This Traffic Crash Report can be purchased online at: www.buycrash.com

FLORIDA TRAFFIC CRASH REPORT

LONG FORM SHORT FORM UPDATE (Shaded Areas)

TOTAL # OF VEHICLE SECTION(S)

WAS DOT PROPERTY INVOLVED IN THIS CRASH?

MAIL TO: DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING TALLAHASSEE, FL 32399-0537

TOTAL # OF PERSON SECTION(S) TOTAL # OF NARRATIVE SECTION(S) 2

2

1

CRASH	DATE		TIME OF CRASH	DAT	E OF REPOR	RT I	REPORTING AGENC	Y CASE NUME	BER THS	MV CRASH R	REPORT NUMBER		
06/26/			6:22 AM	06/	26/2016		16-401154	11 14 5		5534183			
CRASH													
COUNTY	CODE	CITY CODE	COUNTY OF CE	RASH			TY OF CRASH		CHECK IF CITY LIMIT		TIME REPORTED	TIME DISPA	ATCHED
38 TIME ON	SCENE	42	E CLEARED SCEN	E CHECK		KEY WEST	- P- P- NOT 6		OTT EINT	• •	6:23 AM	6:25 AN	1
6:32 A	M	7:	05 AM	COMPLE	TED 🗸	REASON (IT INVE	estigation NOT Compl	ete)				By: 1 Motorist Enforcement	2
CRASH	OCCURR	RED ON STR	N (CHOOSE ON EET, ROAD, HIGH	LY 1 OF 4 OP	TIONS)		ATOMET	ADDDEAD II					
DUVALS			, ((0/10, 1/10)				1 AT SIREE	ADDRESS#	2 AT	LATITUDE	AND I	ONGITUDE	
AT FEET		MILES	N S	S E W	AT/FRC	M INTERSECTIO	N WITH STREET, RO	DAD HIGHWAY	_		I OB I	ROM MILEPOS	Ta
100					EATON						4	-KOM MILEFOS	1#
			n Identifier	7 Forest Roa 8 Private Ro		Туј	pe of Shoulder		Type of Int	tersection	5 Traffic Circ		
5	1 Interst 2 U.S.		4 County 5 Local	9 Parking Lo	t		1 Paved 2 Unpaved		2 Four-Way I	ntersection	6 Roundabo 7 Five-Point	, or More	
	3 State		6 Turnpike/Totl	77 Other, Ex Narrative	plain in		3 Curb		3 T-Intersecti 4 Y-Intersecti		77 Other, E	oplain in Narrative	9
CRASHI			HECK IF PICTU		V								
3 3	Light 1 Daylight 2 Dusk 3 Dawn 4 Dark-Lig	6 Da Light ghted 77 C Nam	rk-Not Lighted rk-Unknown ting ther, Explain in ative nknown	4 Flog, 5 Sleet Freezir 6 Blow Dirt 7 Seve	ng Rain ng Sand, Soi re Crosswind er, Explain in	1	yay Surface Cond 5 Oil 6 Mud, Dirt, Gra 7 Sand 8 Water (standing/movin, 77 Other, Explai Narrative 88 Unknown	vel 1	1 No 2 Yes, School I Directly Involve 3 Yes, School I Indirectly Involve	Bus 1 From	4 Side 5 Side 6 Rea 7 Rea 77 Oth 10 to Front	Collision/Impa swipe, same dire swipe, Opposite to to Side to Rear er, Explain in Na known	ection Direction
First I	15 Harmful n Interc 1 No 2 Yes 88 Unk	hange	1 Overturn 2 Fire/Exp 3 Immersic 4 Jackknift 5 Cargo/E Loss or Sh 6 Fell/Jum Motor Veh 7 Thrown of Object	losion on e quipment ift ped From icle or Falling Water/Canal	10 Pedestri 11 Pedalcy 12 Railway engine) 13 Animal 14 Motor V Transport 15 Parked I 16 Work Zo Equipment 17 Struck B Cargo	cle vehicle (train,	Deject 19 Impact Attel Cusion 20 Bridge Over 21 Bridge Pier 22 Bridge Rail 23 Culvert 24 Curb 25 Ditch 26 Embankmet 27 Guardrail Fa 28 Guardrail Er 29 Cable Barrie	nuator/Crash head Structure or Support nt ice	n with Fixed Obj 30 Concrete 31 Other Traffic is 2 Z Tree (standin 33 Utility Pole/Lig 44 Traffic Sign S 35 Traffic Signal 36 Ohter Post, P Support 37 Fence 38 Mailbox 39 Other Fixed C building, tunnel, (Barrier ght Support upport Support ole or	Location 1	nful Event 1 On Roadway 2 Off Roadway 3 Shoulder 4 Median 6 Gore 7 Separator 8 In Parking Lan Zone 9 Outside Right- 10 Roadside 88 Unknown	
1 Non-Jun 2 Intersect 3 Intersect 4 Drivewa Related	nction tion	5R 14 E 15 (16 S 17 A ted 18 T CCess 77 (Event Relation Inction	sing o d a or Trail ation Lane	1 No 4 W mair 6 Sh	1	ction/	10 Raod Surfac cy, snow, slush 11 Obstruction 12 Debris 13 Traffic Contr	in Roadway ol Device sing or Obscured y Work	1 None 2 Weather	Conditions 7 Obstruction(s) N	Animal(s) in Ros 7 Other, Explain arrative 8 Unknown] adway
Work	Zone R		Crash	in Work Zone			pe of Work Zone	_	Workers in W	ork Zone	Law Enf	orcement in V	Nork
1	1 No 2 Yes 88 Uni	known	Warnir 2 Adva 3 Tran 4 Activ	re the First Working Sign Ince Warning Are sition Area ity Area Ination Area		1 La 2 La 3 Wo 4 Into	ne Closure ne Shift/Crossover ork on Shoulder or Me ermittent or Moving W ther, Explain in Narra	edian fork	1 No	D	1 No 2 Of 3 La	Zone	
VITNESS	SES										Olay	Flesent	
	NA	ME		TI LIK			ADDRES	ŝ	CITY & STAT	E		ZIP CODE	- 5
	NA	ME	Jan 1	77-1	- 11010	1119	ADDRES	3	CITY & STAT	E		ZIP CODE	
	NA	ME					ADDRES	3	CITY & STAT	E		ZIP CODE	
ON VEH	ICLE PE	ROPERTY	DAMAGE		311								
			DAMAGE - OTHE	R THAN VEH.	EST. AMT	OWNER'S NAMI	E (CHECK II	BUSINESS)	ADDRESS		CITY & STATE	ZIP CODI	E
/EH. #	PER#	PROPERTY	DAMAGE - OTHE	R THAN VEH.	EST. AMT	OWNER'S NAMI	E (CHECK IF	BUSINESS)	ADDRESS		CITY & STATE	ZIP CODI	E

