

**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: 11%

13/120 fields

**COLORADO CRASH REPORT SUMMARY**

DR3447 Format — Public Record Data — Generated by CrashStory

**PAGE A — CRASH SCENE INFORMATION**

Page 1

|   |  |                         |                           |                                    |                          |   |                     |                           |                   |
|---|--|-------------------------|---------------------------|------------------------------------|--------------------------|---|---------------------|---------------------------|-------------------|
| CASE NUMBER<br>DEN-DP2015248406   |  | CRASH ID<br>--          |                           | AGENCY ORI<br>6                    |                          | AGENCY NAME<br>Denver Police Department |                     | FORM VERSION<br>—         |                   |
| DATE OF CRASH<br>05/06/2015   |  | TIME OF CRASH<br>03:40  |                           | 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      |                   |
| 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 <b>Alcohol</b> Drug   Marijuana   Speed Related   Hit & Run   Juveniles |  |                         |                           |                                    |                          |   |                     |                           |                   |
| <b>CRASH LOCATION</b>   |  |                         |                           |                                    |                          |   |                     |                           |                   |
| LATITUDE<br>39.74585  |  | LONGITUDE<br>-104.98971 |                           | COUNTY<br>Denver                   |                          |   | CITY/TOWN<br>Denver |                           | URBAN/RURAL<br>—  |
| ON ROAD / STREET<br>1735 WELTON ST  |  |                         |                           | INTERSECTING / REFERENCE ROAD<br>— |                          |   | MILEPOINT<br>—      |                           | HIGHWAY #<br>—    |
| ROADWAY TYPE<br>—   |  | SPEED LIMIT (MPH)<br>—  |                           | TRAFFIC CONTROL<br>—               |                          | LOCATION<br>OTHER                       |                     | LANE POSITION<br>—        | ROAD SECTION<br>— |
| <b>HARMFUL EVENT SEQUENCE</b>   |  |                         |                           |                                    |                          |   |                     |                           |                   |
| 1ST HARMFUL EVENT<br>—  |  |                         | 2ND HARMFUL EVENT<br>—    |                                    |                          | 3RD HARMFUL EVENT<br>—                  |                     | 4TH HARMFUL EVENT<br>—    |                   |
| MOST HARMFUL EVENT<br>—   |  |                         |                           |                                    | TOP TRAFFIC OFFENSE<br>— |   |                     |                           |                   |
| <b>ROAD CHARACTERISTICS</b>   |  |                         |                           |                                    |                          |   |                     |                           |                   |
| 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>—          |                   |
| <b>ENVIRONMENTAL CONDITIONS</b>   |  |                         |                           |                                    |                          |   |                     |                           |                   |
| LIGHTING<br>—   |  |                         | ROAD CONDITION<br>—       |                                    |                          | WEATHER (PRIMARY)<br>—                  |                     | WEATHER (SECONDARY)<br>—  |                   |

**PAGE B — NARRATIVE**

TRAF - ACCIDENT - DUI/DUID . Neighborhood: CBD. Fatality mode: . Serious injury mode:

## VEHICLE / OCCUPANT INFORMATION

Case: DEN-DP2015248406 — 05/06/2015 — 1735 WELTON ST

## PAGE C — MOTORIZED TRAFFIC UNITS

## TRAFFIC UNIT #1

|   |                                    |                            |                                    |                             |                                    |                                 |
|---|------------------------------------|----------------------------|------------------------------------|-----------------------------|------------------------------------|---------------------------------|
| VEHICLE TYPE<br>PICKUP_TRUCK  | 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>NORTH  | 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>OTHER  | 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>UNKNOWN   | VEHICLE MOVEMENT<br>UNKNOWN      |                            | 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>—           |                            |                                    |                                 |
| <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 |                                  |                            |                                    |                            |                                    |                                 |