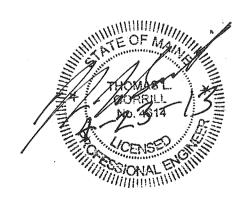
Traffic Impact Study

Service Center at 2282 Congress Street Portland, Maine

Prepared for:

C.J. Developers, Inc. 35 Primrose Lane Freeport, ME 04032

April 2013



Prepared by:



Gorrill-Palmer Consulting Engineers, Inc.

Traffic Impact Study CJ Developers, Inc. Portland, Maine

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Executive Summary

The following Executive Summary is prepared for the reader's convenience, but is not intended to be a substitute for reading the full report.

Gorrill-Palmer Consulting Engineers, Inc. has been retained by CJ Developers, Inc. to prepare this traffic impact study for a proposed development in Portland, Maine. The site is located on Congress Street opposite Blueberry Road and is currently undeveloped. The proposed development includes a convenience store with 12 regular fueling positions, 2 diesel fueling positions and an ATM. Access to the site will be via a driveway opposite Blueberry Road. The project is anticipated to be completed by the end of 2013.

The following is a summary of the findings and conclusions of the study:

- 1. The proposed development is forecast to generate 211, 277, and 189 trip ends for the weekday AM and PM, and Saturday peak hours of adjacent street traffic, respectively. (Note: A trip end is either a trip in or out of the site. Therefore a single customer making a round trip would equal two trip ends). The project will require a MaineDOT Traffic Movement Permit since it generates over 99 trip ends during a peak hour. The MaineDOT has delegated their permit process to the City.
- 2. The capacity analyses show the site traffic can be accommodated with the restriping of Congress Street in the immediate area of the site to accommodate a short left turn lane into the site.
- 3. Based on a review of the signal warrants contained in the Manual on Uniform Traffic Control Devices, none of the signal warrants are met.
- 4. Gorrill-Palmer Consulting Engineers, Inc. obtained the latest three year crash history (2009-2011) from MaineDOT to identify if there were High Crash Locations (HCL's) within the immediate area. Based on this information, there are no high crash locations.
- 5. The sight lines at the proposed driveway exceed MaineDOT requirements. Gorrill-Palmer Consulting Engineers, Inc. recommends that all plantings, which will be located within the right-of-way, not exceed three feet in height and be maintained at or below that height. Signage should not interfere with sight lines. In addition, we recommend that during construction, when heavy equipment is entering and exiting into the site, that appropriate measures, such as signage and flag persons, be utilized in accordance with the Manual on Uniform Traffic Control Devices.

Based on these findings, it is the opinion of Gorrill-Palmer Consulting Engineers, Inc. that the adjacent street system can accommodate the traffic generated by the site with the recommended improvements.

I. Existing and Proposed Site

The project is located on Outer Congress Street opposite Blueberry Road in Portland, Maine. The site is identified on the City Tax Map 237, Lot A012. A site location map has been included in Appendix A.

The site is currently undeveloped. A single driveway opposite Blueberry Road provides access to the Maine Turnpike Authority property and this site. The site is proposed to include a 3,850 sf convenience store with 12 fueling positions, a diesel pump with 2 fueling positions and one ATM.

Access to the site will be provided via an improved un-signalized driveway opposite Blueberry Road. The site is bound to the north by the Maine Turnpike property and Congress Street, to the south by Skyway Drive, to the east by the Maine Turnpike, and to the west by a commercial use.

II. Background Traffic Conditions

Gorrill-Palmer Consulting Engineers, Inc. based this study on the following information:

- > A site plan prepared by DeLuca-Hoffman Associates, Inc..
- > High Crash Listings for 2009-2011 provided by the Maine Department of Transportation.
- > Turning movement counts completed by our office in July 2012 and March 2013.