HSMV 90010 S

1 7 Page _____ of ____

SAME SAME COLOR	VEHICLE #	¹ Che	eck if Comr	nercial 🔲	16-401154	e Number			Crash Report Numi	per	
Security			ENSE NUMBER	STATE		RES Charlet	Damasant		4100		
Section December		1 CITY2409	26	FL		CHECKII			CNIA 40747		
SECURIO PROCESS PROC		YEAR MA	KF	MODEL	PTVIE			-	DNA19/1/		
SECURION	1 No 2 Yes 1			MODEL				1 Disabling	4 Minor		EST. AMOUNT
Traing Commercial Mode C	11000000		ND .		PICKUP	WH	IITE - WHI	3 None	88 Unknown		500.00
MAME OF VEHICLE OWNER CHECKER BUBBRES V CORPERATION EXPENSES See SIMONTON STREET CORPERATION EXPENSES V V V V V V V V V				RANCE POLICY NUM				CLE REMOVED BY	1. Ro	tation	
MANE OF VEHICLE OWNSET SUPPLY STATE PRESIDENCE OF SUPPLY STATE PRESIDENCE OWNSET SUPPLY STATE SUPPLY STA	PREFERRED GOVERNM	ENTAL INSURANCE TR	RUST PXFL1	044200112-04			1 DR	IVER	3. Dri	ver	3
STATE CAPPA NUMBER STATE REGISTRATOR EXPERSES STATE REGISTRATOR EXPENSES REGISTRATOR EXPENSES STATE REGIST	NAME OF VEHICLE OWN	ER (CHECK IF BUSINE	SS)	CURRENT ADDRE	SS	= 1 1 1 1 1	CIT	/ & STATE	4.00	THE RESERVE OF THE PERSON NAMED IN	
Table LECKITH AALES	CITY OF KEY WEST		1.3.	604 SIMONTON S	TREET				F		
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Treatment Trea	One:			Regis	stration			1 1 1 1 1 1 1	III VICE	LENGIII	AALES
Verificial	Trailer LICENSE NUMBE	R STATE REC	GISTRATION EXP	IRES Chec	k if Permanent VIN			YEAR	MAKE	LENGTH	AVIES
Treatment Free Treatment	Two:			Regis	stration					1	TIMEEO
MAX_MAT_RELACAD MAX_MAT_RELACADD		E W Off-Ros	ad Unknown	ON STREET, RO	AD, HIGHWAY			AT EST, SPEE	D POSTED S	PEED T	TOTAL LANES
MACH CAMPAGE MACH PLACARD MACH	<u> </u>			DUVAL ST							
2 Yes as Unknown 2 Yes 2 Y			RD NUMB	ER CLAS	SS A	Area of Initial Impa				Most D	amaged Area
MOTOR CARRIER ADDRESS CITY STATE 2P CODE PHONE NUMBER OF Signary Whished Configuration 1 Cargo Workshild 21 Star 2 PC Commercial Bullow Ywhished Configuration 1 Cargo Workshild 21 Star 2 PC CODE PHONE NUMBER THIRT Workshild Commercial Bullow Ywhished Configuration 1 Trusters (5.50 kg) or less) 1 Peaseque Car 1 Passage Car 2 Provide Passage 2 Provide Cargo State (1) Passage Cargo State (1) Pa	2 Yes	2 Yes		- 1	9	3 4 5 6	7 13	18 Undercarrie	13	. [3]	4 5 6 ,
MOTOR CARRIER ADDRESS OFFICE		88 Unknown				15 115 17	and the same of th	19 Overturn		1/17	Mar Tarle
MOTOR CARRIER ADDRESS	MOTOR CARRIER NAME		US DO	TNUMBER			h				73 II P
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Passanger Car 18 Motor Coach 19 Mo	3	17 Cargo Van (10,	,000 lbs	2 Two-Way, Not	Divided, with a	for Ha	zardous Mat	erials	9 Truck m	ore than 10,0	100 lbs (4,536
2 Passenger Von 3 Pichup (4, 558 etg) or fass) 3 Pichup (4, 558 etg) or fass) 4, Vehicle Positive Modan Berrier 5 One-Wy Trafforway 9 Understand 1 A Twe-Wy Direct (process of the common of the commo	1 Passenger Car					2 Sing	jie-Unit Truci than 10,000	k (2-axle and GVWR lbs (4,536 kg))			ts for 9-15
7 Moor Home 8 Bus tann 10,000 bits (4,558 kg) short Fixed Poly 1 Motorcycle 21 Farm Labor Vehicle 1 More 1 More 1 Month of More Vehicle 1 More	2 Passenger Van	19 Other Light True		(painted >4 feet)	Median						
## Support Sup					ded, Positive						
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The commendation of the	Comm	/Non-Commercial		TRAILER 1 TR	AILER 2 3 Tank Traile	r 10 Au	to Transport				
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Most Harmful Event Most Harmful			ent		6 Utility Traile	er 88 Un					
Comman C			ck						7 Flatbed		
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Sequence of Events 8 Ran into Water/Canal 15					hicle (train engine)			Structure 3	O Concrete Traffic		
15 Parked Motor Vehicle 15 Parked Motor Vehicle 15 Parked Motor Vehicle 16 Work Zone/Maintenance 24 Curb 35 Traffic Signal Support 36 Chier Post, Pole, or Support 37 Fance 38 Unknown 37 Fance 38 Unknown 37 Fance 38 Unknown 38 Unknown 37 Fance 38 Unknown 39 Cher Fixed Object (wall, building, tunnel, etc.) 44 Cross Median 44 Cross Median 45 Cross Centerfine 46 Cross Centerfine 47 Struck By Falling, Shifting Cargo or Aghing Cargo or Aghing Satin Motion by Motor 48 Cross Median 46 Cross Median 46 Cross Centerfine 47 Cross Median 48 Cross Median 48 Cross Median 48 Cross Median 49 Cross Median 40 Downhill Runaway 40 Downhill Runaway 40 Explain in Narrative 50 Sag (bottom) 40 Sag (bottom) 41 Straight Anead 41 Slowing 41 Slowing 42 Sag (bottom) 43 Straight Anead 44 Downhill Runaway 45 Cross Centerfine 46 Changing Lanes 47 Cither, Explain in Narrative 48 Changing Lanes 47 Cither, Explain in Narrative 48 Changing Lanes 40 Straight Anead 41 Slowing 40 Score Read of Roadway, Left 44 Cross Median 45 Cross Centerfine 46 Cross Centerfine 47 Straight Anead 48 Score Read of Roadway, Left 48 Downhill Runaway 48 Score Read of Roadway, Left 49 Downhill Runaway 40 Score Read of Roadway, Left 40 Downhill Runaway 40 Score Read of Roadway, Left 40 Downhill Runaway 40 Score Read of Roadway, Left 40 Downhill Runaway 40 Score Read of Roadway, Left 41 Score Read of Roadway, Left 42 Cross Median 43 Turning Left 44 Score Read of Roadway, Left 45 Cross Centerfine 46 Cross Median 47 Score Read of Roadway, Left 48 Score Read of Roadway, Left 49 Score Read of Roadway, Left 40 Score Read of Roadway, Left 40 Score Read o	Sequence of Events	8 Ran into Water/Ca	anal		more (delli, eligilie)					ner	
15 40 equipment Failure (blown tire, brake failure, etc.) 40 equipment Failure (blown tire, brake failure, etc.) 41 Separation of Units 42 Ran Off Roadway, kight 43 Ran Off Roadway, kight 45 Ran Off Roadway, kigh	1st 2nd							3	3 Utility Pole/Light	Support	
Transity Commuter Bus Special Function 1 No Special Function 2 Farm Vehicle 3 Police 1 Segment 1 Struck By Falling, Shifting Cargo or Anything Set in Motion by Motor 2 Gembankment 3 Fersoe 38 Unknown 2 Grade 1 Level 1 Straight 4 Downhill 4 Slowing 4 Downhill 4 Slowing 1 Straight 4 Downhill 5 Sag (bottom) 1 Straight 4 Downhill 5 Sag (bottom) 1 Special Function 1 No Special Function 2 Farm Vehicle 3 Police 1 Special Function 2 Farm Vehicle 3 Police 1 School Bus 1 Farm Labor Transport 1 School Bus 1 Transit/Commuter Bus 8 Unknown 1 Straight Name of Violator 4 Straight Name of Na		II.		16 Work Zone							4.15
Arything Set in Motion by Motor 27 Guardrall Face 28 Guardrall End 39 Mailbox 39 Other Fixed Object (wall, 42 Ran Off Roadway, Left 44 Cross Median 45 Cross Centerfine 46 Downhill Runaway 41 Scheol Roadway Grade 1 Level 1 Level 2 Hillcrest 3 Turning Left 14 Slowing 15 Negotiating a Curve 5 Turning Right 6 Changing Lanes 8 Parked 77 Other, Explain in Narrative 8 Dexico 10 Fire Truck 11 Overtaking/Passing 10 Person (including 77 Other, Explain in Narrative 8 Unknown 11 No Special Function 1 Special Function 2 Farm Vehicle 3 Police 11 Farm Labor Transport 16 Shuttle Bus 17 Farm Labor Transport 16 Shuttle Bus 17 Farm Labor Bus 8 Unknown 17 Stransit/Commuter Bus 8 Unknown 17 Stransit/Commuter Bus 8 Unknown 18 Unknown 19 Stransit/Commuter Bus 8 Unknown 19 Stransit/Commuter Bus 19 Stransit/Commute			e (blown tire,		alling, Shifting Cargo or					or Support	
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Vehicle Maneuver Action Ast Cross Genterline Ast Cross Centerline Ast Consider Ast C					Fixed Object	28 Guar	drail End				
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4 School Zones Sign/ 10 Person (including Flagman, Officer, Guard, etc.) Special Function of Motor Vehicle 1 Park 12 School Bus 17 Farm Labor Transport 12 School Bus 13 Transit/Commuter Bus 8 Unknown 13 Transit/Commuter Bus 88 Unknown 14 Unknown 15 Charlett Number 16 Study Number 17 Other, Explain in Narrative 80 Unknown 17 Other, Explain in Narrative 80 Unknown 18 Unknown 19 Ambulance 14 Intercity Bus 15 Charlett Number 15 Charlett Number 16 Study Bus 17 Farm Labor Transport 16 Study Bus 17 Farm Labor Bus 88 Unknown 19 ERSON # NAME OF VIOLATOR FL STATUTE NUMBER CHARGE CITATION NUMBER PERSON # NAME OF VIOLATOR FL STATUTE NUMBER CHARGE CITATION NUMBER	1 3 Uphill		ent	6 Changing Lanes	17 Entering Traffic	Lane 1		Douise	2 Brakes		
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PERSON # NAME OF VIOLATOR FL STATUTE NUMBER CHARGE CITATION NUMBER	/IOLATIONS	O Military	13 Iran	and commuter BUS	oo UNKNOWN				12 Suspe	ension 8	8 Unknown
PERSON # NAME OF A VIOLATOR	PERSON # NAME OF	VIOLATOR		FL STATI	UTE NUMBER		С	HARGE		CITATION	NUMBER
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PERSON # NAME OF VIOLATOR FL STATUTE NUMBER CHARGE CITATION NUMBER	PERSON# NAME OF	VIOLATOR	7 6 15	FL STATI	JTE NUMBER		C	HARGE		CITATION	NUMBER
PL STATUTE NUMBER CHARGE CITATION NUMBER	PERSON# NAME OF	MOLATOR		P) A=1	ITE MINOR					-1	
	NAME OF	VIOLATOR		FL STAT	JIE NUMBER	11111	C	HARGE		CITATION	NUMBER

