

HB 10-1014 Report
Calendar Year 2017 Annual Report of Fatal Crashes
in State Highway Work Areas
Colorado Department of Transportation

Section 1. Purpose:

The HB 10-1014, now encoded as CRS 42-4-1612, requires the Department of Transportation and the Colorado State Patrol to annually present by February 15, a joint report to the Transportation and Energy Committee of the House of Representatives and the Transportation Committee of the Senate regarding fatal crashes occurring in state highway work areas.

Section 2. Calendar Year 2017 Work Zone Fatality Data:

CDOT conducted an analysis of data derived from the Fatality Analysis Reporting System (FARS) to determine the number and attributes of work zone fatalities occurring in state highway work areas during Calendar Year 2017. The FARS System contains data on all vehicle crashes in the United States that occur on a public roadway and involves a fatality. A couple of comments about the query are necessary:

- CDOT has chosen to use the ANSI D-16.1-2007 (Manual on Classification of Motor Vehicle Traffic Accidents) federal definition of “work zones” to determine the total number of crashes/fatalities. This standard does not differentiate between construction and maintenance work zones.
- In keeping with the state statutory definition of “construction zones”, troopers and other officers investigating crashes have not indicated whether or not workers are present in the construction zone at the time of these fatal crashes. The legal definition does not differentiate between a construction zone with workers present and one without active work taking place.

As requested in HB 10-1014, the following information is provided:

A. Summary of total number of fatal crashes and total number of individuals killed

In Calendar Year 2017, there were a total of 13 fatal crashes statewide in state highway work zones in which 15 people died. This is eight more crashes and 10 more fatalities than 2016.

B. Categorization of total number of individuals killed (DOT employees, contractors or subcontractors, other individuals)

In Calendar Year 2017, one Subcontractor employee fatality, and 14 citizen fatalities occurred in work zones. There were no fatal crashes in state highway work areas that involved CDOT Employees or Contractors.

C. Copy of the accident reporting form for each fatal accident

Appendix A contains the accident reporting form for each of the 13 fatal accidents.

The crash summaries provided below are compiled from the Accident Report Form DR 2447, as completed by a law enforcement officer, and edited for readability. The actual redacted reports are attached in Appendix A. The Findings of investigations into each crash are provided by CDOT personnel responsible for the construction area, including: supervisors, traffic engineers, region safety officers, and other CDOT staff as applicable.

Crash #1

Date: 4/07/17

Location: CO 287, MM 307, Boulder County

Time: 4:50 P.M.

CDOT Construction Project: Yes

Region: 4

Vehicles: 2

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 2

Description: Vehicle #1 crossed center line and hit Vehicle #2 head on. Both drivers were killed. CSP noted this was a construction zone with 45 MPH signs posted.

Findings: No further findings were noted by CDOT.

Crash #2

Date: 5/03/17

Location: US Hwy 50 at Wills Blvd (MM313), Pueblo

Time: 7:42 P.M.

CDOT Construction Project: Yes

Region: 2

Vehicles: 2

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 traveling at a high rate of speed through construction zone when Vehicle #2 made a left turn in front of Vehicle #1 resulting in one fatality.

Findings: No further findings were noted by CDOT.

Crash #3

Date: 5/31/17

Location: US Hwy 85 at North 11th Ave, Weld County

Time: 10:55 A.M.

CDOT Construction Project: Yes

Region: 4

Vehicles: 2

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 traveling southbound on Hwy 85 drove into the northbound lane colliding with Vehicle #2 resulting in one fatality.

Findings: No further findings were noted by CDOT.

Crash #4

Date: 6/08/17

Location: Northbound I-25 at MM 259, Larimer County

Time: 3:35 P.M.

CDOT Construction Project: Yes

Region: 4

Vehicles: 2

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 traveling northbound on I-25 and veered to the right hitting a guard rail attenuator and then came into the center lane causing Vehicle #2 to skid to stop and Vehicle #2 hit Vehicle #1 resulting in one fatality.

Findings: No further findings were noted by CDOT.

Crash #5

Date: 6/26/17

Location: Hwy 392 at Weld CR 71, Weld County

Time: 07:10 A.M.

CDOT Construction Project: Yes

Region: 4

Vehicles: 3

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 was traveling eastbound at a high rate of speed approaching the construction zone. Vehicles #2 and #3 were stopped in a line of vehicles and were hit from the rear by Vehicle #1 resulting in one fatality. The driver of Vehicle #1 was not wearing a seatbelt.

Findings: All construction zone signage was appropriate and met guidelines.

Crash #6

Date: 7/14/17

Location: Northbound I-25 at 160th Ave, Adams County

Time: 3:30 A.M.

CDOT Construction Project: Yes

Region: 1

Vehicles: 2

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 was travelling northbound when it impacted Vehicle #2 (semi-truck related to the work) that was parked in the left lane. The lane was closed for construction. The driver of Vehicle #1 was killed.

Findings: All construction zone signage was appropriate and met guidelines.

Crash #7

Date: 8/20/17

Location: I-25 Near W. Cimarron St (Hwy 24), Colorado Springs

Time: 5:09 A.M.

CDOT Construction Project: Yes

Region: 2

Vehicles: 1

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Pedestrian was walking east bound in the traffic lanes of I-25 and was struck by Vehicle #2 resulting in the pedestrian fatality.

Findings: No further findings were noted by CDOT.

Crash #8

Date: 9/12/17

Location: Hwy 6 at MM 411, Logan County

Time: 2:46 P.M.

CDOT Construction Project: Yes

Region: 4

Vehicles: 2

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #2 stopped due to a construction flagger when was hit by Vehicle #1 resulting in driver fatality.

Findings: No further findings were noted by CDOT.

Crash #9

Date: 9/21/17

Location: Westbound I-70 at MM 182, Eagle County

Time: 4:12 P.M.

CDOT Construction Project: Yes

Region: 3

Vehicles: 1

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 was traveling westbound and crossed the median and eastbound lanes of traffic and rolled fatally injuring the driver.

Findings: No further findings were noted by CDOT.

Crash #10

Date: 10/06/17

Location: 10800 block of Hwy 85, Commerce City

Time: 7:45 P.M.

CDOT Construction Project: Yes

Region: 1

Vehicles: 2

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 was traveling northbound and crossed the median and rolled onto its top and struck Vehicle #2 who's driver suffered fatal injuries. Drugs/alcohol were suspected in this accident.

Findings: No further findings were noted by CDOT.

Crash #11

Date: 10/10/17

Location: I-25, MM 134, El Paso County

Time: 2:57 P.M.

CDOT Construction Project: Yes

Region: 2

Vehicles: 1

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 was traveling southbound and failed to negotiate a curve colliding with the guardrail and rolling the vehicle. Driver was ejected and suffered fatal injuries.

Findings: No further findings were noted by CDOT.

Crash #12

Date: 11/14/17

Location: Northbound I-25 at 144th Ave, Thornton

Time: 10:59 A.M.

CDOT Construction Project: Yes

Region: 1

Vehicles: 1

Fatal CDOT employee, contractor, sub-contractors: 1

Fatal Citizen: 1

Description: Vehicle #1 traveling northbound on 136th when the driver lost control and veered into the construction zone impacting a worker and rolling into the construction hole. Both parties were fatally injured.

Findings: All construction zone signage was appropriate and met guidelines.

Crash #13

Date: 12/18/17

Location: Westbound Hwy 34 at MM 70.9, Larimer County

Time: 11:32 A.M.

CDOT Construction Project: Yes

Region: 4

Vehicles: 1

Fatal CDOT employee, contractor, sub-contractors: No

Fatal Citizen: 1

Description: Vehicle #1 traveling westbound on Hwy 34 after turning around at a construction road closure. The road curved to the left and the driver failed to maintain control and rolled the vehicle, ejecting the driver who sustained fatal injuries.

Findings: No further findings were noted by CDOT.

Section 3. Work Zone Safety Program Update

HB 10-1014 requests a description of both ongoing and newly implemented measures taken by CDOT to prevent fatal crashes in work zones. A description of CDOT's Work Zone Safety and Mobility (WZSM) Process Review and a cooperative effort between CDOT and CSP related to the development and implementation of a statewide work zone safety campaign is provided below.

A. Work Zone Safety and Mobility (WZSM) Process Review

In September 2004, the Federal Highway Administration (FHWA) published updates to the work zone regulations at 23 CFR 630 Subpart J referred to as the *Work Zone Safety and Mobility Rule* (WZSM Rule). In December 2007, FHWA added new regulations at 23 CFR 630 Subpart K referred to as the *Temporary Traffic Control Devices Rule*. Both are applicable to all Federal-Aid Highway Projects with the intent to improve work zone management and decrease the likelihood of fatalities and injuries to road users and workers exposed to motorized traffic. The Safety and Mobility Rule was effective on October 12, 2007 and the Subpart K was effective on December 4, 2008.

The WZSM Rule requires a process review at least every two years to assess the effectiveness and consistency of work zone safety and mobility policies and practices at the project level for both design and construction. The review also evaluates CDOT's processes and procedures as they relate to WZSM at both the program and project levels. The current process review is scheduled for completion in February of 2018.

The following are the key actions taken by CDOT since the *Calendar Year 2016 Annual Report of Fatal Crashes in State Highway Work Areas*:

B. Work Zone Task Force Subgroups

- The Performance Measurement Subgroup has focused on: determining whether or not current policies and procedures need revising; determining what data to capture and utilize in performance measures for both safety and mobility; conducting pilot projects to gather and analyze arterial, freeway, and interstate data; and assessing data collection systems for possible incorporation into CDOT practices.
- The Project Coordination Subgroup has: polled CDOT construction personnel to gather information regarding current project coordination efforts during the design and construction phases; obtained CDOT Executive Management input to determine their expectations in the area of project coordination; and is now focused on elevating the best current practices and adding any needed elements to improve project coordination statewide.
- The Improved Training Subgroup has: met with representatives of the internal engineering, maintenance and general training programs to assess current work zone training offerings; begun exploring the feasibility of developing a multi-level work zone training program model similar to that of the Florida DOT; created a matrix of engineering and maintenance courses to be included in a more rigorous CDOT work zone training program; and identified funding for development of an updated work zone training curricula.
- The Work Zone Credibility Issues Subgroup has been working on revising current policies governing work zone speed reductions. They also searched for tools that will result in better Methods for Handling Traffic from both contractors and CDOT Maintenance; evaluated current standards and practices for possible improvements in temporary traffic control credibility; and are trying to determine how to get better overall compliance with CDOT's Lane Closure Strategies.

All of the Work Zone Safety and Mobility resources are available online to CDOT personnel for use in designing and constructing projects, many of which can be found at the following public link: <https://www.codot.gov/library/traffic/lane-close-work-zone-safety>.

C. Traffic Control Reviews

Annually, CDOT conducts inspections of construction work zones to score compliance with federal and state requirements, standards, and specifications. In 2017, five inspections were conducted in each CDOT Region with the goal of reviewing at least one nighttime operation, two CDOT Maintenance operations, and one full office review of a construction project, including traffic control documents.

The inspections consisted of a drive-thru of each project with information and comments recorded on a standard form. The office review included a review of project safety plan, the Method of Handling Traffic (MHT) and other traffic control related documentation. Following completion of the inspection and entry of data and comments, an overall percentage score was assigned to each project. The percent score was communicated to project or region personnel and was reported to FHWA in September of 2016. Project percentages were averaged to formulate a Region and Statewide average. Maintenance operations were scored similarly but are reported separately. The scores for the construction projects reviewed without prior notification are also reported separately below.

Results of the annual inspections form the basis for identifying needed changes and improvements to ensure continuous improvement in program results. Region staff will be expected to make changes as appropriate in the design process and in maintenance procedures, as well as in individual project management. Staff Branches will use the results to identify and support needed improvements in standards, specifications, procedures and training.

The goal for FY18 was a statewide average quality rating of 90%, with no individual projects rated below 85%. The average statewide quality rating for the 20 engineering projects was 93.9%. There were two no notice projects reviewed with a score below 85%. The statewide average of the 15 construction projects that received notification was 95.5%. The statewide average of the five construction projects that did not receive prior notification was 89.2%. The statewide average for the five maintenance activities was 95.7%.

D. Improvements to Work Zone-Related Specifications

- Overhauled the standard specification for “*Public Information Services*” to create four separate tiers, based upon a project’s complexity.
- Issued a “*Night Work Lighting*” project special provision which covers furnishing, installing, operating, maintaining, moving, adjusting, and removing lighting to illuminate construction work spaces for night work.
- Revised the standard specification for “*Pavement Marking Paint*” to specify the use of high-build paint or epoxy (long-term transitions or wintered projects) for all temporary construction striping.
- Developed a standard specification for the “*Removal of Temporary Pavement Marking on Transitions*” to address “ghost lines” in work zones. The specification requires 100 percent removal of the temporary striping, along with a wide swath of ground pavement surrounding the former location of the temporary striping.

E. Smarter Work Zones

- Performed short-term field tests with iCone and Vermac (Speed Mac) products on several Denver metro area interstate projects.
- Submitted a successful State Transportation Innovation Council (STIC) Accelerated Innovation Deployment Project Incentive Fund Application to the Federal Highway Administration, and received funding for an extended evaluation of the iCone and Speed Mac queue warning systems under freeway and arterial conditions.

F. Slow for the Cone Zone Campaign and Enforcement

To increase awareness and improve construction work zone safety, every summer beginning in June and continuing through September, the Colorado Department of Transportation (CDOT) partners with the Colorado State Patrol (CSP) troop offices and other local law enforcement agencies to conduct the "Slow for the Cone Zone" campaign, which entails overtime enforcement on highly-visible construction projects across Colorado. This enforcement is provided to protect the workers from dangerous driving.

End of Report

This page intentionally left blank.

APPENDIX A

This page intentionally left blank.