Predevelopment Traffic Volumes

Seasonal Adjustment

The MaineDOT utilizes highway classifications of I, II, or III for state and local roadways. Type I roadways are defined as urban roadways, or those roads that typically see commuter traffic and experience little fluctuation from week to week throughout the year. Type II roadways, or arterial roadways are those that see a combination of commuter and recreational traffic and therefore experience moderate fluctuations during the year. Type III roadways, or recreational roadways are typically used for recreational purposes and experience dramatic seasonal fluctuation. Congress Street is classified as a Group I roadway and since the counts were collected in July, no seasonal adjustment is necessary. The March counts were somewhat higher than the July counts so the July volumes were balanced upward to the March counts.

Annual Growth

The proposed development is anticipated to be fully operational by the end of 2013. Traffic volumes in the Portland area and on Congress Street have not increased in recent years, therefore no adjustment for annual growth was made.

Other Development

Approved projects that are not yet opened as well as projects for which applications have been filed are required to be included in the predevelopment volumes for this project. Gorrill-Palmer Consulting Engineers, Inc. contacted the City of Portland planning department to determine whether there are any other projects that have been approved or are ahead in the approval process whose traffic should be considered as background traffic in the study for this project. Based on our conversation, it is our understanding that there are currently two active projects in this area which need to be added to our background traffic which are summarized below:

144 Hutchins Drive- This facility is forecast by others to have an average of 5 employees which will generate 5 peak hour trip ends in both the weekday AM and PM peak hours. We have added the 5 employee trip ends due during both the AM and PM peak hours to the pre-development traffic levels in our study.

ECOMAINE has a project in the approval process, but it is our understanding from City staff that it will not result in an increase in traffic.

The veterinarian on the corner of Hutchins had an expansion approved several years ago but it is our understanding from City staff that their approval has lapsed so the project was not considered in our analysis.

III. Trip Generation

Gorrill-Palmer Consulting Engineers, Inc. used the Institute of Transportation Engineers (ITE) publication *Trip Generation*, 8th Edition as the source for determining the potential trip generation for the site. The 8th Edition was used because it provided a Saturday Peak Hour trip generation for the Convenience Store with fueling positions whereas the 7th Edition does not. To determine the trip generation for the Convenience Store with fueling positions we used Land Use Code 853, averaging the trip generation from fueling positions and size of store. Land Use Code 912 was used to forecast the ATM, which forecasts 10 and 28 trip ends during the AM and PM peak hours of adjacent street traffic respectively.

The trip generation calculations are included in Appendix C and are summarized as follows for the peak hours of the adjacent street traffic:

AM Peak Hour Adj St: 211 trip ends PM Peak Hour Adj St: 277 trip ends Saturday Peak Hour: 189 trip ends

This level of trip generation requires a MaineDOT Traffic Movement Permit which has been delegated to the City of Portland. Our analyses focused on the weekday AM and PM peak hours since the traffic levels are less during a Saturday.

IV. Trip Distribution

Gorrill-Palmer Consulting Engineers, Inc. has obtained the ratio of entering and exiting traffic from the Institute of Transportation Engineers publication *Trip Generation*, 8th Edition (7th Edition is the same). Based on the ITE information, the trip distribution would be the following for the AM, and PM peak hours:

Weekday AM peak hour 50% entering, 50% exiting Weekday PM peak hour 50% entering, 50% exiting

V. Trip Composition and Assignment

Gorrill-Palmer Consulting Engineers, Inc. has estimated trip composition for the facility based on the ITE *Trip Generation Handbook*. For LUC 853 – Convenience Market with Gasoline Pumps the trip composition would be the following:

Weekday AM - 12% Primary, 25% Diverted, 63% Pass-By Weekday PM - 16% Primary, 18% Diverted, 66% Pass-By

For the purpose of this project, we combined the Primary and Diverted and rounded to the following, which is conservative since it increases the primary trips and reduces the passby trips:

Weekday AM / PM – 40% Primary / Diverted, 60% Pass-By

For LUC 912-Drive-In Bank, the shared trips are forecast to be 50% with the convenience store. Thus, trips at the driveway would be 5 and 14 during the AM and PM peak hours respectively with 50% being pass-by and 50% being a combination of primary and diverted trips.

