State of Kansas

Law Enforcement Crash Report Coding Manual

2019

2nd Edition

Prepared By
Bureau of Traffic Safety & Technology
Crash Data Unit

SIGNIFICANT CODING ADJUSTMENTS SINCE THE 2014 MANUAL

The term “ACCIDENT” has been updated to reflect “CRASH” throughout the 2019 coding manual and the crash report forms. This terminology change is occurring nationwide to better define these situations.

- Amending Reports (full completed report, remove highlighting) – page 13
- Autonomous Vehicle Driver – pages 43, 90
- Contributing Circumstance coding (required) – page 42
- Crash Code Sheet – (License Restriction/Rearrange) – 855 form
- Drug Involvement Coding (recorded types/names in narrative) – page 51
- Fatality Reporting Requirements – page 89
- Injury Severity Definitions (definition changes) – page 45
- Milepost Coding – page14
- Narratives (required) – page 19, 61
- Parking Lot coding/Crash Class 23 (not state reportable) – page 4,5,15,28
- Private Property – page 13
- Recording Data requirements – page 8
- Support, form orders, mailing address, contact – page 3
- “Unknown” road name coding (unusable coding) – page 14
- Unnamed trafficways – page 15

SIGNIFICANT CODING ADJUSTMENTS TO THE 2019 2nd EDITION

- 2nd Edition explanation – page 1
- Parking lot coding (fatality On Road Name) – page 15
- Working Vehicles (retracted to 2014 definition) – pages 10, 80, 93
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General Information

INTRODUCTION

This manual provides detailed instructions for completing each of the following motor vehicle traffic crash report forms for the State of Kansas: Motor Vehicle Crash Report (850A), Occupants & Vehicles (850B), Narrative Report (851), Heavy Vehicle & Hazmat Supplement (852), and the Passengers & Pedestrians (854) forms. These forms are required to be used for all state-reportable crashes. In addition, they can be used for non-state-reportable crashes per agency policy.

The initiation of the 2019 forms revision upholds the general changes from the Kansas Traffic Records Assessment conducted by the federal government in 2005. Most of the content and the general layout of the forms were determined jointly by a special committee in 2009 including several law enforcement agencies, federal agencies, and other partners. Minor visual and data changes were made for 2019 to the forms from the 2009 version.

The 2019 Crash Report Coding Manual is a revision to the 2014 manual which includes changes in terminology and definitions to coincide with the 2019 forms. This 2nd Edition to the 2019 manual was issued resulting from conversations between law enforcement representatives and KDOT representatives where KDOT decided to retract the new updated definition regarding law enforcement drivers in the Working Vehicle coding section. The definition was retracted back to the 2009-2014 manuals definition.

Some codes used for various data elements on the forms are not listed in this manual, as they are illustrated on the forms themselves. Not every federal coding difference is incorporated.

Resources:

- The Manual on Classification of Motor Vehicle Traffic Crashes of the American National Standards Institute (ANSI), published by the Association of Transportation Safety Information Professionals www.atsip.org

- The Data Dictionary for the American Motorists Data Base Standard published by the American Association of Motor Vehicle Administrators http://www.aamva.org/.

- Federal Highway Administration https://www.fhwa.dot.gov/

- Kansas Statutes www.kslegislature.org

Organization of the Crash Forms:

- 850A – Crash Level information → One per crash (no people or vehicles)
- 850B – Drivers, Passengers, and Vehicles → Can have more than one per crash
- 851 – Narrative only → Witness statements / Officer documentation
- 852 – Truck / Bus / HazMat Supplement → Use as required
- 854 – Occupant or Pedestrian Supplement → Use as required
- 855 – Code Sheet → Reference listing

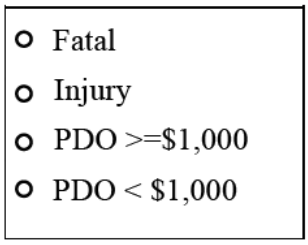
The back of the Motor Vehicle Crash Report (850A) form provides a large collision diagram area. The Narrative Report (851) form provides two full pages for the officer's complete description of the crash and any additional notes that might be relevant. When used, the Narrative report (851) form must be submitted to the State. The data for the Heavy Vehicle & Hazmat Supplement (852) incorporates recommendations of the FMCSA and requirements for the federal Commercial Motor Vehicle (CMV) database: SafetyNet. The 852 is mandatory if the federal reportability requirements are met (See page 62 or the back of the form). **There are two versions of the crash forms**: 1) Paper and 2) electronic. A mixture of both is reflected in this manual.

Notes: **Do not watermark or stamp records to be sent to KDOT.**

STATE-REPORTABLE CRASHES

By law, any crash occurring on or involving a public roadway which results in death or injury to a person or total property damage of $1,000 or more (estimated professional replacement) **must be reported to KDOT within 10 days of the investigation on state approved forms. No provision exists for documenting and submitting state-reportable crashes on abbreviated, non-state forms for any reason like weather, simple crashes, etc.** Non-reportable crashes not involving a public trafficway can be documented on the state forms if desired but are not reportable to the KDOT. **One exception** to this is **fatal crashes** occurring on private property. These reports must be submitted to the KDOT to satisfy Federal requirements. A fatal crash is one that causes death of one or more persons either at the time of the crash, or within 30 days of the time and date of the crash. If a person dies of a medical condition and not as a result of the crash, record their injury severity according to the crash repercussions. Example: Driver has a heart attack at low speed causing little damage but dies.

Criteria	Code Marked	Reportable
Fatal only	('F')	Yes
Injury only	('I')	Yes
PDO >= $1,000 only	('PO')	Yes
PDO < $1,000 only	('PU')	No
Fatal & Private Property		Yes (federal need)
All other Private Property combinations		No



AUTHORITIES AND REQUIREMENTS

Crash reporting requirements are established by Kansas statute and sections are shown below.

Article 16.--UNIFORM ACT REGULATING TRAFFIC; ACCIDENTS AND ACCIDENT REPORTS

8-1601. Application of sections in article 16. The provisions of this article shall apply upon highways and elsewhere throughout the state. **History:** L. 1974, ch. 33, § 8-1601; July 1. Other relevant sections are 8-1602, 8-1603, 8-1604, 8-1605, **8-1611**, 8-1612, and 8-1613. Chapter 14 has relevance for definitions.

LAW ENFORCEMENT SUPPORT

SEND COMPLETED CRASH REPORT FORMS TO:

Eisenhower State Office Building
Bureau of Transportation Safety and Technology
Attn: Crash Data Unit
700 SW Harrison, 6th Floor Tower
Topeka, Kansas 66603-3754

WEBSITE (CONTACT, ORDER CRASH FORMS AND CODING MANUALS, STATISTICS, TRAINING, ETC.)

www.ksdot.org (see tab Doing Business/Crash Data)

INSURANCE REPORTING – DC-66 Form

DC-66 Forms DO NOT get included with crash reports and are NOT to be submitted to KDOT.

Entry of insurance information on the 850B crash report form is required when available.

Submit DC-66 Forms separately to:

Driver Control Bureau
P.O. Box 2021
Topeka, KS 66612-2021

CRASH REPORTING QUALIFICATION AND STANDARDS

CRASH QUALIFICATION

The definition of a crash is "an unstabilized situation which includes at least one harmful event." The ANSI D16.1 Manual on Classification of Motor Vehicle Traffic Crashes asks eight questions and each must be answered "YES" for an incident to be classified as a **state-reportable** motor vehicle traffic crash. (Skip question #7 if no train is involved.)

1. Did the incident include loss in the form of damage or at least one injury?
2. Was the injury or damage unintentional and not a direct result of a cataclysm?
3. Did the incident involve at least one motor vehicle?
4. Did the incident involve at least one motor vehicle in-transport?
5. Was the incident an unstabilized situation?
   Unstabilized Situation: An unstabilized situation is a set of events not under human control. It originates when control is lost and terminates when control is regained or, in the absence of persons who are able to regain control, when all persons and property are at rest. In cases of multiple events, determination for documenting one or more crashes is based upon whether the events are continuous or whether there is time between unstabilized situations.
6. Did the unstabilized situation originate on or involve a public trafficway or did injury or damage occur on a trafficway?
7. **If** the incident involved a railway train in-transport, did a motor vehicle in-transport become involved prior to the train being involved in other property damage or injury (i.e. derailment)?
8. Did the incident exclude aircraft or watercraft in-transport?

Trafficway: A trafficway is any land way open to the public as a matter of right or custom for moving persons or property from one place to another. A trafficway resembling public streets, county roads, and highways reach from property line to property line including any shoulders, ditches, sidewalks, and additional right-of-way (page 6).

Inclusions:

— Areas with guarded or gated entrances, such as military posts or private residential developments, are considered trafficways if the guards or gates customarily admit public traffic

—Privately constructed and/or maintained roads open to the public for moving persons or property for transportation purposes

— Local roads in a residential development, which are open to the public

Examples:

* Land ways within a gated community when the gates are open to the public
* An entranceway providing public access from the trafficway to the parking lot of a major store
* Roads with unrestricted access in a private retirement community

Exclusions:

— Roads in a gated community only open to the residents and guests

— Parking spaces, parking aisles, and parking lots

— Circulating system of roadways in the land way of a shopping center or shopping mall which provides public access to the parking lots

— Closed lanes or roadways due to construction

Examples:

— Driveway to a residence or business including most gas station lots

— Military base or gated community with restricted access

The following events do NOT qualify as a state-reportable motor vehicle crash (excluding fatal crashes):

1) Any possible injury or damage involving a motor vehicle in-transport on a trafficway if the event was deliberately intended, such as suicide, self-inflicted injury, homicide, assault, legal intervention, a domestic violence occurrence, or intent to do harm to self or others.

   Legal Intervention: Legal intervention is a category of deliberate intent in which the person who acts or refrains from acting is a law-enforcing agent or other official.

   Examples:
   - If a lawbreaker crashes either intentionally or unintentionally into a road block set up by police to stop him, the crash is considered a result of legal intervention.
   - If a police car is intentionally driven into a law breakers vehicle, the crash is considered to result from legal intervention.
   - If tire deflation devices are used (spike strips), and the pursued vehicle crashes near the area of deflation as a result, the crash is considered legal intervention.

   Exclusions:
   - If a driver other than the lawbreaker crashes into the road block, the crash is **not** considered to be a result of legal intervention.
   - If a lawbreaker being pursued by the police loses control of his vehicle and crashes, the crash is **not** considered legal intervention and is reportable.
   - If during the course of the pursuit, the police vehicle strikes a vehicle other than the subject of the pursuit, a non-motorist, or property, then that harmful event is **not** legal intervention.

2) A motor vehicle in-transport running off the road and returning (or coming to a stop off the road) without injury or damage to the vehicle or real property in its path.
3) Injury from live electric wires after a crash ends when a vehicle occupant would have been safe otherwise
4) Events initiated by and/or loss resulting from cataclysm, such as motor vehicle damage resulting from lightning, excessive wind (above 73 mph), downburst, tornado, landslide, flood or earthquake.
5) A train collision involving only a pedestrian whether at an at-grade crossing or not.
6) A crash that occurs in a parking lot.

Note: The state forms can be used for non-state-reportable crashes per agency policy.

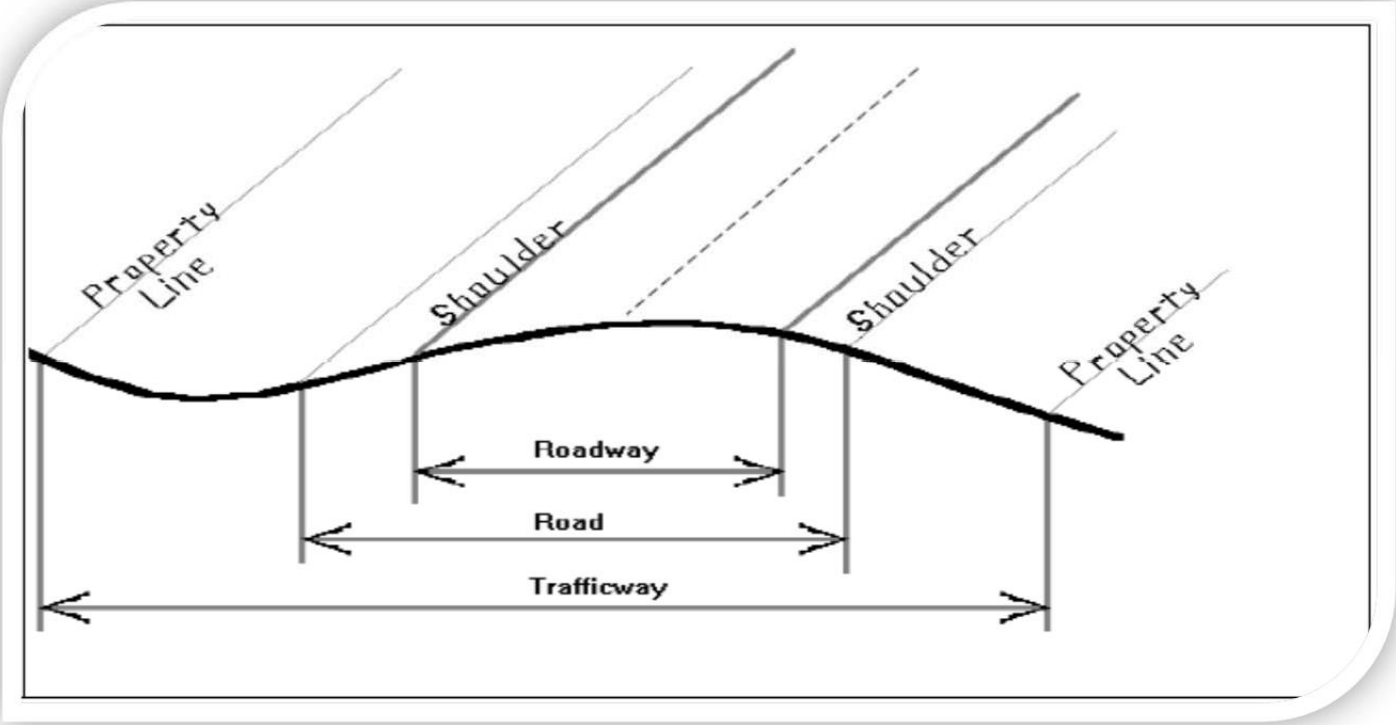
BASIC TERMS AND QUALIFICATIONS

Many of the following definitions and explanations are taken verbatim from the ANSI D16.1-2007 Manual on Classification of Motor Vehicle Traffic Crashes.

MOTOR VEHICLE To be considered a state-reportable crash, a motor vehicle “IN-TRANSPORT” must be involved in the crash. "IN-TRANSPORT" means that the motor vehicle, a motorized device being used for transportation, is in motion, is ready for motion (such as stopped for a traffic light or stopped before turning) or is improperly stopped where traffic is intended to move (illegally parked, disabled, or abandoned in the roadway). "IN-TRANSPORT" does not include vehicles such as legally parked vehicles or those parked off the roadway. In this manual, "motor vehicle" means "motor vehicle in-transport."

TRAFFIC "Transport" and "traffic" are associated with the road locations where motor vehicles are intended to travel. The unstabilized event must be initiated on, occur on, or involve a public trafficway.

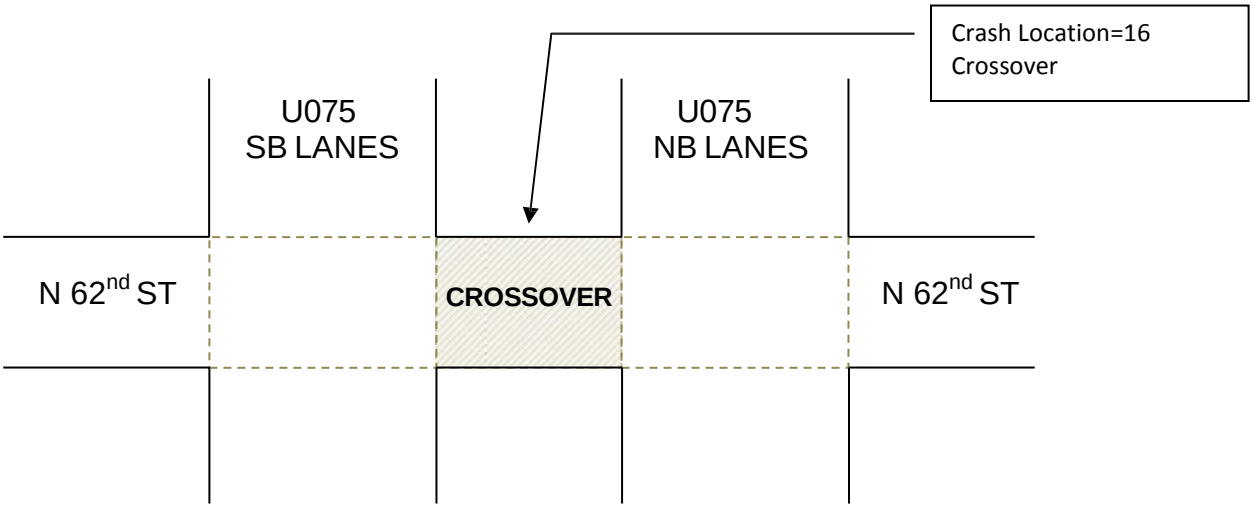
ROADWAY A roadway is that part of a road which is intended for travel (driving lanes). The “Road” includes both the driving lanes and shoulders (if any). And a “Trafficway” includes the road, roadway, and land out to the “Property Line” (public right-of-way).



TRAFFICWAY A trafficway is any land way open to the public as a matter of right or custom for moving persons or property from one place to another without regard to ownership. A trafficway resembling public streets, county roads, and highways reach from property line to property line including any shoulders, ditches, sidewalks, and additional right-of-way. This includes “gated” communities, trailer parks, and like roads which customarily admit public traffic. **Defining a reportable trafficway is based more the use of the road versus who owns the road.**

ON STREET PARKING If parking stalls are provided on a public street, these are not considered a parking lot and crashes relating to the parking stalls would be reportable to the state.

CROSSOVER A designated crossing area typically between divided highway lanes. (See Example #15A and 15B in the back)



GENERAL INFORMATION AND INSTRUCTIONS

BASIC REPORTING

The basic crash report (850A) consists of a single page with information on both sides dealing with "crash level" data only. There will only be one (1) 850A per crash. The second part of the basic report is the 850B for reporting "occupant and vehicle" data.

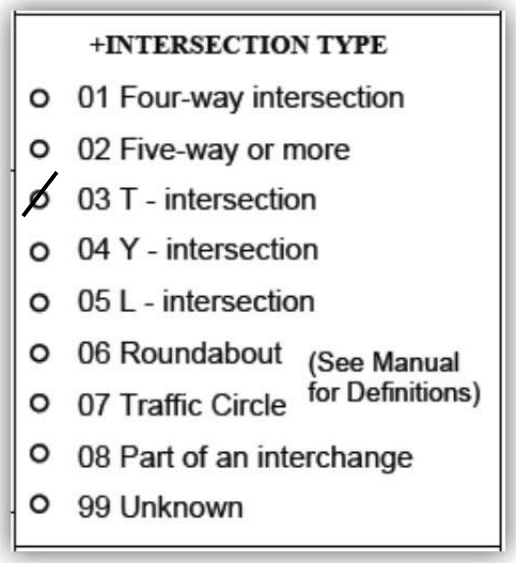
The "extended narrative" report (851) is required to include witness statements and a description of events. The "Heavy Vehicle & Hazmat" supplement (852) is for reporting large/commercial vehicle data as well as vehicles carrying hazardous materials. The "Passengers & Pedestrian" form (854) allows for additional listings of passengers and EMS data (for example, van or bus passengers).

All KDOT forms are to be submitted as one report within 10 days of the crash investigation (state statute 8-1611).

These forms are considered "Open Records" for the public, and by law, KDOT is the repository for all reportable crash reports (see page 2). Therefore, KDOT must receive and retain all KDOT forms filled out for each reportable crash. **This includes amended reports**. If the most complete version of the report is not sent to the state, customers of the report will not receive the final/complete report. Do not record criminal information or social security numbers on these forms.

PAPER FORMS

For those completing reports on paper, you will notice circles or check boxes next to field codes. These are there to speed completion of the report. They are not to be filled in like a bubble form but rather with a hash mark, check mark, or X. Care should be taken not to accidently mark over more than the intended selection. If a field requires only one code, a circle is shown. If the field can have more than one entry like Road Special Features, there are checkboxes.



For electronic forms, the user will have a box or boxes to enter the code value(s) into.

Recording Data

Accuracy and completeness of all forms is required and are very important to those that make local, state, or federal decisions. Law enforcement review data and determine target areas and safety measures. Engineers and Researchers at all private and government levels review the data to improve intersections, roadway geometrics, vehicle safety, pedestrian safety, etc. It is crucial that the data is the very best.

TRAFFIC UNITS

Traffic units are mechanically or electrically powered motor vehicles in-transport (not including personal conveyance devices like electric wheelchairs or sidewalk scooters), all pedestrian types (See page 11 - Pedestrians), and trains involved with a motor vehicle. A traffic unit includes all parts of the traffic unit, including towed units or anything transported by the traffic unit. If parts of the traffic unit or its cargo become detached, it is still considered a part of the traffic unit until the parts or cargo come to rest (motionless). Once at rest, the parts or cargo become an "object." Motor vehicles in-transport have maneuvers (some of which are not in motion) and positions in trafficways. Consistent referencing of unique traffic unit numbers in the narrative(s), code fields, and diagram is crucial and required to the reader's understanding of the event.

Remember, vehicles stopped in traffic due to normal traffic flow are NOT considered "parked." Per federal guidelines, these vehicles are considered "in-transport" and are recorded as normal traffic units (01, 02, etc.). DO NOT record legally parked vehicles or non-contact vehicles as normal traffic units (###). Record their information after recording and numbering all regular traffic units involved if possible. **Do not repeat unit numbers for any type of traffic unit**. Example of proper coding: **01** (traffic unit #1), **N2** (non-contact unit), **X3** (legally parked unit). Improper coding would be 01, X1, and N1.

When completing information on each person involved in the crash, list:

- Their association with a traffic unit or as a traffic unit, and code their seat type (position)
- Include all passengers whether injured or not (this includes bus passengers)
  - **Exception:** Record train passengers only if they are injured (does not apply to train crew)
- Individual's age and gender
- The use of safety equipment and injury severity
- EMS transport of each involved person taken to a hospital if applicable
- Whether they are ejected or trapped if people are associated with motor vehicles
- Witness information in the Narrative (form 851)

PARKED VEHICLES

The distinction of motor vehicles in-transport eliminates legally parked vehicles; legally parked vehicles (X-Units: X3) are not "normal" traffic units. Likewise, non-contact vehicles (N-Unit: N2) are not considered "normal" traffic units because contact is not made with another traffic unit. **Legally parked vehicles may have positions in trafficways, but do NOT have maneuvers.** Sometimes there is confusion concerning how to record legally or illegally parked vehicles involved in crashes. Please use the follow as a guide:

ILLEGALLY PARKED (Normal Traffic Unit...01, 02, etc.)

- A part or all of the vehicle is in the driving lanes (unless on-street parking allows such)
- Examples: door open in driving lanes, cargo in driving lanes, car running in driving lanes, any vehicle providing assistance in driving lanes, attached trailer in driving lanes, etc.
- Disabled vehicles in driving lanes are considered illegally parked.

LEGALLY PARKED (X Unit...X2, X3, etc.)

- No part of the vehicle is in the driving lanes (unless on-street parking allows such)
- Transport vehicle parked in roadway unloading cargo
- Emergency vehicle parked outside the driving lanes (police, fire, ambulance, tow, etc.)
- Construction / utility vehicle parked with caution lights on and/or cones and signs

Note: Injured occupants of legally parked vehicles are PED Type 25 & recorded on 854 form.

WORKING VEHICLES

A “working motor vehicle” is a motor vehicle in the act of performing enforcement, construction, maintenance, or utility activities related to the trafficway. This "work" may be located within open or closed portions of the trafficway and motor vehicles performing these activities can be within or outside of the trafficway boundaries. Drivers of these vehicles are NOT to be listed in the Drivers Table. They are a PED type 26 (machine operator) and must be listed on the 854 form. Their PED action is (04) Working. Record passengers in the passenger table (850B). Kansas is differing from the ANSI D16 standard in two ways: 1. A working vehicle is considered in-transport if in motion and 2. Emergency vehicle activities are included.

Inclusions:

— Vehicles at work in a marked work zone
— Vehicles at work on the median, shoulder or roadside.
— Mobile maintenance convoys
— A law enforcement vehicle which is participating strictly in a stationary construction or mobile maintenance activity as a traffic slowing, control, signaling or calming influence.
— Emergency vehicles performing work activities such as: working an accident scene, traffic stops, legal intervention, responding to an emergency call, police pursuit, and traffic control.

Examples:

1. Asphalt roller working in a highway construction zone.
2. Maintenance crew mowing grass on roadside or plowing snow.
3. Utility truck performing maintenance on the power lines along the roadway.
4. A private excavating company contracted by the state digging the foundation for a new overpass.
5. Law enforcement parked with lights on for a traffic stop or serving as traffic control
6. Ambulance, fire, law enforcement, and tow vehicles responding to emergency calls or working on scene, where they are at greater risk than normal traffic.
7. Law enforcement in pursuit

Exclusions:

— Vehicles performing a private construction/maintenance activity
— Law enforcement vehicles on routine patrol or responding to non-emergency situations
— Construction, maintenance, utility vehicles while moving from one job site to another
— Mail or Parcel service vehicles

Examples:

Garbage trucks, delivery trucks, taxis, etc.

Important Note: If after investigation the working vehicle driver is found to be inappropriately responsible for the damage and/or injury, record them in the Drivers Table (not as a PED type 26), and reflect the proper driver contributing circumstances, violations, and citations.

TRAINS

- Trains colliding with motor vehicles at public roadway crossings are considered state-reportable crashes. The Crash Class coding should include 05-Train along with a Road Special Features code of 04-RRXING.
- If a vehicle loses control on a public roadway, runs off the road, and strikes a train not within the right-of-way of a public crossing, code the train as you would an object: Crash Class equals 09-Other object, and do NOT record a Road Special Features code of 04-RRXING.

- Finally, the following are NOT considered public motor vehicle crashes by state and federal standards: 1) a train collision with a pedestrian only, 2) a train/vehicle collision at a private property crossing, or 3) train collisions where neither the 1st harmful event nor the unstabilized situation involved a public roadway.

Record identification and description of train traffic units on the 850B form. Identify trains only by ownership (e.g., BN&SF, UP, or AMTRAK) and, in the Vehicle Identification Number space, place numerals or other identification for the locomotive (for the lead locomotive only, if more than one). DO NOT record driver information for train crew in the Driver Table (front of the 850B). Record all crew members and operator of the lead engine in the Passenger Table as seat type '31'. Record any train passengers or operators who are injured (seat type '32'). Seat type '32' would also include any other train crew members including conductors, engineers, car attendants, brakemen, etc.

PEDESTRIANS (PEDS)

Pedestrians (Peds) in the general sense refer to persons who are not occupants of motor vehicles in-transport (except "working vehicle" drivers). **Peds are considered "traffic units"** and are typically listed after motor vehicles in-transport as 02, 03, etc. **Inclusions:** persons walking, jogging, playing, or pedal cyclists, riders of animals, occupants of animal-drawn vehicles, occupants of a vehicle NOT IN-TRANSPORT (legally parked), "working vehicle" drivers, and machine operators when such machine is used for its intended purpose. **Example:** While mowing along a road, a mowing machine is struck, thus the driver is considered a Ped (type 26).

Each pedestrian injured as a result of a reportable motor vehicle crash is recorded as a new traffic unit on the back of the 854 form. Occupants of legally parked vehicles are recorded as Peds (Seat/Ped Type 25) and must be listed if they are injured. If they are not injured, recording them is as a Ped is optional, though they can be listed as witnesses in the Narrative. Most Peds also have maneuvers (Ped Action) and positions in trafficways (Ped Location or Other Location).

DO NOT record pedal cycles (i.e. a bicycle) as vehicles. The pedal cyclist (operator) is a pedestrian traffic unit. A pedal cyclist is a Ped type 22. Do not record identification or description of pedal cycles in the vehicle area (back of 850B) because "VEHICLE" on the form means "motor vehicle." Record information of damaged pedal cycles, when needed, in the 'Object damaged and nature of damage' block (front of 850A) or in the narrative (851).

Unknown and Other codes: In many areas of the KDOT forms the follow codes are available:

Other – Use code '88' and specify if possible what the "other" is.
Unknown" – Use code '99'

ADDITIONAL 850B FORMS

The 850B report form will accommodate two traffic units and up to six people, including two drivers, and four other passengers. For additional vehicle occupants, use form 854 (Passengers & Pedestrians).

A crash involving more than two traffic units requires additional pages of the 850B report form. When additional 850B forms are needed, do NOT repeat the **Violations and Contributing Circumstances** from the first 850B form. List the Violations and Contributing Circumstances with the traffic unit on the 850B form to which they belong.

850A

CRASH LEVEL CODING

Kansas Motor Vehicle Crash Report
KDOT Form 850A page 1 Rev. 2019

➔Only one 850A form can be used per crash.

INVESTIGATING DEPARTMENT Enter the agency name (including clear abbreviations) of your police department. (Examples: KHPA (= troop A), KCPD, Wichita PD, DG Co Sheriff, Hays PD). This field is mandatory.

REVIEWED BY Enter the name, initials, or badge number of the officer reviewing and approving the report.

Investigating Department	Reviewed by

LOCAL CASE NUMBER (MANDATORY) Each report must have a unique local case number here (number according to your local policy). It should be unique per agency per year. In other words, do not repeat the same case number within a calendar year. If you send an amended crash report to the State, PLEASE BE SURE TO INCLUDE the same, original, local case number. It will assist in flagging amended reports to avoid duplication. **A maximum of 12 Characters can be used.**

Local Case No.

PAGE OF number the pages in a way that suits your needs the best, but please submit them in the following order: the Motor Vehicle Crash Report form (850A) first. Next, the Occupants & Vehicles forms (850B). Then add the Passengers & Pedestrians forms (854), any Heavy Vehicle/Hazmat Supplement forms (852) and finally, any Narrative forms (851) used. When you know how many total pages are to be sent to the State, go back to page 1 and enter the total number of pages on each sheet after the word "of."

Investigating Officer Name	Badge Number	County	City Name

INVESTIGATING OFFICER & BADGE NUMBER Enter the name and badge number of the officer responsible for or in charge of the crash investigation and the report. (**Maximum of 8 characters**)

COUNTY Enter the 2-character county abbreviation where the **1st Harmful Event** occurred. See: County Codes (page 86). This field is mandatory. If the county is unknown, you must choose the most probable county code.

CITY NAME Enter the name of the city or town only if the crash the **1st Harmful Event** occurred within city limits. *Leave blank if crash occurred **outside** of city limits.* Sheriff's departments and KHP personnel need to be especially careful about this when the crash location is near a large city (Wichita, Topeka, etc) but not within the corporate city limits. Leave the "CITY NAME" box in these cases blank.

850A

CHECKBOXES AT TOP OF FORM on the Kansas Motor Vehicle Crash Report form 850A are for classifying reports and separating them for efficient handling.

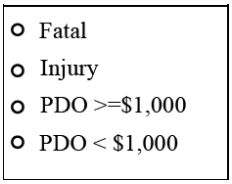
Amended reports cannot be processed correctly unless all completed pages are re-submitted to the State. (All applicable forms: 850s, 851s, 852s, 854s). This applies to both paper and electronic submissions.

1. **Make a copy** of all KDOT form pages for the report.
2. **Correct/Modify** values as necessary and mark the amended box.
3. Please send the **full, modified report** (all KDOT forms) to KDOT.
4. The previously sent original is then replaced at KDOT with the new, amended copy.

* **Please do not send in just the page that was changed.**

Mark the DUI checkbox if one or more drivers in the crash was impaired by alcohol or drugs, AND they were charged based on probable cause. If a DUI charge is pending due to chemical test results pending, indicate such under-Impairment Tests and do not mark the DUI box until the results are known and a charge is made. If the test results will take a few days or weeks to return, an amended report must be submitted with the test results (P - Positive or N - Negative) for alcohol and/or drug recorded, along with the DUI box marked (or not) as applicable. The DUI box applies to alcohol, legal drugs (medication), and illegal drugs.

Mark Hit & Run if at least one of the vehicles involved is considered a “hit & run" traffic unit. If the hit and run crash box is marked on the 850A, there must be a vehicle (driver) that left the crash scene with the Special Conditions code of Hit & Run marked on the backside of the 850B form.



Mark only one of the four which identifies the reportability and severity of the crash: (**F**) **Fatal Crash** (at least one injury severity of ‘F’), (**I**) **Injury Crash** (No ‘F’, but at least one injury severity of D, I, or P), (**PO**) **P**roperty **D**amage **O**nly Crash >=$1,000 (No injuries), or (**PU**) **PDO** <$1,000 (No injuries).

Medical Conditions: If it is proven by the coroner that a person died of a **medical condition** (not the result of the crash), do not use the Injury Severity code of **‘F’**. This person’s injury severity should be listed according to the reporting officer’s observations at the time of the crash, see page 45 for injury severity codes. The same is true if the person **dies after 30 days** of the crash date. An amended report should be submitted to reflect the medical condition. If there is uncertainty as to which injury severity code to use, choose “P” for Possible”.

Private Property: The State views private property crashes differently than most city’s, county’s, and locals. Actual Private Property crashes are not state reportable (unless fatal) and do not need submitted to KDOT. Do not use the word “Private Property” as a road name, especially for fatal crashes.
EXCEPTION: All private property fatal crashes are reportable to the state. See pg89.

Non-State Reportable: Non-reportable crashes will not be entered into the statewide crash database. The crashes occurring on private property or under the $1,000 property damage threshold are NOT to be submitted to the KDOT (exception: a fatality crash). All fatal crash reports are to be submitted regardless of the location.

The “**KDOT?**” checkboxes located in Work Zone Type and Object Damaged sections must be marked if KDOT is the responsible party. Normally, this only includes all State, US, and Interstate highways. This does NOT include the turnpike (KTA).

MILEPOST Enter the state milepost of the crash location to the tenth of a mile (192.3).
An AT ROAD Name is still required with a milepost. Due to road alignment changes over time, signed mileposts are sometimes unreliable as some are not moved reflecting road length changes. Using the nearest **At** Road, is required even if the closest reference road is several miles from the area of impact (AOI). For highway **Rest or Service Areas**, a milepost is required. For interchange locations where the On and At Road Name fields are the same, the milepost is required to identify the interchange (see ramp coding).

BLOCK NUMBER…helps to identify the crash location (usually within a city) in addition to the proper "On Road" and "At Road" names.

Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx

If the On Road (Name) is an alley, the block number must contain a value along with the nearest At Road reference to identify which alley.

Example: V1 was in the alley between 15th and 16th… Without a block number value of say 1552, one cannot identify which alley. There may be 2 alleys here. The proper description would be: 1552 (Block No) Alley (On Road Name) WAY (Road Type), 200 ft N of 15th.

DIR PFX Direction Prefix is to be used to identify the On Road Name as distinct and signed within a city or county. **Example**: **N** 39th St. distinguishes from **S** 39th St. Valid codes are: 'N', 'S', 'E', 'W', 'NE', 'NW', 'SE', 'SW', and 'U'. The same applies to Reference Road Name. Leave the Dir Pfx blank if the road sign does not indicate a direction prefix. Also, consider the naming standards of your city / county.

ON ROAD NAME (This field is required to be filled in) Record the On Road Name as signed where the **unstabilized situation** began. Code fields like Light Conditions, Road Conditions, Surface Type, Surface Character, etc. based upon the On Road Name field.

If a road name is unknown, record "Unknown"…BUT…most crashes have ON and AT road names available, please do not use unknown loosely. This only makes this vital information unusable to your agency, your city/county, the State of Kansas, and for several other important decisions.

If the On Road is an Interstate, US, or Kansas route, always use the I###, U###, or K### route identifiers as opposed to the local name (e.g. "Kellogg" in Wichita is U054). Highways are coded with a letter and three numbers including leading zeros. Include the letter suffix for "Business" or "Alternate" (example: U069B) if it applies.

Do NOT add a second name in the On Road or At Road Name fields such as: U054 (Kellogg) or U059 (Iowa).

Alleys: For crashes in alleys, record **Alley** (see Block Number). For rest areas, record **Rest Area**.

KTA: Record I035, I335, I470, I070 and then **TPKE** for the Road Type field. If the crash occurred inside an intersection of different road classes, record the **highest** class.

The hierarchy of highway road classes is:

1) **I** (Interstate) I070, I135, I435, etc
2) **U** (US) U050, U081, etc, and then Business (**B**) Alternate (**A**), and Spur (**S**) Routes
3) **K** (Kansas) K004, K023, etc, and then Business (**B**) Alternate (**A**), and Spur (**S**) Routes
4) All other roads. Use 911 road names if available or the name shown on the street signs.

Example: If a crash occurs at (in) the intersection of U040 & K027 (junction), use U040 as the **On** Road. If at U024 & U283, use U024 as the **ON** Road. (Use the lower route number where multiple routes of the same class are marked). **Exception:** See interchange coding on page 24-26.

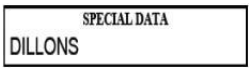
For **unnamed trafficways**, record **Lot Access** RD or **Noname** RD as appropriate in the **On Road Name** field. Occasionally, more than one set of distances and directions is necessary to indicate a crash location. Description of the location should be reflected in the 850A narrative. (Example: "2 miles north FROM U024 and 2.5 miles east FROM County Rd 210, ON "Noname" county road").

When referencing crash locations, **always identify junctions if they apply** (See page 19). **Example:** "1 mile north and 1.5 miles east FROM **U069/K057NJCT** (North junction) ON a county road". For **unknown locations**, record **Unknown** in the On Road / At Road Name fields, along with **0** (distance), **U** (ft/mi), **U** (direction) From. Record **RD** for the Road Type. Again, DO NOT use unknown liberally as 99% of crashes have road names. This only hurts your agency and fellow citizens safety on roadways.

Roads formerly known as US or Kansas highways and removed from the state road system should be identified as the newly assigned county/city road name. If only known as "**Old**U040" (**Old**U056, **Old**K132,etc.), record such. Record '**RD**' for the On Road, Road Type when using the "OLD" tag.

Parking Lots: (see Example 19)
Only crashes occurring at or up to 50 feet within the entranceway of a parking lot are considered state reportable, UNLESS it is a fatality. All fatal crashes in a parking lot require a full completed report submitted to the state. All other crashes within a parking lot do not need to be submitted to the state, this includes parking lots in colleges, schools, gas stations, restaurants, apartments, malls and private loops around malls.

- **ON Road Name:** Use "Lot Entrance" or "Lot Access" for the On Road Name if within 50ft of the primary road and the entrance to the parking lot. Do NOT at any time use Parking Lot or an address as a road name.
- **Direction Prefix (Dir Pfx):** Required. Use the direction where the entrance is located.
- **AT Road Name:** Use the connecting roadway next to the entrance.
- The **Distance**, **Unit of Measure**, and **Direction** measure from the nearest AT ROAD used.
- **Crash Location:** Use code "**14 – Access to Parking lot/Drvwy**"
- **Special Data:** For parking lots, indicate the business name (e.g. Wal-Mart, Nazarene Church, Dentist, etc.) in the **Special Data field** on the back of the 850A form.

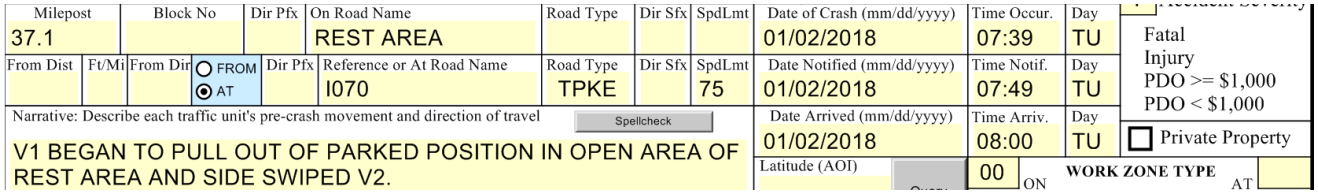


Service or Rest Areas:

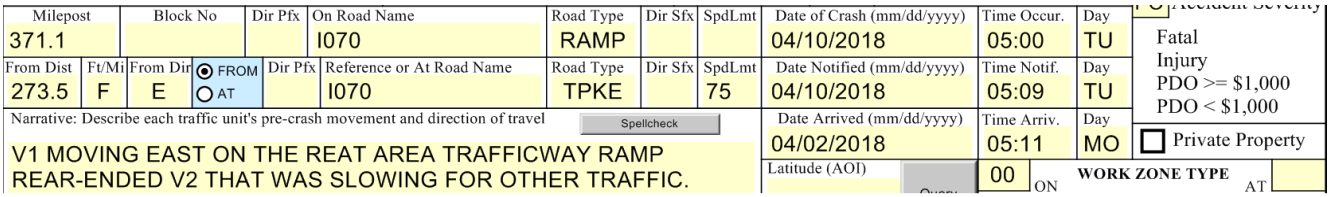
- **Milepost:** Record the milepost of the rest area to the nearest tenth of a mile (371.0, 371.7, etc). This reference helps one determine which rest area along a given route. See Special Data below.

- **On Road Name:**
  - Crashes within the rest area boundaries require "Rest Area" for the On Road Name with a milepost reference and the associated Highway as the At Road (like the example below). The Crash Location would be 23 – Rest Area.

- **On Road Type:** If the crash occurs within a defined trafficway, record **TRFY** (trafficway) for the **On Road Type**. If it occurs on the entrance or exit ramps (lanes), record **RAMP**.



- If the crash occurs on the **entrance or exit ramps** (lanes), the On Road Name field is to be coded to the adjacent road name (i.e. I070, I035, U081). Record **RAMP** as the **On Road, Road Type**. Show a milepost reference and record the adjacent road name as the At Road reference; the At Road Type will equal FWY, HWY, EXPY, RAMP or TPKE. The **Crash Location is 14** – Parking Lot / Driveway Access**.**



- For rest areas, the **Distance**, **Unit of Measure**, and **Direction** from an At Road reference are required for entrance / exit ramps. Measure from the entry or exit point (gore area) to or from the adjacent roadway. If the crash occurs in a trafficway, an aisle, undefined area of the rest area lot, or a location where an At Road measurement does not make sense, the At Road measurement is optional. In these cases, select the **AT** choice. Be sure to show location in the diagram.

- **Special Data:** Indicate the rest area name (e.g. Lawrence RA, Matfield Green RA, etc.) on the back of the 850A form in Special Data as well as the narrative and/or diagram.

Public parks: If the road is NOT named, record "**Park**" for the **On Road Name**. Use **RD** (Road) for the **Road Type**. List the **park name** in the **Special Data** field. If the park road is named, record it.

ROAD TYPE …is mandatory. Be careful to use the right code. Code the Road Type for both the On Road and At Road fields according to how the road name is signed. Do not use 'RD' for every "Road." Use 'AVE', 'BLVD', 'DR', 'ST', etc. as they apply. If the road is a Kansas, US, or Interstate highway, the Road Type will be **HWY** (regular highway; no access control), **EXPY** (Expressway; partial access control), **FWY** (Freeway; full access control), **TPKE** (Turnpike), or **RAMP**. For an Alley, use **WAY**. For a Parking lot entrance use **TRFY**. If the On Road Name reflects "Unknown" or "Noname," record **RD** for the Road Type.

Code	Description	Code	Description	Code	Description
AVE	Avenue	LNDG	Landing	ST	Street
BLVD	Boulevard	LN	Lane	TER	Terrace
CIR	Circle	PK	Park	TPKE	Turnpike
CT	Court	PKWY	Parkway	TRL	Trail
DR	Drive	PL	Place	TRFY	Trafficway
EST	Estate	PLZ	Plaza	VW	View
EXPY	Expressway	PT	Point	WAY	Way
FWY	Freeway	RAMP	Ramp	XING	Crossing
HWY	Highway	RD	Road		
JCT	Junction	SQ	Square		

Access Control: Access Control is "engineer speak" for limiting (or not) one's ability to access another roadway. The following values apply to Interstate, US, and Kansas routes only.

HWY – **No Access Control**: Route has many "at-grade" (same plane) intersections and driveway entrances and no interchanges (no grade separation; no elevated ramps or bridges at junctions)

EXPY – **Partial Access Control**: Some access restriction for intersections / entrances. Normally routes with a mixture of interchanges (grade separation; ramps & bridges) and "at-grade" intersections.

FWY – **Full Access Control**: Normally divided routes with 4 or more lanes with only interchange junctions like Interstate highways.

TPKE – **Full Access Control**: Used for the Kansas Turnpike only (Same configuration as FWY)

DIR SFX Direction Suffix is to be used to identify the On Road Name as distinct within a city or county. **Example:** To distinguish Adams Road **E** from Adams Road **W**…The same would apply to Reference Road Name. Valid codes are: 'N', 'S', 'E', 'W', 'NE', 'NW', 'SE', 'SW', and 'U'.

ON ROAD SPEED LIMIT Enter the Speed Limit posted for the ON road. If not posted, enter the speed limit established for that type of road or street by statute or regulation. (the At Road Speed Limit is only required if the crash location is related to an intersection). If the trafficway is not signed and does not have an expected default speed limit, leave the speed limit field blank. **Do not record the traveling speed of the vehicle here**.

DATE OF CRASH Code the date of the crash (mm/dd/yyyy); if unknown, code '99/99/yyyy' (the Year must be included for this field).

DATE NOTIFIED code the date when law enforcement was notified of the crash (mm/dd/yyyy).

DATE ARRIVED code the date when the reporting agency arrived on the scene of the crash (mm/dd/yyyy). If not applicable, leave blank.

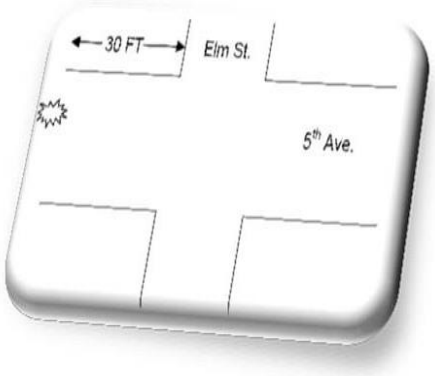
TIME OCCURRED, TIME NOTIFIED, TIME ARRIVED: Code appropriate times for the crash occurrence, when law enforcement was notified, and the arrival time at the scene of the crash. These must be coded in "**military time**". If unknown, leave blank. If submitting electronic crash reports, code '9999'. **Do not use '0000' for midnight; use '1159' or '0001'.**

DAY Code the day of week using the first two letters of that day ('SU', 'MO', 'TU', 'WE', 'TH', 'FR', 'SA'). **Note:** The distinction of different days helps eliminate confusion surrounding the timing of events (like nighttime crashes before midnight and Notification and/or Arrival are the next day).

From Dist	Ft/Mi	From Dir	○ FROM ○ AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx

FROM DISTANCE If the crash first harmful event occurs in the driving lanes **within** the intersection boundaries ("inside the box", Crash Location='12'), leave the **From Dist, Ft/Mi,** and **From Dir** fields blank and mark the **AT** circle. If the Crash Location is not a '12', measure and record the distance from the nearest named reference road, and mark the **FROM** option. Do not measure from alleys and private/business driveways. If the distance is greater than 999 feet, Miles should be used instead (e.g. 1,000 ft/5,280 ft per mile = 0.189 miles). The measured distance is associated with the next two fields: the Unit of Measurement (**Ft/Mi**) and **From Direction**. **If the distance, UOM, & Direction are unknown and cannot be assessed, record zero, 'U', 'U'.**

FT/MI (Unit Of Measurement – 'F', 'M') It is preferred that the officer record feet for distances of less than 0.10 mile (528ft) measured from the **Reference Road**. "Paces" and "Blocks" are NOT acceptable units of measurement.



FROM DIR Using the chosen Reference Road, identify which direction leads to the crash first harmful event. In other words, the actual direction from the reference road and not based upon route inventory direction. Valid codes are: 'N', 'S', 'E', 'W', 'NE', 'NW', 'SE', 'SW', and 'U'.

Example near an intersection:
The ✸ (area of impact) is on 5th Ave., 30 feet West of Elm Street.

FROM Mark the "FROM" option when NOT inside intersection or interchange boundaries. This requires measurements and a direction from a signed Reference Road that point toward the crash location (Area of impact).

AT The "AT" option can only be marked when the 1st harmful event occurs in the roadway driving lanes within intersection boundaries (Crash Location=12), certain areas of an interchange (AL=15), on an **intersection** crossover (AL=16), at a toll booth (AL=17), or in non-trafficway rest area situations (AL=23). The 'Distance', 'Ft/Mi', and 'Dir' is typically blank for these locations. (See diagram on page 23)

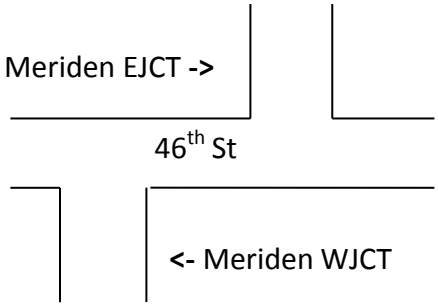
850A

DIR PFX (Direction Prefix) Use to identify the AT Road Name as distinct from another road with the same name: example - **N** 39th St to distinguish from **S** 39th St in Shawnee County. If one only records 39th ST, the reader cannot discern which 39th street is referenced.

REFERENCE or (AT) ROAD NAME This field is required. The best reference road choice is the nearest cross road/street (that has a road/street name). The purpose is to identify where a crash occurs related to the On Road.

IMPORTANT: When referencing a road that has two junctions with the On Road within a county or city, be sure to indicate which junction using NJCT (North Junction), WJCT, etc. (I070 & K004WJCT or K004EJCT)

Example:



Since there are two Meriden Rd junctions with 46th Street in Shawnee County, record Meriden WJCT or EJCT in the AT Road Name field (MeridenWJCT, MeridenEJCT).

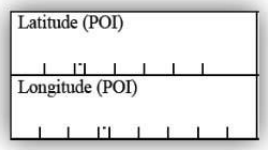
ROAD TYPE This applies to both On Road and Reference Road. (See page 17 for codes)

DIR SFX Direction Suffix is to be used to identify the AT Road Name as distinct within a city or county: **Example:** to distinguish Adams Road **E** from Adams Road **W**. The same would apply to On Road Name.

AT ROAD SPEED LIMIT Enter the posted speed limit for this road if the Crash Location code equals '12' or '13'. If not known, enter the speed limit established for that type of road or street by statute or regulation.

NARRATIVE (850A) (Action & Direction of Units) **is required for every crash**. Describe **concisely** what happened. Short three word narratives are useless to locating. A more detail description along with other documentation is required to be recorded on the Narrative form (851).

LATITUDE / LONGITUDE Record the location of the "First Harmful Event". Capturing such these days is easy using devices like smart phones (apps) to determine the latitude and longitude at the crash location. Another option is to use map tools such as Google Earth on a computer by showing the satellite view, zooming in on the crash location, and choosing a map feature to capture the latitude/longitude values. These values must be recorded in **decimal degrees** to the **5th** decimal place (**not** hours/min/sec) using a geographic North direction (not magnetic). The accuracy of the GPS unit should be within approximately 10 ft (3 Meters). The Kansas latitude range is between 36.00000 to 40.50000; longitude is between negative (minus) -94.00000 to -102.50000.



PHOTOS BY Record who took (or owns) the photos of the crash scene, damaged vehicles, or injured persons. See Crash Photography (pages 82-85).

OBJECT DAMAGED AND NATURE OF DAMAGE Describe significant, non-vehicular property that is damaged as a result of the crash. If the damage is to KDOT property (owned by KDOT), check the **"KDOT?"** box. Remember, the Kansas Turnpike property is NOT KDOT property. Also specify the type of damage: e.g., broken, bent, crushed, burned. If more than two "objects" are damaged, the remainder can be noted on the narrative form (851). Further, please list KDOT property damage on the 850A in these cases.

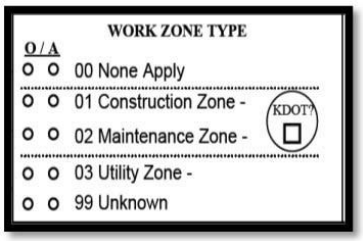
Object Inclusions:

- Pedal cycles (device not person)
- Buildings
- Vegetation
- Domestic animals
- Bridge rail, pier, etc
- Guardrail
- Fence
- Road sign, post
- Utility fixtures

Exclusions (do NOT list the following):

- Motor vehicles
- Objects carried inside involved vehicles
- Intangibles such as "psychological"
- Wild animals.

OBJECT OWNER Enter the name, address, phone number of the owner of the damaged property. If the owner is KDOT, please mark the **KDOT? Box**, record the object, and record "KDOT" in the Owner Last Name field…the phone and address are not necessary in these cases.



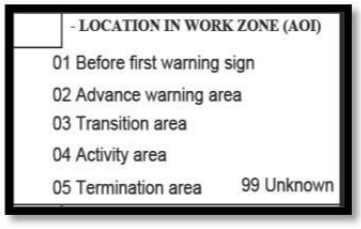
WORK ZONE TYPE Mark the appropriate option for both the ON (**O**) Road option for each crash. Only mark the AT (**A**) option if the At Road has a work zone, and the Crash Location is '12', '13', or '15'. If it is a KDOT Construction Zone (01) or Maintenance Zone (02) involving a State, US, or Interstate Highway, mark the **"KDOT?"** box. If the crash occurs in a **construction zone detour** using other established roadways, code 00 – None apply. If the detour is within the work zone area, code 01, 02, or 03. If signed, **code work zone regardless of work taking place at the time of the crash.**

WORK ZONE CATEGORY …is mandatory for each On Road work zone. Do not record for At Road work zones. Established construction zones normally involve lane closures, lane shifts or crossovers. Whereas, maintenance or utility zones tend to have intermittent or moving vehicle situations. Mark the code that best applies to the Work Zone area regardless of work in progress at the time. All require and are defined by some type of signing and/or traffic control. If signing and/or traffic control are not present, it is not considered a work zone.

WORK ZONE LOCATION (AOI) …is mandatory for each On Road work zone. If the crash occurred in a work zone, mark the applicable option. If unknown, code '99'.

Before 1st Warning Sign (01) …if the crash occurs inside the construction zone beginning and ending signs and prior to the advanced warning sign area, use '01'.

Advanced Warning Area (02) …tells traffic what to expect ahead in the Work Zone.



Transition Area (03)
…moves traffic out of its normal path.

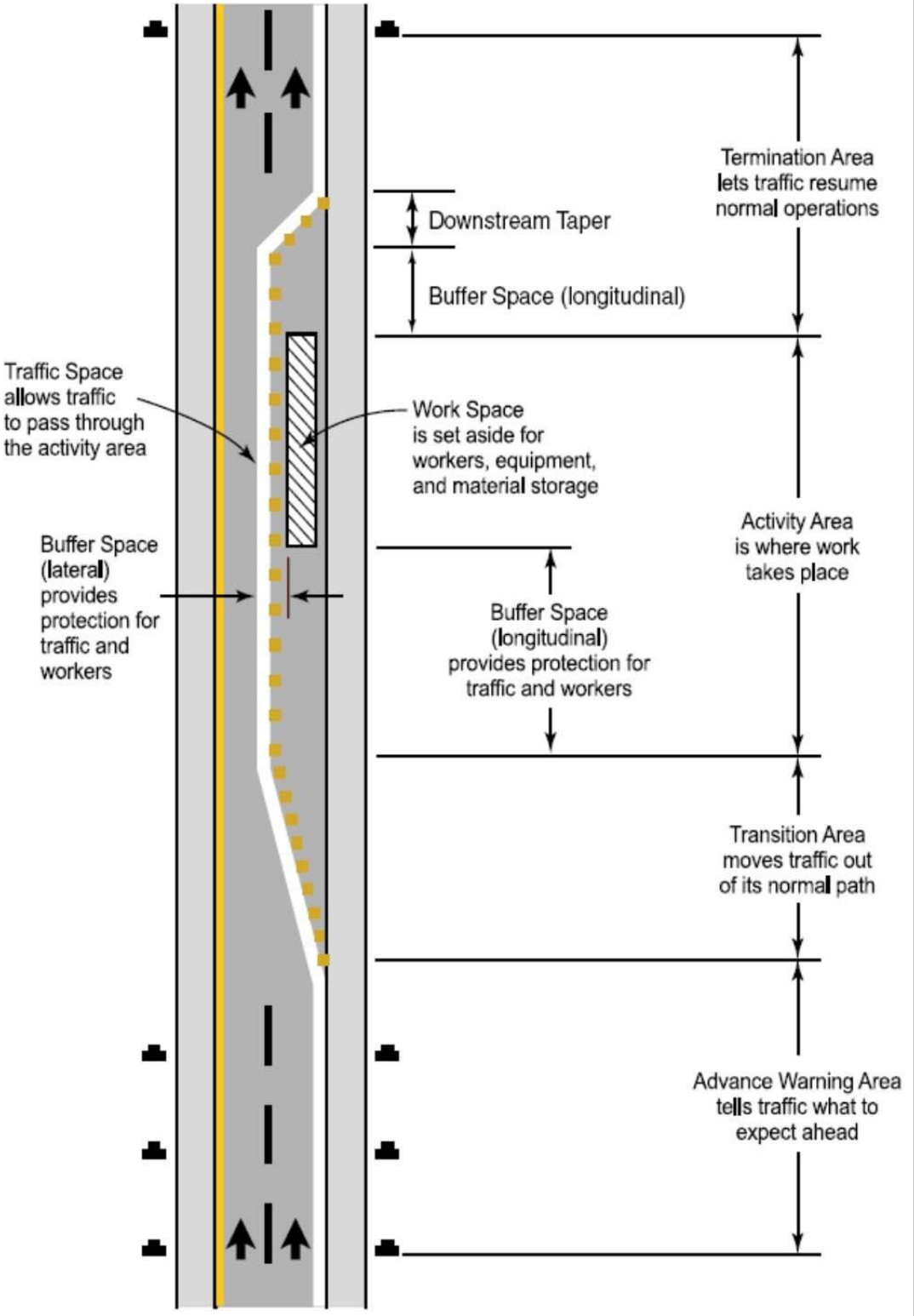
Activity Area (04)
…is where the actual roadway work occurs.

Termination Area (05)
…lets traffic resume normal operations and prior to the end of work zone sign.

See Diagram on the next page…

850A

Diagram of a Work Zone Area[5]



[5] Source: FHWA

CRASH LOCATION The Crash Location identifies where the "First Harmful Event" (1st AOI) occurred and NOT where the unstabilized situation began. It should be noted that this field is one of the most miscoded on the form, and at the same time, one of the more important fields. Diagrams have been added to improve understanding. A few special situations regarding crash location are shown below for both **"ON"** Roadway, and **"OFF"** Roadway locations.

ON ROADWAY CODES (AOI in the driving lanes)

Remember the coding of "On Roadway – Crash Location" is based upon the 1st harmful event occurring within the driving lanes (where traffic is intended to travel). This applies to codes '11'-'17'.

CODE '11' (1st harm occurs in driving lanes)

Non-intersection crashes do NOT take place at or related to an intersection, interchange area, toll plaza, driveway or parking lot access, or on a crossover.

Note: Code '11' does include crashes in or at **alleys** or at railroad crossings as well as on-street parking locations. If at or near an alley, do not record the alley as the reference (AT) road, but rather record the nearest named roadway.

CODE '12' (1st harm occurs in driving lanes)

First Harm occurs inside the intersection boundaries of two public roadways. We refer to it as "inside the box" (or circle) of the intersection. **Be sure to code the corresponding "Intersection Type"**. Recording associated **At Road field data are mandatory**: Speed limit, Work Zone, Surface Type & Condition, Number of lanes, etc. This code does not apply to crashes at parking lot or driveway accesses such as mall or shopping center entrances, alleys, or private driveways (see Code '14'). **Exception:** If the Mall or other business has a named street(s) intersecting with another adjacent named street, it would be treated as an intersection.

CODE '13' (1st harm occurs in driving lanes)

Intersection-Related requires a judgment call about the effects of intersections and their traffic controls upon traffic and crash causation. If the crash is deemed to occur as a result of traffic slowing or backing up from an intersection (any distance), code the location as '13' (Intersection-Related). **Be sure to code the corresponding "Intersection Type"**. Recording associated **At Road field data are optional**: Speed limit, Work Zone, Surface Type & Condition, No. of lanes, etc.

CODE '14' (1st harm occurs in driving lanes)

Use code '14' (Parking Lot/Private Driveway Access) for crashes that occur at or related to the intersection of a roadway, driveway or parking lot entrance. Do NOT code these crashes as '12' or '13' unless the crash is a result of the intersection traffic verses driveway related. If the parking **lot access road** is not a named street, it is a code '14' regardless of whether it has traffic control devices or not. Remember that a trafficway extends from property line to property line, so crashes that occur at the end of a driveway and within the right-of-way of the street are coded as '14' and state-reportable (this includes where a sidewalk crosses a driveway). Indications of right-of-way lines: power poles, fences, mowing lines, etc.