PERSON# 1	Reporting Agency Case Nur 16-401154	mber	HSMV Crash Report Nu 86534183				
1 Driver 2 Non-Motorist 3 Passenger VEHICLE # NAME 0RVILLE	DOMINIC GARVEY		PHONE NUMBER (305) 809-3759	Check if Recommend Driver Re-exam			
CURRENT ADDRESS (Number and Street)		CITY & STA	TE	ZIP CODE			
DATE OF BIRTH SEX: DRIVERS LICENSE	KEY WEST	FL		33040			
DATE OF BIRTH 1 Male 2 Female 88 Unknown 1 G-610-644-95-3		FL 10/11/2023	INJURY SEVERITY (IN. 1 None 2 Possible 3 Non-Incapacitating	4 Incapacitating 5 Fatal (within 30 days) 6 Non-Traffic Fatality			
DL Type	1st Drive Drive 1 No Contribution Actic 2 Operated MV in Care Negligent Manner 3 Failed to Yield Right-4 Improper Backing 6 Improper Turn 10 Followed too Closel 11 Ran Red Light	Condition At Time of Crash 1 Apparently Normal 3 Asleep or Fatiuged 5 III (sick) or Fainted 6 Seizure, Epilespsy, Blackout 7 Physically Impaired 8 Emotional (depression,					
2 Electronic Communication Devices (cell phone, etc. 3 Other Electronic Device (navigation device, DVD player) ORIVER VISION OBSTRUCTIONS 1 Vision Not Obscured 2 Inclament Weather 5 Load on Vehicle 9 Smoke	12 Drove too Fast for C 13 Ran Stop Sign 15 Improper Passing 17 Exceeded Posted S 21 Wrong Side of Wror 25 Falled to Keep in Pro	Object, Non-Motoris Roadway, etc. peed 31 Operated MV in B	rface, MV, t in Erratic, sive Manner	angry, disturbed, etc.) 9 Under the Influence of Medications/Drugs/Alcohol 77 Other, Explain in Narrative 88 Unknown			
3 Parked/Stopped Vehicle 7 Signs/Billboards 77 All Other, Explain			OR PASSENGER				
DRIVER OR PASSENGER Motor Vehicle Seating Position: LOCATION: SEAT ROW (LOC) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	OTHER Motorc	-Compliant ycle Helmet r Helmet 3	/es Not Applicable 1 Not Ap 2 None L 3 Should 4 Should	Restraint Systems (RS) plicable (non-motorist) Ised - Motor Vehicle Occupant er and Lap Belt Used er Belt Only Used			
3 Right 77 Other 3 Third (explain in narrative) 88 Unknown 88 Unknown 88 Unknown 77 Other Row 88 Unknown 88 Unknown 88 Unknown 88 Unknown 88 Unknown 3 Other Enclosed Cargo Area 4 Unenclosed Cargo Area 4 Unenclosed Cargo Area 5 Trailing Unit 6 Riding on Motor Vehicle Exterior (nontrailing unit) 88 Unknown	Ejection (EJECT) 1 Not Ejected 2 Ejected, Totally 3 Ejected, Partially 4 Not Applicable 88 Unknown NON-MOTORIST	5 De (knee 2 Not Applicable 6 De 2 Not Deployed Comm 3 Deployed-Front 7 Dep	, air belt, etc.) ployed- ployed- ployed-Curtain ployed-Curtain ployment 6 Restrai 7 Child R 8 Child R 9 Booster 10 Child I	It Only Used It Only Used Type Unknown Lestraint System - Forward Facing Lestraint System - Rear Facing Lestraint System - Rear Facing Lestraint Type Unknown Lexplain in Narrative			
2 Other Pedestrian (wheelchari, person in a building, skater, pedestrian conveyance, etc. 3 Bicyclist 4 Other Cyclist 5 Occupant of Motor Vehicle Not in Transport (parked, etc.) 6 Occupant of a Non-Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist 1st 2 Dart/Das	Crosswalk ked Crosswalk Midblock - Marked Crosswalk rosswalk ocation rist Actions/Circumstances per Action h	77 Other, Explain in 2 V Narrative 3 V 18 Unknown adj: 4 V Roa	rossing Roadway /alting to Cross Roadway /alking/Cycling Along adway with Traffic (in or acent to travel lane) //alking/Cycling Along //aliang Along //alian	i Walking/Cycling on Sidewalk In Roadway — Other (working, laying, etc.) 'Adjacent to Raodway (e.g., houlder, median) 'Goling to or from School (K-12) 'Working in Trafficway ncident response) 'O None 'Other, Explain in Narrative			
2 Helmet 5 Lighting 6 Not Applicable 7 Other, Explain in Narrative 88 Unknown 2 and 5 Disabled on, pushing	vay Improperly (standing, 8ing, playing) 9	Entering/Exiting Parked/Standing ehicle Inattentive (talking, eating, etc) Not Visible (dark clothing, no phiting, etc.)	10 Improper Turn/Merge 11 Improper Passing 12 Wrong-Way Riding or 1 77 Other, Explain in Narra 88 Unknown				
SUSPECTED ALCOHOL USE: 1 No 2 Yes 88 Unknown ALCOHOL TESTED: 1 Test Not Given 2 Test Refused 3 Test Given 88 Unknown, if Tested SOURCE OF TRANSPORT TO MEDICAL FACILITY ALCOHOL TEST TYPE: 1 Blood 2 Breath 3 Urine 77 Other, Explain in Narrative EMS AGENCY NAME OR ID	ALCOHOL TEST RESULT: 1 PENDING 2 COMPLETED 88 UNKNOWN	DRUG USE: 1 No 2 Yes 88 Unknown 1 Test N 2 Test R 3 Test C 88 Unknown 88 Unknown	lot Given Refused 3 Urine 3 Urine 77 Other, cown, if Tested Explain in	ST TYPE: DRUG TEST RESULT: 1 Positive 2 Negative 3 Pending Narrative 88 Unknown			
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown			MEDICAL FACILIT	Y TRANSPORTED TO			
PERSON # VEHICLE # NAME	ADDITIONAL PASSENGE DATE OF BIRTH	INJ SEX LOC: S R	O EJECT HI	U EP ABD RS			
CURRENT ADDRESS (Number and Street)	CITY	STAT	E	ZIP CODE			
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Lew Enforcement 77 Other, Explain in Narrative 88 Unitnown	PR ID	EMS RUN NUMBER	MEDICAL FACILIT	TY TRANSPORTED TO			
PERSON # VEHICLE # NAME	DATE OF BIRTH	INJ SEX LOC: S R	O EJECT HU	J EP ABD RS			
CURRENT ADDRESS (Number and Street)	CITY	STAT		ZIP CODE			
SOURCE OF TRANSPORT TO MEDICAL FACILITY I Not Transported 2 ENIS 3 Lew Enforcement 77 Other, Explain in Neuralive 86 Unknown	R ID	EMS RUN NUMBER	MEDICAL FACILIT	TY TRANSPORTED TO			