The total trip distribution is summarized on the following table:

Proposed Trip Composition

		ering	Exi	ting	Total				
Trip Type	AM	PM	AM	PM	AM	PM			
Primary /	42	54	41	54	83	108			
Diverted									
Pass-By	62	77	61	78	123	155			
Total	104	131	102	131	206	263			

The trip assignment percentages are based on existing traffic patterns as derived from the turning movement counts and are included in Appendix A.

VI. 2013 Postdevelopment Traffic

The anticipated year 2013 predevelopment AM and PM peak hour traffic volumes shown on Figure 4 of Appendix A have been combined with the AM and PM peak hour traffic forecast for the development shown on Figures 5-6 of Appendix A to yield the 2013 postdevelopment AM and PM traffic volumes shown on Figure 7 of Appendix A.

VII. Study Area

The study area was defined by the City. The study area was identified as including the intersection of Congress Street/Blueberry Road and the proposed driveway as well as the intersection of Congress Street/Hutchins Drive and Skyway Drive.

VIII. Auxiliary Lanes

Our office completed right-turn and left-turn lane warrant analysis for the proposed driveway to identify if auxiliary lanes should be considered. To complete the review, our office utilized curves provided in the MaineDOT Highway Design Guide. The curves are provided in Appendix C.

Left-Turn Lanes – Both the AM and PM peak hours met the criteria for considering left turn treatment. As a result, re-striping Congress Street to provide a 75 foot long left turn lane for vehicles turning left into the site is recommended. A concept plan for this restriping is shown on the site plan prepared by DeLuca Hoffman Associates, inc.

Right-Turn Lanes – Based on a review of the MaineDOT curves, a right turn treatment should be considered. The site has been designed with a wide radius to facilitate a vehicle turning right into the site.

IX. Capacity Analyses

Gorrill-Palmer Consulting Engineers, Inc. completed capacity analyses for the intersections listed in Section VII.

The analysis was completed with the Synchro/SimTraffic analysis software. Levels of service rankings are similar to the academic ranking system where an 'A' represents little control delay and an 'F' represents significant delay. At an unsignalized intersection, if the level of service falls below a 'D', an evaluation should be made to determine if further mitigation is warranted, and if not, a low level of service is acceptable. It should be noted that the capacity analysis was completed assuming re-striping of Congress Street to include a 75 foot left turn lane as discussed in the previous Section VIII.

The following table summarizes the relationship between delay and level of service for an unsignalized and a signalized intersection:

Level of Service Criteria for Unsignalized Intersections

Level of Service	Control Delay per Vehicle (sec)
A	Up to 10.0
В	10.1 to 15.0
С	15.1 to 25.0
D	25.1 to 35.0
E	35.1 to 50.0
F	Greater than 50.0

Level of Service Criteria for Signalized Intersections

Level of Service	Control Delay per Vehicle (sec)
A	Up to 10.0
В	10.1 to 20.0
С	20.1 to 35.0
D	35.1 to 55.0
E	55.1 to 80.0
F	Greater than 80.0

The results of the capacity analyses for the 2013 post-development conditions are summarized as follows, followed by a discussion of the results. The detailed analyses are included in Appendix B.

Site Access Road / Congress Street/Blueberry Rd (Unsignalized)

	2013 Peak Hours													
Lane Group	AM Postdev	relopment	PM Postdevelopment											
	Delay (sec)	LOS	Delay	LOS										
Congress St Eastbound	4	Α	4	Α										
Congress St Wesbound	2	Α	2	Α										
Site Driveway Northbound	22	С	23	С										
Blueberry Rd Southbound	17	С	17	С										
Blueberry Rd Southbound	17	С	17											

As can be seen from the above table, each of the approaches are forecast to operate at acceptable levels of service in both the weekday AM and PM peak hours with the left turn lane as proposed. This level of service and the maximum forecast PM peak hour traffic level of 72 turning left out of the site does not warrant the installation of a traffic signal as discussed in the next section.