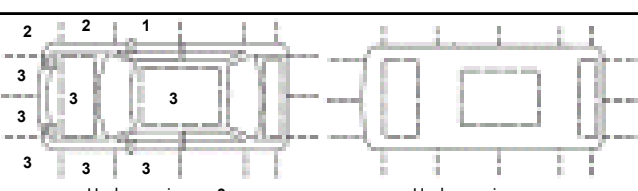


Colorado State Patrol Traffic Accident Report

<Version 1.0.0.4985>

Case No: [REDACTED]	Highway Code: STATE HWY	Highway ID: 287	Highway Mile Point: 307.7	Agency Code (Causal Factor): M09 - Wrong Side of Road	
Incident Date: 4/7/2017	City:	Agency: Colorado State Patrol	County: Boulder	County ID: 7	
Incident Time: 4:50:00 PM	Officer Number: 5058	Officer Name: [REDACTED]		Detail: 1D	
Number Killed: 2	Number Injured: 0	Location Route, Street, Road		Miles: 0 Feet: 3,696	North OF:
Form Date: 4/7/2017		Colorado 287		<input type="checkbox"/> AT:	Milepost 307
		Latitude: 40.047883	Longitude: 105.102682		
Total Vehicles: 2	District: 1D	<input checked="" type="checkbox"/> Investigated At Scene	<input type="checkbox"/> Public Property Employee	<input checked="" type="checkbox"/> Photos Taken	<input type="checkbox"/> Railroad Crossing Related
		<input checked="" type="checkbox"/> Construction Zone Related	<input type="checkbox"/> Highway Interchange	<input type="checkbox"/> Bridge Related	
Accident Location: On Roadway		1st - Collision with Vehicle in Transport Front to Front	2nd -	Most - Collision with Vehicle in Transport Front to Front	Approach/Overtaking Turn Not Applicable
Road Description: Non-Intersection	Road Contour: Straight On-Level	Road Surface: Concrete	Road Condition: Dry		Lighting Condition: Daylight
Adverse Weather Condition: None					
EMERGENCY MEDICAL SERVICES: (Time Recorded in 24 Hr. Time)		Time Notified:	Arrived @ Scene:	Arrived @ Hospital:	Name of Responding Services: Lafayette Fire Department and Mountain View Fire Department
Trafficway Flow: Not Divided (two Way)	Number of Travel Lanes: 5		Traffic Control Device Functioning: No Controls		Most Significant Traffic Control Devices:

Traffic Unit: 1	Traffic Unit Code: 01-Vehicle		Vehicle Vin:		Trailer Vin:
Last Name:	First Name:	MI: M	Vehicle Owner Last Name:		MI: M
Street Address:		Phone		Street Address:	City: Longmont
State: CO	Zip: 80501	Work Phone:		State: CO	Zip: 80501
City: Longmont	CDL:		State: CO	Gender: M	DOB: 10/2/1966
Primary Violation:					
Violation Code:		Citation Number:		Common Code:	
Year: 2000	Make: Chevrolet	Model: Express	Body Type: VN		
License Plate Number:		State / Country: CO		Color: WHI / WHI	Vehicle/Vehicle Combination Pickup Truck / Utility Van
Insurance Company: State Farm Insurance		<input type="checkbox"/> None	<input type="checkbox"/> No Proof	Exp. Date: Non Exp.	Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor
Policy Number:		Speed Limit 45	Est. Vehicle Speed 60	Driver Actions (Officer Opinion) Lane Violation	Accident Avoidance Maneuver: 00-No Avoidance Maneuver
			Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo		

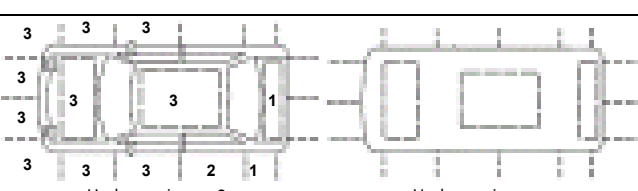


Undercarriage: 3

Undercarriage:

1-Minor
2-Moderate
3-Major

Traffic Unit: 2	Traffic Unit Code: 01-Vehicle		Vehicle Vin:		Trailer Vin:
Last Name:	First Name:	MI: E	Vehicle Owner Last Name:		MI: E
Street Address:		Phone		Street Address:	City: Louisville
State: CO	Zip: 80027	Work Phone:		State: CO	Zip: 80027
City: Louisville	CDL:		State: CO	Gender: M	DOB: 11/11/1943
Primary Violation:					
Violation Code:		Citation Number:		Common Code:	
Year: 2017	Make: Subaru	Model: Forester	Body Type: JP		
License Plate Number:		State / Country: CO		Color: BLK / BLK	Vehicle/Vehicle Combination SUV
Insurance Company: No Proof		<input type="checkbox"/> None	<input checked="" type="checkbox"/> No Proof	Exp. Date:	Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor
Policy Number:		Speed Limit 45	Est. Vehicle Speed 60	Driver Actions (Officer Opinion) No Action	Accident Avoidance Maneuver: 00-No Avoidance Maneuver
			Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo		



Undercarriage: 2

Undercarriage:

1-Minor
2-Moderate
3-Major

Property Owner Last Name	First Name	MI	Street Address	City	State	Zip
---------------------------------	-------------------	-----------	-----------------------	-------------	--------------	------------

T.U. # 1	Passenger Position 01-Driver	Restrictions Not Restricted	Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)
Safety Equipment Shoulder and Lap Belt		Safety Equipment Use Properly used	Air Bag Deployment Deployed at position only	Air Bag Type Front	Ejection No
Injury Severity Fatal					
Suspected Alcohol No	Suspected Drugs No	Age 50	Sex M	Name / Address	
Alcohol Suspected: No - Observed		Tested For Alcohol: By Coroner		Other Drug/Impairment Suspected: No - Observed	
Tested for Other Drugs: By Coroner					
Ejection Path: Not Ejected/Not applicable		Dead at Scene: Yes		Taken to: Boulder County Coroner's Office	
		Expired: 4/7/2017 @ 4:59:00 PM			

T.U. # 2	Passenger Position 01-Driver	Restrictions Not Restricted	Endorsements No Driving Endorsements	Wearing Helmet N/A (Cars/Trucks)	
Safety Equipment Shoulder and Lap Belt	Safety Equipment Use Properly used	Air Bag Deployment Deployed at position only	Air Bag Type Multiple	Ejection No	Injury Severity Fatal
Suspected Alcohol No	Suspected Drugs No	Age 73	Sex M	Name / Address [REDACTED]	
Alcohol Suspected: No - Observed	Tested For Alcohol: By Coroner	Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: By Coroner	
Ejection Path: Not Ejected/Not applicable	Dead at Scene: Yes	Taken to: Boulder County Coroner's Office		Expired: 4/7/2017 @ 4:59:00 PM	

Accident Narrative:


Vehicle #1 traveled north in the right northbound lane of Colorado 287. Vehicle #2 traveled south in the right southbound lane of Colorado 287. Vehicle #1 crossed over into the left lane, through the center left turn only lane for 51.76 feet and continued into the right southbound lane for 43.38 feet. Vehicle #1 collided front to front with Vehicle #2. Vehicle #1 continued to travel northbound after impact for 90.02 feet and came to final rest on its wheels facing north in the right southbound lane. Vehicle #2 rotated clockwise, rolled 1/2 time as it traveled for 48.30 feet onto the dirt shoulder after impact. Vehicle #2 came to final rest on its roof facing west.



Approved By: Liska, Scott ID: 5268 Date: 5/26/2017

STATE OF COLORADO TRAFFIC ACCIDENT REPORT

AMENDED/SUPL. UNDER \$1,000 COUNTER REPORT PRIVATE PROPERTY PAGE 1 OF 3 PAGES

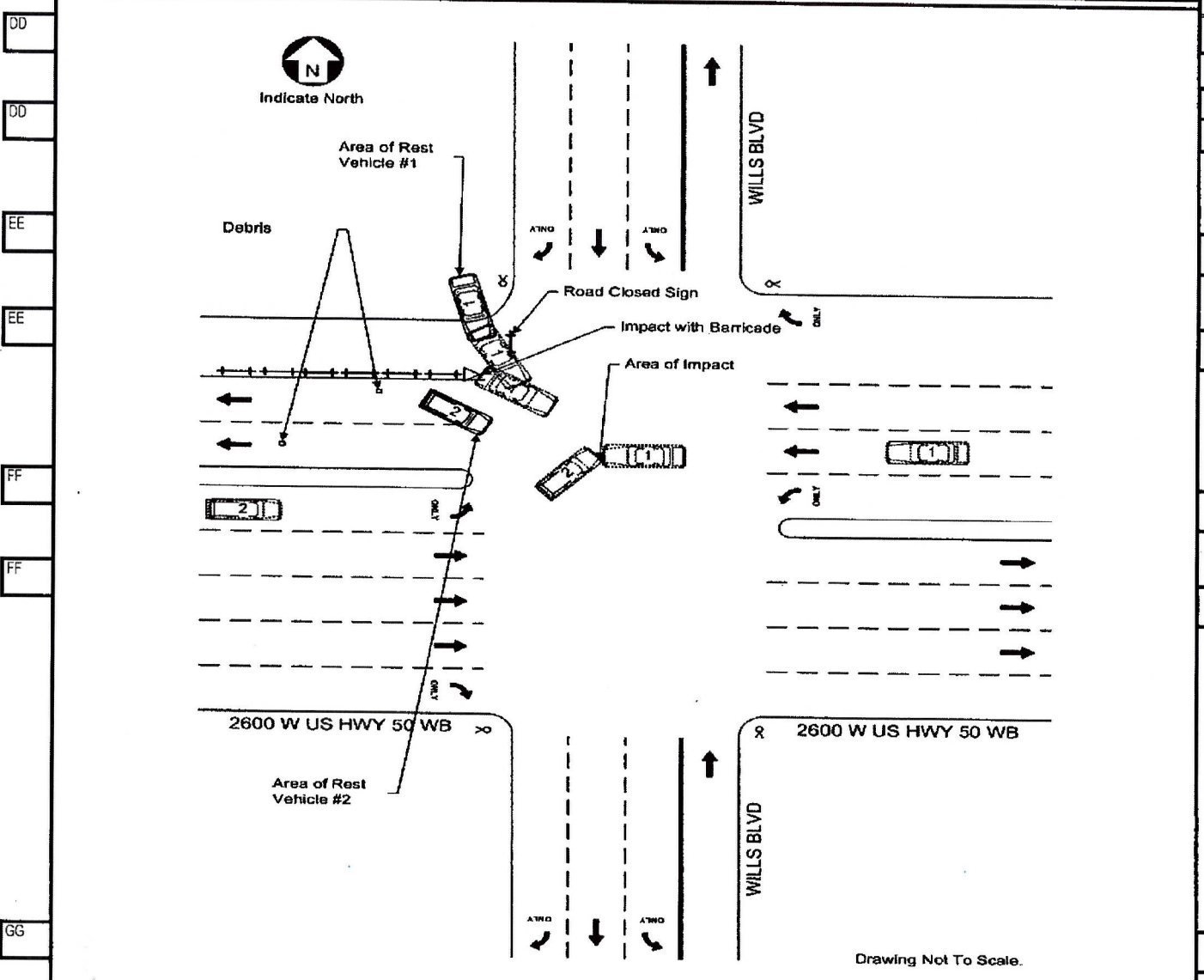
A 01	CDOT Code 2-050A-31315		<input type="checkbox"/> INTERSTATE HWY <input checked="" type="checkbox"/> STATE HWY <input type="checkbox"/> CITY ST/CNTY RD		HWY NUMBER 5 0 A MILEPOINT 3 1 3 . 0 0		DOR Code 		K 05 K 09					
	Case # 17-009184		Date of Accident 05/03/2017		City PUEBLO		Agency Pueblo Police Department		County PUEBLO		County # PUE			
B 06	Time (24 Hr.) 1942		Officer Number 10794		Officer Name [REDACTED]		Signature		Detail 514		L 07 L 07			
	Number Killed 1		Number Injured 0		Location Route, Street, Road 2600 W US HWY 50 WB		Miles 38		Feet 18		Latitude 38 - 18 - 40.68			
B 35	Date of Report 05/08/2017		Latitude 38 - 18 - 40.68		Longitude 104 - 38 - 30.90		At: WILLS BLVD		Agency Code		Investigated @ Scene <input checked="" type="checkbox"/>			
	Total Vehicles 2		District Number		Public Property/Employee <input type="checkbox"/>		Photos Taken <input checked="" type="checkbox"/>		Railroad Crossing Related <input type="checkbox"/>		Const. Zone Related <input checked="" type="checkbox"/>		Highway Interchg. <input type="checkbox"/>	
B 06	Traffic Unit # 1 or 2 <input checked="" type="checkbox"/> Veh. <input type="checkbox"/> Parked <input type="checkbox"/> Bicycle <input type="checkbox"/> Pedestrian <input type="checkbox"/> Non-Vehicle <input type="checkbox"/> Non-Contact Veh.		Traffic Unit # 1 or 2 <input checked="" type="checkbox"/> Veh. <input type="checkbox"/> Parked <input type="checkbox"/> Bicycle <input type="checkbox"/> Pedestrian <input type="checkbox"/> Non-Vehicle <input type="checkbox"/> Non-Contact Veh.		Last Name [REDACTED]		First [REDACTED]		MI T		Last Name [REDACTED]		First [REDACTED]	
	Street Address [REDACTED]		Personal Phone [REDACTED]		Street Address [REDACTED]		Personal Phone [REDACTED]		City PUEBLO		State CO		ZIP 81007	
B 06	City PUEBLO		State CO		ZIP 81007		Bus. Phone		City PUEBLO		State CO		ZIP 81008	
	Driver License Number [REDACTED]		CDL CO		Sex M		DOB 01/19/1998		Driver License Number [REDACTED]		CDL CO		Sex M	
C 01	Primary Violation <input type="checkbox"/> DUI		Primary Violation <input type="checkbox"/> DUI		Citation Number PENDING		Common Code		Violation Code		Citation Number		Common Code	
	Year 2012		Make FOR		Model FOCUS		Body Type SD		Year 2006		Make CHE		Model TRAILBLAZER	
D 01	License Plate Number [REDACTED]		State or Country CO		Color BLK		License Plate Number AUQ938		State or Country CO		Color SIL		Vehicle Identification Number [REDACTED]	
	Vehicle Identification Number [REDACTED]		Vehicle Owner Last Name <input type="checkbox"/> Same		First [REDACTED]		MI W		Vehicle Owner Last Name <input checked="" type="checkbox"/> Same		First [REDACTED]		MI [REDACTED]	
E 02	Address <input type="checkbox"/> Same		City PUEBLO WEST		State CO		ZIP 81007		Address <input checked="" type="checkbox"/> Same		City [REDACTED]		State [REDACTED]	
	Towed Due to Damage <input checked="" type="checkbox"/> By: DISCOUNT MOTORS		Towed Due to Damage <input checked="" type="checkbox"/> By: PUEBLO TOWING		To: POLICE DEPART DESIGNATED LOCATION		To: TOW COMPANY STORAGE YARD		Trailer VIN#		Trailer VIN#		Undercarriage	
F 02	Trailer VIN#		Trailer VIN#		Undercarriage		Undercarriage		Undercarriage		Undercarriage		Undercarriage	
	Undercarriage		Undercarriage		Undercarriage		Undercarriage		Undercarriage		Undercarriage		Undercarriage	
G 01	Insurance Company AMERICAN FAMILY		Exp. Date 06/27/2017		Insurance Company AMERICAN FAMILY		Exp. Date 05/05/2017		Policy Number [REDACTED]		Policy Number [REDACTED]		R 14 R 14	
	Owner Damaged Prop. Last Name [REDACTED]		First [REDACTED]		MI [REDACTED]		Address [REDACTED]		City PUEBLO		State CO		ZIP 81004	
J 00	Owner Damaged Prop. Last Name [REDACTED]		First [REDACTED]		MI [REDACTED]		Address [REDACTED]		City [REDACTED]		State [REDACTED]		ZIP [REDACTED]	
	T.U. #	POS.	REST.	ENDO.	SAFETY EQUIP.	AIR BAG	EJECT	SUSPECTED ALCO	DRUG	INJ. SEV.	AGE	SEX	NAME / ADDRESS	S 2 S 3 9 10 14 T 00 T 00
1	01	00	00	B 03 A	03 F	00	02	02	04	19	M	SAME AS DRIVER		
2	01	00	00	B 01 A	01 A	00	00	00	01	65	M	SAME AS DRIVER		