NARRATIVE	Reporting Agency Case Number 16-401154	HSMV Crash Report Number 86534183
V1 was traveling north on the 400 block of Duval St. V2 was legally D1 stated that the steering locked on V1, causing V1 to swerve into damage to V2, including the door, the body, the front left tire and po inspection by officers on scene and it was removed by the driver. V	parked on the west side of the 400 block of Duval the front left corner of V2. The impact caused V2 is ssibly the axle were observed. The steering of V1	Street, outside 406 Duval Street, facing south.
PERSON# VEHICLE# NAME	ADDITIONAL PASSENGERS DATE OF BIRTH INJ SEX LOC: S R	O EJECT HU EP ABD RS
CURRENT ADDRESS (Number and Street)	CITY STATE	ZIP CODE
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Marraths 88 University (Marraths 48 Universit	ID EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO
PERSON # VEHICLE # NAME	DATE OF BIRTH INJ SEX LOC: S R	O EJECT HU EP ABD RS
CURRENT ADDRESS (Number and Street)	CITY STATE	ZIP CODE
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Nemative 89 Urbanown	D EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO
ADDITIONAL VIOLATIONS		
PERSON # NAME OF VIOLATOR FL STAT	UTE NUMBER CHARGE	CITATION NUMBER

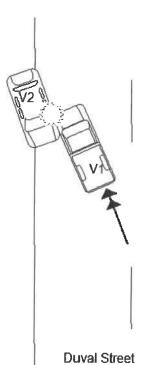
PERSON#	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
PERSON#	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

REPORTING OFFICER

ID/BADGE# OFFICER NAME DEPARTMENT TYPE OF DEPT. POLICE DEPARTMENT (PD) 2609/P28 OFC TODD STEVENS KEY WEST POLICE DEPARTMENT