Exception: If a crash occurs at a driveway/parking lot entrance intersecting a named street, and opposite the driveway/parking lot entrance there is a named street, the location is to be coded a '12' (intersection) or '13'.

See the diagram on the following page for examples of codes '12', '13', and '14'.

850A

CODE '15' (1st harm occurs in driving lanes of interchange roadway, ramp, or intersection)
Interchange Area coding is for crashes that happen within the boundary area of an interchange. An interchange can include junctions of two highways or a highway and a local street/road or two local streets. Code '15' would NOT include "Same Grade" intersections/junctions where two road surfaces meet each other normally without ramps and bridges. An "interchange" will have grade separation where one road goes over or under another and have exit and entrance ramps.

Code '15' for any crash where the "First Harmful Event" occurs on the roadway…

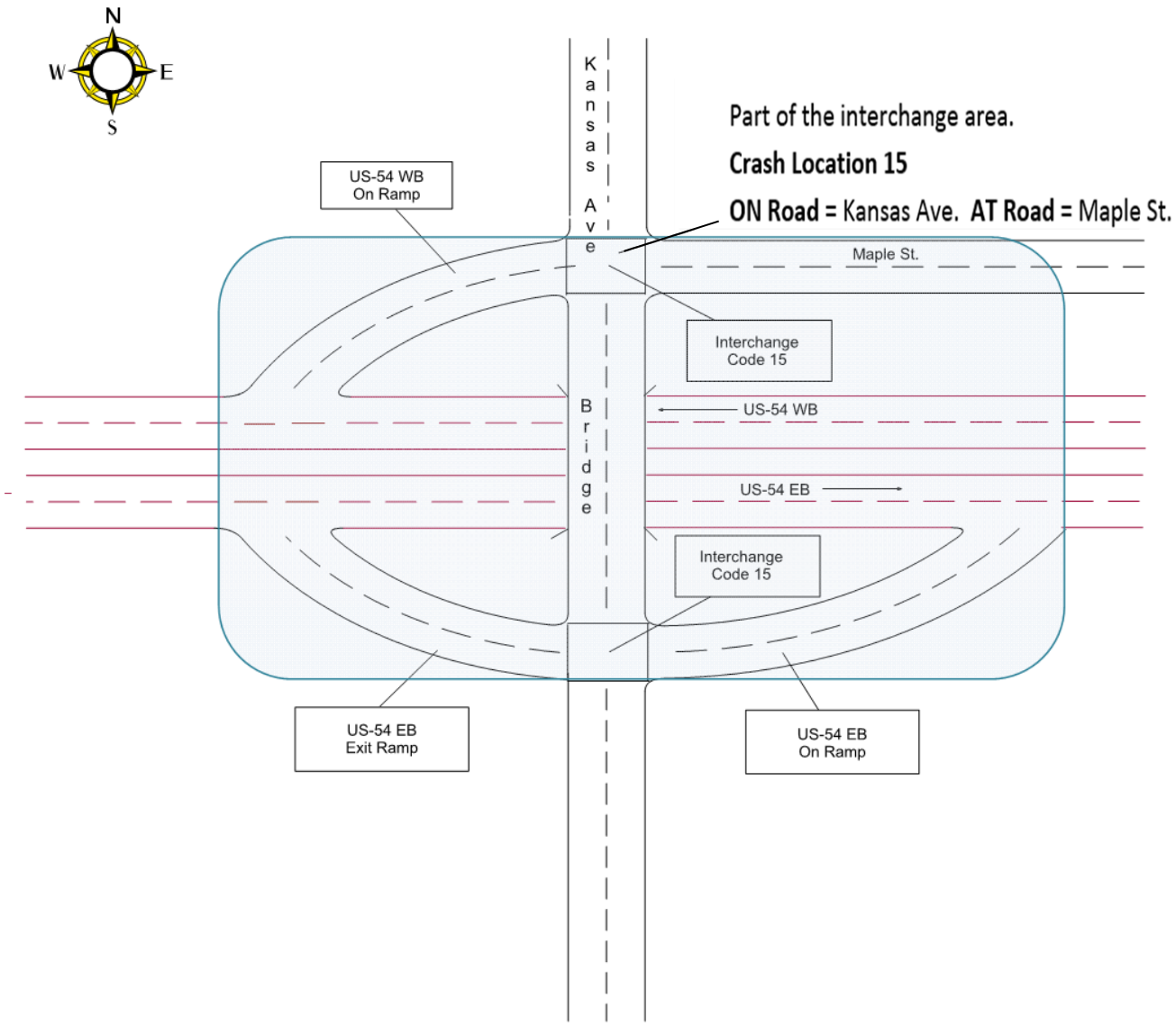
1) Going over or under the main roadway within the interchange boundaries
2) On an interchange ramp
3) On an acceleration/deceleration lane
4) At the ramp terminals

The only exception is at toll plazas which are a part of an interchange…record code 17.

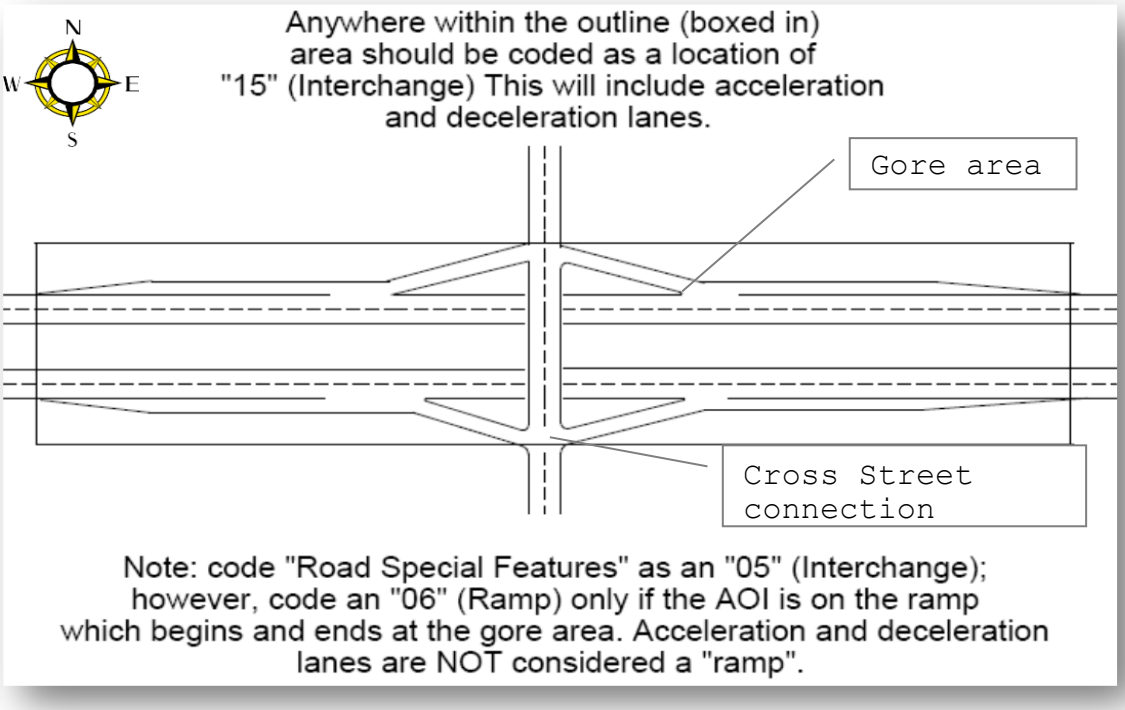
The Interchange diagram below indicates that crashes occurring at the junction of a ramp and a city street should be coded as Crash Location '15' (interchange), not '12' (for example, AOI on Kansas Ave. at the U054 EB Exit Ramp). Please notice the text box concerning "Maple St" and it's junction with "Kansas Ave." Any crashes that happen on any of the "on" or "off/exit" ramps should be coded as Crash Location '15' (interchange). In addition, crashes occurring (in this diagram example) on U054, either EB or WB where the AOI falls between the ramp junctions on U054 should be coded a location of '15' (e.g. underneath the Kansas Ave. bridge). Please record At Road field data for crashes in interchange intersections.

Crashes with an AOI on the Kansas Ave bridge over U054, or a AOI with a guardrail on either end of the bridge in this example, should be coded a location of '15' (interchange) while making sure you code a "Road Special Feature" of '01' (bridge). Crashes occurring at the center of the interchange or within the intersection boundaries of a ramp terminal and cross street may be recorded using the AT circle with no distance, unit of measure, and direction. Be sure to specify RAMP in the Road Type Field and the bound direction in the 850A narrative field (U054 WB Ramp…etc).

All crashes occurring within interchange boundaries should have a "Road Special Feature" of '05' coded.



The following “Diamond” interchange diagram shows an outline to indicate that any crash occurring within the outline rectangle should be coded as an interchange crash. This is just a simple type of interchange, and the same coding principle applies to all types of interchanges.



IMPORTANT INTERCHANGE/RAMP NOTES

There are **three** scenarios for coding interchanges:

1. **Junction of a city street or county road with a state (K), US, or Interstate highway** (see previous page)
   a. All ramps are coded to the highway name, not the local road.

2. **Interchange of two highways with no “riding route”**
   a. I070 junctions with U083
      i. The ramps exiting from I070 are coded to I070
      ii. The ramps exiting from U083 are coded to U083
   b. The rule: “You are not ON the connecting route until you fully leave the previous route.”

3. **Interchange of two highways where one is a “riding route”**
   a. U075 rides on I070 between the West junction (WJCT) and East junction (EJCT) in SN county.
      i. At the EJCT “gore” area, NB U075 leaves EB I070
      ii. The ramp exiting from I070 in this case is coded to U075

   b. The rule: “When riding (U075) on a higher classed route (I070) and then exiting from that route, the ramp is coded to the route that it is leaving (U075) beginning at the gore area, because it is not riding on the carrying route (I070) any longer….”

Measuring Interchanges: For ramps, measure from the gore area or from the ramp-cross street connection point staying on (along) the ramp. If measuring from the gore area, the On Road and At Road Names can be the same, but the Road Type is different (see example below). It is <u>crucial</u> that a route milepost be recorded in these situations, else the reader cannot locate which interchange. Be sure to **reference which ramp** (NB, SB, EB, WB) in the 850A short narrative to further clarify the location.

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx
1.3			I135	RAMP	

From Dist	Ft/Mi	From Dir		Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx
120	F	NE	(•) FROM ( ) AT		I135	FWY	

If measuring from the crossroad & ramp connection area, the On Road and At Road Names will be different.

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx
8.5			I135	RAMP	

From Dist	Ft/Mi	From Dir		Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx
45	F	S	(•) FROM ( ) AT	E	13TH	ST	N

If the crash does not occur on a ramp at an interchange, code the On Road and At Road as normal.

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx
8.5			I135	FWY	

From Dist	Ft/Mi	From Dir		Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx
200	F	S	(•) FROM ( ) AT	E	13TH	ST	N

OR

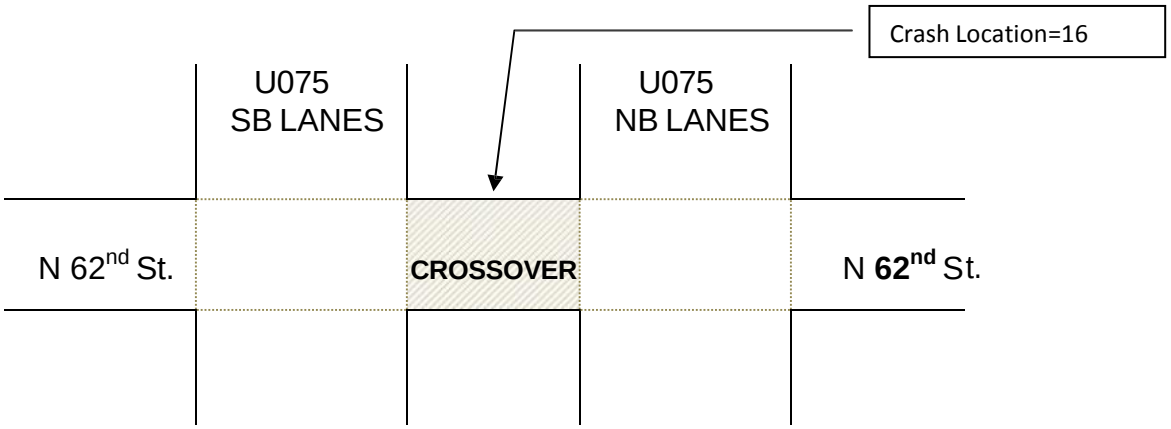
Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx
		E	13TH	ST	N

From Dist	Ft/Mi	From Dir		Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx
60	F	E	(•) FROM ( ) AT		I135	FWY	

If the crash occurs in the center of the interchange, code the On Road and At Road as normal and mark the AT circle.

CODE '16' (1st harm occurs on or related to a designed median crossover)

A Crossover is an intended land way or paved section between two sections of divided roadway. These are often coded incorrectly. **Example:** a roadway that passes over another roadway is not a Crossover location. Use this code for crashes involving traffic units **entering, within, or leaving** a crossover at the time of the First Harmful Event. For further help, see Examples 15A and 15B in the back of this manual.



CODE '17' (1st harm occurs at or related to a Toll Plaza)

Code "Toll Plaza" when the AOI is either at or related to a Toll Plaza on the Kansas Turnpike. Use this code for crashes where traffic is backed up from or collisions with the Toll Booth structure or barriers. This includes toll plazas that are a part of an interchange. Record 17 – Toll Plaza in these cases.

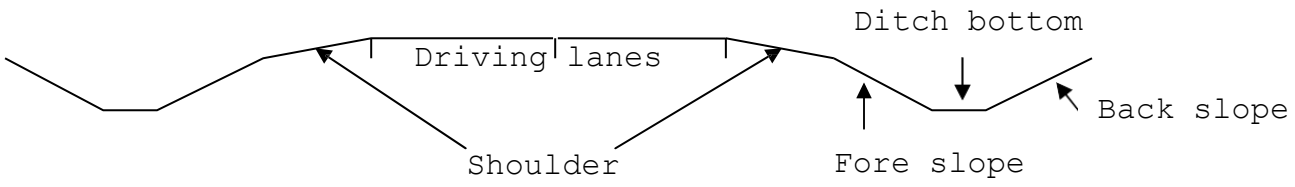
OFF ROADWAY CODES (FHE-AOI outside the driving lanes)

CODE '20' (1st harm occurs on designed road shoulder)

Use code '20' (shoulder) when the AOI occurs within the shoulder area of a road. If V1 strikes V2 when both vehicles are on the shoulder, use code '20'. If V1 is in the driving lanes and V2 is on the shoulder and D2 opens their door causing V1 to strike V2, it should be coded as an '11'.

OFF ROADWAY:
- 20 Shoulder
- 21 Roadside (not shoulder)
- 22 Median
- 23 Parking lot or Rest area
- 88 Other: _____
- 99 Unknown

A road shoulder normally consists of a paved or turf slope extending from the edge of the driving lanes one to 10 feet. See the road cross section below which is a basic example showing 10 foot shoulders. Notice the shoulder is defined by two break points: 1) the edge of the pavement and 2) the fore slope break. For roads that do NOT have a defined shoulder, do not use code '20'.



CODE '21' (1st harm occurs beyond the roadway and shoulder and within the right-of-way)

Use code '21' (Roadside) where the First Harmful Event occurs off the road (outside driving lanes and shoulder). This would include from the **edge of the road** (and shoulder, if present) **to the edge of the trafficway** right-of-way delineation (fence, poles, sidewalk, etc). See diagram on page 6.

CODE '22' (1st harm occurs in the roadway median)

Use code '22' (Median) for crashes where the AOI occurs in the median between divided roadway sections. (does not include crossover areas: code '16'). It DOES include collisions with a concrete barrier between the divided roadway and collisions within a "painted" median between divided roadways.

CODE '23' (1st harm occurs in a rest area)

Use code '23' only for crashes occurring in a rest area or service area. Crashes occurring in the driveway entrance within the road right-of-way are coded as a '14,' and those occurring where there is street parking are coded as an '11.'

CODE '88' (1st harm occurs outside of the trafficway boundaries)

This code reflects crashes "Off Roadway" and outside of the trafficway right-of-way. This includes yards, houses, fields, etc. It should not be used for crashes occurring at a Turnpike Toll Booth since this is an "On Roadway" crash. There is a specific Crash Location code for Toll Plaza crashes (17).

CODE '99' "unknown" if the Crash Location is truly unknown.

INTERSECTION TYPES If the Crash Location reflects '12' (Intersection), '13' (Intersection-related), or '15' (Interchange), mark the option that best applies. If the crash occurs in or related to a Roundabout (06) within a part of an interchange, record Roundabout (06). Roundabout takes priority over other Intersection Type codes.

+INTERSECTION TYPE
- 01 Four-way intersection
- 02 Five-way or more
- 03 T - intersection
- 04 Y - intersection
- 05 L - intersection
- 06 Roundabout
- 07 Traffic Circle

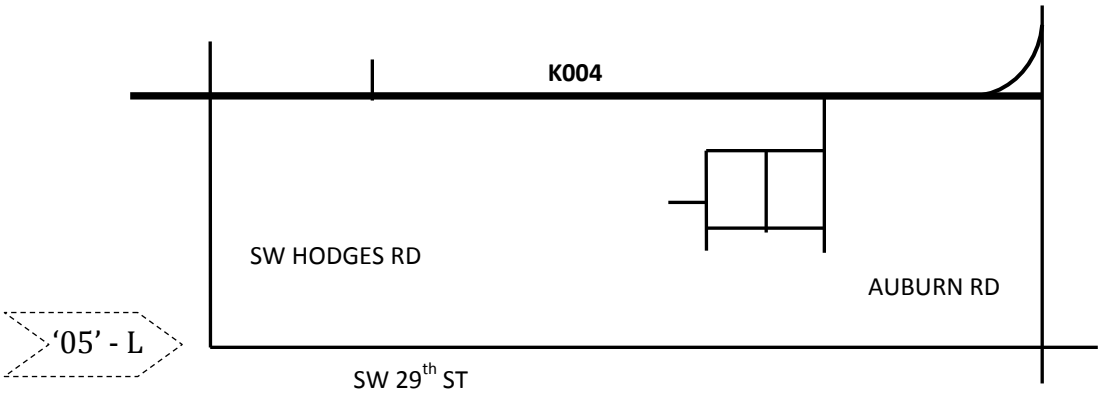
(See Manual for Definitions)

- 08 Part of an interchange
- 99 Unknown

FOUR (01) **OR FIVE-WAY** (02) These intersections have four or five "legs" that connect to them.

'T' (03) **OR 'Y'** (04) **INTERSECTIONS** Two or three routes join at a fork in the road reflecting either a 'Y' or 'T' configuration.

'L' (05) **INTERSECTION** Use this code where two streets terminate at the same point. The transition point can be on a curve. Example below: SW Hodges Rd terminates at the same point where SW 29th ST terminates.



ROUNDABOUTS (06) If the First Harmful Event occurs in the **center obstruction** of the roundabout, code the Crash Location as '88'- roundabout. If the crash is related to the roundabout (e.g. traffic congestion) and not a part of an interchange, code '13'–Intersection-related.

Typical elements that constitute a roundabout are: (also see diagram Example 18)

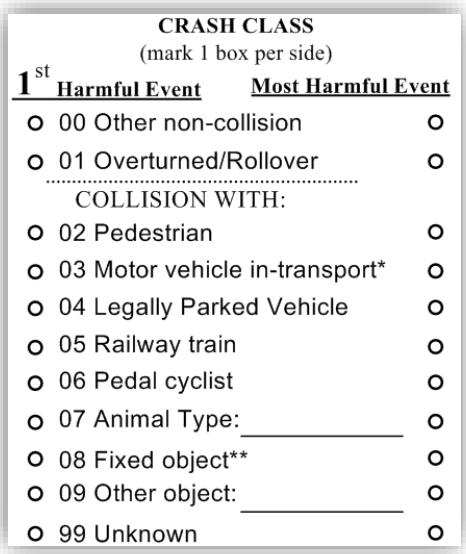
- **Yielded entry** – cars entering must wait for a gap in the circulating traffic before entering
- Roundabout **Islands** separate the entry from the circular roadway and direct traffic to the right.
- Designated **crossing area for pedestrians**
- Designed to be driven at speeds of **15 – 20 miles per hour**
- **Single or multiple lanes**
- Sometimes an inside "**apron**" is present for large vehicle use

TRAFFIC CIRCLES (07) are generally smaller with a single lane and do NOT have islands and marked yielded entrances or designated speed limits and pedestrian crossings. (see Example 18)

PART OF INTERCHANGE (08) Mark for any crash occurring within interchange boundaries with the exception of where the crash occurs at or near the intersection of a ramp and a Roundabout (06), record Roundabout. (See interchange information on pages 24-26 & Example 18)

CRASH CLASS (FIRST/MOST HARMFUL EVENT)

Mark the Crash Classification code for the "**1st Harmful Event**" AND the "**Most Harmful Event**". The **F**irst **H**armful **E**vent (**FHE**) is specific and clearly discernible, whereas the **M**ost **H**armful **E**vent (**MHE**) (See page 33) can be open to debate. Therefore, the official classification procedure uses the First Harmful Event, and it is the consistency of states following this data-coding standard that enables national statistics to be developed and used for meaningful analysis. Both are required for every state- reportable crash in the Crash Class area.


CRASH CLASS
(mark 1 box per side)

1st Harmful Event		Most Harmful Event
O	00 Other non-collision	O
O	01 Overturned/Rollover	O
	COLLISION WITH:	
O	02 Pedestrian	O
O	03 Motor vehicle in-transport*	O
O	04 Legally Parked Vehicle	O
O	05 Railway train	O
O	06 Pedal cyclist	O
O	07 Animal Type: _____	O
O	08 Fixed object**	O
O	09 Other object: _____	O
O	99 Unknown	O

Note: The Crash Location is based on the FHE not where the unstabilized situation begins. This is important to remember when a crash occurs at or near an intersection, at county lines, or where two city limits connect.

Example:
If the unstabilized situation begins in Ford County, but the FHE occurs in Kiowa County, the crash County field should indicate KW for Kiowa County.

All Crash Class codes are based upon the First or Most Harmful Events (FHE) occurring on a public trafficway or as a result of unstable events beginning on a trafficway.

CRASH CLASS - CONTINUED

NOTE: The **Collision with Other Vehicle** (CWOV) and **Fixed Object Type** (FO) coding must directly correspond with the **Crash Class** (AC) coding for the **First (FHE) and Most Harmful Events (MHE)**. Examples: If AC-FHE = 03, CWOV FHE cannot be blank. If AC-MHE = 08, FO MHE cannot be blank.

CRASH CLASS
(mark 1 box per side)

1st Harmful Event		Most Harmful Event
O	00 Other non-collision	O
O	01 Overturned/Rollover	O
	COLLISION WITH:	
O	02 Pedestrian	O
O	03 Motor vehicle in-transport*	O
O	04 Legally Parked Vehicle	O
O	05 Railway train	O
O	06 Pedal cyclist	O
O	07 Animal Type: _____	O
O	08 Fixed object**	O
O	09 Other object: _____	O
O	99 Unknown	O

****FIXED OBJECT TYPE**
(mark 1 box per side if applicable)

1st Harmful Event		Most Harmful Event
O	01 Bridge structure	O
O	02 Bridge rail	O
O	03 Crash cush./Impact attenuator	O
O	04 Divider, median barrier	O
O	05 Overhead sign support	O
O	06 Utility devices: pole,meter,etc	O
O	07 Other post or pole	O
O	08 Building	O
O	09 Guardrail	O
O	10 Sign post	O
O	11 Culvert	O
O	12 Curb	O
O	13 Fence/Gate	O
O	14 Hydrant	O
O	15 Barricade	O
O	16 Mailbox	O
O	17 Ditch	O
O	18 Embankment	O
O	19 Wall	O
O	20 Tree	O
O	21 RRXING fixtures	O
O	88 Other: _____	O
O	99 Unknown	O

***COLLISION WITH VEHICLE**
(mark 1 box per side if applicable)

1st Harmful Event		Most Harmful Event
O	01 Head on	O
O	02 Rear end	O
O	03 Angle - side impact	O
O	04 Sideswipe: opposite direction	O
O	05 Sideswipe: Same direction	O
O	06 Backed into	O
O	88 Other: _____	O
O	99 Unknown	O

The following are brief explanations of Crash Class coding for First Harmful and Most Harmful Events.

NON-COLLISION

00 Other Non-collision

- All other non-collision events including:
  - Fire starting in motor vehicle in-transport
  - Explosion
  - Gas Inhalation (e.g., carbon monoxide)
  - Jackknife
  - Injury from a fall or jump from vehicle; exceptions are someone "being pushed" (intentional) from a vehicle or someone attempting suicide
  - Object in or thrown against vehicle except deliberate intent
  - Injury or damage from breakage of any vehicle part (example: drive shaft, tire blowout) resulting in a crash
  - A moving part of vehicle (example: wheel comes off)
  - A object falling on vehicle except from a cataclysm (example: vehicle hits power pole, then pole falls upon a different vehicle)
  - A vehicle's load shifting or falling causing damage load or to carrying vehicle
  - Toxic or corrosive chemicals leaking out of vehicle
  - Motionless debris set in motion by another vehicle such as gravel, ice/slush/snow
  - Striking holes or bumps
  - Driving into water, without overturning

- **01 Overturn / Rollover**
  - Involves a motor vehicle overturning at least a ¼ turn. This includes motorcycles only where injury and/or damage result.

COLLISION WITH…

Pedestrian ('02') A crash in which the event is the collision of a pedestrian and at least one vehicle in-transport. **Inclusions**: a person on foot or on a **non**-motorized conveyance such as skateboard, skates, sled, or scooter, **not** including a pedal cycle (see '06—pedal cycle'). Further, it does include a person attempting to enter into a motor vehicle but is not fully in the vehicle.

Motor Vehicle In-Transport ('03') A collision where the First Harmful Event involves at least two motor vehicles in-transport (mechanically or electrically powered). Keep in mind that illegally parked vehicles, including disabled vehicles in the roadway, are considered "in-transport." This does NOT include collisions with legally parked vehicles or "person conveyance."

Inclusions:	Exclusions:
• Car, Pickup, SUV	• Electric wheelchairs
• Truck	• Motorized skateboards or sidewalk scooters (not registered or tagged)
• Bus	• Animal conveyance
• Working vehicles	• Etc
• Etc	

Note: It is common to have an '03' Crash Class and Collision with Other Motor Vehicle (CWOV) ='88' where an object in motion originating from one vehicle hits another vehicle (renegade tire, gravel or rock from a dump truck, etc.).

Basic Sample Diagrams for CWOV:

1 Head on

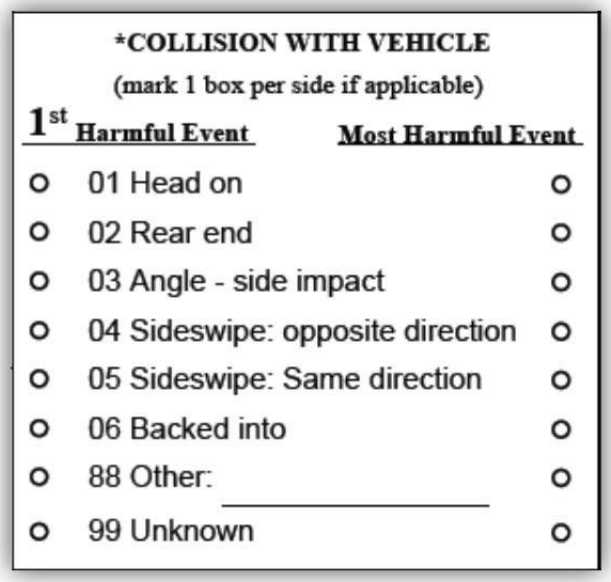
2 Rear end

3 Angle

4 Sideswipe-opp. direction

5 Sideswipe-same direction

6 Backed into



88 Other: Do not code 88 for 'T-Bone'; code 03 angle instead. Some uses for 88 are found in 'Unusual Crash Coding Situations' (pages 91-94).

Vehicle Not In-Transport (04): A collision where the First Harmful Event involves one motor vehicle in-transport and a legally parked vehicle.

Railway Train (05): A collision where the First Harmful Event involves a motor vehicle in-transport and a railway train…includes a truck with rail wheels while on the tracks.

Pedal Cycle (06): A collision crash in which the First Harmful Event is the collision of a pedal cyclist and a motor vehicle in-transport. Although bicycles are the most common pedal cycles, the category includes tricycles, unicycles and pedal cars. This category does not include sidewalk scooters or non-motorized wheelchairs

Animal (07): The collision with a **live** wild or domestic animal (other than an animal powering another road vehicle) and a vehicle in-transport. If the animal is deceased, code 09 – Other Object. If uncertain, code 07. If submitting reports electronically, the software will need to pass the code and not the description in the data. However, the description can be used for a dropdown list and should be what is visible on the printed form.

Codes

1 – Deer
2 – Other wild animal: bobcat, coyote, antelope, elk, etc.
3 – Cow, steer, bull
4 – Other domestic animal: cat, dog, goat, llama, sheep, donkey, etc.
5 – Horse or mule
88 – Other
99 – Unknown

Use the code that best describes the fixed object struck only when the Crash Class is 1st Harmful Event or Most Harmful Event = 08 (Collision with Fixed Object). The FO coding must directly correspond with the Crash Class coding 08 for the 1st and Most Harmful Events.

Example: V1 was NB on Mosquito Rd when it struck a guardrail and went through ditch and struck tree

Sample coding: AC-FHE = 08 AND AC-MHE = 08; the CWOV-FHE = 09 (guardrail) and MHE = 20 (tree)

Fixed Object ('08'): A crash in which the First Harmful Event is the striking of a fixed object by a vehicle in-transport. Fixed objects include the objects shown on the form such as guardrail, bridge railing or abutments, impact attenuators, trees, embedded rocks, utility poles, ditches, steep earth or rock slopes, culverts, fences and buildings. The key word is FIXED, implying immovable.

Other Object ('09'): Other Object collisions are not included in any other category of collision type. They include collisions with parts of a motor vehicle or its cargo which have come loose and are motionless in the roadway and collisions with dead bodies (animal or human).

Examples:

1) Engine block in roadway
2) Furniture in the roadway
3) Deceased deer laying in the road
4) Deceased pedestrian laying in the road

CRASH CLASS MOST HARMFUL EVENT (MHE)

Crashes also must be classified according to the **M**ost **H**armful **E**vent (**MHE**). Though the **M**ost **H**armful **E**vent (**MHE**) can be open to debate, a determination is required. To the best of your ability, indicate the Crash Class MHE that best represents the evidence and witness information gathered. Generally speaking, personal injury should be weighed above property damage.

In many cases, the FHE and MHE will be the same.

Examples:

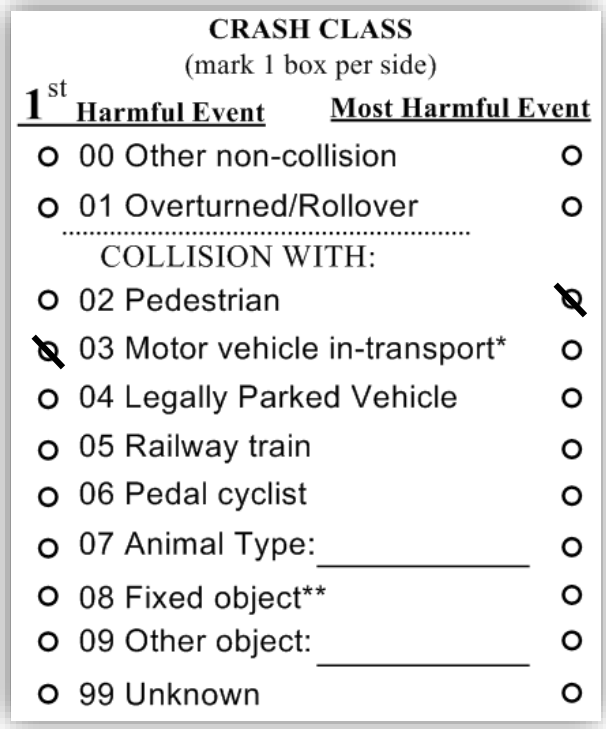
V1 was NB on Main when EB V2 ran a red light striking V1 in the front and then V2 struck P3

Sample coding: AC-FHE = 03, AC-MHE = 02

V1 was WB on Spruce when EB V2 went left of center striking V1 head on

Sample coding: AC-FHE = 03, AC-MHE = 03

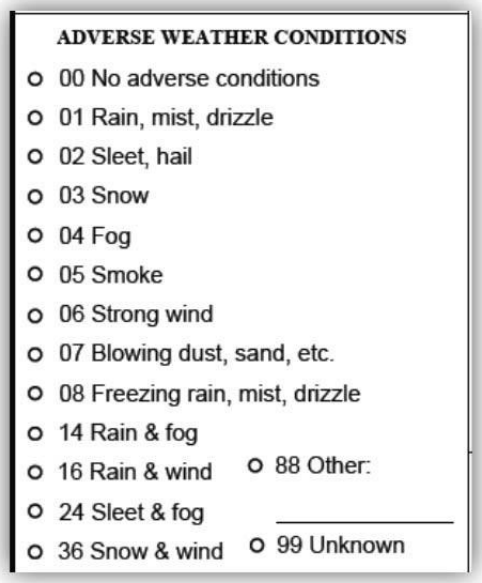
Note: for coding unique / strange crash situations, refer to 'Unusual Crash Coding Situations (see pages 91-94)


CRASH CLASS
(mark 1 box per side)

1st Harmful Event		Most Harmful Event
O	00 Other non-collision	O
O	01 Overturned/Rollover	O
	COLLISION WITH:	
O	02 Pedestrian	⊘
⊘	03 Motor vehicle in-transport*	O
O	04 Legally Parked Vehicle	O
O	05 Railway train	O
O	06 Pedal cyclist	O
O	07 Animal Type: _____	O
O	08 Fixed object**	O
O	09 Other object: _____	O
O	99 Unknown	O

LIGHT CONDITIONS Mark the option that best applies to the Light Conditions at the time of the crash.

ADVERSE WEATHER CONDITIONS Record the most appropriate code for the weather conditions at the time of the crash. Sun or sun glare, cloudy, hazy and breezy are **NOT** adverse weather conditions and should be coded as 00-No Adverse Conditions (not 88-Other). If the officer investigating the crash feels these were a factor, they should be recorded as contributing circumstances (see "environment" contributing circumstances on the back of the Crash Code Sheet (855) form).



Rain (01) includes **drizzle**, **mist**, **sprinkles**, and **light rain**. Use code '08' for freezing rain (rain which freezes on contact with the road surface or other objects). If a combination of conditions exists, some combinations are provided on the list of choices. Use the most appropriate code for the weather conditions at the time of the crash. If none of these fit, use code '88'.

Note: A "cataclysm" is considered to be a "violent disaster" of nature. Strong thunderstorm winds would not be considered "cataclysmic" unless the winds were above 73 mph and causing significant damage to stationary objects. But, a crash caused by strong winds less than 74 mph would be considered an "adverse" weather causation (code '06') and deemed a reportable crash. Further, cataclysm applies if the crash is the result of a flooding event (e.g. excessive rain). If events involve a cataclysm and a motor vehicle crash, they would not be considered a reportable crash (see page 5, bullet 4).

SURFACE TYPE Record the proper code reflecting the **ON** Road Surface Type. Mark the **AT** Road option only if the crash location is a '12', '13', or '15'.

SURFACE CONDITION Record the proper code reflecting the **ON** Road Surface Condition at the time of the crash. Mark the **AT** Road option only if the crash location is a '12', '13', or '15'.

Note: Wet ('02') includes "damp". "Glaze or frost" on the roadway is "Ice" ('04').

ROAD SPECIAL FEATURES Record up to three codes for special features **at** the crash AOI (not near or within sight of the crash location). If there is no Road Special Feature that applies, record '00'.

BRIDGE (01) If a crash occurs on a bridge, or if contact is made with a bridge structure, bridge rail, or the guardrail adjoining the bridge, code '01' and record the posted bridge number if possible.

BRIDGE OVERHEAD (02) A non-railroad bridge running over the roadway where the crash occurs.

RAILROAD BRIDGE (03) This refers to a RR bridge over the roadway where the crash occurs.

RRXING (04) Record this code only if one or more of the following situations exist:

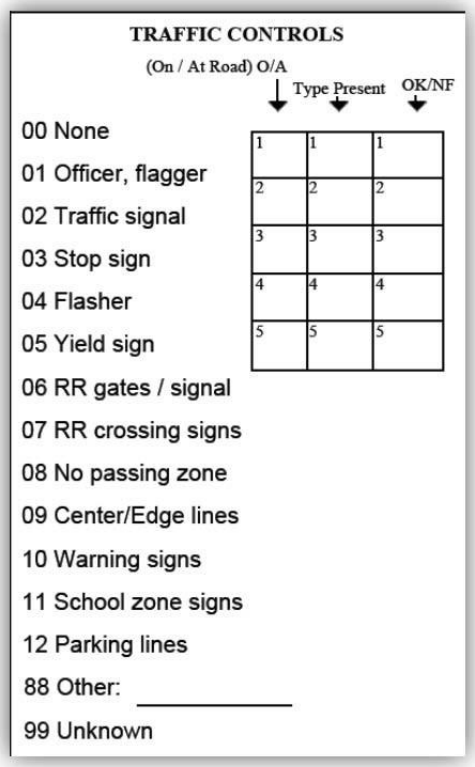
1. A motor vehicle collides with a train
2. A motor vehicle collides with a fixed object related to the crossing (examples: cross bucks, lights, gate, control box);
3. A traffic unit collides with another traffic unit (not a train) stopped at or slowing for the crossing, such as for passing of a train or for a fuel truck or bus stopping or slowing as required by law.
4. If a motor vehicle is damaged because of rough tracks
5. A motor vehicle loses control and crashes due to the crossing itself (because of rough tracks for example, a vehicle overturns).

Note: If possible, identify the crossing by obtaining the Federal Crossing Number from the cross bucks or on the metal box nearby if the crossing is signalized (lights, gate, etc). Code this Federal number on the line next to "04 RRXING".

INTERCHANGE ('05') This code applies if the crash occurs within the boundaries of an interchange including all ramps and toll areas (see notes for Crash Location code '15' on pages 23-26).

RAMP ('06') Use this code only if the AOI is actually on a ramp of an interchange or a rest area ramp. (see notes for Crash Location code '15' on pages 23-26).

TRAFFIC CONTROLS (ON/AT) There must be at least one '**O**' (On Road) recorded in the first box for every crash. In the box to the right, code the Type of Traffic Control device present (00-None, 02-Traffic Signal, 01-Flagger, etc). Finally, code '**OK**' (functioning properly) or '**NF**' (Not functioning properly) for each device.



Functioning "OK" indicates the Traffic Control (sign, signal, gate, pavement lines, etc.) are visible, not broken prior to the crash, and used according to their intended purpose. If the crash caused the device to not function properly, and the devise was "OK" prior to the crash occurrence, record OK.

Not functioning (NF) applies to signs that are knocked down before a crash occurs, lights that do not work properly, RRXING gates not working properly, center or edge lines that are not effectively visible, etc. "NF" does NOT apply to flashers not flashing as a part of their normal operation (like a school zone). Record '**A**' (At Road) Traffic Control devices if the Crash Location is '12' and '13' or '15' if they apply. Code all traffic control devices present (up to five).

If a school zone sign ('11') has a flasher attached, code ('04') as well. If a warning sign ('10') has a flasher attached, code '04' as well. If a portable message board is used for traffic control (like a warning message or arrow), it should be coded as a '10'. If the message board displays information such as "Don't Drink and Drive" or "Click it or ticket", etc, it would NOT be considered a Traffic Control device.

BACK SIDE OF THE 850A

Crash Diagram
850A page 2

COLLISION DIAGRAM **Draw scene as observed or recreate per statements and evidence available**

A basic diagram is required for all crashes and is especially important for fatality crashes. Draw a concise diagram of the roads and vehicles showing their names, and the movement(s) of vehicle(s).

This does not have to be a scaled drawing and is required to be completed whether vehicles were moved from the scene or not.

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction

Arrows showing vehicle movements **leading to** the collision are sufficient. Examples: "→ ←" indicates a head-on collision or "→ ● " shows a vehicle striking a pole (or another fixed object). Show location features like a creek or river, RR tracks etc. if possible.

Other suggested inclusions:

- Direction of units prior to and after impact, skid marks, etc.
- Location of signs, traffic controls, and reference points
- Location of other property hit or damaged (trees, signs, etc.)
- Location of temporary roadway conditions (construction or maintenance zone, etc.)
- Measurements to locate the crash relative to specific, fixed, and identifiable points

Note that there is a symbol located to the top right of the collision diagram. Please indicate the North **(N)** direction using this symbol. Note: Electronic diagrams may use a different north arrow orientation.

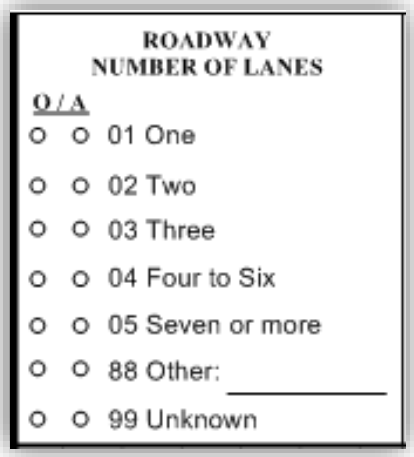
SPECIAL EVENT…can be used for tracking crashes at or related to an unusual or unique community event.

Examples: "Kansas State Fair" (RN Co.), "Kansas Speedway Races" (WY Co.), "Walnut Valley Music Festival" (CL Co.), "Verizon Theater Concert" (WY Co.), etc.

Note: To do research on this data field, consistency is very important in listing the event you would like to show in this box. If several crashes for instance, happen in conjunction with the Kansas State Fair, the law enforcement officers in Reno County should make sure they all list the "Special Event" in the same way. "Kansas State Fair" versus "KS State Fair" or whichever way is agreed upon. The main point here is to be consistent in the way the "Special Event" is spelled/listed.

SPECIAL DATA This box is for recording additional description of a crash location such as for a parking lot entrance (Dillons, Walmart, etc) or a rest area description (Matfield Green, East Topeka, Lawrence, etc), or for any additional coding useful to crash reporting.

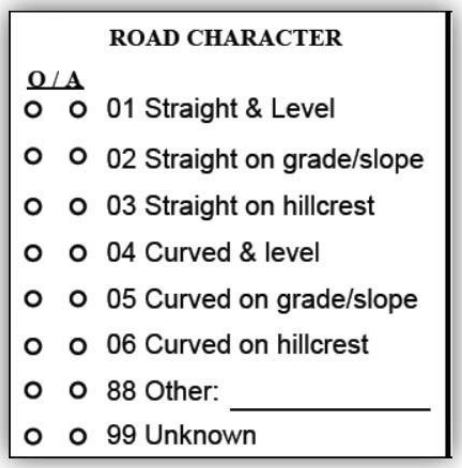
ROADWAY NUMBER OF LANES Check the appropriate circle for the "ON Road," and if the Crash Location is a "12" (intersection), also check the appropriate "AT Road" circle. This includes all roadway lanes (driving lanes), even when the roadway is divided by any type of median. Turn lanes are excluded. Note: Recording "At Road" data is useful for a crash Location of "13" (intersection-related) and "15" (Interchange).


ROADWAY NUMBER OF LANES

O / A

- 01 One
- 02 Two
- 03 Three
- 04 Four to Six
- 05 Seven or more
- 88 Other: _____
- 99 Unknown

- If the location is under construction, code the number of lanes open to travel.
- If the crash occurs on an interchange ramp, record the number of lanes for the ramp only.
- If the crash occurs on a gravel or other unmarked roadway that handles two-way traffic, record "02 - Two"
- If the crash occurs in a parking lot entrance, record the appropriate number.

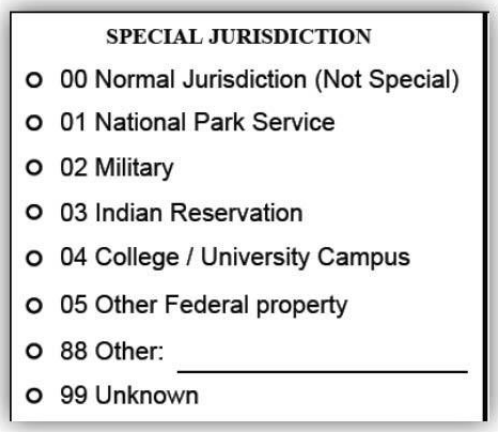

ROAD CHARACTER

O / A

- 01 Straight & Level
- 02 Straight on grade/slope
- 03 Straight on hillcrest
- 04 Curved & level
- 05 Curved on grade/slope
- 06 Curved on hillcrest
- 88 Other: _____
- 99 Unknown

ROAD CHARACTER check the appropriate circle for the "ON Road," and if the crash location is a '12' (intersection), also check the appropriate "AT Road" circle. Note: Recording "At Road" data is useful for a crash Location of "13" (intersection-related) and "15" (Interchange).

SPECIAL JURISDICTION Record the Special Jurisdiction in which the crash occurred. If there is no Special Jurisdiction applicable, code '00'.


SPECIAL JURISDICTION

- 00 Normal Jurisdiction (Not Special)
- 01 National Park Service
- 02 Military
- 03 Indian Reservation
- 04 College / University Campus
- 05 Other Federal property
- 88 Other: _____
- 99 Unknown

850B

Traffic Unit Inclusions:

- Mechanically or some electrically powered motor vehicles in-transport
- All pedestrian types
- Trains involved with a motor vehicle in-transport at public roadway crossings.

Exclusions:

- The distinction of motor vehicles “in-transport” eliminates legally parked vehicles
- The term “in-transport" denotes the state or condition of a motor vehicle which is in motion, ready for motion, or illegally parked within the portion of a driving lane ordinarily used by similar transport vehicles.
- A traffic unit includes all parts of the traffic unit, including towed units or anything transported by the traffic unit. If parts of the traffic unit or its cargo become detached, it is still considered a part of the traffic unit until the parts or cargo come to rest (motionless).

Vehicles “In-transport” Inclusions:

- Motor vehicle on a roadway (within driving lanes)
- Driverless motor vehicle in motion on the shoulder, roadside or median.
- Motionless or disabled motor vehicle abandoned in a roadway (driving lanes)
- Motor vehicle in motion outside the trafficway.
- A stopped motor vehicle with any portion of its primary outline as defined by the four sides of the vehicle (e.g., tires, bumpers, fenders) and load, if any, within the roadway.
- Working vehicles operating for their intended purpose: Paving machines, Mowing tractors, etc.

Examples:

- A driverless vehicle previously parked on the shoulder begins to roll forward because the parking brake was not set.
- A stopped vehicle partially on the shoulder with two tires on the roadway.
- A tractor trailer with its load hanging over the roadway edge line.
- A person deliberately driving an all-terrain vehicle (ATV) down a median or the roadside.
- A police vehicle patrolling or responding to an emergency.
- A police or emergency vehicle stopped on the roadway at the scene of a crash or traffic stop or other police action, regardless of whether or not the emergency lights have been activated.
- Construction, maintenance, or utility work vehicles traveling on a trafficway from one work site to another location.
- Taxies, limousines, or other passenger vehicles, with or without passengers while on the roadway or in-motion on a trafficway.
- A school bus stopped in a travel lane with signs and/or lights activated.
- A private citizen using his pickup truck or lawn tractor with a blade removing snow from the roadways in his neighborhood. (Not an official city, county, highway maintenance activity.)
- A farm tractor or combine moving from a storage facility to a field under its own power on the trafficway.
- A moving motor vehicle on a private driveway.
- A car pulling away from a gas pump in a gas station.
- An ATV driving on a recreational off-road trail inside or outside the trafficway.

- A vehicle operating in the closed portion of the trafficway.
- A van left unattended in a lane during rush hour when parking is prohibited because it is in an open travel lane at the time.

Exclusions:

- Transport vehicle stopped off the roadway within the trafficway.
- Transport vehicle stopped in parking lanes during periods when parking is allowed.
- A stopped motor vehicle with any portion of its primary outline as defined by the four sides of the vehicle (e.g., tires, bumpers, fenders) and load, if any, not within the roadway.

Examples:

- A disabled utility vehicle stopped on the shoulder, median, or roadside.
- An automobile parked in an area designated for parking area against the curb of a residential street, or in a parking space/lane.
- A truck stopped on the shoulder where only the extended side-view mirror overhangs the roadway edge line.
- A power company truck working on the power lines in an elevated basket in a maintenance work zone.
- A concrete mixer discharging its load of concrete in a construction work zone.

NON-CONTACT VEHICLES: While non-contact vehicles are considered "in-transport," code them with a special prefix of 'N' (N##). **Be careful not to repeat any traffic unit numbers regardless of their type.** Non-contact vehicles are only to be recorded if their actions or inactions directly affected the circumstances of the crash.

NOT "IN-TRANSPORT" VEHICLES:
Vehicles not in motion, not ready for motion, and no portion of the vehicle or its load intrude into the driving lanes of a road.

Inclusions:

- Legally parked transport vehicles off the roadway.
- Motionless vehicles off the roadway.

Examples:

- A stopped vehicle on the shoulder to change a tire as long as no portion is intruding into driving lanes.
- A car legally parked against the curb on a residential street.
- A parked truck completely on the shoulder of a road.

PARKED MOTOR VEHICLE: A parked motor vehicle is a motor vehicle not in-transport that is not in motion and not located in the roadway (driving lanes). Motor vehicles in-transport have maneuvers (some of which are not in motion) and positions in trafficways. Legally parked vehicles may have positions in trafficways, but they do not have maneuvers.

DO NOT code legally parked vehicles or non-contact vehicles with normal traffic unit numbers (01, 02, etc.). Record their information after recording and numbering all “in-transport” traffic units where possible. Code a legally parked traffic unit as unit ‘**X##**’ and a non-contact traffic unit as unit ‘**N##**’. Do not repeat unit numbers for any type of traffic unit. Example: TU 01, 02, N03, X04.

Legally Parked Vehicle Inclusions:

- Any stopped motor vehicle where the entirety of the vehicle's primary outline as defined by the four sides of the vehicle (e.g. tires, bumpers, fenders) and load, if any, is not within the roadway.
- A truck stopped on the shoulder where only the extended side-view mirror overhangs the roadway edge line.
- Where roadway lanes are used for travel during some periods and for parking during other periods, a parked motor vehicle should be considered to be in-transport during periods when parking is forbidden.
- A motionless vehicle completely on the shoulder, median, or roadside.
- A vehicle at a gas station pump.
- A delivery vehicle parked on a roadway to unload cargo, merchandise, etc. is legally parked by ordinance.

Exclusions:

- Disabled vehicles in the roadway are not legally parked.
- A motor vehicle left unattended on a roadway, where parking is always prohibited.
- A driver of vehicle stopped curbside on a city street opens his door into the travel lane.
- A car stopped in a private driveway waiting to enter a roadway.
- A stopped vehicle partially on the shoulder with two tires on the roadway.
- A tractor trailer with part of its load extending over the roadway edge line.

TRAINS colliding with motor vehicles at public roadway crossings are considered state-reportable crashes. However, a train collision at any other location is considered a private property crash and a train collision with a pedestrian **only** is not considered a motor vehicle crash by state standards. Record identification and description of train traffic units in the middle part of the form. Identify trains only by ownership (e.g., BN&SF or UP) and, in the Vehicle Identification Number space, place numerals or other identification for the locomotive (for the lead locomotive only, if more than one). DO NOT record driver information for train crew in the Driver Table (front of the 850B). Record all crew members or operators of the lead engine in the Passenger Table as seat type ‘31’. Record any train passengers who are injured (seat type '32'). Seat type ‘32’ would also include any other train crew members including conductors, engineers, car attendants, brakemen, etc.

RECORDING DATA

As with every form, accuracy and completeness are the most important elements. There are many users of the information, including law enforcement. The data collected impacts court proceedings, road safety improvements, targeted enforcement efforts, the driving record, vehicle safety research, crash severity studies, driver impairment legislation, driver age studies, and so on.

The Occupants & Vehicles form (850B) is structured such that an officer can capture up to two drivers and two vehicles as well as up to four passengers. This allocation represents approximately 93% of the crashes in Kansas. All data related to drivers and vehicles are captured on this form.

Note: Pedestrian and witness information are not captured on the 850B, which includes occupants of legally parked vehicles.

If a given crash involves pedestrians or more passengers than the 850B can hold, the Passengers & Pedestrians supplement (form 854) is used. **DO NOT** record drivers, pedestrians, or witnesses in the Passenger table. Record drivers in the Drivers table (top), passengers in the Passenger table (bottom), pedestrians in the Pedestrians table (854 backside), and witness information in the crash narrative (form 851).

If a commercial motor vehicle, other vehicles with a GVW/GVWR over 10,000 lbs., or a placard able amount of hazardous materials are involved, one should complete the Heavy Vehicle / Hazmat supplement (form 852). The federal completion requirements are located on the back of the form.

CODING ORDER

Traffic units are to be numbered according to type and then involvement. The priority of types are: Motor vehicles in-transport, other transport vehicles, PED types, non-contact traffic units (listed as unit N##), and legally parked vehicles (listed as unit X##). This numbering format is not concerned with fault, but rather consistency of structure. Fault should be indicated at the conclusion of the investigation and reflected in the Contributing Circumstances and Violations sections of the 850B. Some, by agency policy, record the striking or "at fault" vehicle first, which is a good practice but not mandatory. Always record the traffic unit number per unit or person, and verify the correct people are associated with the proper vehicle.

ADDITIONAL 850B FORMS

Add an 850B form for more than 2 (4, 6, 8, etc.) traffic units. If there are more passengers than the required amount of 850B forms hold, add a Passenger Supplement (854). Do NOT use the Passenger Supplement until all the passenger lines are used on the 850B form(s).

Example: A crash has 3 vehicles and 11 occupants…
850B #1 TU1 – van with 1 driver and 6 passengers
850B #1&2 TU2 – car with 1 driver and 1 passenger
850B #2 TU3 – car with 1 driver and 1 passenger

The first 850B captures TU1 and TU2 drivers and 4 out of 6 passengers from TU1. The second 850B captures the TU3 driver, the remaining 3 passengers from TU1 and TU2, as well as the passenger from TU3. Please list the passengers in TU order. When additional pages are needed, always use the traffic unit section for drivers and vehicles on the left before using the right side. **DO NOT** repeat any traffic unit numbers.

VIOLATIONS CHARGED; CITATION NUMBER: Identify each citation issued by the traffic unit type (D or P), the traffic unit number, the violation charged (by state statute code or description), and the citation document number. Please use the **state statute**. If no state statue is relevant, use the applicable Standard Traffic Ordinance value. If the drivers on an 850B form exceed four citations, mark the checkbox, and list the remaining citations on the narrative form (851). The citation data on the crash form is captured for the convenience of those who use the forms: law enforcement, insurance companies, courts, etc. This is not a requirement by KDOT.

CONTRIBUTING CIRCUMSTANCES (CCs): Contributing circumstances can be recorded on any 850B form. All applicable contributing circumstance codes are required to be coded per driver and pedestrian even if it is '00' (No driver CC evident) or '99' (unknown). Capturing contributing circumstance information is **crucial** to traffic safety. It is the main element relied upon to assess the cause(s) of crashes stated in Kansas Statute 8-1612. Improper coding or a lack of coding can significantly hinder traffic safety efforts.

Example: If an intersection has many crashes related to "failure to yield…" and officers record this contributing circumstance on the crash forms, countermeasures can be implemented to address the problem. If the CC is not recorded, the problem is not identified or substantiated, and appropriate improvements might not be made. Grant money is directly tied to proving a problem exists; no data, no problem.

It is important that law enforcement record CCs whenever known. Record as many per crash as apply. Use the codes shown on the Crash Code Sheet (form 855).

Note: Inattention should not be used as a default value, but rather used as a secondary code along with codes such as "Failure to Yield" or "Distraction: Mobile (cell) Phone."

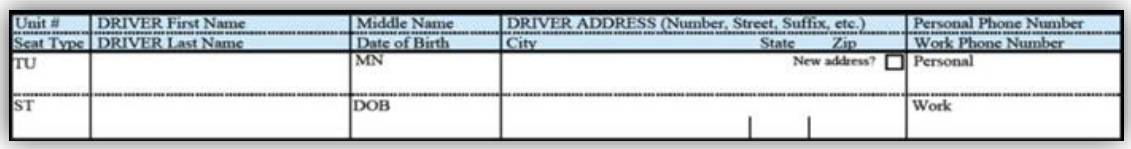
Record the CC type ('D, 'P', 'V', 'E', 'OR', 'AR'), the traffic unit number for 'D', 'P', or 'V' types, and then the applicable code. **TYPE/UNIT**(D1) and **SPECIFIC CODE** (02) Equals (D1) Driver1–(02) Under the influence of Alcohol.

IMPORTANT:

- **Code all CC that apply per crash; If no contributing circumstances are known, code '99'. Contributing Circumstances are required to be coded for all crash reports.**
- **Contributing circumstances should reflect probable causes indicated by the evidence available to the recording officer (verbal or physical). They should not reflect mere speculation.**
- **Do NOT code "driver" contributing circumstances for a traffic unit that is "driverless". Vehicle CCs ('14' or '15') may be more appropriate.**

850B

DRIVERS TABLE



Information concerning drivers is captured on the 850B on the front page. The Drivers Table located towards the top is for **drivers only**. DO NOT record passengers, pedestrians, or witnesses in this table including occupants of legally parked vehicles. If a vehicle is driverless, DO NOT record the owner or any other person in the driver fields.

NOTE: The following fields require a value where information is unknown: TU, ST, Last Name (Unknown), DOB (99/99/9999), Gender, Age, SE Used, Eject/Trapped, and Injury Severity.

TRAFFIC UNIT (TU) **NUMBER:** Record each traffic unit number starting with 01. Record TU numbers in order as much as possible. Place an '**X##**' in the unit box for legally parked vehicles and '**N##**' for non-contact vehicles followed by their unit number. Never repeat unit numbers regardless of the type of unit. Record 'X' and 'N' units last. Make sure the traffic unit numbers in the drivers table, other driver fields, passenger table, and vehicle information are assigned correctly.

SEAT TYPE (Drivers): For occupants of vehicles, the term "seat type" equates to a person's position in relationship to a vehicle. **The seat type will always be '01' in the Drivers Table**.

When traveling on the roadway and not in a "working vehicle" situation, drivers of tractors, snow plows, road graders, street sweepers, etc. should be coded as seat type '01.' For drivers in seat position '03' (shotgun), record them as '01'. **Example:** a mail carrier with a right-hand steering wheel. All other occupant seat types are recorded in the Passenger Table including drivers of trains ('31') and towed vehicles ('30').

Important: If a driver dies in one crash and their vehicle is involved in another, they are only recorded as "fatal" in the first crash and not recorded on the 850B in the next, but rather in narrative. Their vehicle is considered "driverless" in a subsequent crash.

IDENTIFICATION OF PERSONS: On the 850B, it is only necessary to record personal information one time. **Example:** If the driver and owner are the same, only record the information in the Drivers Table. Record "Same" in the Owner Last Name field. Record personal information as completely as possible.

DRIVER NAME: Transcribe the driver's full name exactly as shown on the driver's license. Record all drivers involved in the crash. If the name is unknown, type unknown in the Last Name field and leave the other name fields blank.

"Working vehicle" operators are not recorded in the Drivers Table. Record their information on the Ped form (854). Further, do not record train operators' (crew) in the Drivers Table. Record their information in the Passengers Table. For driverless vehicles, do not record driver information in the Drivers Table, but rather record the owner information on the back of the 850B or witness information on the 851. For autonomous vehicle crashes, record the person who is in the driver seat position as the driver. If a person is not in the driver's seat, code as a driverless vehicle.

DATE OF BIRTH Record the date of birth in MM/DD/YYYY format. This is a mandatory field. If the DOB is unknown, record '99/99/9999'. The date of birth field is important for identification purposes.

DRIVER ADDRESS (Number, Street, Suffix, etc.)	Personal Phone Number	Gender	SE Used	Inj Severity	Transpt Unit
City State Zip	Work Phone Number	Age	Eject/Trap	Eject Path	Extrication?
New address? ☐	Personal				
	Work				☐

DRIVER ADDRESS Transcribe the driver's address as shown on the driver's license unless it is incorrect. Check the "New address?" checkbox if their current address is different from the license. Enter the street address with the apartment number if any, or the rural route number, and the city, state, and zip code. Record addresses of unlicensed persons or pedestrians as completely as possible.

