 13)</i></p> <p>00 No Damage <input style="width: 40px;" type="text"/></p> <p>01-12 12-Point Clock Diagram <i>(See clock diagrams from Subfield 1)</i></p> <p>13 Top <input style="width: 40px;" type="text"/></p> <p>14 Undercarriage <input style="width: 40px;" type="text"/></p> <p>15 All areas <input style="width: 40px;" type="text"/></p> <p>16 Vehicle Not at Scene <input style="width: 40px;" type="text"/></p> <p><b>S3 Resulting Extent of Damage</b> <input style="width: 40px;" type="text"/></p> <p>00 No Damage</p> <p>01 Minor Damage</p> <p>02 Functional Damage</p> <p>03 Disabling Damage</p> <p>04 Vehicle Not at Scene</p>
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## VEHICLE DATA ELEMENTS (Cont.)

<p><b>V20. Sequence of Events</b> <i>(choose up to 4)</i> <input style="float: right;" type="text"/></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 2px;"> <p><b>Non-Harmful Events</b></p> <p>01 Cross Centerline</p> <p>02 Cross Median</p> <p>03 End Departure (<i>T-intersection, dead-end, etc.</i>)</p> <p>04 Downhill Runaway</p> <p>05 Equipment Failure (<i>blown tire, brake failure, etc.</i>)</p> <p>06 Ran Off Roadway Left</p> <p>07 Ran Off Roadway Right</p> <p>08 Reentering Roadway</p> <p>09 Separation of Units</p> <p>10 Other Non-Harmful Event</p> <p><b>Non-Collision Harmful Events</b></p> <p>11 Cargo/Equipment Loss or Shift</p> <p>12 Fell/Jumped From Motor Vehicle</p> <p>13 Fire/Explosion</p> <p>14 Immersion, Full or Partial</p> <p>15 Jackknife</p> <p>16 Other Non-Collision Harmful Event</p> <p>17 Overturn/Rollover</p> <p>18 Thrown or Falling Object</p> <p><b>Collision With Person, Motor Vehicle, or Non-Fixed Object</b></p> <p>19 Animal (<i>live</i>)</p> <p>20 Motor Vehicle in Transport</p> <p>21 Other Non-Fixed Object</p> <p>22 Other Non-Motorist</p> <p>23 Parked Motor Vehicle</p> <p>24 Pedalcycle</p> <p>25 Pedestrian</p> <p>26 Railway Vehicle (<i>train, engine</i>)</p> <p>27 Strikes Object at Rest from MV in Transport</p> <p>28 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle</p> <p>29 Work Zone/Maintenance Equipment</p> </td> <td style="width: 50%; vertical-align: top; padding: 2px;"> <p><b>Collision With Fixed Object</b></p> <p>30 Bridge Overhead Structure</p> <p>31 Bridge Pier or Support</p> <p>32 Bridge Rail</p> <p>33 Cable Barrier</p> <p>34 Concrete Traffic Barrier</p> <p>35 Culvert</p> <p>36 Curb</p> <p>37 Ditch</p> <p>38 Embankment</p> <p>39 Fence</p> <p>40 Guardrail End Terminal</p> <p>41 Guardrail Face</p> <p>42 Impact Attenuator/Crash Cushion</p> <p>43 Mailbox</p> <p>44 Other Fixed Object (<i>wall, building, tunnel, etc.</i>)</p> <p>45 Other Post, Pole, or Support</p> <p>46 Other Traffic Barrier</p> <p>47 Traffic Sign Support</p> <p>48 Traffic Signal Support</p> <p>49 Tree (<i>standing</i>)</p> <p>50 Utility Pole/Light Support</p> <p>51 Unknown Fixed Object</p> </td> </tr> </table>	<p><b>Non-Harmful Events</b></p> <p>01 Cross Centerline</p> <p>02 Cross Median</p> <p>03 End Departure (<i>T-intersection, dead-end, etc.</i>)</p> <p>04 Downhill Runaway</p> <p>05 Equipment Failure (<i>blown tire, brake failure, etc.</i>)</p> <p>06 Ran Off Roadway Left</p> <p>07 Ran Off Roadway Right</p> <p>08 Reentering Roadway</p> <p>09 Separation of Units</p> <p>10 Other Non-Harmful Event</p> <p><b>Non-Collision Harmful Events</b></p> <p>11 Cargo/Equipment Loss or Shift</p> <p>12 Fell/Jumped From Motor Vehicle</p> <p>13 Fire/Explosion</p> <p>14 Immersion, Full or Partial</p> <p>15 Jackknife</p> <p>16 Other Non-Collision Harmful Event</p> <p>17 Overturn/Rollover</p> <p>18 Thrown or Falling Object</p> <p><b>Collision With Person, Motor Vehicle, or Non-Fixed Object</b></p> <p>19 Animal (<i>live</i>)</p> <p>20 Motor Vehicle in Transport</p> <p>21 Other Non-Fixed Object</p> <p>22 Other Non-Motorist</p> <p>23 Parked Motor Vehicle</p> <p>24 Pedalcycle</p> <p>25 Pedestrian</p> <p>26 Railway Vehicle (<i>train, engine</i>)</p> <p>27 Strikes Object at Rest from MV in Transport</p> <p>28 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle</p> <p>29 Work Zone/Maintenance Equipment</p>	<p><b>Collision With Fixed Object</b></p> <p>30 Bridge Overhead Structure</p> <p>31 Bridge Pier or Support</p> <p>32 Bridge Rail</p> <p>33 Cable Barrier</p> <p>34 Concrete Traffic Barrier</p> <p>35 Culvert</p> <p>36 Curb</p> <p>37 Ditch</p> <p>38 Embankment</p> <p>39 Fence</p> <p>40 Guardrail End Terminal</p> <p>41 Guardrail Face</p> <p>42 Impact Attenuator/Crash Cushion</p> <p>43 Mailbox</p> <p>44 Other Fixed Object (<i>wall, building, tunnel, etc.</i>)</p> <p>45 Other Post, Pole, or Support</p> <p>46 Other Traffic Barrier</p> <p>47 Traffic Sign Support</p> <p>48 Traffic Signal Support</p> <p>49 Tree (<i>standing</i>)</p> <p>50 Utility Pole/Light Support</p> <p>51 Unknown Fixed Object</p>	<p><b>V21. 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<p><b>V22. Hit and Run</b> <input style="float: right;" type="text"/></p> <p>01 No, Did Not Leave Scene</p> <p>02 Yes, Driver or Car and Driver Left Scene</p>	<p><b>V23. Towed Due to Disabling Damage</b> <input style="float: right;" type="text"/></p> <p>00 Not towed</p> <p>01 Towed, But Not Due to Disabling Damage</p> <p>02 Towed Due to Disabling Damage</p>	<p><b>V24. Contributing Circumstances, Motor Vehicle</b> <input style="float: right;" type="text"/></p> <p>00 None</p> <p>01 Brakes</p> <p>02 Exhaust System</p> <p>03 Body, Doors</p> <p>04 Steering</p> <p>05 Power Train</p> <p>06 Suspension</p> <p>07 Tires</p> <p>08 Wheels</p> <p>09 Lights (<i>head, signal, tail</i>)</p> <p>10 Windows/Windshield</p> <p>11 Mirrors</p> <p>12 Wipers</p> <p>13 Truck Coupling/Trailer Hitch/Safety Chains</p> <p>98 Other</p> <p>99 Unknown</p>			