Approved By **JACKSON, HOWARD K.** I.D. # **1853** Date

AA	Case # 17-009184	DOR CODE	Accident Date 05/03/2017	Agency Pueblo Police Department
----	----------------------------	----------	------------------------------------	---

Describe Accident
 AA Vehicle #1 (Hart) was traveling west on US Highway 50 approaching Wills Blvd. Vehicle #2 (Getting) was traveling east on US Highway 50 approaching Wills Blvd. to make a left (north) turn on Wills Blvd. Vehicle #1 was traveling west at a high rate of speed in the construction zone. Vehicle #2 made the left turn and was struck by Vehicle #1.
 BB
 BB
 CC
 CC

END



GG	Carrier Name	US DOT <input type="checkbox"/>	ICC <input type="checkbox"/>	State DOT <input type="checkbox"/>
GG	T.U.# Address	Carrier Identification #		
GG	Carrier Name	US DOT <input type="checkbox"/>	ICC <input type="checkbox"/>	State DOT <input type="checkbox"/>
GG	T.U.# Address	Carrier Identification #		



**FATAL ACCIDENT EARLY
NOTIFICATION REPORT (BLOTTER)**

CASE NUMBER 2017017438

- 22575 (XXX)
1-025A-22600-B

THORNTON/1 PAGE 1 OF 1

ACCIDENT DATE 11/14/2017	ACCIDENT TIME 1059	ACCIDENT LOCATION NB I-25 Off-Ramp to E. 144 th Ave.	MILEPOINT 226	COUNTY NAME Adams	CAUSAL FACTOR		
INVESTIGATED BY Officer Keith Kramer		REPORTING AGENCY Thornton Police Dept.	REPORT RECEIVED BY	DATE	TIME		
# KILLED 1 2	# INJURED 0	# VEHICLES 1	PRIVATE PROPERTY YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	HIT & RUN YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	ALCOHOL/DRUGS SUSPECTED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CONSTRUCTION ZONE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	NEXT OF KIN NOTIFIED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

VEHICLE #	LICENSE PLATE #	STATE	MAKE	MODEL	VEHICLE TYPE (from Overlay B)	YEAR
1	[REDACTED]	CO	Chevrolet	Camaro	CP	1999

VEHICLE # 1	NAME (LAST, FIRST, MI) [REDACTED]	DOB 19600529	AGE 57	SEX M	DRIVER <input checked="" type="checkbox"/>	PASSENGER <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	BICYCLE <input type="checkbox"/>
STREET ADDRESS, CITY, STATE, ZIP [REDACTED]		DRIVER'S LICENSE NUMBER [REDACTED]		STATE CO	TAKEN TO			
INJURIES NONE <input type="checkbox"/> MINOR <input type="checkbox"/> MODERATE <input type="checkbox"/> SERIOUS <input type="checkbox"/> FATAL <input checked="" type="checkbox"/>		DEATH DATE 11/14/2017	DEATH TIME 1112	PRONOUNCED BY (TITLE, FIRST AND LAST NAME) [REDACTED]				
DEAD ON SCENE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	DEAD ON ARRIVAL - HOSP. YES <input type="checkbox"/> NO <input type="checkbox"/>	EJECTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	EXTRICATION YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	SEATBELT USE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CYCLE HELMET YES <input type="checkbox"/> NO <input type="checkbox"/>	CHILD RESTRAINT YES <input type="checkbox"/> NO <input type="checkbox"/>		

VEHICLE # PED #1	NAME (LAST, FIRST, MI) [REDACTED]	DOB 19710510	AGE 45 46	SEX M	DRIVER <input type="checkbox"/>	PASSENGER <input type="checkbox"/>	PEDESTRIAN <input checked="" type="checkbox"/>	BICYCLE <input type="checkbox"/>
STREET ADDRESS, CITY, STATE, ZIP [REDACTED]		DRIVER'S LICENSE NUMBER [REDACTED]		STATE CO	TAKEN TO Good Samaritan			
INJURIES NONE <input type="checkbox"/> MINOR <input type="checkbox"/> MODERATE <input type="checkbox"/> SERIOUS <input checked="" type="checkbox"/> FATAL <input checked="" type="checkbox"/>		DEATH DATE 11/28/17	DEATH TIME 1730	PRONOUNCED BY (TITLE, FIRST AND LAST NAME) [REDACTED]				
DEAD ON SCENE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	DEAD ON ARRIVAL-HOSP. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	EJECTED YES <input type="checkbox"/> NO <input type="checkbox"/>	EXTRICATION YES <input type="checkbox"/> NO <input type="checkbox"/>	SEATBELT USE YES <input type="checkbox"/> NO <input type="checkbox"/>	CYCLE HELMET YES <input type="checkbox"/> NO <input type="checkbox"/>	CHILD RESTRAINT YES <input type="checkbox"/> NO <input type="checkbox"/>		

VEHICLE #	NAME (LAST, FIRST, MI)	DOB	AGE	SEX	DRIVER	PASSENGER	PEDESTRIAN	BICYCLE
STREET ADDRESS, CITY, STATE, ZIP		DRIVER'S LICENSE NUMBER		STATE	TAKEN TO			
INJURIES		DEATH DATE	DEATH TIME	PRONOUNCED BY (TITLE, FIRST AND LAST NAME)				
DEAD ON SCENE	DEAD ON ARRIVAL-HOSP.	EJECTED	EXTRICATION	SEATBELT USE	CYCLE HELMET	CHILD RESTRAINT		

NARRATIVE: TU#1 northbound in the number three thru lane in the 14200 block of E. 136th Ave. in a construction zone. PED#1 exits backhoe and enters construction hole being dug between the number three thru lane in the 14300 block of I-25 and the northbound off ramp to E. 144th Ave. TU#1 exits late thru gore impacting two yellow construction sand barrels and enters off ramp to E. 144th Ave. TU#1 loses control and veers off roadway on left side impacting orange construction barrel in route. TU#1 continues north on dirt, falling into construction hole impacting the backhoe's scoop. PED#1 sees vehicle out of control and tries to run north out of hole. TU#1 gets flipped on roof and impacts PED#1.

Please distribute a copy of this Blotter Report (electronically) to the following (CDOT, CSP, and DOR) recipients:
 CDOT FARS: alisa.babler@state.co.us 303-757-9967, charles.keep@state.co.us 303-512-5122, kevin.dietrick@state.co.us 303-512-5111
 BoYan.Quinn@state.co.us 303-757-9466
 CSP: Janet.allbee@state.co.us 303-239-4582
 DOR: justine.gonzales@state.co.us 303-205-5793

https://www.codot.gov/library/traffic/safety-crash-data/fatal-crash-data-city-county/Fatal_Blotter_Template.doc/view

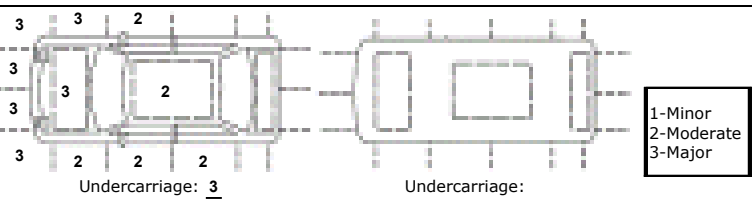
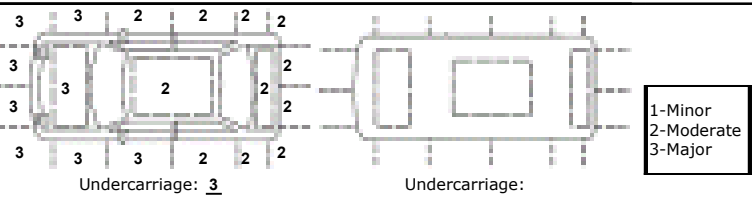
Note: For more than three (3) vehicles or persons involved in a fatal crash, use additional Form(s).



Colorado State Patrol Traffic Accident Report

<Version 1.0.0.4985>

Case No: [REDACTED]	Highway Code: STATE HWY	Highway ID: 85	Highway Mile Point: 271.1	Agency Code (Causal Factor): M07 - Lane Violations		
Incident Date: 5/31/2017	City:	Agency: Colorado State Patrol	County: Weld	County ID: 3		
Incident Time: 10:55:00 AM	Officer Number: 7735		Officer Name: [REDACTED]		Detail: 3A	
Number Killed: 1	Number Injured: 2	Location Route, Street, Road		Miles: _____	Feet: 152	North OF: _____
Form Date: 6/5/2017				Highway 85 <input type="checkbox"/> AT: _____ of N. 11th Ave		
Latitude: _____		Longitude: _____				
Total Vehicles: 2	District: 3A	<input checked="" type="checkbox"/> Investigated At Scene	<input type="checkbox"/> Public Property Employee	<input checked="" type="checkbox"/> Photos Taken	<input type="checkbox"/> Railroad Crossing Related	<input checked="" type="checkbox"/> Construction Zone Related
<input type="checkbox"/> Highway Interchange	<input type="checkbox"/> Bridge Related					
Accident Location: On Roadway		1st - Collision with Vehicle in Transport Front to Front	2nd - Collision with Object Other Object (Specify in Narrative)	Most - Collision with Vehicle in Transport Front to Front		Approach/Overtaking Turn Not Applicable
Road Description: Non-Intersection	Road Contour: Straight On-Level	Road Surface: Blacktop	Road Condition: Dry		Lighting Condition: Daylight	Adverse Weather Condition: None
EMERGENCY MEDICAL SERVICES: (Time Recorded in 24 Hr. Time)		Time Notified: 11:07:00 AM	Arrived @ Scene: 11:13:00 AM	Arrived @ Hospital:	Name of Responding Services: Banner Health	
Trafficway Flow: Not Divided (two Way)		Number of Travel Lanes:		<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 3
				Traffic Control Device Functioning: Functioning Properly		Most Significant Traffic Control Devices: Orange and black signs, barricades, cones, centerline ma
Traffic Unit: 1		Traffic Unit Code: 01-Vehicle		Vehicle Vin:		Trailer Vin:
Last Name:		First Name:		MI:		K
Street Address:		Phone		Vehicle Owner Last Name:		First:
City: Eaton		State: CO	Zip: 80615	Work Phone:		MI: K
Driver License Number:		CDL:	State: CO	Gender: F	DOB: 4/15/1990	
Primary Violation:						
Violation Code:		Citation Number:	Common Code:			
Year: 2015	Make: Toyota	Model: Camry	Body Type: SD			
License Plate Number:		State / Country: CO	Color: BLU	Vehicle/Vehicle Combination Passenger Car / Passenger Van		Original Direction South
Insurance Company: <input type="checkbox"/> None <input checked="" type="checkbox"/> No Proof		Exp. Date:	Driver - Most apparent human contributing factor (Officer Opinion) Distracted / Passenger		Pedestrian Action (Officer Opinion)	Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects
Policy Number:		Speed Limit 45	Est. Vehicle Speed 45	Driver Actions (Officer Opinion) Lane Violation		Accident Avoidance Maneuver: 04-Steering (Evidence or stated)
				Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo		
Traffic Unit: 2		Traffic Unit Code: 01-Vehicle		Vehicle Vin:		Trailer Vin:
Last Name:		First Name:		MI:		
Street Address:		Phone		Vehicle Owner Last Name:		First:
City: Aurora		State: CO	Zip: 80011	Work Phone:		MI:
Driver License Number:		CDL:	State: CO	Gender: M	DOB: 4/29/1963	
Primary Violation:						
Violation Code:		Citation Number:	Common Code:			
Year: 2001	Make: Freightliner	Model: Tractor	Body Type: TT			
License Plate Number:		State / Country: CO	Color: BRO	Vehicle/Vehicle Combination Vehicle / Vehicle Combination (10,001 lbs and over)		Original Direction North
Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof Colorado HUV Incorporated		Exp. Date: 5/23/2018	Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor		Pedestrian Action (Officer Opinion)	Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects
Policy Number:		Speed Limit 45	Est. Vehicle Speed 30	Driver Actions (Officer Opinion) No Action		Accident Avoidance Maneuver: 01-Braking (Skid marks evident)
				Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo		
Property Owner Last Name		First Name	MI	Street Address		City
						State
						Zip
T.U. # 1	Passenger Position 01-Driver		Restrictions Not Restricted		Endorsements No Driving Endorsements	
Safety Equipment Shoulder and Lap Belt		Safety Equipment Use Not Used		Air Bag Deployment Deployed at position and others		Air Bag Type Multiple
Ejection No		Injury Severity Fatal				
Suspected Alcohol No		Suspected Drugs No		Age 27	Sex F	
Name / Address						
Alcohol Suspected: No - Other Method		Tested For Alcohol: By Coroner		Other Drug/Impairment Suspected: Yes - Observed		Tested for Other Drugs: By Coroner
Ejection Path: Not Ejected/Not applicable		Dead at Scene: Yes		Taken to: Weld County Morgue		Expired: 5/31/2017 @ 11:30:00 AM



