

Authority: 1946 PA 300, Sec.257.822
Compliance: Required MSP UD-10E
Penalty: \$100 and/or 90 days (Rev 01/2016)

External # 01462139
Crash ID 1462139

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File Class 9300-1

STATE OF MICHIGAN TRAFFIC CRASH REPORT

Incident # 240018375
Reviewer ANUSZKIEWICZ (31501)

ORI MI8121800
Department Name ANN ARBOR POLICE DEPARTMENT

Crash Date 04/22/2024
Crash Time 21:14
No. of Units 02
Crash Type Single Motor Vehicle
Special Circumstances: None Fleeing Police Hit and Run Unknown School Bus Animal
Special Checks: Fatal Non-Traffic Area ORV/Snowmobile

County 81 - Washtenaw
Traffic Control Signal
Relation to Roadway On Road
Weather Clear
Area INTR Other Related

City/Twp 89 - Ann Arbor
Contributing Circumstances: 1st None 2nd
Light Dark-Lighted
Road Surface Condition Dry
Total Lanes 2
Speed Limit 30
Posted Yes

Work Zone (if applicable): Type Workers Present Activity Location

LOCATION
Prefix PAULINE
Primary Road Name
Road Type BLVD
Suffix
Divided Roadway
Distance / Direction 20 FT W
Trafficway 01-Not physically divided
Prefix S
Intersecting Road Name MAIN
Road Type ST
Suffix
Divided Roadway

UNIT/DRIVER
Unit Number 01
Unit Known Yes
State NJ
Driver License Number [REDACTED]
Date of Birth (Age) [REDACTED] (22)
License Type: Operator Cycle M Chauffeur Farm Moped Recreation
Endorsements
Sex M
Race B
Total Occupants 01
Hazardous Action Failed to yield
Unit Type M
Driver Information [REDACTED]
Driver is Owner Yes
Injury O
Position Front-Left
Restraint Shoulder and lap belt
Driver Condition at Time of Crash: 1st Appeared Normal 2nd
Driver Distracted By Not Distracted
Ejected No
Trapped No
Airbag Deployed Not Deployed
Hospital NONE
Ambulance NONE

Alcohol Suspected No
Contributing Factor No
Alcohol Test Type: Breath Blood Urine Field PBT Refused Not Offered
Alcohol Test Results: Pending Test Results:
Interlock Device No
Drug Suspected Yes
Contributing Factor No
Drug Test Type: Blood Urine Field Refused Not Offered
Drug Test Results: Pending Test Results: 001
Citation Issued: Hazardous Other 24AA01084
Vehicle Registration U73SHE
State NJ
Vehicle Description 2008
Year 2008
Make HONDA
Model ACCORD
Color BLACK
VIN [REDACTED]
Vehicle Type Passenger Car, SUV, Van
Special Vehicles Not Applicable
Private Trailer Type
Vehicle Defect

Automation System(s) in Vehicle 0-No
Automation System Level in Vehicle 00-No Automation
Automation System Level Engaged at Time of Crash 00-No Automation
Insurance Company ALL STATE
Insurance Policy # [REDACTED]
Towed By CORRIGAN
Towed To TRIANGLE
Location of Greatest Damage 01
First Impact 01
Extent of Damage (Power Unit and/or Trailers) Disabling Damage
Vehicle Direction W
Vehicle Use Private
Action Prior Turning left
Sequence of Events: First 15-Pedestrian Second 34-Curb Third Fourth
(* indicates MOST harmful event)

PASSENGERS
Passenger Information: Date of Birth (Age), Sex, Position, Restraint, Injury, Ejected, Trapped, Airbag Deployed
Hospital
Ambulance
Passenger Information: Date of Birth (Age), Sex, Position, Restraint, Injury, Ejected, Trapped, Airbag Deployed
Hospital
Ambulance
Passenger Information: Date of Birth (Age), Sex, Position, Restraint, Injury, Ejected, Trapped, Airbag Deployed
Hospital
Ambulance

TRUCK/BUS
Carrier Information: USDOT, MC, MPSC
Driver's CDL Type, Endorsements (H, P, T, N, S, X), GDLExempt (Farm, Other)
GVWR/GCWR: 10,000 lbs. or Less 10,001 - 26,000 lbs. Greater than 26,000 lbs.
Vehicle Configuration, Cargo Body Type, Medical Card, Hazardous Material (Placard, Cargo Spill), ID #, Class #