# MMUCC CRASH REPORT

## PERSON DATA ELEMENTS

### Level 1: All Persons Involved

<b>P1. Name of Person Involved</b> <input style="width: 100%; height: 20px;" type="text"/>	<b>P2. Date of Birth</b> Date of Birth (YYYY/MM/DD) <span style="margin-left: 50px;">Age </span> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> <input type="checkbox"/> Unknown										<b>P3. Sex</b> <input style="width: 40px; height: 20px;" type="text"/> 01 Female 02 Male 99 Unknown	<b>P5. Injury Status</b> <input style="width: 40px; height: 20px;" type="text"/> 01 <b>(K)</b> Fatal Injury** 02 <b>(A)</b> Suspected Serious Injury 03 <b>(B)</b> Suspected Minor Injury 04 <b>(C)</b> Possible Injury 05 <b>(O)</b> No Apparent Injury  **If attribute is selected, the Fatal Crash Section must be completed

<b>P4. Person Type</b> <b>S1 Person Type</b> <input style="width: 40px; height: 20px;" type="text"/> <b>Motorist</b> 01 Driver 02 Passenger 03 Occupant of MV Not in Transport  <b>Non-Motorist</b> 04 Bicyclist** 05 Other Cyclist** 06 Pedestrian** 07 Other Pedestrian ( <i>wheelchair, person in a building, skater, personal conveyance, etc.</i> )** 08 Occupant of a Non-Motor Vehicle Transportation Device** 09 Unknown Type of Non-Motorist**  99 Unknown  **If attribute is selected, the Non-Motorist Crash Section must be completed.		<b>S2 Incident Responder?</b> <input style="width: 40px; height: 20px;" type="text"/> 01 No  <b>Yes, Type of Incident Responder</b> 01 EMS 02 Fire 03 Police 04 Tow Operator 05 Transportation ( <i>i.e. maintenance workers, safety service patrol operators, etc.</i> )  98 Other 99 Unknown
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### Level 2: All Occupants

<b>P6. Occupant's Motor Vehicle Unit Number</b> <input style="width: 40px; height: 20px;" type="text"/>  Number to indicate in which motor vehicle the occupant was located	<b>P7. Seating Position</b> <input style="width: 40px; height: 20px;" type="text"/> (choose up to 2)  <b>Row</b> <input style="width: 40px; height: 20px;" type="text"/> 01 Front 02 Second 03 Third 04 Fourth 05 Other Row ( <i>bus, 15 passenger van, etc.</i> ) 06 Unknown Row  <b>Seat</b> 07 Left ( <i>usually the motor vehicle or motorcycle driver except for postal vehicles and some foreign vehicles</i> ) 08 Middle 09 Right 10 Unknown Seat  <b>Other Location</b> 11 Other Enclosed Cargo Area 12 Riding on Motor Vehicle Exterior ( <i>non-trailing unit</i> ) 13 Sleeper Section of Cab ( <i>truck</i> ) 14 Trailing Unit 15 Unenclosed Cargo Area  98 Not Applicable 99 Unknown	<b>P8. Restraint Systems/ Motorcycle Helmet Use</b> <input style="width: 40px; height: 20px;" type="text"/>  <b>Restraint Systems</b> 01 Booster Seat 02 Child Restraint System – Forward Facing 03 Child Restraint System – Rear Facing 04 Child Restraint – Type Unknown 05 Lap Belt Only Used 06 None Used – Motor Vehicle Occupant 07 Restraint Used – Type Unknown 08 Shoulder and Lap Belt Used 09 Shoulder Belt Only Used 10 Stretcher 11 Wheelchair  <b>Motorcycle Helmet Use</b> 12 DOT-Compliant Motorcycle Helmet 13 Not DOT-Compliant Motorcycle Helmet 14 Unknown If DOT-Compliant Motorcycle Helmet 15 No Helmet  97 Not Applicable 98 Other 99 Unknown  <b>S2 Any Indication of Improper Use?</b> <input style="width: 40px; height: 20px;" type="text"/> 01 No 02 Yes	<b>P9. Air Bag Deployed</b> <input style="width: 40px; height: 20px;" type="text"/> (choose up to 4) 00 Not Deployed  <b>Deployment</b> 01 Curtain 02 Front 03 Side 04 Other ( <i>knee, air belt, etc.</i> ) 05 Deployment Unknown  97 Not Applicable  <b>P10. Ejection</b> <input style="width: 40px; height: 20px;" type="text"/> 00 Not Ejected 01 Ejected, Partially 02 Ejected, Totally  97 Not Applicable 99 Unknown
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# MMUCC CRASH REPORT

