

Accepted Date 5/29/2019 11:50 AM
 Generated Date 5/29/2019 11:50 AM
 Report Form Level 2



Master Record Number	102346920
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 100000006
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
Estimated Distance 0.00	Distance Type	Direction	From Highway/Intersection ARLINGTON AV	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
Complied With		Complied With		Complied With
Restriction 1 None	Complied With	Restriction 2	Complied With	Restriction 3
Complied With		Complied With		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 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		Zip Code 12345	Phone 1 1234567890
Vehicle Year 2010	Vehicle Make FORD	Vehicle Model RNG	Color Black
Body Style Compact Pickup			
VIN 12345678974185296	License Plate Number 123456	State Tennessee	Plate Expiration 012020
Unit Type Motor Vehicle In-Transport			
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 1 End Date 5/29/2020		Insurance 2 Start Date	Insurance 2 End Date
Insurance 2	Insurance 2 Type	Insurance 2 Carrier	Insurance 2 Start Date
Insurance 2 End Date		Insurance 3 Start Date	Insurance 3 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

Vehicle Number 2	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 5/10/1987	Age 32
Address Line 1 456 OTHER RD		Address Line 2	City Nashville	State TN
Zip Code 12345		Phone 1 2222222222	Phone 2	Phone 3
Gender M		Drivers License Number 852147963	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
Complied With		Complied With		Complied With
Restriction 1 None	Complied With	Restriction 2	Complied With	Restriction 3
Complied With		Complied With		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 2222222222		
Vehicle Year 2000	Vehicle Make CHEV	Vehicle Model MAL	Color Red	Body Style Two-Door Sedan Hardtop Coupe
VIN 95175385245678965	License Plate Number 123654	State Tennessee	Plate Expiration 122020	Unit Type Motor Vehicle In-Transport
Towed	Trailer Description		Trailer License Plate Information	
Insurance 1 4444444	Insurance 1 Type Owner	Insurance 1 Carrier SECOND	Insurance 1 Start Date 5/14/2019	Insurance 1 End Date 5/29/2020
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

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

First Name DRIVER		Middle Initial	Last Name THIRD		Date Of Birth 5/22/1999	Age 20
Address Line 1 444 SIDE		Address Line 2		City Nashville	State TN	Zip Code 95874
Phone 1 9888888888		Phone 2		Phone 3		Gender M
Drivers License Number 951753856		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	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 1st Action None		Driver's 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 DRIVER	Owner Middle Name	Owner Last Name THIRD			
Address Line 1 444 SIDE		Address Line 2		City Nashville	State TN	Zip Code 95874
Vehicle Year 1999	Vehicle Make GMC	Vehicle Model JMY	Color White	Body Style Compact Utility		
VIN 75369854123657895	License Plate Number 951426	State Tennessee	Plate Expiration 052021	Unit Type Motor Vehicle In-Transport		
Towed	Trailer Description			Trailer License Plate Information		
Insurance 1 575958	Insurance 1 Type Owner	Insurance 1 Carrier THIRD ONE		Insurance 1 Start Date 5/15/2019	Insurance 1 End Date 5/30/2020	
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