GENDER Record gender as stated on the driver's license or other legal forms. If the gender is unknown, record a 'U'. Valid codes are: 'M', 'F', and 'U'.

AGE Record the age for all vehicle occupants, pedestrian types, train crew, and injured train passengers.

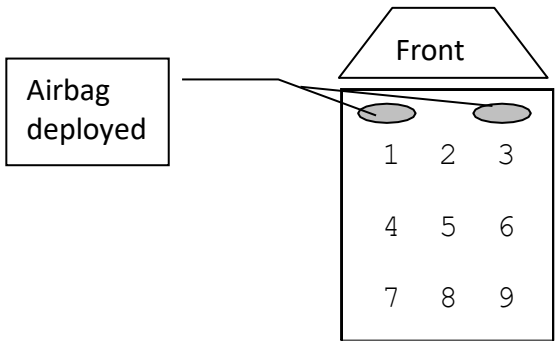
Valid Age codes are:
- NN – Birth to 24 hours
- NB – 1 to 6 days old
- BB – 7 days to 364 days old
- 01-98 – exact age in years
- 99 – Ninety-nine years old and older
- 00 - Unknown

SAFETY EQUIPMENT USE This is a mandatory field for all drivers, passengers, and pedestrians. **Do NOT use 'Y' meaning Yes**. If the Safety Equipment is not known, record a 'U'. All Safety Equipment codes are shown on the code sheet (form 855). *See page 53 for full description of child safety seats and applicable laws.*

SAFETY EQUIPMENT USE

S	Shoulder & Lap belt
X	Shoulder belt only
L	Lap belt only
I	Infant seat/restraint system (rear facing)
C	Child seat/restraint system (front facing)
T	"Booster" seat/restraint system (see manual)
P	Airbag deployed only (Passive system)
R	Airbag deployed - Shoulder & Lap belt
J	Airbag deployed - Shoulder belt only
W	Airbag deployed - Lap belt only
F	Airbag deployed - Infant seat (rear facing)
D	Airbag deployed - Child seat (front facing)
K	Airbag deployed - "Booster" seat
B	Both Motorcyclist helmet & eye protection
E	Motorcyclist eye protection
H	Motorcyclist helmet
Q	Pedestrian helmet or protective pads
V	Reflective clothing
N	None used
U	Unknown

Airbag Codes: Use the 'Airbag' codes that affect only the seat position (if occupied) that applies to the airbag's deployment.



In the example, the only occupants requiring airbag codes would be the driver (1) and "shotgun" position (3).

If a side airbag deployed for another seat position, code it accordingly.

Another Example: If an occupant is riding in the back seat of a car on the left side (seat type '04') at the time of the crash, and they were wearing their seat belt and an airbag deployed directly affecting their seat position, code an 'R' for that occupant.

Motorcyclists Codes: Record helmets (H), eye protection (E), or Both (B) as they apply to occupants of motorcycles, mopeds, and ATVs. Do NOT use these safety equipment codes for other vehicle body types or pedestrians even if these protection types are used.

EJECTED/TRAPPED: For occupants inside motor vehicles, record the ejected/trapped code, as well as for pedestrian types '24'-'26' as they apply. If the individual was not ejected or trapped, code 'N'. "Trapped" means they had to be extricated from inside the vehicle. If partially ejected and trapped, mark Partially Ejected ('P') and the Ejection Path. Note: Use code 'N' for motorcycle / motor scooter occupants, as the "ejected" and "trapped" definitions do **not** include two-wheeled motor vehicle body types. However, ATVs with three or more wheels are included.

INJURY SEVERITY: Record injury severity for all vehicle occupants, pedestrian types, train crew, and injured train passengers.

INJURY SEVERITY	
N No Apparent Injury	
P Possible injury (complaint of pain)	
I Suspected Minor Injury	
D Suspected Serious Injury	
F Fatal injury	U Unknown

N - No Apparent Injury: No apparent injury is a situation where there is no reason to believe that the person received any bodily harm from the motor vehicle crash. There is no physical evidence of injury and the person does not report any change in normal function.

P - Possible Injury: A possible injury is any injury reported or claimed which is not a fatal, suspected serious, or suspected minor injury. Examples include momentary loss of consciousness, claim of injury, limping, or complaint of pain or nausea. Possible injuries are those that are reported by the person or are indicated by his/her behavior, but no wounds or injuries are readily evident.

I - Suspected Minor Injury: A minor injury is any injury that is evident at the scene of the crash, other than fatal or serious injuries. Examples include lump on the head, abrasions, bruises, minor lacerations (cuts on the skin surface with minimal bleeding and no exposure of deeper tissue/muscle).

D - Suspected Serious Injury: A suspected serious injury is any injury other than fatal which results in one or more of the following:

- Severe laceration resulting in exposure of underlying tissues/muscle/organs or resulting in significant loss of blood
- Broken or distorted extremity (arm or leg)
- Crush injuries
- Suspected skull, chest or abdominal injury other than bruises or minor lacerations
- Significant burns (second and third degree burns over 10% or more of the body)
- Unconsciousness when taken from the crash scene
- Paralysis (loss of the ability to move or feel in part or most of the body)

F - Fatal: A fatal injury is any injury that results in death to a person within 30 days after the crash in which the injury occurred. (See page 89 for more information on fatality coding)

U - Unknown

EJECT PATH: Record the code below that best depicts the occupant path as they were ejected from the vehicle. This coding is mandatory for every occupant of a vehicle who is fully or partially ejected.

EJECTION PATH	
01 Side door	06 Roof - sunroof/convertible top down)
02 Side window	07 Roof - convertible top up
03 Windshield	08 Other path (pickup bed)
04 Back window	99 Unknown
05 Back door/Tailgate	

EXTRICATION: Mark the extrication checkbox if an occupant was trapped inside a vehicle and had to be extricated from it. To be "extricated" is to be freed or disentangled from inside a motor vehicle.

Example:

Having my foot released from the spokes of the front wheel of my bicycle would NOT be considered extrication.

Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
M	N	D	A
25	T		X
			☐

TRANSPORTING UNIT CODE This code is to be used ONLY when a person is transported to a medical facility for treatment (even if the person dies on the way or at the facility). Do not use for deceased victims at the scene transported to a morgue. Record this information in the narrative.

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Use letters 'A'-'N' in sequential order in the Transport Unit field at the bottom of the 850B (or 854) form. Then label the Transport Unit for each victim using the corresponding letter. The letter designation applies to each vehicle (unit), not the transport company. If more than one person was transferred to the hospital in the same unit, use the same Transport Unit letter for both. Additional Transport Units can be shown on the Passenger Supplement (form 854) as necessary.

Transport Units can include non-EMS vehicles where the unit is transporting a patient to a medical facility. If transportation is provided for someone to take them somewhere other than a hospital, record this on the Crash Narrative form (851) if needed for documentation purposes.

TIME EMS NOTIFIED, ARRIVED ON SCENE, AND ARRIVED AT HOSPITAL (bottom of the 850B form)

Where possible, record the time you requested Emergency Medical Services (EMS) along with when they arrived on scene and at the hospital. These data are mandatory for fatal crashes. (Follow up with EMS personnel to collect this information)

INJURED TAKEN BY: Identify the EMS transporters including non-EMS units. Include all resources used for emergency transportation of the injured to a medical facility.

INJURED TAKEN TO: Identify the hospital (medical facility) destination for each of the transporters. If the injured are not taken to a medical care facility, do not complete this field. Use the narrative where appropriate.

850B

DL State	Driver's License Number	DL Class	Driving for Employer? ☐	CDL? ☐

DRIVER'S LICENSE STATE Record the two letter abbreviation of the state issuing the license. For Indian Nations, code 'OT' (other jurisdiction). See State Abbreviations on page 87 for Canadian provinces and Mexican states.

DRIVER'S LICENSE NUMBER Record the number as shown on the driver's license. If the driver claims to be licensed but cannot present the license and you are unable find it by other means, leave the field blank. If through a search, a license number, ID number, or a computer generated number is found, record it. If the DL is an identification number (not a DL license), record 'ID' in the DL Class field. **Please do not record the Social Security Number in this field**, as the crash forms are considered an "Open Record,".

DRIVER'S LICENSE CLASS The classification of a driver's license is determined by the Kansas Department of Revenue. The codes for Kansas licenses are listed below. The codes 'A', 'B', and 'C' are used for both commercial and non-commercial drivers. Licenses from other states can have different code values. Further, the Class codes may be combined to show multiple privileges (CMP – auto, motorcycle, permit). Simply record the classification show on the license. If the DL Number field contains a number, the DL Class field must contain a value even if it is U – Unknown.

NON-DL; IDENTIFICATION NUMBER

ID - If the person is not licensed to drive but has an ID number issued by the state, record the number in the Driver's License Number field and then record '**ID**' in the DL Class field.

PERMITS

P - Add a '**P**' to the DL class for driving permits (e.g. 'CP'). According to the Department of Revenue, a permit is a valid license for the person to operate a vehicle within the restrictions allowed by the permit. **DL Comply** should equal **07** – **Restricted**. For example, a person can have a valid Class C driver's license and a CDL permit. In this case you would record '**CP**' for the DL Class. The person can drive under the class C as usual, but then only operate CMV under the restrictions of the permit.

COMMERCIAL DL

A - For operators of any combination of vehicles with a GVW/GCWR of 26,001 pounds or more, providing the GVWR of the vehicles being towed is in excess of 10,000 pounds and all other lawful combinations of vehicles with a GVW/GCWR of 26,001 pounds or more.

B - Motor vehicles which include any single vehicle with a GVW/GVWR of 26,001 pounds or more, or any such vehicle towing a vehicle not in excess of 10,000 pounds GVWR qualifies for class 'C'.

C - Motor Vehicles include any single vehicle less than 26,001 pounds GVWR, or any such vehicle towing a vehicle not in excess of 10,000 pounds GVWR, provided the GCWR of the combination is less than 26,001 comprising:

a. Vehicles designed to transport sixteen or more passengers (including driver); or
b. Vehicles used in the transportation of hazardous materials which require a placarded.

NON-COMMERCIAL DL

A - For operators of any combination of vehicles with a GCWR of 26,001 pounds or more, providing the GVWR of the vehicles being towed is in excess of 10,000 pounds; except that Class A does not include a combination of vehicles that has a truck registered as a farm-truck under subsection (2) of K.S.A. 8-143, and amendments thereto.

B - Motor vehicles which include any single vehicle with a GVWR of 26,001 pounds or more, or any such vehicle towing a vehicle not in excess of 10,000 pounds GVWR. Class B motor vehicles do not include a single vehicle registered as a truck registered as a farm-truck under subsection (2) of K.S.A. 8-143, and amendments thereto, when such farm-truck has a GVWR of 26,001 pounds or more, or any fire truck operated by a volunteer fire department.

C - Motor Vehicles include any single vehicle less than 26,001 pounds GVWR, or any such vehicle towing a vehicle not in excess of 10,000 pounds GVWR, or any vehicle with less than a 26,0001 pound GVWR towing a vehicle in excess of 10,000 pounds GVWR, provided the combination is less than 26,001 pounds, or any single vehicle registered as a farm truck under subsection (2) of K.S.A. 8-143, and amendments thereto, when such farm-truck has a GVWR of 26001 pounds or more.

M - Motor vehicles which include motorcycles

U - If the Class is unknown, code 'U'.

COMMERCIAL VEHICLE DRIVER Drivers of commercial motor vehicles used for the transportation of goods, property or people in interstate or intrastate commerce:

Inclusions:

- Motor vehicles providing transportation of goods, property, or people for compensation (for- hire)
- Privately-owned motor vehicles providing transportation of privately-owned goods or property in furtherance of a business enterprise.
- Privately-owned motor vehicles providing passenger transportation in furtherance of a business enterprise.

Examples:

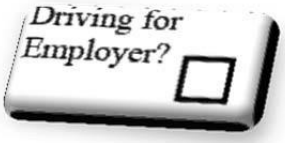
1. A trucking company hauling a manufacturing company's goods for a fee.
2. A motor coach transporting passengers within and between cities and towns.
3. A truck or truck tractor owned by an individual truck driver used to carry goods or property under contract.
4. An airport shuttle bus service paid to transport persons to hotels and other businesses.
5. A manufacturing company hauling its own products to retail stores.
6. A retail store delivering products to its buyers.
7. A business engaged in the transportation of students to and from school and school-related activities.
8. An agricultural farm hauling its produce to market.
9. A taxi or limousine service transporting passengers for a fee.

Exclusions:

- Persons providing private transportation of personal property or people.

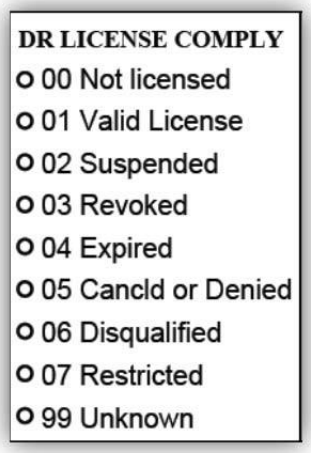
Examples:

1. A non-commercial horse rancher transporting hay bales from his pasture on one side of the road to his stables on the other side in a medium truck.
2. Homeowner carrying recyclables to a drop-off point in a personally owned pickup truck greater than 10,000 lbs.
3. Large family of 10 persons taking a trip in the family's 12-person van.



DRIVING FOR EMPLOYER? This applies to commercial motor vehicle drivers who are driving for their employer at the time of the crash.

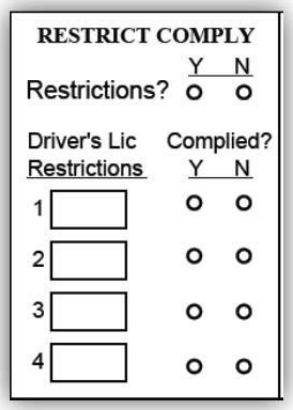
CDL? If the driver's license reflects a **C**ommercial **D**river's **L**icense, mark the checkbox (regardless of the driver's current activity). Leave blank if it is not a commercial license.



DR. LICENSE COMPLIANCE Record one code which describes the driver's license status. The DL status is determined by a driver's compliance with various laws and / or for the type of vehicle driven at the time of crash.

One law may indicate that a driver in violation will have their licensed suspended for "x" amount of time. While another law may say Revoked, Denied, Restricted and so on. The state Department of Revenue maintains the driving records and is the source for the status of the license.

If a driver is operating a vehicle (i.e. motorcycle or commercial vehicle) but is not licensed to do so, record '00' Not Licensed in this case, though they have a valid license, but not for the vehicle they are driving.



RESTRICTIONS COMPLIANCE If the "**Restrictions?**" area equals No (N), leave the **Drivers Lic Restrictions** fields blank. If "**Restrictions?**" equals Yes (Y), at least one **Drivers Lic Restrictions** field cannot be blank. Record all driving restrictions listed on the driver's license (up to 4). For each restriction listed, select Yes (Y) if the driver compiled with the restriction or No (N) if they did not comply. If the restriction compliance is unknown, leave the "**Complied?**" area blank. The Kansas License Restrictions are listed on the back side of the code sheet (855). **For driver interlock or other restrictions not listed, use code I – Limited other**.

NOTE: There is a difference between having a Restricted License (Driver's License Compliance) and having Restrictions on a license (Restriction Compliance). Example: A restricted license like a permit, may or may not have restrictions present.

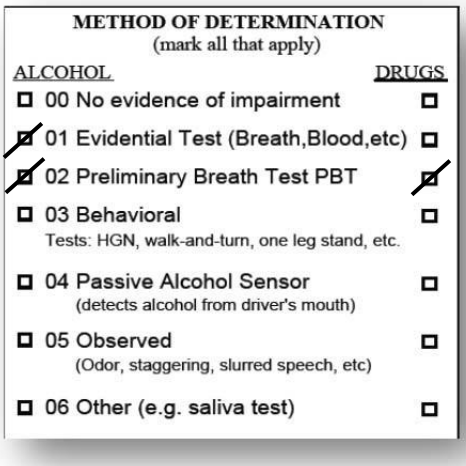
COMMERCIAL ENDORSEMENTS Enter all endorsements listed on the driver's license (up to 4). **Endorsements apply to CDL licenses only**. Do not code 'Z' (leave blank) if the driver does not have a CDL. Each endorsement qualifies the driver to handle vehicles or payload signified by the endorsement code. A person can have a CDL with no endorsements.

SUBSTANCE USE Indicate whether the substance(s) was ingested and whether it contributed to the cause of the crash. As the form says, mark all that apply. It is important to know what a driver's BAC is where there is indication of 'AP' or 'AC'. Be sure to complete the Method of Determination and Impairment Test fields as they apply even if this requires sending an amended report later. Please make sure that substance use data does not conflict with Contributing Circumstances that are coded.

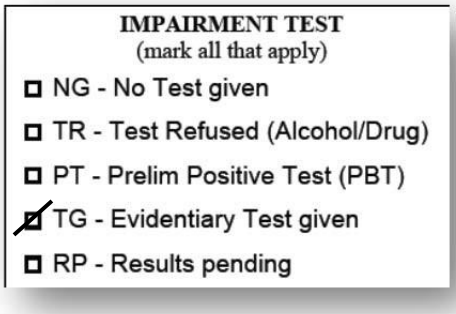
Example: If a Substance Use code of 'AC' (Alcohol Contributed) is used for Traffic Unit 1, a Contributing Circumstance of '02' is required to be coded for Driver 1 (D1 02).

METHOD OF DETERMINATION is required to be coded for each driver and pedestrian. If there is no evidence of impairment, simply choose '00' for both Alcohol and Drugs. Otherwise, mark all methods used to determine a driver's impairment for alcohol (to the left) and illegal drugs (to the right). If the outcome of the test does not reflect impairment, mark '00' as well. Ensure that this coding agrees with Driver Contributing Circumstances, Substance Use, and Impairment Tests. If unknown, leave blank.

Example: If the Driver CC = '01' (illegal drugs contributed), Method of determination, Substance Use, and Impairment tests must contain values in agreement.



DRIVER/PED IMPAIRMENT TEST If no test is given, choose 'NG'. If a test was refused, choose 'TR'. Otherwise select the test type and record the results where applicable. **Evidentiary Breath, Blood, Eye Fluid, and Other are for alcohol results only**. If results are pending, submit an amended report indicating the final test results. **BAC reporting is very important** to all levels of government (including law enforcement).



DRUG/MEDICATION INVOLVMENT

When drugs are suspected to be a contributing factor in a crash, record whether a drug screen was given and whether it was positive ('P') or negative ('N'). Record all drug result values and the type/names of the drugs on the KDOT 851 narrative form. If the crash is fatal, send any additional supporting documentation with the crash for federal reporting such as coroners reports.

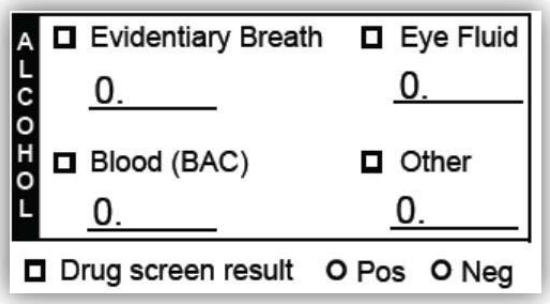
Special Note: In the event that there is an impaired pedestrian not directly impacted by the collision and you want to record their intoxication, list them in the narrative along with their results.

Example: Kelly Williams is drunk and stops the family truck in the roadway; he gets out and vomits. Meanwhile, his truck is struck by V2. You may want to record that Kelly appeared to be impaired by alcohol or drugs, but he is NOT considered a driver or a pedestrian in this situation…just a witness. Driver/Ped Contributing Circumstances or other impairment data are not recorded on the 850B or 854. List his information in the narrative. However, if he is harmed by the collision (outside the vehicle), record him as an impaired Ped on the 854 form.

BLOOD ALCOHOL CONTENT (BAC)

Requirements:

According to state law, a law enforcement officer shall request a BAC test if an officer believes the person was operating or attempting to operate under the influence of alcohol and drugs or a crash has resulted in serious injury or death. This information is vital for our Federal reporting and is required to be submitted as an amended report when the test are received.



- When alcohol test results are available, record those results to the 3rd decimal place (0.081).
- It is vital that all test results are recorded and submitted when known. Please submit amended (complete) reports when necessary.
- BAC data can affect whether agencies are able to obtain federal grant money for safety programs or law enforcement initiatives.
- When submitting the test kits to the KBI, be sure to submit the KBI form as complete as possible including driver designation.
- **Alcohol-related crash data is one of the most requested from the media, research groups, local, state, and federal government, etc.**

PASSENGER INFORMATION

PASSENGER TABLE: The passenger table accommodates up to four passengers per 850B form. It is best to list passengers of each traffic unit together in traffic unit number order. If a given crash involves more passengers than the 850B(s) can hold, the Passengers supplement (form 854) is used. Pedestrians are NOT to be listed in the Passenger or Driver sections, use the back of form 854 for all pedestrians involved.

NOTE: The following fields require a value where information is unknown: TU, ST, Last Name (Unknown), DOB (99/99/9999), Gender, Age, SE Used, Eject/Trapped, and Injury Severity.

Unit #	PASSENGER First Name	Middle Name	PASSENGER ADDRESS (Number, Street, Sfx, etc.)	Personal Phone Number	Gender	SE Used	Inj Severity	Transpt Unit
Seat Type	PASSENGER Last Name	Date of Birth	City State Zip	Work Phone Number	Age	Eject/Trap	Eject Path	Extrication?
TU		MN		Personal				
ST		DOB		Work				☐

To find codes and descriptions for Seat Type, Gender, Safety Equipment Use, Ejected/Trapped, Ejection Path, and Injury Severity codes, use the Crash Code Sheet (form 855).

TRAFFIC UNIT (ASSOCIATION): Identify which traffic unit each person is associated with. Record the passengers for each traffic unit together and in unit order where possible.

SEAT TYPE (Passengers): For occupants of vehicles, the term "seat type" equates to a person's position in relationship to a vehicle. DO NOT record drivers, pedestrians, or witnesses in the Passenger Table. Remember, **legally parked vehicle occupants are coded as PEDs**: **Type 25 and are shown on the Pedestrian side of the 854 form.** Review the list of seat types. **Some of the codes are different from the 2005 forms.** Record the appropriate position per passenger and vehicle type.

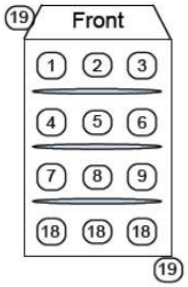
Note: Because motorcycles are vehicles, motorcycles drivers and passengers are vehicle occupants.

OCCUPANT SEAT POSITION

FRONT ROW
01 Driver
02 Center
03 Right

SECOND ROW
04 Left
05 Center
06 Right

THIRD ROW
07 Left
08 Center
09 Right



10 Motorcycle passenger

11 Extra person on driver's seat or lap

12-17 Extra person on passenger lap

18 Other seat position IN vehicle

19 Other position ON or Outside vehicle

27 Enclosed cargo area

28 Unenclosed cargo area (pickup bed, etc)

29 Sleeper section of truck cab

30 Trailing unit (auto, boat, camper)

99 Unknown position IN or On vehicle

SAFETY EQUIPMENT USE:

All Safety Equipment codes are shown on the code sheet (form 855).

Three types of child restraint seats;

1) Infant (I or F): seat faces backwards, usually for infants up to age 2.
2) Child (C or D): Seat faces forward with an internal harness system, usually for ages 2 up to at least 4 years old.
3) Booster (T or K): Seat faces forward, and does not have an internal harness system, usually for children approximately 4 to 8 years old (up to 80 lbs. or 4'9").

Important notes about safety equipment use:

The Child Passenger Safety Act (KSA 8-1343)

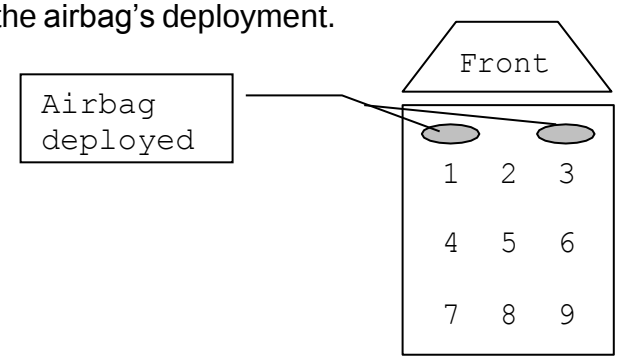
1) Requires all children under age 4 to be in a federally approved child safety seat.
2) Children ages 4 to under 8 years are to be in a federally approved child safety seat/booster seat UNLESS the child weighs more than 80 pounds OR is taller than 4' 9".
3) Children age 8 years to 14 must be protected by a booster seat or safety belt.
4) This law applies to all passenger cars designed for carrying fewer than 10 passengers

Safety Belt Use Act (KSA 8-2501)

1) Primary Enforcement: Occupants of a vehicle (carrying up to 10 passengers) age 14 to 18 can be cited for not properly using a seat belt in any seating position. Front seat occupants 18 and older can be cited for not properly using a seat belt.
2) Secondary Enforcement: Occupants 18 or older in the second or third row can be cited for not properly using a seat belt only when another citation is issued, such as a front-seat primary seat belt violation.

Commercial Seat Belt DOT.392.16/ CMV 66-1,129 82-4-3h
Safety Belt use is required in commercial motor vehicles.

Airbag Codes: Use the 'Airbag' codes that affect only the seat position (if occupied) that applies to the airbag's deployment.



In the example, the only occupants requiring airbag codes would be the driver (1) and "shotgun" position (3).

If a side airbag deployed for another seat position, code it accordingly.

Another Example: If an occupant is riding in the back seat of a car on the left side (seat type '04') at the time of the crash, and they were wearing their seat belt and an airbag deployed directly affecting their seat position, code an 'R' for that occupant.

Motorcyclists Codes: Record helmets (H), eye protection (E), or Both (B) as they apply to occupants of motorcycles, mopeds, and ATVs. Do NOT use these safety equipment codes for other vehicle body types or pedestrians even if these protection types are used.

CODING EXAMPLES FOR PASSENGERS

- A person who illegally parks his/her vehicle and enters the vehicle from the passenger side and is sliding across front seat to driver's seat when struck by another vehicle is a driver (seat type ‘01’). Likewise, if the driver is exiting (from the passenger side of the vehicle) he/she is also a driver.
- If a driver or passenger of a vehicle falls or jumps out, the person is considered an occupant (not a pedestrian). Code to seat position occupied before falling or jumping out. The traffic unit should not be coded driverless if the driver jumps or falls out.
- For **buses**, record ‘01’ for the driver and all passengers as seat type ‘18’. After filling the passenger table(s), list any remaining passengers on the Passenger Supplement (form 854).
- A skateboarder, skater, or skier attached to a motor vehicle (vehicle--pulling unit) is a seat type '19' as it is considered part of the traffic unit similar to a trailer.
- Use seat type code '26' for machine operator/rider only when such machine is being used for its intended purpose (e.g. riding lawn mower mowing on the side of the road, or a road grader moving materials on the side of the road). If such machine is traveling (not working) on the roadway, code operator as seat type code '01' (Driver).
- An occupant of a truck bed who falls out is a seat type '28.'
- Injured occupants of non-motorized wheelchairs, skateboarders, skaters, sledders, etc., should be coded as ped type '88' (Other).

PASSENGER SUPPLEMENT: The passenger tables on the 850B and 854 forms are identical. Once the 850B form(s) is full, add a Passenger Supplement to capture the remaining occupants. Be sure to assign the passengers to the right traffic unit and seat type. List in order of traffic unit where possible.

WITNESSES: Record witnesses and their statements on the Narrative form (851). Do not include them in the passenger/drivers tables on the form 850B or the 854.

Occupants & Vehicles
850B page 2

VEHICLE INFORMATION

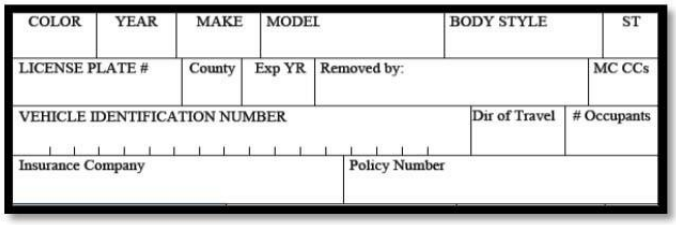
VEHICLE TRAFFIC UNIT NUMBER See Motor Vehicle Basic Terms and Qualifications on page 6 and Traffic Units on page 9.

SPECIAL DATA This special data field can be utilized by anyone completing the forms to capture additional information concerning vehicles involved.

Example: An officer notices a unique modification or marking on a vehicle and wants to record it.

VEHICLE OWNER IDENTIFICATION …is mandatory for each vehicle. If not discernable, record "unknown" in the Owner Last Name field. Enter "**SAME**" in the owner Last Name field if the owner information is the same as the driver. If the driver is a co-owner and not a young student, list "SAME." Otherwise, enter the owner's full name, phone number, and address from the registration document or by other means.

COLOR Record the National Crime Information Center (NCIC) code for the vehicle color. Do not use marketing descriptions for colors such as "Sand Drift Metallic, or Carmine Red" or other descriptive names.



Paint transferred from the striking vehicle onto another vehicle (particularly onto the "victim vehicle" struck by a hit and run vehicle) may be the only descriptive information available for the hit and run vehicle, therefore, use color information whenever possible.

YEAR (Vehicle) Record the model year as shown on the vehicle or its registration label.

MAKE Record the NCIC 4-character code. Most vehicle make codes are the first four letters of the name of the make. See page 88 for a partial list of common NCIC codes. Examples: Buic (Buick) or Toyt (Toyota).

MODEL & BODY STYLE Record the NCIC model and body style (up to 10 characters each)

REGISTRATION STATE (ST) If the License Plate is recorded, record the state abbreviation code for which the vehicle is registered (shown on the registration document or as shown on the license plate). Otherwise, leave the field blank.

LICENSE PLATE NUMBER Record the complete license plate number as shown on the tag.

COUNTY (Registration) Record the two character abbreviation shown on the vehicle license plate or registration. If a county abbreviation does not apply like a Native American Nation tag, leave it blank.

EXPIRATION YEAR Record the expiration year of the license tag as shown on the vehicle registration or license plate. If the registration does not expire, leave blank.

REMOVED BY Record who removed the vehicle from the scene either by tow or driving away (name of towing service, "owner," "friend," etc.). If the vehicle was towed because of disabling damage, be sure to **mark the Towed Away**, **Special Conditions box**.

MOTORCYCLE CCs Record the engine size in cubic centimeters. The size is often part of the model or description of a motorcycle and is marked clearly on the vehicle.

Examples: Honda 350, Suzuki 200

VEHICLE IDENTIFICATION NUMBER (VIN) Record the VIN in **upper case letters** and **smaller numbers** ($A_2C_3F_4$…) from the VIN plate on the vehicle (showing through the lower part of the windshield on most vehicles manufactured since the late 1960s). It may also be found inside the driver's side doorjamb, on the insurance card, or the vehicle registration. For railway trains, record the identification number for the lead locomotive where possible.

DIRECTION OF TRAVEL Enter direction of travel prior to the crash for each traffic unit, including and pedestrians. Valid codes are: 'N', 'S', 'E', 'W', 'NE', 'NW', 'SE', 'SW', and 'U'.

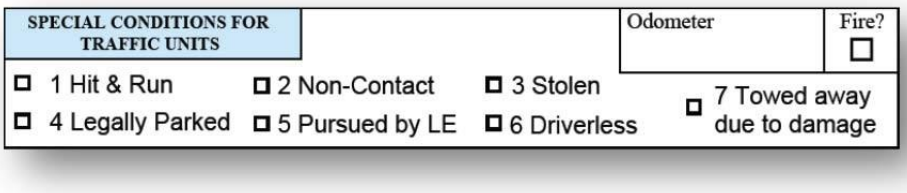
NUMBER OF OCCUPANTS IN VEHICLE Record the total number of vehicle occupants including the driver for each non-pedestrian traffic unit. If unknown and at least one was present, record 1, else 0. Do not code 99 for unknown. **Do NOT list Occupants of legally parked vehicles in the passenger table**. If they are injured, list them as pedestrians (seat type 25) on form 854 in the pedestrian table. If they were not injured, they are considered witnesses and can be listed in the Narrative (851).

INSURANCE COMPANY Enter the name of the automobile insurer (not the agent) as indicated by documentary proof or according to the driver or owner's statement. If insurance coverage is not in force (per document or statement), write "NOT INSURED."

POLICY NUMBER Record the insurance policy number, write UNKNOWN if unavailable.

ODOMETER READING Record the odometer reading to the nearest mile. Record the actual miles, if known by the owner, in cases of "odometer roll-over". **If inoperable or illegible, leave blank.**

FIRE Check the box if a fire occurred either as a first or subsequent event. To indicate "no fire", leave the box blank. Check the box if a fire breaks out in a vehicle which has been totally destroyed



or a fire breaks out but is extinguished before significant damage occurs from the fire.

SPECIAL CONDITIONS CHECK BOXES FOR VEHICLE DATA Check a maximum of 5 boxes that apply to the specific traffic unit described.

Check "**Hit & Run**" ('1') for the vehicle (driver) which left the crash scene. Also, check the hit- and-run crash checkbox at the top right on form 850A.

"**Non-contact**" ('2') Non-contact traffic units are sometimes called "phantom" vehicles or peds and are alleged to have contributed to a crash even though they were not part of the collision. They may or may not have left the scene. If non-contact is checked, an 'N' followed by the traffic unit number should appear in the traffic unit number box. List 'N'-units after regular traffic units with the next consecutive number.

"**Stolen**" ('3') applies only to the vehicle being described.

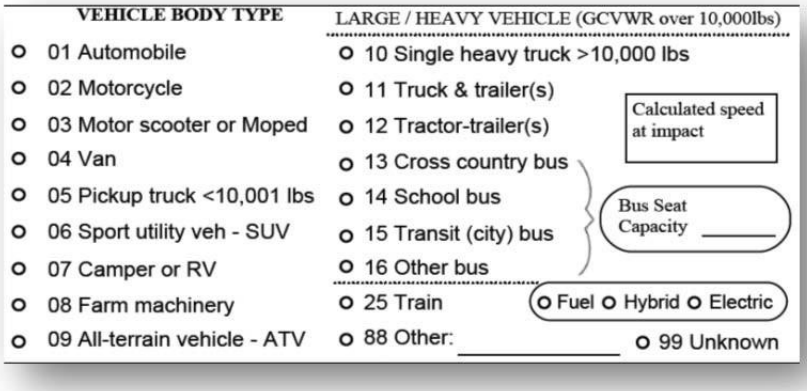
"Legally Parked" ('4') Includes legally parked vehicles designated by state or local ordinances. If "Legally Parked" is checked, an 'X##' should appear in the traffic unit number box. List 'X'-units after regular traffic units whenever possible. Do not repeat unit numbers for any type of traffic unit. Example: TU1, N2, X3. Legally parked does not include vehicles with any portion of the vehicle in the driving lanes of traffic.

"**Pursued by LE (law enforcement)**" ('5') This applies only to the vehicle being pursued in a "chase", not the law enforcement vehicle. Pursuit does not apply to a routine traffic stop.

"**Driverless**" ('6') Applies to the vehicle being described which was either in motion or illegally parked. Do NOT code driver ('DR') contributing circumstances for 'driverless' traffic units.

"Towed Away" ('7') Applies to the vehicle being towed away from the scene due to disabling damage from the crash. Do not mark this box if the vehicle was not towed or towed for other reasons. Be sure to indicate who towed the vehicle in the Removed by field.

VEHICLE BODY TYPE
Record one code per vehicle.



Automobile (car)
Includes all passenger vehicles not on a truck frame. El Caminos & Rancheros should be coded '01' (automobile). Automobiles could be used as a "school bus" – if so, be sure to code the Vehicle Use as '03' (school bus).

Motorcycles Include two and three wheeled motorcycles where the engine CCs are greater than 50.

Mopeds, Motor scooters, etc. Use code '03' for engine sizes less than 50cc. **Other Examples:** minibike, "pocket" motorcycles.

Van Full size passenger vans, mini vans, but not larger vans such as a furniture delivery van.

Pickup Truck Vehicles under 10,001 pounds with a truck frame generally made to carry a small to medium size payload. A pickup truck with dual wheels (four tires on one axle) should be coded '05' unless the GVW is 10,001 lbs or greater. No truck supplement report is required for an '05' code. A single truck over 10,000 lbs with a minimum of two axles and 6 tires is a code '10' and a Truck-Bus Supplement (852) may be required. If a pickup-trailer combination is over 10,000 lbs, record code '11.'

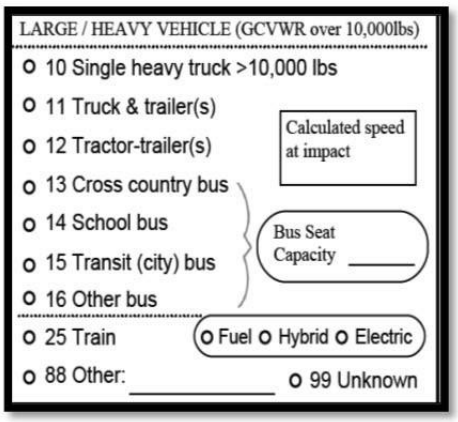
Sport Utility Vehicle Use code '06' for Santa Fe, Highlander, Jeeps, Tahoe, Explorers etc. (enclosed vehicles that normally have a higher road clearance for off-road use).

Recreational Vehicles Vehicle body type '07' includes personal use motorized campers, recreational vehicles, and buses or truck-trailer combinations converted into an RV; it does not include camping trailers that are towed or any RV configuration used commercial business (like a band).

Farm Machinery Vehicles such as tractors, combines, sprayers, swath / windrower, etc. This would NOT include grain trucks, as they would be considered a body type of '10'-'12'.

All Terrain Vehicle – ATV Use code '09' only for all-terrain vehicles which are used mainly as recreation vehicles; include 3-wheelers, 4-wheelers, and dune buggies.

LARGE / HEAVY VEHICLES (GVW/GCWR OVER 10,000 POUNDS):



Single Heavy Truck (10) – having no trailer attached; can have 3 or more axles or more than 6 tires. See "Vehicle Configuration" chart on the back of the 852 "Heavy Vehicle/Hazmat Supplement" form Codes '02' and '03'. Single Truck includes buses converted into an RV with less than 9 seats and used for commercial business (not personal) and a bobtail semi.

Truck and Trailer (11) A single –unit truck pulling a trailer. See "Vehicle Configuration" chart on the back of the 852 "Heavy Vehicle/Hazmat Supplement" form Code '04'. Truck and Trailer includes truck-trailer combinations converted into an RV **and** used for commercial business (not personal).

Tractor-Trailer(s) (12) or Tractor/Semi Trailer consists of a truck tractor (bobtail; see Vehicle Configuration Code 05) and/or one or more attached trailers. See "Vehicle Configuration" chart on the back of the 852 "Heavy Vehicle/Hazmat Supplement" form Codes '06', '07', and '08'.

Cross Country Bus (13) A large bus that has 16 or more seats, usually used for intrastate or interstate travel, such as a Greyhound Bus. See "Vehicle Configuration" chart on the back of the 852 "Heavy Vehicle/Hazmat Supplement" form Code '01'.

School Bus (14) A conveyance vehicle to normally transport passengers to and from K through 12 school or a school associated function. Usually has 9 or more seats (including the driver). See "Vehicle Configuration" chart on the back of the 852 "Heavy Vehicle/Hazmat Supplement" form Code '00' and '01'.

Transit Bus (15) A bus that has 16 or more seats. Usually a "city" bus conveying passengers to various places in a larger city. See "Vehicle Configuration" chart on the back of the 852 "Heavy Vehicle/Hazmat Supplement" form Code '01'.

Other Bus (16) A conveyance vehicle that has 9 or more seats (including the driver) that would not fit the other "bus" types. Other bus includes buses converted into an RV with more than 8 seats **and** used for commercial business (not personal).

Train (25) A motor vehicle that rides on rails. This would include a truck that is able to ride on the rails, that also can be driven on a roadway using tires, or other single unit testing vehicles used by the railway companies to check rail tracks.
Note: The code **"Emergency Vehicle"** ('77') has been eliminated. Record the body type that best describes the vehicle, and then record what the Vehicle Use was at the time of the crash.

Other If "other" ('88') is coded, specify type (a riding lawn mower, golf cart, etc.). Tractors, street sweepers, sanding trucks, snowplows, road graders and other construction equipment, when in the roadway, are traffic units with a body type of '88' ("other") with a seat type of '01'.

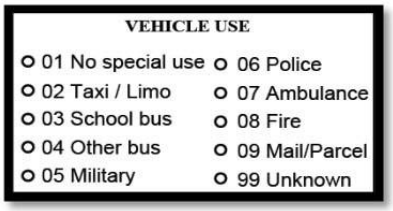
CALCULATED SPEED If a trained person is reconstructing a crash event and calculates the minimum speed of a vehicle before impact, please record the value. This is strongly encouraged for fatal crashes.

BUS CAPACITY Record the seat capacity for any vehicle body type used as a bus. Submit a Heavy Vehicle / Hazmat Supplement (852) if the bus seat capacity is 9 or more, and the other form 852 requirements are met.

POWER SOURCE

Fuel ('F'): Gasoline, Ethanol, Diesel, etc.
Electric ('E'): Generally runs on battery power only
Hybrid ('H'): Uses both fuel and electricity

VEHICLE USE Required. Record how the vehicle was used at the time of the crash. Record '01'- No Special Use, if the other codes do not apply. 03-School bus applies to grades K through 12 only.

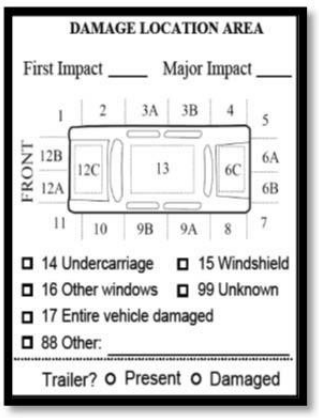


Examples:

- If an individual is a volunteer fireman and uses their pickup truck to respond to an emergency call, record '08' (Fire) for the Vehicle Use if they are involved in a crash.
- If a School bus is driven to the shop for repairs (not carrying passengers), record '01' (No Special Use).
- Use '06' where law enforcement is on patrol or responding to a call.

VEHICLE DAMAGE Record one code for the vehicle damage. The following definitions are from the Manual on Classification of Motor Vehicle Crashes. Record 00-None if the vehicle is not damaged and remember that towed units (trailers, etc.) are considered part of the traffic unit.

- **Minor** ('01'): Minor damage is harm to property that reduces its monetary value.
- **Functional** ('02'): Functional damage is any damage, other than disabling, which affects operation of the vehicle or its parts.
- **Disabling** ('03'): Disabling damage prevents departure of the vehicle from the scene of the crash in its usual operating manner by daylight after simple repairs.
- **Destroyed** ('04'): Salvage is not possible or reasonable. Excludes damage which may not be feasible for economic reasons only.
- **'88' – Other and '99' - Unknown**



DAMAGE LOCATION AREA There are four separate coding opportunities in this section: First (initial) Impact, Major (Principal) Impact, Vehicle Damage Locations, and whether a Trailer was Present ('P') or Damaged ('D').

First (initial) Impact…is required. It signifies the location of the vehicle where the first harm/impact occurred. Record the number value (01-14, 88, 99) most appropriate to the evidence at the scene; do NOT record the trailing letters (i.e. 3A, 6B, etc). Record 88 where there is no impact.

Major (principal) Impact…is required. It signifies the location of the vehicle where the most harm/impact occurred. Record the number value (01-14, 88, 99) most appropriate to the evidence at the scene; do not record the letters (i.e. 3A, 6B, etc). Record 88 where there is no impact.

Vehicle Damage Locations Circle or check all damaged locations applicable for each vehicle (01-17, 88, 99). If the vehicle has a trailer, the diagram represents the combination unit not just the towing vehicle. DIAGRAMS REFLECTING DIFFERENT VEHICLE COMBINATIONS are shown on EXAMPLE 17 in the back of this manual.

Trailer Present, Damaged If a trailer was present for the given traffic unit, check the Present circle. If the trailer was damaged as a result of the crash, check the Damaged circle. For electronic reports, key a 'P' (present but undamaged) or 'D' (present and damaged).

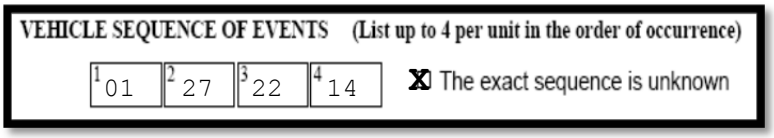
VEHICLE MANEUVER BEFORE UNSTABILIZED SITUATION Record one code for the vehicle's maneuver just prior to the unstabilized situation (loss of control, etc) in the associated traffic unit box. Example: On an icy roadway, the driver is "straight and following the road," then goes out of control (swerving, sliding) for 500 feet prior to the First Harmful Event. Code '01'. Do not code '88' – sliding.

NOTE: A legally parked vehicle is not considered "in-transport" and therefore does not have a vehicle maneuver.

VEHICLE SEQUENCE OF EVENTS

Consider that Vehicle Sequence of Events (VSEs) apply to each vehicle once the unstabilized situation begins. Notice the two sections: **"Non-collision" and "Collision With"**. For each vehicle involved in the crash, record all (up to four) VSE codes that apply in the order they occurred as they apply to that vehicle. Record VSEs for the striking vehicle and vehicles being struck. If there are more than four events applicable to a given vehicle, code what you consider the most important four. Keep in mind that codes '01'-'05' are significant from an engineering / traffic safety standpoint, as they influence potential safety improvements. Accurately recording VSEs is required for every crash report. If the events are known, but the exact sequence is not known, mark the "…exact sequence is unknown" box. Code '98' or '99' where the non-collision or collision event is unknown.

Example: (shown below) A vehicle runs off the road to the right (01) and then strikes a guardrail (27), bounces back into traffic and strikes a vehicle (22). At some point, the vehicle caught on fire (14), but when is not determined.



Multiple Hits: If V1 is struck by V2 and then by V3 and then by V4, code '22' in three boxes for V1.

Codes such as Crossed Median, Overturn, Legally Parked Vehicle, and so on require an understanding of how they are defined. What is a legally parked vehicle? (Page 9) Does Overturn apply to a motorcycle? (Page 31) What is a median? (Page 77) Keep in mind that "crossed median" is not an intentional action, does not involve a designed crossover, and does not include ramp gore areas, but rather is an event stemming from an unstabilized situation where a vehicle travels through a median area and reaches the opposing travel lanes.

NOTE: The Sequence of Events codes may not agree with the First Harmful Event description for the crash. Also, Overturn includes vehicles rotating at least a ¼ turn.

851, 852, 854

CRASH NARRATIVE FORM

Crash Narrative
KDOT Form 851 - Rev. 2019

REPORT HEADER

The fields in the header are duplicated for the purpose of matching the Narrative report (851) with all other pages of a case if they become inadvertently separated. Copy the entries from the 850A form.
INVESTIGATING OFFICER / BADGE NUMBER Enter the name and/or badge number of the officer responsible for or in charge of the crash investigation and the report.

Officer Observations Description of Events	Witness Statements Additional Information	Investigating Officer / Badge No.	Local Case No.	Page of /

PAGE OF number the pages in a way that suits your needs the best, but please submit them in the following order: the Motor Vehicle Crash Report form (850A) first. Next, the Occupants & Vehicles forms (850B). Then add the Passengers & Pedestrians forms (854), any Heavy Vehicle/Hazmat Supplement forms (852) and finally, any Narrative forms (851) used. When you know how many total pages are to be sent to the State, go back to page 1 and enter the total number of pages on each sheet after the word "of."

NARRATIVE

The Narrative Report (851) form provides for the officer's complete description of the crash and any additional notes that might be relevant to the crash. The Narrative report (851) form must be submitted to the State with the rest of the report.

Completion of the 851 form is required for all crash reports as it contains vital information. Do NOT use other agency forms to take the place of the 851.

It is important to all who review the report (including attorneys, insurance companies, etc.) that the narrative provides enough description to support the crash information recorded. Include any information that helps explain the crash and/or irregularities that may be associated with it. Make your statements brief and clear. Avoid excessive wordiness and inclusion of information which does not contribute to the facts which explain and describe the crash.

Note: Witness statements and other investigative documentation (not required by KDOT) captured on the KDOT forms must be submitted to KDOT and could be required in a court of law.

WITNESSES Record witnesses and their statements on the Narrative form (851). Do NOT list witnesses in the passenger table on the Occupants page (form 850B).

Fatality crashes require an extended narrative. Form 851 must be submitted with the 850A, 850B, and any other crash forms to KDOT.

COMMERCIAL MOTOR VEHICLES

It matters not if the vehicle is a commercial motor vehicle (CMV) or a personal use vehicle. If it meets the reportable criteria below, form 852 is required to be filled out and submitted along with the 850A and 850B forms.

852 cont'd	REPORTING CRITERIA FOR HEAVY VEHICLES AND/OR HAZARDOUS MATERIALS

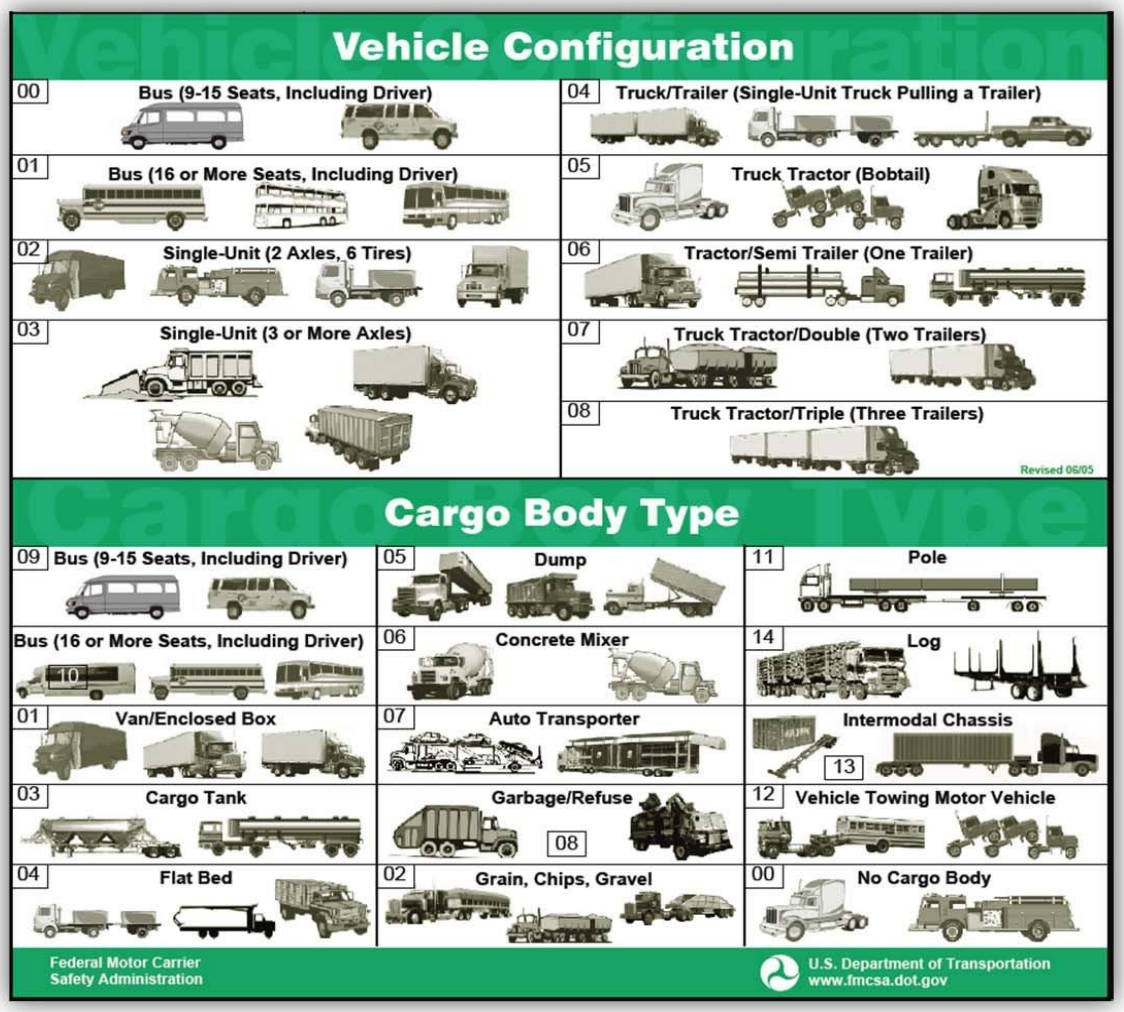
COMPLETE THIS SUPPLEMENT FOR EACH OF THE FOLLOWING VEHICLES INVOLVED WHERE AT LEAST ONE MOTOR VEHICLE IN-TRANSPORT WAS ON A TRAFFICWAY OPEN TO THE PUBLIC:

>10,000 lbs	Any truck having a gross vehicle weight rating (GVW/GVWR) of more than 10,000 pounds or a gross combination weight rating (GCWR) over 10,000 pounds used on public trafficways, OR...
BUS	Any motor vehicle with seats to transport nine (9) or more people, including the driver OR...
HAZMAT	Any vehicle, regardless of weight, carrying placardable hazardous materials or displaying a hazardous materials placard.

AND

IF THIS ACCIDENT INCLUDES:

A FATALITY:	Any person(s) killed in or outside of any vehicle (truck, bus, car, etc.) involved in the crash or who dies within 30 days of the crash as a result of an injury sustained in the crash, OR...
AN INJURY:	Any person(s) injured as a result of the crash who immediately receives medical treatment away from the crash scene, OR...
TOW-AWAY:	Any motor vehicle (truck combination, bus, car, etc.) disabled as a result of the crash and transported away from the scene by a tow truck or other vehicle.



CRASH SEVERITY

FATAL: A **fatality** is ANY person(s) killed in or outside of any vehicle involved in the crash or who dies within 30 days of the crash as a result of an injury sustained from the crash.

INJURY: See page 45 for Injury Severity definitions.

TOWED: A **tow-away** is ANY motor vehicle disabled as a result of the crash and transported away from the scene by a tow truck or other vehicle. Do NOT include vehicles that are not disabled and are towed from the scene for other reasons (i.e. driver arrested).

Disabling Damage means damage which precludes departure of a motor vehicle from the scene of the crash in its usual manner after simple repairs. A truck tractor or a single-unit truck pulling a trailer is considered one unit at the time of the crash. Therefore, if the truck tractor can drive away but the trailer is disabled, the entire truck combination should be considered disabled.

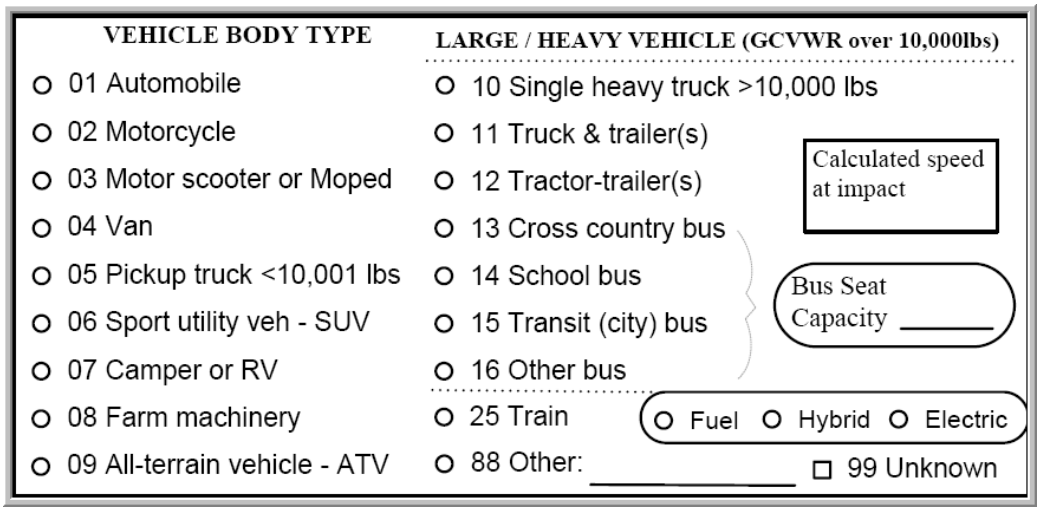
Example: A tractor semi-trailer strikes a bridge overhead structure with its trailer and the trailer is disabled and must be towed. However, the truck tractor is not damaged, and is driven off. The vehicle would still be considered "towed" due to disabling damage.

Exclusions:

- Damage which can be remedied temporarily at the scene of the crash without special tools or parts
- Tire disablement without other damage even if no spare tire is available
- Headlamp or taillight damage
- Damage to turn signals, horn, or windshield wipers which make them inoperative
- If a vehicle is driven from the scene with damage determined to be minor or functional after being assisted by another vehicle (e.g. being pulled out of a ditch for a slide off or being up-righted after), it is not considered to be towed due to disabling damage.

Important data fields for identifying Large/Hazmat vehicles.

If any of the vehicles involved have a Vehicle Body Type of 10 through 16, then a Large Vehicle/Hazmat supplement (852) must be filled out, UNLESS there is no fatality, injury requiring medical treatment away from the scene, or a vehicle towed away due to disabling damage.



POST CRASH INSPECTION CHECKBOX Check this box to indicate if a post-crash inspection CVSA Level I, II, III or V has been completed.

REPORT HEADER Selected fields in the first line are duplicated from the basic form (850A). Their purpose is to enable matching the supplemental form to the rest of the forms if they become separated.

TRAFFIC UNIT NUMBER (TU) Enter the traffic unit number for the truck or bus which corresponds to the traffic unit number on form 850B. This is especially important when more than one truck or bus in involved in the same collision.

CARRIER NAME If the large vehicle involved in the collision is a commercial vehicle then record the carrier name of the truck or bus even if the vehicle is leased, registered, or owned by another company or person. The motor carrier is the business entity, individual, partnership corporation or religious organization responsible for the transportation of the goods, property, or people. It may not be the registered owner. If driven non-commercially, record Non-Motor Carrier.

USDOT# Companies that operate commercial vehicles transporting passengers or hauling cargo in interstate commerce must be registered with the FMCSA and must have a USDOT Number. Also, commercial intrastate hazardous materials carriers who haul quantities requiring a safety permit must register for a USDOT Number. The USDOT Number serves as a unique identifier when collecting and monitoring a company's safety information acquired during audits, compliance reviews, crash investigations, and inspections. In Kansas, all registrants of commercial motor vehicles, even intrastate and non-Motor Carrier registrants, are required to obtain a USDOT Number as a necessary condition for commercial vehicle registration.

MC/MX# FMCSA operating authority is also referred to as an "MC," "FF," or "MX" number, depending on the type of authority that is granted. This number will be found in the driver's paper work and / or on the outside of the vehicle. Unlike the USDOT Number application process, a company may need to obtain multiple operating authorities to support its planned business operations. The Operating Authority dictates the type of operation a company may run, the cargo it may carry, and the geographical area in which it may legally operate.

Commercial motor vehicles are required to display:

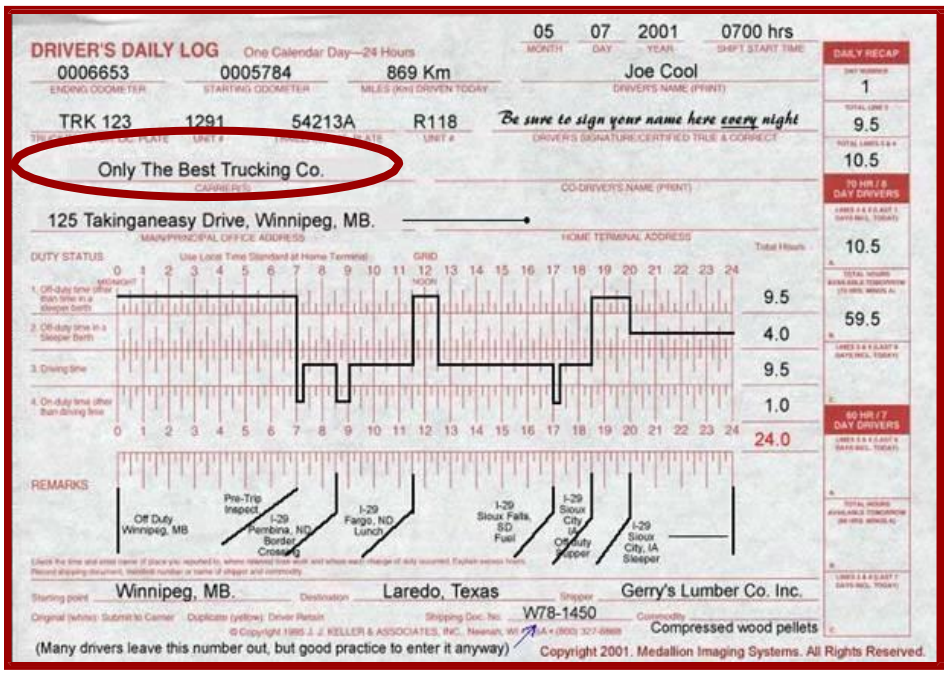
* Legal or single trade name of the CMV
* A motor carrier DOT number preceded by "USDOT" for a federal DOT number.
* If the name of any person other than the operating carrier appears...the name of the operating carrier must appear and be preceded by "Operated By"
  Note: Other identifying information may be displayed on the vehicle if it is not inconsistent with the information required.
* It does not matter if the motor carrier is for hire or a private carrier.