## PERSON DATA ELEMENTS

Level 3: All Drivers

<p><b>P11. Driver License Jurisdiction</b></p> <p><b>S1 Type</b> <input style="width: 40px;" type="text"/></p> <p>00 Not Licensed</p> <p>01 Canada 02 Indian Nation 03 International License (<i>other than Mexico or Canada</i>) 04 Mexico 05 State 06 U.S. Government</p> <p>97 Not Applicable 99 Unknown</p> <p><b>S2 Name of Jurisdiction (ANSI Code)</b> <input style="width: 100%;" type="text"/></p> <p><small>Provide the specific State, Province or Nation indicated on the Driver's License (see Appendix E: ANSI State FIPS and USPS Codes or Appendix F: ISO 3166-2 Codes for Canada and Mexico)</small></p>	<p><b>P12. Driver License Number, Class, CDL and Endorsements</b></p> <p><b>S1 License Number</b> <input style="width: 100%;" type="text"/></p> <p><b>S2 Class</b> <input style="width: 40px;" type="text"/></p> <p>00 None</p> <p>01 Class A 02 Class B 03 Class C 04 Class M 05 Regular Driver License Class</p> <p>97 Not Applicable</p> <p><b>S3 Commercial Driver License (CDL)</b> <input style="width: 40px;" type="text"/></p> <p>01 No 02 Yes</p> <p><b>S4 Endorsements</b> <input style="width: 40px;" type="text"/></p> <p>00 None/Not Applicable</p> <p>01 H - Hazardous Materials 02 N - Tank Vehicle 03 P - Passenger 04 S - School 05 T - Double/Triple Trailers 06 X - Combination of Tank Vehicle and Hazardous Materials 07 Other non-commercial license endorsements (<i>e.g., motorcycle, etc.</i>)</p>	<p><b>P13. Speeding-Related</b> <input style="width: 40px;" type="text"/></p> <p>01 No 02 Exceeded Speed Limit 03 Racing 04 Too Fast for Conditions</p> <p>99 Unknown</p> <p><b>P14. Driver Actions at Time of Crash (choose up to 4)</b> <input style="width: 40px;" type="text"/></p> <p>00 No Contributing Action</p> <p>01 Disregarded Other Road Markings 02 Disregarded Other Traffic Sign 03 Failed to Keep in Proper Lane 04 Failed to Yield Right-of-Way 05 Followed Too Closely 06 Improper Backing 07 Improper Passing 08 Improper Turn 09 Operated Motor Vehicle in Inattentive, Careless, Negligent, or Erratic Manner 10 Operated Motor Vehicle in Reckless or Aggressive Manner 11 Over-Correcting/Over-Steering 12 Ran Off Roadway 13 Ran Red Light 14 Ran Stop Sign 15 Swerved or Avoided Due to Wind, Slippery Surface, Motor Vehicle, Object, Non-Motorist in Roadway, etc. 16 Wrong Side or Wrong Way</p> <p>98 Other Contributing Action 99 Unknown</p> <p><b>P15. Violation Codes (choose up to 2)</b> <input style="width: 40px;" type="text"/></p> <p>00 No Violation <input style="width: 40px;" type="text"/></p> <p style="text-align: center;"><i>State Violation Code(s)</i></p> <p>99 Unknown</p>	<p><b>P16. Driver License Restrictions</b> </p> <p><b>S1 Driver License Restrictions (choose up to 3)</b> <input style="width: 40px;" type="text"/></p> <p>00 None <input style="width: 40px;" type="text"/></p> <p>01 Alcohol Interlock Device 02 CDL Intrastate Only 03 Corrective Lenses 04 Farm Waiver 05 Except Class A Bus 06 Except Class A and Class B Bus 07 Except Tractor-Trailer 08 Intermediate License Restrictions 09 Learner's Permit Restrictions 10 Limited to Daylight Only 11 Limited to Employment 12 Limited-Other 13 Mechanical Devices (<i>special brakes, hand controls, or other adaptive devices</i>) 14 Military Vehicles Only 15 Motor Vehicles Without Air Brakes 16 Outside Mirror 17 Prosthetic Aid</p> <p>98 Other</p> <p><b>S2 Alcohol Interlock Present?</b> <input style="width: 40px;" type="text"/></p> <p>01 No 02 Yes</p> <p>99 Unknown</p> <p><b>P17. Driver License Status</b> </p> <p><b>S1 Type Applicable for This Person</b> <input style="width: 40px;" type="text"/></p> <p>01 Non-CDL Driver license 02 Non-CDL Restricted Driver license (<i>Learner's permit, Temporary/Limited, Graduated Driver license, etc.</i>) 03 Commercial Driver License (CDL)</p> <p><b>S2 Status</b> <input style="width: 40px;" type="text"/></p> <p>00 Not Licensed</p> <p>01 Canceled or Denied 02 Disqualified (CDL) 03 Expired 04 Revoked 05 Suspended 06 Valid License</p> <p>99 Unknown</p>
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# MMUCC CRASH REPORT

