

STATE OF MICHIGAN TRAFFIC CRASH REPORT

ORI MI 8121800		Department Name Ann Arbor Police Department					Reviewer KING (32301)			
Crash Date 06/02/2023	Crash Time 20:38	No. of Units 02	Crash Type Other	Special Circumstances <input type="checkbox"/> None <input type="checkbox"/> Fleeing Police	<input type="checkbox"/> Hit and Run <input type="checkbox"/> Unknown	<input type="checkbox"/> School Bus <input type="checkbox"/> Animal	Special Checks <input type="checkbox"/> Fatal <input type="checkbox"/> Non-Traffic Area <input type="checkbox"/> ORV/Snowmobile			
County 81 - Washtenaw	Traffic Control None		Relation to Roadway On the Road		Weather Clear		Area NON-FRWY Straight Roadway			
City/Twp 89 - Ann Arbor	Contributing Circumstances 1st None			2nd	Light Daylight	Road Surface Condition Dry		Total Lanes 02	Speed Limit 25	Posted Yes
Work Zone (if applicable)		Type		Workers Present		Activity		Location		

LOCATION	Prefix S	Primary Road Name UNIVERSITY	Road Type AVE	Suffix	Divided Roadway
	Distance / Direction 500 Feet W	Trafficway Not Physically Divided			
	Prefix E	Intersecting Road Name UNIVERSITY	Road Type AVE	Suffix	Divided Roadway

Alcohol Suspected Yes		Contributing Factor Yes		Alcohol Test Type ● Blood ○ Breath ○ Field ○ PBT ○ Refused ● Not Offered		Alcohol Test Results ● Pending ○ Pending		Test Results:		Interlock Device No			
Drug Suspected No		Contributing Factor No		Drug Test Type ○ Blood ○ Breath ○ Field ○ Refused ● Not Offered		Drug Test Results ○ Pending		Test Results:		Citation Issued ○ Hazardous ○ 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 No		Automation System Level in Vehicle No Automation								Automation System Level Engaged at Time of Crash 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				Action Prior Going Straight Ahead	
Sequence of Events (● indicates MOST harmful event)		First		Second		Third		Fourth					
		01 - Loss of Control		● 17 - Motor Veh in Transport									

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

Carrier Information	USDOT		MC		MPSC	
	Driver's CDL Type		Endorsements		CDL Exempt	
GVWR/GCWR	OH	OP	OT	ON	OS	OX
					<input type="checkbox"/> Farm	
					<input type="checkbox"/> Other	

<input type="radio"/> 0 10,000 lbs. or Less <input type="radio"/> 0 10,001 - 26,000 lbs. <input type="radio"/> 0 Greater than 26,000 lbs.			<input type="radio"/> 0 Placard <input type="radio"/> 0 Cargo Spill	
TR OWNERS	Owner Information		Owner Information	

Damaged Property	Public	Owner & Phone
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SANITIZED SANITIZED SANITIZED

UNIT / DRIVER	Unit Number 02	Unit Known Yes	State MI	Driver License Number ##### (20)	Date of Birth (Age) ##/##/## (20)	License Type ● Operator ○ Chauffeur ○ Moped	Endorsements ○ Cycle ○ Farm ○ Recreation	Sex F	Race B	Total Occupants 02	Hazardous Action None	
	Unit Type MV	Driver Information ##### ##### ##### WARREN MI, MI 48089-2173 (##) ##-##				Driver is Owner Yes	Injury O	Position Front - Left			Restraint Shoulder and Lap Belt	
	Driver Condition at Time of Crash 1st Emotional 2nd					Driver Distracted By Not Distracted			Ejected	Trapped	Airbag Deployed Not Deployed	
	Hospital REFUSED					Ambulance REFUSED						
	Alcohol Suspected No	Contributing Factor No	Alcohol Test Type ○ Breath ○ Blood ○ Field ○ PBT ○ Refused	● Not Offered	Alcohol Test Results ○ Pending	Test Results:			Interlock Device No			
	Drug Suspected No	Contributing Factor No	Drug Test Type ○ Blood ○ Urine ○ Field ○ Refused	● Not Offered	Drug Test Results ○ Pending	Test Results:			Citation Issued ○ Hazardous ○ Other			
	Vehicle Registration ENL3569	State MI	Vehicle Description 2008	Year 2008	Make FORD	Model ESCAPE			Color RED			
	VIN 1FMCU03148KB03052	Vehicle Type Passenger Car, SUV, Van	Special Vehicles Not Applicable			Private Trailer Type			Vehicle Defect			
	Automation System(s) in Vehicle No	Automation System Level in Vehicle No Automation				Automation System Level Engaged at Time of Crash No Automation						
	Insurance Company #####			Insurance Policy # #####		Towed By SAKSTRUP'S TOWING			Towed To BREWERS			
Location of Greatest Damage 08	First Impact 08	Extent of Damage (Power Unit and/or Trailers) Functional Damage	Vehicle Direction E	Vehicle Use Private	Action Prior Going Straight Ahead							
Sequence of Events (● indicates MOST harmful event)	First ● 15 - Pedestrian	Second	Third	Fourth								
PASSENGERS	Passenger Information ##### ##### YPSILANTI, MI 48197 (##) ##-##			Date of Birth (Age) ##/##/## (31)	Sex F	Race B	Position Front - Right	Restraint Shoulder and Lap Belt				
	Injury O	Ejected	Trapped	Airbag Deployed Not Deployed								
	Hospital REFUSED					Ambulance REFUSED						
	Passenger Information			Date of Birth (Age)	Sex	Race	Position	Restraint				
	Injury	Ejected	Trapped	Airbag Deployed								
	Hospital					Ambulance						
	Carrier Information					USDOT			MC		MPSC	
						Driver's CDL Type O H O P O T O N O S O X	Endorsements ○ H ○ P ○ T ○ N ○ S ○ X			CDL Exempt ○ 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 ##### ##### #####, ## #####-## (##) ##-##				Owner Information						
WITNESS	Witness Information				Witness Information							
Investigated at Scene Yes	Reported Date (Time) 06/02/2023 (20:38)	1st Investigator Name (Badge) CIOCHON (074)			2nd Investigator Name (Badge)			Photos No				
<p>Narrative</p> <p>UNIT 1 WAS TRAVELING ON AN ELECTRIC SCOOTER HEADING WB ON S UNIVERSITY AVE, JUST WEST OF E UNIVERSITY AVE. UNIT 2 WAS TRAVELING EB ON S UNIVERSITY AVE APPROACHING E UNIVERSITY AVE. IN UNIT 1 LOST CONTROL OF THE SCOOTER DUE TO HIS IMPAIRMENT FROM ALCOHOL AND COLLIDED WITH UNIT 2. IN UNIT 1 WAS TAKEN TO THE UOFTM HOSPITAL BY HVA FOR OBSERVED/APPARANT HEAD TRAUMA. UNIT 2 REFUSED MEDICAL TREATMENT. IN UNIT 2 SUSTAINED HEAVY DAMAGE TO FRONT FENDER AND WINDSHIELD DAMAGE AFTER THE DRIVER OF UNIT 1 WAS THROWN ONTO THE VEHICLE AFTER THE INITIAL VEHICLE CONTACT. UNIT 2 WAS TOWED TO BREWERS TOWING.</p>					<p>Diagram</p>							