Most motor carriers involved in a collision can be identified by their company name and USDOT number that is on the side of the driver's truck tractor or truck, but do NOT stop investigating the DOT number as this may not be the correct carrier.

STEPS IN IDENTIFYING THE CORRECT MOTOR CARRIER

Complete a driver interview asking:

1. Is the vehicle leased or rented?
2. Who is the motor carrier responsible for this load (one carrier may responsible for the load to the destination; while another is responsible for the load on the return trip).
3. Who is directing and controlling the movement of this vehicle?
4. Where is the motor carrier's place of business?



Shipping papers or a Bus Trip Manifest can provide the name of the motor carrier responsible for the load, but not the carrier's USDOT number. Shipping papers are only required for hazardous material cargo. The driver may state that there are no shipping papers even when they may be in the vehicle. The drivers log may also be useful in identifying the carrier (shown on the next page). The USDOT number will likely not be on the log sheet.

852

If this vehicle is leased or rented the lease agreement will identify the motor carrier and their USDOT number. A short-term rental agreement for less than 30 days is required to be inside the vehicle. A carrier is required to have their name and USDOT number on the side of the vehicle within 30 days of a long-term lease. One problem that may be encountered is a carrier that extends a short-term lease agreement (by re-renting the vehicle). This is an attempt to avoid putting the carrier's name and USDOT number on the vehicle.

The vehicle registration may also be used for identifying the owner as well as the registrant. A registrant is a carrier that has a USDOT number that is used to obtain registration only. This number should not be found on the vehicle. The registrant may then lease to another carrier. If a registrant number is found on the registration, look for a lease agreement.

If internet access is available, the following site may be used to assist in identifying the carrier responsible, http://safer.fmcsa.dot.gov/companysnapshot.aspx. This site will verify a motor carrier's USDOT number, legal name, "doing business" name, physical address, and telephone number.

EXAMPLE #1:
John Smith owns his own truck tractor, operating under John Smith Trucking. He contracts with White Manufacturing to take one of its trailers loaded with its goods from New York to Los Angeles.

Q: Who is the motor carrier, John Smith of White Manufacturing?

A: John Smith is the motor carrier because he is the entity that has agreed to carry this particular load.

EXAMPLE #2:
John Smith, driving his truck tractor, utilizes a cargo broker, K&S Trucking, to obtain goods from Intermodal Inc. shipping company for his return trip back to New York.

Q: Who is the motor carrier K&S Trucking, John Smith, or Intermodal Inc.?

A: John Smith is the motor carrier because K&S transferred the responsibility of the load to John Smith.

EXAMPLE #3:
John Smith, driving his truck tractor, leases his services to Polyester Chemical Company. Polyester directs Smith to deliver a semi-trailer from New York to St. Louis.

Q: Who is the motor carrier John Smith or Polyester?

A: The lease agreement between Polyester and Mr. Smith makes Polyester the motor carrier responsible for this load.

EXAMPLE #4
John Smith is driving a tractor/semi-trailer owned and operated by ABC Trucking.

Q: Who is the motor carrier John Smith or ABC Trucking:

A: ABC Trucking is the motor carrier. John Smith is just a driver for ABC Trucking.

EXAMPLE#5:
John smith is driving a tractor owned by ABC Trucking which has been leased to XYZ Trucking. XYZ uses the tractor to pull XYZ trailers in its regular shipping service.

Q: Who is the motor carrier John Smith, ABC Trucking or XYZ Trucking?

A: In this case, XYZ is the carrier because XYZ is directing the carrying of the load.

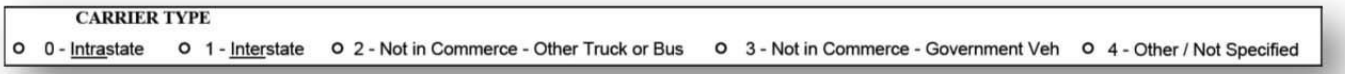
CARRIER ADDRESS/PHONE NUMBER Record the complete address of the carrier. Record the phone number for the carrier. Attempt to verify the number with the driver.

CARRIER COUNTRY Record the country the carrier is operating out of. The country of origin may be identified by the license plates of the tractor. US carriers, Canadian carriers and Mexican domiciled carriers should have their home country's plate on the tractor. This information may also be obtained during the driver interview. Mexican domiciled carriers legally allowed to be present in the US will have an "X" suffix after their USDOT designation number. If a "Z" suffix is found after the USDOT number this means the carrier is only allowed to operate in the US/Mexico border zone and should NOT be in Kansas. If there is no designated letter on a Mexican carrier they are not legally allowed to operate in the US.

If a Mexican Carrier operating in Kansas with a "Z" suffix or no authority at all, the vehicle shall immediately be placed out of service by a CVSA certified inspector under 49 CFR 392.9a. This carrier should be immediately reported to the Kansas Highway Patrol or KHP dispatch during evening or nighttime hours.

852

Canadian carriers will not have any designation letter suffix attached to their USDOT number. Also, the registration on the trailer(s) may legally display Canadian or Mexico tags.



CARRIER TYPE Record the proper Carrier Type (0-4). For the purposes of INTER and INTRA state motor carriers the origin or destination of the load is the concern.

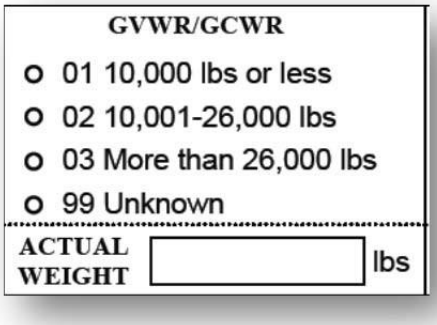
INTERSTATE carrier is a carrier engaged in commerce that is destined to or from a place in a State and a place outside such State (including a place outside the United States/International shipments)

INTRASTATE carrier is a carrier engaged in commerce, whose origin and destination are in Kansas.

Not in commerce-Government should be used for any government OWNED vehicle. (e.g. buses, Military vehicles, KDOT vehicles, Police/Fire vehicles, most EMS vehicles unless privately owned) A sub-contractor working on a highway for KDOT but not owned by KDOT should have a USDOT number and may be a INTER or INTRAstate CMV.

Not in Commerce-Other Trucks should be used for a private citizen who is not in commerce. Example: An individual in a qualifying vehicle who is moving his or her own property from one location to another. Other / Not Specified should only be used when it is undeterminable if there is a motor carrier. The possible person or carriers responsible for the load should ALL be listed in the narrative.

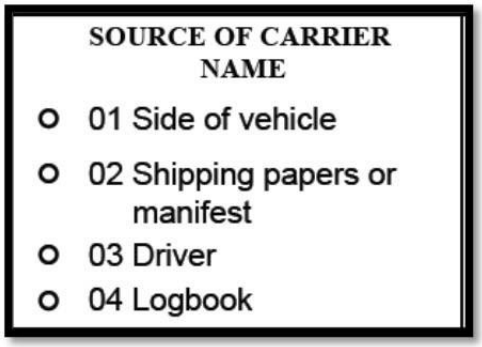
GVWR/GCWR The Gross Vehicle Weight Rating or Gross Combined Weight Rating code is a mandatory field and may be determined by the manufacture's sticker/plate for the truck or single unit. It is usually located inside the driver's door between the door and the pillar of the door. The manufacture's sticker/plate for a trailer may be located in several locations. On a Semi-Trailer it will usually be found on the front left side of the unit; another common location would be on the left side of the trailer near the frame. On smaller trailers, the plate may be located on the tongue, left or right side, and may even be located on the underside of the unit.



Determine the GCWR by adding the GVWR of the units together (this designation is in pounds and kgs; record ONLY the GVWR in **lbs.** (1 lb=0.4535924 kg)). If the GVWR of one of the units in a combination can be determined and meets the criteria for category 02 or 03, but the second GVWR in a combination cannot be determined, mark what code seems appropriate for the combination (02 or 03). For example, if the GVWR of a truck (power unit) alone has a known GVWR of 26,001 lbs, then use code 03 – More than 26,000 lbs. A second example would be a truck that has a GVWR of 8,500 lbs and is pulling a two-axel trailer that the GVWR cannot be found or determined. However, the trailer load, your training or experience indicate the trailer would clearly have a GCWR exceeding combination. So you would code either 02 or 03. Only record 99 if the GVWR, GCVW or category of the units cannot be determined.

The **Actual Weight** box is for the weight of the vehicle and the load it is carrying ONLY. This is determined based on information from a scale (KHP or otherwise) or is determined post collision by weighing the vehicles. Where the Actual Weight is not known for both the vehicle and load BUT the GVWR of the "power unit" is known and the weight of the load is known, add them together for the Actual Weight…this is closer than no weight at all. If the actual Weight cannot be determined, leave blank.

SOURCE OF CARRIER NAME Indicate where the carrier information was obtained from.



PERMITS (Issuer and Permit) Record any applicable permit numbers found on the left line and type of permit and state in the right line. These may include oversize or overweight permits issued by KS or another jurisdiction, MC numbers, and temporary registration permits.

VEHICLE INFORMATION

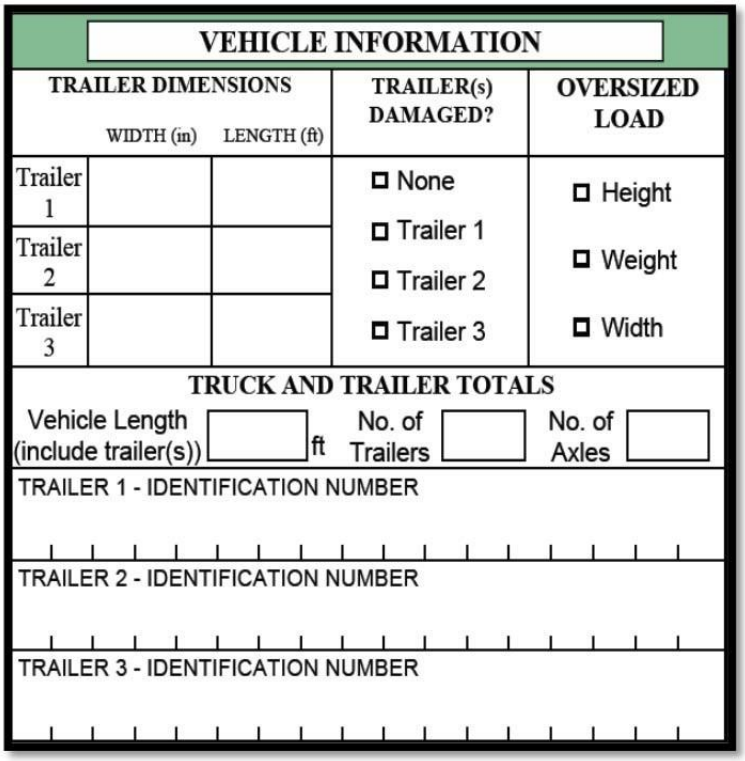
Trailer Dimensions Record the width in inches. Record the length of the units in combination (Truck-Trailer(s) length when coupled together) in feet. Use 99 for unknown.

Trailer Damage Mark the proper checkbox for each trailer damaged. If no trailer damage exists, choose none.

Truck and Trailer Totals Record the total length (Feet) of the vehicle including trailers in the first box. Record the total number of trailers towed. And, record the total number of axles for both the towing unit and the trailers. If these values cannot be discovered, leave blank.

Oversized Load Check any applicable oversize indicator for Height, Weight or Width.

Trailer Identification Numbers (TIN) Record the trailer identification number(s).

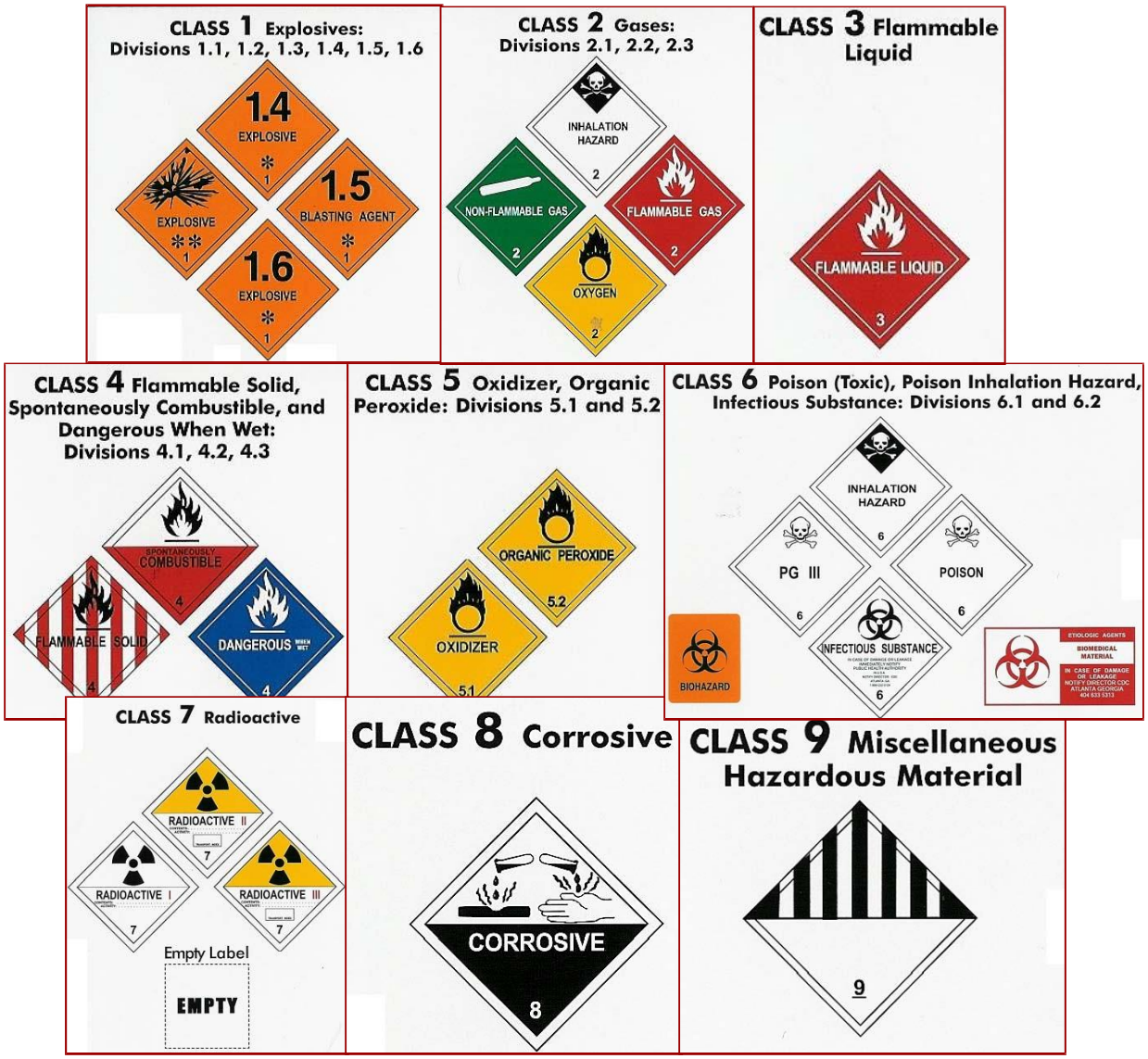


852

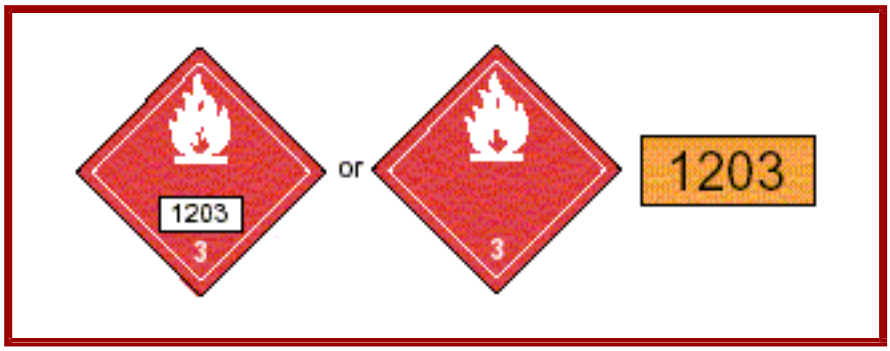
HAZMAT/ROADWAY INFORMATION Indicate whether or not the vehicle had a placard. A placard is the diamond shaped point on point fixture, comprised of various colors, which should be located on all four sides of a vehicle which is carrying placarded hazardous materials. There are nine classes of Hazardous materials.

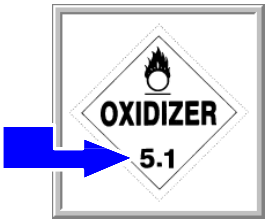
Since there is only room on the report to record one hazardous material, record Class 1 hazardous materials over Class 2 hazardous materials. If more than one hazardous material on Class 2 then record the information for the highest quantity of hazardous material transported.

PLACARD EXAMPLES



If the vehicle does have a placard then indicate the hazardous material's 4-digit ID number in the space provided. The ID number may be found in the center of the placard. It may also be found on an orange panel or white square-on-point configuration adjacent to the placard.





The “Class” number is located at the bottom of the hazardous material placard and is critical for identifying and studying the various types of hazardous materials involved in traffic crashes. This number may be a single number or a two digit code with a decimal in the middle. The “Class” number should also be available on the required shipping papers.

Indicate whether or not there was a hazardous materials release. Fuel or oil carried by the vehicle for its own use is NOT considered cargo and should not be reported in this section. Any material other than fuel or oil carried by the vehicle for its own use should be considered cargo.

ON ROAD LANE TYPE Record the code which best describes the lane type for the road on which the crash occurred.

VEHICLE ACCESS CONTROL TO ROADWAYS Record the code which best describes the Access Control of the road on which the crash occurred. (See page 17 for further explanation)

VEHICLE CONFIGURATION Record the vehicle configuration code. Detailed examples and codes of vehicle configurations are shown on the back of the 852 form.

CARGO BODY TYPE Record the cargo body type for single trucks or combinations. Detailed examples of various configurations are shown on the back of the 852 form.

CARGO TYPE Record the code for the cargo. If code ‘88’ is used, indicate the type of cargo in the blank provided.

CAB TYPE Record the code that best describes the cab type for the vehicle.

Passengers & Pedestrians
KDOT Form 854 page 1 - Rev. 2019

ADDITIONAL PASSENGERS AND PEDESTRIANS

The front of this form is to be used to list additional passengers (only) that cannot be listed on the 850B form(s). Do **NOT** record drivers, pedestrians, or witnesses on the front of this form. Please list passengers in traffic unit and seat type order if possible. See the instructions on pages 52-54 for form 850B on how to fill out the front of this form.

PEDESTRIAN INFORMATION

NOTE: The following fields require a value where information is unknown: TU, ST, Last Name (Unknown), DOB (99/99/9999), Gender, Age, SE Used, Eject/Trapped, and Injury Severity.

Unit #	PEDESTRIAN First Name	Middle Name	PEDESTRIAN ADDRESS (Number, Street, Sfx, etc.)
Ped Type	PEDESTRIAN Last Name	Date of Birth	City State Zip

TRAFFIC UNIT (TU) **NUMBER** Record a unique (non-repeating) number in relation to the other TU's involved.

Example: Do NOT record V1 (01), V2 (02), PED1 ('01'). In this case, the pedestrian is coded as PED3 ('03'). They are the third traffic unit.

If an injured occupant of legally parked vehicle, record as separate TU with the parked vehicle as the last TU number: striking vehicle '01', injured Ped '02', and then 'X03'.

PEDESTRIAN TYPES (non-motorist)

21 Walking, standing, running, etc
22 Pedal cyclist
23 Rider of animal
24 Occupant of animal-drawn vehicle
25 In vehicle NOT IN TRANSPORT
(legally parked vehicles, snow plows...see manual)
26 Machine operator or passenger
88 Other

PEDESTRIAN TYPE See pedestrian type list on the Crash Code Sheet, form 855 and code the appropriate ped type.

PEDESTRIAN NAME, DOB, ADDRESS, PHONE #, ETC. Record all information requested on the 854 form, including the transporting unit (EMS, private car etc) with 'A', 'B', 'C', …, 'N'.

SAFETY EQUIPMENT USE This is a mandatory field for all drivers, passengers, and pedestrians. If the safety equipment is not known, record a 'U'. The following two codes ('Q', 'V') are to be used for pedestrians only. Do NOT record a motorcycle helmet for pedestrians

Q Pedestrian helmet or protective pads V Reflective clothing

GENDER, AGE, INJURY SEVERITY Code the same as drivers and passengers. See pg. 43.

EJECTED/TRAPPED Record ejected/trapped codes for pedestrian types 24- in animal-drawn vehicle, 25- in vehicle NOT in-transport, and 26- machine operator or passenger as they apply. If the individual was not ejected, code 'N'. If the person was ejected, indicate the **Ejection Path**.

EXTRICATION? Check this box as it applies to pedestrian types 24- in animal-drawn vehicle, 25- in vehicle NOT in-transport, and 26- machine operator or passenger.

EMS INFORMATION The Pedestrian EMS fields are the same as the Driver and Passenger fields. Refer to page 46 for instruction.

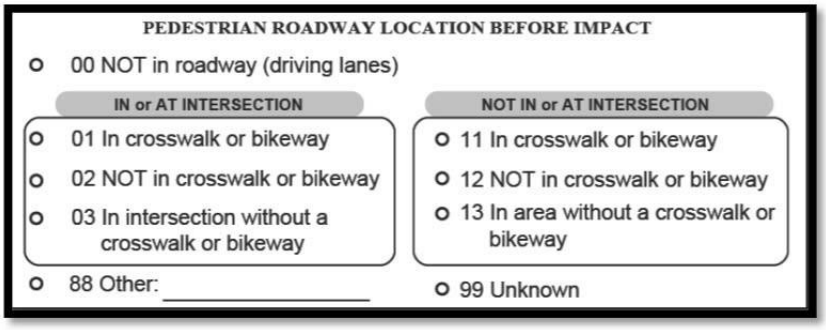
DIRECTION OF TRAVEL Enter a direction of travel prior to the crash for each pedestrian traffic unit. Valid codes are: 'N', 'S', 'E', 'W', 'NE', 'NW', 'SE', 'SW', 'NA' (not applicable), and 'U' (unknown).

DRIVER'S LICENSE NUMBER If deemed useful for identification purposes or other reasons, record the number as shown on the driver's license or identification number obtained by other means. Do not record a Social Security Number.

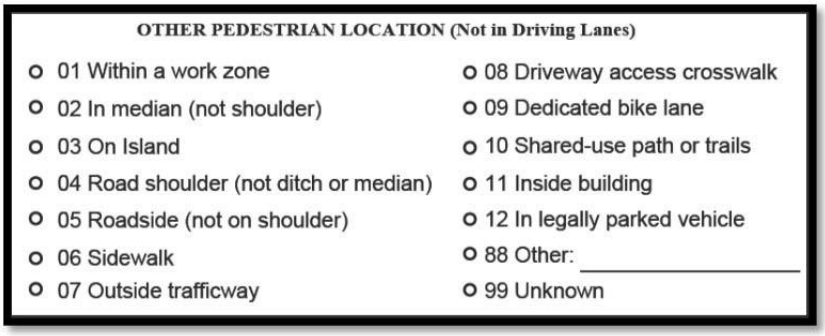
DRIVER'S LICENSE STATE Record the two-letter abbreviation of the state issuing the license. See State Abbreviations, page 87.

SPECIAL DATA This special data field can be utilized by anyone completing the forms to capture additional information concerning pedestrians involved.

PEDESTRIAN ROADWAY LOCATION BEFORE IMPACT Three main choices apply here: 1) NOT in the roadway 2) IN the roadway, "In or At Intersection" 3) IN the roadway "NOT In or At Intersection". Mark what is appropriate for the pedestrian TU you are coding.

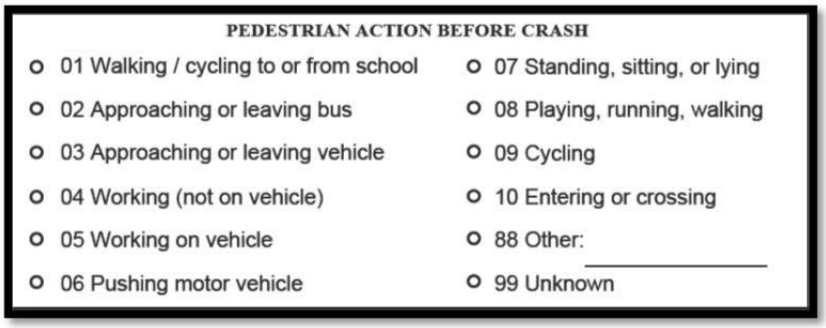


OTHER PEDESTRIAN LOCATION (Not in Driving Lanes) If you have marked choice '01' above (NOT in the roadway), mark whichever code applies for the crash scenario.



PEDESTRIAN ACTION BEFORE CRASH Choose the PED Action that is most appropriate. Mark only one choice.

PEDESTRIAN OBEDIENCE TO TRAFFIC SIGNAL This is a mandatory section. Mark '00' (No pedestrian signal) if there is not one at the crash location.



IMPAIRMENT INFORMATION The Pedestrian impairment fields are the same as the Driver fields. Refer to pages 50-51 for instruction.

Definitions

DEFINITIONS / CLARIFICATIONS

CRASH: An unstabilized situation which includes at least one motor vehicle in-transport and at least one harmful event. For the purpose of this manual, crash fully implies "motor vehicle crash."

AGGRESSIVE / ANTAGONISTIC DRIVING: A contributing circumstance code representing the actions of a driver. Such actions are with the intent to display a driver's irritation towards others or about circumstances. Intimidation, fear, and threats are attributes of this display.

> Aggression: an offensive action…an unprovoked attack.
> Antagonism: actively expressed opposition or hostility.

Examples: tailgating (intentional), improper passing, shinning bright lights, etc. (Note: This is NOT the same as a road-rage incident.)

This code should only be used when evidence, either physical or witnessed, indicates aggressive action by a driver. In addition, **this code is not a substitute for other codes such as followed too closely. It should be used in conjunction with any and all codes that apply to the crash.**

BUS: A bus is a motor vehicle with seating for transporting nine or more persons, including the driver.

BOOSTER SEATS: Used when a child outgrows the child seat and is normally between ages 4-8 and/or 40-80 lbs. This seat is intended to raise the child up so the shoulder and lap belts can properly protect. Keep in mind that booster seats can be no, low, or high back and can have their own safety belt restraint system.

CATACLYSM: A cataclysm is a cloudburst (very intense rain), downburst (very strong winds from a storm), tornado, earthquake, flood, or lightning. Crashes resulting from a cataclysm are not considered state-reportable crashes.

Exclusions (reportable crashes):
1. Rain, snow, fog, hail, sleet, freezing rain, strong winds (less than 74 mph), etc.
2. An old tree falling only due to a rotting root system.
3. Shallow standing water.

CARRYING ROUTE: Applies only to Kansas, US, and Interstate highways: Where two highways ride together, the carrying route is the higher classed route or, if the same class, the lower numbered route. The On Road Name field should always reflect the carrying route in these cases.

Example: U040 rides on I070. I070 therefore is the carrying route (interstate is highest class).

COMMERCIAL MOTOR VEHICLE: A commercial motor vehicle is any motor vehicle used for the transportation of goods, property or people in interstate or intrastate commerce.

CMV Inclusions:
- Motor vehicles providing transportation of goods, property, or people for hire
- Privately-owned motor vehicles providing transportation of privately-owned goods or property in furtherance of a business enterprise.
- Privately-owned motor vehicles providing passenger transportation in furtherance of a business enterprise.

Examples:

1. A trucking company hauling a company's goods for a fee. (UPS, DHL or FedEx for example)
2. A motor coach transporting passengers within and between cities and towns. (Greyhound bus)
3. A truck or truck tractor owned by an individual truck driver used to carry goods or property under contract. (Independent hauler)
4. An airport shuttle bus service paid to transport persons to hotels and other businesses. (Roadrunner Express, Emu-Express)
5. A manufacturing company hauling its own products to retail stores. (Steinway Piano Company)
6. A retail store delivering products to its buyers. (Best Buy, Sears)
7. A business engaged in the transportation of students to and from school and school-related activities. (Various USD buses)
8. An agricultural farm hauling its produce to market. (Meadow Gold Dairy)
9. A taxi or limousine service transporting passengers for a fee. (Yellow Cab)

CMV Exclusions:

— Persons providing private transportation of personal property or people.

Examples:

1. Large family of 10 persons taking a trip in the family's 12-person van.
2. Recreational vehicle (provided they are not selling anything or providing a service out of it)

CROSSED MEDIAN During an unstabilized situation on a divided roadway, a vehicle travels off the roadway, across the median, and reaches the opposing lanes of travel.

EMERGENCY VEHICLE: (MMUCC) “Indicates of any motor vehicle that is legally authorized by a government authority to respond to emergencies with or without the use of emergency warning equipment, such as a police vehicle, fire truck, or ambulance while actually engaged in such response.” We add vehicles used for towing or traffic control under the same response conditions.

FRONTAGE ROAD: A roadway generally paralleling an expressway, freeway, or parkway. It also could be a through street designed to intercept, collect and distribute traffic desiring to cross, or enter the main trafficway.

FULL TRAILER: A full trailer is a trailer, other than a pole trailer, designed for carrying property and so constructed that no part of its weight rests upon or is carried by the towing road vehicle.

GORE: The area at the end of a lane (e.g. interchange ramp) where the lane or it’s shoulder merge with another road. The direction of the diverging or converging lanes must be the same.

GROSS VEHICLE WEIGHT (GVW): Gross vehicle weight is the actual weight of a road vehicle including the weight of the road vehicle, its load of persons and property, and all added equipment.

GROSS VEHICLE WEIGHT RATING (GVWR): A gross vehicle weight rating is the value specified by the manufacturer as the recommended maximum loaded weight and appears on a label or tag affixed to single-unit trucks, truck tractors and trailers manufactured for use in the United States. Such a label is required by federal regulations issued by the National Highway Traffic Safety Administration. The required label is generally placed on the door or door frame next to the driver's seating position or, for trailers, on the forward half of the left side. Gross vehicle weight ratings for trucks are also encoded in vehicle identification numbers and may be included in computerized motor vehicle records maintained by the states This rating includes the maximum rated capacity of a vehicle, including the base vehicle, mounted equipment and any cargo and passengers. Most of the time, GVWR is the sum of the maximum rated capacity of the axles of the vehicle.

DEFINITIONS / CLARIFICATIONS

HARMFUL EVENT: A harmful event is an occurrence of injury or damage. Harm is NOT defined as only an adverse reaction or the beginning of an unstabilized situation.

HEAVY TRUCK: A heavy truck has a gross vehicle weight rating of more than 26,000 lbs.

INTERSECTION: An area which contains a crossing or connection of two or more public roadways not classified as driveway access or alleys. Intersection applies only to “At-Grade” or “Same Plane” junctions (no grade separation, ramps, etc).

IN-TRANSPORT: The term “in-transport" denotes the state or condition of a transport vehicle which is in motion or within the portion of a transport way ordinarily used by similar transport vehicles. When applied to motor vehicles, “in-transport" means on a roadway or in motion within or outside the trafficway. For Kansas reporting, a “working motor vehicle” (see definition) at the time of the unstabilized situation is considered "in-transport."

In-transport Inclusions:

- Motor vehicle in traffic on a roadway
- Driverless motor vehicle in motion on the shoulder, roadside or median.
- Motionless or disabled motor vehicle abandoned on a roadway (in driving lanes)
- Motor vehicle in motion outside the trafficway.
- A stopped motor vehicle with any portion of its primary outline as defined by the four sides of the vehicle (e.g., tires, bumpers, fenders) and load, if any, within the roadway.

Examples:

1. A driverless vehicle previously parked on the shoulder begins to roll forward because the parking brake was not set.
2. A stopped vehicle partially on the shoulder with two tires on the roadway.
3. A stopped tractor trailer on the shoulder with its load hanging over the roadway edge line.
4. A person deliberately driving an all-terrain vehicle (ATV) down a median or the roadside.
5. A police vehicle patrolling or responding to an emergency.
6. A police or emergency vehicle stopped on the roadway (in the driving lanes) at the scene of a crash or traffic stop or other police action, regardless of whether or not the emergency lights have been activated.
7. Construction, maintenance, or utility work vehicles traveling on a trafficway from one work site to another location.
8. A school bus stopped in a travel lane with signs and/or lights activated.
10. A private citizen using his pickup truck or lawn tractor with a blade removing snow from the roadways in his neighborhood. (Not a highway maintenance activity.)
11. A farm tractor or combine moving from a storage facility to a field under its own power on the trafficway.
12. An ATV driving on a recreational off-road trail inside or outside the trafficway.

In-transport Exclusions:

- Transport vehicle stopped off the roadway within the trafficway.
- Transport vehicle stopped in parking lanes during periods when parking is allowed.
- Transport vehicle performing construction, maintenance, or utility work related to the work zone of a trafficway.
- A stopped motor vehicle with any portion of its primary outline as defined by the four sides of the vehicle (e.g., tires, bumpers, fenders) and load, if any, not within the roadway.
- A vehicle parked in roadway in order to unload merchandise (see Section 98 of the Kansas Traffic Ordinances)

Examples:

1. A disabled utility vehicle stopped on the shoulder, median, or roadside.
2. An automobile parked in an area designated for parking area against the curb of a residential street, or in a parking space or lane.
3. A truck stopped on the shoulder where only the extended side-view mirror overhangs the roadway edge line.
4. A power company truck working on the power lines in an elevated basket in a maintenance work zone.
5. A concrete mixer discharging its load of concrete in a construction work zone.
6. An asphalt spreader or roller repaving the roadway.

MEDIAN: A median is an area of a trafficway between parallel roads separating travel in opposite directions (See Example 15A and 15B in the back). A flush or painted median should be four or more feet wide between inside roadway edge lines. Medians fewer than four feet wide must have a barrier to be considered a median. Continuous left-turn lanes are not considered painted medians.

Median Inclusions:

— Physical barriers separating roads with travel in opposite directions
— Depressed, raised or flush areas between roads with travel in opposite directions
— Painted medians of four or more feet wide between roads with travel in opposite directions

Examples:

1. A depressed grassy median separating directions of travel of a divided highway.
2. A median with a concrete traffic barrier, guardrail or cable, separating roads of a multi-lane divided highway.
3. A flush painted median of four or more feet of a divided highway.

Median Exclusions:

— Shoulders
— Turn lanes
— Continuous left-turn lanes

MEDIUM TRUCK: A medium truck is a truck which has a gross vehicle weight rating of more than 10,000 pounds and less than or equal to 26,000 pounds.

MOPED: A moped is a speed-limited motor-driven cycle which may be propelled by pedaling.

MOTORCYCLE: A motorcycle is any motor vehicle having a seat or saddle for the use of its operator and designed to travel on not more than three wheels in contact with the ground.

MOTOR-DRIVEN CYCLE: A motor-driven cycle is any motorcycle having an engine with less than 150 cubic centimeters displacement or with five brake horsepower or less.

Inclusions: Moped, Miniature motorcycles, "Pocket Bikes"

MOTOR VEHICLE CRASH: A transport crash that 1) involves a motor vehicle in transport, and 2) is not an aircraft crash or watercraft crash.

NON-CONTACT VEHICLES: A non-contact (“phantom") vehicle or pedestrian may be recorded if it had a role in the crash. Record them as an “N##” unit. Information about a non-contact vehicle may be recorded for legal or documentation purposes, but such vehicles are not counted for statistical purposes.

DEFINITIONS / CLARIFICATIONS

Examples:

1. A vehicle changes lanes into the path of another vehicle (without making contact) causing a crash. The vehicle changing lanes is a non-contact vehicle.
2. A school bus is stopped on the roadway picking up or discharging pupils and one of the pupils is struck without the school bus being struck. The school bus is a non-contact vehicle.
3. A pedestrian darts into the roadway causing a motor vehicle to stop suddenly without striking the pedestrian. A following vehicle swerves to avoid the stopped vehicle and collides with a fixed object. The first vehicle is a non-contact vehicle.

OTHER BUS: An "other bus" is any bus used for transportation purposes other than school bus, transit bus, intercity bus, or charter bus.

Inclusions:

- Private companies providing transportation services for their own employees and others (hotel shuttles, etc.).
- Non-governmental organizations (such as churches and non-profit groups).
- Non-educational units of government (such as departments of corrections).

OVERTURN/ROLLOVER: Includes vehicles rotating at least a ¼ turn (motorcycles included if damaged or riders injured)

PERSONAL CONVEYANCE: A personal conveyance is a device, other than a transport device, used by a pedestrian for personal mobility assistance or recreation. These devices can be motorized or human powered, but not propelled by pedaling.

Personal Conveyance Inclusions:

- Rideable toys
- Roller skates or incline skates
- Skateboards
- Roller blades
- Baby Carriage
- Scooters
- Toy Wagons
- Motorized rideable toys
- Motorized skateboard
- Motorized toy car
- Sidewalk scooters
- Devices for personal mobility assistance
- Segway-style devices
- Motorized/non-motorized wheelchairs
- Handicapped scooters

Personal Conveyance Exclusions:

- Golf cart
- Low Speed Vehicles (LSVs)
- Go-carts
- Mini-bike
- "Pocket" motorcycles
- Motor scooters
- Any registered or "tagged" vehicle
- Lawn Mower
- Parade motorized cars

RIDING ROUTE: A riding route is a highway that rides on another highway with a higher designation. Example – U040 rides on I070 from Oakley to Topeka; I070 is the "carrying route" and U040 is the "riding route", because Interstate routes "carry" U and K routes. Further, lower numbered routes of the same type "carry" higher numbered routes (e.g. U160 and U183).

SEMI-TRAILER: A semitrailer is a trailer, other than a pole trailer, designed for carrying property and so constructed that part of its weight rests upon or is carried by the towing road vehicle.

DEFINITIONS / CLARIFICATIONS

SHOULDER: A shoulder is that part of a trafficway contiguous with the roadway for emergency use, for accommodation of stopped road vehicles, and for lateral support of the roadway structure.

SINGLE-UNIT TRUCK: A single-unit truck is a truck consisting primarily of a single motorized transport device designed for carrying property. When connected to a trailer, such a device may be part of a truck combination.

Examples:
- Two axle, four-tire trucks
- Two axle, six-tire trucks
- Three or more axle trucks

Exclusions:
- Truck tractors
- Truck combinations

SPORT UTILITY VEHICLE (SUV): A utility vehicle is a motor vehicle other than a motorcycle or large bus consisting primarily of a transport device designed for carrying persons, and generally considered a multi-purpose vehicle that is designed to have off-road capabilities. These vehicles are generally four-wheel-drive (4x4) and have increased ground clearance. An SUV typically has a gross vehicle weight rating (GVWR) of 10,000 pounds or less.

Examples:
1. Small — S-10, Santa Fe, Wrangler, Ranger, Jimmy, Tracker
2. Midsize — Cherokee, Comanche, Yukon, Typhoon, Explorer, Escape, Envoy, Sorrento, Element, Axiom, Rodeo, Mountaineer, Xterra
3. Full-size — Blazer, Suburban, Bronco, F Series, Sierra, Land Cruiser, Pathfinder Armada, Ascender, Pilot, Escalade, Expedition, Excursion, Yukon
4. Large — Hummer, Navigator
5. Small bus – Utility vehicles with more than nine seats; i.e. Chevy Suburban, Ford Excursion, Ford Expedition, GMC Yukon SL, Chevy Tahoe

TRUCK TRACTOR: A truck tractor is a motor vehicle consisting of a single motorized transport device designed primarily for drawing trailers.

RECKLESS / CARELESS DRIVING: A contributing circumstance code representing the actions of a driver. Such actions display a driver's apathy towards the law and others. This code should only be used when evidence, either physical or witnessed, indicates reckless action by a driver. In addition, **this code is not a substitute for other codes such as improper passing or exceeded posted speed limit.** It should be used in conjunction with any and all codes that apply to the crash.

Reckless: marked by a lack of caution; rash; irresponsible; wild; negligent.
Careless: not taking care; unconcerned or indifferent of the consequences.

Examples: Excessive speed or racing, "pulling stunts" with a vehicle, disregarding traffic control devices (intentional), etc. (Note: This is not the same as aggressive / antagonistic driving)

ROAD RAGE INCIDENT: "…an assault with a motor vehicle or other dangerous weapon by the operator or passenger(s) of one motor vehicle on the operator or passenger(s) of another motor vehicle or is caused by an incident that occurred on a roadway." (source: NHTSA) Therefore, Road Rage is an **intentional act** of harming another and is not a crash.

DEFINITIONS / CLARIFICATIONS

TRUCK CLASSIFICATION BY WEIGHT…(see Gross Vehicle Weight)

Categories: Light truck — Gross vehicle weight rating under 10,000 pounds
Medium truck — Gross vehicle weight rating 10,000 to 26,000 pounds
Heavy truck — Gross vehicle weight rating over 26,000 pounds

UNSTABILIZED SITUATION: An unstabilized situation is a set of events not under human control. It originates when control is lost and terminates when control is regained or, in the absence of persons who are able to regain control, when all persons and property are at rest. In cases of multiple events, determination for documenting one or more crashes is based upon whether the events are continuous or whether there is time between unstabilized situations.

WORKING MOTOR VEHICLE: A motor vehicle in the act of performing emergency response, enforcement, construction, maintenance, or utility activities related to the trafficway. This "work" may be located within open or closed portions of the trafficway and motor vehicles performing these activities can be within or outside of the trafficway boundaries. Drivers of these vehicles are NOT to be listed in the Drivers Table (unless at fault). Record as PED type 26 and list on the 854 form. Their PED action is (04) Working; PED Location is where the vehicle was at the time of collision (like ‘13’; see Report Example 19); PED Obedience equals NA ('04'). Record passengers in the passenger table (850B). Kansas is differing from the ANSI D16 standard in two ways: 1. A working vehicle is considered “in-transport” when operating within an open trafficway and 2. Law enforcement and emergency vehicle activities are included.

WORK ZONE: An area of a trafficway where construction, maintenance, or utility work activities are identified by warning signs/signals/indicators, including those on transport devices (e.g., signs, flashing lights, channelizing devices, barriers, pavement markings, flagmen, warning signs and arrow boards mounted on the vehicles in a mobile maintenance activity) that mark the beginning and end of a construction, maintenance or utility work activity. It extends from the first warning sign, signal or flashing lights to the “END ROAD CONSTRUCTION” sign or the last traffic control device pertinent for that work activity. Work zones also include roadway sections where there is ongoing, moving (mobile) work activity such as lane line painting or roadside mowing only if the beginning of the ongoing, moving (mobile) work activity is designated by warning signs or signals.

DEFINITIONS / CLARIFICATIONS

WORK ZONE CRASH: a motor vehicle traffic crash where the unstabilized situation and/or the First Harmful Event occur within the boundaries of a trafficway work zone or on an approach to or exit from a work zone, resulting from an activity, behavior, or control related to the movement of the traffic units through the work zone.

Inclusions:

— Collision and non-collision crashes occurring within the signs or markings indicating a work zone.
— Collision and non-collision crashes occurring on approach to, exiting from, or adjacent to work zones that are related to the work zone, regardless of distance. (See Example #4 below)

Examples:

1. An automobile on the roadway loses control within a work zone due to a shift or reduction in the travel lanes and crashes into another vehicle in the work zone.
2. A van in an open travel lane strikes a highway worker in the work zone.
3. A highway construction vehicle working on the edge of the roadway is struck by a motor vehicle in-transport in a construction work zone.
4. A rear-end collision crash occurs before the signs or markings indicating a work zone caused by vehicles slowing or stopped on the roadway because of the work zone activity.
5. A pickup in-transport loses control in an open travel lane within a work zone caused by a shift or reduction in the travel lanes and crashes into another vehicle down the road that had already exited the work zone.
6. A sport utility loses control and overturns on a roadway within a work zone due to a severe lane shift without any collision event.

Exclusion Examples:

1. Two motor vehicles collide while performing work in a work zone closed area.
2. A highway maintenance truck strikes a highway worker…both are within the closed portion of the work site.

WORK ZONE CATEGORY: Denotes the main characteristic of work zone...Lane closure (01) indicates the project consists of one or more closed lanes of traffic by cones, barricades, or other such devices. Traffic flow is more restricted and may be led by a pilot car, controlled by automated devices, or flaggers depending on the project extent. Lane shift / crossover (02) reflect projects where the traffic flow is moved over in order to allow continuous flow during work. Shoulder and median only work should be shown as code 03. Projects involving intermittent or moving work zones are coded as 04.

CRASH PHOTOGRAPHS

An important part of traffic crash investigation is recording information so that it can be used later. Photography is an indispensable means of recording certain kinds of traffic crash information and a useful supplement to the traffic crash report and diagram. Photos are employed in two ways to preserve information:

a. As a permanent, accurate unbiased record of something specifically observed by an investigator.
b. To capture the detailed appearance of something such as a mark on the road or damage to a vehicle, which may later reveal significant details that were not observed at the time the picture was taken.

As a record of observations, photos serve…

1) To recall later to an investigator's mind details of what he saw, and
2) To explain what the investigator saw to someone else, perhaps in court. A dozen pages, which could take hours to write, cannot describe details of damage to a vehicle as well as a single picture. The nature of scratches on a vehicle's body, or the pattern of fractures in a windshield defy accurate description in words.

As a reservoir of nondescript information, photos include unnecessary data and may omit essential facts because the photographer was unaware of those facts when the photo was made. However, photos made on the chance that they might prove useful to include an immense amount of data that would otherwise be unavailable. Moreover, photos made only to record an investigator's particular observations often also include a wealth of detail not noticed by the investigator at the time he made the photograph.

Uses of photographs

Credibility of photos is impressive. People tend to believe that "photos don't lie." Although a photo may not be completely "true representation," it is regarded as relatively free from the bias that may influence verbal or written reports. Photos are certainly not subject to the loss of detail and uncertainties that memory is. Hence, photos are very effective in verifying reports of observations. Photos are unsurpassed in offering the officer a reminder to refresh the memory about something seen in the past, perhaps years ago.

Writing and sketching are simplified by making photos. Often a photograph makes notes of observations unnecessary. A spare print of a photograph can be marked with notes giving dimensions, pointing out significant observations, and explaining why the photo was made. Do this as soon as you receive the print of the picture. This makes the photo more effective in reminding you of what you observed. Such a marked photo cannot ordinarily be admitted as evidence in court, but it may be referred to like any other notes you have made. It is useful to mark each photo of a traffic crash scene with a small arrow to show which direction is north.

If the crash is later sent to a reconstructionist, photographs are very helpful to bring the reconstructionist to the scene. Sometimes details that the investigating officer did not observe or note will be evident to the trained professional. It may allow the reconstructionist a chance to follow up with the investigator or witness in dissecting this crash further.

Copies of documents made photographically by one process or another are frequently used in traffic crash investigation. The most commonly copied document is the official traffic crash report form.

When to make photographs

The point in the investigation at which to make photos depends on how urgent photographic documentation is compared to other procedures. For example, if there are no injuries, but damaged vehicles must be moved promptly to clear the road, photographing the position of the vehicles may be the first thing you should do upon arrival at the scene. It may take priority over locating the position of vehicles by measurements because the position can be quickly marked when the pictures are taken and the measurements made later. On the other hand, if no photos are necessary, except a general view of the scene, photos may be deferred until just before trial. In this case, photography might be about the last step in the investigation.

Postponing some photographs

Make photographs soon of things that will change. Marks on the road are very important because they may soon be obliterated. Photograph vehicles on the roadway promptly so that they can be removed to restore traffic movement, but photographs of vehicles off the road can be postponed. You can delay getting views of the general scene, pictures of view obstructions, damage to cars or fixed objects, and positions of signs. Delay in taking pictures may prove to be desirable, because light or weather conditions may improve. It is a good practice to return to the site the day following a serious night traffic crash for better photos than were possible in darkness. Sometimes tire and other marks on the roadway may be obscured by debris, water or snow at the time of the traffic crash but become visible later and may be photographed, perhaps even days later.

At the scene

At the scene, photography is most difficult because there are so many other things to do, and because conditions at the time may be unfavorable. Remember the general rule: at the scene, you do not have to do anything that can be done later. However, remember too, that it is sometimes easier to take a photo at the scene than to make a special trip to get it later.

Final positions of vehicles and bodies can only be photographed at the scene, and sometimes if the vehicles or bodies must be removed for safety reasons before photos can be made, then mark the road giving an indication of their position to be photographed later.

To be most useful, take pictures showing either vehicles or a vehicle and a body where they came to rest. It is important to include some of the roadway and recognizable landmarks in the vicinity; otherwise, the picture may lose much of its value. If there is more than one vehicle, take one picture with each vehicle in the foreground and one or more with them in the background. If vehicles are widely separated and it is dark, good photos that meet these requirements are not easily made. A second flash for the further car is recommended. Photograph final resting positions of vehicles. Show their relationship to the road and other vehicles, if possible. General views of final positions of vehicles and bodies help make traffic crash situation maps when measurements either were not made at the scene or turn out to be unsatisfactory.

Photos made of vehicle damage at the scene are preferable to those made after the vehicle has been moved because they may show additional damage caused by the process of removing the vehicle. Photo documentation of damaged vehicles can often show the relationship of damage to other vehicles or fixed objects with which damaged vehicles are engaged. Photos of damage can be taken more easily at the scene then elsewhere. For example, during daylight when the vehicle is in the open, it may be more accessible to the photographer than it will be later in a crowded salvage yard.

On the other hand, a vehicle down in a ditch among bushes at night may make good at-scene damage pictures impossible. So a decision has to be made about where it is best to make damage photos. Detached parts of vehicles should be treated exactly like separate vehicles as far as photographing final positions is concerned.

Results of the traffic crash on the road require the same kind of decision. Some traffic crash evidence like debris, tire ruts in snow, furrows in gravel roads, and light tire scrubs, will soon disappear and must be photographed as soon as possible. Other evidence like gouges will last and photographs of them can be left until later, possibly for someone else to do. Taken later, they become part of the technical follow-up rather than initial at-scene investigation.

What to photograph

Tire marks and long scratches that show the path of the vehicle need to be fully and systematically photographed to supplement rather than substitute for measurements. If tire marks are shown adequately in photos of the final positions of the vehicles, no additional photos are required. If the marks extend along the roadway for more than about 50 ft., a series of photos may be necessary.

Ruts and furrows on the roadside are usually best photographed in the direction of movement of the vehicle that made them. Show the edge of the road where such marks begin or if they are more than 40 ft., make a series of two or more pictures.

Smaller marks, especially gouges or groups of gouges, collision scrubs and irregularities in tire marks, require close-up photographs to show necessary detail, even if the marks are included in the general pictures. If there are more than two small marks, be careful to identify each in some way so as to eliminate possible confusion about which mark shown on the field sketch was the one in the picture. The easiest way to identify a mark is by a crayon letter -- A, B, C, etc. -- beside it. This can be the same letter used to identify it for measurements or you can make special notes relating to it.

Often, close-up pictures of sections of long marks are useful to show exactly what they look like. Such pictures can show pavement texture in a skid mark or striations in yaw mark.

RESULTS OF THE TRAFFIC CRASH TO THE VEHICLE

Contact and induced damage is usually recorded better by photographs than any other way; but do not think the photographs make other records of damage unnecessary. For example, photography is no substitute for measurements to show how much the wheels have been moved by the collision.

Damage is photographed to help reconstruct the traffic crash, to evaluate the probable cost of repair, or both. In reconstruction, we want to know such things as how one vehicle fitted against another vehicle or fixed object at maximum engagement, from what direction the force came, whether the vehicle rolled over, whether it was involved in more than one collision during the traffic crash, what areas received contact damage, and what parts of the vehicle were forced into unusual contact with the road. In evaluating cost of repairs for financial responsibility assessments or claim settlements, investigators/adjusters want to know what parts will require replacement. For either traffic crash reconstruction or repair cost evaluation, it is often as important to know what parts of the vehicle were not damaged as to know what parts were affected.

When the traffic crash warrants few pictures or when your supply of film is limited, you may decide that one picture of damage to a vehicle will be enough. In this case, the best single picture usually shows not only the damage area but also as much adjacent undamaged area as possible. Therefore, take the picture to show one side and one end. There are exceptions to this rule, of course. For example, the vehicle may be so located that it is impossible to take a picture from the most desirable viewpoint without moving the vehicle or some other object and you cannot or may not move either; or perhaps it is important to show more minute detail of the damage than would be possible from a distance required to include the entire vehicle in the one picture.

If not all the damage can be shown in one picture, you should make additional photos. At least two are required to show satisfactorily which parts are damaged and which are not. Usually, therefore, the best two pictures of a damaged vehicle are those that show opposite corners, each photo showing one side and one end. Circumstances may be such that it is impossible to get such pictures but try to approximate such views as well as possible.

Oblique or corner photographs like those recommended for the best one or two photographs usually leave much to be desired for technical reconstruction purposes. For example, from an oblique picture it may be difficult to judge how far a vehicle part, such as a wheel or headlamp, was pushed straight back and how much to the right or left. This is important; four damage pictures of a vehicle are usually needed for technical purposes. Each shows the entire vehicle from one side or end. Make these pictures on the centerline of the vehicle facing directly toward it. Damage to the vehicle often makes it difficult to decide just where the centerline is. Align your camera by undamaged parts of the vehicle. For example, if the front end has been forced to the right, do not take the picture looking directly toward the offset front end, but rather on a line that passes down the left side.

The center of the windshield and the rear window if in their normal position. For side views, make the center doorposts on each side coincide so that the one on the rear side covers that on the far side.

View obstructions should be photographed under two conditions: (1) the driver claims or suggests that his view was obstructed by something on the road; and/or (2) you believe that this may have been the case. Much time can be avoided in court, if photographs are produced which allow others to judge for themselves the nature of the view obstruction.

If there are vertical view obstructions such as crests or hills, have a person or a car stationed at known and recorded distances beyond the crest to show how much or how little they could have seen. If there are horizontal view obstructions on curves, a sequence of pictures with a wide-angle lens will show them adequately. For view obstructions at junctions or railroad crossings, an extremely wide-angle lens would be necessary to show as much to the side as the human eye can perceive. Such a lens usually gives distorted perspective, so if there is a view obstruction probable, make approach pictures at 50-ft. intervals, but in addition, one straight ahead down the road at each location. Also, make one at a 45-degree angle to the side in the direction at which the hazard was located.

Try to make view obstruction pictures under as nearly as possible the same conditions as existed at the time of the traffic crash. For example, if trees and shrubs were bare of leaves at the time of the traffic crash, try to make the picture when they are that way; and if cars were parked at a junction when the traffic crash occurred, make the picture with cars parked in as nearly the same way as possible.

Photography documentation provided by the Kansas Law Enforcement Training Center.

COUNTY ABBREVIATIONS

The following are the standard alphabetic abbreviations for each county in Kansas:

Allen	AL	Greeley	GL	Osborne	OB
Anderson	AN	Greenwood	GW	Ottawa	OT
Atchison	AT	Hamilton	HM	Pawnee	PN
Barber	BA	Harper	HP	Phillips	PL
Barton	BT	Harvey	HV	Pottawatomie	PT
Bourbon	BB	Haskell	HS	Pratt	PR
Brown	BR	Hodgeman	HG	Rawlins	RA
Butler	BU	Jackson	JA	Reno	RN
Chase	CS	Jefferson	JF	Republic	RP
Chautauqua	CQ	Jewell	JW	Rice	RC
Cherokee	CK	Johnson	JO	Riley	RL
Cheyenne	CN	Kearny	KE	Rooks	RO
Clark	CA	Kingman	KM	Rush	RH
Clay	CY	Kiowa	KW	Russell	RS
Cloud	CD	Labette	LB	Saline	SA
Coffey	CF	Lane	LE	Scott	SC
Comanche	CM	Leavenworth	LV	Sedgwick	SG
Cowley	CL	Lincoln	LC	Seward	SW
Crawford	CR	Linn	LN	Shawnee	SN
Decatur	DC	Logan	LG	Sheridan	SD
Dickinson	DK	Lyon	LY	Sherman	SH
Doniphan	DP	Marion	MN	Smith	SM
Douglas	DG	Marshall	MS	Stafford	SF
Edwards	ED	McPherson	MP	Stanton	ST
Elk	EK	Meade	ME	Stevens	SV
Ellis	EL	Miami	MI	Sumner	SU
Ellsworth	EW	Mitchell	MC	Thomas	TH
Finney	FI	Montgomery	MG	Trego	TR
Ford	FO	Morris	MR	Wabaunsee	WB
Franklin	FR	Morton	MT	Wallace	WA
Geary	GE	Nemaha	NM	Washington	WS
Gove	GO	Neosho	NO	Wichita	WH
Graham	GH	Ness	NS	Wilson	WL
Grant	GT	Norton	NT	Woodson	WO
Gray	GY	Osage	OS	Wyandotte	WY

STATE ABBREVIATIONS

AL – Alabama
AK – Alaska
AZ – Arizona
AR – Arkansas
CA – California
CO – Colorado
CT – Connecticut
DE – Delaware
DC – Dist. of Col.
FL – Florida
GA – Georgia
HI – Hawaii
ID – Idaho
IL – Illinois
IN – Indiana
IA – Iowa
KS – Kansas
KY – Kentucky
LA – Louisiana
ME – Maine
MD – Maryland
MA – Massachusetts
MI – Michigan
MN – Minnesota
MS – Mississippi
MO – Missouri
MT – Montana
NE – Nebraska
NV – Nevada
NH – New Hampshire
NJ – New Jersey
NM – New Mexico
NY – New York
NC – North Carolina
ND – North Dakota
OH – Ohio
OK – Oklahoma
OR – Oregon
PA – Pennsylvania
RI – Rhode Island
SC – South Carolina
SD – South Dakota
TN – Tennessee
TX – Texas
UT – Utah
VT – Vermont
VA – Virginia
WA – Washington
WV – West Virginia
WI – Wisconsin
WY – Wyoming

INTERNATIONAL ABBREVIATIONS

Canada (CD)
AB – Alberta
BC – British Columbia
MB – Manitoba
NB – New Brunswick
NF – Newfoundland
NT – Northwest Territory
NS – Nova Scotia
ON – Ontario
PE – Prince Edward Is.
QC – Quebec
SK – Saskatchewan
YT – Yukon Territory

Mexico (MM)
AG – Aguascalientes
BA – Baja California Norte
BJ – Baja California Sur
CE – Campeche
CI – Chiapas
CH – Chihuahua
CU – Coahuila de Zaragoza
CL – Colima
DF – Distrito Federal
DO – Durango
GU – Guanajuato
GR – Guerrero
HL - Hidalgo
JL – Jalisco
MX – Mexico
MC – Michoacán de Ocampo
MR – Morelos
NA – Nayarit
NL – Nuevo Leon
OA – Oaxaca
PB – Puebla
QU – Queretaro de Arteaga
QR – Quintana Roo
SL – San Luis Potosi
SI – Sinaloa
SO – Sonora
TB – Tabasco
TA – Tamaulipas
TL – Tlaxcala
VC – Veracruz
YU – Yucatan
ZA - Zacatecas

MISCELLANEOUS OTHER CODES

US – US Government
YY – Other Countries, Provinces or States
UN – Unknown
PR – Puerto Rico
VI – Virgin Islands
OT– Native American Reservations (US, CA, MX)

NCIC CODES FOR COMMON AUTOMOBILE MAKES

ACUR – Acura
AMER – American Motors
AUDI – Audi
BMW – BMW
BUIC – Buick
CADI – Cadillac
CHEV – Chevrolet
CHRY – Chrysler
DATS – Datsun
DODG – Dodge
FIAT – Fiat
FORD – Ford
HOND – Honda
HYUN – Hyundai
LINC – Lincoln
MAZD – Mazda
MERZ – Mercedes Benz
MERC – Mercury
MITS – Mitsubishi
NISS – Nissan
OLDS – Oldsmobile
PLYM – Plymouth
PONT – Pontiac
PORS – Porsche
RENA – Renault
SUBA – Subaru
TOYT – Toyota
VOLK – Volkswagen
VOLV – Volvo

Fatality Reporting

FATALITY CRASH REPORTING REQUIREMENTS

FATAL CRASH DEFINITION: A fatality is ANY person(s) killed in or outside of any vehicle involved in the crash or who dies within 30 days of the crash as a result of an injury sustained from the crash.