## PERSON DATA ELEMENTS

### Level 4: All Drivers and Non-Motorists

<p><b>P18. Distracted By</b></p> <p><b>S1 Action</b> <input style="width: 50px;" type="text"/></p> <p>00 Not Distracted</p> <p>01 Talking/listening</p> <p>02 Manually Operating (<i>texting, dialing, playing game, etc.</i>)</p> <p>03 Other Action (<i>looking away from task, etc.</i>)</p> <p>99 Unknown</p> <p><b>S2 Source</b> <input style="width: 50px;" type="text"/></p> <p>01 Hands-Free Mobile Phone</p> <p>02 Hand-Held Mobile Phone</p> <p>03 Other Electronic Device</p> <p>04 Vehicle-Integrated Device</p> <p>05 Passenger/Other Non-Motorist</p> <p>06 External (<i>to vehicle/non-motorist area</i>)</p> <p>07 Other Distraction (<i>animal, food, grooming</i>)</p> <p>97 Not Applicable (<i>Not Distracted</i>)</p> <p>99 Unknown</p>	<p><b>P19. Condition at Time of the Crash</b> (<i>choose up to 2</i>) <input style="width: 50px;" type="text"/></p> <p>00 Apparently Normal <input style="width: 50px;" type="text"/></p> <p>01 Asleep or Fatigued</p> <p>02 Emotional (<i>depressed, angry, disturbed, etc.</i>)</p> <p>03 Ill (<i>sick</i>), Fainted</p> <p>04 Physically Impaired</p> <p>05 Under the Influence of Medications/Drugs/Alcohol</p> <p>97 Not Applicable</p> <p>98 Other</p> <p>99 Unknown</p> <p><b>P20. Law Enforcement Suspects Alcohol Use</b> <input style="width: 50px;" type="text"/></p> <p>01 No</p> <p>02 Yes</p> <p>99 Unknown</p>	<p><b>P21. Alcohol Test</b></p> <p><b>S1 Test Status</b> <input style="width: 50px;" type="text"/></p> <p>00 Test Not Given</p> <p>01 Test Given</p> <p>02 Test Refused</p> <p>99 Unknown if Tested</p> <p><b>S2 Type of Test</b> <input style="width: 50px;" type="text"/></p> <p>01 Blood</p> <p>02 Breath</p> <p>03 Urine</p> <p>97 Not Applicable (<i>Test Not Given</i>)</p> <p>98 Other</p> <p><b>S3 BAC Test Result</b> <input style="width: 50px;" type="text"/></p> <p>Value Value</p> <p>01 Pending</p> <p>97 Not Applicable (<i>Test Not Given</i>)</p> <p>99 Unknown</p> <p><b>P22. Law Enforcement Suspects Drug Use</b> <input style="width: 50px;" type="text"/></p> <p>01 No</p> <p>02 Yes</p> <p>99 Unknown</p>	<p><b>P23. Drug Test</b></p> <p><b>S1 Test Status</b> <input style="width: 50px;" type="text"/></p> <p>00 Test Not Given</p> <p>01 Test Given</p> <p>02 Test Refused</p> <p>99 Unknown if Tested</p> <p><b>S2 Type of Test</b> <input style="width: 50px;" type="text"/></p> <p>01 Blood</p> <p>02 Saliva</p> <p>03 Urine</p> <p>97 Not Applicable (<i>Test Not Given</i>)</p> <p>98 Other</p> <p><b>S3 Drug Test Result</b> <input style="width: 50px;" type="text"/></p> <p>(<i>choose up to 4</i>)</p> <p>01 Negative</p> <p><b>Positive Test Results</b></p> <p>02 Amphetamine <input style="width: 50px;" type="text"/></p> <p>03 Cocaine <input style="width: 50px;" type="text"/></p> <p>04 Marijuana <input style="width: 50px;" type="text"/></p> <p>05 Opiate</p> <p>06 Other Controlled Substance</p> <p>07 PCP</p> <p>08 Other Drug (<i>excludes post-crash drugs</i>)</p> <p>97 Not Applicable (<i>Test Not Given</i>)</p> <p>99 Unknown</p>
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### Level 5: All Injured

<p><b>P24. Transported to First Medical Facility By</b></p> <p><b>S1 Source of Transport to First Medical Facility</b> <input style="width: 50px;" type="text"/></p> <p>00 Not Transported</p> <p>01 EMS Air</p> <p>02 EMS Ground</p> <p>03 Law Enforcement</p> <p>98 Other</p> <p>99 Unknown</p> <p><b>S2 EMS Response Agency Identifier</b></p> <p><input style="width: 100%;" type="text"/></p> <p><b>S3 EMS Response Run Number</b></p> <p><input style="width: 100%;" type="text"/></p> <p><b>S4 Medical Facility Receiving Patient</b></p> <p><input style="width: 100%;" type="text"/></p>	<p><b>P25. Injury Area</b> <input style="width: 50px;" type="text"/></p> <p>01 Head</p> <p>02 Face</p> <p>03 Neck</p> <p>04 Upper Extremity</p> <p>05 Thorax (chest)</p> <p>06 Spine</p> <p>07 Abdomen and Pelvis</p> <p>08 Lower Extremity</p> <p>09 Unspecified</p> <p><b>P27. Injury Severity</b> <input style="width: 50px;" type="text"/></p> <p>01 Fatal</p> <p>02 Serious</p> <p>03 Moderate</p> <p>04 Minor</p> <p>05 No Injury</p> <p>99 Unknown</p>	<p><b>P26. Injury Diagnosis</b> <input style="width: 50px;" type="text"/></p> <div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div> <p>Description of the injury according to data elements included in the files being linked such as the body areas and types of injuries listed on the crash and EMS records and/or the ICD-10 codes listed on the hospital discharge records.</p>
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# MMUCC CRASH REPORT