Skyway Drive/Congress Street/Hutchins St (Signalized)

	2013 Peak Hours												
Lane Group	AM Postd	evelopment	PM Postdevelopment										
	Delay	LOS	Delay	LOS									
Congress St Eastbound	48	D	25	С									
Congress St Wesbound	21	С	26	С									
Skyway Drive Northbound	25	С	120	F									
Hutchins St Southbound	33	С	30	С									

As can be seen from the previous table, traffic exiting Skyway Drive experiences delay. However, the majority of the traffic associated with the proposed project is pass-by traffic with very little traffic being added to the left turning traffic from Skyway Drive. Thus, the project will not significantly affect the operation of this intersection.

X. Signal Warrant Analyses

In order for a traffic signal to be installed, the location must meet one or more of the traffic signal warrants published in the 2009 Edition of the Manual on Uniform Traffic Control Devices, and meet the test of engineering judgment. The nine traffic signal warrants are listed as follows:

Warrant#	Description
1	Eight-Hour Vehicular Volume
2	Four-Hour Vehicular Volume
3	Peak Hour
4	Pedestrian Volume
5	School Crossing
6	Coordinated Signal System
7	Crash Experience
8	Roadway Network
9	Intersection Near a Grade Crossing

Gorrill-Palmer Consulting Engineers, Inc. completed a signal warrant analysis for the intersection of Blueberry Road based on the post development volumes presented in Figure 7 of Appendix A. The intersection was evaluated based on these warrants which are summarized in the following pages. The right turning traffic exiting the site was excluded from the analysis since there is a separate right turning lane.

Warrant #1 - Eight-Hour Vehicular Volume - This warrant requires that one of the following conditions be met for any eight hours of an average day:

- 1. The vehicles per hour given in both of the 100% columns of Condition A in Table 4C-l (included with this letter) exist on the major street and on the higher volume minor-street approaches, respectively, to the intersection, and
- 2. The vehicles per hour given in both 100% columns of Condition B in Table 4C-l (included with this letter) exist on the major street and on the higher volume minor-street approaches, respectively, to the intersection.

An analysis was completed based on the data collected, which indicated that major street volumes were met but minor street movements were not met for the peak hours and therefore would most likely not be met for the remainder of the day. Thus, this warrant is not satisfied.

Warrant #2 – Four-Hour Vehicular Volume - This warrant requires that for each of any four hours of an average day, the plotted points representing the vehicles per hour on the major street (total of both approaches) and the corresponding vehicles per hour on the higher volume minor-street approach (one direction only) all fall above the applicable curve in figure 4C-1 (attached) for the existing combination of approach lanes. On the minor street, the higher volume shall not be required to be on the same approach during each of these four hours.

The minimum minor street volume to meet the warrant is 80 vehicles for each of four hours. The AM peak hour volume is 43 (combination of thru and left turning traffic from the driveway) and the PM is 74. Thus, this signal warrant is not met.

Warrant #3 – Peak Hour - This warrant is intended for locations where a large amount of traffic exits the site for an hour or two a day, such as a school, manufacturing facility, etc. The warrant requires that the criteria in either of the following two categories are met:

- 1. If all three of the following conditions exist for the same one hour (any four consecutive 15-minute periods) of an average day:
- a. The total stopped time delay experienced by the traffic on one minor-street approach (one direction only) controlled by a STOP sign equal or exceeds: four vehicle-hours for a one-lane approach; or five vehicle-hours for a two-lane approach, and
- b. The volume on the same minor-street approach (one direction only) equals or exceeds 100 vehicles per hour for one moving lane of traffic or 150 vehicles per hour for two moving lanes, and
- c. The total entering volume serviced during the hour equals or exceeds 650 vehicles per hour for intersections with three approaches or 800 vehicles per hour for intersections with four or more approaches.

The location does not satisfy the minimum volume requirements of 100, on the minor-street approach which is 74 during the PM peak hour.

2. The plotted point representing the vehicles per hour on the major street (total of both approaches) and the corresponding vehicles per hour on the higher-volume minor-street approach (one direction only) for one hour (any for consecutive 15-minute periods) of an average day falls above the applicable curve in Figure 4C-3 for the existing combination of approach lanes (enclosed with this letter).

The plotted point on figure 4C-3 for the peak hour falls below the curve. Therefore, this signal warrant is not met.