HSMV 90010 S





EXHIBIT



VEHICLE # 2	C	heck if Con		16-401154	Case Number			86534	rash Report Numb	er	Mar 1
1 Vehicle in Transport 2 Parked Motor Vehicle 2 Median Vehicle 2 JEFFJA				REGISTRATION EX	KPIRES CI	neck if Perma	eck if Permanent VIN				
3 Working Vehicle Hit and Run			FL	08/17/2016		egistration	<u> </u>	B3KA43R58	H162268		
1 No 2 Yes 1	Section 19	MAKE DODG	MODEL	STY		COLOR		DAMAGE: 1 Disabling	4 Minor	1 4 11	EST. AMOUNT
88 Unknown INSURANCE COMPANY (E	1000		URANCE POLICY NU		OR SEDAN	GOLD - (2 Functional 3 None	88 Unknown	<u> </u>	57,000.00
PROGRESSIVE		906	592777		to Damage: 1 No 2 Yes	2		REMOVED BY	G 3. Driv	ner Request	
NAME OF VEHICLE OWNE	R (CHECK IF BUSI PECOO	NESS)	4708 11TH AVE				CITY & S		FL	ZIP 33	711
Trailer LICENSE NUMBER One:	R STATE F	REGISTRATION E		eck if Permanent VIN	T. FTS			YEAR	MAKE	LENGTH	AXLES
Trailer LICENSE NUMBER Two:	STATE F	REGISTRATION EX		ck if Permanent VIN	1 37			YEAR	MAKE	LENGTH	AXLES
VEHICLE N S TRAVELING	E W Off-I	Road Unknow	ON STREET, R	OAD, HIGHWAY				AT EST. SPEED	POSTED SE		TOTAL LANES
HAZ, MAT, RELEASED 1 No	HAZ. MAT. PLAC	ARD NUM	BER CLA	488	Area of Initia	Impact				Most D	amaged Area
2 Yes 88 Unknown	2 Yes 88 Unknown				2 3 4 5	6 7	13			2 3	4 5 6 7
MOTOR CARRIER NAME		USI	OT NUMBER		1 15 (15	17 8	19 20	Windshield			18 17 8
MOTOR CARRIER ADDRES	20				13 12 1	1 10	21	Trailer	²¹	14 13	2 11 10 9
			CITY			STA	ATE ZIP	CODE	PH	ONE NUMB	ER
Vehicle Body Type	15 Low Speed 1 16 (Sport) Utility		Traffic	*		Comr	nercial Me	otor Vehicle (Configuration 8 Tractor/Tr	rinle	
1	17 Cargo Van ((4,536 kg) or le	10,000 lbs	1 1 Two-Way, No 2 Two-Way, No Continuous Le	ot Divided, with a		for Hazardo	us Materials			re than 10,0	000 lbs (4,536
1 Passenger Car 2 Passenger Van	18 Motor Coach			vided, Unprotected		more than 1	0,000 lbs (4	l,536 kg)) r more axles)	10 Bus/Larg	ge van (seat including dri	
3 Pickup 7 Motor Home	(4,536 kg) or le	ss)	4 Two-Way, Di	vided, Positive		4 Truck Pulli 5 Truck Trac	ing Trailer(s)		ats for more	ŕ
8 Bus	than 10,000 lbs		Median Barrier 5 One-Way Tra			6 Truck Trac 7 Truck Trac	tor/Semi-Tr	railer	occupants,	including dri xplain in Na	iver)
11 Motorcycle 12 Moped 13 All Terrain Vehicle (ATV)	21 Farm Labor 77 Other, Expla		88 Unknown	Trailer Ty	pe	8 Pole Traile		Truck	88 Unknow		
	88 Unknown Non-Commercia	ı	TRAILER 1 T		Semi Trailer	9 Towed Vel	hicle	Carg	go Body Type	13 Int	ermodal
	tate Carrier			4 Saddle I	Vlount/Trailer	10 Auto Trar 77 Other, Ex			Van/Enclosed Bo Hopper	x Conta	niner Chassis
3 Not in	tate Carrier Commerce/Govern			5 Boat Tra	ailer	Narrative 88 Unknown		۽ ليا	Pole-Trailer Cargo Tank	Anoth	er Vehicle ot Applicable