OWNERS
Owner Information: [REDACTED]
Owner Information: [REDACTED]

Damaged Property, Public, Owner & Phone

Unit Number 02	Unit Known Yes	State Driver License Number	Date of Birth (Age) (26)	License Type <input type="radio"/> Operator <input type="radio"/> Chauffeur <input type="radio"/> Moped	Endorsements <input type="radio"/> Cycle <input type="radio"/> Farm <input type="radio"/> Recreation	Sex M	Race W	Total Occupants 00	Hazardous Action None
Unit Type P	Driver Information [REDACTED]			Driver is Owner	Injury A	Position Pedestrian		Restraint No belts available	
Driver Condition at Time of Crash 1st 2nd			Driver Distracted By Not Distracted			Ejected No	Trapped No	Airbag Deployed Not Equipped	
Hospital UNIVERSITY OF MICHIGAN HEALTH				Ambulance HURON VALLEY AMBULANCE INC					
Alcohol Suspected No	Contributing Factor No	Alcohol Test Type <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine <input type="radio"/> Field <input type="radio"/> PBT <input type="radio"/> Refused <input type="radio"/> Not Offered			Alcohol Test Results <input type="radio"/> Pending	Test Results:		Interlock Device No	
Drug Suspected No	Contributing Factor No	Drug Test Type <input type="radio"/> Blood <input type="radio"/> Urine <input type="radio"/> Field <input type="radio"/> Refused <input type="radio"/> Not Offered			Drug Test Results <input type="radio"/> Pending	Test Results:		Citation Issued <input type="radio"/> Hazardous <input type="radio"/> Other	
Vehicle Registration	State	Vehicle Description	Year	Make	Model		Color		
VIN	Vehicle Type		Special Vehicles Not Applicable		Private Trailer Type		Vehicle Defect		
Automation System(s) in Vehicle 0-No				Automation System Level in Vehicle 00-No Automation		Automation System Level Engaged at Time of Crash 00-No Automation			
Insurance Company		Insurance Policy #		Towed By		Towed To			
Location of Greatest Damage 11	First Impact 11	Extent of Damage (Power Unit and/or Trailers) No Damage		Vehicle Direction N	Vehicle Use		Action Prior Crossing at Intersection		
Sequence of Events First * 17-Motor veh in transport			Second		Third		Fourth		

PASSENGERS	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint
			Injury	Ejected	Trapped	Airbag Deployed
Hospital		Ambulance				
PASSENGERS	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint
			Injury	Ejected	Trapped	Airbag Deployed
Hospital		Ambulance				
PASSENGERS	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint
			Injury	Ejected	Trapped	Airbag Deployed
Hospital		Ambulance				

TRUCK/BUS	Carrier Information		USDOT	MC	MPSC	
			Driver's CDL Type	Endorsements <input type="radio"/> H <input type="radio"/> P <input type="radio"/> T <input type="radio"/> N <input type="radio"/> S <input type="radio"/> X	CDL Exempt <input type="radio"/> Farm <input type="radio"/> Other	
	GVWR/GCWR <input type="radio"/> 10,000 lbs. or Less <input type="radio"/> 10,001 - 26,000 lbs. <input type="radio"/> Greater than 26,000 lbs.	Vehicle Configuration	Cargo Body Type	Medical Card	Hazardous Material <input type="radio"/> Placard <input type="radio"/> Cargo Spill	ID #

OWNERS	Owner Information		Owner Information	

WITNESS	Witness Information		Witness Information	
	Age:		Age:	

Investigated at Scene Yes	Reported Date (Time) 04/22/2024 (21:14)	1st Investigator Name (Badge) SHINABERY (168)	2nd Investigator Name (Badge) DOWNER (150)	Photos
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Narrative
Unit one was travelling N/B on S. Main St and proceeded to turn W/B onto Pauline Blvd.
Unit two was a pedestrian walking NB in the crosswalk on the west side of Main St across Pauline Blvd.
Unit one failed to yield to unit two and struck them in the crosswalk. After striking unit two, unit one struck the curb on Pauline Blvd.
Unit two was transported to UofM for treatment. Unit two had a suspected serious injury including head trauma, a back injury, and a collapsed lung.
Unit one refused medical, reporting no injuries.

