

Accepted Date 5/29/2019 11:51 AM
Generated Date 5/29/2019 11:51 AM
Report Form Level 2



Master Record Number	102346919
Type Of Crash	Property Damage
Approved By	008

Tennessee Electronic Traffic Crash Report

Incident Information

Date of Crash 5/29/2019	Day Of Crash Wednesday	Local Agency Number THP0900	Reporting Agency Name Thp District 9 - Administrative	Agency Tracking Number 100000005
Time of Crash 24:00	County Davidson	City Nashville		
Hit and Run No	Solved	Police Pursuit No	School Bus Involved No	Work Zone None
Area Residential	Intersection Type Four-Way	Relation To Junction Non-Junction		
Block Number 300	Roadway Number	Roadway Name MURFREESBORO PKE	Suffix	Mile Marker 0.00
Estimated Distance 0.00	Distance Type	Direction	From Highway/Intersection ARLINGTON AV	Suffix Intersect Number
Roadway Local Id	Latitude 36.139050		Longitude -86.733010	
First Harmful Event Parked Motor Vehicle	Trafficway Type Trafficway-OPEN			
Weather Conditions Clear	Light conditions Daylight	Manner Of Collision Rear to Rear		

Incident Management

Secondary Crash No	Secondary Crash Type	Blockage Occurred No
Roadway / Lanes Blocked	Roadway Lanes/ Cleared	
Lanes Blocked		
Incident Started	Incident Cleared	

Investigating Officer Details

Investigation Complete Yes	Rank 3	First Name IBM DEV TESTING	Middle Initial	Last Name USER	Suffix
Badge Number 007	District/Zone 3	Car Number 3	Report Date 05/29/2019		

Vehicle Number 1	Number of Occupants 1	Driver Presence Driver Operated
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Driver Information

First Name JOHN	Middle Initial	Last Name TEST	Date Of Birth 5/29/1989	Age 30
Address Line 1 123 MAIN ST	Address Line 2	City Nashville	State TN	Zip Code 12345
Phone 1 1234567890	Phone 2	Phone 3	Gender M	
Drivers License Number 987654321	Drivers License State TN	Expiration Date 2021	Drivers License Class D	Drivers License Status Valid
Safety Equipment Shoulder And Lap Belt Used	Airbag AirBag Available-No Deployment	Seat Position Front Seat-Left Side		
Endorsement 1 None	Complied With	Endorsement 2	Complied With	Endorsement 3
Restriction 1 None	Complied With	Restriction 2	Complied With	Restriction 3
Ejected Not Applicable	Trapped/Extricated Not Applicable	Injury Code No Injury	Medical Transport Not Transported	

Driver Conditions and Actions

Hit and Run No Hit And Run	Driver/Vehicle Maneuver Backing Up Other Than Parking	Distraction None
Driver's 1st Condition Appeared Normal	Driver's 2nd Condition	Driver's 3rd Condition
Driver's 1st Action None	Drivers 2nd Action	
Driver's 3rd Action	Driver's 4th Action	

Alcohol and Drugs

Presence of Alcohol No	Alcohol Test Status Test Not Given
Presence of Drugs No	Drug Test Status Test Not Given

Driver Violations

1st Violation	1st Violation Category	1st Violation Description	1st Violation Statute
2nd Violation	2nd Violation Category	2nd Violation Description	2nd Violation Statute
3rd Violation	3rd Violation Category	3rd Violation Description	3rd Violation Statute
4th Violation	4th Violation Category	4th Violation Description	4th Violation Statute
5th Violation	5th Violation Category	5th Violation Description	5th Violation Statute