4 Not in Most Harmful Event	Commerce/Other T Non-Collision		-	7 House T	nailer ,000 (bs (4,536	ka) or less	_	2 Rus 7	Flatbed Dump	(vehic	le 10,000 lbs
most riailiffe Evelit	1 Overtum/Rollov		GVWR/GCWR	4 210	,001-26,000 lb: ore than 26,000	s (4,536-11,7		9	Concrete Mixer	displa	kg) or less not ying HM placard
	2 Fire/Explosion 3 Immersion			4 No	t Applicable			- 1	Auto Transport Garbage/Refuse	Narrat	
14	4 Jackknife 5 Cargo/Equipme		Collision with I 10 Pedestria	Non-Fixed Object n	44		ixed Object		2 Log Cable Barrier	88 Un	known
	6 Fell/Jumped Fro 7 Thrown or Fallin	g Object	11 Pedalcycl 12 Railway V	e ehicle (train, engine)	20	9 Impact Atte D Bridge Ove	rhead Struc	sh Cushion cture 30	Concrete Traffic B Other Traffic Barri		Vehicle Use
Sequence of Events	8 Ran into Water/ 9 Other Non-Colli		13 Animal	nicle in Transport	22	1 Bridge Pier 2 Bridge Rail		32	Tree (standing) Utility Pole/Light S		
1st 2nd	[40-46 Sequence	of Events only]	15 Parked Me			3 Culvert 4 Curb		34	Traffic Sign Suppo	ort	
14	40 equipment Fail brake failure, etc.)		Equipment	Falling, Shifting Cargo	25	Ditch Embankme	.m.d	36	Traffic Signal Sup Other Post, Pole,		1 No 2 Yes
3rd 4th	41 Separation of U 42 Ran Off Roady			in Motion by Motor	27	Guardrail F	ace	38	Fence Mailbox		88 Unknown
	43 Ran Off Roady 44 Cross Median		18 Other Non	-Fixed Object				bui	Other Fixed Object Iding tunnel etc.)		
Roadway Grade	45 Cross Centerlii 46 Downhill Runa		1 Straight Ahead		Traffic	Traffic	Control De	evice For This Vehicle		Vehicle	Defects
1 Level		<u> </u>	3 Turning Left 4 Backing 5 Turning Right	14 Slowing 15 Negotiating		1 1		8 Flashing Sign		1	
1 3 Uphill 4 Downhill	Roadway Aligni 1 Straight	nent	6 Changing Land		ffic Lane	1 No Cor	ntrols Zone Sign/	9 Railway Cros Device	2 Brakes		3 Wheels 4 Windows/
5 Sag (bottom)	2 Curve Ri		8 Parked 10 Making U-Tur 11 Overtaking/Pa		in in Narrative	Device 5 Traffic	-	Flagman, Office	uding 4 Lighte (head, V	Vindshield 5 Mirrors
Special Function			pulance	14 Intercity Bus		Signal 6 Stop Si		Guard, etc.) 77 Other, Expla	6 Steering	j 1	6 Truck Coupling railer Hitch/
1 of Motor Vehicle	2 Farm Vehicl 3 Police		e Truck rm Labor Transport	15 Charter/Tour Bi 16 Shuttle Bus	ıs	7 Yield Si		Narrative 88 Unknown		System S	Safety Chains 7 Other, Explain i
	7 Taxi 8 Military		hool Bus ansit/Commuter Bus	17 Farm Labor Bus 88 Unknown	5				11 Power 12 Suspen	Train N	larrative
PERSON # NAME OF	VIOLATOR			TUTE NUMBER	1		CHARG	CE .	12 Suspe		8 Unknown
					1 9		CHARC			CHARON	NUMBER
	VIOLATOR		FL STA	TUTE NUMBER			CHAR	ĠΕ		CITATION	NUMBER
PERSON # NAME OF	VIOLATOR		FL STA	TUTE NUMBER			CHARG	GE		CITATION	NUMBER

