

STATE OF MICHIGAN TRAFFIC CRASH REPORT

ORI MI8121800	Department Name ANN ARBOR POLICE DEPARTMENT							
Crash Date 10/01/2025	Crash Time 19:52	No. of Units 02	Crash Type Single Motor Vehicle	Special Circumstances <input type="radio"/> None <input type="radio"/> Fleeing Police <input type="radio"/> Unknown <input type="radio"/> Hit and Run <input type="radio"/> School Bus <input type="radio"/> Animal	Special Checks <input type="radio"/> Fatal <input type="radio"/> Non-Traffic Area <input type="radio"/> ORV/Snowmobile			
County 81 - Washtenaw	Traffic Control None of These	Relation to Roadway On Road		Weather Clear	Area NON-FRWY Straight roadway			
City/Twp 89 - Ann Arbor	Contributing Circumstances 1st None	2nd		Light Dark-Lighted	Road Surface Condition Dry	Total Lanes 4	Speed Limit 35	Posted Yes
Work Zone (if applicable) Type Workers Present Activity Location								

LOCATION	Prefix Primary Road Name PLYMOUTH	Road Type RD	Suffix	Divided Roadway	
	Distance / Direction 300 FT W	Trafficway 01-Not physically divided			
	Prefix Intersecting Road Name NIXON	Road Type	Suffix	Divided Roadway	

Unit Number 01	Unit Known Yes	State MI	Driver License Number [REDACTED]	Date of Birth (Age) [REDACTED]	License Type <input type="radio"/> Operator <input type="radio"/> Chauffer <input type="radio"/> Moped	Endorsements <input type="radio"/> Cycle <input type="radio"/> Farm <input type="radio"/> Recreation	Sex F	Race B	Total Occupants 01	Hazardous Action Failed to yield
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Unit Type M	Driver Information [REDACTED]	Driver is Owner Yes	Injury O	Position Front-Left	Restraint Shoulder and lap belt
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Driver Condition at Time of Crash 1st Appeared Normal	2nd	Driver Distracted By Not Distracted	Ejected No	Trapped No	Airbag Deployed Not Deployed
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Hospital NONE	Ambulance NONE
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Alcohol Suspected No	Contributing Factor No	Alcohol Test Type <input type="radio"/> Breath <input type="radio"/> Field <input type="radio"/> Blood <input type="radio"/> PBT <input type="radio"/> Urine <input type="radio"/> Refused <input type="radio"/> Not Offered	Alcohol Test Results <input type="radio"/> Pending	Test Results:	Interlock Device No
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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 25AA02283
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Vehicle Registration [REDACTED]	State OK	Vehicle Description 2018	Year 2018	Make NISSAN	Model VERSA	Color
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VIN [REDACTED]	Vehicle Type Passenger Car, SUV, Van	Special Vehicles Not Applicable	Private Trailer Type	Vehicle Defect
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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
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Insurance Company USA	Insurance Policy # [REDACTED]	Towed By	Towed To		
Location of Greatest Damage 08	First Impact 08	Extent of Damage (Power Unit and/or Trailers) Minor Damage	Vehicle Direction E	Vehicle Use Private	Action Prior Going Straight Ahead

Sequence of Events First * 15-Pedestrian
 (* indicates MOST harmful event)