## ROADWAY DATA ELEMENTS

<b>R1. Bridge/Structure Identification Number</b> <input style="width: 100%; height: 20px;" type="text"/>	<b>R2. Roadway Curvature</b> (specify up to 3) Curve Radius: <input style="width: 80%; height: 20px;" type="text"/> Length: <input style="width: 80%; height: 20px;" type="text"/> Superelevation: <input style="width: 80%; height: 20px;" type="text"/> <input type="checkbox"/> Not Applicable	<b>R3. Grade</b> <b>S1</b> Direction of Slope: <input style="width: 80%; height: 20px;" type="text"/> Up (+) or Down (-) <b>S2</b> Percent of Slope: <input style="width: 80%; height: 20px;" type="text"/> Nearest Percent of Slope
<b>R4. Part of National Highway System</b> <input style="width: 20px; height: 20px;" type="checkbox"/> 01 No 02 Yes  99 Unknown	<b>R6. Annual Average Daily Traffic</b> <b>S1</b> AADT (Year): <input style="width: 80%; height: 20px;" type="text"/>  <b>S2</b> AADT: <input style="width: 80%; height: 20px;" type="text"/>  <b>S3</b> Truck (over 10,000 lbs.) Count or Percentage: <input style="width: 80%; height: 20px;" type="text"/>  <b>S4</b> Motorcycle Count or Percentage: <input style="width: 80%; height: 20px;" type="text"/>	<b>R10. Railway Crossing ID</b> <input style="width: 80%; height: 20px;" type="text"/>  <b>R12. Pavement Markings, Longitudinal</b> <b>S1</b> Edgeline Presence/Type: <input style="width: 20px; height: 20px;" type="text"/> 01 No Marked Edgeline 02 Standard Width Edgeline 03 Wide Edgeline  98 Other  <b>S2</b> Centerline Presence/Type: <input style="width: 20px; height: 20px;" type="text"/> 01 No Marked Centerline 02 Centerline With Centerline Rumble Strip 03 Standard Centerline Markings  <b>S3</b> Lane Line Markings: <input style="width: 20px; height: 20px;" type="text"/> 01 No Lane Markings 02 Standard Lane Line 03 Wide Lane Line
<b>R5. Roadway Functional Class</b> <input style="width: 20px; height: 20px;" type="checkbox"/> <b>Rural</b> 01 Interstate 02 Principal Arterial - Other Freeway or Expressway 03 Principal Arterial - Other 04 Minor Arterial 05 Major Collector 06 Minor Collector 07 Local 08 Unknown Rural  <b>Urban</b> 09 Interstate 10 Principal Arterial - Other Freeway or Expressway 11 Principal Arterial - Other 12 Minor Arterial 13 Collector 14 Local 15 Unknown Urban  99 Unknown	<b>R7. Widths of Lane(s) and Shoulder(s)</b> <b>S1</b> Lane Width (Width in feet): <input style="width: 80%; height: 20px;" type="text"/>  <b>S2</b> Left Shoulder Width (Width in feet): <input style="width: 80%; height: 20px;" type="text"/>  <b>S3</b> Right Shoulder Width (Width in feet): <input style="width: 80%; height: 20px;" type="text"/>	<b>R14. Mainline Number of Lanes at Intersection</b> <input style="width: 20px; height: 20px;" type="text"/> 00 Not an Intersection or Interchange  01 One Lane 02 Two Lanes 03 Three Lanes 04 Four to Six Lanes 05 Seven or More Lanes  99 Unknown  <b>R15. Cross-Street Number of Lanes at Intersection</b> <input style="width: 20px; height: 20px;" type="text"/> 00 Not an Intersection or Interchange  01 One Lane 02 Two Lanes 03 Three Lanes 04 Four to Six Lanes 05 Seven or More Lanes  99 Unknown
<b>R8. Width of Median</b> Width of Median (feet): <input style="width: 80%; height: 20px;" type="text"/>	<b>R11. Roadway Lighting</b> <input style="width: 20px; height: 20px;" type="checkbox"/> 01 Continuous Lighting on Both Sides 02 Continuous Lighting on One Side 03 No Lighting 04 Spot Illumination on Both Sides 05 Spot Illumination on One Side	<b>R13. Presence/Type of Bicycle Facility</b> <b>S1</b> Facility: <input style="width: 20px; height: 20px;" type="text"/> 00 None  01 Marked Bicycle Lane 02 Separate Bicycle Path/Trail 03 Unmarked Paved Shoulder 04 Wide Curb Lane  99 Unknown  <b>S2</b> Signed Bicycle Route: <input style="width: 20px; height: 20px;" type="text"/> 01 No 02 Yes  97 Not Applicable 99 Unknown
<b>R9. Access Control</b> <input style="width: 20px; height: 20px;" type="checkbox"/> 01 No Access Control 02 Partial Access Control 03 Full Access Control	<b>R16. Total Volume of Entering Vehicles</b> <b>S1</b> AADT (Year): <input style="width: 80%; height: 20px;" type="text"/>  <b>S2</b> AADT: <input style="width: 80%; height: 20px;" type="text"/>	