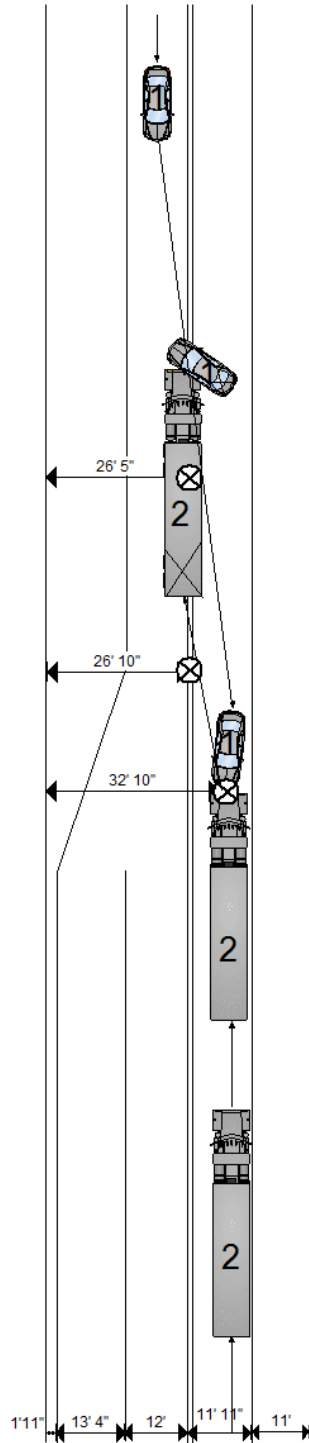
T.U. # 1	Passenger Position 06-Rear Right Passenger	Restrictions Not Restricted	Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)	
Safety Equipment Child safety restraint	Safety Equipment Use Improperly used	Air Bag Deployment Deployed at position and others		Air Bag Type Curtain	Ejection No	Injury Severity Evident - incapacitating
Suspected Alcohol No	Suspected Drugs No	Age 4	Sex F	Name / Address [REDACTED]		
Alcohol Suspected: No - Observed		Tested For Alcohol: Not Tested		Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: Not Tested
Ejection Path: Not Ejected/Not applicable		Dead at Scene: No		Taken to: Northern Colorado Medical Center		Expired:
T.U. # 1	Passenger Position 04-Rear Left Passenger	Restrictions Not Restricted	Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)	
Safety Equipment Child safety restraint	Safety Equipment Use Properly used	Air Bag Deployment Deployed at position and others		Air Bag Type Curtain	Ejection No	Injury Severity Evident - non-incapacitating
Suspected Alcohol No	Suspected Drugs No	Age 1	Sex F	Name / Address [REDACTED]		
Alcohol Suspected: No - Observed		Tested For Alcohol: Not Tested		Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: Not Tested
Ejection Path: Not Ejected/Not applicable		Dead at Scene: No		Taken to: Northern Colorado Medical Center		Expired:
T.U. # 2	Passenger Position 01-Driver	Restrictions Not Restricted	Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)	
Safety Equipment Shoulder and Lap Belt	Safety Equipment Use Properly used	Air Bag Deployment Not Equipped		Air Bag Type None	Ejection No	Injury Severity Complaint of Injury
Suspected Alcohol No	Suspected Drugs No	Age 54	Sex M	Name / Address [REDACTED]		
Alcohol Suspected: No - Observed		Tested For Alcohol: Not Tested		Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: Not Tested
Ejection Path: Not Ejected/Not applicable		Dead at Scene: No		Taken to: Northern Colorado Medical Center		Expired:
Accident Narrative:						
Vehicle 1 was southbound on H85 near milepost 271. Vehicle 2 was northbound on H85 near milepost 271. Vehicle 1 drove into the northbound lane of travel and collided with vehicle 2, front to front, approximately 152.4' north of N. 11th Ave. Point of impact 1 occurred approximately 32.8' east of the northwest corner of the intersection of H85 and N. 11th Ave. Vehicle 1 rotated clockwise and remained engaged with vehicle 2. Both vehicles travelled north approximately 114' and collided with a centerline marker. Both vehicles continued north approximately 77.2' and collided with a centerline marker. Both vehicle continued approximately 13.4' and came to final rest on the centerline. Vehicle 1 was on its wheels facing west-northwest. Vehicle 2 was on its wheels facing north.						



H85
Asphalt
Dry

Not To Scale

3A171009 - Trooper S.A.
Schlessman



Reference Point N/S - N. Edge N. 11th Ave
E/W - W. Edge H85

V1 FR: RF 360°9'N 23°8'E RR 365°N 21°5'E
V2 FR: LF 353°5'N 20°8'E
LD1 335°11'N 19°6'E
LD2 331°7'N 19°2'E
TRLD1 306°10'N 18°5'E
TRLD2 302°8'N 18°4'
POI 3 343°7' to N. 11th Ave

POI 2 266°5' to N. 11th Ave

POI 1 152°5' to N. 11th Ave

T.U.# 2	Carrier Name [REDACTED]	Carrier Address [REDACTED]			Branch US DOT	Carrier Identification Number# 2892812
Carrier Type Interstate)		Source of Name Driver	Gross Vehicle Weight Rating 26,001 Pounds and Over	Total # of Axles 5	Vehicle Configuration Truck Tractor and Semi-Trailer	
Cargo Body Type Grain, Chips, Gravel		HazMat Placard	HazMat Cargo Released	HazMat #	HazMat Class	Liquid HazMat Cargo at the time of accident 0 to 1,000 gallons
1st Accident Event - Collision Motor Vehicle in Transport		2nd Accident Event - Collision Fixed Object		3rd Accident Event - Collision Fixed Object		4th Accident Event -

Approved By:Rood,Bob **ID:**7552 **Date:**6/12/2017



Colorado State Patrol Traffic Accident Report

<Version 1.0.0.4985>

Case No: [REDACTED]	Highway Code: STATE HWY	Highway ID: 392	Highway Mile Point: 133.3	Agency Code (Causal Factor): M12 - Inattentive to Driving	
Incident Date: 6/26/2017	City:	Agency: Colorado State Patrol	County: Weld	County ID: 3	
Incident Time: 7:10:00 AM	Officer Number: 7735	Officer Name: [REDACTED]		Detail: 3A	
Number Killed: 1	Number Injured: 0	Location Route, Street, Road		Miles: 0	Feet: 3,696
Form Date: 6/26/2017		Latitude:		Longitude:	
Total Vehicles: 3	District: 3A	<input checked="" type="checkbox"/> Investigated At Scene	<input type="checkbox"/> Public Property Employee	<input checked="" type="checkbox"/> Photos Taken	<input type="checkbox"/> Railroad Crossing Related
Accident Location: On Roadway		<input type="checkbox"/> 1st - Collision with Vehicle in Transport Front to Rear	<input type="checkbox"/> 2nd - Collision with Vehicle in Transport Front to Rear	<input type="checkbox"/> Most - Collision with Vehicle in Transport Front to Rear	<input type="checkbox"/> Construction Zone Related
Road Description: Non-Intersection		Road Contour: Straight On-Level	Road Surface: Blacktop	Road Condition: Dry	Lighting Condition: Daylight
EMERGENCY MEDICAL SERVICES (Time Recorded in 24 Hr. Time) 7:22:00 AM		Time Notified: 7:22:00 AM	Arrived @ Scene: 7:46:00 AM	Arrived @ Hospital:	
Trafficway Flow: Not Divided (two Way)		Number of Travel Lanes:	<input type="checkbox"/> Traffic Control Device Functioning: Functioning Properly	Most Significant Traffic Control Devices: Construction Zone Flagger	

Traffic Unit: 1	Traffic Unit Code: 01-Vehicle	Vehicle Vin: [REDACTED]		Trailer Vin:	
Last Name: [REDACTED]	First Name: [REDACTED]	MI: S	Vehicle Owner Last Name: [REDACTED]	First: [REDACTED]	MI: E
Street Address: [REDACTED]		Phone:		Street Address: [REDACTED]	City: Fort Morgan
City: Merino	State: CO	Zip: 80741	Work Phone:	State: CO	Zip: 80701
Driver License Number: [REDACTED]	CDL:	State: CO	Gender: M	DOB: 6/15/1998	Towed Due to Damage <input checked="" type="checkbox"/> By: Superior Towing To: 3030 1st Ave
Primary Violation:					
Violation Code:	Citation Number:	Common Code:			
Year: 1990	Make: GMC	Model: PU	Body Type: PK		
License Plate Number: [REDACTED]	State / Country: CO	Color: RED	Vehicle/Vehicle Combination Pickup Truck / Utility Van	Original Direction East	Vehicle Movement (Pre-impact) Going Straight
Insurance Company: <input type="checkbox"/> None <input checked="" type="checkbox"/> No Proof		Exp. Date:	Driver - Most apparent human contributing factor (Officer Opinion) Driver Fatigue	Pedestrian Action (Officer Opinion)	Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects
Policy Number:	Speed Limit 40	Est. Vehicle Speed 65	Driver Actions (Officer Opinion) Careless Driving	Accident Avoidance Maneuver: 00-No Avoidance Maneuver	Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo

Traffic Unit: 2	Traffic Unit Code: 01-Vehicle	Vehicle Vin: [REDACTED]		Trailer Vin:	
Last Name: [REDACTED]	First Name: [REDACTED]	MI: J	Vehicle Owner Last Name: [REDACTED]	First: [REDACTED]	MI:
Street Address: [REDACTED]		Phone:		Street Address: [REDACTED]	City: Greeley
City: Greeley	State: CO	Zip: 80631	Work Phone:	State: CO	Zip: 80631
Driver License Number: [REDACTED]	CDL:	State: SD	Gender: M	DOB: 10/22/1990	Towed Due to Damage <input checked="" type="checkbox"/> By: Private Tow To:
Primary Violation:					
Violation Code:	Citation Number:	Common Code:			
Year: 1999	Make: Ford	Model: F-250	Body Type: PK		
License Plate Number: [REDACTED]	State / Country: CO	Color: RED	Vehicle/Vehicle Combination Pickup Truck / Utility Van	Original Direction East	Vehicle Movement (Pre-impact) Stopped in Traffic
Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof		Exp. Date: 10/6/2017	Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor	Pedestrian Action (Officer Opinion)	Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects
Policy Number:	Speed Limit 40	Est. Vehicle Speed 0	Driver Actions (Officer Opinion) No Action	Accident Avoidance Maneuver: 00-No Avoidance Maneuver	Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo

Traffic Unit: 3		Traffic Unit Code: 01-Vehicle		Vehicle Vin: [REDACTED]		Trailer Vin: [REDACTED]			
Last Name: [REDACTED]		First Name: [REDACTED]		MI: E		Vehicle Owner Last Name: [REDACTED]			
Street Address: 20125 South Gate Ave		Phone: [REDACTED]		Street Address: [REDACTED]		City: Gilcrest			
State: CO		Zip: 80623		State: CO		Zip: 80623			
City: Gilcrest		Work Phone: [REDACTED]		Towed Due to Damage <input type="checkbox"/> By: To: [REDACTED]					
Driver License Number: [REDACTED]		CDL: [REDACTED]		State: CO		Gender: M			
DOB: 10/13/1976									
Primary Violation: [REDACTED]									
Violation Code: [REDACTED]								Citation Number: [REDACTED]	
Year: 2010		Make: Dodge		Model: Ram		Body Type: PK			
License Plate Number: [REDACTED]		State / Country: CO		Color: RED		Vehicle/Vehicle Combination Pickup Truck / Utility Van W/Trailer			
Original Direction East		Vehicle Movement (Pre-impact) Stopped in Traffic		Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof State Farm					
Exp. Date: 10/13/2017		Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor		Pedestrian Action (Officer Opinion) [REDACTED]		Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects			
Policy Number: [REDACTED]		Speed Limit 40		Est. Vehicle Speed 0		Driver Actions (Officer Opinion) No Action			
Accident Avoidance Maneuver: 00-No Avoidance Maneuver		Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo		Property Owner Last Name [REDACTED]					
First Name [REDACTED]		MI [REDACTED]		Street Address [REDACTED]		City [REDACTED]			
State [REDACTED]		Zip [REDACTED]							

T.U. # 1		Passenger Position 01-Driver		Restrictions Not Restricted		Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)	
Safety Equipment Shoulder and Lap Belt		Safety Equipment Use Not Used		Air Bag Deployment Not Equipped		Air Bag Type None		Ejection No	
Injury Severity Fatal		Suspected Alcohol No		Suspected Drugs No		Age 19		Sex M	
Name / Address [REDACTED]		Alcohol Suspected: No - Observed		Tested For Alcohol: By Coroner		Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: By Coroner	
Ejection Path: Not Ejected/Not applicable		Dead at Scene: Yes		Taken to: McKee Medical Center		Expired: 5/26/2017 @ 7:50:00 AM			
T.U. # 2		Passenger Position 01-Driver		Restrictions Not Restricted		Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)	
Safety Equipment Shoulder and Lap Belt		Safety Equipment Use Properly used		Air Bag Deployment Not Deployed		Air Bag Type None		Ejection No	
Injury Severity No Injury		Suspected Alcohol No		Suspected Drugs No		Age 26		Sex M	
Name / Address [REDACTED]		Alcohol Suspected: No - Observed		Tested For Alcohol: Not Tested		Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: Not Tested	
Ejection Path: Not Ejected/Not applicable		Dead at Scene: No		Taken to: N/A		Expired: [REDACTED]			
T.U. # 3		Passenger Position 01-Driver		Restrictions Not Restricted		Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)	
Safety Equipment Shoulder and Lap Belt		Safety Equipment Use Properly used		Air Bag Deployment Not Deployed		Air Bag Type None		Ejection No	
Injury Severity Complaint of Injury		Suspected Alcohol No		Suspected Drugs No		Age 40		Sex M	
Name / Address [REDACTED]		Alcohol Suspected: No - Observed		Tested For Alcohol: Not Tested		Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: Not Tested	
Ejection Path: Not Ejected/Not applicable		Dead at Scene: No		Taken to: N/A		Expired: [REDACTED]			