Vehicle Information

Owner Same as Driver Yes	Owner First Name JOHN	Owner Middle Name	Owner Last Name TEST
Address Line 1 123 MAIN ST	Address Line 2	City Nashville	State TN
Vehicle Year 2010	Vehicle Make FORD	Vehicle Model RNG	Color Black
VIN 12345678974185296	License Plate Number 123456	State Tennessee	Plate Expiration 012020
Towed	Trailer Description	Trailer License Plate Information	
Insurance 1 123	Insurance 1 Type Owner	Insurance 1 Carrier INSURANCE COMPANY NAME	Insurance 1 Start Date 5/28/2018
Insurance 2	Insurance 2 Type	Insurance 2 Carrier	Insurance 2 Start Date
Insurance 3	Insurance 3 Type	Insurance 3 Carrier	Insurance 3 Start Date

Vehicle Damage and Roadway Characteristics

Most Harmful Event Parked Motor Vehicle		Point of First Impact Rear End	
Extent of Damage Minor Damage		Officer Damage Estimate Less Than Threshold	
Travel Direction North	Traveling On		
Traffic Control Devices No Control		Traffic Control Device Functioning No Controls	Speed Limit 15
Roadway Surface Conditions Dry		Roadway Character Alignment Straight	Number of Travel Lanes Other

Vehicle Number 2	Number of Occupants 1	Driver Presence Driver Operated
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Driver Information

First Name DRIVER	Middle Initial	Last Name ASECOND	Date Of Birth 5/22/1999	Age 20
Address Line 1 555	Address Line 2	City Nashville	State TN	Zip Code 85247
Phone 1 9999999999	Phone 2	Phone 3	Gender M	
Drivers License Number 888888888	Drivers License State TN	Expiration Date 2020	Drivers License Class D	Drivers License Status Valid
Safety Equipment Shoulder And Lap Belt Used	Airbag AirBag Available-No Deployment	Seat Position Front Seat-Left Side		
Endorsement 1 None	Complied With	Endorsement 2	Complied With	Endorsement 3
Restriction 1 None	Complied With	Restriction 2	Complied With	Restriction 3
Ejected Not Applicable	Trapped/Extricated Not Applicable	Injury Code No Injury	Medical Transport Not Transported	

Driver Conditions and Actions

Hit and Run No Hit And Run	Driver/Vehicle Maneuver Parked	Distraction None
Driver's 1st Condition Appeared Normal	Driver's 2nd Condition	Driver's 3rd Condition
Driver's 1st Action None	Drivers 2nd Action	
Driver's 3rd Action	Driver's 4th Action	

Alcohol and Drugs

Presence of Alcohol No	Alcohol Test Status Test Not Given
Presence of Drugs No	Drug Test Status Test Not Given

Driver Violations

1st Violation	1st Violation Category	1st Violation Description	1st Violation Statute
2nd Violation	2nd Violation Category	2nd Violation Description	2nd Violation Statute
3rd Violation	3rd Violation Category	3rd Violation Description	3rd Violation Statute
4th Violation	4th Violation Category	4th Violation Description	4th ViolationStatute
5th Violation	5th Violation Category	5th Violation Description	5th ViolationStatute

Vehicle Information

Owner Same as Driver Yes	Owner First Name DRIVER	Owner Middle Name	Owner Last Name ASECOND
Address Line 1 555	Address Line 2	City Nashville	State TN
Vehicle Year 2000	Vehicle Make FORD	Vehicle Model FOC	Color Red
VIN 9517538528888888	License Plate Number 123654	State Tennessee	Plate Expiration 122020
Towed	Trailer Description	Trailer License Plate Information	
Insurance 1 55655	Insurance 1 Type Owner	Insurance 1 Carrier SECONDONE	Insurance 1 Start Date 5/21/2018
Insurance 2	Insurance 2 Type	Insurance 2 Carrier	Insurance 2 Start Date
Insurance 3	Insurance 3 Type	Insurance 3 Carrier	Insurance 3 Start Date

Vehicle Damage and Roadway Characteristics

Most Harmful Event Parked Motor Vehicle			Point of First Impact Rear End	
Extent of Damage Minor Damage		Officer Damage Estimate Less Than Threshold		
Travel Direction North	Traveling On			
Traffic Control Devices No Control		Traffic Control Device Functioning No Controls		Speed Limit 15
Roadway Surface Conditions Dry		Roadway Character Alignment Straight		Number of Travel Lanes Other