## FATAL SECTION DATA ELEMENTS

Level 3: All Drivers	Level 4: All Drivers and Non-Motorists																																																									
<b>F1. Attempted Avoidance Maneuver</b> <input style="width: 20px; height: 20px;" type="checkbox"/> 00 No Driver Present/ Unknown if Driver Present  01 Accelerating 02 Accelerating and Steering Left 03 Accelerating and Steering Right 04 Braking and Steering Left 05 Braking and Steering Right 06 Braking (Lockup) 07 Braking (Lockup Unknown) 08 Braking (No Lockup) 09 No Avoidance Maneuver 10 Releasing Brakes 11 Steering Left 12 Steering Right  98 Other Actions 99 Unknown	<b>F2. Alcohol Test Type and Results</b> <table style="width: 100%;"> <tr> <th style="width: 30%;">S1 Test Type</th> <th style="width: 30%;">S2 Test Result</th> </tr> <tr> <td>00 Test Not Given</td> <td>000-939 Actual Value</td> </tr> <tr> <td>01 Breath Test (AC)</td> <td>940 0.94 or Greater</td> </tr> <tr> <td>02 Blood</td> <td>996 Test Not Given</td> </tr> <tr> <td>03 Blood Clot</td> <td>997 AC Test Performed, Results Unknown</td> </tr> <tr> <td>04 Blood Plasma/Serum</td> <td>998 Positive Reading with No Actual Value</td> </tr> <tr> <td>05 Liver</td> <td>999 Unknown if Tested</td> </tr> <tr> <td>06 Preliminary Breath Test (PBT)</td> <td></td> </tr> <tr> <td>07 Unknown if Tested</td> <td></td> </tr> <tr> <td>08 Urine</td> <td></td> </tr> <tr> <td>09 Vitreous</td> <td></td> </tr> <tr> <td>98 Other Test Type</td> <td></td> </tr> <tr> <td>99 Unknown Test Type</td> <td></td> </tr> </table>	S1 Test Type	S2 Test Result	00 Test Not Given	000-939 Actual Value	01 Breath Test (AC)	940 0.94 or Greater	02 Blood	996 Test Not Given	03 Blood Clot	997 AC Test Performed, Results Unknown	04 Blood Plasma/Serum	998 Positive Reading with No Actual Value	05 Liver	999 Unknown if Tested	06 Preliminary Breath Test (PBT)		07 Unknown if Tested		08 Urine		09 Vitreous		98 Other Test Type		99 Unknown Test Type		<b>F3. Drug Test Type and Results</b> <table style="width: 100%;"> <tr> <th style="width: 30%;">S1 Test Type</th> <th style="width: 30%;">S2 Test Result</th> </tr> <tr> <td>00 Test Not Given</td> <td>000 Test Not Given</td> </tr> <tr> <td>01 Blood</td> <td>001 Tested No Drugs Found/Negative</td> </tr> <tr> <td>02 Both Blood and Urine</td> <td>100-295 Narcotic*</td> </tr> <tr> <td>03 Unknown Test Type</td> <td>300-395 Depressant*</td> </tr> <tr> <td>04 Urine</td> <td>400-495 Stimulant*</td> </tr> <tr> <td></td> <td>500-595 Hallucinogen*</td> </tr> <tr> <td></td> <td>600-695 Cannabinoid*</td> </tr> <tr> <td>98 Other Test Type</td> <td>700-795 Phencyclidine (PCP)*</td> </tr> <tr> <td>99 Unknown if Tested</td> <td>800-895 Anabolic Steroid*</td> </tr> <tr> <td></td> <td>900-995 Inhalant*</td> </tr> <tr> <td></td> <td>996 Other Drug</td> </tr> <tr> <td></td> <td>997 Tested for Drugs, Results Unknown</td> </tr> <tr> <td></td> <td>998 Tested for Drugs, Drugs Found, Type Unknown/Positive</td> </tr> <tr> <td></td> <td>999 Unknown if Tested</td> </tr> </table>	S1 Test Type	S2 Test Result	00 Test Not Given	000 Test Not Given	01 Blood	001 Tested No Drugs Found/Negative	02 Both Blood and Urine	100-295 Narcotic*	03 Unknown Test Type	300-395 Depressant*	04 Urine	400-495 Stimulant*		500-595 Hallucinogen*		600-695 Cannabinoid*	98 Other Test Type	700-795 Phencyclidine (PCP)*	99 Unknown if Tested	800-895 Anabolic Steroid*		900-995 Inhalant*		996 Other Drug		997 Tested for Drugs, Results Unknown		998 Tested for Drugs, Drugs Found, Type Unknown/Positive		999 Unknown if Tested
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03 Blood Clot	997 AC Test Performed, Results Unknown																																																									
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08 Urine																																																										
09 Vitreous																																																										
98 Other Test Type																																																										
99 Unknown Test Type																																																										
S1 Test Type	S2 Test Result																																																									
00 Test Not Given	000 Test Not Given																																																									
01 Blood	001 Tested No Drugs Found/Negative																																																									
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99 Unknown if Tested	800-895 Anabolic Steroid*																																																									
	900-995 Inhalant*																																																									
	996 Other Drug																																																									
	997 Tested for Drugs, Results Unknown																																																									
	998 Tested for Drugs, Drugs Found, Type Unknown/Positive																																																									
	999 Unknown if Tested																																																									

\*See specific drug listings in Appendix I: FARS Coding Manual – Alphabetical Drug Listing or Appendix J: FARS Coding Manual – Drugs By Category Type.