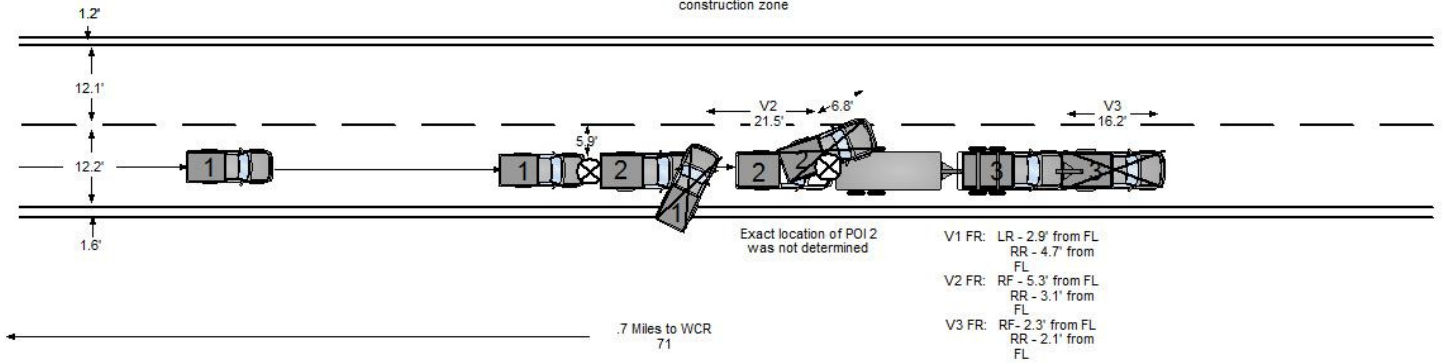
Accident Narrative:
 Vehicle 1 was eastbound and travelling at a high rate of speed on Highway 392 near the intersection of Weld County Road 71. Vehicles 2 and 3 were stopped in line in a construction zone for a flagger on eastbound Highway 392 approximately .7 miles east of the intersection of Weld County Road 71. Vehicle 1 collided with vehicle 2, front to rear, in the eastbound lane of travel. Vehicle 1 rotated counterclockwise and travelled approximately 27' northeast. Vehicle 1 came to final rest on its wheels facing north. Vehicle 2 travelled northeast approximately 21.5' and collided front to rear with vehicle 3. Exact point of impact for point of impact 2 was not determined. Vehicle 2 continued north approximately 6.8' and came to final rest on its wheels facing north. Vehicle 3 travelled northeast approximately 16.2' and came to final rest on its wheels facing northeast.



Not To Scale

3A171206
Trooper S.A. Schlessman
H392
Asphalt
Dry

V2 & V3 were stopped in an active construction zone





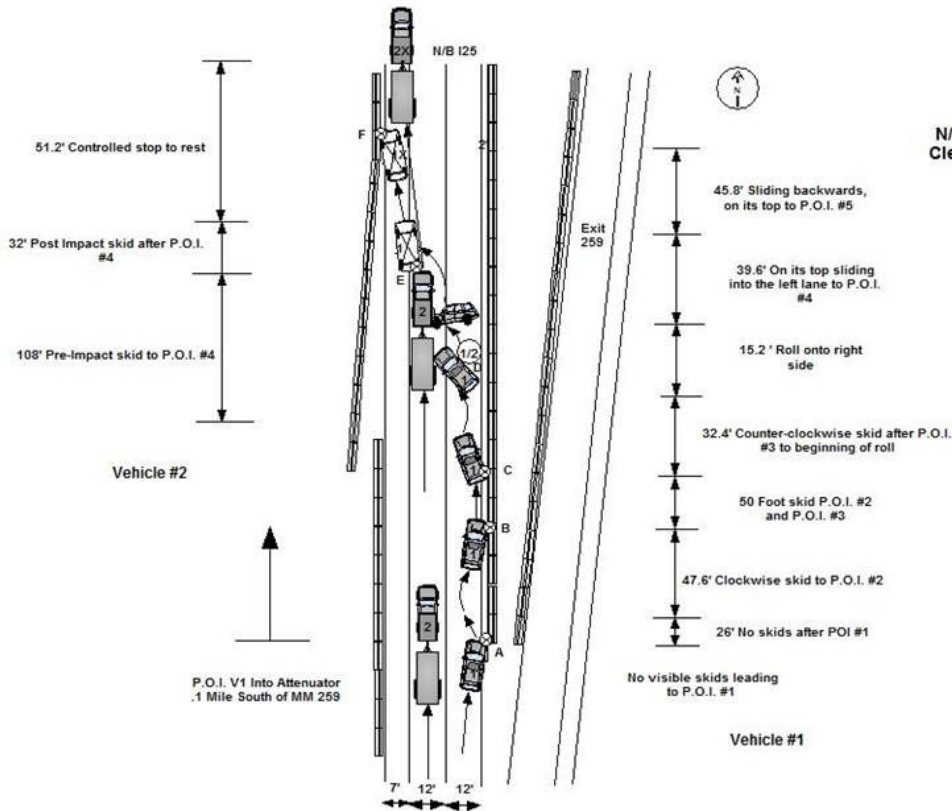
Colorado State Patrol Traffic Accident Report

<Version 1.0.0.4985>

*Amended / Supplemental

Case No: [REDACTED]	Highway Code: INTERSTATE HWY	Highway ID: 25	Highway Mile Point: 258.9	Agency Code (Causal Factor): M07 - Lane Violations	
Incident Date: 6/8/2017	City:	Agency: Colorado State Patrol	County: Larimer	County ID: 6	
Incident Time: 3:35:00 PM	Officer Number: 2116	Officer Name: [REDACTED]		Detail: 3C	
Number Killed: 1	Number Injured: 0	Location Route, Street, Road		Miles: 0 Feet: 528	South OF:
Form Date: 6/8/2017		Latitude:		Longitude:	
Total Vehicles: 2	District: 3C	<input checked="" type="checkbox"/> Investigated At Scene	<input checked="" type="checkbox"/> Public Property Employee	<input checked="" type="checkbox"/> Photos Taken	<input type="checkbox"/> Railroad Crossing Related
<input checked="" type="checkbox"/> Construction Zone Related	<input checked="" type="checkbox"/> Highway Interchange	<input type="checkbox"/> Bridge Related			
Accident Location: Ran Off Right Side		1st - Collision with Object Concrete Highway Barrier	2nd - Non-Collision Accident Overturning	Most - Collision with Vehicle in Transport Front to Front	
Approach/Overtaking Turn Not Applicable					
Road Description: Highway Interchange	Road Contour: Straight On-Grade	Road Surface: Blacktop	Road Condition: Dry		Lighting Condition: Daylight
Adverse Weather Condition: None					
EMERGENCY MEDICAL SERVICES: (Time Recorded in 24 Hr. Time)		Time Notified: 3:35:00 PM	Arrived @ Scene: 3:40:00 PM	Arrived @ Hospital:	Name of Responding Services: Thompson Valley
Trafficway Flow: Divided, Median W/Barrier		Number of Travel Lanes:		Traffic Control Device Functioning: 2 Functioning Properly	Most Significant Traffic Control Devices: Signs, Lane Markings, Exit Signs, Speed Limit Signs, Cot
Traffic Unit: 1		Traffic Unit Code: 01-Vehicle		Vehicle Vin:	
Last Name:		First Name:		MI:	
Street Address:		Phone:		Vehicle Owner Last Name:	
City: Aurora		State: CO	Zip: 80012	City: Loveland	State: CO
Work Phone:		DOB: 9/25/1989		Zip: 80538	MI:
Driver License Number:	CDL:	State: CO	Gender: F	Towed Due to Damage <input checked="" type="checkbox"/> By: Stan's Auto Service To: 1019 S Lincoln Ave	
Primary Violation:					
Violation Code:	Citation Number:	Common Code:		1-Minor 2-Moderate 3-Major	
Year: 2017	Make: Mercedes-Benz	Model: GL C300	Body Type: JP		
License Plate Number:	State / Country: CO	Color: SIL	Vehicle/Vehicle Combination SUV	Original Direction North	Vehicle Movement (Pre-impact) Going Straight
Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof American Family		Exp. Date: 9/25/2017	Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor	Pedestrian Action (Officer Opinion)	Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects
Policy Number:	Speed Limit 65	Est. Vehicle Speed 65	Driver Actions (Officer Opinion) Lane Violation	Accident Avoidance Maneuver: 01-Braking (Skid marks evident)	Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo
Traffic Unit: 2		Traffic Unit Code: 01-Vehicle		Vehicle Vin:	
Last Name:		First Name:		MI:	
Street Address:		Phone:		Vehicle Owner Last Name:	
City: Greeley		State: CO	Zip: 80634	City: Fort Collins	State: CO
Work Phone:		DOB: 1/11/1945		Zip: 80527	MI:
Driver License Number:	CDL: A	State: CO	Gender: M	Towed Due to Damage <input type="checkbox"/> By: Driven to the Fort Collins CSP Office To: For A Mechanical Inspection.	
Primary Violation:					
Violation Code:	Citation Number:	Common Code:		1-Minor 2-Moderate 3-Major	
Year: 2008	Make: Dodge	Model: Ram 5500	Body Type: PK		
License Plate Number:	State / Country: CO	Color: WHI	Vehicle/Vehicle Combination Vehicle / Vehicle Combination (10,001 lbs and over)	Original Direction North	Vehicle Movement (Pre-impact) Going Straight
Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof Westfield Insurance		Exp. Date: 4/13/2018	Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor	Pedestrian Action (Officer Opinion)	Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects
Policy Number:	Speed Limit 65	Est. Vehicle Speed 65	Driver Actions (Officer Opinion) No Action	Accident Avoidance Maneuver: 01-Braking (Skid marks evident)	Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo
Property Owner Last Name Colorado Dept. of Transportation		First Name	MI	Street Address 4201 E. Arkansas	City Denver
State CO		Zip 80222			
T.U. # 1	Passenger Position 01-Driver	Restrictions Not Restricted	Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)
Safety Equipment Shoulder and Lap Belt	Safety Equipment Use Not Used	Air Bag Deployment Deployed at position and others	Air Bag Type Side	Ejection Yes - Full	Injury Severity Fatal
Suspected Alcohol No	Suspected Drugs Yes	Age 27	Sex F	Name / Address	
Alcohol Suspected: No - Observed		Tested For Alcohol: By Coroner		Other Drug/Impairment Suspected: Yes - Observed	
Tested for Other Drugs: By Coroner		Expired: 6/8/2017 @ 3:53:00 PM			
Ejection Path: Through Roof Opening (sun roof/convertible top)		Dead at Scene: Yes		Taken to: Larimer County Coroner's Office	

T.U. # 2	Passenger Position 01-Driver	Restrictions Complied With Restrictions		Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)
Safety Equipment Shoulder and Lap Belt	Safety Equipment Use Properly used	Air Bag Deployment Not Deployed		Air Bag Type None	Ejection No	Injury Severity No Injury
Suspected Alcohol No	Suspected Drugs No	Age 72	Sex M	Name / Address [REDACTED]		
Alcohol Suspected: No - Observed	Tested For Alcohol: Not Tested		Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: Not Tested	
Ejection Path: Not Ejected/Not applicable	Dead at Scene: No		Taken to: Not Transported		Expired:	
Accident Narrative: <p>Vehicle #1 was traveling in the right lane along northbound Interstate 25, approaching Exit 259. Vehicle #2 (pickup truck with trailer) was traveling in the left lane along northbound Interstate 25, approaching Exit 259, behind vehicle #1. Vehicle #1 veered to the right, into the gore of the exit. Vehicle #1 then collided with its front right portion into an attenuator. The point of impact was in the gore, 2.1 feet east of the right lane fog line, and .1 mile south of milepost 259. Vehicle #1 detached from the attenuator, and then traveled 26 feet without any skids. Vehicle #1 then skidded clockwise for 47.6 feet in the right lane. Vehicle #1 continued off road and collided with its front right portion into a cement jersey barrier. The point of impact was 2 feet to the northbound fog line. Vehicle #1 then detached from the cement jersey barrier and skidded out of control in the right lane for 50 feet. Vehicle #1 then collided with its right rear side into the same cement jersey barrier before skidding counterclockwise, northwest, out of control. Vehicle #1 skidded clockwise for 32.4 feet in the right lane. Vehicle #1 then began to roll onto its right side in the right lane 9.2 feet to the east road edge (jersey barrier). Vehicle #1 rolled 1/2 time into the left lane, traveling 39.6 feet while sliding on its top. Vehicle #1 was sliding northwest in the left lane, on its top, facing oncoming traffic. Vehicle #2 skidded 108 feet in the left lane. Vehicle #2 collided with its front left portion into the front portion of vehicle #1. The point of impact was in the left lane 25.2 feet to the east road edge. Vehicle #1 slid backwards, on its top, for 45.8 feet in the left lane, on to the west shoulder, and then off the west side of the road. Vehicle #1 then collided with its right rear side into the west jersey barrier to rest, on its top, facing southeast. The driver of vehicle #1 was ejected from the vehicle and trapped underneath the vehicle. After impact, vehicle #2 continued to skid in the left lane for 32 feet before coming to a controlled stop on the left shoulder, facing north.</p>						
Amendment						
On 6/20/17 it was brought to my attention that I had noted "vehicle #2" on several occasions in my first accident narrative where "vehicle #1" should have been noted. I also added a note in the narrative that vehicle #2 was traveling behind vehicle #1 prior to the crash occurring. I made these corrections and contacted my supervisor for amendment approval.						