REQUIREMENTS:

- A full completed crash report is required to be submitted for all fatal crashes involving a motor vehicle on all roadways in Kansas, this includes crashes on private property, under $1000 in property damage, or occur in a parking lot.
- An 850A, 850B, and 851 is required to be filled out and submitted for all fatal crashes with supplemental forms as necessary.
- All fields are required to be completed where applicable. See page 54 for highly important fields.
- An initial crash report is required to be submitted to KDOT for FARS analysis (Federal Requirements) within 10 days of the date of crash if BAC/Drug results are pending.
- If a driver dies in one crash and their vehicle is involved in another, they are only recorded as fatal in the first crash and not recorded in the 850B in the next, but rather in the narrative.
- Include supporting documentation such as a coroner's report, witness statements, etc. Do not include SSN.

BLOOD ALCOHOL CONTENT (BAC) REPORTING / DRUG/MEDICATION INVOLVMENT: Refer to pages 50 & 51. All fatal crash reports where alcohol and/or drugs are tested requires a full complete amended report with the results sections completed with-in 10 days of closure of the investigation. A preliminary 850A, 850B, and 851 is required to be sent if test results are pending or if other supporting documentation implies the crash was a fatality due to impairment. Submit a complete amended report when results are verified.

NARRATIVE FORM (851): Refer to page 61. A narrative form 851 describing the details of a crash involving a fatality is required to be submitted along with a full completed crash report. All narratives are required to be on State approved 851 forms, although any narrative form will be accepted to assist with our FARS analysis. Other documentation and non-state narratives will not be visible in the states database for public view, only the state approved forms narratives. Details are necessary to accurately report for Federal requirements and narratives are the primary source for this.

INTENTIONAL DEATH (Suicide, intent to do harm, etc.): A fatal crash report is required to be submitted to the KDOT regardless of cause of death in these situations with a coroner's report. The coroner's report wording determines if reportable or not. Mark all as injury severity "F".

MEDICAL CONDITIONS: Refer to page 13. A coroner's report is acceptable to be submitted along with the crash report to support the cause of death was due to a medical condition and not a result of the crash.

SUBMITTING FATAL CRASH REPORTS:

- Electronic Reporting Agencies: only submit fatal and fatal amended reports through the electronic method approved by KDOT, which currently is only through KLER.

- Paper Reporting Agencies: only mail fatal crash reports and fatal amended reports to the following:

Eisenhower State Office Building
Bureau of Transportation Safety and Technology
Attn: Crash Data Unit
700 SW Harrison, 6th Floor Tower
Topeka, Kansas 66603-3754

Examples & Diagrams

CRASH CODING EXAMPLES

Example No. **Scenario**

- **Unusual Crash Coding Situations**
- **Completed Crash Form Examples**

Note: On the crash forms, the Example Number is located in the Local Case Number field.

1. Two vehicle crash / Intersection of Two Highways / Two Junctions / KDOT Property
2. Three vehicle crash / Cross Median
3. Large Truck CMV / Amended Alcohol-Drugs Involved / Roundabout
4. Cellphone / Work Zone
5. Legally Parked / Fatal / Overturned
6. School Bus / Medication Contributing Circumstances
7. Fire / Non-Collision
8. Hit & Run / No Name Road / Unknown Info
9. Non-contact crash
10. Train/ Vehicle Crash (alcohol involved)
11. Parking lot Entrance Crash
12. Pedestrian / Interchange Ramp
13. Working Vehicle
14. Autonomous (Self Driving) / Electric Car / Tire Comes off

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15. Crossover Diagram examples (15A, 15B)
16. Crash Location Diagrams
17. First (Initial) and Most (Principal) Impact Point Examples
18. Roundabout / Traffic Circle Diagrams
19. Parking Lot Diagrams

UNUSUAL CRASH CODING SITUATIONS

CATEGORY	SITUATION	CODING
Cargo, debris, a part of a vehicle hits another vehicle, water, etc.	• Vehicle hits motionless cargo or debris in roadway	• 1 TU, AC=09
	• Motionless cargo / debris, but set in motion by V1 hitting V2	• AC=00, 1 TU
	• Motionless and damages **more than one vehicle**	• 2 TUs, AC=09
	• Vehicle in-transport hits cargo or debris that is **In motion**	• 2 TUs, AC=03 and CWOV=88
	• Vehicle in-transport loses tire/wheel on roadway, tire in motion hits legally parked vehicle off roadway (1st harm is vehicle brake rotor striking pavement)	• 2 TUs – 01 & X2, AC_FHE=08 and AC_MHE may be 04
	• **Ice** comes off V1 and hits V2	• 2 TUs, AC=03 and CWOV=88
	• Falling Cargo or debris by V1 and hits V2	• 2 TUs, AC=03, and CWOV=88
	• If cargo only is damaged inside / on a vehicle over $1,000, it is a crash	• AC=00, 1 TU
	• **Mower** throws debris and strikes a vehicle	• AC=00, 1 TU
	• **Power line** falls on vehicle (Not a crash if an act of nature)	• AC=00, 1 TU
	• **Golf ball** hits a vehicle	• AC=00, 1 TU
	• **Jackknife**	• AC=00, 1 TU
	• Immersion in standing water without overturning or collision (It is <u>not</u> a reportable crash if the water is running over a roadway due to flooding)	• AC=00, 1 TU
Fatalities (pg. 89)	• A pregnant mother is injured or dies, and her fetus/baby dies	• 1 fatality or injury (fetus/baby ignored)
	• If a person dies of medical condition OR after 30 days	• Injury crash, person's Injury Severity per crash cause
	• If a person dies as a result of one crash, and then is involved in another crash (see page 89)	• Only 1st crash is Fatal; they are only listed in the narrative for the next event
Fire	• Vehicle catches fire while parked, not while traveling on roadway	• Not a crash
	• **Fire** or **Explosion** in vehicle in-transport	• AC=00, 1 TU

AC=Crash Class / TU=Traffic Unit / PT=Ped Type / ST-Seat Type / CWOV=Collision with other motor veh.

Illegally parked vehicles	• TU hits parked vehicle on roadside or parked in a stall on a street and door(s) is open or vehicle parked in the roadway • Giving assistance and in the roadway (illegally parked) • Driver leaves car and re-enters from Passenger's Side and is hit **Note:** If you are entering a vehicle but not all the way in = Ped.; If you exit a vehicle but not all the way out=Occupant	• 2 TUs or more, AC=03 • 2 TUs or more, AC=03 • person is the driver
Legally parked vehicles Defined: parked, all doors are shut, in the proper direction of traffic, and not in the roadway (does not include bridges) (Also see Vehicles in the line of duty)	• Collision with a legally parked vehicle • If there are occupants, they are considered peds only if injured. • A bicycle hits a legally parked vehicle. • A vehicle (with or without driver) rolls into a legally parked vehicle on or across the roadway. • Vehicle giving assistance (not in the roadway) to another vehicle regardless of which direction vehicles are facing.	• 1 TU, 1 Unit X, AC=04 • 2 or more TUs, PT=25, 1 Unit X • Not reportable (NR) • 1 TU, AC=04 • 1 TU, AC=04
Non-state-reportable (NR) (unless fatal)	• Private roads (not used by the traveling public) • Unstabilized event and damage all occur on / within closed travel lanes or roads. • Vehicle comes out of gear (or parking brake fails) and the unstabilized situation does NOT begin on and NO damage occurs on a public trafficway • Drive through lanes at banks, pick-up windows, and scales • Inside Parking Lots (excluding 50 feet from entrance way) • Train strikes a pedestrian **NOT** at a public roadway crossing	• **All are NR unless fatal**
Persons falls or jumps out of vehicle (for reasons other than the intent to harm oneself…like suicide)	• Driver • Passenger **Note:** If you are entering a vehicle but not all the way in = Ped.; If you exit a vehicle but not all the way out=Occupant	• ST=01, not a driverless veh. or ped. • ST= before they fell, not a ped. AC=00 (most of the time)
Railroad crossing	• RR equipment / device comes down on a vehicle • RR equipment / device is hit by a vehicle • Train strikes a pedestrian w/ no other motor vehicle involvement	• 1 TU, AC=00 • 1 TU, AC=08 • Not a crash

AC=Crash Class / TU=Traffic Unit / PT=Ped Type / ST-Seat Type / CWOV=Collision with other motor veh.

Towing Vehicles	• Vehicle is hit while towing another vehicle (considered a trailer)	• 2 TUs, AC=03, Occupants in trailer are ST=08.
	• Trailer comes unhooked, hits another vehicle	• 2 TUs, AC=03, and CWOV=88
	• Vehicle hits trailer attached to another vehicle	• 2 TUs, AC=03, and CWOV=1-6
Working vehicles	• Hit an emergency vehicle acting as a barricade in the line of duty	• AC=03, 2 TUs…the EV is considered "in-transport" – ANSI 2.2.34…if there is a driver of EV, code as PED type 26
	• Emergency vehicle intentionally strikes another vehicle to redirect or slow pursued vehicle	• NR: Legal intervention
	• Emergency vehicle parked in the roadway in the line of duty is struck	• 2 TU, AC=03, …if there is a driver of EV, code as PED type 26
	• Officer takes action to deflate vehicle tires and a the vehicle crashes	• NR: Legal intervention
	• Paving machinery used for intended function is struck by a vehicle traveling on or coming from the roadway	• AC=09, 1 TU
	• Commercial motor vehicles parked in the roadway for loading or unloading are legally parked according to Standard Traffic Ordinance Section 98	• 1 TU, AC=04
	• Utility vehicle w/ cones and/or signing (considered legally parked) is struck by another vehicle	• 1 TU, AC=04
	• Street sweepers are considered working vehicles	• 2TU, AC=03, …if there is a driver of sweeper, code as PED type 26
	• Snow from snow plow strikes and damages legally parked car	• 1TU, AC=04…Driver of plow is PED type 26
	• Snow from snow plow strikes and damages vehicle in-transport	• 2TU, AC=03, CWOV=88, …Driver of plow is PED type 26

AC=Crash Class / TU=Traffic Unit / PT=Ped Type / ST-Seat Type / CWOV=Collision with other motor veh.

Miscellaneous	• Vehicle hits **Horse–n-buggy (not a TU)-** …..	• 1 TU, AC=09, occup. are peds (24).
	• **Horse w/ a rider** kicks, backs into, etc. a vehicle	• 1 TU, AC=02, Ped=23
	• **School buses** used <u>other than for school</u>	• Body Type=16
	• Vehicle traveled off roadway then struck by another vehicle	• 1 TU, AC=04, Sp Cond=4
	• Vehicle comes out of gear (or parking brake fails) and the unstabilized situation begins on or damage occurs on a public trafficway	• Is a TU & a reportable crash
	• Vehicle comes out of gear (or parking brake fails) and the unstabilized situation does NOT begin on or NO damage occurs on a public trafficway	• Not state-reportable
	• Vehicle traveled off roadway then struck building injuring residents inside	• AC=08, 2 or more TUs, PT=88
	• Vehicle hits an overhead bridge	• Fixed object=88, Road Special Features =02
	• Electric wheelchairs, motorized skateboards, etc.	• PED ST=88
	• Driver of a tractor on a public roadway	• ST 01 (driver)

AC=Crash Class / TU=Traffic Unit / PT=Ped Type / ST-Seat Type / CWOV=Collision with other motor veh.

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
PAWNEE COUNTY SHERIFF	J. THANOS	EXAMPLE 1	1 / 5

Investigating Officer Name	Badge Number	County	City Name
R. CONKLIN	46	PN	

☒ Amended Report

☒ DUI
☐ Hit & Run

I Accident Severity
Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
165.7			U056	HWY		65	05/02/2018	20:12	WE

From Dist	Ft/Mi	From Dir	○ FROM ◉ AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
					U183WJCT	HWY		65	05/02/2018	20:20	WE

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 WAS SOUTHBOUND ON US-183
V2 WAS TRAVELING NE ON US-56
V1 FAILED TO STOP AT STOP SIGN, COLLIDED WITH V2 AND THEN STRUCK A KDOT SIGN DUE TO DISTRACTION BY CELL PHONE.

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
05/02/2018	20:40	WE

Latitude (AOI): 38.01187
Longitude (AOI): -99.31413
Photos by

KDOT? ☒ Object 1 Damaged & Nature of Damage (show in diagram): HWY SIGN KNOCKED DOWN
Owner Street Address | Personal Phone

Owner Last Name: STATE OF KANSAS | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram)
Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

WORK ZONE TYPE

00	ON	AT	00

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

00 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

02 SURFACE TYPE ON / AT 02

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

01 SURFACE CONDITIONS ON / AT 01

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

12 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

04 +INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
(See Manual for Definitions)
99 Unknown

ROAD SPECIAL FEATURES (up to 3)

00 None
01 Bridge
02 Bridge Overhead
03 Railroad Bridge
04 RRXING
05 Interchange
06 Ramp
99 Unknown

1	2	3
00		

03 CRASH CLASS (mark 1 box per side) 03

1st Harmful Event / Most Harmful Event

00 Other non-collision
01 Overturned/Rollover
COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

03 *COLLISION WITH VEHICLE 03

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A — Type Present — OK/NF

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

1 O	1 08	1 OK
2 O	2 09	2 OK
3 A	3 03	3 OK
4	4	4
5	5	5

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 1

Page of
2 / 5

02 ON — **ROADWAY NUMBER OF LANES** — 02 AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 ON — **ROAD CHARACTER** — 01 AT

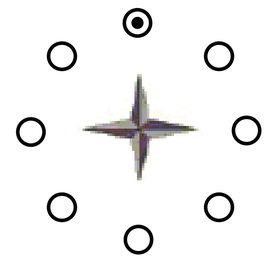
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 — **SPECIAL JURISDICTION**

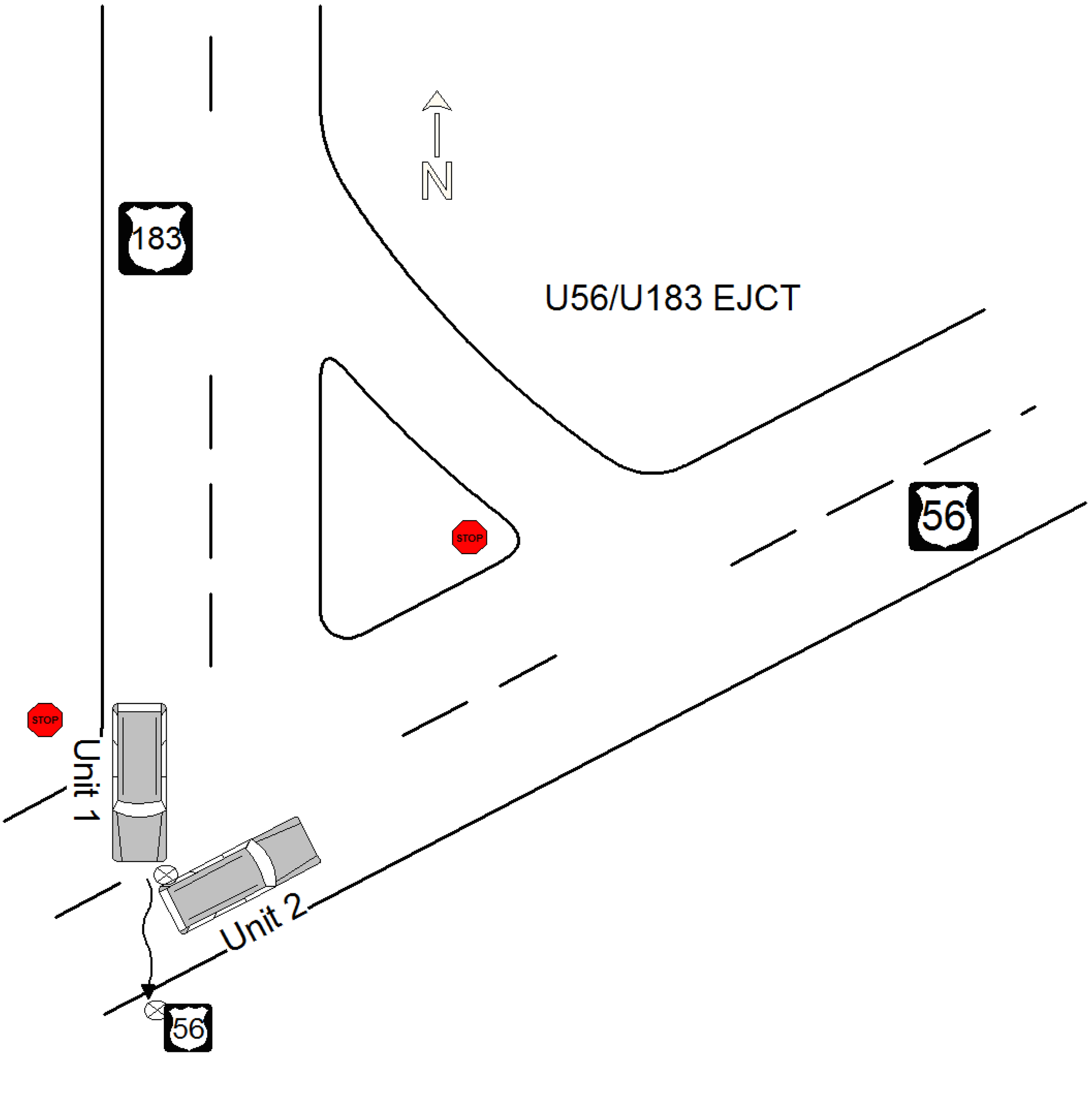
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: R. CONKLIN 46

Local Case No.: EXAMPLE 1

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TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1 20 | D1 02 | D1 30 | D1 31

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	PENNYWORTH	MN QUINN	3636 S JOKER AVE (New address? ☐)	Personal (913) 456-7890	M	R	D	A
ST 01	ALFRED	DOB 12/07/1941	GOTHAM KS 67411	Work	77	T		☒
TU 02	WAYNE	MN ALLEN	3636 S JOKER AVE (New address? ☐)	Personal (913) 555-1542	M	R	I	
ST 01	BRUCE	DOB 08/02/1972	GOTHAM KS 67411	Work	46	N		☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K01487546	C	☐	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions		Complied? Y	N
1			
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☒ AP - Alcohol ingested
- ☒ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☒
☒ 01 Evidential Test (Breath,Blood,etc)	☐
☒ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☒ PT - Prelim Positive Test (PBT)
- ☒ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☒ Evidentiary Breath 0.014 | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

TRAFFIC UNIT# 02 (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K02446712	C	☐	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? Y

Driver's Lic Restrictions		Complied? Y	N
1	B	Y	
2	G	N	
3			
4			

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 02	LOIS	MN LEE	7126 SE LEX LUTHER LN (New address? ☐)	Personal (785) 555-4456	F	R	D	B
ST 02	LANE	DOB 02/09/1973	SMALLVILLE KS 62113	Work (785) 555-3210	46	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit	EMS Time Notified	Injured taken by:	Transport Unit	EMS Time Notified	Injured taken by:
A	20:25	PAWNEE CO EMS	B	20:27	LARNED EMS
EMS Arrived	**EMS Time@Hosp**	**Injured taken to:**	**EMS Arrived**	**EMS Time@Hosp**	**Injured taken to:**
	21:25	PAWNEE CO GENERAL	20:52	21:35	LARNED CLINIC

Transport Units: A, B, C, ..., N

Occupants & Vehicles

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VEHICLE# 01 (01, 03, N3, X3, etc)	SPECIAL DATA	VEHICLE# 02 (02, 04, N2, X4, etc)	SPECIAL DATA	Local Case No.	Page of
				EXAMPLE 1	4 / 5

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name	OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME			SAME		

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone	OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone	CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST	COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
RED	2018	CHEV	EQX	4D	KS	BLK	2011	JEEP	WRG	LL	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs	LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
MNOFSTKL	RS	2012	LARNED TOWING		ONEJEP	JO	2019	LARNED TOWING	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants	VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
2G1WT55K589161513	S	1	1JFF845U4JI94F98F	NE	2

Insurance Company	Policy Number	Insurance Company	Policy Number
ALL COUNTY INS	528619	FARMHAND	88743392

SPECIAL CONDITIONS FOR TRAFFIC UNITS	1	2	3	4	5	Odometer	Fire?
	7					20002	☐

SPECIAL CONDITIONS FOR TRAFFIC UNITS	1	2	3	4	5	Odometer	Fire?
							☐

1 Hit & Run · 2 Non-Contact · 3 Stolen · 4 Legally Parked · 5 Pursued by LE · 6 Driverless · 7 Towed away due to damage

06 VEHICLE BODY TYPE

01 Automobile · 02 Motorcycle · 03 Motor scooter or Moped · 04 Van · 05 Pickup truck <10,001 lbs · 06 Sport utility veh - SUV · 07 Camper or RV · 08 Farm machinery · 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs · 11 Truck & trailer(s) · 12 Tractor-trailer(s) · 13 Cross country bus · 14 School bus · 15 Transit (city) bus · 16 Other bus · 25 Train · 88 Other: _____ · 99 Unknown

Calculated speed at impact: 57

Bus Seat Capacity: _____

Power Source: F

01 VEHICLE BODY TYPE

01 Automobile · 02 Motorcycle · 03 Motor scooter or Moped · 04 Van · 05 Pickup truck <10,001 lbs · 06 Sport utility veh - SUV · 07 Camper or RV · 08 Farm machinery · 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs · 11 Truck & trailer(s) · 12 Tractor-trailer(s) · 13 Cross country bus · 14 School bus · 15 Transit (city) bus · 16 Other bus · 25 Train · 88 Other: _____ · 99 Unknown

Calculated speed at impact: 64

Bus Seat Capacity: _____

Power Source: F

01 VEHICLE USE

01 No special use · 02 Taxi / Limo · 03 School bus · 04 Other bus · 05 Military · 06 Police · 07 Ambulance · 08 Fire · 09 Mail/Parcel · 99 Unknown

04 VEHICLE DAMAGE

00 None · 01 Damage (minor) · 02 Functional · 03 Disabling · 04 Destroyed · 88 Other: _____ · 99 Unknown

01 VEHICLE USE

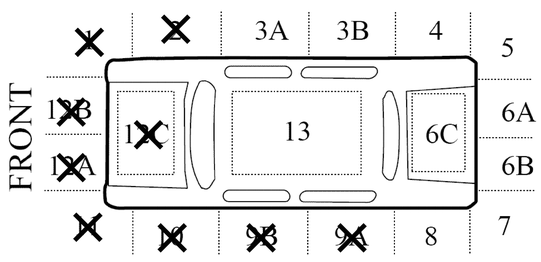
01 No special use · 02 Taxi / Limo · 03 School bus · 04 Other bus · 05 Military · 06 Police · 07 Ambulance · 08 Fire · 09 Mail/Parcel · 99 Unknown

03 VEHICLE DAMAGE

00 None · 01 Damage (minor) · 02 Functional · 03 Disabling · 04 Destroyed · 88 Other: _____ · 99 Unknown

DAMAGE LOCATION AREA

First Impact: 01 Major Impact: 12



☒ 14 Undercarriage · ☒ 15 Windshield · ☒ 16 Other windows · ☐ 99 Unknown · ☐ 17 Entire vehicle damaged · ☐ 88 Other: _____

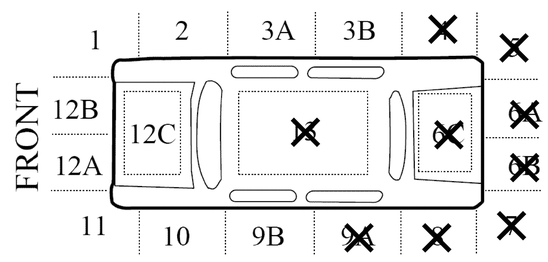
Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road · 02 Left Turn · 03 Right Turn · 04 U Turn · 05 Passing · 06 Changing lanes · 07 Avoidance man. · 08 Merging · 09 Parking · 10 Backing · 11 Stopped awaiting turn · 12 Stopped in traf · 13 Illegally parked · 14 Disabled in roadway · 15 Slowing or stopping · 16 Negotiating a curve · 88 Other: _____ · 99 Unknown

DAMAGE LOCATION AREA

First Impact: 09 Major Impact: 10



☒ 14 Undercarriage · ☐ 15 Windshield · ☒ 16 Other windows · ☐ 99 Unknown · ☐ 17 Entire vehicle damaged · ☐ 88 Other: _____

Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road · 02 Left Turn · 03 Right Turn · 04 U Turn · 05 Passing · 06 Changing lanes · 07 Avoidance man. · 08 Merging · 09 Parking · 10 Backing · 11 Stopped awaiting turn · 12 Stopped in traf · 13 Illegally parked · 14 Disabled in roadway · 15 Slowing or stopping · 16 Negotiating a curve · 88 Other: _____ · 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1	2	3	4
88	22	02	27

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right · 02 Ran off road left · 03 Crossed centerline · 04 Overturn/Rollover · 05 Crossed median · 06 Fell/Jumped from veh · 07 Thrown or falling object · 08 Cargo loss or shift · 09 Equipment failure (tire, brakes, etc.) · 10 Downhill runaway · 11 Trailer swing · 12 Separation of units · 13 Jackknife · 14 Fire · 15 Explosion · 16 Immersion in water · 88 Other event: FAILED TO YIELD · 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian · 22 Motor veh in-transport · 23 Legally Parked Vehicle · 24 Train · 25 Pedal cycle (bike, etc) · 26 Animal · 27 Fixed Object · 28 Other moveable object · 99 Unknown object

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1	2	3	4
22	03		

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right · 02 Ran off road left · 03 Crossed centerline · 04 Overturn/Rollover · 05 Crossed median · 06 Fell/Jumped from veh · 07 Thrown or falling object · 08 Cargo loss or shift · 09 Equipment failure (tire, brakes, etc.) · 10 Downhill runaway · 11 Trailer swing · 12 Separation of units · 13 Jackknife · 14 Fire · 15 Explosion · 16 Immersion in water · 88 Other event: _____ · 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian · 22 Motor veh in-transport · 23 Legally Parked Vehicle · 24 Train · 25 Pedal cycle (bike, etc) · 26 Animal · 27 Fixed Object · 28 Other moveable object · 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. R. CONKLIN	Local Case No. EXAMPLE 1	Page of 5 / 5

V1 WAS SOUTHBOUND ON US-183
V2 WAS TRAVELING NE ON US-56
V1 FAILED TO STOP AT STOP SIGN, COLLIDED WITH V2 AND THEN STRUCK A KDOT SIGN DUE TO DISTRACTION BY CELL PHONE.

R. CONKLIN

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
GOVE CO SHERIFF	WAKE	EXAMPLE 2	1 / 7

Investigating Officer Name	Badge Number	County	City Name
KERN	120	GO	

☐ Amended Report
☐ DUI
☐ Hit & Run

I Accident Severity
Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
90.0		E	I070	FWY		75	03/17/2018	20:12	SA

From Dist	Ft/Mi	From Dir	FROM/AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
25	F	E	◉ FROM ○ AT	N	WESTERN	RD		40	03/17/2018	20:20	SA

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
03/17/2018	20:40	SA

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 CLIPPED THE BACK END OF V2 CAUSING V2 TO LOSE CONTROL, CROSS THE MEDIAN, AND COLLIED WITH V3.

Latitude (AOI): 38.01187

Longitude (AOI): -99.31413

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

01 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

01 ON / 03 AT SURFACE TYPE

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

02 ON / 02 AT SURFACE CONDITIONS

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

11 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

04 +INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
00		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

03 CRASH CLASS (mark 1 box per side) **03**

1st Harmful Event | Most Harmful Event

00 Other non-collision
01 Overturned/Rollover
COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event | Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

00 ON / 00 AT WORK ZONE TYPE

00 None Apply
01 Construction Zone - KDOT? ☐
02 Maintenance Zone - KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

02 *COLLISION WITH VEHICLE (mark 1 box per side if applicable) **03**

1st Harmful Event | Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A | Type Present | OK/NF

	1	2	3
00 None	O	09	OK
01 Officer, flagger	2	2	2
02 Traffic signal	3	3	3
03 Stop sign	4	4	4
04 Flasher	5	5	5
05 Yield sign			
06 RR gates / signal			
07 RR crossing signs			
08 No passing zone			
09 Center/Edge lines			
10 Warning signs			
11 School zone signs			
12 Parking lines			
88 Other: _____			
99 Unknown			

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 2

Page of
2 / 7

04 ON | **ROADWAY NUMBER OF LANES** | 02 AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 ON | **ROAD CHARACTER** | 00 AT

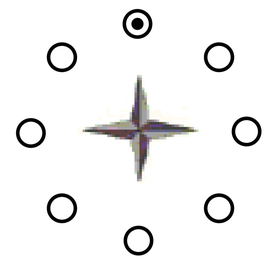
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

SPECIAL JURISDICTION

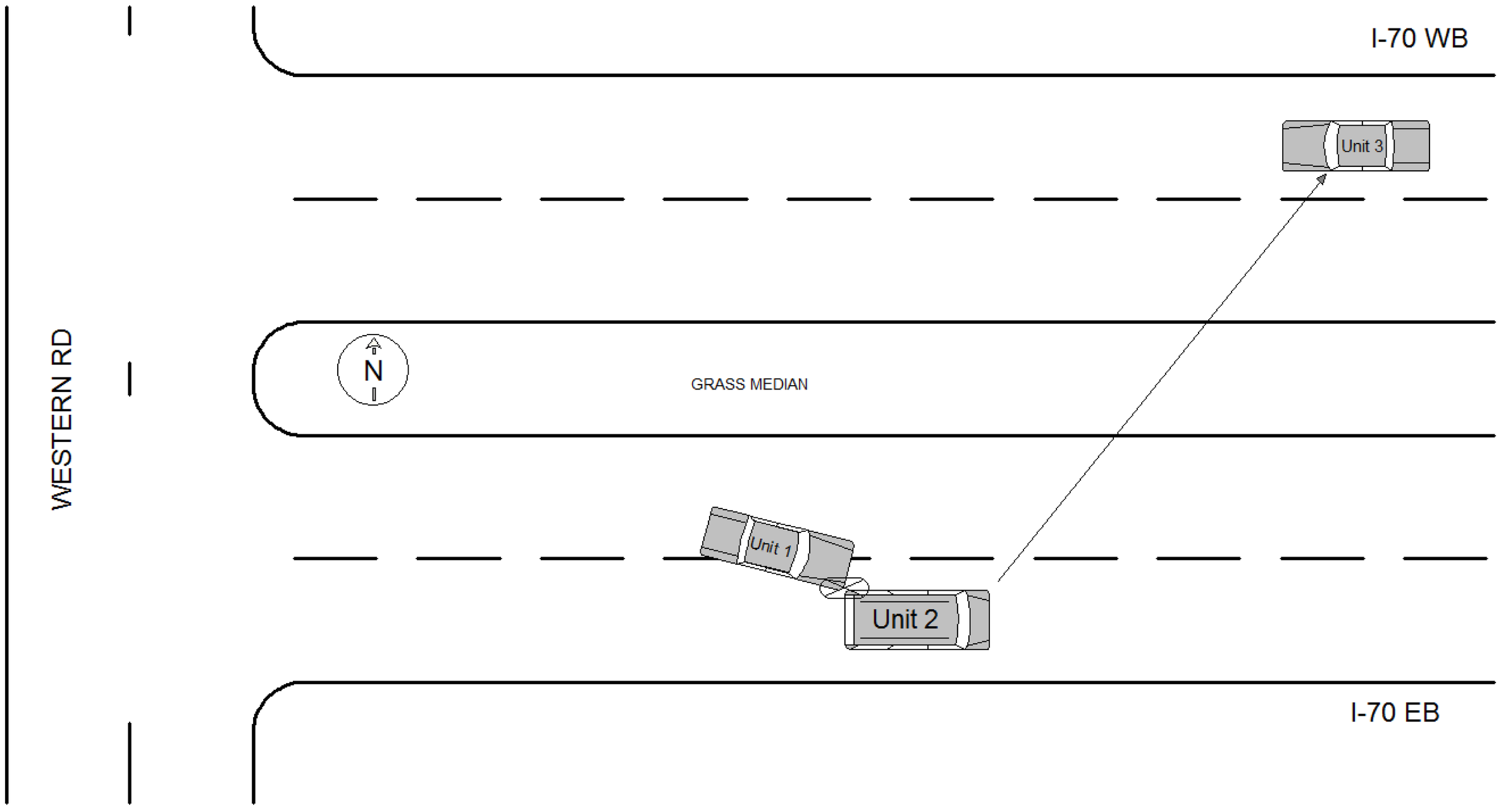
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: KERN 120

Local Case No.: EXAMPLE 2

Page of: 3 / 7

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1	35	D1	41	D2	00	D3	00	E	02	OR	01

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	METCALF	MN J	12123 SW 56TH AVE (New address? ☐)	Personal (785) 555-6317	F	J	N	
ST 01	SUSAN	DOB 01/20/1973	TOPEKA KS 66653	Work	45	N		☐
TU 02	FENDER	MN W	3636 S JOKER AVE (New address? ☐)	Personal (913) 555-1542	M	R	D	A
ST 01	JACOB	DOB 11/13/1959	GOTHAM KS 67411	Work	58	P	01	☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K01487546	C	☐	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? Y

	Driver's Lic Restrictions	Complied? Y	N
1	B	Y	
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result ☐

TRAFFIC UNIT# 02 (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K02446712	A	☐	☒

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? N

	Driver's Lic Restrictions	Complied? Y	N
1			
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 Z | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result ☐

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	HARRIS	MN L	456 SE LEX LUTHER LN (New address? ☐)	Personal (785) 555-4456	F	R	N	
ST 03	SHAUNDRA	DOB 09/15/1980	SMALLVILLE KS 62113	Work (785) 555-3210	37	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit	EMS Time Notified	Injured taken by:
A	20:25	AMR
EMS Arrived	**EMS Time@Hosp**	**Injured taken to:**
	21:25	HAYS MEDICAL

Transport Unit	EMS Time Notified	Injured taken by:
EMS Arrived	**EMS Time@Hosp**	**Injured taken to:**

Transport Units: A, B, C, ..., N

Occupants & Vehicles

850B page 2

Local Case No.: EXAMPLE 2

Page 4 / 7

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME		

OWNER ADDRESS (Number, Street): New address? ☐ | Personal Phone:

CITY | ST | ZIP | Work Phone:

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
WHI	2010	LINC	LS	4D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
MNOFSTKL	RS	2019	OWNER	

VEHICLE IDENTIFICATION NUMBER: 2G1WT55K589161513 | Dir of Travel: E | # Occupants: 2

Insurance Company: ALL STATE | Policy Number: 89719

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1 | 2 | 3 | 4 | 5 | Odometer: 20002 | Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV; 10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact: 69

Bus Seat Capacity: _____

Power Source: F

01 VEHICLE USE

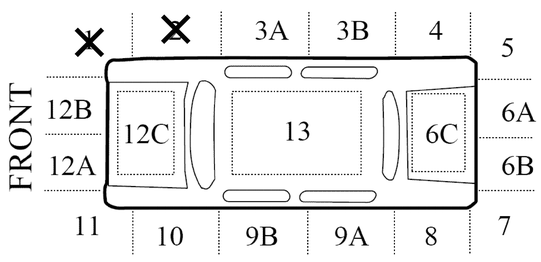
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

02 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 01 | Major Impact: 02



☐ 14 Undercarriage ☐ 15 Windshield
☐ 16 Other windows ☐ 99 Unknown
☐ 17 Entire vehicle damaged
☐ 88 Other: _____

☐ Trailer: Present / Damaged

05 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 03 | 2: 22 | 3: | 4: ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: FAILED TO YIELD; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; 99 Unknown object

VEHICLE# 02 (02, 04, N2, X4, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME		

OWNER ADDRESS (Number, Street): New address? ☐ | Personal Phone:

CITY | ST | ZIP | Work Phone:

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
RED	2011	DODG	CVN	VT	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
ONEJEP	JO	2019	LARNED TOWING	

VEHICLE IDENTIFICATION NUMBER: 1JFF845U4JI94F98F | Dir of Travel: NE | # Occupants: 1

Insurance Company: FARMHAND | Policy Number: 88743392

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 | 2 | 3 | 4 | 5 | Odometer: | Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

04 VEHICLE BODY TYPE

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV; 10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact: 64

Bus Seat Capacity: _____

Power Source: F

01 VEHICLE USE

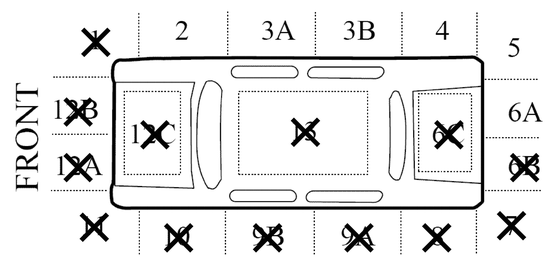
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

04 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 07 | Major Impact: 11



☒ 14 Undercarriage ☐ 15 Windshield
☒ 16 Other windows ☐ 99 Unknown
☐ 17 Entire vehicle damaged
☐ 88 Other: _____

☐ Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 22 | 2: 02 | 3: 05 | 4: 22 | ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; 99 Unknown object

Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: KERN 120

Local Case No.: EXAMPLE 2

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 03	DAVIS	MN Q	2165 NE CORN AVE (New address? ☐)	Personal (555) 554-8211	M	N	D	b
ST 01	ALLEN	DOB 09/21/1938	BAXTER OK 73115	Work	79	E	03	☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

TRAFFIC UNIT# 03 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
OK	435662889	C	☐	☐

01 — DR LICENSE COMPLY

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions		Complied? Y	N
1		☐	☐
2		☐	☐
3		☐	☐
4		☐	☐

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

01 — DR LICENSE COMPLY

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? ☐

Driver's Lic Restrictions		Complied? Y	N
1		☐	☐
2		☐	☐
3		☐	☐
4		☐	☐

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit	EMS Time Notified	Injured taken by:
B	11:22	RUSSELL CO EMS
EMS Arrived	EMS Time@Hosp	Injured taken to:
11:41	12:03	HAYS MEDICAL

Transport Unit	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Occupants & Vehicles

850B page 2

VEHICLE# 03 (01, 03, N3, X3, etc)	SPECIAL DATA	VEHICLE# (02, 04, N2, X4, etc)	SPECIAL DATA	Local Case No.	Page of
				EXAMPLE 2	6 / 7

VEHICLE# 03

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME		

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
GRN	2004	FORD	FIE	2D	OK

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
LOR658	RS	2019	TUCKER TOW	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
1GE445KMNN534O3I3	W	1

Insurance Company	Policy Number
CITY INS	28475499

SPECIAL CONDITIONS FOR TRAFFIC UNITS

1	2	3	4	5	Odometer	Fire?
7					110000	☐

1 Hit & Run · 2 Non-Contact · 3 Stolen · 4 Legally Parked · 5 Pursued by LE · 6 Driverless · 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile
02 Motorcycle
03 Motor scooter or Moped
04 Van
05 Pickup truck <10,001 lbs
06 Sport utility veh - SUV
07 Camper or RV
08 Farm machinery
09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs
11 Truck & trailer(s)
12 Tractor-trailer(s)
13 Cross country bus
14 School bus
15 Transit (city) bus
16 Other bus
25 Train
88 Other: _____
99 Unknown

Calculated speed at impact: 63

Bus Seat Capacity: _____

Power Source: F

01 VEHICLE USE

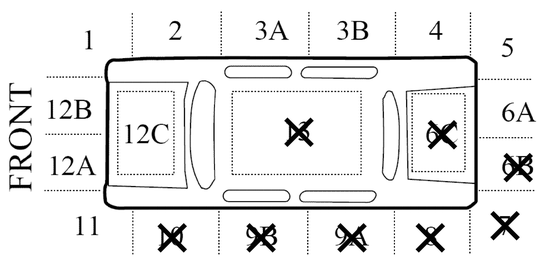
01 No special use
02 Taxi / Limo
03 School bus
04 Other bus
05 Military
06 Police
07 Ambulance
08 Fire
09 Mail/Parcel
99 Unknown

03 VEHICLE DAMAGE

00 None
01 Damage (minor)
02 Functional
03 Disabling
04 Destroyed
88 Other: _____
99 Unknown

DAMAGE LOCATION AREA

First Impact: 10 Major Impact: 09



☒ 14 Undercarriage · ☒ 15 Windshield
☒ 16 Other windows · ☐ 99 Unknown
☐ 17 Entire vehicle damaged
☐ 88 Other: _____

☐ Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road
02 Left Turn
03 Right Turn
04 U Turn
05 Passing
06 Changing lanes
07 Avoidance man.
08 Merging
09 Parking
10 Backing
11 Stopped awaiting turn
12 Stopped in traf
13 Illegally parked
14 Disabled in roadway
15 Slowing or stopping
16 Negotiating a curve
88 Other: _____
99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1	2	3	4
22	01		

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right
02 Ran off road left
03 Crossed centerline
04 Overturn/Rollover
05 Crossed median
06 Fell/Jumped from veh
07 Thrown or falling object
08 Cargo loss or shift
09 Equipment failure (tire, brakes, etc.)
10 Downhill runaway
11 Trailer swing
12 Separation of units
13 Jackknife
14 Fire
15 Explosion
16 Immersion in water
88 Other event: _____
98 Unknown non-coll.

COLLISION WITH

21 Pedestrian
22 Motor veh in-transport
23 Legally Parked Vehicle
24 Train
25 Pedal cycle (bike, etc)
26 Animal
27 Fixed Object
28 Other moveable object
99 Unknown object

VEHICLE#

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants

Insurance Company	Policy Number

SPECIAL CONDITIONS FOR TRAFFIC UNITS

1	2	3	4	5	Odometer	Fire?
						☐

1 Hit & Run · 2 Non-Contact · 3 Stolen · 4 Legally Parked · 5 Pursued by LE · 6 Driverless · 7 Towed away due to damage

VEHICLE BODY TYPE

01 Automobile
02 Motorcycle
03 Motor scooter or Moped
04 Van
05 Pickup truck <10,001 lbs
06 Sport utility veh - SUV
07 Camper or RV
08 Farm machinery
09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs
11 Truck & trailer(s)
12 Tractor-trailer(s)
13 Cross country bus
14 School bus
15 Transit (city) bus
16 Other bus
25 Train
88 Other: _____
99 Unknown

Calculated speed at impact: _____

Bus Seat Capacity: _____

Power Source: _____

VEHICLE USE

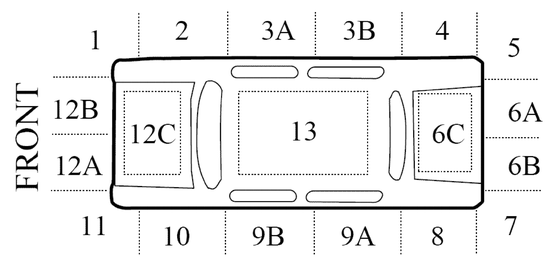
01 No special use
02 Taxi / Limo
03 School bus
04 Other bus
05 Military
06 Police
07 Ambulance
08 Fire
09 Mail/Parcel
99 Unknown

VEHICLE DAMAGE

00 None
01 Damage (minor)
02 Functional
03 Disabling
04 Destroyed
88 Other: _____
99 Unknown

DAMAGE LOCATION AREA

First Impact: _____ Major Impact: _____



☐ 14 Undercarriage · ☐ 15 Windshield
☐ 16 Other windows · ☐ 99 Unknown
☐ 17 Entire vehicle damaged
☐ 88 Other: _____

☐ Trailer: Present / Damaged

VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road
02 Left Turn
03 Right Turn
04 U Turn
05 Passing
06 Changing lanes
07 Avoidance man.
08 Merging
09 Parking
10 Backing
11 Stopped awaiting turn
12 Stopped in traf
13 Illegally parked
14 Disabled in roadway
15 Slowing or stopping
16 Negotiating a curve
88 Other: _____
99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1	2	3	4

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right
02 Ran off road left
03 Crossed centerline
04 Overturn/Rollover
05 Crossed median
06 Fell/Jumped from veh
07 Thrown or falling object
08 Cargo loss or shift
09 Equipment failure (tire, brakes, etc.)
10 Downhill runaway
11 Trailer swing
12 Separation of units
13 Jackknife
14 Fire
15 Explosion
16 Immersion in water
88 Other event: _____
98 Unknown non-coll.

COLLISION WITH

21 Pedestrian
22 Motor veh in-transport
23 Legally Parked Vehicle
24 Train
25 Pedal cycle (bike, etc)
26 Animal
27 Fixed Object
28 Other moveable object
99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. KERN 120	Local Case No. EXAMPLE 2	Page of 7 / 7

DRIVER 1: I LOST CONTROL WHILE ATTEMPTING TO PASS, VEERED TO THE RIGHT AND STUCK VEHICLE IN FRONT OF ME.

DRIVER 2: V1 HIT THE BACK OF MY CAR CAUSING ME TO LOSE CONTROL, GO ACROSS THE CENTER GRASS MEDIAN AND STRIKE A CAR IN THE OPPOSING LANES.

DRIVER 3: A VEHICLE CAME ACROSS THE MEDIAN AND STRUCK MY VEHICLE. I COULD NOT AVOID THE CRASH DUE TO OTHER TRAFFIC AND THE WEATHER CONDITIONS.

OFFICER SUMMARY: BECAUSE OF THE WET PAVEMENT AND TRAVELING SPEED, THE DRIVER OF V1 APPEARED TO HYDROPLANE AND CLIP THE BACK OF V2 CAUSING V2 TO LOSE CONTROL AND CROSS THE MEDIAN GOING INTO THE WB LANES AND COLLIDING WITH V3.

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
WICHITA POLICE	BALE	EXAMPLE 3	1 / 6

Investigating Officer Name	Badge Number	County	City Name
RONALD	610	SG	WICHITA

☒ Amended Report

☒ DUI
☐ Hit & Run

I Accident Severity
Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
	1535	S	OLIVER	ST		40	06/10/2018	20:12	SU

From Dist	Ft/Mi	From Dir	○ FROM ◉ AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
			◉ AT	W	HARRY	ST		40	06/10/2018	20:20	SU

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
06/10/2018	20:40	SU

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 AND V2 WERE TRAVELING IN THE ROUNDABOUT WHEN V1 STRUCK V2. V1 WAS TRAVELING AT A HIGH RATE OF SPEED. SEE AMENDED BAC/DRUG TEST RESULTS.

Latitude (AOI): 38.01187

Longitude (AOI): -99.31413

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

WORK ZONE TYPE

00 ON | AT 00

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

00 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

02 SURFACE TYPE

02 ON | AT 02

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

01 SURFACE CONDITIONS

01 ON | AT 01

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

12 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

06 +INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
00		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

03 CRASH CLASS (mark 1 box per side) 03

1st Harmful Event	Most Harmful Event

00 Other non-collision
01 Overturned/Rollover
COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event	Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

03 *COLLISION WITH VEHICLE 03

(mark 1 box per side if applicable)

1st Harmful Event	Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

	Type Present	OK/NF
1	1 O	1 OK
2	2 00	2
3	3	3
4	4	4
5	5	5

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 3

Page of
2 / 6

02 ON	**ROADWAY NUMBER OF LANES**	02 AT	01 ON	**ROAD CHARACTER**	01 AT	00	**SPECIAL JURISDICTION**

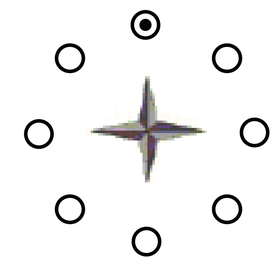
01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

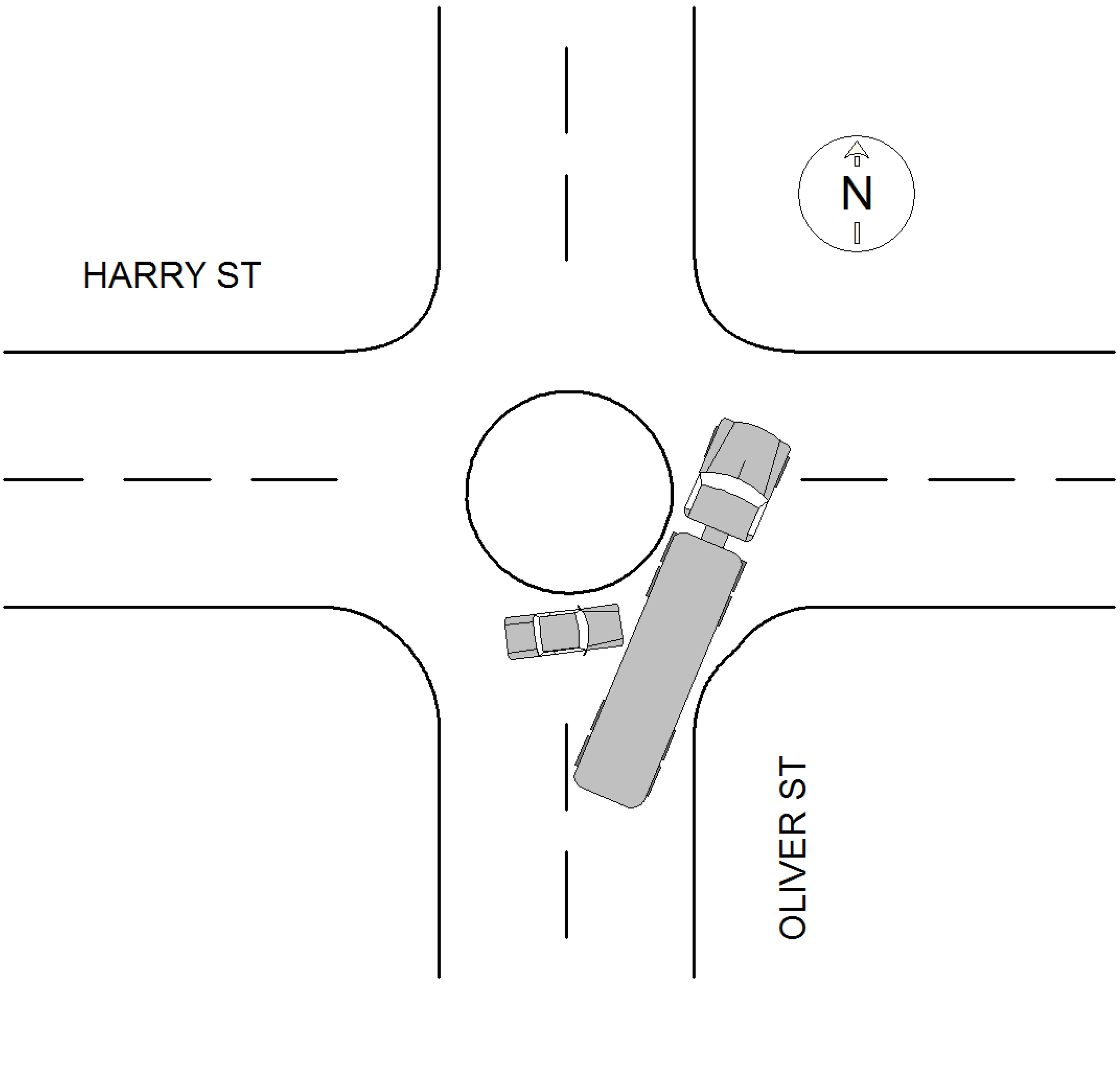
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: RONALD 610

Local Case No.: EXAMPLE 3

Page of: 3 / 6

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1	02	D1	20	D1	34	D1	01				

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	DUNN	MN J	2566 S SCOTLAND AVE (New address? ☐)	Personal (913) 456-7890	M	N	I	A
ST 01	BRYAN	DOB 01/22/2000	STRANGE KS 67411	Work	18	N		☐
TU 02	EARP	MN K	245 N GRANT ST (New address? ☐)	Personal (913) 555-1542	M	S	N	
ST 01	WYATT	DOB 08/02/1970	GODDARD KS 66231	Work	47	N		☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K08765474	C	☐	☐

DR LICENSE COMPLY — 07

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? Y

	Driver's Lic Restrictions	Complied? Y	N
1	H		N
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☒ AP - Alcohol ingested
- ☒ AC - Alcohol contributed
- ☒ DP - Illegal drugs ingested
- ☒ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☒ 01 Evidential Test (Breath,Blood,etc)	☒
☐ 02 Preliminary Breath Test PBT	
☒ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☒ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☒

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☒ TG - Evidentiary Test given
- ☒ RP - Results pending

ALCOHOL:
- ☐ Evidentiary Breath: 0.
- ☐ Eye Fluid: 0.
- ☒ Blood (BAC): 0.112
- ☐ Other: 0.

Drug screen result: P

TRAFFIC UNIT# 02 (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
TX	866432GU78	A	☒	☒

DR LICENSE COMPLY — 01

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? N

	Driver's Lic Restrictions	Complied? Y	N
1			
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 T | 2 | 3 | 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL:
- ☐ Evidentiary Breath: 0.
- ☐ Eye Fluid: 0.
- ☐ Blood (BAC): 0.
- ☐ Other: 0.

Drug screen result:

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit	EMS Time Notified	Injured taken by:
A	20:25	WICHITA EMS
EMS Arrived	EMS Time@Hosp	Injured taken to:
	21:25	WICHITA GENERAL

Transport Unit	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Occupants & Vehicles

850B page 2

VEHICLE# 01 (01, 03, N3, X3, etc)	SPECIAL DATA	VEHICLE# 02 (02, 04, N2, X4, etc)	SPECIAL DATA	Local Case No.	Page of
				EXAMPLE 3	4 / 6

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name	OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME			SAFEWAY TRUCKING		

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone	OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone	CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST	COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
GRY	2018	CHEV	CRZ	4D	KS	DBL	2011	MACK	TK	DS	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs	LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
MNOFSTKL	RS	2019	LARNED TOWING		BI489823	SN	2019	OWNER	KS

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants	VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
2G1WT55K589161513	E	1	1JFF845U4JI94F98F	N	1

Insurance Company	Policy Number	Insurance Company	Policy Number
ALL COUNTY INS	528619	TRUCK CO	884773-NNU77

SPECIAL CONDITIONS FOR TRAFFIC UNITS	1	2	3	4	5	Odometer	Fire?
	7					20002	☐
SPECIAL CONDITIONS FOR TRAFFIC UNITS	1	2	3	4	5	Odometer	Fire?
							☐

1 Hit & Run · 2 Non-Contact · 3 Stolen · 4 Legally Parked · 5 Pursued by LE · 6 Driverless · 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile · 02 Motorcycle · 03 Motor scooter or Moped · 04 Van · 05 Pickup truck <10,001 lbs · 06 Sport utility veh - SUV · 07 Camper or RV · 08 Farm machinery · 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs · 11 Truck & trailer(s) · 12 Tractor-trailer(s) · 13 Cross country bus · 14 School bus · 15 Transit (city) bus · 16 Other bus · 25 Train · 88 Other: _____ · 99 Unknown

Calculated speed at impact: 45

Bus Seat Capacity: _____

Power Source: F

12 VEHICLE BODY TYPE

01 Automobile · 02 Motorcycle · 03 Motor scooter or Moped · 04 Van · 05 Pickup truck <10,001 lbs · 06 Sport utility veh - SUV · 07 Camper or RV · 08 Farm machinery · 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs · 11 Truck & trailer(s) · 12 Tractor-trailer(s) · 13 Cross country bus · 14 School bus · 15 Transit (city) bus · 16 Other bus · 25 Train · 88 Other: _____ · 99 Unknown

Calculated speed at impact: 20

Bus Seat Capacity: _____

Power Source: F

01 VEHICLE USE

01 No special use · 02 Taxi / Limo · 03 School bus · 04 Other bus · 05 Military · 06 Police · 07 Ambulance · 08 Fire · 09 Mail/Parcel · 99 Unknown

03 VEHICLE DAMAGE

00 None · 01 Damage (minor) · 02 Functional · 03 Disabling · 04 Destroyed · 88 Other: _____ · 99 Unknown

01 VEHICLE USE

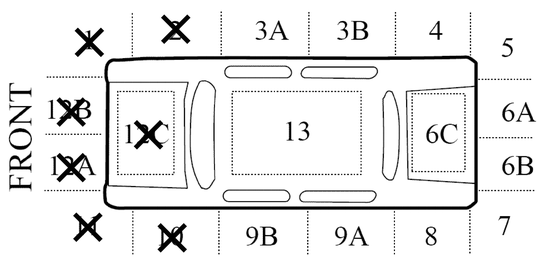
01 No special use · 02 Taxi / Limo · 03 School bus · 04 Other bus · 05 Military · 06 Police · 07 Ambulance · 08 Fire · 09 Mail/Parcel · 99 Unknown

01 VEHICLE DAMAGE

00 None · 01 Damage (minor) · 02 Functional · 03 Disabling · 04 Destroyed · 88 Other: _____ · 99 Unknown

DAMAGE LOCATION AREA

First Impact: 12 Major Impact: 12



☒ 14 Undercarriage · ☒ 15 Windshield · ☐ 16 Other windows · ☐ 99 Unknown · ☐ 17 Entire vehicle damaged · ☐ 88 Other: _____

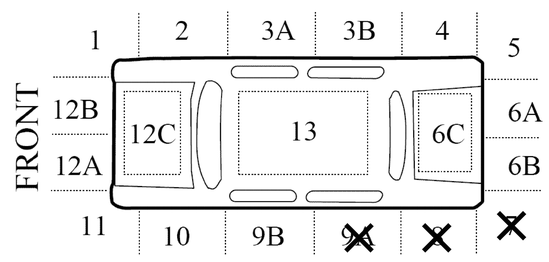
Trailer: Present / Damaged

02 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road · 02 Left Turn · 03 Right Turn · 04 U Turn · 05 Passing · 06 Changing lanes · 07 Avoidance man. · 08 Merging · 09 Parking · 10 Backing · 11 Stopped awaiting turn · 12 Stopped in traf · 13 Illegally parked · 14 Disabled in roadway · 15 Slowing or stopping · 16 Negotiating a curve · 88 Other: _____ · 99 Unknown

DAMAGE LOCATION AREA

First Impact: 88 Major Impact: 88



☒ 14 Undercarriage · ☐ 15 Windshield · ☐ 16 Other windows · ☐ 99 Unknown · ☐ 17 Entire vehicle damaged · ☒ 88 Other: TRAILER

D Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road · 02 Left Turn · 03 Right Turn · 04 U Turn · 05 Passing · 06 Changing lanes · 07 Avoidance man. · 08 Merging · 09 Parking · 10 Backing · 11 Stopped awaiting turn · 12 Stopped in traf · 13 Illegally parked · 14 Disabled in roadway · 15 Slowing or stopping · 16 Negotiating a curve · 88 Other: _____ · 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1	2	3	4
22			

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right · 02 Ran off road left · 03 Crossed centerline · 04 Overturn/Rollover · 05 Crossed median · 06 Fell/Jumped from veh · 07 Thrown or falling object · 08 Cargo loss or shift · 09 Equipment failure (tire, brakes, etc.) · 10 Downhill runaway · 11 Trailer swing · 12 Separation of units · 13 Jackknife · 14 Fire · 15 Explosion · 16 Immersion in water · 88 Other event: FAILED TO YIELD · 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian · 22 Motor veh in-transport · 23 Legally Parked Vehicle · 24 Train · 25 Pedal cycle (bike, etc) · 26 Animal · 27 Fixed Object · 28 Other moveable object · 99 Unknown object

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1	2	3	4
22			

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right · 02 Ran off road left · 03 Crossed centerline · 04 Overturn/Rollover · 05 Crossed median · 06 Fell/Jumped from veh · 07 Thrown or falling object · 08 Cargo loss or shift · 09 Equipment failure (tire, brakes, etc.) · 10 Downhill runaway · 11 Trailer swing · 12 Separation of units · 13 Jackknife · 14 Fire · 15 Explosion · 16 Immersion in water · 88 Other event: _____ · 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian · 22 Motor veh in-transport · 23 Legally Parked Vehicle · 24 Train · 25 Pedal cycle (bike, etc) · 26 Animal · 27 Fixed Object · 28 Other moveable object · 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. RONALD 610	Local Case No. EXAMPLE 3	Page of 5 / 6

V1 WAS EASTBOUND ON HARRY ST IN THE ROUNDABOUT TRAVELING AT A HIGH RATE OF SPEED.
V2 WAS TRAVELING NORTHBOUND ON OLIVER IN THE ROUNDABOUT.
V1 WAS TRAVELING TOO FAST AND COLLIDED INTO V2 TRAILER. DRIVER OF V1 HAD OPEN CONTAINERS AND WAS VISUALLY INTOXICATED. DRIVER OF V1 FAILED BEHAVIORIAL TEST.