Warrant #4 – *Pedestrian Volume* – This warrant requires at least 100 pedestrian crossings in each of four hours across the major street. This level of pedestrian activity is not anticipated and therefore, this warrant is not anticipated to be met.

Warrant #5 – School Crossing – This warrant is based upon the need to provide gaps in traffic for crossing students. Before determining whether a signal is warranted, alternative measures should be explored, including school warning signs and flashers, school speed zones, school crossing guards, or a grade-separated crossing. The proposed project is not located in the vicinity of a school and therefore, this warrant is not met.

Warrant #6- Coordinated Signal System - This warrant requires the existence on an existing coordinated signal system to warrant installation of a traffic signal at an intersection that does not otherwise meet a warrant, to maintain platoons of traffic. This location does not meet these criteria.

Warrant #7 – Crash Experience - This warrant requires that all of the criteria in the following categories are met.

- 1. Adequate trial of alternatives for which satisfactory observance and enforcement has failed to reduce the crash frequency.
- 2. Five or more reported crashes, of types susceptive to correction by a traffic control signal, have occurred within a 12-month period, each crash involving personal injury or property damage apparently exceeding the applicable requirements for a reportable crash.
- 3. For each of any eight hours of an average day, the vehicles per hour given in both of the 80% columns of condition A in Table 4C-1 (included in Appendix C), exists on the major street and on the higher-volume minor-street approach, respectively, to the intersection, or the volume of pedestrian traffic is not less than 80 percent of the requirements specified in the pedestrian volume warrant. These major-street and minor-street volumes shall not be required to be on the same approach during each of the eight hours.

Gorrill-Palmer Consulting Engineers, Inc. requested crash data for the most recent three-year period of 2009-2011 from MaineDOT. That data indicates that one collision occurred during the three year period, which falls below the threshold for meeting Criteria 2. As such, this warrant is not met.

Warrant #8 – Roadway Network – This warrant is satisfied if there is justification for concentration or organization of traffic flow on a roadway network with two major routes, and the minimum and forecast entering traffic volumes are met. Congress Street is a major road however Blueberry Road and the proposed driveways are not classified as major. Therefore, this warrant is not met.

Warrant #9 - Grade Crossing - This warrant is based upon proximity to an at-grade rail crossing. As the subject intersection is not adjacent to a railroad, this warrant is not applicable.

Based on the warrant analysis, it is the opinion of Gorrill-Palmer Consulting Engineers, Inc. that the installation of a traffic signal is not warranted at this location.

XI Queue Analyses

Gorrill-Palmer Consulting Engineers, Inc. has evaluated the queue lengths at the intersection of the proposed driveway and Congress Street based on the SimTraffic analyses. The analyses consider the improvements indicated in the capacity analysis section. The queue analyses are included in the capacity analyses in Appendix B of this report and show the 95% length of queue for left turning traffic entering the site will be 3 vehicles, which is accommodated by the proposed 75 foot storage length.

XII Crash Data

Gorrill-Palmer Consulting Engineers, Inc. obtained the crash data from MaineDOT for the period of 2009-2011, the most recent period available.

In order to evaluate whether a location has a crash problem, MaineDOT uses two criteria to define a High Crash Location (HCL). Both criteria must be met in order to be classified as a HCL.

- 1. A critical rate factor of 1.00 or more for a three-year period. (A Critical Rate Factor {CRF} compares the actual crash rate to the rate for similar intersection in the state. A CRF of less than 1.00 indicates a rate of less than average) and:
- 2. A minimum of eight crashes over a three-year period.

Review of the collision history furnished by the MaineDOT shows there are no high crash locations in the vicinity of the project. However, while not meeting the criteria for a high crash location, the intersection of Congress Street and Hutchins Drive did have 18 collisions with a critical rate factor of 0.75 over this three year period. Our office obtained the collision reports from the MaineDOT and prepared a collision diagram which we have included in Appendix C. The diagram shows 11 of the 18 were rear end collisions either east bound or west bound on Congress Street which is not uncommon at a signalized intersection.