N/B Interstate 25 Milepost 258.9
 Clear / Dry / Grade Up / Blacktop /
 Day
 CONSTRUCTION ZONE
 Speed Limit 65 MPH

Not To Scale

MEASUREMENTS

- A P.O.I Vs. Attenuator 2.1' to fog line.
- B P.O.I. Vs Cement Barrier 2' to fog line.
- C P.O.I. Vs Cement Barrier 2' to fog line
- D Beginning of Roll 9.2' to East Barrier.
- E V2 P.O.I. into V1 (head on) 25.2' to East Barrier
- F P.O.I. V1 into West Barrier 8' to N/B Fog Line

T.U.# 2	Carrier Name Big Horn Masonry Inc.	Carrier Address 6521 E. CR 44, Fort Collins, CO 80524			Branch US DOT	Carrier Identification Number# 1250952
Carrier Type Intrastate)		Source of Name Side of Vehicle	Gross Vehicle Weight Rating 26,001 Pounds and Over	Total # of Axles 4	Vehicle Configuration Truck and Trailer	
Cargo Body Type Flatbed/Pickup		HazMat Placard	HazMat Cargo Released	HazMat #	HazMat Class	Liquid HazMat Cargo at the time of accident
1st Accident Event - Collision Motor Vehicle in Transport		2nd Accident Event -		3rd Accident Event -		4th Accident Event -

Approved By: Armstrong, Richard **ID:** 0467 **Date:** 6/20/2017



Colorado State Patrol Traffic Accident Report

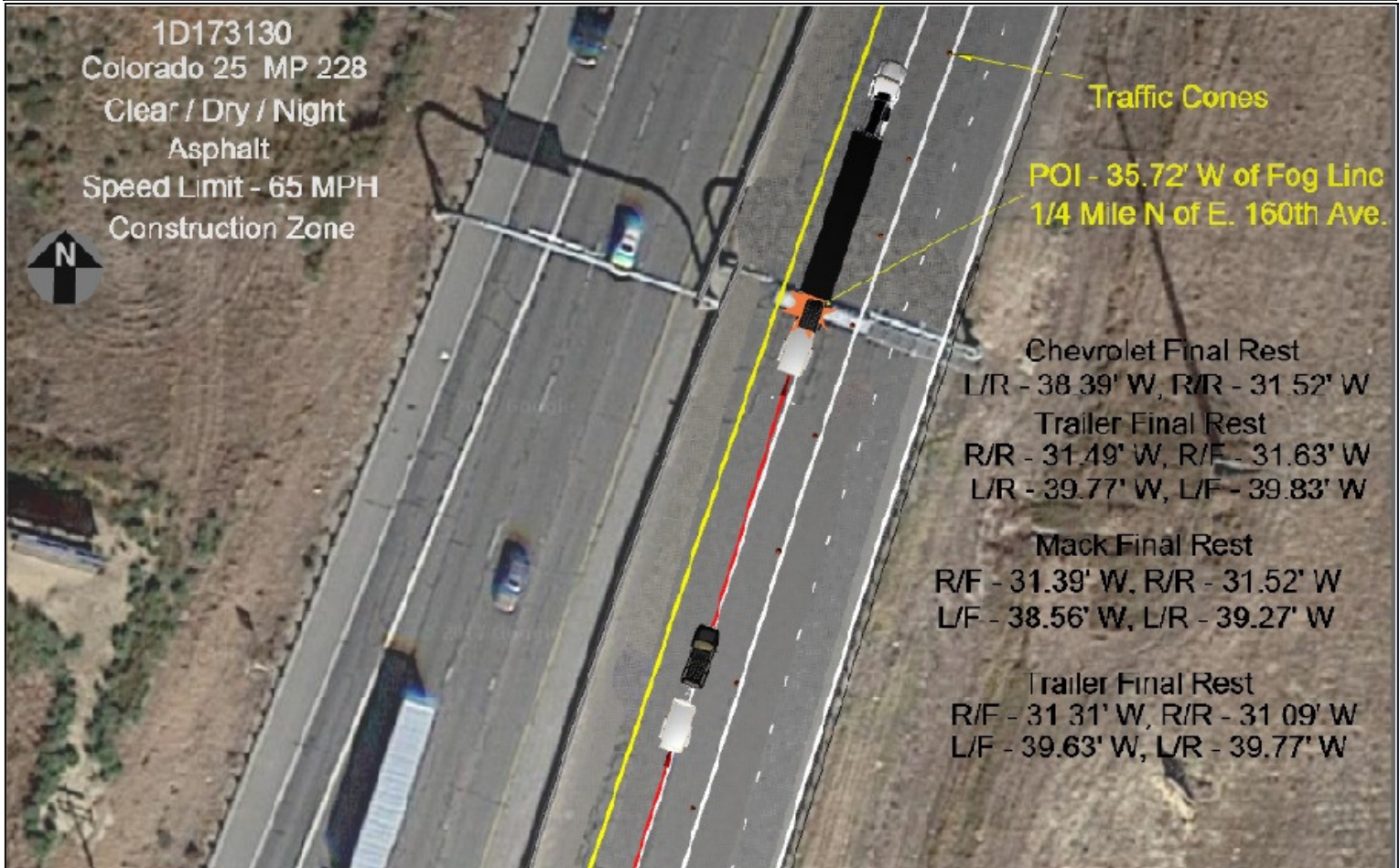
<Version 1.0.0.4985>

Case No: [REDACTED]		Highway Code: INTERSTATE HWY		Highway ID: 25		Highway Mile Point: 228.0		Agency Code (Causal Factor): M12 - Inattentive to Driving											
Incident Date: 7/14/2017			City:			Agency: Colorado State Patrol			County: Adams		County ID: 12								
Incident Time: 3:30:00 AM			Officer Number: 5802			Officer Name: [REDACTED]			Detail: 1C										
Number Killed: 1		Number Injured: 0		Location Route, Street, Road				Miles: 0 Feet: 1,320		North OF:									
Form Date: 7/15/2017				Latitude: 39.988333				Longitude: -104.986667											
Total Vehicles: 2		District: 1D		<input checked="" type="checkbox"/> Investigated At Scene		<input type="checkbox"/> Public Property Employee		<input checked="" type="checkbox"/> Photos Taken		<input type="checkbox"/> Railroad Crossing Related		<input checked="" type="checkbox"/> Construction Zone Related		<input type="checkbox"/> Highway Interchange		<input type="checkbox"/> Bridge Related			
Accident Location: On Roadway				1st - Collision with Vehicle in Transport Front to Rear				2nd - Collision with Vehicle in Transport Front to Rear				Most - Collision with Vehicle in Transport Front to Rear				Approach/Overtaking Turn Not Applicable			
Road Description: Non-Intersection		Road Contour: Straight On-Level		Road Surface: Blacktop		Road Condition: Dry				Lighting Condition: Dark - Unlighted		Adverse Weather Condition: None							
EMERGENCY MEDICAL SERVICES: (Time Recorded in 24 Hr. Time)				Time Notified:		Arrived @ Scene:		Arrived @ Hospital:		Name of Responding Services: North Metro Fire Protection Dist.									
Trafficway Flow: Divided, Median W/Barrier		Number of Travel Lanes:				<input type="checkbox"/> Traffic Control Device Functioning: No Controls		Most Significant Traffic Control Devices:											
Traffic Unit: 1		Traffic Unit Code: 01-Vehicle				Vehicle Vin:				Trailer Vin:									
Last Name:		First Name:		MI: H		Vehicle Owner Last Name:				First:		MI: H							
Street Address:				Phone				Street Address:				City: Brookeville		State: MD		Zip: 20833			
City: Brookeville		State: MD		Zip: 20833		Work Phone:				Towed Due to Damage <input checked="" type="checkbox"/> By: Joe's Towing & Recovery To: 6586 Brighton Blvd.									
Driver License Number:		CDL:		State: MD		Gender: M		DOB: 9/15/1988											
Primary Violation:				Violation Code:				Citation Number:						Common Code:					
Year: 2009		Make: Chevrolet		Model: Tahoe		Body Type: JP		Undercarriage: 3											
License Plate Number:		State / Country: MD		Color: BLK / BLK		Vehicle/Vehicle Combination SUV W/Trailer				Original Direction North		Vehicle Movement (Pre-impact) Going Straight							
Insurance Company: <input type="checkbox"/> None <input checked="" type="checkbox"/> No Proof				Exp. Date:		Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor				Pedestrian Action (Officer Opinion)		Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects							
Policy Number:		Speed Limit 65		Est. Vehicle Speed 70		Driver Actions (Officer Opinion) No Action		Accident Avoidance Maneuver: 00-No Avoidance Maneuver		Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo									
Traffic Unit: 2		Traffic Unit Code: 01-Vehicle				Vehicle Vin:				Trailer Vin:									
Last Name:		First Name:		MI:		Vehicle Owner Last Name:				First:		MI:							
Street Address:				Phone (303) 901-4562				Street Address:				City: Denver		State: CO		Zip: 80216			
City: Aurora		State: CO		Zip: 80011		Work Phone:				Towed Due to Damage <input checked="" type="checkbox"/> By: Tractor Driven, Trailer Privately Towed To:									
Driver License Number:		CDL: A		State: CO		Gender: M		DOB: 4/6/1969											
Primary Violation:				Violation Code:				Citation Number:						Common Code:					
Year: 2014		Make: Mack		Model: CHU613		Body Type: TT		Undercarriage: 3											
License Plate Number:		State / Country: CO		Color: WHI / WHI		Vehicle/Vehicle Combination Vehicle / Vehicle Combination (10,001 lbs and over)				Original Direction North		Vehicle Movement (Pre-impact) Parked							
Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof				Exp. Date: 12/31/2017		Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor				Pedestrian Action (Officer Opinion)		Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects							
Policy Number:		Speed Limit 65		Est. Vehicle Speed 0		Driver Actions (Officer Opinion) No Action		Accident Avoidance Maneuver: 00-No Avoidance Maneuver		Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo									
Property Owner Last Name		First Name		MI		Street Address				City		State		Zip					
T.U. # 1		Passenger Position 01-Driver		Restrictions Not Restricted				Endorsements No Driving Endorsements				Wearing Helmet N/A (Cars/Trucks)							
Safety Equipment Shoulder and Lap Belt		Safety Equipment Use Not Used		Air Bag Deployment Deployed at position only				Air Bag Type Front		Ejection No		Injury Severity Fatal							
Suspected Alcohol No		Suspected Drugs No		Age 28		Sex M		Name / Address											
Alcohol Suspected: No - Observed		Tested For Alcohol: By Coroner				Other Drug/Impairment Suspected: No - Observed				Tested For Other Drugs: By Coroner									
Ejection Path: Not Ejected/Not applicable		Dead at Scene: Yes				Taken to: Adams County Coroner				Expired: 7/14/2017 @ 4:05:00 AM									

T.U. # 2	Passenger Position 01-Driver	Restrictions Not Restricted	Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)
Safety Equipment Shoulder and Lap Belt	Safety Equipment Use Properly used	Air Bag Deployment Not Equipped	Air Bag Type None	Ejection No	Injury Severity Complaint of Injury
Suspected Alcohol No	Suspected Drugs No	Age 48	Sex M	Name / Address [REDACTED]	
Alcohol Suspected: No - Observed	Tested For Alcohol: Not Tested	Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: Not Tested	
Ejection Path: Not Ejected/Not applicable	Dead at Scene: No	Taken to: Good Samaritan Medical Center		Expired:	

Accident Narrative:

Vehicle 1 and its trailer were northbound on Colorado 25 near E. 160th Ave. Vehicle 2 and its trailer were parked in the left lane of northbound Colorado 25 approximately 1/4 of a mile north of E. 160th Ave. in a construction zone lane closure. Vehicle 1 entered the lane closure into the left lane. Vehicle 1 collided its front into the rear of vehicle 2's trailer. Vehicle 1's trailer collided its front into the rear of vehicle 1. Vehicle 1 came to rest at the point of impact on its wheels in the center lane facing north. Vehicle 2 came to rest on its wheels in the center lane facing north.



T.U.# 2	Carrier Name [REDACTED]	Carrier Address [REDACTED]	Branch US DOT	Carrier Identification Number# 01000246
Carrier Type Interstate)	Source of Name Side of Vehicle	Gross Vehicle Weight Rating 26,001 Pounds and Over	Total # of Axles 5	Vehicle Configuration Truck and Trailer
Cargo Body Type Dump Bed	HazMat Placard	HazMat Cargo Released	HazMat #	HazMat Class
Liquid HazMat Cargo at the time of accident 0 to 1,000 gallons				
1st Accident Event - Collision Motor Vehicle in Transport	2nd Accident Event -	3rd Accident Event -	4th Accident Event -	

Approved By [REDACTED]	ID: 5268	Date: 7/22/2017
-------------------------------	-----------------	------------------------



September 11, 2017
 Letter: L0001152649

STATE OF COLORADO - Accident Representation

Case Number: 2017-00030210 Date of Accident: 20-Aug-2017 Date of Report: 20-Aug-2017
 Agency: COLORADO SPRINGS PD

Amended: Yes	Interstate HWY: Yes		
Under \$1000: No	State HWY: No		
Time: 05:09	City St/Cnty Rd: No		
City: COLORADO SPRINGS	HWY #: 25		
County: CO041	Mile Point: 0.00		
	County 04		
	#:		
Officer Number: 2891	Officer Name: [REDACTED]		
District Number: 26	Agency Code: 17345347		
	Detail: MAU		
Location: 141 I 25	Direction:		
Additional Location:	Miles: 0.00		
Latitude Degrees: 38	Minutes: 49	Seconds: 52.50	# Killed: 1
Longitude Degrees: -104	Minutes: 50	Seconds: 2.96	# Injured: 0
			# Vehicles: 1

Investigated @ Scene: Yes	Public Property/Employee: No	Photos Taken: Yes
RR Crossing Related: No	Const. Zone Related: Yes	Highway Interchange: No
Bridge Related: No		

Overlay A

A. Location: 01	C. Approach/Overtaking Turn: 03	G. Road Condition: 01
B. 1st Harmful Event: 05	D. Road Description: 04	H. Lighting Condition: 03
B. 2nd Harmful Event:	E. Road Contour: 03	J. Adverse Weather: 00
B. Most Harmful Event: 05	F. Road Surface: 02	

Traffic Unit Information

T.U. #: 1 Traffic Unit Type: Non-Vehicle License Number: CDL:
No License License State: CO Military ID:
Last Name: [REDACTED] First Name: [REDACTED] MI: D Phone Number:
Date of Birth: 21-Oct-1958 Gender: M Business
Phone:
Driver Address: TRANSIENT 80903