AMENDED REPORT 7/21/2018, RESULTS FROM KBI LAB = BAC .112, POSITIVE COCAINE

☐ Completed Post Crash Inspection

HEAVY VEHICLE & HAZMAT Supplement

KDOT Form 852 - Rev. 2019

INFORMATION ON HEAVY VEHICLES / BUSES / HAZARDOUS MATERIALS

Investigating Officer / Badge No.: RONALD 610

Local Case No.: EXAMPLE 3

Page 6 / 6

MOTOR CARRIER INFORMATION

TU #	Carrier Name	Carrier Street Address (P.O. Box only if no street address)	City
02	SAFEWAY TRUCKING	1515 SW WANAMAKER	TOPEKA

State	Zip	Phone	Carrier Country
KS	66604	(785) 555-6632	USA

CARRIER IDENTIFICATION NUMBER(S)

USDOT#	MC/MX#	NONE
325478	644112	☐

0 CARRIER TYPE

0 - Intrastate 1 - Interstate 2 - Not in Commerce - Other Truck or Bus 3 - Not in Commerce - Government Veh 4 - Other / Not Specified

01 AT THE TIME OF CRASH, THIS VEHICLE WAS:

01 Operating on a trafficway open to the public (In-Transport)
02 Parked on or off the trafficway
88 Other: _____
99 Unknown

03 GVWR/GCWR

01 10,000 lbs or less
02 10,001-26,000 lbs
03 More than 26,000 lbs
99 Unknown

ACTUAL WEIGHT: 73800 lbs

01 SOURCE OF CARRIER NAME

01 Side of vehicle
02 Shipping papers or manifest
03 Driver
04 Logbook

PERMITS (Issuer and Permit Number)

1.	KCC	101436
2.		
3.		

VEHICLE INFORMATION

TRAILER DIMENSIONS

	WIDTH (in)	LENGTH (ft)
Trailer 1		
Trailer 2		
Trailer 3		

TRAILER(s) DAMAGED?

☐ None
☐ Trailer 1
☐ Trailer 2
☐ Trailer 3

OVERSIZED LOAD

☐ Height
☐ Weight
☐ Width

TRUCK AND TRAILER TOTALS

Vehicle Length (include trailer(s)): 24 ft No. of Trailers: 1 No. of Axles: 5

TRAILER 1 - IDENTIFICATION NUMBER

TRAILER 2 - IDENTIFICATION NUMBER

TRAILER 3 - IDENTIFICATION NUMBER

HAZMAT / ROADWAY INFORMATION

HAZARDOUS MATERIALS INVOLVEMENT

Did the vehicle have a Hazardous Materials Placard? ☐

If Yes, Include The Following Information From The Placard:

HazMat 4-digit # from the diamond center box:

HazMat Class # from the bottom of diamond:

HazMat Weight (lbs)

Was HazMat released (spilled) from THIS vehicle's cargo? ☐

00 ON-ROAD LANE TYPE

00 Two-way traffic - Undivided roadway
01 One-way traffic - Undivided roadway
02 Two-way traffic - Median strip w/o barrier
03 Two-way traffic - Median strip w/ barrier
04 Two-way traffic - Undivided with a continuous left turn lane
99 Unknown

00 VEHICLE ACCESS CONTROL TO ROADWAYS

00 No access control (Unlimited access - Roads with no interchanges)
01 Partial access control (mix of interchanges and "at-grade" intersections)
02 Full access control (entry/exit only by interchange ramps)
99 Unknown

SEE BACK OF THIS FORM FOR EXAMPLES OF VEHICLE CONFIGURATIONS AND CARGO TYPES

06 VEHICLE CONFIGURATION

00 Bus 9-15 passengers, including driver
01 Bus more than 15 passengers
02 Single-unit truck (2-axles)
03 Single-unit truck (3 or more axles)
04 Single-unit truck with trailer(s)
05 Truck Tractor only (bobtail)
06 Truck Tractor and semi-trailer
07 Truck Tractor and two trailers
08 Truck Tractor and three trailers
09 Heavy truck > 10,000 lbs cannot classify
10 Vehicles less than 10,000 lbs carrying hazardous materials
88 Other: _____
99 Unknown

01 CAB TYPE

01 Cab behind engine
02 Cab over engine
99 Unknown

00 CARGO BODY TYPE

00 Not applicable/No cargo body
01 Van or Enclosed box
02 Hopper (e.g. Grain, Chips, Gravel)
03 Cargo tank (liquid, powder, etc)
04 Flatbed
05 Dump
06 Concrete mixer
07 Vehicle transporter
08 Garbage or refuse
09 Bus 9-15 people, including driver
10 Bus more than 15 people
11 Pole
12 Vehicle towing another motor vehicle
13 Intermodal chassis
14 Logging
88 Other: _____
99 Unknown

06 CARGO TYPE

00 None
01 Drive away or Tow away
02 Explosives
03 Animals: farm or other
04 Farm products
05 Gases
06 General freight (packages)
07 Heavy machinery, objects
08 Household goods
09 Liquids (bulk)
10 Logs, poles, lumber
11 Metal (coils, sheets, etc)
12 Mobile / Modular home
13 Motor vehicles
14 Refrigerated foods
15 Solids (bulk)
16 Rock, sand, gravel, salt
17 Other food products
18 Plastic products
19 People
20 Garbage / refuse
21 Pavement mixture: concrete, asphalt, etc.
88 Other: _____
99 Unknown

SPECIAL DATA

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
TOPEKA POLICE	K. BONES	EXAMPLE 4	1 / 5

Investigating Officer Name	Badge Number	County	City Name
HAWKINS	312	SN	TOPEKA

☐ Amended Report
☐ DUI
☐ Hit & Run

I Accident Severity
Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
	3200	SW	GAGE	BLVD		40	04/21/2018	21:05	SA

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
50	F	N	◉ FROM ○ AT		I470	RAMP			04/21/2018	21:06	SA

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V2 MADE A LEFT TURN INTO THE NB LANES OF GAGE FROM THE EB I470 EXIT RAMP. V1 FAILED TO STOP AT THE RED LIGHT AND COLLIDED WITH V2 IN A KDOT MAINTENANCE ZONE. V1 THEN VEERED RIGHT AND STRUCK A KDOT SIGN.

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
04/21/2018	21:11	SA

Latitude (AOI): 38.01187
Longitude (AOI): -99.31413
Photos by:

WORK ZONE TYPE — 02 ON / AT
00 None Apply
01 Construction Zone -
02 Maintenance Zone - (KDOT? ☒)
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI) — 04
01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY — 01
01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

***COLLISION WITH VEHICLE** — 02
(mark 1 box per side if applicable)

1st Harmful Event	Most Harmful Event
01 Head on	
02 Rear end	
03 Angle - side impact	
04 Sideswipe: opposite direction	
05 Sideswipe: Same direction	
06 Backed into	
88 Other: _____	
99 Unknown	

TRAFFIC CONTROLS

(On / At Road) O/A — Type Present — OK/NF

	1st	2nd	3rd
	1 O	1 02	1 OK
	2 O	2 09	2 OK
	3 O	3 10	3 OK
	4	4	4
	5	5	5

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

KDOT? ☒ Object 1 Damaged & Nature of Damage (show in diagram): SIGN - BROKE POST
Owner Street Address / Personal Phone
Owner Last Name: KDOT / First Name / Middle Name / City / State / Zip / Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram)
Owner Street Address / Personal Phone
Owner Last Name / First Name / Middle Name / City / State / Zip / Work Phone

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

LIGHT CONDITIONS — 04
01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

ADVERSE WEATHER CONDITIONS — 00
00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

SURFACE TYPE — 01 ON / AT
01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

SURFACE CONDITIONS — 01 ON / AT
01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

CRASH LOCATION (of 1st Harmful Event) — 15
ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza
OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+INTERSECTION TYPE — 08
01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
(See Manual for Definitions)
99 Unknown

ROAD SPECIAL FEATURES (up to 3)
00 None — 1: 05 — 2: — 3:
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

CRASH CLASS — 03 / 03
(mark 1 box per side)

1st Harmful Event	Most Harmful Event
00 Other non-collision	
01 Overturned/Rollover	
COLLISION WITH:	
02 Pedestrian	
03 Motor vehicle in-transport*	
04 Legally Parked Vehicle	
05 Railway train	
06 Pedal cyclist	
07 Animal Type: _____	
08 Fixed object**	
09 Other object: _____	
99 Unknown	

****FIXED OBJECT TYPE**
(mark 1 box per side if applicable)

1st Harmful Event	Most Harmful Event
01 Bridge structure	
02 Bridge rail	
03 Crash cush./Impact attenuator	
04 Divider, median barrier	
05 Overhead sign support	
06 Utility devices: pole,meter,etc	
07 Other post or pole	
08 Building	
09 Guardrail	
10 Sign post	
11 Culvert	
12 Curb	
13 Fence/Gate	
14 Hydrant	
15 Barricade	
16 Mailbox	
17 Ditch	
18 Embankment	
19 Wall	
20 Tree	
21 RRXING fixtures	
88 Other: _____	
99 Unknown	

Crash Diagram

850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.: EXAMPLE 4

Page 2 / 5

04 ROADWAY NUMBER OF LANES

ON AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 ROAD CHARACTER

ON AT

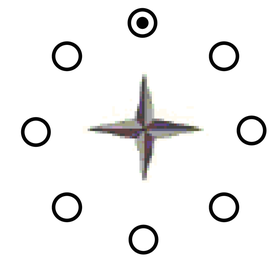
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 SPECIAL JURISDICTION

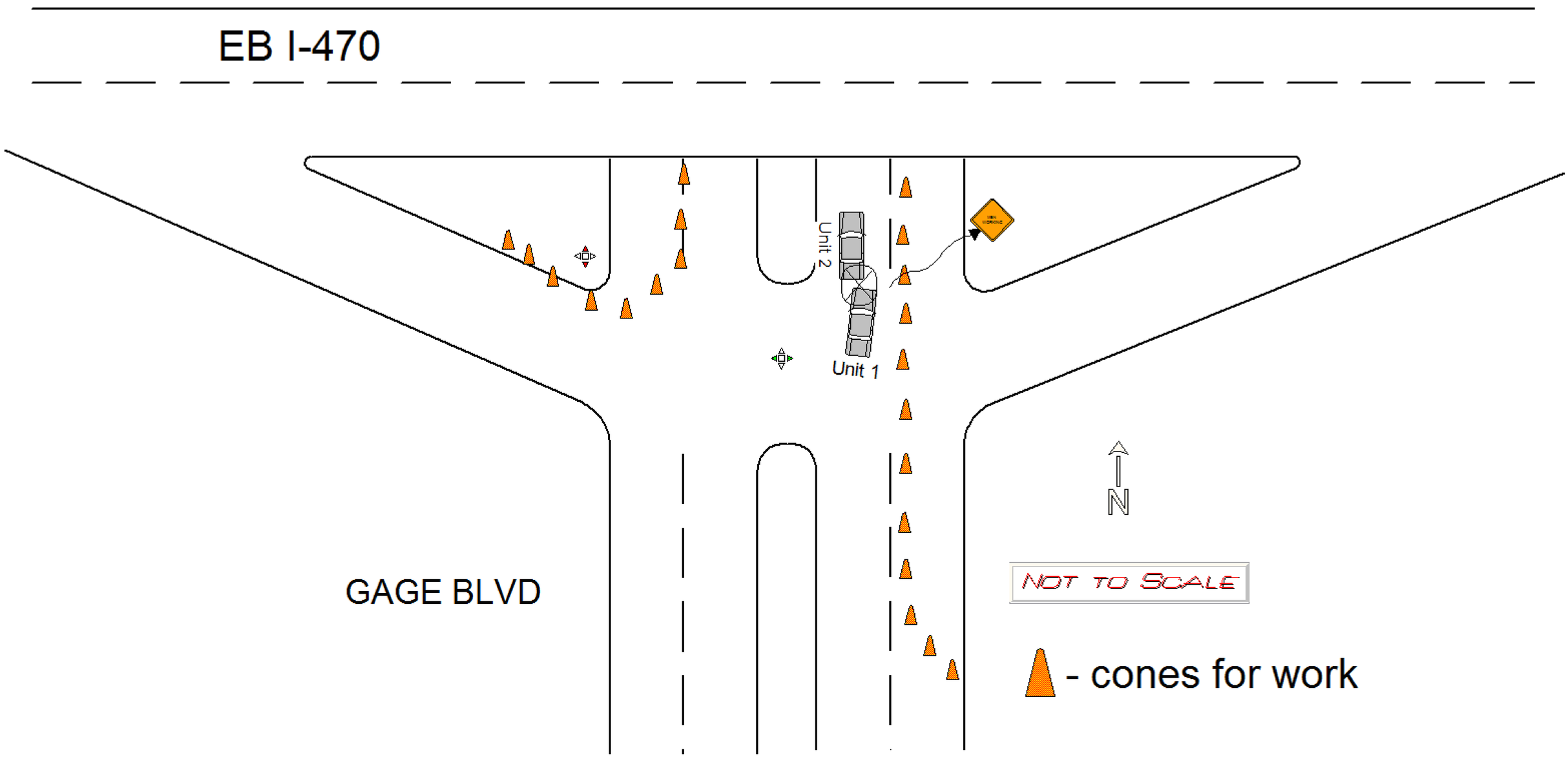
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: HAWKINS 312

Local Case No.: EXAMPLE 4

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1	20	D1	32	D1	06	D1	39	D1	37	D2	00

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	SAME	MN	New address? ☐	Personal	M	S	N	
ST 01		DOB 08/12/1944		Work	73	N		☐
TU 02	SHEPARD	MN M	New address? ☐ 6322 SW KANSAS AVE	Personal (785) 555-2256	F	R	I	
ST 01	JAMES	DOB 05/15/1989	TOPEKA KS 66612	Work	28	N		☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K06554778	C	☐	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? Y

	Driver's Lic Restrictions	Complied? Y N
1	B	Y
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 2 3 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result ☐

TRAFFIC UNIT# 02 (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K08533688	C	☐	☐

07 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? Y

	Driver's Lic Restrictions	Complied? Y N
1	H	Y
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 2 3 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result ☐

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Occupants & Vehicles

850B page 2

Local Case No.: EXAMPLE 4

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME		

OWNER ADDRESS (Number, Street): New address? ☐ | Personal Phone:

CITY | ST | ZIP | Work Phone:

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
ONG	2011	FORD	MUST	2D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
MNOFSTKL	RS	2012	REX TOWING	

VEHICLE IDENTIFICATION NUMBER: 2G1WT55K589161513 | Dir of Travel: S | # Occupants: 1

Insurance Company: ALL COUNTY INS | Policy Number: 528619

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 | 2: | 3: | 4: | 5: | Odometer: 103336 | Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact

Bus Seat Capacity _____

Power Source: F

01 VEHICLE USE

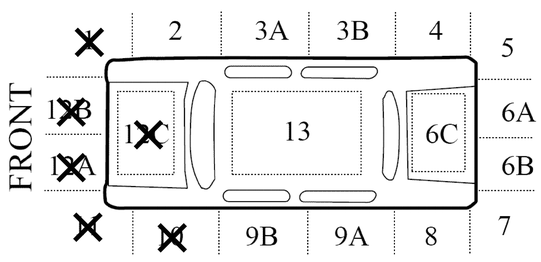
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

03 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 12 | Major Impact: 12



☒ 14 Undercarriage; ☐ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: _____

☐ Trailer: Present / Damaged

02 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 22 | 2: 01 | 3: 27 | 4: | ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; _____; 99 Unknown object

VEHICLE# 02 (02, 04, N2, X4, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
MARSTALL	TAMMY	M

OWNER ADDRESS (Number, Street): 6322 SW KANSAS AVE | New address? ☐ | Personal Phone: (785) 555-5562

CITY	ST	ZIP	Work Phone
TOPEKA	KS	66612	

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
WHI	2013	FORD	500	4D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
JDH888	SN	2019	BROWNS TOWING	

VEHICLE IDENTIFICATION NUMBER: 1JFF845U4JI94F98F | Dir of Travel: NE | # Occupants: 1

Insurance Company: FARMS INS | Policy Number: 88743392

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 | 2: | 3: | 4: | 5: | Odometer: 95023 | Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact

Bus Seat Capacity _____

Power Source: F

01 VEHICLE USE

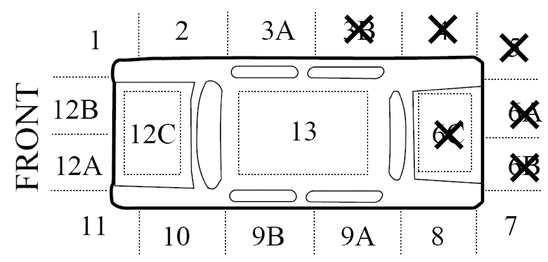
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

03 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 06 | Major Impact: 08



☐ 14 Undercarriage; ☐ 15 Windshield; ☒ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: _____

☐ Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 22 | 2: | 3: | 4: | ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; _____; 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. HAWKINS 312	Local Case No. EXAMPLE 4	Page of 5 / 5

V2 HAD JUST EXITED EB I470 RAMP AND MADE A LEFT TURN INTO THE NB LANES OF GAGE BLVD. D1 SAID SHE WAS MAD AT HER BOYFRIEND TEXTING HIM AND DID NOT SEE THE LIGHT CHANGE. V1 FAILED TO STOP AT THE RED LIGHT AND COLLIDED WITH V2. V1 THEN VEERED RIGHT AND STRUCK A KDOT SIGN. D1 SUSTAINED MINOR INJURIES. KDOT WAS PERFORMING MAINTENANCE WORK IN THE INTERCHANGE AREA AT THE TIME OF CRASH. THE NB RIGHT LANE WAS CLOSED OFF BY CONSTRUCTION.

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
ABILENE POLICE	ENGLER	EXAMPLE 5	1 / 5

Investigating Officer Name	Badge Number	County	City Name
HOUSE	007	DK	ABILENE

☐ Amended Report

☒ DUI

☐ Hit & Run

F Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
	620	W	JADE	RD		45	06/23/2018	08:01	SA

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
0.1	M	W	◉ FROM ○ AT	N	170TH	RD		45	06/23/2018	08:20	SA

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
06/23/2018	08:30	SA

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 WAS EB ON JADE RD AND FAILED TO AVOID A LEGALLY PARKED VEHICLE ON THE ROADWAYAND STRUCK IT, LEFT THE ROADWAY, HIT A DRAINGAGE CULVERT WALL AND OVERTURNED IN A DITCH.

Latitude (AOI)

Longitude (AOI)

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

WORK ZONE TYPE

00 ON AT

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

00 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

01 SURFACE TYPE ON AT

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

01 SURFACE CONDITIONS ON AT

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

11 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
00		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

04 CRASH CLASS (mark 1 box per side) **01**

1st Harmful Event | Most Harmful Event

00 Other non-collision
01 Overturned/Rollover
COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event | Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

***COLLISION WITH VEHICLE**

(mark 1 box per side if applicable)

1st Harmful Event | Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A

	1 Type Present	1 OK/NF
00 None	1 O	1 OK
01 Officer, flagger	09	
02 Traffic signal		
03 Stop sign		
04 Flasher		
05 Yield sign		
06 RR gates / signal		
07 RR crossing signs		
08 No passing zone		
09 Center/Edge lines		
10 Warning signs		
11 School zone signs		
12 Parking lines		

88 Other: _____
99 Unknown

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 5

Page of
2 / 5

02 **ROADWAY NUMBER OF LANES** ON / AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 **ROAD CHARACTER** ON / AT

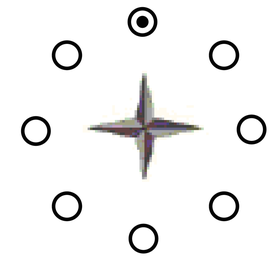
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 **SPECIAL JURISDICTION**

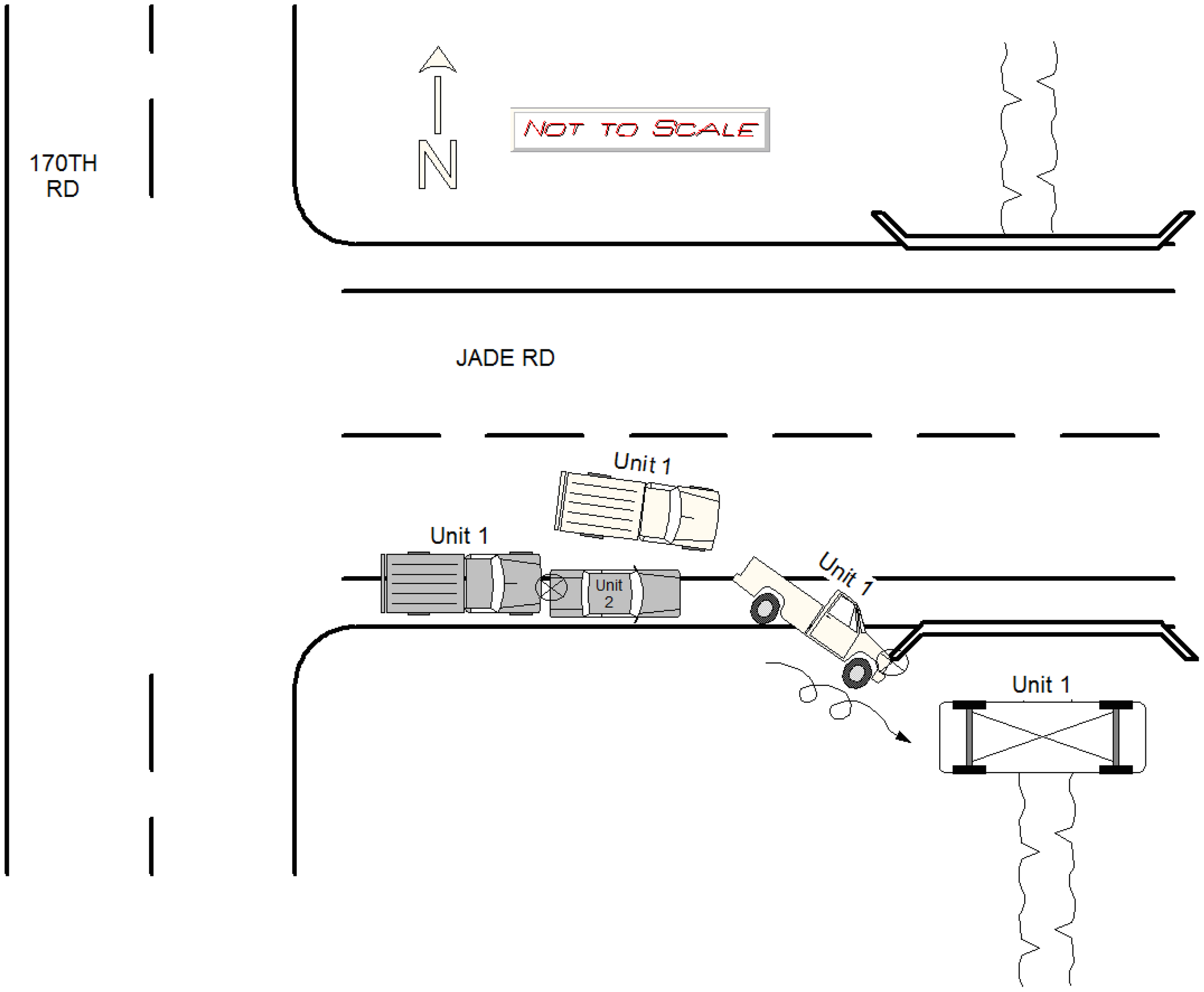
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: HOUSE 007

Local Case No.: EXAMPLE 5

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

V2	15	D1	02	D1	37	D1	38	D1	35	D1	34

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / DOB	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	FOSTER	MN WILLIAM	520 23RD AVE (New address? ☐)	Personal (984) 225-3355	M	P	F	A
ST 01	KEITH	DOB 05/22/1969	TINSELTON KS 67311	Work (984) 332-5547	49	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K00255668	C	☐	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☒ AP - Alcohol ingested
- ☒ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☒ 01 Evidential Test (Breath,Blood,etc)	☒
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☒ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☒ Eye Fluid 0.220 | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result: N

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? ☐

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result:

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / DOB	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit	EMS Time Notified	Injured taken by:
A	15:35	STORMONT VAIL EMS
EMS Arrived	EMS Time@Hosp	Injured taken to:
15:50	16:10	STORMONT VAIL HOSPITAL

Transport Unit	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Occupants & Vehicles

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Local Case No.: EXAMPLE 5

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME		

OWNER ADDRESS (Number, Street): New address? ☐ | Personal Phone:

CITY | ST | ZIP | Work Phone:

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
DGR	1980	CHEV	C25	PK	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
HHJJ44	SN	2019	JACKED TOW SERVICE	

VEHICLE IDENTIFICATION NUMBER: 1GH445K9FMRKR443 | Dir of Travel: E | # Occupants: 1

Insurance Company: UNINSURED | Policy Number:

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 | 2: | 3: | 4: | 5: | Odometer: 225036 | Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

05 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact

Bus Seat Capacity _____

Power Source: F

01 VEHICLE USE

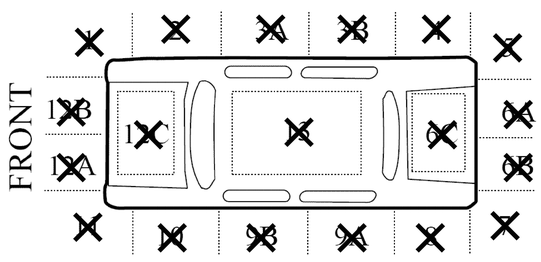
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

04 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 01 | Major Impact: 88



☒ 14 Undercarriage; ☒ 15 Windshield; ☒ 16 Other windows; ☐ 99 Unknown; ☒ 17 Entire vehicle damaged; ☐ 88 Other: OVERTURN

☐ Trailer: Present / Damaged

13 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 23 | 2: 01 | 3: 04 | 4: | ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; _____; 99 Unknown object

VEHICLE# X2 (02, 04, N2, X4, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
BOWIE	DAVID	W

OWNER ADDRESS (Number, Street): 2455 SW 46TH | New address? ☐ | Personal Phone: (555) 555-5555

CITY: GARLAND | ST: KS | ZIP: 71666 | Work Phone: (555) 555-5555

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
BRO	2006	DODG	AVN	4D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
WUZHIS	CD	2019	BOBS TOW	

VEHICLE IDENTIFICATION NUMBER: CKM24AJJDF43989 | Dir of Travel: E | # Occupants: 0

Insurance Company: GEICO | Policy Number: 77323-MJ1

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 4 | 2: 7 | 3: | 4: | 5: | Odometer: 96325 | Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact

Bus Seat Capacity _____

Power Source: F

01 VEHICLE USE

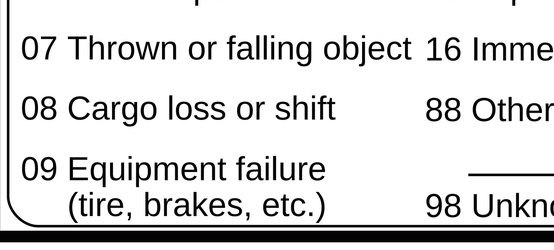
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

03 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 06 | Major Impact: 06



☐ 14 Undercarriage; ☐ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: _____

☐ Trailer: Present / Damaged

13 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 22 | 2: | 3: | 4: | ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; _____; 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. HOUSE 007	Local Case No. EXAMPLE 5	Page of 5 / 5

V1 WAS TRAVELING EB ON JADE RD AND REAR ENDED V2, A LEGALLY PARKED VEHICLE, THEN PROCEDED TO GO AROUND V2, LOST CONTROL AND DROVE OFF THE ROADWAY, STRIKING A DRAINAGE CULVERT, THEN OVERTURNED INTO THE DITCH. DRIVER OF V1 WAS PRONOUNCED DEAD AT THE SCENE FROM POSSIBLE WOUNDS OF THE CRASH AND ROLLOVER. DRIVER OF V1 WAS INTOXICATED WITH ALCOHOL PER EYE FLUID RESULTS.

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
KHP	J. BROWN	EXAMPLE 6	1 / 6

Investigating Officer Name	Badge Number	County	City Name
S. METCALF	771	LE	

☐ Amended Report

☒ DUI

☐ Hit & Run

PO Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
			190TH	RD		50	08/12/2018	15:02	SU

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
1.04	M	W	◉ FROM ○ AT		K023	HWY		65	08/12/2018	15:12	SU

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
08/12/2018	15:32	SU

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 WAS WB ON 190TH RD, FELL ASLEEP AND DRIFTED OFF THE ROADWAY AND STRUCK A BRIDGE RAIL.

Latitude (AOI): 38.01187

Longitude (AOI): -100.41413

Photos by

KDOT?	Object 1 Damaged & Nature of Damage (show in diagram)	Owner Street Address	Personal Phone
☒	BRIDGE RAIL SCRAPED	755 N 7TH ST	

Owner Last Name	First Name	Middle Name	City	State	Zip	Work Phone
PUBLIC WORKS	LANE CO		DIGHTON	KS	67839	(620) 397-5391

KDOT?	Object 2 Damaged & Nature of Damage (show in diagram)	Owner Street Address	Personal Phone
☐			

Owner Last Name	First Name	Middle Name	City	State	Zip	Work Phone

WORK ZONE TYPE

00 ON / AT 00

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

***COLLISION WITH VEHICLE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

16 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

02 SURFACE TYPE

ON / AT 02

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

02 SURFACE CONDITIONS

ON / AT 02

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

21 CRASH LOCATION

(of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown

(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
01		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

08 CRASH CLASS 08

(mark 1 box per side)

1st Harmful Event / Most Harmful Event

00 Other non-collision
01 Overturned/Rollover

COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

02 **FIXED OBJECT TYPE 02

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A ↓ Type Present ↓ OK/NF ↓

	1	2	3
1	O	00	
2			
3			
4			
5			

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 6

Page of
2 / 6

02 ON — **ROADWAY NUMBER OF LANES** — 04 AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 ON — **ROAD CHARACTER** — 01 AT

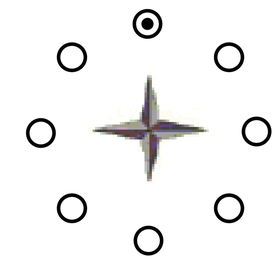
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 — **SPECIAL JURISDICTION**

00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available

Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: S. METCALF 771

Local Case No.: EXAMPLE 6

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1 05 D1 03

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	DENNY	MN S	815 S MAPLE ST (New address? ☐)	Personal (913) 456-7890	M	R	N	
ST 01	MICHAEL	DOB 06/19/1978	TOPEKA KS 55688	Work	40	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K01487546	A	☒	☒

01

DR LICENSE COMPLY

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? Y

Driver's Lic Restrictions		Complied? Y	N
1	B	Y	
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 S | 2 P | 3 | 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☒ MP - Medication ingested
- ☒ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☒
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☒ TG - Evidentiary Test given
- ☒ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result: P

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

DR LICENSE COMPLY

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions?

Driver's Lic Restrictions		Complied? Y	N
1			
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result:

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	LANE	MN LEE	7126 SE LEX LUTHER LN (New address? ☐)	Personal (785) 555-4456	F	N	N	
ST 04	LOU	DOB 02/09/1973	SMALLVILLE KS 62113	Work (785) 555-3210	45	N		☐
TU 01	GIBBS	MN S	2455 CRIGHTON RD (New address? ☐)	Personal (620) 999-9999	M	N	N	
ST 06	BILLY	DOB 02/05/2008	DIGHTON KS 67000	Work	10	N		☐
TU 01	KELLER	MN H	7562 CRIGHTON RD (New address? ☐)	Personal (620) 999-9999	M	N	N	
ST 07	JAMES	DOB 01/11/2009	DIGHTON KS 67000	Work	09	N		☐
TU 01	SMITH	MN L	9999 CRIGHTON (New address? ☐)	Personal (620) 999-9999	F	N	N	
ST 09	AMANDA	DOB 06/09/2010	DIGHTON KS 67000	Work	08	N		☐

Transport Unit ____	EMS Time Notified	Injured taken by:	Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:	EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Occupants & Vehicles

850B page 2

VEHICLE# 01 (01, 03, N3, X3, etc)	SPECIAL DATA	VEHICLE# (02, 04, N2, X4, etc)	SPECIAL DATA	Local Case No.	Page of
				EXAMPLE 6	4 / 6

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
DURHAM INC		

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone
999 W HARRISON ST		(620) 225-3558

CITY	ST	ZIP	Work Phone
DIGHTON	KS	66852	

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
YEL	2017	THMS	BUS	BU	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
KLP485590	LE	2019		

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
2G1WT55K589161513	W	8

Insurance Company	Policy Number
BIGBUS INS	3744-C

SPECIAL CONDITIONS FOR TRAFFIC UNITS 1 2 3 4 5

Odometer: 65220 — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

14 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: ____; 99 Unknown

Calculated speed at impact:

Bus Seat Capacity: 65

Power Source: F

03 VEHICLE USE

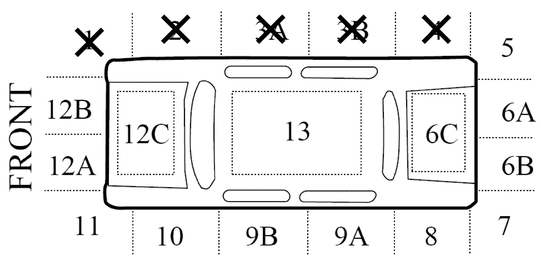
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

02 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: ____; 99 Unknown

DAMAGE LOCATION AREA

First Impact 01 Major Impact 02



☐ 14 Undercarriage ☐ 15 Windshield ☐ 16 Other windows ☐ 99 Unknown ☐ 17 Entire vehicle damaged ☐ 88 Other: ____

☐ Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: ____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 01 2: 27 3: 4:

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: ____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; ____; 99 Unknown object

---

VEHICLE# (02, 04, N2, X4, etc) | **SPECIAL DATA**

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants

Insurance Company	Policy Number

SPECIAL CONDITIONS FOR TRAFFIC UNITS 1 2 3 4 5

Odometer: ____ — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: ____; 99 Unknown

Calculated speed at impact:

Bus Seat Capacity: ____

Power Source: ____

VEHICLE USE

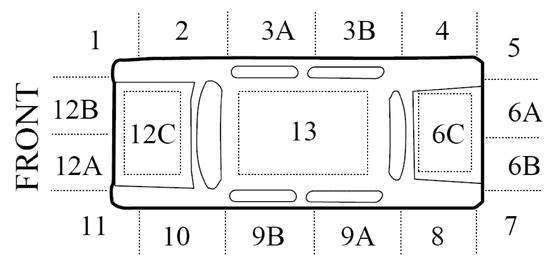
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: ____; 99 Unknown

DAMAGE LOCATION AREA

First Impact ____ Major Impact ____



☐ 14 Undercarriage ☐ 15 Windshield ☐ 16 Other windows ☐ 99 Unknown ☐ 17 Entire vehicle damaged ☐ 88 Other: ____

☐ Trailer: Present / Damaged

VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: ____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 2: 3: 4:

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: ____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; ____; 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. S. METCALF 771	Local Case No. EXAMPLE 6	Page of 5 / 6

V1 WAS TRAVELING WB ON 190TH RD WHEN THE DRIVER OF V1 DOZED OFF ASLEEP. AS A RESULT OF HIS FATIGUE, HE RAN OFF THE ROAD STRIKING THE BRIDGE RAIL. V1 WAS NOT TOWED AWAY AND NO OCCUPANTS WERE TRANSPORTED BY EMS. THE DRIVER WAS INJURED AND APPEARED TO BE IMPAIRED. DRIVER INDICATED HE HAD TAKEN SINUS MEDICATION FOR HIS COLD WHICH MADE HIM DROWSY.

Passengers & Pedestrians

KDOT Form 854 page 1 - Rev. 2019

LIST ADDITIONAL PASSENGERS BY TRAFFIC UNIT

Investigating Officer / Badge No.: S. METCALF 771

Local Case No.: EXAMPLE 6

Page 6 / 6

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	JONES	MN K	9852 CRIGHT RD New address? ☐	Personal (620) 225-4232	F	N	N	
ST 18	KYLIE	DOB 05/10/2008	DIGHTON KS 67779	Work	10	N		☐
TU 01	WAKE	MN E	999 S MAIN S New address? ☐	Personal (913) 225-6489	F	N	N	
ST 18	JONATHAN	DOB 09/12/2009	DIGHTON KS 68885	Work	08	N		☐
TU 01	FRANKENSTEIN	MN J	999 S MAIN New address? ☐	Personal (913) 225-6897	M	N	N	
ST 18	MARK	DOB 03/03/2007	DIGHTON KS 55633	Work	11	N		☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:	**Transport Unit** ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:	EMS Arrived	EMS Time@Hosp	Injured taken to:
Transport Unit ____	EMS Time Notified	Injured taken by:	**Transport Unit** ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:	EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
CHEROKEE CO SHERIFF	CHAPELLE	EXAMPLE 7	1 / 5

Investigating Officer Name	Badge Number	County	City Name
PEREZ	052	CK	

☐ Amended Report

☐ DUI

☐ Hit & Run

PO Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
		NE	SCRANTON	RD		55	04/05/2018	21:04	TH

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
0.025	M	E	◉ FROM ○ AT	NE	20TH	ST		45	04/05/2018	21:15	TH

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
04/05/2018	21:31	TH

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 BEGAN TO GOVE OFF SMOKE FROM THE HOOD. DRIVER PULLED OVER TO THE RIGHT SHOULDER AND THE ENGINE COMPARTMENT BURST INTO FLAMES.

Latitude (AOI): 37.28973

Longitude (AOI): -98.75615

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

WORK ZONE TYPE

00 ON | AT

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

05 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

00 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

01 SURFACE TYPE ON | AT

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

01 SURFACE CONDITIONS ON | AT

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

11 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
00		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

00 CRASH CLASS (mark 1 box per side) **00**

1st Harmful Event	Most Harmful Event

00 Other non-collision
01 Overturned/Rollover

COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event	Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

***COLLISION WITH VEHICLE**

(mark 1 box per side if applicable)

1st Harmful Event	Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A

	Type Present	OK/NF
1	O	OK
2		
3		
4		
5		

	Type Present	OK/NF
1	09	

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

Crash Diagram

850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.: EXAMPLE 7

Page 2 / 5

02 **ROADWAY NUMBER OF LANES**

ON AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 **ROAD CHARACTER**

ON AT

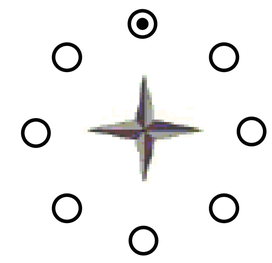
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 **SPECIAL JURISDICTION**

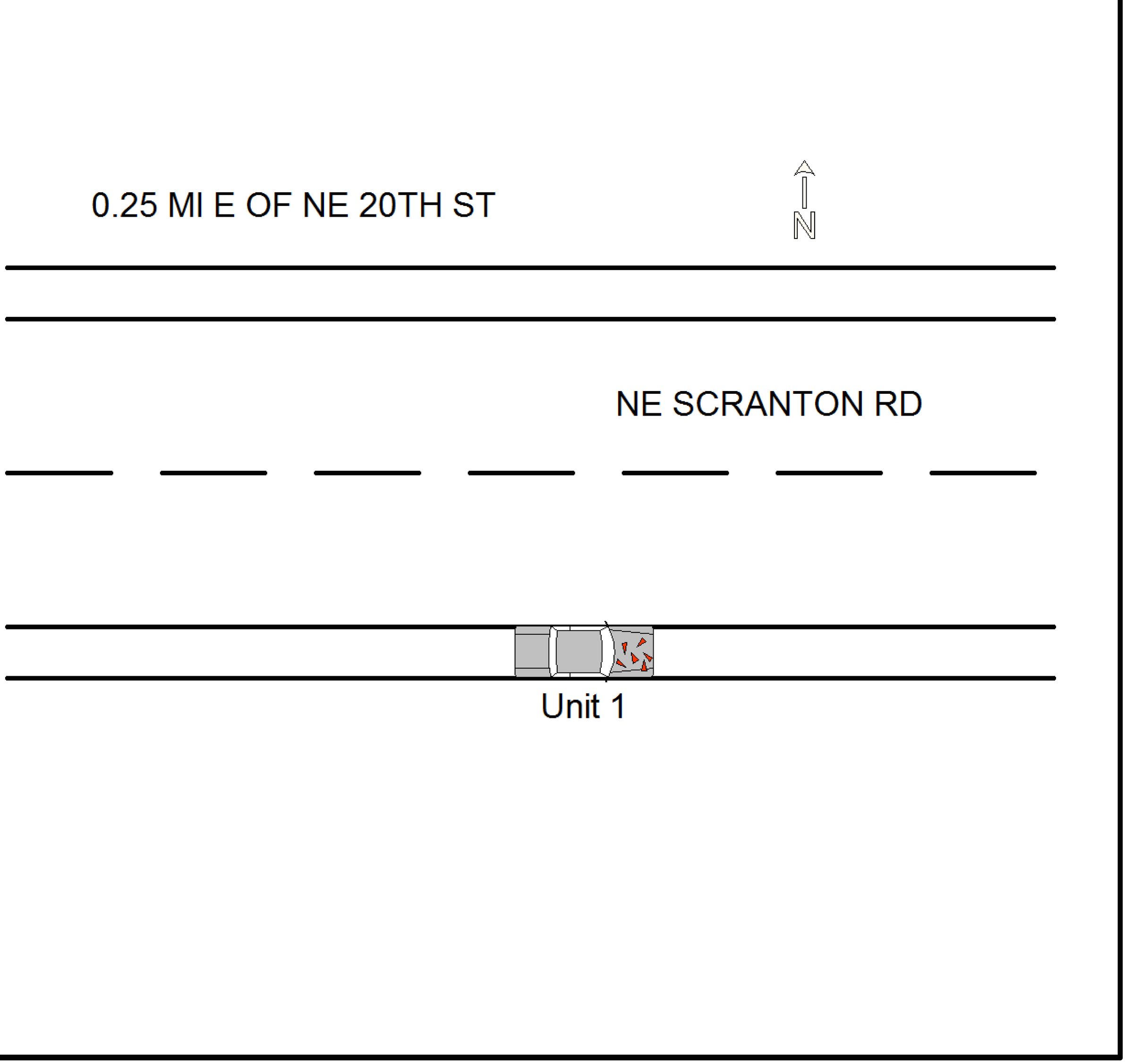
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: PEREZ 052

Local Case No.: EXAMPLE 7

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED	CITATION#

More violations in narrative ☐

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	DEAN	MN THOMAS	555 W WEST AVE (New address? ☐)	Personal (555) 555-5555	M	N	N	
ST 01	DAVID	DOB 12/19/1997	FAIRVILLE KS 66278	Work (555) 555-5555	20	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K03495643	C	☐	☐

DR LICENSE COMPLY — 01

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? Y

	Driver's Lic Restrictions	Complied? Y	N
1	B	Y	
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 2 3 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

DR LICENSE COMPLY

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions?

	Driver's Lic Restrictions	Complied? Y	N
1			
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 2 3 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

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ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Occupants & Vehicles

850B page 2

Local Case No.: EXAMPLE 7

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME		

OWNER ADDRESS (Number, Street) — New address? ☐ — Personal Phone

CITY — ST — ZIP — Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
BLU	2018	BUGA	VYR	2D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
2FAST4U	SN	2019	BUCKEYS TOW	

VEHICLE IDENTIFICATION NUMBER: 1GCDE444FDSXCCS — Dir of Travel: E — # Occupants: 1

Insurance Company: BIGTIME INS — Policy Number: DDO-MMDD3-A

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 — 2: — 3: — 4: — 5: — Odometer: — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: ____; 99 Unknown

Calculated speed at impact: ____

Bus Seat Capacity: ____

Power Source: F

01 VEHICLE USE

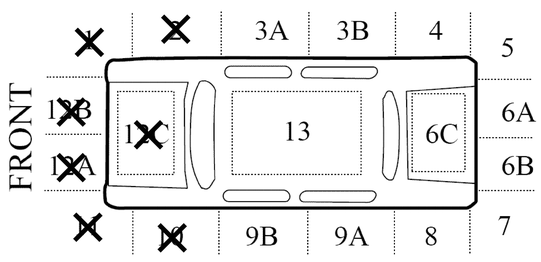
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

88 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: FRONT DESTROYED; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 12 — Major Impact: 88



☒ 14 Undercarriage; ☒ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☒ 88 Other: FRONT DESTROYED

Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: ____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 14 — 2: — 3: — 4: — ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: ____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; ____; 99 Unknown object

VEHICLE# (02, 04, N2, X4, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name

OWNER ADDRESS (Number, Street) — New address? ☐ — Personal Phone

CITY — ST — ZIP — Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs

VEHICLE IDENTIFICATION NUMBER: — Dir of Travel: — # Occupants:

Insurance Company: — Policy Number:

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: — 2: — 3: — 4: — 5: — Odometer: — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: ____; 99 Unknown

Calculated speed at impact: ____

Bus Seat Capacity: ____

Power Source: ____

VEHICLE USE

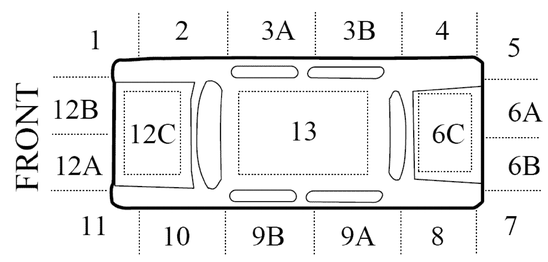
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: ____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: ____ — Major Impact: ____



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COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; ____; 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. PEREZ 052	Local Case No. EXAMPLE 7	Page of 5 / 5

WHEN I ARRIVED ON SCENE, I OBSERVED THAT V1 HAD CAUGHT FIRE TO THE FRONT OF THE VEHICLE. DRIVER STATED THAT HE WAS DRIVING EB AND NOTICED SMOKE COMING FROM UNDER THE HOOD SO HE PULLED OVER, OPENED UP THE HOOD AND THE ENGINE WAS ON FIRE. DRIVER WAS UNHARMED. FURTHER INVESTIGATION DISCOVERED A POBBILE FLUID LEAK THAT IGNITED. ENTIRE FRONT OF VEHICLE WAS DESTROYED INCLUDING WINDSHIELD AND SOME INTERIOR.

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
JEWELL CO SHERIFF	J. DAVIS	EXAMPLE 8	1 / 5

Investigating Officer Name	Badge Number	County	City Name
R. HOOD	12	JW	

☐ Amended Report

☐ DUI

☒ Hit & Run

PO Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
			NO NAME	RD		55	08/16/2018	99:99	TH

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
25	F	E	◉ FROM ○ AT		K128	HWY		55	08/16/2018	08:18	TH

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 APPERED TO BE TURNING EB ON AN UNNAMED ROAD AND SLID INTO LEGALY PARKED VEHICLE X2 OFF THE ROADWAY.

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
08/16/2018	08:41	TH

Latitude (AOI): 39.81363

Longitude (AOI): -98.314961

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

WORK ZONE TYPE

00 ON / AT

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

05 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

00 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

02 SURFACE TYPE ON / AT 02

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

04 SURFACE CONDITIONS ON / AT

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

13 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

03 +INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
00		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

04 CRASH CLASS 04

(mark 1 box per side)

1st Harmful Event / Most Harmful Event

00 Other non-collision
01 Overturned/Rollover

COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

***COLLISION WITH VEHICLE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

	Type Present	OK/NF
1	1 O	1 OK
2	1 09	2
3	2	3
4	3	4
5	4	5
	5	

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 8

Page 2 / 5

02 **ROADWAY NUMBER OF LANES**
ON AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 **ROAD CHARACTER**
ON AT

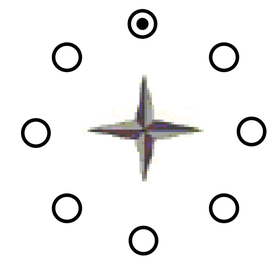
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 **SPECIAL JURISDICTION**

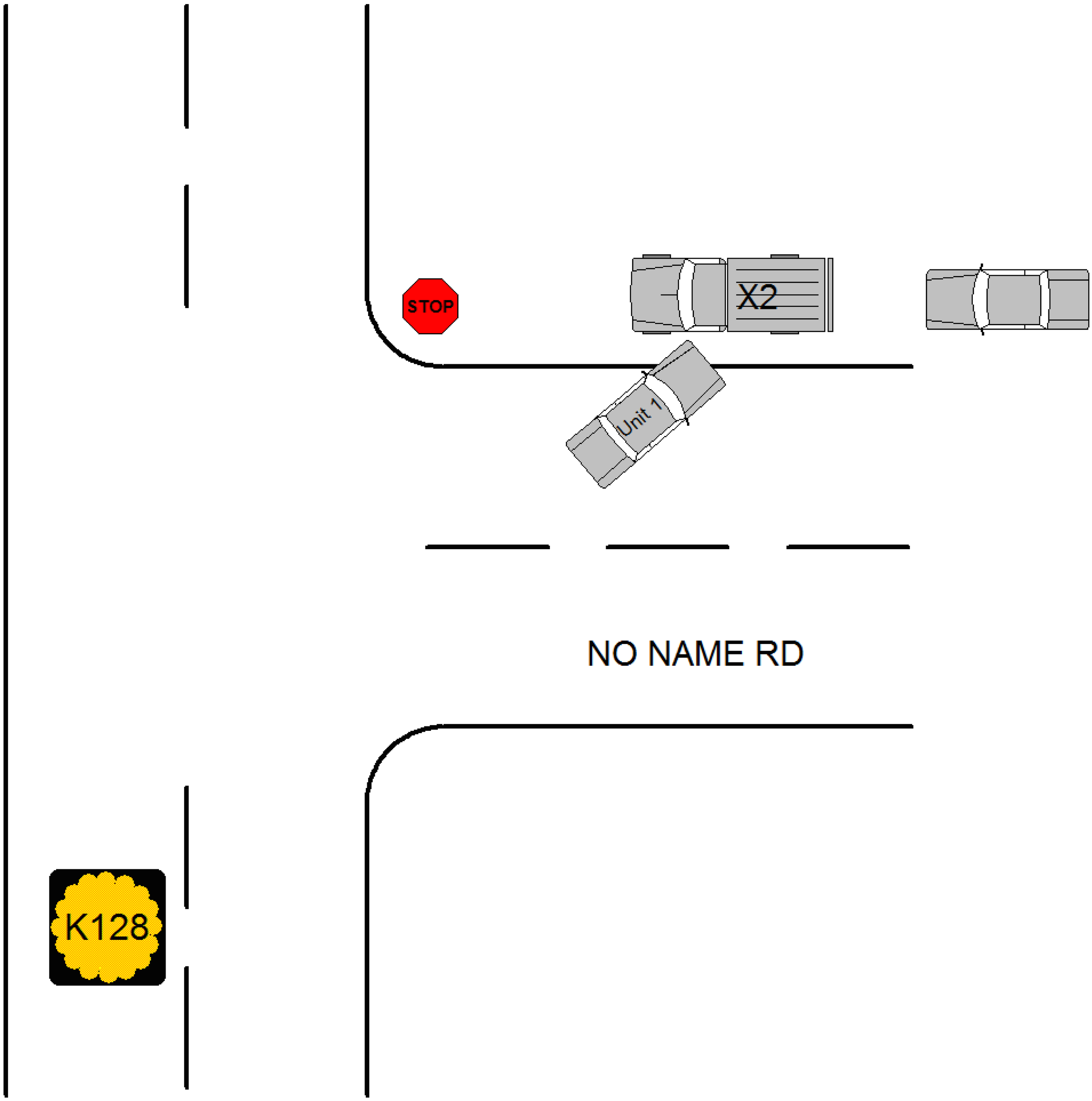
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: R. HOOD 12

Local Case No.: EXAMPLE 8

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED	CITATION#

More violations in narrative ☐

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	UNKNOWN	MN	New address? ☐	Personal	U	U	U	
ST 01		DOB 99/99/9999		Work	00	U		☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

99 **DR LICENSE COMPLY**

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? ☐

Driver's Lic Restrictions	Complied? Y	N
1	☐	☐
2	☐	☐
3	☐	☐
4	☐	☐

COMMERCIAL ENDORSEMENTS

1 2 3 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
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☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

☒ NG - No Test given
☐ TR - Test Refused (Alcohol/Drug)
☐ PT - Prelim Positive Test (PBT)
☐ TG - Evidentiary Test given
☐ RP - Results pending

ALCOHOL
☐ Evidentiary Breath 0.
☐ Eye Fluid 0.
☐ Blood (BAC) 0.
☐ Other 0.

Drug screen result ☐

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

DR LICENSE COMPLY

00 Not licensed
01 Valid License
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05 Cancld or Denied
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RESTRICT COMPLY

Restrictions? ☐

Driver's Lic Restrictions	Complied? Y	N
1	☐	☐
2	☐	☐
3	☐	☐
4	☐	☐

COMMERCIAL ENDORSEMENTS

1 2 3 4

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☐ DC - Illegal drugs contributed
☐ MP - Medication ingested
☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

☐ NG - No Test given
☐ TR - Test Refused (Alcohol/Drug)
☐ PT - Prelim Positive Test (PBT)
☐ TG - Evidentiary Test given
☐ RP - Results pending

ALCOHOL
☐ Evidentiary Breath 0.
☐ Eye Fluid 0.
☐ Blood (BAC) 0.
☐ Other 0.

Drug screen result ☐

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐
TU		MN	New address? ☐	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:	Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:	EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Occupants & Vehicles

850B page 2

VEHICLE# (01, 03, N3, X3, etc)	SPECIAL DATA	VEHICLE# (02, 04, N2, X4, etc)	SPECIAL DATA	Local Case No.	Page of
01		X2		EXAMPLE 8	4 / 5

	VEHICLE 01	VEHICLE X2
OWNER Last Name ("Same" if Driver)	UNKNOWN	GRACIE
OWNER First Name		RICKSON
Middle Name		
OWNER ADDRESS (Number, Street)	New address? ☐	5912 MAIN ST
Personal Phone		(785) 555-5555
CITY		OVERLAND PARK
ST		KS
ZIP		66755
Work Phone		(785) 555-5555
COLOR	WHI	SIL
YEAR		2002
MAKE		FORD
MODEL		RNG
BODY STYLE		PK
ST		KS
LICENSE PLATE #		JIJI555
County		SN
Exp YR		2019
Removed by:		OWNER
MC CCs		
VEHICLE IDENTIFICATION NUMBER		1GTKKKR99WKKWO
Dir of Travel	E	W
# Occupants	1	0
Insurance Company		USAA
Policy Number		HIER7-A
SPECIAL CONDITIONS FOR TRAFFIC UNITS	1: 1	1: 4
Odometer		122300
Fire?	☐	☐

1 Hit & Run · 2 Non-Contact · 3 Stolen · 4 Legally Parked · 5 Pursued by LE · 6 Driverless · 7 Towed away due to damage

VEHICLE BODY TYPE

	VEHICLE 01	VEHICLE X2
	99	01

01 Automobile · 02 Motorcycle · 03 Motor scooter or Moped · 04 Van · 05 Pickup truck <10,001 lbs · 06 Sport utility veh - SUV · 07 Camper or RV · 08 Farm machinery · 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs · 11 Truck & trailer(s) · 12 Tractor-trailer(s) · 13 Cross country bus · 14 School bus · 15 Transit (city) bus · 16 Other bus · 25 Train · 88 Other: _____ · 99 Unknown

Calculated speed at impact

Bus Seat Capacity _____

Power Source: VEHICLE 01 _____ · VEHICLE X2 F

VEHICLE USE

	VEHICLE 01	VEHICLE X2
	99	01

01 No special use · 02 Taxi / Limo · 03 School bus · 04 Other bus · 05 Military · 06 Police · 07 Ambulance · 08 Fire · 09 Mail/Parcel · 99 Unknown

VEHICLE DAMAGE

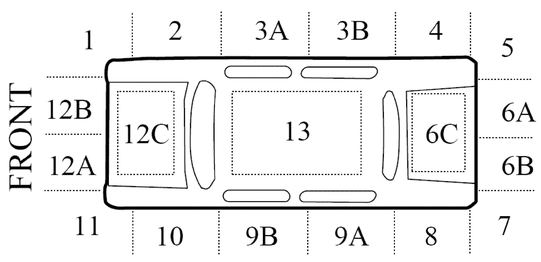
	VEHICLE 01	VEHICLE X2
	99	02

00 None · 01 Damage (minor) · 02 Functional · 03 Disabling · 04 Destroyed · 88 Other: · 99 Unknown

VEHICLE 01: 88 Other: FRONT DESTROYED

DAMAGE LOCATION AREA

	VEHICLE 01	VEHICLE X2
First Impact	99	10
Major Impact	99	10



☐ 14 Undercarriage · ☐ 15 Windshield · ☐ 16 Other windows · ☒ 99 Unknown · ☐ 17 Entire vehicle damaged · ☐ 88 Other: _____

Trailer: Present / Damaged

VEH. MANU. BEFORE UNSTAB. SIT.

	VEHICLE 01	VEHICLE X2
	99	

01 Straight/following road · 02 Left Turn · 03 Right Turn · 04 U Turn · 05 Passing · 06 Changing lanes · 07 Avoidance man. · 08 Merging · 09 Parking · 10 Backing · 11 Stopped awaiting turn · 12 Stopped in traf · 13 Illegally parked · 14 Disabled in roadway · 15 Slowing or stopping · 16 Negotiating a curve · 88 Other: _____ · 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

	1	2	3	4
VEHICLE 01	03	02	23	
VEHICLE X2	22			

☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right · 02 Ran off road left · 03 Crossed centerline · 04 Overturn/Rollover · 05 Crossed median · 06 Fell/Jumped from veh · 07 Thrown or falling object · 08 Cargo loss or shift · 09 Equipment failure (tire, brakes, etc.) · 10 Downhill runaway · 11 Trailer swing · 12 Separation of units · 13 Jackknife · 14 Fire · 15 Explosion · 16 Immersion in water · 88 Other event: _____ · 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian · 22 Motor veh in-transport · 23 Legally Parked Vehicle · 24 Train · 25 Pedal cycle (bike, etc) · 26 Animal · 27 Fixed Object · 28 Other moveable object · _____ · 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. R. HOOD 12	Local Case No. EXAMPLE 8	Page of 5 / 5

V1 APPERED TO BE TURNING EB ON AN UNNAMED ROAD AND SLID INTO LEGALY PARKED VEHICLE X2 OFF THE ROADWAY. V1 DROVE AWAY AS A HIT AND RUN AND IS SUSPECTED TO BE A WHITE COLORED VEHICLE DUE TO LEFT OVER PAINT ON X2.

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
HAYS POLICE	R. MCCOMMON	EXAMPLE 9	1 / 5

Investigating Officer Name	Badge Number	County	City Name
BUFORD	24	EL	HAYS

☐ Amended Report

☐ DUI

☐ Hit & Run

I Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
	1000	W	27TH	ST		30	01/01/2018	14:15	MO

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
175	F	E	◉ FROM ○ AT		U183	HWY		35	01/01/2018	14:18	MO

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 LEFT THE ROADWAY WHILE TRAVELING WB ON 27TH ST, AN EB NON CONTACT VEHICLE DRIFTED ACROSS THE CENTER LINE CAUSING D1 TO TAKE EVASIVE ACTION. V1 THEN COLLIDED WITH A LIGHT POLE AND PROCEEDED INTO A BANK PARKING LOT BEFORE STOPPING.