# MMUCC CRASH REPORT

## LARGE VEHICLES AND HAZARDOUS MATERIAL SECTION

Level 3: All Drivers	All LVHM Vehicle(s)		
<p><b>LV1. CMV License Status and Compliance with CDL Endorsements</b></p> <p><b>S1 CMV License Status</b> <input style="width: 50px;" type="text"/></p> <p>00 No CDL 01 Cancelled or Denied 02 Disqualified 03 Expired</p> <p>04 Revoked 05 Suspended 06 Learner's Permit 07 Valid</p> <p>98 Other – Not Valid 99 Unknown License Status</p> <p><b>S2 Compliance with CDL Endorsement(s)</b> <input style="width: 50px;" type="text"/></p> <p>00 No Endorsement(s) Required for the Vehicle 01 Endorsement(s) Required, Complied With 02 Endorsement(s) Required, Not Complied With 03 Endorsement(s) Required, Compliance Unknown</p> <p>99 Unknown if Required</p>	<p><b>LV3. Trailer VIN(s)</b></p> <p><b>S1 First Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>VIN 1</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p> <p><b>S2 Second Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>VIN 2</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p> <p><b>S3 Third Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>VIN 3</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p>	<p><b>LV5. Trailer Model(s)</b></p> <p><b>S1 First Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>Model 1</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p> <p><b>S2 Second Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>Model 2</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p> <p><b>S3 Third Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>Model 3</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p>	<p><b>LV7. Motor Carrier Identification</b></p> <p><b>S1 Identification Type</b> <input style="width: 50px;" type="text"/></p> <p>01 US DOT Number 02 State Number</p> <p>97 Not Applicable 99 Unknown/Unable to Determine</p> <p><b>S2 Country/State Code</b> <input style="width: 50px;" type="text"/></p> <p><i>Non-US Country Code (e.g. Mexico or Canada) US State Code</i></p> <p><b>S3 Identification Number</b></p> <p><i>US DOT Number – up to 7 digits, right justified</i></p> <p><i>If not a US DOT Number, include State issued Identification Number and State</i></p> <p><input style="width: 150px;" type="text"/></p> <p><b>S4 Name</b></p> <p><input style="width: 150px;" type="text"/></p> <p>Motor Carrier Name</p> <p><b>S5 Motor Carrier Address</b></p> <p><input style="width: 150px;" type="text"/></p> <p>Street Address 1</p> <p><input style="width: 150px;" type="text"/></p> <p>Street Address 2</p> <p><input style="width: 150px;" type="text"/></p> <p>City, State Zip</p> <p><input style="width: 150px;" type="text"/></p> <p>Country</p> <p><b>S6 Type of Carrier</b> <input style="width: 50px;" type="text"/></p> <p>01 Interstate Carrier 02 Intrastate Carrier 03 Not in Commerce/Government 04 Not in Commerce/Other Truck or Bus</p>
<p><b>LV2. Trailer License Plate Number</b></p> <p><b>S1 First Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>License Plate 1</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>)</p> <p><b>S2 Second Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>License Plate 2</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>)</p> <p><b>S3 Third Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>License Plate 3</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>)</p>	<p><b>LV4. Trailer Make(s)</b></p> <p><b>S1 First Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>Make 1</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p> <p><b>S2 Second Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>Make 2</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p> <p><b>S3 Third Trailer Behind Tractor</b></p> <p><input style="width: 150px;" type="text"/></p> <p>Make 3</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p>	<p><b>LV6. Trailer Model Year(s)</b></p> <p><b>S1 First Trailer Behind Tractor</b></p> <p><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/></p> <p>Year 1</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p> <p><b>S2 Second Trailer Behind Tractor</b></p> <p><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/></p> <p>Year 2</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p> <p><b>S3 Third Trailer Behind Tractor</b></p> <p><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/><input style="width: 50px;" type="text"/></p> <p>Year 3</p> <p><input type="checkbox"/> Not Applicable (<i>Bus or truck with no trailing units</i>) <input type="checkbox"/> Unknown (<i>information unavailable</i>)</p>	

# MMUCC CRASH REPORT

## LARGE VEHICLES AND HAZARDOUS MATERIAL SECTION (Cont.)

<p><b>LV8. Vehicle Configuration</b></p> <p><b>S1 Vehicle Configuration</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>01 Vehicle 10,000 lbs. or less placarded for hazardous materials <input style="width: 40px; height: 20px;" type="text"/></p> <p>02 Bus/Large Van (seats for 9–15 occupants, including driver)</p> <p>03 Bus (seats more than 15 occupants, including driver)</p> <p>04 Single-Unit Truck (2-axle and GVWR more than 10,000 lbs.)</p> <p>05 Single-Unit Truck (3 or more axles)</p> <p>06 Truck Pulling Trailer(s)</p> <p>07 Truck Tractor (bobtail)</p> <p>08 Truck Tractor/Semi-Trailer</p> <p>09 Truck Tractor/Double</p> <p>10 Truck Tractor/Triple</p> <p>11 Truck More Than 10,000 lbs., cannot classify</p> <p>99 Unknown</p> <p><b>S2 Special Sizing</b> (choose up to 4) <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/></p> <p>00 No special sizing <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/></p> <p>01 Over-height</p> <p>02 Over-length</p> <p>03 Over-weight</p> <p>04 Over-width</p> <p><b>S3 Permitted?</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>01 Non-permitted Load</p> <p>02 Permitted Load</p>	<p><b>LV9. Cargo Body Type</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>00 No Cargo Body (bobtail, light MV with hazardous materials [HM] placard, etc.)</p> <p>01 Bus</p> <p>02 Auto Transporter</p> <p>03 Cargo Tank</p> <p>04 Concrete Mixer</p> <p>05 Dump</p> <p>06 Flatbed</p> <p>07 Garbage/Refuse</p> <p>08 Grain/Chips/Gravel</p> <p>09 Intermodal Container Chassis</p> <p>10 Log</p> <p>11 Pole-Trailer</p> <p>12 Van/Enclosed Box</p> <p>13 Vehicle Towing Another Vehicle</p> <p>97 Not Applicable (MV 10,000 lbs. or less, not displaying HM placard)</p> <p>98 Other</p> <p>99 Unknown</p>	<p><b>LV10. Hazardous Materials (Cargo Only)</b></p> <p><b>S1 Hazardous Materials ID</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>0000 No HM Placard Displayed</p> <p>xxxx 4-digit Hazardous Materials ID number or name taken from the middle of the diamond or from rectangular box</p> <p>0999 Unknown</p> <p><b>S2 Hazardous Materials Class</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>00 No HM Placard Displayed</p> <p>x 1-digit Hazardous Materials Class number from the bottom of diamond</p> <p>99 Unknown</p> <p><b>S3 Release of hazardous materials from a cargo compartment (e.g. trailer), cargo container (e.g. tank) or from a package?</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>01 No</p> <p>02 Yes</p> <p>97 Not Applicable</p> <p>99 Unknown if Released</p>	<p><b>LV11. Total Number of Axles</b></p> <p><b>S1 Truck Tractor</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>xx Number of Axles</p> <p>99 Unknown (information unavailable)</p> <p><b>S2 First Trailer Behind Tractor</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>xx Number of Axles</p> <p>97 Not Applicable (Bus or truck with no trailing units)</p> <p>99 Unknown (information unavailable)</p> <p><b>S3 Second Trailer Behind Tractor</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>xx Number of Axles</p> <p>97 Not Applicable (Bus or truck with no trailing units)</p> <p>99 Unknown (information unavailable)</p> <p><b>S4 Third Trailer Behind Tractor</b> <input style="width: 40px; height: 20px;" type="text"/></p> <p>xx Number of Axles</p> <p>97 Not Applicable (Bus or truck with no trailing units)</p> <p>99 Unknown (information unavailable)</p>
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# MMUCC CRASH REPORT