Vehicle Information

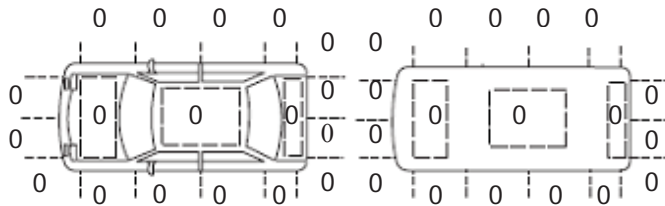
License Plate State: Year: Common Code:
Plate Number: Make: Citation Number:
VIN: Model: Primary Violation:
Body Type: Violation Code:
Color: DUI: No
Owner Same as Driver: No Last Name: First Name: MI:
Vehicle Owner NONE Address: Name:

Insurance Information

Insured: Insured Insurance Company:
Expiration Date: Policy Number:

Damage Information

Towed: No Towed By: Trailer VIN:
Towed To:



Undercarriage: 0

Undercarriage: 0

1- Slight
2- Moderate
3- Severe

Overlay A

K - Vehicle Combination:
L. Direction of Travel - Prior:
M. Vehicle Movement - Prior:
N. Roadway Speed Limit:
P. Estimated Vehicle Speed:
Q. Driver Actions:
R. Human Contributing Factor: 00
S. By Pedestrian Action: 04
T. Vehicle Defect / Condition:

Traffic Unit Information

T.U. #: 2 Traffic Unit Type: Vehicle License Number: [REDACTED] CDL:
License State: CO Military ID:
Last Name: [REDACTED] First Name: [REDACTED] MI: B Phone Number: [REDACTED]
Date of Birth: 02-Jul-1960 Gender: M Business Phone:
Driver Address: [REDACTED]

Vehicle Information

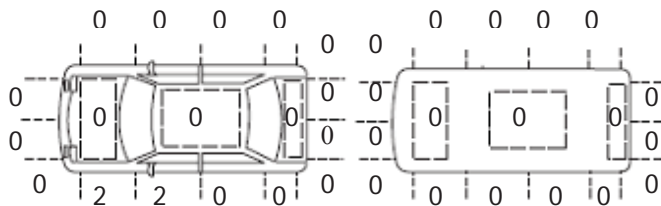
License Plate State: CO Year: 2008 Common Code:
Plate Number: [REDACTED] Make: Hyundai Citation Number:
VIN: [REDACTED] Model: Santa Fe Primary Violation:
Body Type: UP Violation Code:
Color: BLK DUI: No
Owner Same as Driver: Yes Last Name: First Name: MI:
Vehicle Owner Address: [REDACTED] 80863-2362

Insurance Information

Insured: Insured Insurance Company: State Farm
Expiration Date: 20-Nov-2017 Policy Number: [REDACTED]

Damage Information

Towed: No Towed By: Randy's High Country Trailer VIN:
Towed To: Impound Lot



Undercarriage: 0

Undercarriage: 0

Overlay A

K - Vehicle Combination: 09
L. Direction of Travel - Prior: 01
M. Vehicle Movement - Prior: 11
N. Roadway Speed Limit: 65
P. Estimated Vehicle Speed: 45
Q. Driver Actions: 00
R. Human Contributing Factor: 00
S. By Pedestrian Action:
T. Vehicle Defect / Condition: 00

All Involved Information

T.U. #	Pos.	Restr.	Endor.	Saf. Sys.	Saf. Use	Saf. Helmet	AB Deploy	AB Type	Eject.	Susp. Alc.	Susp. Drugs
1	15	01	00							02	02

Inj Severiy	Age	Sex	Full Name	Address
04	58	M	██████████	TRANSIENT COLORADO SPRINGS 80903

T.U. #	Pos.	Restr.	Endor.	Saf. Sys.	Saf. Use	Saf. Helmet	AB Deploy	AB Type	Eject.	Susp. Alc.	Susp. Drugs
2	01	01	00	B	01	A	01	A	00	00	00

Inj Severiy	Age	Sex	Full Name	Address
00	57	M	██████████	██

Fatal Supplement

Time Notified: 05:09 Trafficway Flow: 03 Traffic Control Device Functioning: 01
 Arrived @ Scene: 05:16 # of Lanes: 4
 Arrived @ Hospital: 05:35
 Responding Services: AMR 2/CSFD E4 S8

Fatal Traffic Units

T.U. #	Accident Avoidance Maneuver:	Fire/Hazardous Material Involvement:
1	00	00
T.U. #	Accident Avoidance Maneuver:	Fire/Hazardous Material Involvement:
2	01	00

Fatal All Involved

T.U. #	POS	EJECT	ALC SUS	ALC TEST	DRUG SUS	DRUG TEST	DEAD @ SCENE	EXP DATE	EXP TIME
1	15	00	10	06	08	06	00	20-Aug-2017	05:46
NAME	TAKEN TO								
██████████	Memorial Central								

T.U. #	POS	EJECT	ALC SUS	ALC TEST	DRUG SUS	DRUG TEST	DEAD @ SCENE	EXP DATE	EXP TIME
2	01	00		01		01	00		:
NAME	TAKEN TO								
██████████									

Narrative

Traffic Unit #1 (██████████) was walking east bound in the lanes of traffic on Interstate 25. Traffic Unit #2 (██████████) was travelling north bound on Interstate 25 in the far right exit lane. Traffic Unit #2 struck Traffic Unit #1 on the right side with it's front end. Traffic Unit #1 traveled to an uncontrolled point of rest on the right shoulder. Traffic Unit #2 traveled to a controled point of rest on the right shoulder. The pedestrian (TU #1) later died from his injuries.

Interstate 25

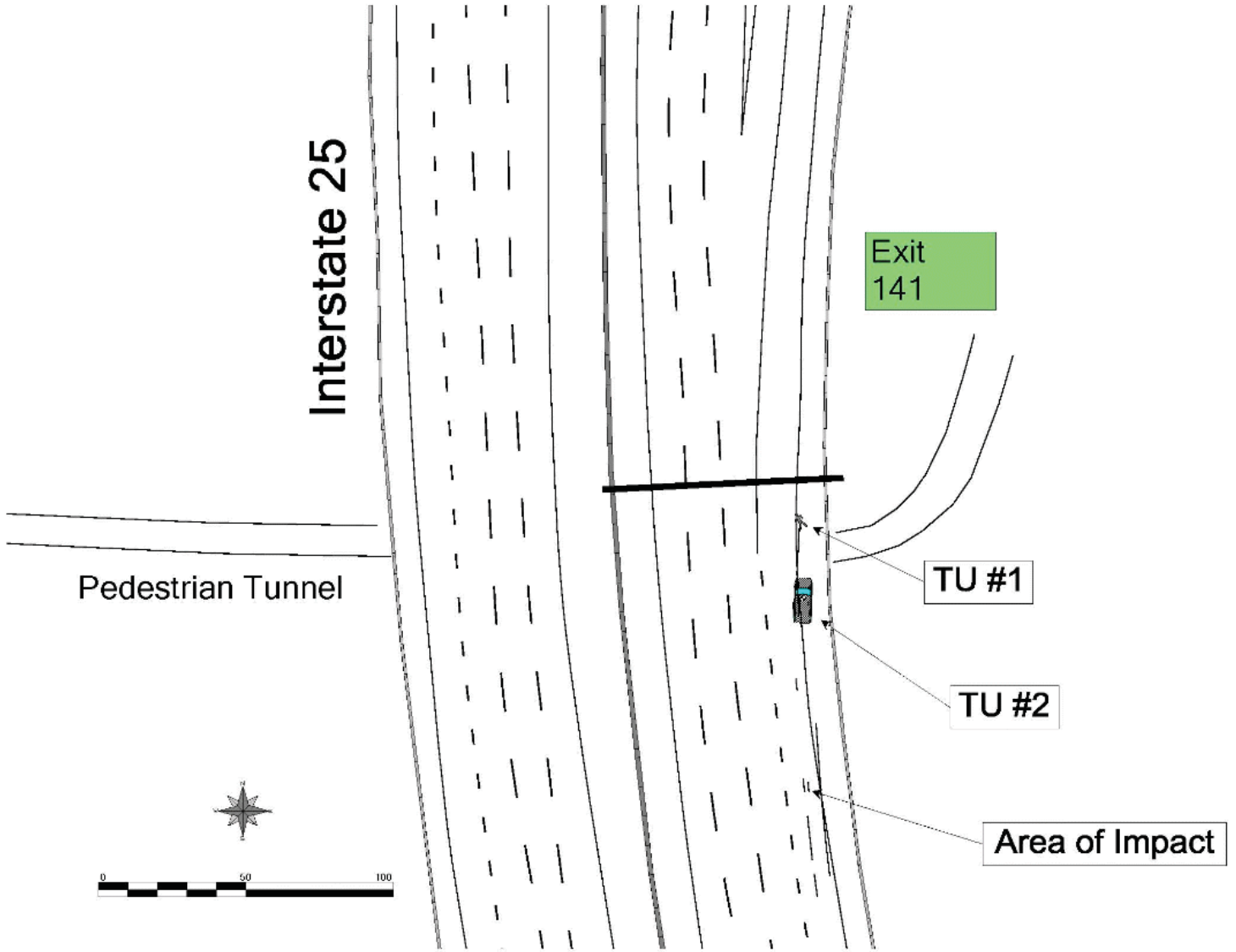
Pedestrian Tunnel

Exit
141

TU #1

TU #2

Area of Impact





Colorado State Patrol Traffic Accident Report

<Version 1.0.0.4994>

Case No: 3B-17-0923	Highway Code: STATE HWY	Highway ID: 6	Highway Mile Point: 411.3	Agency Code (Causal Factor): M12 - Inattentive to Driving	
Incident Date: 9/12/2017	City:	Agency: Colorado State Patrol	County: Logan	County ID: 13	
Incident Time: 2:46:00 PM	Officer Number: 0794	Officer Name:		Detail: 3B	
Number Killed: 1	Number Injured: 0	Location Route, Street, Road		Miles: 0 Feet: 1,584	East OF:
Form Date: 9/12/2017		Highway 6		<input type="checkbox"/> AT: Milepost 411	
Total Vehicles: 2		District: 3B	<input checked="" type="checkbox"/> Investigated At Scene	<input type="checkbox"/> Public Property Employee	<input checked="" type="checkbox"/> Photos Taken
		<input type="checkbox"/> Railroad Crossing Related	<input checked="" type="checkbox"/> Construction Zone Related	<input type="checkbox"/> Highway Interchange	<input type="checkbox"/> Bridge Related
Accident Location: On Roadway		1st - Collision with Vehicle in Transport Front to Rear	2nd -	Most - Collision with Vehicle in Transport Front to Rear	Approach/Overtaking Turn Not Applicable
Road Description: Non-Intersection	Road Contour: Straight On-Level	Road Surface: Blacktop	Road Condition: Dry		Lighting Condition: Daylight
EMERGENCY MEDICAL SERVICES: (Time Recorded in 24 Hr. Time)		Time Notified:	Arrived @ Scene:	Arrived @ Hospital:	Name of Responding Services: Sterling Fire/EMS
Trafficway Flow: Not Divided (two Way)	Number of Travel Lanes:		<input checked="" type="checkbox"/> Traffic Control Device Functioning: Functioning Properly	Most Significant Traffic Control Devices: Construction Signs and Construction Flagger	

Traffic Unit: 1	Traffic Unit Code: 01-Vehicle	Vehicle Vin:		Trailer Vin:	
Last Name:	First Name:	MI: R	Vehicle Owner Last Name:	First:	MI:
Street Address:		Phone	Street Address:		City: Sterling
City: Sterling	State: CO	Zip: 80751	Work Phone:	Towed Due to Damage <input checked="" type="checkbox"/>	By: TLC Automotive To: 210 Edwards Ave
Driver License Number:	CDL:	State: CO	Gender: M	DOB: 10/24/1934	
Primary Violation:					
Violation Code:	Citation Number:	Common Code:			
Year: 2013	Make: Chevrolet	Model: Silverado	Body Type: TK		
License Plate Number:	State / Country: CO	Color: BLU	Vehicle/Vehicle Combination Pickup Truck / Utility Van	Original Direction West	Vehicle Movement (Pre-impact) Going Straight
Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof Peerless Indemnity		Exp. Date: 4/1/2018	Driver - Most apparent human contributing factor (Officer Opinion) Distracted / Other (i.e. Food, Objects, Pet, etc)	Pedestrian Action (Officer Opinion)	Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects
Policy Number:	Speed Limit 40	Est. Vehicle Speed 45	Driver Actions (Officer Opinion) Careless Driving	Accident Avoidance Maneuver: 00-No Avoidance Maneuver	Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo

Traffic Unit: 2	Traffic Unit Code: 01-Vehicle	Vehicle Vin:		Trailer Vin:	
Last Name:	First Name:	MI: S	Vehicle Owner Last Name: McAtee Paving	First:	MI:
Street Address:		Phone	Street Address:		City: Sterling
City: Padroni	State: CO	Zip: 80745	Work Phone:	Towed Due to Damage <input type="checkbox"/>	By: To:
Driver License Number:	CDL: A	State: CO	Gender: M	DOB: 2/20/1950	
Primary Violation:					
Violation Code:	Citation Number:	Common Code:			
Year: 2007	Make: Freightliner	Model: Dump Truck	Body Type: JT		
License Plate Number:	State / Country: CO	Color: BLK	Vehicle/Vehicle Combination Vehicle / Vehicle Combination (10,001 lbs and over)	Original Direction West	Vehicle Movement (Pre-impact) Stopped in Traffic
Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof Liberty Mutual		Exp. Date: 4/1/2018	Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor	Pedestrian Action (Officer Opinion)	Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects
Policy Number:	Speed Limit 40	Est. Vehicle Speed 0	Driver Actions (Officer Opinion) No Action	Accident Avoidance Maneuver: 00-No Avoidance Maneuver	Fire/Hazardous Materials Involvement 00-No Fire/No Haz-Mat Cargo

Property Owner Last Name	First Name	MI	Street Address	City	State	Zip
---------------------------------	-------------------	-----------	-----------------------	-------------	--------------	------------

T.U. # 1	Passenger Position 01-Driver	Restrictions Not Restricted	Endorsements No Driving Endorsements		Wearing Helmet N/A (Cars/Trucks)
Safety Equipment Shoulder and Lap Belt	Safety Equipment Use Not Used	Air Bag Deployment Deployed at position only	Air Bag Type Front	Ejection No	Injury Severity Fatal
Suspected Alcohol No	Suspected Drugs No	Age 82	Sex M	Name / Address	
Alcohol Suspected: No - Observed	Tested For Alcohol: By Coroner		Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: By Coroner
Ejection Path: Not Ejected/Not applicable	Dead at Scene: Yes	Taken to: Sterling Regional Medical Center		Expired: 9/12/2017 @ 3:28:00 PM	

T.U. # 2	Passenger Position 01-Driver	Restrictions Not Restricted	Endorsements Endorsements Required and Complied With		Wearing Helmet N/A (Cars/Trucks)
Safety Equipment Shoulder and Lap Belt	Safety Equipment Use Properly used	Air Bag Deployment Not Deployed	Air Bag Type None	Ejection No	Injury Severity No Injury
Suspected Alcohol No	Suspected Drugs No	Age 67	Sex M	Name / Address [REDACTED]	
Alcohol Suspected: No - Observed	Tested For Alcohol: Not Tested	Other Drug/Impairment Suspected: No - Observed		Tested for Other Drugs: Not Tested	
Ejection Path: Not Ejected/Not applicable	Dead at Scene: No	Taken to: n/a		Expired:	

Accident Narrative:

Vehicle's #1 and #2 were both westbound on Highway 6 headed towards a construction zone. Vehicle #2 was ahead of Vehicle #1 and had come to a complete stop due to a construction flagger that had signaled for traffic to stop. Vehicle #1 did not stop and struck vehicle #2 with the front of the vehicle. Vehicle #1 showed no tire marks showing an attempt to stop. Vehicle #1's passenger front and passenger rear tires were 1.0' and 2.0' from the edge of the white fog line, respectively. Point of Impact was 5.0' from the edge of the white fog line. Vehicle #2 moved forward from the scene and parked on the right shoulder.