Date Arrived (mm/dd/yyyy): 01/01/2018 | Time Arriv.: 14:22 | Day: MO

Latitude (AOI):

Longitude (AOI):

Photos by:

KDOT?	Object 1 Damaged & Nature of Damage (show in diagram)	Owner Street Address	Personal Phone
☐	LIGHT POLE DESTROYED	125 W 27TH ST	(785) 555-5555

Owner Last Name	First Name	Middle Name	City	State	Zip	Work Phone
CITY OF HAYS			HAYS	KS	67601	(785) 555-5555

KDOT?	Object 2 Damaged & Nature of Damage (show in diagram)	Owner Street Address	Personal Phone
☐			

Owner Last Name	First Name	Middle Name	City	State	Zip	Work Phone

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

02 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

02 SURFACE TYPE ON / AT

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

02 SURFACE CONDITIONS ON / AT

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

21 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza
Rest area
OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
00		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

08 CRASH CLASS (mark 1 box per side) — 08

1st Harmful Event / Most Harmful Event

00 Other non-collision
01 Overturned/Rollover
COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

06 **FIXED OBJECT TYPE (mark 1 box per side if applicable) — 06

1st Harmful Event / Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

WORK ZONE TYPE — 00 ON / AT

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

***COLLISION WITH VEHICLE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A — Type Present — OK/NF

	1	1	1
00 None	O	09	OK
01 Officer, flagger	2	2	2
02 Traffic signal	3	3	3
03 Stop sign	4	4	4
04 Flasher	5	5	5
05 Yield sign			

06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 9

Page of
2 / 5

04 **ROADWAY NUMBER OF LANES**
ON AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 **ROAD CHARACTER**
ON AT

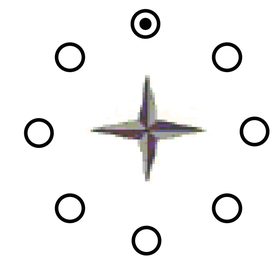
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 **SPECIAL JURISDICTION**

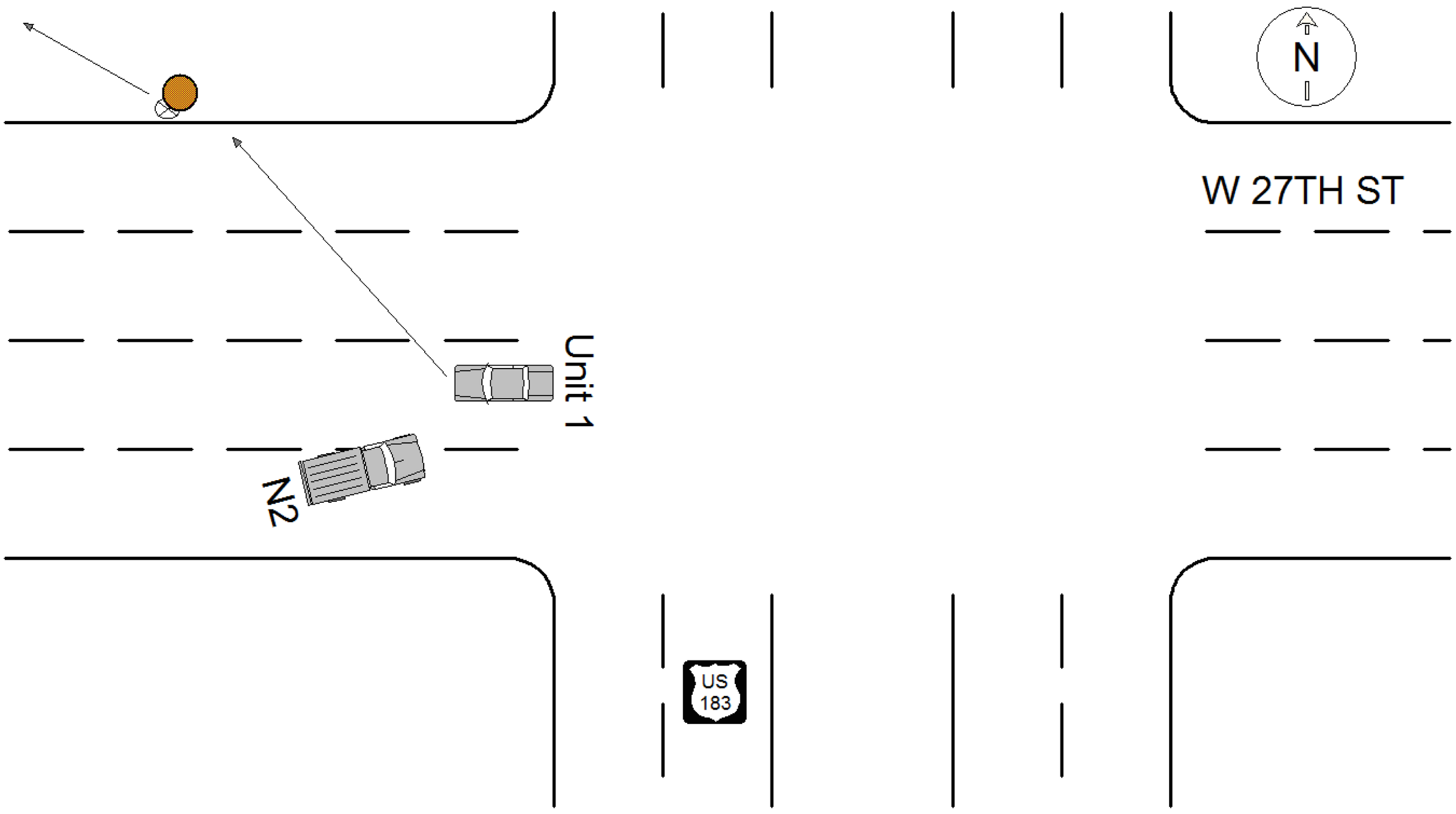
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: BUFORD 24

Local Case No.: EXAMPLE 9

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1 | 37

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	CARSON	MN K	1820 BUFFALO RD (New address? ☐)	Personal (555) 555-5555	M	S	P	
ST 01	JAMES	DOB 03/03/1933	HAYS KS 66783	Work (555) 555-5555	84	N		☐
TU N2	UNKNOWN	MN	(New address? ☐)	Personal	U	U	U	
ST 01		DOB 99/99/9999		Work	00	N		☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K03345852	C	☐	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

TRAFFIC UNIT# N2 (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

99 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? ☐

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Occupants & Vehicles

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Local Case No.: EXAMPLE 9

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME		

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
TAN	2007	MERC	GMQ	4D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
AEO777	EL	2019	HAYS TOWING	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
2MEFLRJX993M44443	W	1

Insurance Company	Policy Number
ALLSTATE	DJJIAS9-1

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 | 2: | 3: | 4: | 5:

Odometer: 156095 — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: ____; 99 Unknown

Calculated speed at impact:

Bus Seat Capacity: ____

Power Source: F

01 VEHICLE USE

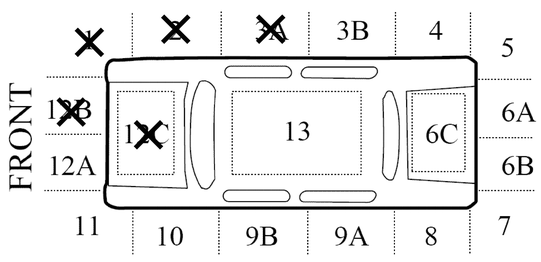
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

03 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: ____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 01 — Major Impact: 02



☒ 14 Undercarriage; ☒ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: ____

☐ Trailer: Present / Damaged

07 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: ____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 88 | 2: 01 | 3: 27 | 4: ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: EVASIVE ACTION; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; 99 Unknown object

VEHICLE# N2 (02, 04, N2, X4, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
UNKNOWN		

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
RED				PK	

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
		1

Insurance Company	Policy Number

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: | 2: | 3: | 4: | 5:

Odometer: — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

05 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: ____; 99 Unknown

Calculated speed at impact:

Bus Seat Capacity: ____

Power Source: ____

99 VEHICLE USE

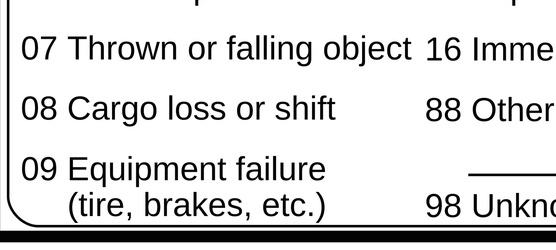
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

00 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: ____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: ____ — Major Impact: ____



☐ 14 Undercarriage; ☐ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: ____

☐ Trailer: Present / Damaged

88 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: DRIFTING LEFT; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 03 | 2: | 3: | 4: ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: ____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. BUFORD 24	Local Case No. EXAMPLE 9	Page of 5 / 5

V1 WAS TRAVELING WEST ON 27TH ST WHEN N2 DRIFTED TO THE LEFT TOWARDS V1. V1 AVOIDED A COLLISION AND TURNED RIGHT OFF THE ROADWAY CLIPPING A LIGHT POLE THEN CAME TO REST IN A PARKING LOT. N2 LEFT THE SCENE. THERE WERE NO WITNESSES AND NO ID FOR THE N2 OTHER THAN DRIVER OF V1 CLAIMING N2 TO BE A RED PICK-UP TRUCK.

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
KHP TROOP F	ZIVA	EXAMPLE 10	1 / 5

Investigating Officer Name	Badge Number	County	City Name
CORLEONE	653	BU	DOUGLASS

☐ Amended Report

☐ DUI

☐ Hit & Run

I Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
	700	E	1ST	ST		30	03/03/2018	14:25	SA

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
50	F	E	◉ FROM ○ AT	N	ELM	ST		30	03/03/2018	14:30	SA

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
03/03/2018	14:55	SA

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 WAS WB ON 1ST ST AND FAILED TO STOP FOR RAILROAD CROSSING. V1 PROCEEDED ACROSS THE TRACKS AND WAS HIT BY V2, A SB TRAIN. THERE WAS HEAVY SNOW FALL AND SLICK ROADS.

Latitude (AOI): 37.51995

Longitude (AOI): -97.008707

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

36 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

02 SURFACE TYPE ON / AT

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

03 SURFACE CONDITIONS ON / AT

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

11 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

00 None
01 Bridge
02 Bridge Overhead
03 Railroad Bridge
04 RRXING
05 Interchange
06 Ramp
99 Unknown

1	2	3
04		

009763S

05 CRASH CLASS (mark 1 box per side) — 05

1st Harmful Event / Most Harmful Event

00 Other non-collision
01 Overturned/Rollover

COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

WORK ZONE TYPE — 00 ON / AT

00 None Apply
01 Construction Zone - KDOT? ☐
02 Maintenance Zone - KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

***COLLISION WITH VEHICLE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A — Type Present — OK/NF

	1	2	3	4	5
1	O	06	OK		
2	O	07	OK		
3					
4					
5					

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

Crash Diagram
850A page 2

SPECIAL EVENT	SPECIAL DATA	Local Case No.	Page of
		EXAMPLE 10	2 / 5

02 ROADWAY NUMBER OF LANES
ON AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 ROAD CHARACTER
ON AT

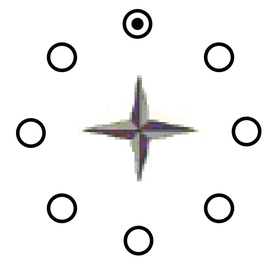
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 SPECIAL JURISDICTION

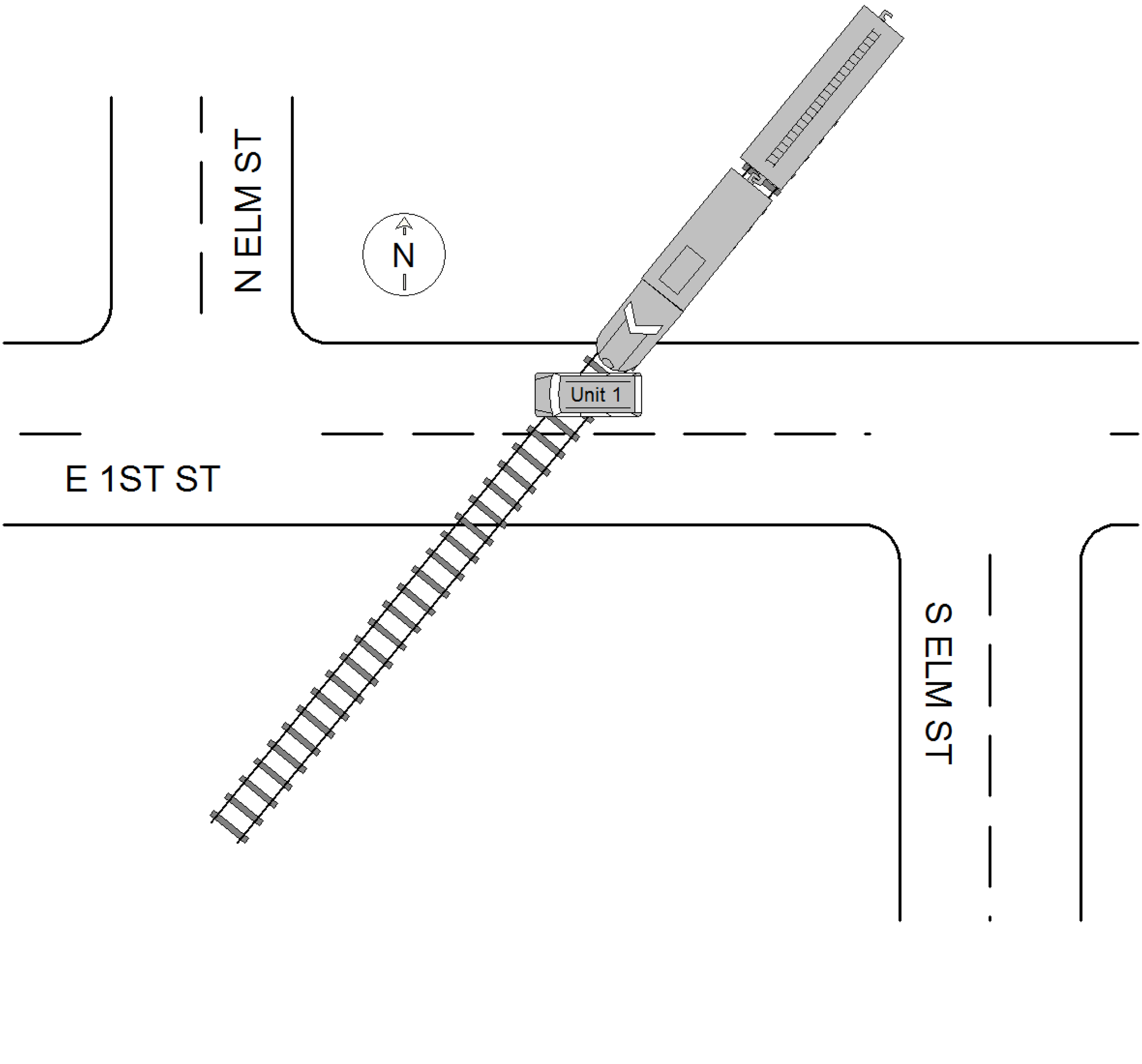
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: CORLEONE 653

Local Case No.: EXAMPLE 10

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1	30	D1	35	OR	03	E	05	E	04

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	MUNOZ	MN FERNANDO	1215 NE KING ST (New address? ☐)	Personal (555) 555-5555	M	R	I	
ST 01	PEDRO	DOB 10/09/1968	PRATT KS 63888	Work (555) 555-5555	49	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K00956180	C	☐	☒

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1: Z | 2: | 3: | 4:

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? ☐

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1: | 2: | 3: | 4:

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
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- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	SCRITO	MN FAYE	155 STATE ST (New address? ☐)	Personal (620) 555-8664	F	S	I	
ST 03	ABBY	DOB 04/04/1980	PRATT KS 63866	Work (620) 555-5555	37	N		☐
TU 02	MALLARD	MN CHARELS	8312 N BERRY RD (New address? ☐)	Personal (555) 555-5555	M	U	N	
ST 31	GARY	DOB 07/16/1957	BERRYTON KS 66593	Work (785) 555-5555	60	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Occupants & Vehicles

850B page 2

Local Case No.: EXAMPLE 10

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME		

OWNER ADDRESS (Number, Street): New address? ☐ Personal Phone:

CITY | ST | ZIP | Work Phone:

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
RED	2004	VOLK	JET	4D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
JETRED	PR	2019	MAJOR JIMS TOW	

VEHICLE IDENTIFICATION NUMBER: 3VFJRQQWK555O43 | Dir of Travel: W | # Occupants: 2

Insurance Company: ALLIANCE INS | Policy Number: UV44-1-34-RR

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 | 2: | 3: | 4: | 5: | Odometer: 175823 | Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact:

Bus Seat Capacity: _____

Power Source: F

01 VEHICLE USE

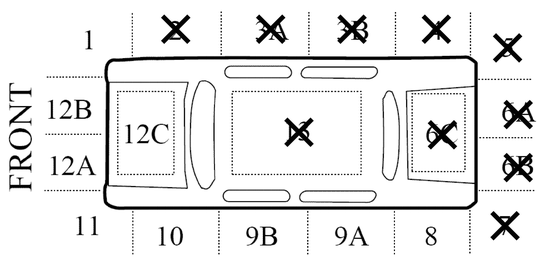
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

04 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 04 | Major Impact: 04



☒ 14 Undercarriage; ☐ 15 Windshield; ☒ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: _____

☐ Trailer: Present / Damaged

15 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 24 | 2: | 3: | 4: | ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; _____; 99 Unknown object

VEHICLE# 02 (02, 04, N2, X4, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
BNSF RAILROAD		

OWNER ADDRESS (Number, Street): New address? ☐ Personal Phone:

CITY | ST | ZIP | Work Phone:

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs

VEHICLE IDENTIFICATION NUMBER: 16854 | Dir of Travel: SW | # Occupants: 1

Insurance Company: | Policy Number:

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: | 2: | 3: | 4: | 5: | Odometer: | Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

25 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact:

Bus Seat Capacity: _____

Power Source: F

01 VEHICLE USE

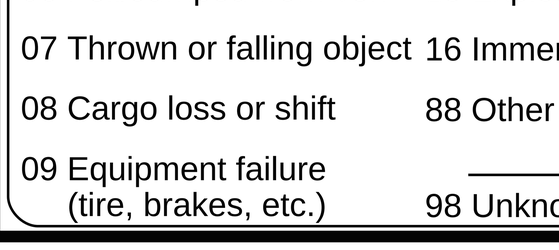
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

01 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 12 | Major Impact: 12



☐ 14 Undercarriage; ☐ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: _____

☐ Trailer: Present / Damaged

88 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/ following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: ON TRAIN TRACKS; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 22 | 2: | 3: | 4: | ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; _____; 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. CORLEONE 653	Local Case No. EXAMPLE 10	Page of 5 / 5

V1 WAS WB ON 1ST ST AND CROSSED THE TRAIN TRACKS WITHOUT STOPPING. HEAVY SNOW FALL CAUSED LOW VISIBILITY AND FOR V2 (A TRAIN) TO COLLIDE WITH V1. EMERGENCY STOPPING PROCEDURES WERE STARTED ABOUT 100 FEET SW FROM THE TRACK CROSSING.

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
SHERMAN CO. SHERIFF	T. BURTON	EXAMPLE 11	1 / 5

Investigating Officer Name	Badge Number	County	City Name
B. HOUSE	839	SH	GOODLAND

☐ Amended Report

☐ DUI

☐ Hit & Run

PO Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
	2160	S	LOT ACCESS	RD			05/15/2018	08:10	TU

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
5	F	N	◉ FROM ○ AT	E	GREY	ST		35	05/15/2018	08:20	TU

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 WAS TURNING NORTH ON THE S LOT ACCESS RD TO WALMART PARKING LOT AND REAR ENDED V2 AT THE ENTRANCEWAY.

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
05/15/2018	09:20	TU

Latitude (AOI): 38.95471

Longitude (AOI): -94.716640

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

00 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

02 SURFACE TYPE ON / **01** AT

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

01 SURFACE CONDITIONS ON / **01** AT

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

14 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
00		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

03 CRASH CLASS (mark 1 box per side) **03**

1st Harmful Event / Most Harmful Event

00 Other non-collision
01 Overturned/Rollover

COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

WORK ZONE TYPE

00 ON / 00 AT

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

02 *COLLISION WITH VEHICLE **02**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A — Type Present — OK/NF

	1	1	1
	O	00	OK
00 None	2	2	2
01 Officer, flagger	3	3	3
02 Traffic signal	4	4	4
03 Stop sign	5	5	5
04 Flasher			
05 Yield sign			
06 RR gates / signal			
07 RR crossing signs			
08 No passing zone			
09 Center/Edge lines			
10 Warning signs			
11 School zone signs			
12 Parking lines			
88 Other: _____			
99 Unknown			

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA
WALMART

Local Case No.
EXAMPLE 11

Page of
2 / 5

02 ON — **ROADWAY NUMBER OF LANES** — 02 AT

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 ON — **ROAD CHARACTER** — 00 AT

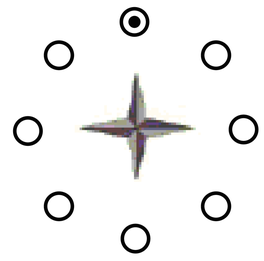
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

SPECIAL JURISDICTION

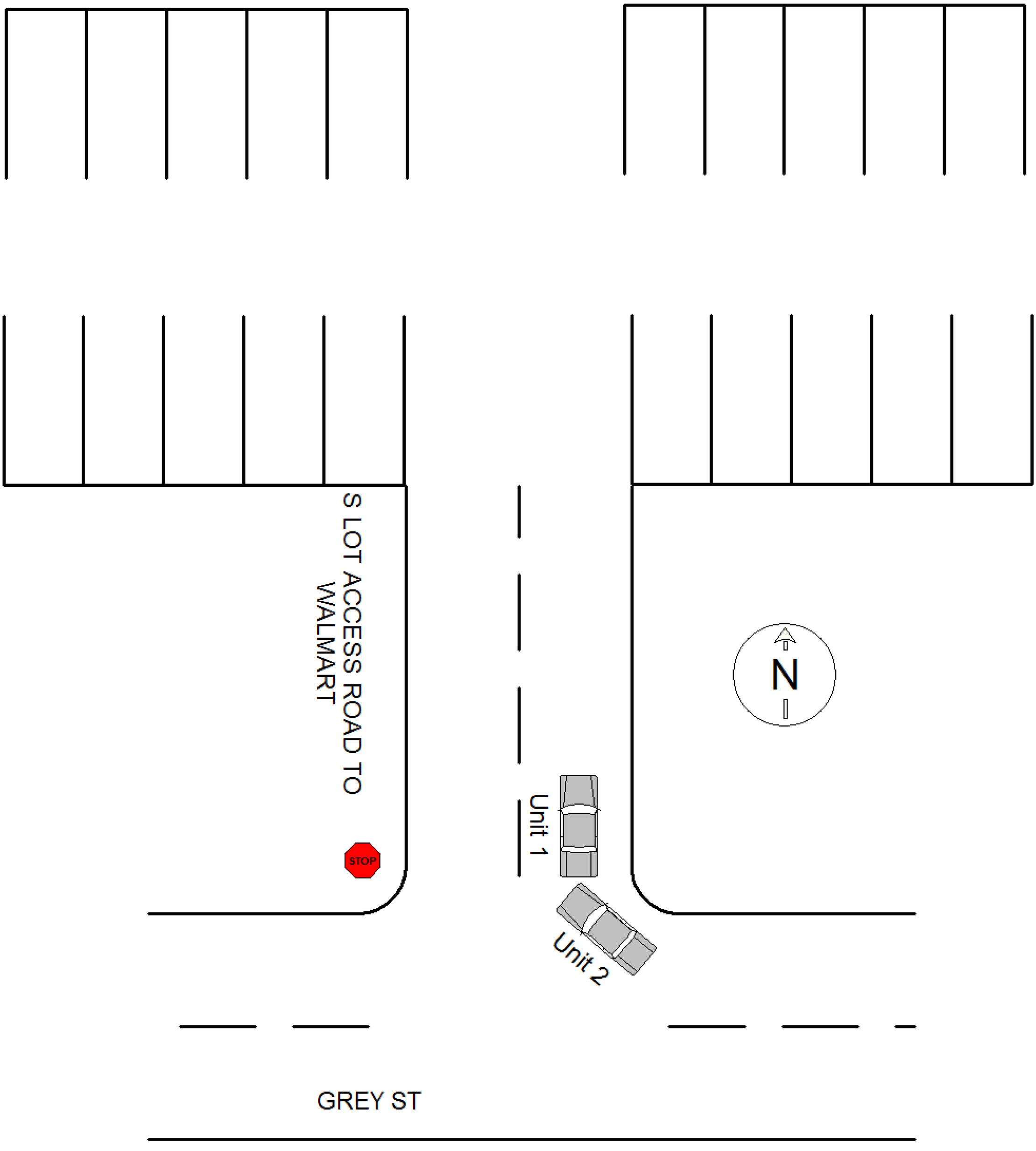
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: B. HOUSE 839

Local Case No.: EXAMPLE 11

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TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1 | 33

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	SHERMAN	MN K	1212 NW COTTONWOOD (New address? ☐)	Personal (813) 555-1847	F	S	N	
ST 01	WENDY	DOB 02/09/1995	SHARON SPRINGS | KS | 68334	Work	24	N		☐
TU 02	BROSNAN	MN V	295 S TAYLOR ST (New address? ☐)	Personal (813) 555-6621	M	S	N	
ST 01	PIERCE	DOB 11/21/1955	SHARON SPRINGS | KS | 68246	Work	63	N		☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K01766543	C	☐	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

TRAFFIC UNIT# 02 (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K00579932	C	☐	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	SHERMAN	MN B	1212 NW COTTONWOOD (New address? ☐)	Personal (813) 555-1556	M	S	N	
ST 03	JOHN	DOB 09/01/1990	SHARON SPRINGS | KS | 68334	Work	28	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:	Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:	EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Occupants & Vehicles

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Local Case No.: EXAMPLE 11

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA	OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
WALMART	SHERMAN	WENDY	K

OWNER ADDRESS (Number, Street)	New address?	Personal Phone
1212 NW COTTONWOOD	☐	(813) 555-1847

CITY	ST	ZIP	Work Phone
SHARON SPRINGS	KS	68334	

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
LBL	2008	CHEV	AVO	4D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
485KRY	SN	2019	OWNER	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
JTDKB20U48HNHGRRE	N	2

Insurance Company	Policy Number
FARMERS	613245-098

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1 | 2 | 3 | 4 | 5

Odometer: 138005 — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact

Bus Seat Capacity _____

Power Source: F

01 VEHICLE USE

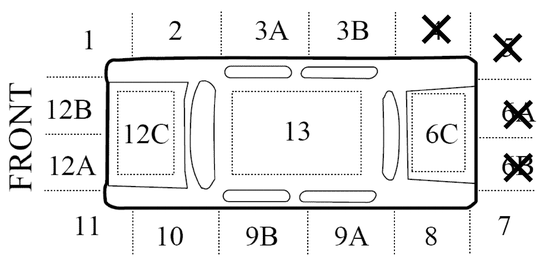
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

01 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 05 — Major Impact: 05



☐ 14 Undercarriage ☐ 15 Windshield ☐ 16 Other windows ☐ 99 Unknown ☐ 17 Entire vehicle damaged ☐ 88 Other: _____

☐ Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 22 | 2: | 3: | 4: — ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; _____; 99 Unknown object

VEHICLE# 02 (02, 04, N2, X4, etc)

SPECIAL DATA	OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
WALMART	BROSNAN	PIERCE	V

OWNER ADDRESS (Number, Street)	New address?	Personal Phone
295 S TAYLOR ST	☐	(813) 555-6621

CITY	ST	ZIP	Work Phone
SHARON SPRINGS	KS	68246	

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
WHI	2012	HOND	CIV	4D	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
AHF287	SN	2019	OWNER	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
JHMD94878939IEMEM	N	1

Insurance Company	Policy Number
HOHUM	38900-1

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1 | 2 | 3 | 4 | 5

Odometer: 110256 — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact

Bus Seat Capacity _____

Power Source: F

01 VEHICLE USE

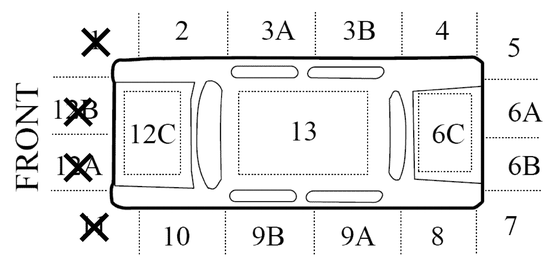
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

01 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 01 — Major Impact: 01



☐ 14 Undercarriage ☐ 15 Windshield ☐ 16 Other windows ☐ 99 Unknown ☐ 17 Entire vehicle damaged ☐ 88 Other: _____

☐ Trailer: Present / Damaged

03 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 22 | 2: | 3: | 4: — ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; _____; 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. B. HOUSE 839	Local Case No. EXAMPLE 11	Page of 5 / 5

(Include more details here)

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
SHAWNEE CO SHERIFE	E.MURPHY	EXAMPLE 12	1 / 6

Investigating Officer Name	Badge Number	County	City Name
R.PRYOR	005	SN	

☐ Amended Report

☐ DUI

☐ Hit & Run

F Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
356	1001	E	I070	RAMP		70	07/04/2018	22:00	WE

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
75	F	E	◉ FROM ○ AT	SW	WANAMAKER	RD		45	07/04/2018	22:20	WE

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
07/04/2018	23:10	WE

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 WAS ON THE OFF RAMP FROM EB I-70 RAMP TO SW WANAMAKER RD WHEN IT HIT A PEDESTRIAN STANDING IN THE ROADWAY.

Latitude (AOI): 39.05198

Longitude (AOI): -95.761367

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

04 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

16 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

01 SURFACE TYPE ON / AT 01

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

02 SURFACE CONDITIONS ON / AT 02

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

15 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

08 +INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

00 None
01 Bridge
02 Bridge Overhead
03 Railroad Bridge
04 RRXING
05 Interchange
06 Ramp
99 Unknown

1	2	3
06	05	

02 CRASH CLASS (mark 1 box per side) 02

1st Harmful Event / Most Harmful Event

00 Other non-collision
01 Overturned/Rollover
COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

WORK ZONE TYPE 00 ON / AT

00 None Apply
01 Construction Zone - KDOT? ☐
02 Maintenance Zone - KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

***COLLISION WITH VEHICLE**

(mark 1 box per side if applicable)

1st Harmful Event / Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A — Type Present — OK/NF

	1	2	3
	O	03	OK
2			
3			
4			
5			

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 12

Page of
2 / 6

04 ON	ROADWAY NUMBER OF LANES	04 AT	01 ON	ROAD CHARACTER	01 AT	00	SPECIAL JURISDICTION

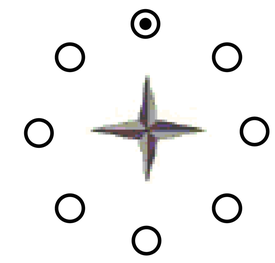
01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

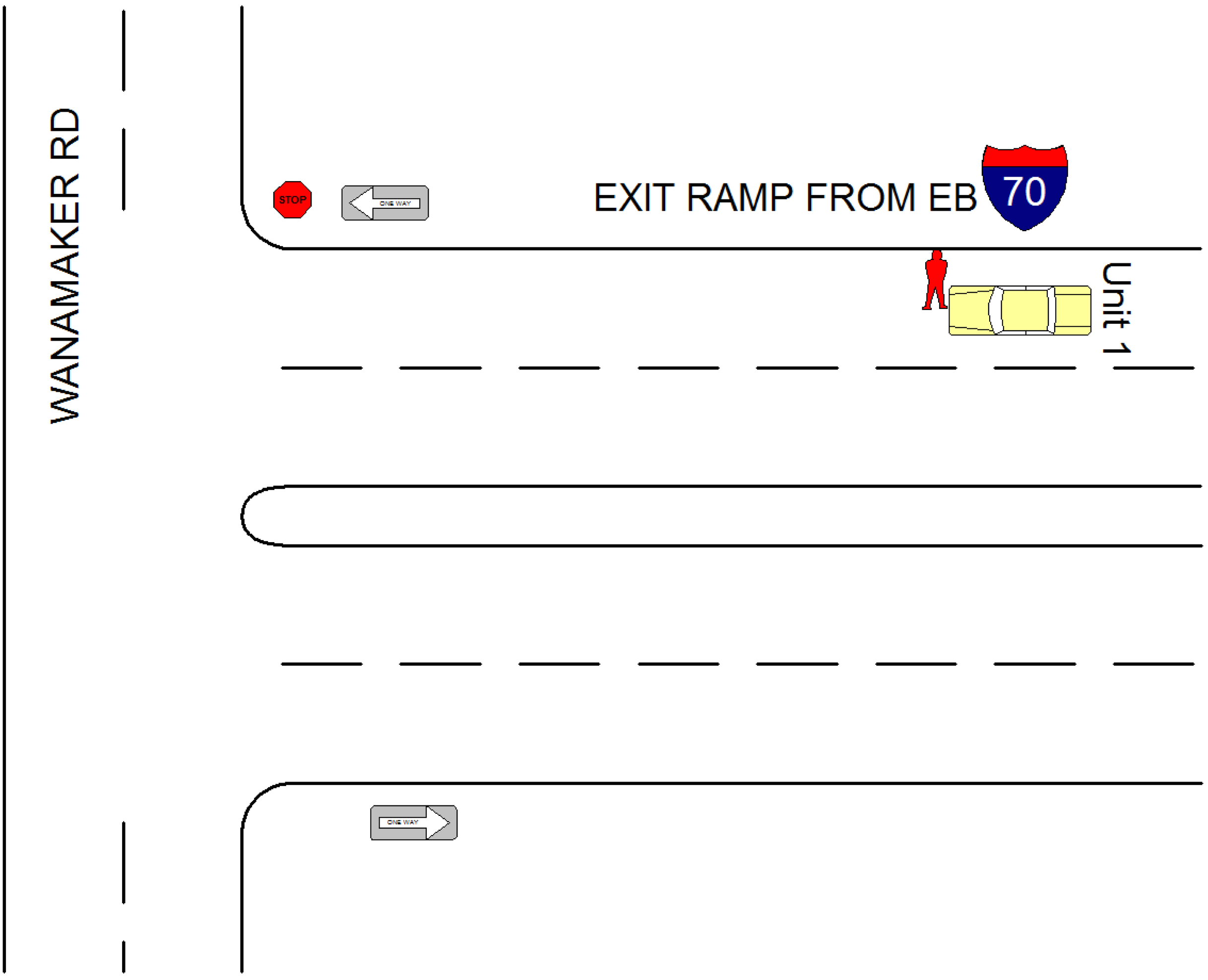
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: R.PRYOR 005

Local Case No.: EXAMPLE 12

Page 3 / 6

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	BARKER	MN W	6130 S JENSON DR (New address? ☐)	Personal (785) 555-2255	M	S	N	
ST 01	BOB	DOB 11/06/1955	TOPEKA KS 66614	Work (785) 236-5555	62	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K03908643	C	☐	☐

DR LICENSE COMPLY — 01

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? Y

	Driver's Lic Restrictions	Complied? Y	N
1	B	Y	
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 2 3 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

DR LICENSE COMPLY

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions?

	Driver's Lic Restrictions	Complied? Y	N
1			
2			
3			
4			

COMMERCIAL ENDORSEMENTS

1 2 3 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	WHITE	MN L	5263 W JONES ST (New address? ☐)	Personal (785) 632-9999	F	S	N	
ST 03	VANNA	DOB 06/23/1965	TOPEKA KS 66615	Work (785) 662-9999	53	N		☐
TU 01	CLINTON	MN E	425 E TORONTO RD (New address? ☐)	Personal (785) 622-9999	M	S	N	
ST 04	BILL	DOB 06/12/1962	TOPEKA KS 66662	Work (785) 555-2214	56	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:	Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:	EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Units: A, B, C, ..., N

Occupants & Vehicles

850B page 2

VEHICLE# 01 (01, 03, N3, X3, etc)	SPECIAL DATA	VEHICLE# (02, 04, N2, X4, etc)	SPECIAL DATA	Local Case No.	Page of
				EXAMPLE 12	4 / 6

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name	OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
SAME					

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone	OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone	CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST	COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
CRM	2011	LINC	TOW	4D	KS						

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs	LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
EIK399	SN	2019	HUGHS TOW						

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants	VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
1GH448D999DKWKKMM	W	3			

Insurance Company	Policy Number	Insurance Company	Policy Number
HUMANA	FFROO-334		

SPECIAL CONDITIONS FOR TRAFFIC UNITS	1	2	3	4	5	Odometer	Fire? ☐

1 Hit & Run · 2 Non-Contact · 3 Stolen · 4 Legally Parked · 5 Pursued by LE · 6 Driverless · 7 Towed away due to damage

01	VEHICLE BODY TYPE	LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)
	01 Automobile	10 Single heavy truck >10,000 lbs
	02 Motorcycle	11 Truck & trailer(s)
	03 Motor scooter or Moped	12 Tractor-trailer(s)
	04 Van	13 Cross country bus
	05 Pickup truck <10,001 lbs	14 School bus
	06 Sport utility veh - SUV	15 Transit (city) bus
	07 Camper or RV	16 Other bus
	08 Farm machinery	25 Train
	09 All-terrain vehicle - ATV	88 Other: _____ 99 Unknown

Calculated speed at impact

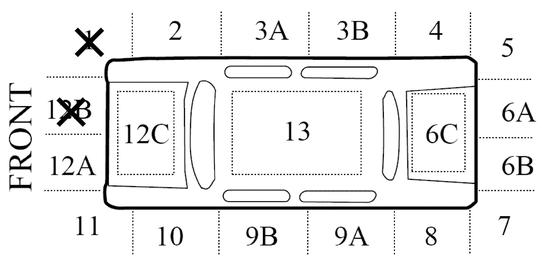
Bus Seat Capacity _____

Power Source _____

01	VEHICLE USE		01	VEHICLE DAMAGE	
	01 No special use	06 Police		00 None	04 Destroyed
	02 Taxi / Limo	07 Ambulance		01 Damage (minor)	88 Other:
	03 School bus	08 Fire		02 Functional	
	04 Other bus	09 Mail/Parcel		03 Disabling	99 Unknown
	05 Military	99 Unknown			

DAMAGE LOCATION AREA

First Impact 12 Major Impact 01



☐ 14 Undercarriage ☐ 15 Windshield
☐ 16 Other windows ☐ 99 Unknown
☐ 17 Entire vehicle damaged
☐ 88 Other: _____

Trailer: Present / Damaged

01	VEH. MANU. BEFORE UNSTAB. SIT.	
	01 Straight/ following road	11 Stopped awaiting turn
	02 Left Turn	12 Stopped in traf
	03 Right Turn	13 Illegally parked
	04 U Turn	14 Disabled in roadway
	05 Passing	15 Slowing or stopping
	06 Changing lanes	16 Negotiating a curve
	07 Avoidance man.	88 Other:
	08 Merging	
	09 Parking	99 Unknown
	10 Backing	

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 21 | 2: | 3: | 4: ☐ The exact sequence is unknown

NON-COLLISION		COLLISION WITH
01 Ran off road right	10 Downhill runaway	21 Pedestrian
02 Ran off road left	11 Trailer swing	22 Motor veh in-transport
03 Crossed centerline	12 Separation of units	23 Legally Parked Vehicle
04 Overturn/Rollover	13 Jackknife	24 Train
05 Crossed median	14 Fire	25 Pedal cycle (bike, etc)
06 Fell/Jumped from veh	15 Explosion	26 Animal
07 Thrown or falling object	16 Immersion in water	27 Fixed Object
08 Cargo loss or shift	88 Other event:	28 Other moveable object
09 Equipment failure (tire, brakes, etc.)	98 Unknown non-coll.	99 Unknown object

VEHICLE# (02, 04, N2, X4, etc)	SPECIAL DATA

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name

OWNER ADDRESS (Number, Street)	New address? ☐	Personal Phone

CITY	ST	ZIP	Work Phone

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants

Insurance Company	Policy Number

SPECIAL CONDITIONS FOR TRAFFIC UNITS	1	2	3	4	5	Odometer	Fire? ☐

1 Hit & Run · 2 Non-Contact · 3 Stolen · 4 Legally Parked · 5 Pursued by LE · 6 Driverless · 7 Towed away due to damage

	VEHICLE BODY TYPE	LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)
	01 Automobile	10 Single heavy truck >10,000 lbs
	02 Motorcycle	11 Truck & trailer(s)
	03 Motor scooter or Moped	12 Tractor-trailer(s)
	04 Van	13 Cross country bus
	05 Pickup truck <10,001 lbs	14 School bus
	06 Sport utility veh - SUV	15 Transit (city) bus
	07 Camper or RV	16 Other bus
	08 Farm machinery	25 Train
	09 All-terrain vehicle - ATV	88 Other: _____ 99 Unknown

Calculated speed at impact

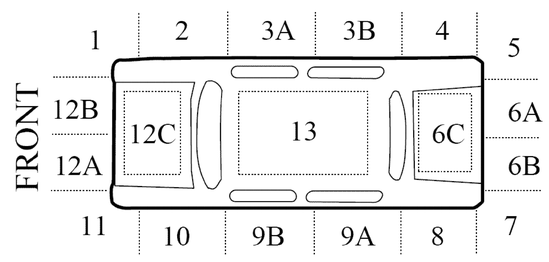
Bus Seat Capacity _____

Power Source _____

	VEHICLE USE			VEHICLE DAMAGE	
	01 No special use	06 Police		00 None	04 Destroyed
	02 Taxi / Limo	07 Ambulance		01 Damage (minor)	88 Other:
	03 School bus	08 Fire		02 Functional	
	04 Other bus	09 Mail/Parcel		03 Disabling	99 Unknown
	05 Military	99 Unknown			

DAMAGE LOCATION AREA

First Impact _____ Major Impact _____



☐ 14 Undercarriage ☐ 15 Windshield
☐ 16 Other windows ☐ 99 Unknown
☐ 17 Entire vehicle damaged
☐ 88 Other: _____

Trailer: Present / Damaged

	VEH. MANU. BEFORE UNSTAB. SIT.	
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	02 Left Turn	12 Stopped in traf
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	04 U Turn	14 Disabled in roadway
	05 Passing	15 Slowing or stopping
	06 Changing lanes	16 Negotiating a curve
	07 Avoidance man.	88 Other:
	08 Merging	
	09 Parking	99 Unknown
	10 Backing	

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: | 2: | 3: | 4: ☐ The exact sequence is unknown

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01 Ran off road right	10 Downhill runaway	21 Pedestrian
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05 Crossed median	14 Fire	25 Pedal cycle (bike, etc)
06 Fell/Jumped from veh	15 Explosion	26 Animal
07 Thrown or falling object	16 Immersion in water	27 Fixed Object
08 Cargo loss or shift	88 Other event:	28 Other moveable object
09 Equipment failure (tire, brakes, etc.)	98 Unknown non-coll.	99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. R.PRYOR 005	Local Case No. EXAMPLE 12	Page of 5 / 6

V1 WAS DRIVING ON THE EXIT RAMP FROM EB I-70 TO SW WANAMAKER RD WHEN IT HIT A PEDESTRIAN WALKING IN THE ROADWAY. THERE WAS HEAVY RAIN AND WIND CONDITIONS AND IT WAS DARK. DRIVER OF V1 SAID HE DID NOT SEE THE PED WALKING IN THE ROADWAY UNTIL IT WAS TOO LATE TO STOP. HE TRIED TO STOP BUT HIT THE PEDESTRIAN FROM BEHIND.

Passengers & Pedestrians
854 page 2

PEDESTRIAN INFORMATION

Investigating Officer / Badge No.: R.PRYOR 005

Local Case No.: EXAMPLE 12

Page 6 / 6

Unit #	PEDESTRIAN Last Name	Middle Name	PEDESTRIAN ADDRESS (Number, Street, Sfx, etc.)	Personal Phone Number	Gender	SE Used	Inj Severity	Transpt Unit
Ped Type	PEDESTRIAN First Name	Date of Birth	City State Zip	Work Phone Number	Age	Eject/Trap	Eject Path	Extrication?
TU 02	KRUGER	MN K	1428 N GENESEE AVE New address? ☐	Personal (862) 555-1253	M	N	F	A
PT 21	FRED	DOB 10/31/1981	LOS ANGELES CA 77832	Work (862) 555-3325	36	N		☐
TU		MN	New address? ☐	Personal				
PT		DOB		Work				☐

Transport Unit	EMS Time Notified	Injured taken by:
A	23:30	FREESTATE EMS
EMS Arrived	EMS Time@Hosp	Injured taken to:
23:55	23:59	ST FRANCIS

Transport Unit	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

TU#	DirTrvl	DL State	Driver's License Number	Special Data
02	W	CA	C884448FF4	

TU#	DirTrvl	DL State	Driver's License Number	Special Data

03 PEDESTRIAN ROADWAY LOCATION BEFORE IMPACT

00 NOT in roadway (driving lanes)

IN or AT INTERSECTION

01 In crosswalk or bikeway
02 NOT in crosswalk or bikeway
03 In intersection without a crosswalk or bikeway

NOT IN or AT INTERSECTION

11 In crosswalk or bikeway
12 NOT in crosswalk or bikeway
13 In area without a crosswalk or bikeway

88 Other: _____ 99 Unknown

PEDESTRIAN ROADWAY LOCATION BEFORE IMPACT

00 NOT in roadway (driving lanes)

IN or AT INTERSECTION

01 In crosswalk or bikeway
02 NOT in crosswalk or bikeway
03 In intersection without a crosswalk or bikeway

NOT IN or AT INTERSECTION

11 In crosswalk or bikeway
12 NOT in crosswalk or bikeway
13 In area without a crosswalk or bikeway

88 Other: _____ 99 Unknown

OTHER PEDESTRIAN LOCATION (Not in Driving Lanes)

01 Within a work zone
02 In median (not shoulder)
03 On Island
04 Road shoulder (not ditch or median)
05 Roadside (not on shoulder)
06 Sidewalk
07 Outside trafficway
08 Driveway access crosswalk
09 Dedicated bike lane
10 Shared-use path or trails
11 Inside building
12 In legally parked vehicle
88 Other: _____
99 Unknown

OTHER PEDESTRIAN LOCATION (Not in Driving Lanes)

01 Within a work zone
02 In median (not shoulder)
03 On Island
04 Road shoulder (not ditch or median)
05 Roadside (not on shoulder)
06 Sidewalk
07 Outside trafficway
08 Driveway access crosswalk
09 Dedicated bike lane
10 Shared-use path or trails
11 Inside building
12 In legally parked vehicle
88 Other: _____
99 Unknown

88 PEDESTRIAN ACTION BEFORE CRASH

01 Walking / cycling to or from school
02 Approaching or leaving bus
03 Approaching or leaving vehicle
04 Working (not on vehicle)
05 Working on vehicle
06 Pushing motor vehicle
07 Standing, sitting, or lying
08 Playing, running, walking
09 Cycling
10 Entering or crossing
88 Other: WALKING
99 Unknown

PEDESTRIAN ACTION BEFORE CRASH

01 Walking / cycling to or from school
02 Approaching or leaving bus
03 Approaching or leaving vehicle
04 Working (not on vehicle)
05 Working on vehicle
06 Pushing motor vehicle
07 Standing, sitting, or lying
08 Playing, running, walking
09 Cycling
10 Entering or crossing
88 Other: _____
99 Unknown

00 PEDESTRIAN OBEDIENCE TO TRAFFIC SIGNAL

00 No pedestrian signal
01 Obeyed pedestrian signal
02 Disobeyed pedestrian signal
03 Ped signal malfunction
04 Not applicable
99 Unknown

PEDESTRIAN OBEDIENCE TO TRAFFIC SIGNAL

00 No pedestrian signal
01 Obeyed pedestrian signal
02 Disobeyed pedestrian signal
03 Ped signal malfunction
04 Not applicable
99 Unknown

SUBSTANCE USE (mark all that apply)

☐ AP - Alcohol ingested
☐ AC - Alcohol contributed
☐ DP - Illegal drugs ingested
☐ DC - Illegal drugs contributed
☐ MP - Medication ingested
☐ MC - Medication contributed

SUBSTANCE USE (mark all that apply)

☐ AP - Alcohol ingested
☐ AC - Alcohol contributed
☐ DP - Illegal drugs ingested
☐ DC - Illegal drugs contributed
☐ MP - Medication ingested
☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral Tests: HGN, walk-and-turn, one leg stand, etc.	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

☒ NG - No Test given
☐ TR - Test Refused (Alcohol/Drug)
☐ PT - Prelim Positive Test (PBT)
☐ TG - Evidentiary Test given
☐ RP - Results pending

ALCOHOL
☐ Evidentiary Breath 0.
☐ Eye Fluid 0.
☐ Blood (BAC) 0.
☐ Other 0.

Drug screen result ☐

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral Tests: HGN, walk-and-turn, one leg stand, etc.	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

☐ NG - No Test given
☐ TR - Test Refused (Alcohol/Drug)
☐ PT - Prelim Positive Test (PBT)
☐ TG - Evidentiary Test given
☐ RP - Results pending

ALCOHOL
☐ Evidentiary Breath 0.
☐ Eye Fluid 0.
☐ Blood (BAC) 0.
☐ Other 0.

Drug screen result ☐

Transport Units: A, B, C, ..., N

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
KHP	STEIN	EXAMPLE 13	1 / 6

Investigating Officer Name	Badge Number	County	City Name
BRETT	46	PN	

☐ Amended Report

☐ DUI

☐ Hit & Run

I Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
165.7			I070	FWY		75	05/02/2018	20:12	WE

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
50	F	W	◉ FROM ○ AT		BONNER	RD		35	05/02/2018	20:20	WE

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V2 WAS MOWING GRASS ON THE SIDE OF THE ROADWAY WHEN V1 RAN OFF THE ROAD AND CRASHED INTO V2.

Date Arrived (mm/dd/yyyy): 05/02/2018 | Time Arriv.: 20:40 | Day: WE

Latitude (AOI): 38.01187

Longitude (AOI): -99.31413

Photos by

WORK ZONE TYPE

00 ON | AT 00

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

Object 1 Damaged & Nature of Damage (show in diagram)

KDOT? ☒ MOWING TRACTOR

Owner Street Address: 700 SW HARRISON ST

Personal Phone:

Owner Last Name	First Name	Middle Name	City	State	Zip	Work Phone
STATE OF KANSAS			TOPEKA	KS	66603	

Object 2 Damaged & Nature of Damage (show in diagram)

KDOT? ☐

Owner Street Address:

Personal Phone:

Owner Last Name	First Name	Middle Name	City	State	Zip	Work Phone

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

00 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

02 SURFACE TYPE ON | AT 01

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

01 SURFACE CONDITIONS ON | AT 01

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

21 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown
(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

1	2	3
00		

00 None
01 Bridge _____
02 Bridge Overhead
03 Railroad Bridge
04 RRXING _____
05 Interchange
06 Ramp
99 Unknown

03 CRASH CLASS (mark 1 box per side) 03

1st Harmful Event | Most Harmful Event

00 Other non-collision
01 Overturned/Rollover
COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

****FIXED OBJECT TYPE**

(mark 1 box per side if applicable)

1st Harmful Event | Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: _____
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

02 *COLLISION WITH VEHICLE 02

(mark 1 box per side if applicable)

1st Harmful Event | Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: _____
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

Type Present		OK/NF
1 O	1 00	1 OK
2	2	2
3	3	3
4	4	4
5	5	5

Crash Diagram

850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.: EXAMPLE 13

Page 2 / 6

03 ON — ROADWAY NUMBER OF LANES | **02 AT**

01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 ON — ROAD CHARACTER | **01 AT**

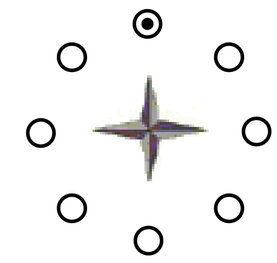
01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

00 — SPECIAL JURISDICTION

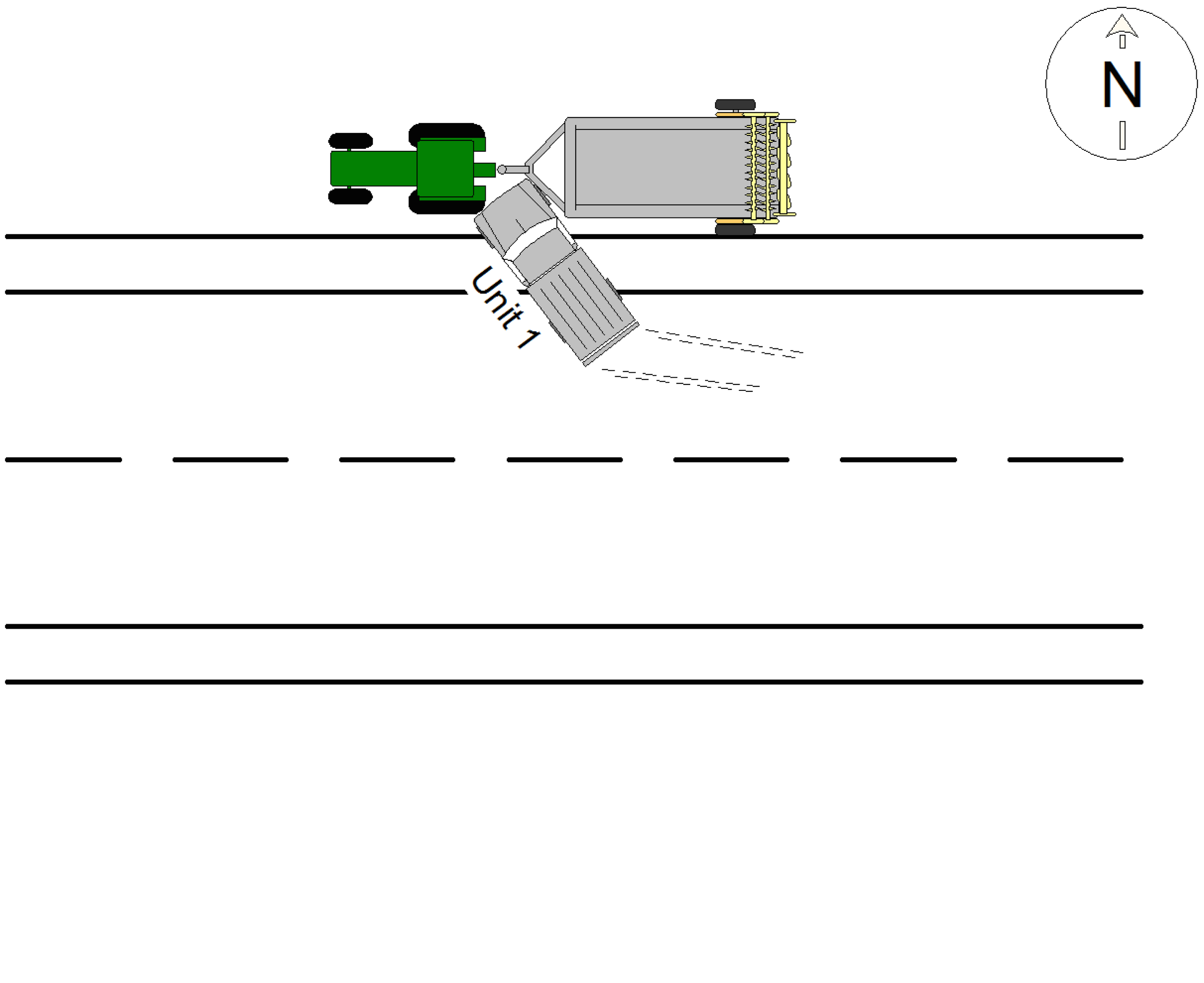
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: BRETT 46

Local Case No.: EXAMPLE 13

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

D1 03

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	HARRIS	MN J	5236 W MAIN ST (New address? ☐)	Personal (785) 222-2632	M	S	I	A
ST 01	JOHN	DOB 11/06/1966	TOPEKA KS 66613	Work (785) 223-6584	52	N		☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
KS	K036598962	C	☐	☐

01 — DR LICENSE COMPLY

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions		Complied? Y	N
1		☐	☐
2		☐	☐
3		☐	☐
4		☐	☐

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☒ MP - Medication ingested
- ☒ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☒
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☒ TG - Evidentiary Test given
- ☒ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result: P

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

DR LICENSE COMPLY

00 Not licensed
01 Valid License
02 Suspended
03 Revoked
04 Expired
05 Cancld or Denied
06 Disqualified
07 Restricted
99 Unknown

RESTRICT COMPLY

Restrictions? ☐

Driver's Lic Restrictions		Complied? Y	N
1		☐	☐
2		☐	☐
3		☐	☐
4		☐	☐

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

Z - None
T - Double/Triple Trailer
P - Passenger Vehicle
N - Tank Vehicle
H - Placarded Haz. Material
X - Combination Tank/HazMat
S - School Bus
U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. ☐ Eye Fluid 0. ☐ Blood (BAC) 0. ☐ Other 0.

Drug screen result:

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit	EMS Time Notified	Injured taken by:
A	21:25	AMBULANCE
EMS Arrived	EMS Time@Hosp	Injured taken to:
21:46	22:30	ST FRANICS HOSPITAL

Transport Unit	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Occupants & Vehicles

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Local Case No.: EXAMPLE 13

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
HARRIS	JOHN	J

OWNER ADDRESS (Number, Street)	New address?	Personal Phone
5236 W MAIN ST	☐	(785) 222-2632

CITY	ST	ZIP	Work Phone
TOPEKA	KS	66613	(785) 223-6584

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
BLK	1995	CHEV	S10	PK	KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
EIS543	SN	2020	REEDS TOW	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
1ZK2656F5DS66WW59	W	1

Insurance Company	Policy Number
STATE FARM	J52388XQ

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 | 2: | 3: | 4: | 5:

Odometer: 123589 — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

05 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: ____; 99 Unknown

Calculated speed at impact

Bus Seat Capacity ____

Power Source: F

01 VEHICLE USE

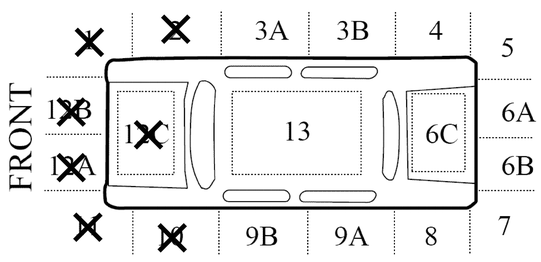
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

03 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: ____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 12 — Major Impact: 12



☐ 14 Undercarriage; ☒ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: ____

Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: ____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 01 | 2: 22 | 3: | 4: — ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: ____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; ____; 99 Unknown object

VEHICLE# 02 (02, 04, N2, X4, etc)

SPECIAL DATA

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
STATE OF KANSAS		

OWNER ADDRESS (Number, Street)	New address?	Personal Phone
700 SW HARRISON ST	☐	

CITY	ST	ZIP	Work Phone
TOPEKA	KS	66603	

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
ONG	2015	DEER	CE		KS

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
VAS592	SN	2019	OPERATOR	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
2JD55E2EE555C5E55	W	1

Insurance Company	Policy Number
FLINT INS	2245886332

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: | 2: | 3: | 4: | 5:

Odometer: 65238 — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

08 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: ____; 99 Unknown

Calculated speed at impact

Bus Seat Capacity ____

Power Source: F

01 VEHICLE USE

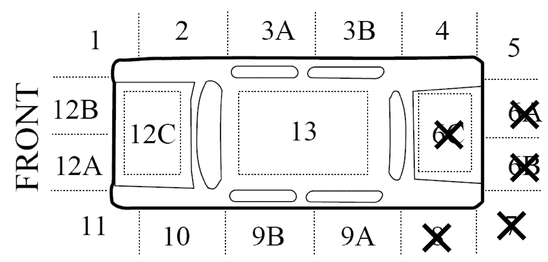
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

02 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: ____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 07 — Major Impact: 07



☐ 14 Undercarriage; ☐ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: ____

D Trailer: Present / Damaged

88 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: MOWING OFF; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 22 | 2: | 3: | 4: — ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: ____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object; ____; 99 Unknown object

Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. BRETT 46	Local Case No. EXAMPLE 13	Page of 5 / 6

(Include more details here)

Passengers & Pedestrians
854 page 2

PEDESTRIAN INFORMATION

Investigating Officer / Badge No.: BRETT 46

Local Case No.: EXAMPLE 13

Page 6 / 6

Unit # / Ped Type	PEDESTRIAN Last Name / First Name	Middle Name / Date of Birth	PEDESTRIAN ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 03	STOSSEL	MN K	226 NE JONSTON DR (New address? ☐)	Personal (785) 213-6879	M	S	N	
PT 26	GARY	DOB 05/20/1979	TOPEKA KS 66623	Work (785) 296-3351	38	N		☐
TU		MN	(New address? ☐)	Personal				
PT		DOB		Work				☐

Transport Unit ___	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Unit ___	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

TU#	DirTrvl	DL State	Driver's License Number	Special Data
03	W	KS	K36500032	

TU#	DirTrvl	DL State	Driver's License Number	Special Data

PEDESTRIAN ROADWAY LOCATION BEFORE IMPACT

00

00 NOT in roadway (driving lanes)

IN or AT INTERSECTION

01 In crosswalk or bikeway
02 NOT in crosswalk or bikeway
03 In intersection without a crosswalk or bikeway

NOT IN or AT INTERSECTION

11 In crosswalk or bikeway
12 NOT in crosswalk or bikeway
13 In area without a crosswalk or bikeway

88 Other: ___
99 Unknown

PEDESTRIAN ROADWAY LOCATION BEFORE IMPACT

(blank)

00 NOT in roadway (driving lanes)

IN or AT INTERSECTION

01 In crosswalk or bikeway
02 NOT in crosswalk or bikeway
03 In intersection without a crosswalk or bikeway

NOT IN or AT INTERSECTION

11 In crosswalk or bikeway
12 NOT in crosswalk or bikeway
13 In area without a crosswalk or bikeway

88 Other: ___
99 Unknown

OTHER PEDESTRIAN LOCATION (Not in Driving Lanes)

05

01 Within a work zone
02 In median (not shoulder)
03 On Island
04 Road shoulder (not ditch or median)
05 Roadside (not on shoulder)
06 Sidewalk
07 Outside trafficway
08 Driveway access crosswalk
09 Dedicated bike lane
10 Shared-use path or trails
11 Inside building
12 In legally parked vehicle
88 Other: ___
99 Unknown

OTHER PEDESTRIAN LOCATION (Not in Driving Lanes)

(blank)

01 Within a work zone
02 In median (not shoulder)
03 On Island
04 Road shoulder (not ditch or median)
05 Roadside (not on shoulder)
06 Sidewalk
07 Outside trafficway
08 Driveway access crosswalk
09 Dedicated bike lane
10 Shared-use path or trails
11 Inside building
12 In legally parked vehicle
88 Other: ___
99 Unknown

PEDESTRIAN ACTION BEFORE CRASH

04

01 Walking / cycling to or from school
02 Approaching or leaving bus
03 Approaching or leaving vehicle
04 Working (not on vehicle)
05 Working on vehicle
06 Pushing motor vehicle
07 Standing, sitting, or lying
08 Playing, running, walking
09 Cycling
10 Entering or crossing
88 Other: ___
99 Unknown

PEDESTRIAN ACTION BEFORE CRASH

(blank)

01 Walking / cycling to or from school
02 Approaching or leaving bus
03 Approaching or leaving vehicle
04 Working (not on vehicle)
05 Working on vehicle
06 Pushing motor vehicle
07 Standing, sitting, or lying
08 Playing, running, walking
09 Cycling
10 Entering or crossing
88 Other: ___
99 Unknown

PEDESTRIAN OBEDIENCE TO TRAFFIC SIGNAL

00

00 No pedestrian signal
01 Obeyed pedestrian signal
02 Disobeyed pedestrian signal
03 Ped signal malfunction
04 Not applicable
99 Unknown

PEDESTRIAN OBEDIENCE TO TRAFFIC SIGNAL

(blank)

00 No pedestrian signal
01 Obeyed pedestrian signal
02 Disobeyed pedestrian signal
03 Ped signal malfunction
04 Not applicable
99 Unknown

SUBSTANCE USE (mark all that apply)

☐ AP - Alcohol ingested
☐ AC - Alcohol contributed
☐ DP - Illegal drugs ingested
☐ DC - Illegal drugs contributed
☐ MP - Medication ingested
☐ MC - Medication contributed

SUBSTANCE USE (mark all that apply)

☐ AP - Alcohol ingested
☐ AC - Alcohol contributed
☐ DP - Illegal drugs ingested
☐ DC - Illegal drugs contributed
☐ MP - Medication ingested
☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral Tests: HGN, walk-and-turn, one leg stand, etc.	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

☒ NG - No Test given
☐ TR - Test Refused (Alcohol/Drug)
☐ PT - Prelim Positive Test (PBT)
☐ TG - Evidentiary Test given
☐ RP - Results pending

ALCOHOL
☐ Evidentiary Breath 0.___ ☐ Eye Fluid 0.___
☐ Blood (BAC) 0.___ ☐ Other 0.___

Drug screen result ☐

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral Tests: HGN, walk-and-turn, one leg stand, etc.	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

☐ NG - No Test given
☐ TR - Test Refused (Alcohol/Drug)
☐ PT - Prelim Positive Test (PBT)
☐ TG - Evidentiary Test given
☐ RP - Results pending

ALCOHOL
☐ Evidentiary Breath 0.___ ☐ Eye Fluid 0.___
☐ Blood (BAC) 0.___ ☐ Other 0.___

Drug screen result ☐

Transport Units: A, B, C, ..., N

Kansas Motor Vehicle Crash Report

KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
WASHINGTON CO SHERIFF	M. PENCE	EXAMPLE 14	1 / 5

Investigating Officer Name	Badge Number	County	City Name
D.TRUMP	45	WS	

☐ Amended Report

☐ DUI

☐ Hit & Run

PO Accident Severity

Fatal
Injury
PDO >= $1,000
PDO < $1,000

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
	1600	NW	PENNSYLVANIA	AVE		35	07/04/2018	10:05	WE

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
150	F	S	(•) FROM ( ) AT	NW	18TH	ST		35	07/04/2018	10:15	WE

Date Arrived (mm/dd/yyyy)	Time Arriv.	Day
07/04/2018	10:30	WE

Narrative: Describe each traffic unit's pre-crash movement and direction of travel

V1 WAS TRAVELING NB ON PENNSYLVANIA AVE WHEN THE DRIVER SIDE FRONT TIRE CAME OFF AND THE TIRE STRUCK SB V2.