Vehicle Number 3	Number of Occupants 1	Driver Presence Driver Operated
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Driver Information

First Name VEH		Middle Initial		Last Name OWNER		Date Of Birth 5/15/2000		Age 19			
Address Line 1 456 OTHER RD			Address Line 2			City Nashville		State TN		Zip Code 12345	
Phone 1 9999999999			Phone 2			Phone 3			Gender M		
Drivers License Number 951753852		Drivers License State TN			Expiration Date 2020		Drivers License Class D		Drivers License Status Valid		
Safety Equipment Shoulder And Lap Belt Used					Airbag AirBag Available-No Deployment			Seat Position Front Seat-Left Side			
Endorsement 1 None		Complied With		Endorsement 2		Complied With		Endorsement 3		Complied With	
Restriction 1 None		Complied With		Restriction 2		Complied With		Restriction 3		Complied With	
Ejected Not Applicable			Trapped/Extricated Not Applicable		Injury Code No Injury			Medical Transport Not Transported			

Driver Conditions and Actions

Hit and Run No Hit And Run		Driver/Vehicle Maneuver Parked		Distraction None	
Driver's 1st Condition Appeared Normal			Driver's 2nd Condition		Driver's 3rd Condition
Driver's 1st Action None			Drivers 2nd Action		
Driver's 3rd Action			Driver's 4th Action		

Alcohol and Drugs

Presence of Alcohol No		Alcohol Test Status Test Not Given	
Presence of Drugs No		Drug Test Status Test Not Given	

Driver Violations

1st Violation	1st Violation Category	1st Violation Description	1st Violation Statute
2nd Violation	2nd Violation Category	2nd Violation Description	2nd Violation Statute
3rd Violation	3rd Violation Category	3rd Violation Description	3rd Violation Statute
4th Violation	4th Violation Category	4th Violation Description	4th Violation Statute
5th Violation	5th Violation Category	5th Violation Description	5th Violation Statute

Vehicle Information

Owner Same as Driver Yes		Owner First Name VEH		Owner Middle Name		Owner Last Name OWNER						
Address Line 1 456 OTHER RD			Address Line 2		City Nashville		State TN		Zip Code 12345		Phone 1 9999999999	
Vehicle Year 1999		Vehicle Make FORD		Vehicle Model BRO		Color Black		Body Style Large Utility				
VIN 98745632145698745		License Plate Number 555555		State Tennessee		Plate Expiration 022020		Unit Type Motor Vehicle In-Transport				
Towed		Trailer Description				Trailer License Plate Information						
Insurance 1 852		Insurance 1 Type Owner		Insurance 1 Carrier FINALINSURANCE				Insurance 1 Start Date 5/14/2019		Insurance 1 End Date 5/28/2020		
Insurance 2		Insurance 2 Type		Insurance 2 Carrier				Insurance 2 Start Date		Insurance 2 End Date		
Insurance 3		Insurance 3 Type		Insurance 3 Carrier				Insurance 3 Start Date		Insurance 3 End Date		

Vehicle Damage and Roadway Characteristics

Most Harmful Event Parked Motor Vehicle		Point of First Impact Rear End	
Extent of Damage Minor Damage		Officer Damage Estimate Less Than Threshold	
Travel Direction North	Traveling On		
Traffic Control Devices No Control		Traffic Control Device Functioning No Controls	Speed Limit 15
Roadway Surface Conditions Dry		Roadway Character Alignment Straight	Number of Travel Lanes Other

Property Owner Information

Other Property Damages Private Property-Under Threshold		Property Description LIGHT POST		
First Name OWNER	Middle Name	Last Name PROPERTY		Suffix
Address Line 1 980 CIRCLE DR	Address Line 2		City Nashville	State TN Zip Code 32355
Phone 1 9517538520	Phone 2		Phone 3	

Narrative

Narr for test 2