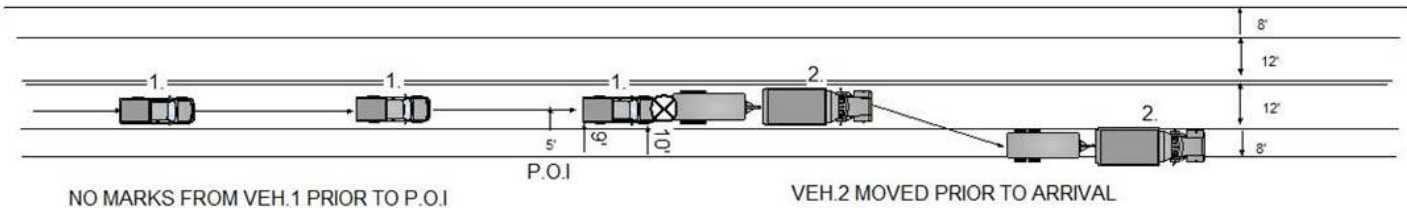


STERLING 5 MILES

COLORADO 6 WESTBOUND MP 411
GROUND PAVEMENT/ DRY

ONE LANE TRAFFIC WITH FLAGGER
CONSTRUCTION ZONE

NOT TO SCALE



7 SEPERATE WARNING SIGNS STARTING
3/4 MILE FROM P.O.I

T.U.# 2	Carrier Name MCATEE CONSTRUCTION CO	Carrier Address 220 Edwards Ave, Sterling, CO 80751	Branch US DOT	Carrier Identification Number# 786468
Carrier Type Interstate)	Source of Name Side of Vehicle	Gross Vehicle Weight Rating 26,001 Pounds and Over	Total # of Axles 4	Vehicle Configuration Truck and Trailer
Cargo Body Type Dump Bed	HazMat Placard	HazMat Cargo Released	HazMat #	HazMat Class
Liquid HazMat Cargo at the time of accident 0 to 1,000 gallons				

1st Accident Event - Collision
Motor Vehicle in Transport

2nd Accident Event -

3rd Accident Event -

4th Accident Event -

Approved By:Rood,Bob

ID:7552

Date:9/18/2017

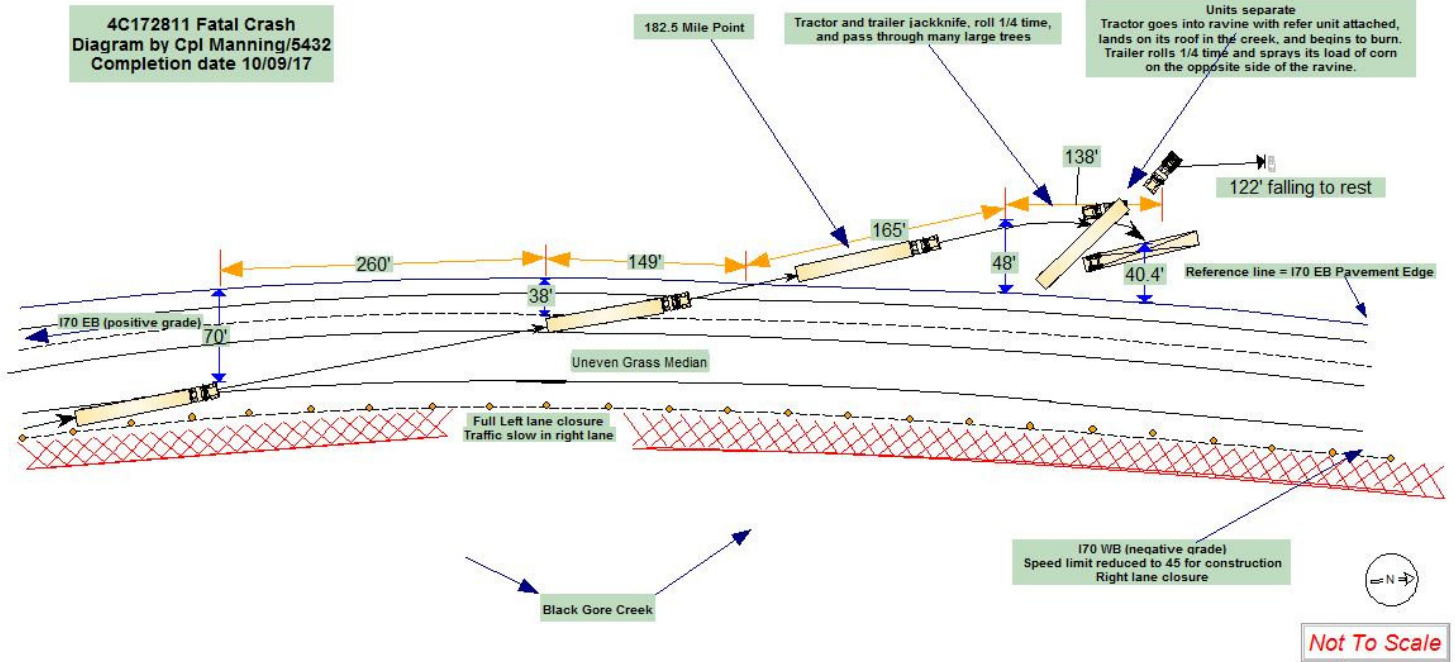


Colorado State Patrol Traffic Accident Report

<Version 1.0.0.4994>

Case No: 4C-17-2811		Highway Code: INTERSTATE HWY		Highway ID: 70	Highway Mile Point: 182.8	Agency Code (Causal Factor): M02 - Exceeded Safe Speed			
Incident Date: 9/21/2017		City:		Agency: Colorado State Patrol	County: Eagle		County ID: 44		
Incident Time: 4:12:00 PM		Officer Number: 1421		Officer Name:		Detail: 4C			
Number Killed: 1	Number Injured: 0	Location Route, Street, Road		Miles: 0	Feet: 4,224	East OF:			
Form Date: 10/1/2017				Westbound Interstate 70		<input type="checkbox"/> AT: Milepost 182			
		Latitude:		Longitude:					
Total Vehicles: 1	District: 4C	<input checked="" type="checkbox"/> Investigated At Scene	<input type="checkbox"/> Public Property Employee	<input type="checkbox"/> Photos Taken	<input type="checkbox"/> Railroad Crossing Related	<input checked="" type="checkbox"/> Construction Zone Related	<input type="checkbox"/> Highway Interchange	<input type="checkbox"/> Bridge Related	
Accident Location: Ran Off Left Side		1st - Collision with Object Tree		2nd - Non-Collision Accident Overturning		Most - Collision with Object Embankment		Approach/Overtaking Turn Not Applicable	
Road Description: Non-Intersection		Road Contour: Curve On-Grade		Road Surface: Blacktop		Road Condition: Dry		Lighting Condition: Daylight	Adverse Weather Condition: None
EMERGENCY MEDICAL SERVICES: (Time Recorded in 24 Hr. Time)		Time Notified: 4:15:00 PM	Arrived @ Scene: 4:28:00 PM	Arrived @ Hospital:	Name of Responding Services: Eagle County Paramedic Services				
Trafficway Flow: Divided, Median W/O Barrier		Number of Travel Lanes:		<input type="checkbox"/> Traffic Control Device Functioning:		<input checked="" type="checkbox"/> Most Significant Traffic Control Devices: Construction barrels, static warning signage, electronic			
Traffic Unit: 1		Traffic Unit Code: 01-Vehicle		Vehicle Vin:		Trailer Vin:			
Last Name:		First Name:		MI:	Vehicle Owner Last Name:		First:	MI:	
Street Address:		Phone		Street Address:		City: Rancho Cordova	State: CA	Zip: 95742	
City: Newark	State: CA	Zip: 94560	Work Phone:		Towed Due to Damage <input checked="" type="checkbox"/> By: Big Steve's Towing & Recovery To: 213 Spring Creek Rd				
Driver License Number:		CDL: A	State: CA	Gender: M	DOB: 8/4/1953				
Primary Violation:						<div style="border: 1px solid black; padding: 2px;"> 1-Minor 2-Moderate 3-Major </div>			
Violation Code:		Citation Number:		Common Code:					
Year: 2010	Make: International	Model: ProStar Eagle	Body Type: TT		Undercarriage: 3		Undercarriage: 3		
License Plate Number:		State / Country: CA		Color: WHI / WHI		Vehicle/Vehicle Combination Vehicle / Vehicle Combination (10,001 lbs and over)	Original Direction West	Vehicle Movement (Pre-impact) Going Straight	
Insurance Company: <input type="checkbox"/> None <input type="checkbox"/> No Proof		Exp. Date: 5/26/2018		Driver - Most apparent human contributing factor (Officer Opinion) No Apparent Contributing Factor		Pedestrian Action (Officer Opinion)		Vehicle Defect/Condition (Officer Opinion) No Vehicle Defects	
Policy Number:		Speed Limit 45	Est. Vehicle Speed 75	Driver Actions (Officer Opinion) Exceeded Safe / Posted Speed		Accident Avoidance Maneuver: 05-Steering and Braking (Evidence or stated)		Fire/Hazardous Materials Involvement 04-Vehicle Fire/Haz-Mat Cargo Not Involved	
Property Owner Last Name		First Name		MI	Street Address		City	State	Zip
T.U. # 1	Passenger Position 01-Driver		Restrictions Not Restricted		Endorsements Endorsements Required and Complied With		Wearing Helmet N/A (Cars/Trucks)		
Safety Equipment Shoulder and Lap Belt		Safety Equipment Use Unknown		Air Bag Deployment Not Equipped		Air Bag Type None	Ejection No	Injury Severity Fatal	
Suspected Alcohol No		Suspected Drugs No		Age 64	Sex M	Name / Address			
Alcohol Suspected: No - Other Method		Tested For Alcohol: By Coroner		Other Drug/Impairment Suspected: No - Other		Tested for Other Drugs: By Coroner			
Ejection Path: Not Ejected/Not applicable		Dead at Scene: Yes		Taken to: Eagle County Coroner		Expired: 9/22/2017 @ 1:20:00 PM			
Accident Narrative:									
Vehicle #1, a truck-tractor and semi-trailer combination, was westbound on Interstate 70.									
Vehicle #1 drove off of the left (south) side of the left lane into the median. Vehicle #1 drove 260 feet across the median and onto the oncoming left (north) shoulder of eastbound Interstate 70. Vehicle #1 drove across both oncoming (eastbound) lanes of Interstate 70 and across the eastbound shoulder for 119 feet. Vehicle #1 drove off of the right (south) side of eastbound Interstate 70 and up an embankment for 165 feet.									
The tractor unit of Vehicle #1 jackknifed while Vehicle #1 skidded 138 feet while colliding its front and left side with multiple large trees 48 feet from the right (south) edge of eastbound Interstate 70. The tractor and trailer units of Vehicle #1 separated as the trailer unit overturned 1/4 time onto its right side. The trailer overturned an additional 1/4 time before coming to rest on its roof, facing north, on the edge of a steep drop-off and hung on trees, 40 feet from the right (south) edge of eastbound Interstate 70.									
Upon separation, the tractor unit overturned 1/4 time onto its right side as it skidded 138 feet through brush and trees. The tractor unit vaulted 122' forward as it fell 120' into the deep ravine and creek bed for Black Gore Creek. The tractor unit came to rest on its top, facing west, in a deep pool in the creek with the driver still inside.									
Trailer Information:									
White Refrigerated Semi-Trailer									
2012 Wabash National Corporation ArcticLite									
CA 4PN7400									
Rancho Cordova, CA 95742									

4C172811 Fatal Crash
 Diagram by Cpl Manning/5432
 Completion date 10/09/17



T.U.# 1	Carrier Name [REDACTED]	Carrier Address [REDACTED]			Branch US DOT	Carrier Identification Number# 2889443
Carrier Type Interstate)	Source of Name Shipping Papers, Truck, Bus or Trip Manifest	Gross Vehicle Weight Rating 26,001 Pounds and Over	Total # of Axles 5	Vehicle Configuration Truck Tractor and Semi-Trailer		
Cargo Body Type Van/Enclosed Box	HazMat Placard	HazMat Cargo Released True	HazMat #	HazMat Class	Liquid HazMat Cargo at the time of accident 0 to 1,000 gallons	
1st Accident Event - Non-Collision Ran Off the Road	2nd Accident Event - Non-Collision Crossed the Median/Center Line	3rd Accident Event - Non-Collision Jackknifed		4th Accident Event - Collision Fixed Object		
Approved By: Herrle,Derek			ID: 3588	Date: 10/10/2017		