Latitude (AOI): 39.05362

Longitude (AOI): -95.678837

Photos by

KDOT? ☐ Object 1 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

KDOT? ☐ Object 2 Damaged & Nature of Damage (show in diagram) | Owner Street Address | Personal Phone

Owner Last Name | First Name | Middle Name | City | State | Zip | Work Phone

ONLY CHOOSE ONE CODE PER CATEGORY UNLESS SPECIFIED OTHERWISE

01 LIGHT CONDITIONS

01 Daylight
02 Dawn
03 Dusk
04 Dark: street lights on
05 Dark: no street lights
99 Unknown

00 ADVERSE WEATHER CONDITIONS

00 No adverse conditions
01 Rain, mist, drizzle
02 Sleet, hail
03 Snow
04 Fog
05 Smoke
06 Strong wind
07 Blowing dust, sand, etc.
08 Freezing rain, mist, drizzle
14 Rain & fog
16 Rain & wind
24 Sleet & fog
36 Snow & wind
88 Other: _____
99 Unknown

01 SURFACE TYPE

ON 01 | AT 01

01 Concrete
02 Blacktop (Asphalt)
03 Gravel
04 Dirt
05 Brick
88 Other: _____
99 Unknown

01 SURFACE CONDITIONS

ON 01 | AT 01

01 Dry
02 Wet
03 Snow
04 Ice
05 Mud/dirt/sand
06 Debris (oil, etc.)
07 Standing/ moving water
08 Slush
88 Other: _____
99 Unknown

11 CRASH LOCATION (of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
11 Non-intersection
12 Intersection +
13 Intersection-related +
14 Access to Parking lot/Drvwy
15 Interchange Area +
16 On Crossover
17 Toll Plaza

OFF ROADWAY:
20 Shoulder
21 Roadside (not shoulder)
22 Median
23 Rest area
88 Other: _____
99 Unknown

+ INTERSECTION TYPE

01 Four-way intersection
02 Five-way or more
03 T - intersection
04 Y - intersection
05 L - intersection
06 Roundabout
07 Traffic Circle
08 Part of an interchange
99 Unknown

(See Manual for Definitions)

ROAD SPECIAL FEATURES (up to 3)

00 None
01 Bridge
02 Bridge Overhead
03 Railroad Bridge
04 RRXING
05 Interchange
06 Ramp
99 Unknown

1	2	3
00		

08 CRASH CLASS 03

(mark 1 box per side)

1st Harmful Event	Most Harmful Event

00 Other non-collision
01 Overturned/Rollover

COLLISION WITH:
02 Pedestrian
03 Motor vehicle in-transport*
04 Legally Parked Vehicle
05 Railway train
06 Pedal cyclist
07 Animal Type: _____
08 Fixed object**
09 Other object: _____
99 Unknown

88 **FIXED OBJECT TYPE

(mark 1 box per side if applicable)

1st Harmful Event	Most Harmful Event

01 Bridge structure
02 Bridge rail
03 Crash cush./Impact attenuator
04 Divider, median barrier
05 Overhead sign support
06 Utility devices: pole,meter,etc
07 Other post or pole
08 Building
09 Guardrail
10 Sign post
11 Culvert
12 Curb
13 Fence/Gate
14 Hydrant
15 Barricade
16 Mailbox
17 Ditch
18 Embankment
19 Wall
20 Tree
21 RRXING fixtures
88 Other: PAVEMENT
99 Unknown

00 WORK ZONE TYPE

ON 00 | AT

00 None Apply
01 Construction Zone -
02 Maintenance Zone -
KDOT? ☐
03 Utility Zone -
99 Unknown

- LOCATION IN WORK ZONE (AOI)

01 Before first warning sign
02 Advance warning area
03 Transition area
04 Activity area
05 Termination area
99 Unknown

- WORK ZONE CATEGORY

01 Lane closure
02 Lane shift / crossover
03 Work on shoulder / median
04 Intermittent or moving vehicle
88 Other: _____
99 Unknown

*COLLISION WITH VEHICLE 88

(mark 1 box per side if applicable)

1st Harmful Event	Most Harmful Event

01 Head on
02 Rear end
03 Angle - side impact
04 Sideswipe: opposite direction
05 Sideswipe: Same direction
06 Backed into
88 Other: TIRE HIT FRONT
99 Unknown

TRAFFIC CONTROLS

(On / At Road) O/A

00 None
01 Officer, flagger
02 Traffic signal
03 Stop sign
04 Flasher
05 Yield sign
06 RR gates / signal
07 RR crossing signs
08 No passing zone
09 Center/Edge lines
10 Warning signs
11 School zone signs
12 Parking lines
88 Other: _____
99 Unknown

	Type Present	OK/NF
1	1 O	1 OK
2	1 09	2
3	3	3
4	4	4
5	5	5

Crash Diagram
850A page 2

SPECIAL EVENT

SPECIAL DATA

Local Case No.
EXAMPLE 14

Page of
2 / 5

02	ROADWAY NUMBER OF LANES	02	01	ROAD CHARACTER	01	00	SPECIAL JURISDICTION
ON		AT	ON		AT		

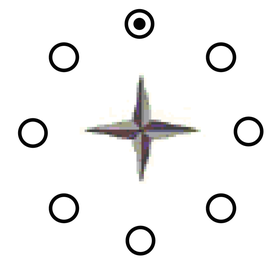
01 One
02 Two
03 Three
04 Four to Six
05 Seven or more
88 Other: _____
99 Unknown

01 Straight & Level
02 Straight on grade/slope
03 Straight on hillcrest
04 Curved & level
05 Curved on grade/slope
06 Curved on hillcrest
88 Other: _____
99 Unknown

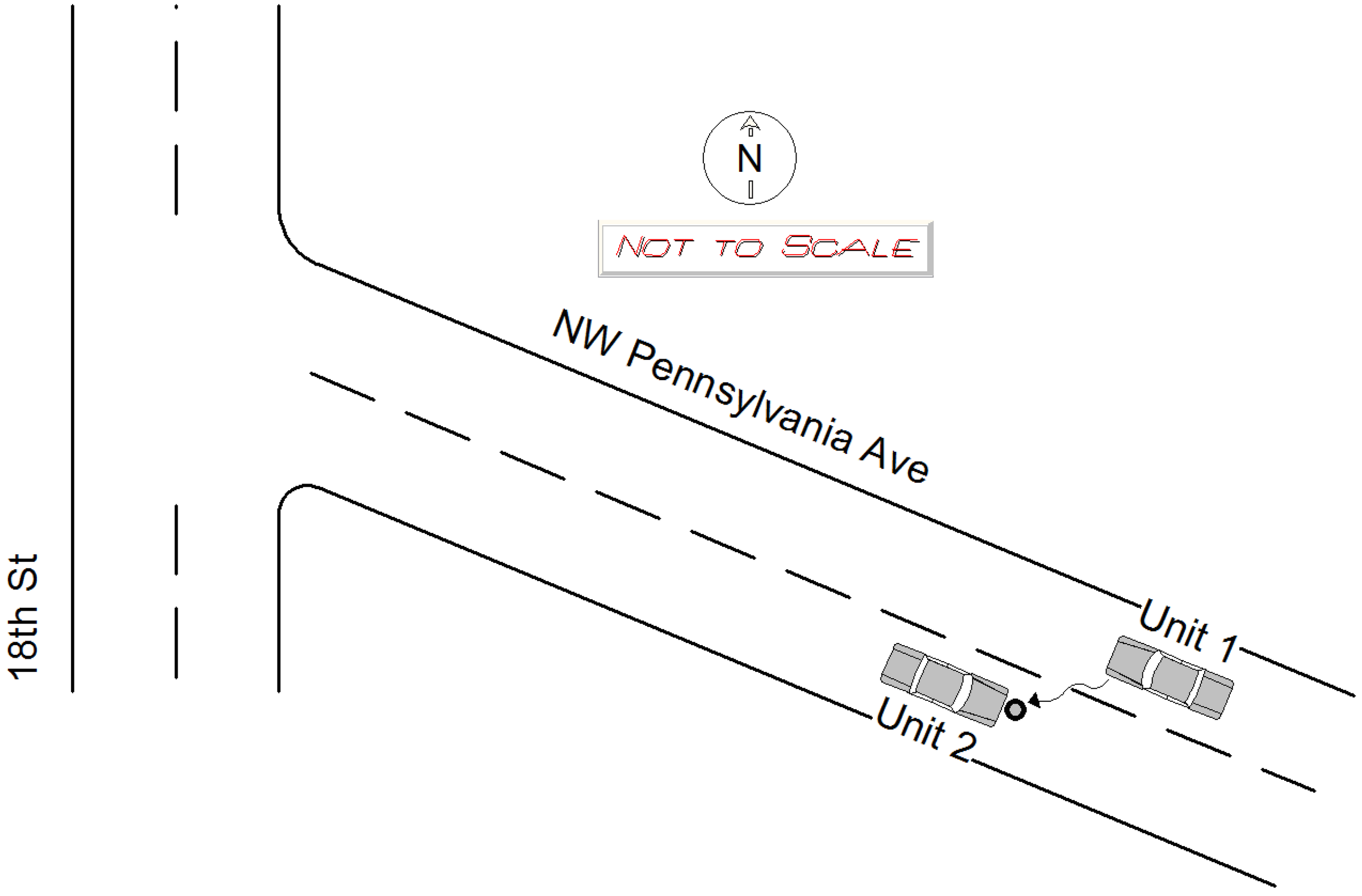
00 Normal Jurisdiction (Not Special)
01 National Park Service
02 Military
03 Indian Reservation
04 College / University Campus
05 Other Federal property
88 Other: _____
99 Unknown

A basic diagram is required for all state reportable crashes showing movements, direction, and positions of all traffic units in relationship to the trafficway. Identify (label) the street(s) and traffic unit(s) along with the area of impact (AOI) where possible. Refer to vehicles and pedestrians by unique numbers assigned in this report.

Indicate North Direction



Draw scene as observed or recreate per statements and evidence available



Occupants & Vehicles

KDOT Form 850B page 1 - Rev. 2019

DRIVER & PASSENGER INFORMATION

(record pedestrians on supplemental form 854)

Investigating Officer / Badge No.: D.TRUMP 45

Local Case No.: EXAMPLE 14

TU#	VIOLATIONS CHARGED	CITATION#	TU#	VIOLATIONS CHARGED (More violations in narrative ☐)	CITATION#

OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS CRASH (FACTOR TYPE, TU#, CC CODE)

V1 | 02

Unit # / Seat Type	DRIVER Last Name / First Name	Middle Name / Date of Birth	DRIVER ADDRESS (Number, Street, Suffix, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU 01	MUSK	MN R	622 MADRICH RD (New address? ☐)	Personal (966) 561-3884	M	S	N	
ST 01	ELON	DOB 06/28/1971	PALO ALTO CA 94440	Work	47	N		☐
TU 02	WHITTAKER	MN	2960 CANYON DR (New address? ☐)	Personal (956) 332-1489	M	S	N	
ST 01	WILLIAM	DOB 11/05/1942	NEW YORK NJ 55632	Work (956) 332-1488	75	N		☐

TRAFFIC UNIT# 01 (01, 03, N3, X3, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
CA	99944588	C	☒	☐

01 DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? N

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
- S - School Bus
- U - Unknown

SUBSTANCE USE (mark all that apply)

- ☐ AP - Alcohol ingested
- ☐ AC - Alcohol contributed
- ☐ DP - Illegal drugs ingested
- ☐ DC - Illegal drugs contributed
- ☐ MP - Medication ingested
- ☐ MC - Medication contributed

METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☒ 00 No evidence of impairment	☒
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☒ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

TRAFFIC UNIT# (02, 04, N2, X4, etc)

DL State	Driver's License Number	DL Class	Driving for Employer?	CDL?
			☐	☐

DR LICENSE COMPLY

- 00 Not licensed
- 01 Valid License
- 02 Suspended
- 03 Revoked
- 04 Expired
- 05 Cancld or Denied
- 06 Disqualified
- 07 Restricted
- 99 Unknown

RESTRICT COMPLY

Restrictions? ☐

Driver's Lic Restrictions	Complied? Y	N
1		
2		
3		
4		

COMMERCIAL ENDORSEMENTS

1 | 2 | 3 | 4

- Z - None
- T - Double/Triple Trailer
- P - Passenger Vehicle
- N - Tank Vehicle
- H - Placarded Haz. Material
- X - Combination Tank/HazMat
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METHOD OF DETERMINATION (mark all that apply)

ALCOHOL	DRUGS
☐ 00 No evidence of impairment	☐
☐ 01 Evidential Test (Breath,Blood,etc)	☐
☐ 02 Preliminary Breath Test PBT	
☐ 03 Behavioral (Tests: HGN, walk-and-turn, one leg stand, etc.)	☐
☐ 04 Passive Alcohol Sensor (detects alcohol from driver's mouth)	
☐ 05 Observed (Odor, staggering, slurred speech, etc)	☐
☐ 06 Other (e.g. saliva test)	☐

IMPAIRMENT TEST (mark all that apply)

- ☐ NG - No Test given
- ☐ TR - Test Refused (Alcohol/Drug)
- ☐ PT - Prelim Positive Test (PBT)
- ☐ TG - Evidentiary Test given
- ☐ RP - Results pending

ALCOHOL: ☐ Evidentiary Breath 0. | ☐ Eye Fluid 0. | ☐ Blood (BAC) 0. | ☐ Other 0.

Drug screen result ☐

Unit # / Seat Type	PASSENGER Last Name / First Name	Middle Name / Date of Birth	PASSENGER ADDRESS (Number, Street, Sfx, etc.) / City State Zip	Personal Phone Number / Work Phone Number	Gender / Age	SE Used / Eject/Trap	Inj Severity / Eject Path	Transpt Unit / Extrication?
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐
TU		MN	(New address? ☐)	Personal				
ST		DOB		Work				☐

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Transport Unit ____	EMS Time Notified	Injured taken by:
EMS Arrived	EMS Time@Hosp	Injured taken to:

Occupants & Vehicles

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Local Case No.: EXAMPLE 14

VEHICLE# 01 (01, 03, N3, X3, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
TELSA INC		

OWNER ADDRESS (Number, Street)	New address?	Personal Phone
3500 DEER CREEK RD	☐	

CITY	ST	ZIP	Work Phone
PALO ALTO	KS	94304	(888) 518-3752

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
RED	2018	TESL	TS	4D	CA

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
2THEMOON	LA	2019	BROWNS TOW	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
1GGTT8844K4KDLL	N	1

Insurance Company	Policy Number
STATE FARM	FFU449-22O-2L2

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: 7 | 2: | 3: | 4: | 5:

Odometer: 12563 — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact:

Bus Seat Capacity: _____

Power Source: E

01 VEHICLE USE

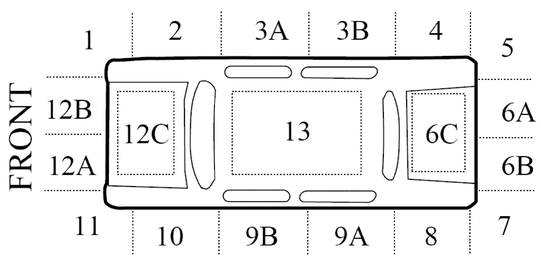
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

03 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 14 — Major Impact: 14



☒ 14 Undercarriage; ☐ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: _____

☐ Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 09 | 2: 27 | 3: | 4: — ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object _____; 99 Unknown object

VEHICLE# 02 (02, 04, N2, X4, etc)

SPECIAL DATA:

OWNER Last Name ("Same" if Driver)	OWNER First Name	Middle Name
UBER		

OWNER ADDRESS (Number, Street)	New address?	Personal Phone
555 MARKET ST	☐	

CITY	ST	ZIP	Work Phone
SAN FRANSICO	CA	94105	(415) 986-2104

COLOR	YEAR	MAKE	MODEL	BODY STYLE	ST
BLK	2018	HOND	CIV	4D	CA

LICENSE PLATE #	County	Exp YR	Removed by:	MC CCs
AUTOBOT1	LA	2019	OWNER	

VEHICLE IDENTIFICATION NUMBER	Dir of Travel	# Occupants
134JJNRIF99FDDKK	S	1

Insurance Company	Policy Number
GEICO	HH8899-11

SPECIAL CONDITIONS FOR TRAFFIC UNITS: 1: | 2: | 3: | 4: | 5:

Odometer: 23052 — Fire? ☐

1 Hit & Run; 2 Non-Contact; 3 Stolen; 4 Legally Parked; 5 Pursued by LE; 6 Driverless; 7 Towed away due to damage

01 VEHICLE BODY TYPE

01 Automobile; 02 Motorcycle; 03 Motor scooter or Moped; 04 Van; 05 Pickup truck <10,001 lbs; 06 Sport utility veh - SUV; 07 Camper or RV; 08 Farm machinery; 09 All-terrain vehicle - ATV

LARGE / HEAVY VEHICLE (GCVWR over 10,000lbs)

10 Single heavy truck >10,000 lbs; 11 Truck & trailer(s); 12 Tractor-trailer(s); 13 Cross country bus; 14 School bus; 15 Transit (city) bus; 16 Other bus; 25 Train; 88 Other: _____; 99 Unknown

Calculated speed at impact:

Bus Seat Capacity: _____

Power Source: H

02 VEHICLE USE

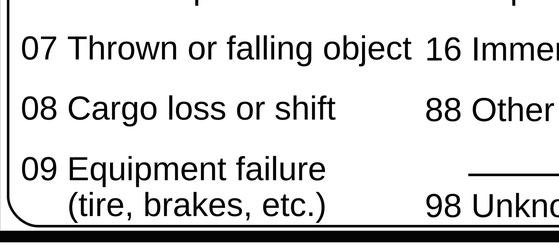
01 No special use; 02 Taxi / Limo; 03 School bus; 04 Other bus; 05 Military; 06 Police; 07 Ambulance; 08 Fire; 09 Mail/Parcel; 99 Unknown

01 VEHICLE DAMAGE

00 None; 01 Damage (minor); 02 Functional; 03 Disabling; 04 Destroyed; 88 Other: _____; 99 Unknown

DAMAGE LOCATION AREA

First Impact: 11 — Major Impact: 11



☐ 14 Undercarriage; ☐ 15 Windshield; ☐ 16 Other windows; ☐ 99 Unknown; ☐ 17 Entire vehicle damaged; ☐ 88 Other: _____

☐ Trailer: Present / Damaged

01 VEH. MANU. BEFORE UNSTAB. SIT.

01 Straight/following road; 02 Left Turn; 03 Right Turn; 04 U Turn; 05 Passing; 06 Changing lanes; 07 Avoidance man.; 08 Merging; 09 Parking; 10 Backing; 11 Stopped awaiting turn; 12 Stopped in traf; 13 Illegally parked; 14 Disabled in roadway; 15 Slowing or stopping; 16 Negotiating a curve; 88 Other: _____; 99 Unknown

VEHICLE SEQUENCE OF EVENTS (List up to 4 per unit in the order of occurence)

1: 28 | 2: | 3: | 4: — ☐ The exact sequence is unknown

NON-COLLISION

01 Ran off road right; 02 Ran off road left; 03 Crossed centerline; 04 Overturn/Rollover; 05 Crossed median; 06 Fell/Jumped from veh; 07 Thrown or falling object; 08 Cargo loss or shift; 09 Equipment failure (tire, brakes, etc.); 10 Downhill runaway; 11 Trailer swing; 12 Separation of units; 13 Jackknife; 14 Fire; 15 Explosion; 16 Immersion in water; 88 Other event: _____; 98 Unknown non-coll.

COLLISION WITH

21 Pedestrian; 22 Motor veh in-transport; 23 Legally Parked Vehicle; 24 Train; 25 Pedal cycle (bike, etc); 26 Animal; 27 Fixed Object; 28 Other moveable object ROLLING TIRE; 99 Unknown object

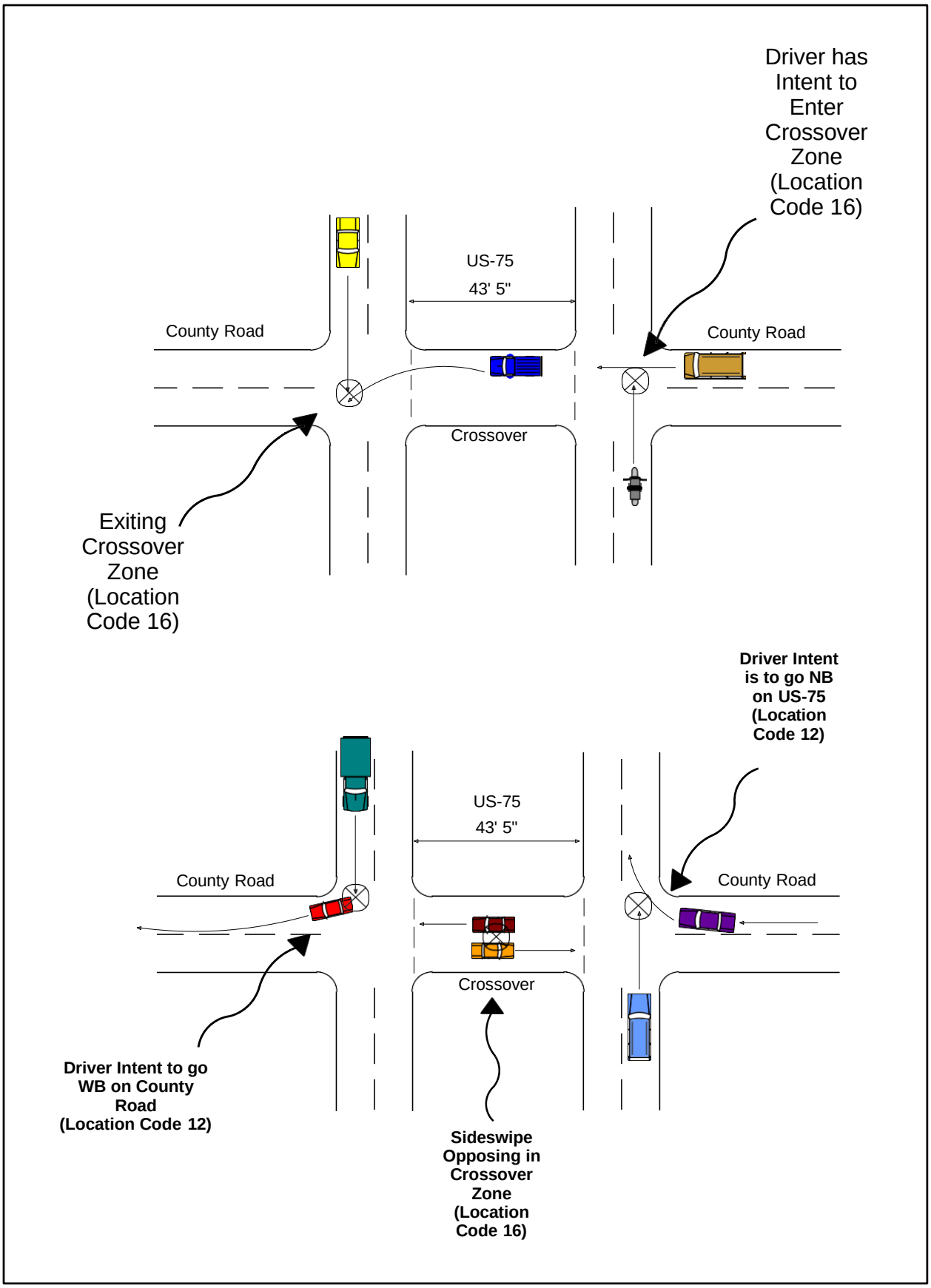
Crash Narrative KDOT Form 851 - Rev. 2019	Officer / Witness Statements / Description Additional Information	Investigating Officer / Badge No. D.TRUMP 45	Local Case No. EXAMPLE 14	Page of 5 / 5

V1 (AN ELECTRIC CAR) WAS TRAVELING NB ON PENNSYLVANIA AVE WHEN THE DRIVER SIDE FRONT TIRE CAME OFF THE VEHICLE AND THE BRAKE ROTOR STRUCK THE PAVEMENT CAUSING DAMAGE TO THE PAVEMENT AND UNDERCARRIAGE OF V1. THE TIRE FROM V1 ROLLED INTO THE OPPOSITE LANE AND STRUCK V2, WHICH WAS SB ON PENNSYLVANIA AVE. V2 RECEIVED MINOR DAMAGE TO THE FRONT BUMPER AREA. V2 IS AN AUTONOMOUS VEHICLE FOR UBER. THE PASSENGER OF THE VEHICLE WAS IN THE DRIVER SEAT BUT CLAIMED THE VEHICLE WAS IN AUTONOMOUS MODE AND DRIVING ITSELF.

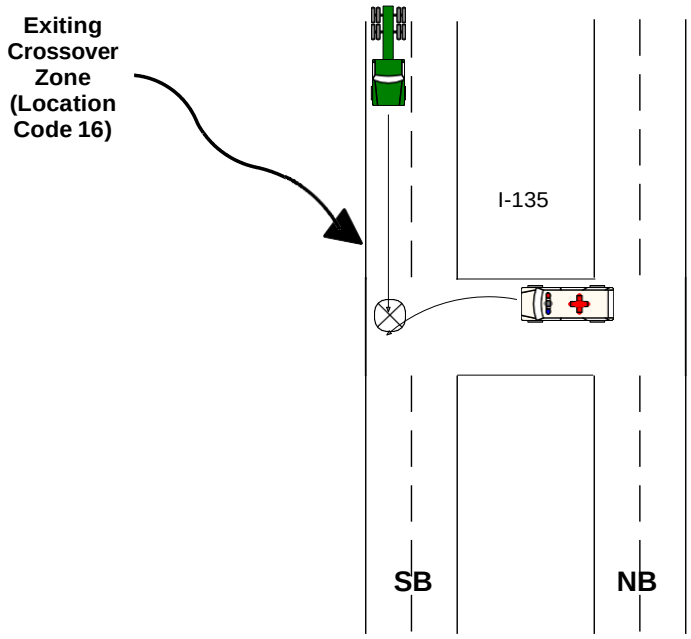
DUE TO THE PASSENGER BEING IN THE DRIVER SEAT POSITION, HE HAS TO BE LISTED AS THE DRIVER. IF HE WAS IN ANOTHER SEAT POSITION, HE WOULD BE LISTED AS A PASSENGER AND THE DRIVER FIELD THEN LEFT BLANK.

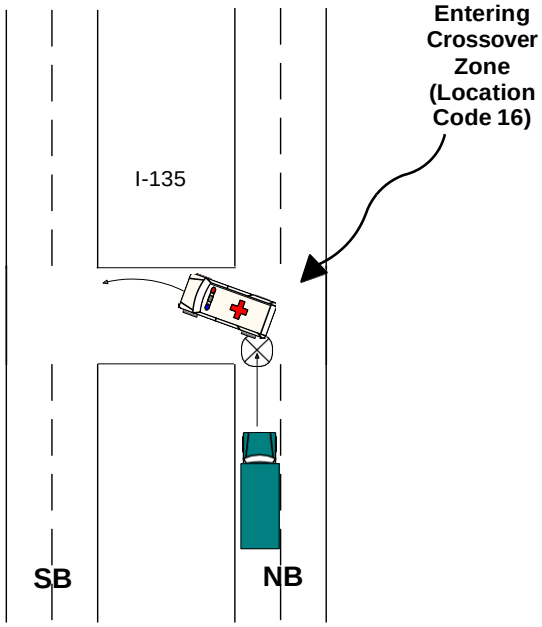
D.TRUMP #45

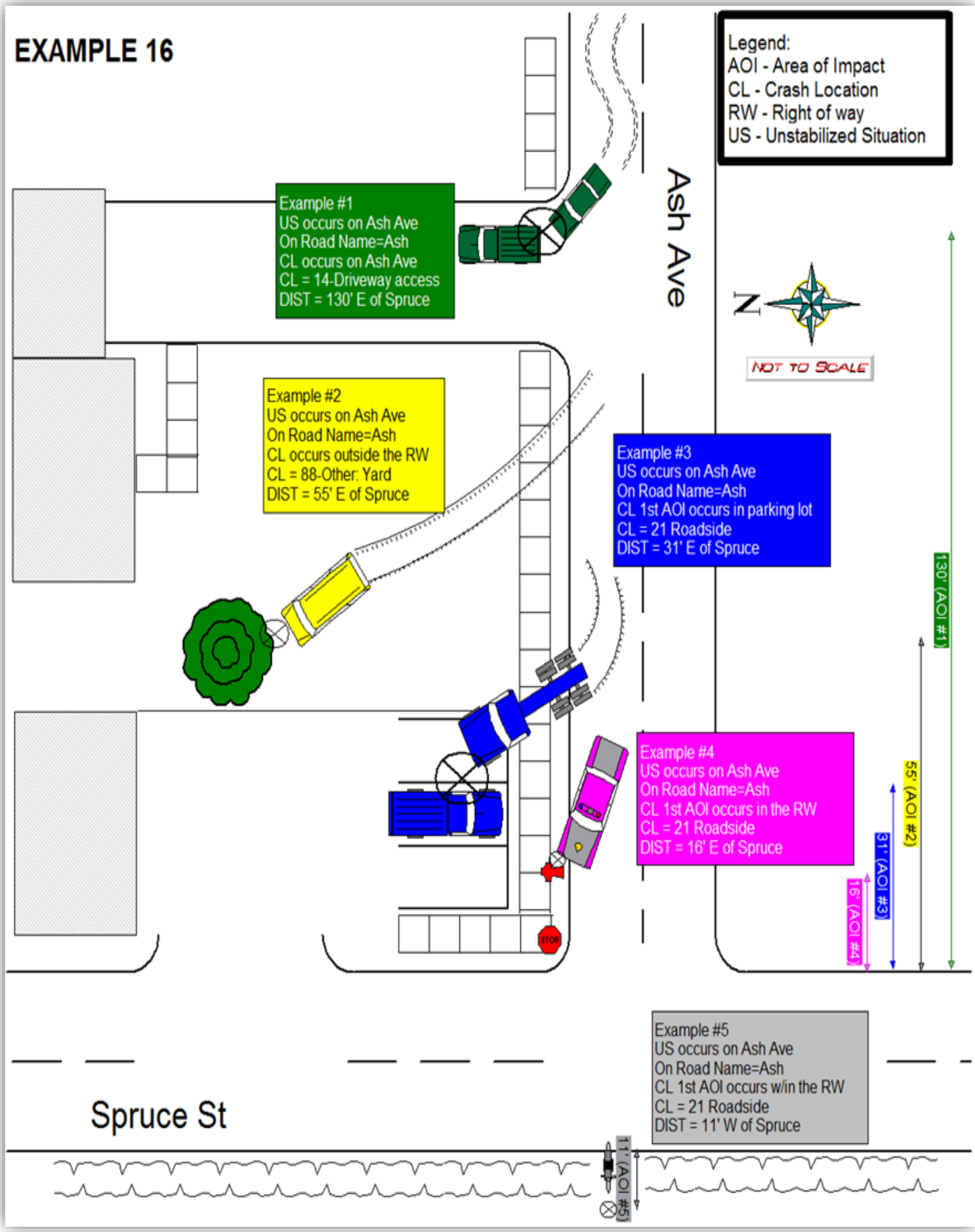
EXAMPLE 15A


Driver has Intent to Enter Crossover Zone (Location Code 16)
US-75
43' 5"
County Road
County Road
Crossover
Exiting Crossover Zone (Location Code 16)
Driver Intent is to go NB on US-75 (Location Code 12)
US-75
43' 5"
County Road
County Road
Crossover
Driver Intent to go WB on County Road (Location Code 12)
Sideswipe Opposing in Crossover Zone (Location Code 16)

EXAMPLE 15B

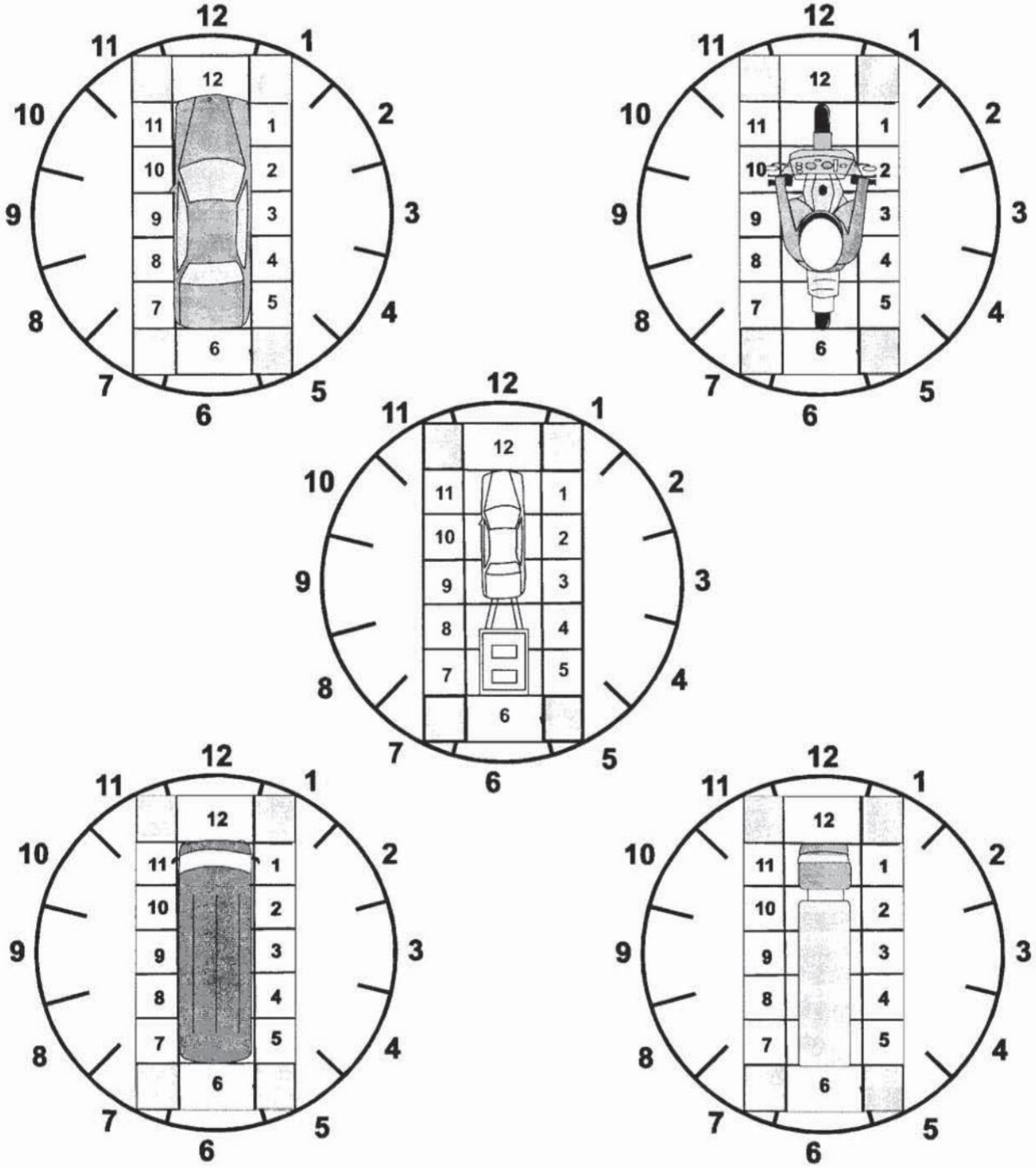

Exiting Crossover Zone (Location Code 16)
I-135
SB
NB


Entering Crossover Zone (Location Code 16)
I-135
SB
NB


EXAMPLE 16
Legend:
AOI - Area of Impact
CL - Crash Location
RW - Right of way
US - Unstabilized Situation
Example #1
US occurs on Ash Ave
On Road Name=Ash
CL occurs on Ash Ave
CL = 14-Driveway access
DIST = 130' E of Spruce
Example #2
US occurs on Ash Ave
On Road Name=Ash
CL occurs outside the RW
CL = 88-Other: Yard
DIST = 55' E of Spruce
Example #3
US occurs on Ash Ave
On Road Name=Ash
CL 1st AOI occurs in parking lot
CL = 21 Roadside
DIST = 31' E of Spruce
Example #4
US occurs on Ash Ave
On Road Name=Ash
CL 1st AOI occurs in the RW
CL = 21 Roadside
DIST = 16' E of Spruce
Example #5
US occurs on Ash Ave
On Road Name=Ash
CL 1st AOI occurs w/in the RW
CL = 21 Roadside
DIST = 11' W of Spruce
Ash Ave
N
NOT TO SCALE
130' (AOI #1)
55' (AOI #2)
31' (AOI #3)
16' (AOI #4)
11' (AOI #5)
STOP
Spruce St

Other Vehicle Examples

CLOCKPOINT DIAGRAM



Source: National Highway Traffic Safety Administration (NHTSA)

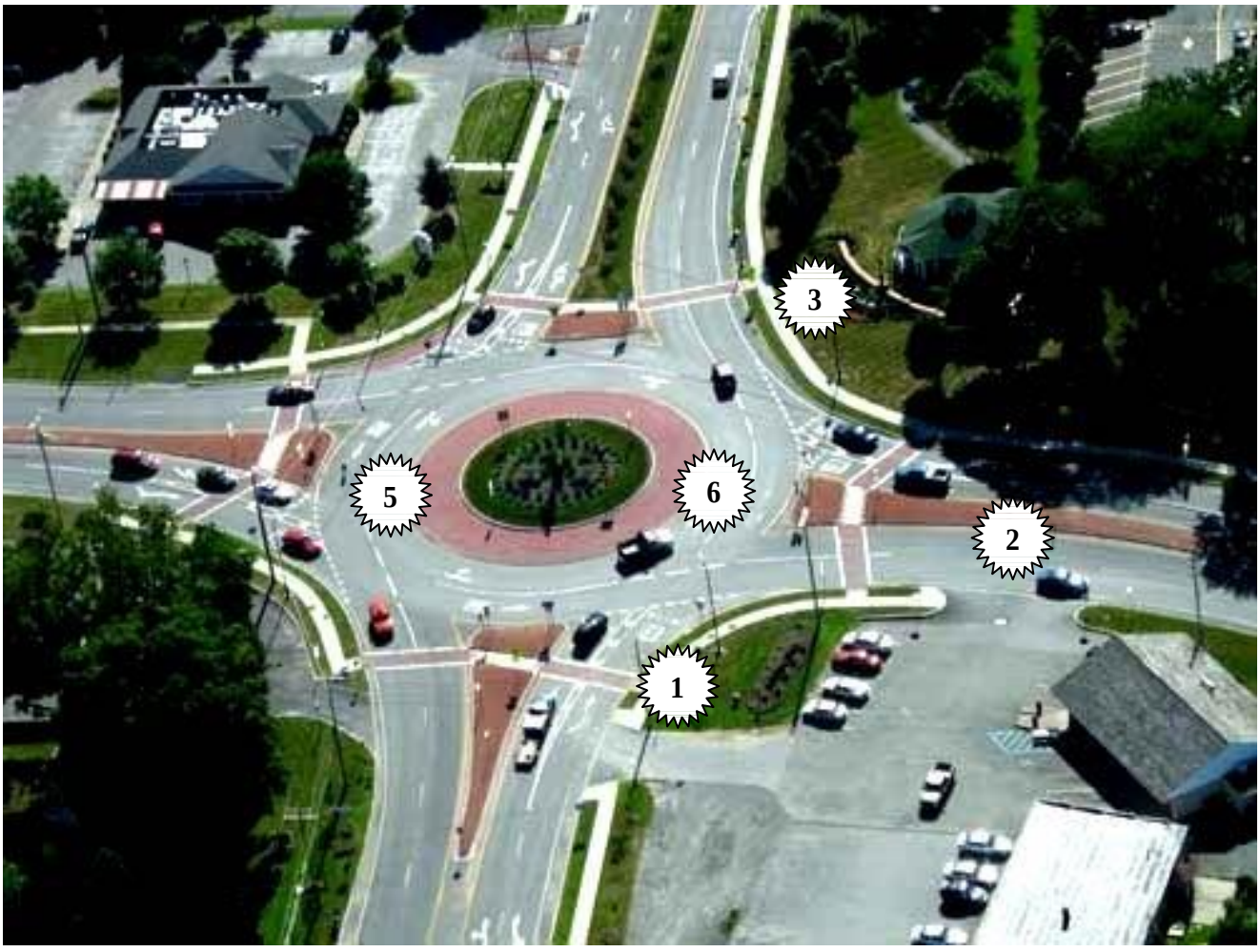
EXAMPLE 18 (1 OF 3)

ROUNDABOUT CHARACTERISTICS

Typical elements that constitute a roundabout are:

1. **Yielded entry** – cars entering must wait for a gap in the circulating traffic before entering
2. Roundabout **Islands** separate the entry from the circular roadway and direct traffic to the right.
3. Designated **crossing area for pedestrians**
4. Designed to be driven at speeds of **15 – 20 miles per hour**
5. **Single or multiple lanes**
6. Sometimes an inside "**apron**" is present for large vehicle use

Remember, roundabouts are not the same as traffic circles…see the next page.



TRAFFIC CIRCLE CHARACTERISTICS

Typical elements that constitute traffic circle are:

1. **NO signed, yielded entry**
2. **NO Islands** to separate the entry from the circular roadway and direct traffic to the right.
3. **NO** Designated **crossing area for pedestrians**
4. **NO** signed speed of **15 – 20 miles per hour**
5. **Normally single lane**
6. **NO** inside "**apron**" present for large vehicle use

EXAMPLE 18 (3 OF 3)

ROUNDABOUT CRASH LOCATION (AL) CODING

AL13
Outside the circle but related to the intersection

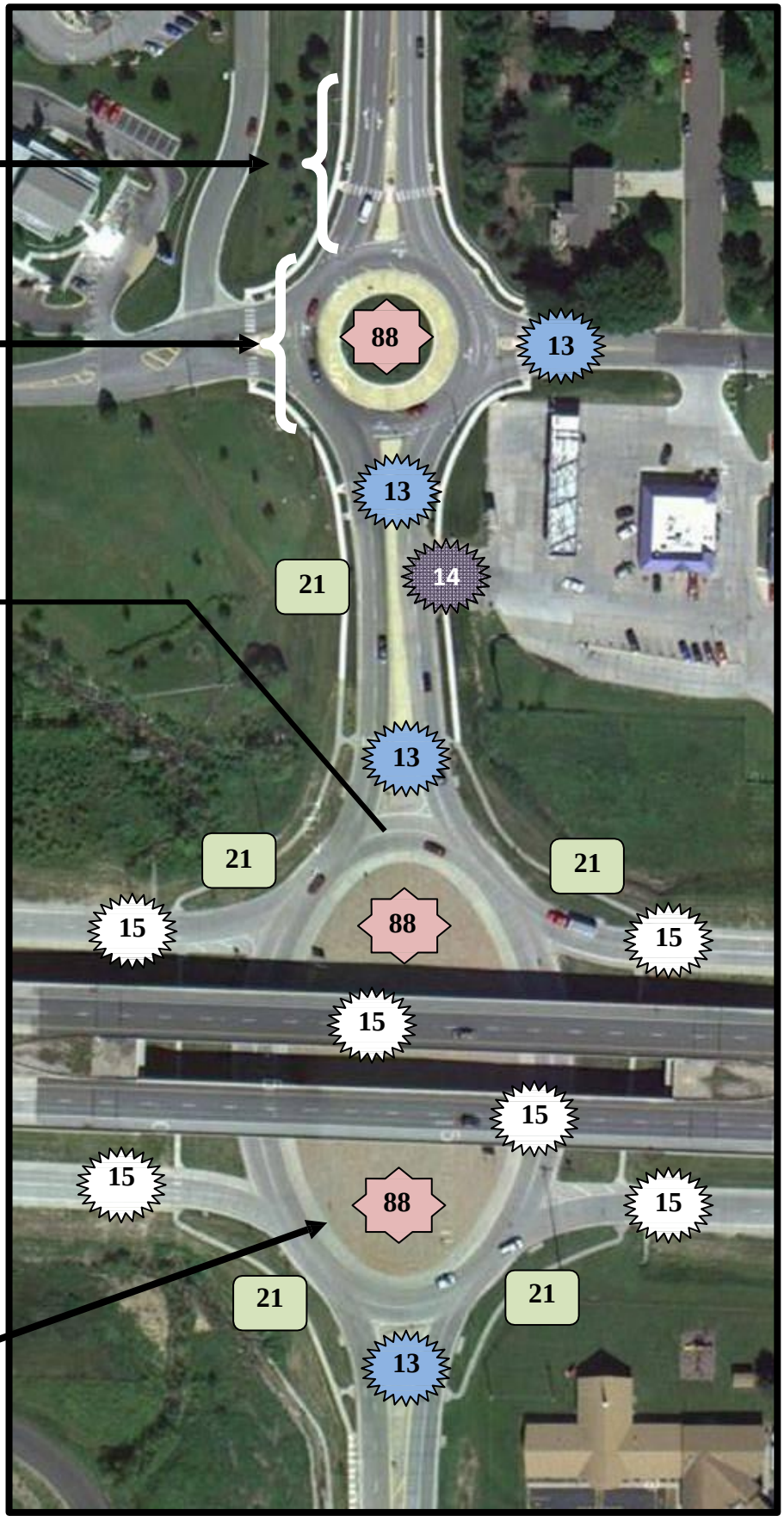
Inside the circle on the roadway
AL12

Crash first harmful events occurring ON the roadway within the circle are coded as **Crash Location 15** (interchange) with an **Intersection Type of 06-Roundabout**.

If FHE is on a ramp or roadway within an interchange area

AL15

FHE with center obstruction
AL88



PARKING LOT CODING

EXAMPLE 19 (1 OF 2)

EXAMPLE 19 (1 OF 2) PARKING LOT CODING

Crashes inside parking lots or their private roadways or aisles are not state reportable UNLESS fatal. KDOT only accepts crashes related to or in the entranceway of a parking lot.

Location #1 & #2 represent crashes occurring within 50 feet of the entrance way to the Mall's parking lot. A crash further into the entranceway would not be reportable. You would code #1 & #2 similar as the following example below if the road has no name. Use the correct direction prefix to determine the correct entrance.

Kansas Motor Vehicle Crash Report
KDOT Form 850A page 1 Rev. 2019

Investigating Department	Reviewed by	Local Case No.	Page of
OVERLAND PARK POLICE	FERGUSON	2019-0010298	1 / 4

Investigating Officer Name	Badge Number	County	City Name
S. JARVIS	529	JO	OVERLAND PARK

☐ Amended Report ☐ DUI ☐ Hit & Run

I Accident Severity: Fatal / Injury / PDO >= $1,000 / PDO < $1,000

☐ Private Property

Milepost	Block No	Dir Pfx	On Road Name	Road Type	Dir Sfx	SpdLmt	Date of Crash (mm/dd/yyyy)	Time Occur.	Day
	11500	N	LOT ACCESS	RD					

From Dist	Ft/Mi	From Dir	FROM / AT	Dir Pfx	Reference or At Road Name	Road Type	Dir Sfx	SpdLmt	Date Notified (mm/dd/yyyy)	Time Notif.	Day
45	F	S	◉ FROM ○ AT	W	95TH	ST					

Narrative: Describe each traffic unit's pre-crash movement and direction of travel — Spellcheck

V1 WAS TURNING SB INTO THE N LOT ACCESS RD TO OAK PARK MALL AND REAR ENDED V2 AT THE ENTRACEWAY.

Date Arrived (mm/dd/yyyy) | Time Arriv. | Day

Latitude (AOI): 38.95471
Longitude (AOI): -94.716640
Query GPS Device
Photos by

WORK ZONE TYPE — ON / AT
00 None Apply
01 Construction Zone -
02 Maintenance Zone - (KDOT?)

SPECIAL DATA: OAK PARK MALL

14 CRASH LOCATION
(of 1st Harmful Event)

ON ROADWAY: (within travel lanes)
- 11 Non-intersection
- 12 Intersection +
- 13 Intersection-related +
- 14 Access to Parking lot/Drvwy
- 15 Interchange Area +
- 16 On Crossover
- 17 Toll Plaza

OFF ROADWAY:
- 20 Shoulder
- 21 Roadside (not shoulder)
- 22 Median
- 23 Parking lot or Rest area
- 88 Other:
- 99 Unknown

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Crash Code Sheet

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CONTRIBUTING CIRCUMSTANCES (LIST IN ORDER OF SIGNIFICANCE)

Example: |D1|42|OR|02 Interpretation: Driver 1 made an improper turn on icy or slushy roadway

DRIVER CCs (D + TU# = D1)

00 No driver contributing circumstance evident

DRIVER CONDITION AT THE TIME OF CRASH

01 Under the influence of illegal Drugs
02 Under the influence of Alcohol
03 Under the influence of medication
04 Ill or Medical condition
05 Fell asleep or fatigued
06 Emotional: Angry, depressed, upset, impatient, etc.

DRIVER DISTRACTED BY

20 Mobile (cell) phone (calling, texting, other use)
21 Other electronic devices (audio, video, GPS, computer,...)
22 Other distraction in or on vehicle
23 An item or action NOT in or on vehicle
24 Inattention (general sense)

DRIVER ACTIONS AT THE TIME OF CRASH

30 Failed to yield the right of way
31 Disregarded traffic signs, signals, or markings
32 Red light running (disregarded traffic signal)
33 Followed too closely
34 Exceeded posted speed limit
35 Too fast for conditions
36 Impeding or Too slow for traffic
37 Avoidance or Evasive action
38 Over correction / Over steering
39 Reckless / Careless driving
40 Aggressive / Antagonistic driving
41 Improper lane change
42 Made improper turn
43 Improper backing
44 Improper passing
45 Improper or No turn signal
46 Improper parking
47 Wrong side or wrong way
48 Did not comply with license restrictions

ENVIRONMENT (code E, no TU#)

01 Animal: domestic or wild

WEATHER RELATED

02 Rain, mist, or drizzle
03 Sleet, hail, or freezing rain
04 Falling or Blowing snow
05 Strong winds
06 Fog, smoke, or smog
07 Blowing sand, soil, or dirt
08 Reduced visibility due to cloudy skies

VISION OBSTRUCTIONS

15 Building, vehicles, object made by humans
16 Vegetation: trees, shrubs, etc.
17 Glare from sun, headlights, or other lights

PEDESTRIAN CCs (P + TU# = P1)

00 No pedestrian contributing circumstance evident

NON-MOTORIST CONDITION AT THE TIME OF CRASH

01 Under the influence of illegal drugs
02 Under the influence of Alcohol
03 Under the influence of medication
04 Ill or Medical condition
05 Fell asleep or fatigued
06 Emotional: Angry, depressed, upset, impatient, etc.

NON-MOTORIST DISTRACTED BY

15 Mobile (cell) phone (calling, texting, other use)
16 Other electronic devices (audio, video, GPS, computer,...)
17 Inattention (general sense)

NON-MOTORIST ACTIONS AT THE TIME OF CRASH

25 Failed to yield the right of way
26 Disregarded traffic control signs, signals, officer, etc.
27 Improper crossing
28 In Roadway (standing, lying, etc)
29 Darting
30 Wrong side of roadway
31 Not visible (dark clothing)
32 Pedal cycle violation(s)

VEHICLE CCs (V + TU# = V1)

PROBLEMS WITH OR LOSS OF...

01 Brakes
02 Tires
03 Wheel(s)
04 Trailer coupling, hitch, or safety chains
05 Cargo
06 Window or windshield; ice on windshield, tinting, etc
07 Wipers
08 Lights: Front (head), tail, signals, etc
09 Steering
10 Power Train: engine, driveshaft, transmission, differential
11 Exhaust
12 Suspension
13 Mirrors
14 Unattended or driverless in motion
15 Unattended or driverless not in motion

ROAD CCs (On/At) (code OR or AR, no TU#)

01 Wet surface, standing or moving water
02 Icy or slushy
03 Snow accumulation or snow packed
04 Debris or obstruction
05 Road construction or maintenance
06 Ruts, holes, bumps
07 Traffic control device inoperative or missing
08 Shoulders: none, low, soft, or high
09 Worn, travel-polished surface

Codes 88 and 99 apply to Other and Unknown

Crash Code Sheet

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SEAT TYPES, SAFETY EQUIPMENT, INJURY SEVERITY, DRIVER'S LICENSE CODES, ETC.

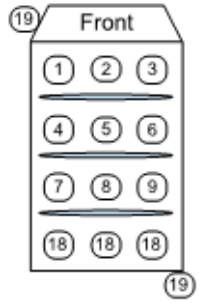
VARIOUS CODE LISTS

OCCUPANT SEAT POSITION

FRONT ROW 01 Driver
02 Center
03 Right

SECOND ROW 04 Left
05 Center
06 Right

THIRD ROW 07 Left
08 Center
09 Right



10 Motorcycle passenger
11 Extra person on driver's seat or lap
12-17 Extra person on passenger lap
18 Other seat position IN vehicle
19 Other position ON or Outside vehicle
27 Enclosed cargo area
28 Unenclosed cargo area (pickup bed, etc)
29 Sleeper section of truck cab
30 Trailing unit (auto, boat, camper)
99 Unknown position IN or On vehicle

SAFETY EQUIPMENT USE

S Shoulder & Lap belt
X Shoulder belt only
L Lap belt only
I Infant seat/restraint system (rear facing)
C Child seat/restraint system (front facing)
T "Booster" seat/restraint system (see manual)

P Airbag deployed only (Passive system)
R Airbag deployed - Shoulder & Lap belt
J Airbag deployed - Shoulder belt only
W Airbag deployed - Lap belt only
F Airbag deployed - Infant seat (rear facing)
D Airbag deployed - Child seat (front facing)
K Airbag deployed - "Booster" seat

B Both Motorcyclist helmet & eye protection
E Motorcyclist eye protection
H Motorcyclist helmet

Q Pedestrian helmet or protective pads
V Reflective clothing

N None used U Unknown

HAZARDOUS MATERIAL CLASS CODES

1 Explosives
2 Gases
3 Flammable/combustible liquid
4 Flammable/combustible solid
5 Oxidizers & organic peroxides
6 Poisonous/infectious substance
7 Radioactive material
8 Corrosive material
9 Misc. HazMat

KANSAS LICENSE CLASS

(see manual)

A - GCWR > 26,000
B - GVWR > 26,000
C - GVWR < 26,001
M - Motorcycle
(Class+) P - Permit
ID - Identification #
U - Unknown

PEDESTRIAN TYPES (non-motorist)

21 Walking, standing, running, etc
22 Pedal cyclist
23 Rider of animal
24 Occupant of animal-drawn vehicle
25 In vehicle NOT IN TRANSPORT (legally parked veh)
26 Machine operator (Working Vehicles)
88 Other
99 Unknown

EJECTED / TRAPPED

N Not ejected or trapped
E Ejected (totally)
P Partially ejected
T Trapped in vehicle
U Unknown

INJURY SEVERITY

N No Apparent Injury
P Possible injury (complaint of pain)
I Suspected Minor Injury
D Suspected Serious Injury
F Fatal injury U Unknown

EJECTION PATH

01 Side door
02 Side window
03 Windshield
04 Back window
05 Back door/Tailgate
06 Roof - sunroof/convertible top down
07 Roof - convertible top up
08 Other path (pickup bed)
99 Unknown

TRAIN OCCUPANT SEAT TYPES

31 Train crew
(list all in control whether injured or not)
32 Train passengers (list if injured)

GENDER

M Male
F Female
U Unknown

ANIMAL TYPES

01 Deer
02 Other wild animal: bobcat, coyote, etc
03 Cow or Bull
04 Other domestic animal: cat, dog, etc
05 Horse

KANSAS LICENSE RESTRICTIONS

B Corrective lenses
C Mechanical aid (devices)
D Prosthetic aid (devices)
E Automatic Transmission
F Outside mirror
G Daylight only
H Employment only
I Limited - Other
K Intrastate only
L Without Air-brakes
M No CDL - A Bus
N No CDL - A/B Bus
O No Tractor-Trailer
P No Passenger in CMV Bus
U Unknown
V Medical Variance
W 3 Wheel Restriction
X No Cargo CMV Tank Vehicle
Z No Full Air Brake in a CMV
J01 Outside business area
J02 Under Age Sixteen
J03 No Freeway driving
J04 25 Mi. from Home
J05 Within City Limits
J06 Lic Driver Front Seat
J07 Moped
J08 Seasonal CDL
J09 Farm Permit
J10 Non-residential CDL
J11 5 Miles of Home
J12 10 Miles of Home
J13 15 Miles of Home
J14 20 Miles of Home
J15 30 Miles of Home
J20 Temporary Resident
J21 Hearing Aid in CMV
J22 No A/B School Bus
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J24 Auto Transmission Non-CMV
J25 Cognitive Disorder

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