## NON-MOTORIST SECTION DATA ELEMENTS

<b>NM1. Unit Number of Motor Vehicle Striking Non-Motorist</b> <input style="width: 40px; height: 20px;" type="text"/>	<b>NM2. Non-Motorist Action/Circumstance Prior to Crash</b> <b>S1 Action/Circumstance</b> <input style="width: 40px; height: 20px;" type="text"/> 00 None  01 Adjacent to Roadway (e.g., Shoulder, Median) 02 Crossing Roadway 03 In Roadway – Other 04 Waiting to Cross Roadway 05 Walking/Cycling Along Roadway Against Traffic (In or Adjacent to Travel Lane) 06 Walking/Cycling Along Roadway with Traffic (In or Adjacent to Travel Lane) 07 Walking/Cycling on Sidewalk 08 Working in Trafficway (Incident Response)  98 Other 99 Unknown  <b>S2 Origin/Destination</b> <input style="width: 40px; height: 20px;" type="text"/> 01 Going to or from School (K-12) 02 Going to or from Transit  97 Not Applicable 99 Unknown	<b>NM3. Non-Motorist Contributing Action(s)/Circumstance(s)</b> <input style="width: 40px; height: 20px;" type="text"/> (choose up to 2) <input style="width: 40px; height: 20px;" type="text"/> 00 None (No Improper Action)  01 Dart/Dash 02 Disabled Vehicle Related (Working on, Pushing, Leaving/Approaching) 03 Entering/Exiting Parked/Standing Vehicle 04 Failure to Obey Traffic Signs, Signals, or Officer 05 Failure to Yield Right-Of-Way 06 Improper Passing 07 Improper Turn/Merge 08 Inattentive (Talking, Eating, etc.) 09 In Roadway Improperly (Standing, Lying, Working, Playing) 10 Not Visible (Dark Clothing, No Lighting, etc.) 11 Wrong-Way Riding or Walking  98 Other 99 Unknown	<b>NM4. Non-Motorist Location at Time of Crash</b> <input style="width: 40px; height: 20px;" type="text"/>  <b>Roadway Facility</b> 01 Intersection – Marked Crosswalk 02 Intersection – Unmarked Crosswalk 03 Intersection – Other 04 Median/Crossing Island 05 Midblock – Marked Crosswalk 06 Shoulder/Roadside 07 Travel Lane – Other Location  <b>Bicycle Facility</b> 08 Signed Route (no pavement marking) 09 Shared Lane Markings 10 On-Street Bike Lanes 11 On-Street Buffered Bike Lanes 12 Separated Bike Lanes 13 Off-Street Trails/Sidepaths  <b>Other Facility</b> 14 Driveway Access 15 Non-Trafficway Area 16 Shared-Use Path or Trail 17 Sidewalk  98 Other 99 Unknown
<b>NM5. Non-Motorist Safety Equipment (choose up to 5)</b>	<input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/>	<b>NM6. Initial Contact Point on Non-Motorist</b> <input style="width: 40px; height: 20px;" type="text"/> 12 Front 03 Right 06 Rear 09 Left  99 Unknown	

## DYNAMIC DATA ELEMENTS

<b>DV1. Motor Vehicle Automated Driving System(s)</b>	
<b>S1 Automation System or Systems in Vehicle</b> <input style="width: 40px; height: 20px;" type="text"/> 01 Yes 02 No  99 Unknown	<b>S3 Automation System Levels Engaged at Time of Crash</b> <input style="width: 40px; height: 20px;" type="text"/> 00 No Automation 01 Driver Assistance 02 Partial Automation 03 Conditional Automation 04 High Automation 05 Full Automation  06 Automation Level Unknown  99 Unknown
<b>S2 Automation System Levels in Vehicle</b> <input style="width: 40px; height: 20px;" type="text"/> 00 No Automation 01 Driver Assistance 02 Partial Automation 03 Conditional Automation 04 High Automation 05 Full Automation  06 Automation Level Unknown  99 Unknown	