Passenger Information	Date of Birth (Age)	Sex	Position	Restraint
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	Injury	Ejected	Trapped	Airbag Deployed
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Hospital	Ambulance
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Passenger Information	Date of Birth (Age)	Sex	Position	Restraint
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	Injury	Ejected	Trapped	Airbag Deployed
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Hospital	Ambulance
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Passenger Information	Date of Birth (Age)	Sex	Position	Restraint
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	Injury	Ejected	Trapped	Airbag Deployed
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Hospital	Ambulance
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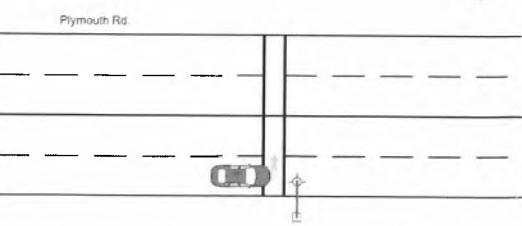
Carrier Information	USDOT	MC	MPSC
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	Driver's CDL Type <input type="radio"/> H <input type="radio"/> N <input type="radio"/> P <input type="radio"/> S <input type="radio"/> C <input type="radio"/> T <input type="radio"/> X	Endorsements <input type="radio"/> Farm <input type="radio"/> Other	CDL Exempt
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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 #	Class #
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OWNER'S TRUCK/ BUS Owner Information DEMETRICE LASHALLE GRIGGS 979 JEFFERSON ST YPSILANTI MI 48197-5211	Owner Information (313) 696-8303
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Damaged Property	Public	Owner & Phone
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UNIT / DRIVER	Unit Number 02	Unit Known Yes	State MI	Driver License Number [REDACTED]	Date of Birth (Age) [REDACTED]	License Type <input type="checkbox"/> Operator <input type="checkbox"/> Chauffer <input type="checkbox"/> Moped	Endorsements <input type="checkbox"/> Cycle <input type="checkbox"/> Farm <input type="checkbox"/> Recreation	Sex M	Race A	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 [REDACTED] 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="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Field	<input type="checkbox"/> PBT <input type="checkbox"/> Refused <input type="checkbox"/> Not Offered	Alcohol Test Results <input type="checkbox"/> Pending	Test Results:		Interlock Device No									
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	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		Automation System Level in Vehicle		Automation System Level Engaged at Time of Crash												
	0-No		00-No Automation		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	Vehicle Use [REDACTED]	Action Prior Crossing not at Intersect			[REDACTED]								
Sequence of Events		First	Second	Third	Fourth	[REDACTED]											
		* 17-Motor veh in transport		[REDACTED]													
(* indicates MOST harmful event)																	
PASSENGERS	Passenger Information				Date of Birth (Age)	Sex	Position [REDACTED]	Restraint [REDACTED]		[REDACTED]							
					Injury	Ejected	Trapped	Airbag Deployed		[REDACTED]							
	Hospital				Ambulance												
	Passenger Information				Date of Birth (Age)	Sex	Position	Restraint		[REDACTED]							
					Injury	Ejected	Trapped	Airbag Deployed		[REDACTED]							
	Hospital				Ambulance												
	Passenger Information				Date of Birth (Age)	Sex	Position	Restraint		[REDACTED]							
					Injury	Ejected	Trapped	Airbag Deployed		[REDACTED]							
	Hospital				Ambulance												
	Passenger Information				USDOT		MC	MPSC	[REDACTED]								
				Driver's CDL Type		Endorsements <input type="checkbox"/> H <input type="checkbox"/> C <input type="checkbox"/> P <input type="checkbox"/> T <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> X	CDL Exempt <input type="checkbox"/> Farm <input type="checkbox"/> Other	[REDACTED]									
GVWR/GCWR <input type="checkbox"/> 10,000 lbs. or Less <input type="checkbox"/> 10,001 - 26,000 lbs. <input type="checkbox"/> Greater than 26,000 lbs.				Vehicle Configuration		Cargo Body Type	Medical Card	Hazardous Material <input type="checkbox"/> Placard <input type="checkbox"/> Cargo Spill	ID #	Class #	[REDACTED]						
OWNERS	Owner Information				Owner Information												
	Witness Information				Witness Information												
WITNESSES	Age: [REDACTED]				Age: [REDACTED]												
	Investigated at Scene Yes	Reported Date (Time) 10/01/2025 (19:52)	1st Investigator Name (Badge) POLGER (183)	2nd Investigator Name (Badge) DOWNER (150)	Photos												
Narrative PEDESTRIAN WAS IN CROSSWALK LOCATED ON PLYMOUTH RD., WEST OF NIXON AND EAST OF TRAVERWOOD DR. WHILE WALKING NORTH IN CROSSWALK, HE WAS STRUCK BY UNIT 1. UNIT 1 WAS IN SOUTHERN MOST LANE TRAVELING EAST THROUGH CROSSWALK WHEN THE FRONT LEFT OF THE VEHICLE STRUCK THE PEDESTRIAN. ACCORDING TO THE DRIVER OF UNIT 1, SHE WAS TRAVELING AT APPROX. 35mph AND DID NOT SEE THE PEDESTRIAN. ACCORDING TO DRIVER OF UNIT 1, THE FLASHING YELLOW LIGHTS AT THE CROSSWALK WERE NOT ACTIVATED. HOWEVER, THE PEDESTRIAN STATED THE LIGHTS WERE ACTIVATED. PEDESTRIAN SUFFERED A HEAD INJURY AND WAS TRANSPORTED TO MICHIGAN MEDICINE. DRIVER OF UNIT 1 STATED SHE WAS NOT INJURED. DRIVER OF UNIT 1 CITED. THE FRONT LEFT OF UNIT 1 SUFFERED MINOR DAMAGE. NO WITNESSES.					Diagram  Plymouth Rd. Not To Scale												