PERSON# 2	Reporting Agency Cas 16-401154	e Number	HSMV Crash Report Number 86534183					
1 Driver 2 Non-Motorist 1 2 NAME		The Williams	PHONE NUMBER Check if Recommend					
3 Passenger LLOYD CURRENT ADDRESS (Number and Street)	VALANDO PEC	CITY & STATE	(813) 704-7179 Driver Re-exam					
4708 11TH AVE S	ST PETERSBURG	FL	33711					
1 Male	IVERS LICENSE NUMBER	STATE EXPIRES	INJURY SEVERITY (INJ) 4 Incapacitating					
2 Female	-200-538-57-297-0	FL 08/17/2017	2 Possible 5 Fatal (within 30 days) 1 3 Non-Incapacitating 6 Non-Traffic Fatality					
	1 No Contribution 2 Operated MV period 3 Failed to Yield R 4 Improper Back 6 Improper Turn 2nd 10 Followed too C 11 Ran Red Light 12 Drove too Fast 13 Ran Stop Sign 15 Improper Pass 17 Exceeded Pos 21 Wrong Side of 25 Failed to Keep	1						
3 Parked/Stopped Vehicle 7 Signs/Billboards 7	7 All Other, Explain		OR PASSENGER					
DRIVER OR PASSENGER Motor Vehicle Seating Position: LOCATION:	SEAT ROW OTHER 1 1 2 3 Cab Ba Ejection (EJECT) 1 Not Ejected 2 Ejected, Tota 3 Ejected, Tota 3 Ejected, Tota	DOT-Compliant otorcycle Helmet No Helmet	ot Applicable 1 Not Applicable (non-motorist) 2 None Used - Motor Vehicle Occupant 3 Shoulder and Lap Belt Used 4 Shoulder Belt Only Used 5 Lap Belt Only Used 6 Restraint Used - Type Unknown 7 Child Restraint System - Forward Facing 8 Child Restraint System - Rear Facing 9 Booster Seat 10 Child Restraint Type Unknown					
2 Other Pedestrian (wheelchari, person in a building, skater, pedestrian conveyance, etc. 3 Bicyclist 4 Other Cyclist 5 Occupant of Motor Vehicle Not in Transport (parked, etc.) 6 Occupant of a Non-Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist	Jon-Motorist Location At Time of Crash tersection - Marked Crosswalk tersection - Unmarked Crosswalk tersection - Other4 Midblock - Marked Crosswald block - Marked Crosswalk avel Lane - Other Location cycle Lane oulder/Roadside Non-Motorist Actions/Circumstance 1No Improper Action 2 Dart/Dash 3 Fallure to Yield Right-of-Way	8 Sidewalk 9 Median/Crossing Island 10 Driveway Access 11 Shared-Use Path or Trail 12 Non-Trafficway Area 77 Other, Explain in Narrative 88 Unknown 88 Unknown 89 Acad adjac 4 Wal	Action Prior to Crash 5 Walking/Cycling on Sidewalk 6 In Roadway – Other (working, playing, etc.) 7 Adjacent to Raodway (e.g., shoulder, median) 8 Going to or from School (K-12) 9 Working in Trafficway (incident response) 10 None 77 Other, Explain in Narrative 88 Unknown					
1 None Safety Equipment 5 Lighting 6 Not Applicable 77 Other, Explain in Narrative 88 Unknown 2and 2nd 2nd 2nd 2nd 2nd 2nd 2nd 2nd 2nd 2	4 Failure to Obey Traffic Signs Signals, or Officer 5 in Roadway Improperly (standing, lying, working, playing) 6 Disabled Vehicle Related (working on, pushing, leaving/approaching) ALCOHOL/DRUG	Vehicle 8 Inattentive (talking, eating, etc) 9 Not Visible (dark clothing, no lighting, etc.)	10 Improper Turn/Merge 11 Improper Passing 12 Wrong-Vays Riding or Walking 77 Other, Explain in Narrative 88 Unknown					
ALCOHOL USE: 1 1 Tast Not Given 2 Test Refused 3 Test Given 88 Unknown a8 Unknown if Tested 7 1 Not Transported 1 Not Tr	DL TEST TYPE: ALCOHOL TEST RESULT: 1 PENDING Explain 2 COMPLETED 88 UNKNOWN	BAC SUSPECTED DRUG TE: DRUG USE: 1 Test Not 2 Test Ref 3 Test Giv	t Given 1 Blood 1 Positive fused 3 Urine 2 Negative					
77 Other, Explain in Narrative 88 Unknown								
PERSON # VEHICLE # NAME CURRENT ADDRESS (Number and Street)	ADDITIONAL PASSE DATE OF BIR		O EJECT HU EP ABD RS					
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Trainsported 2 EMS 3 Lew Enforcement 77 Other, Explain in Narrathe 88 Unitaries	AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO					
PERSON # VEHICLE # NAME	DATE OF BIR	TH INJ SEX LOC: S R	O EJECT HU EP ABD RS					
CURRENT ADDRESS (Number and Street)	CITY	STATE	ZIP CODE					
OURCE OF TRANSPORT TO MEDICAL FACILITY	AGENCY NAME OR ID	EMO OUR DE COMP						
1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unicrown	ST WINE SIT ID	EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO					