XIII Sight Line Analysis

The Maine Department of Transportation has guidelines for sight distances as follows:

MaineDOT Standards for Sight Distance

	T T
Posted Speed (mph)	Sight Distance
25	200
30	250
35	305
40	360

The MaineDOT standards are as follows:

Driveway observation point:

10 feet off major street travelway

Height of eye at driveway:

3 ½ feet above ground

Height of approaching vehicle:

4 1/4 feet above road surface

Gorrill-Palmer has reviewed the sight lines at the driveway proposed opposite Blueberry Road. The posted speed limit on Congress Street fronting the site is 40 mph, and is reduced to 35 mph 275 feet to the east of the site. The available sight lines exiting the driveway are over 750 feet looking to the left and 490 feet looking to the right to the overpass with the clearing of some vegetation along the site frontage. Thus, sight lines exceed standards at the proposed driveway location.

Gorrill-Palmer Consulting Engineers, Inc. recommends that all plantings, which will be located within the right of way, not exceed three feet in height and be maintained at or below that height. Signage should not interfere with sight lines. In addition, we recommend that during construction, when heavy equipment is entering and exiting into the site, that appropriate measures, such as signage and flag persons, be utilized in accordance with the Manual on Uniform Traffic Control Devices.

XIV Conclusions and Recommendations

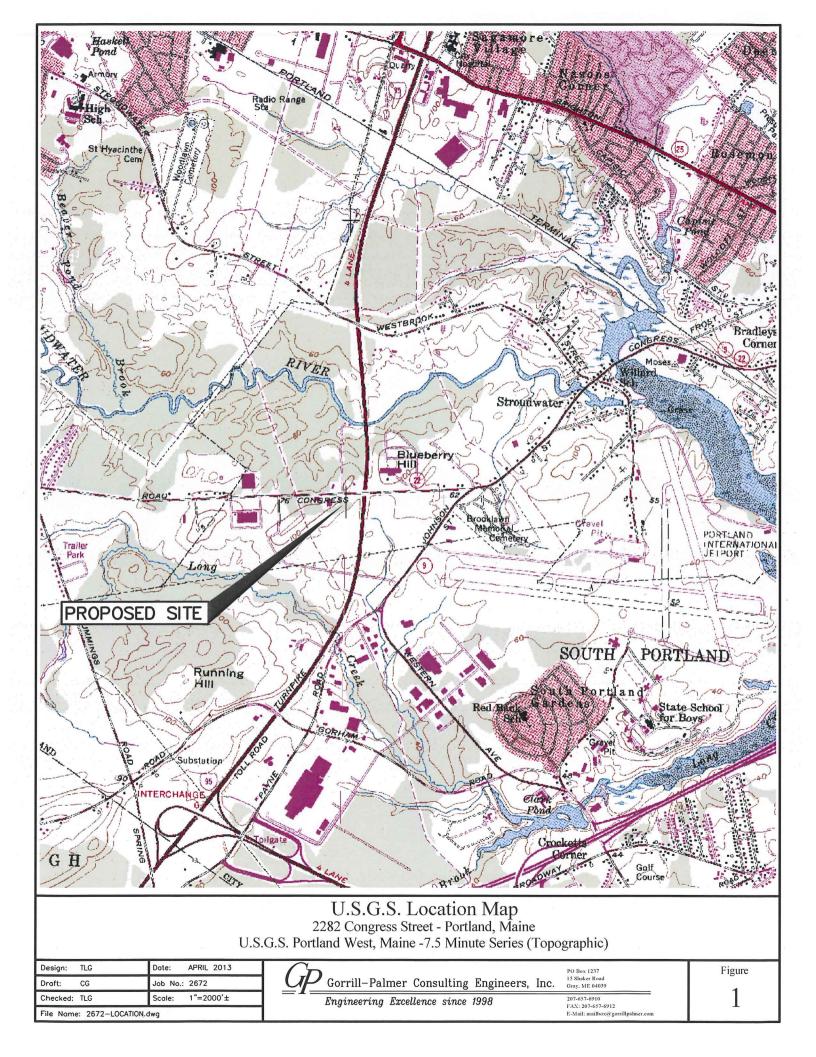
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- 2. The capacity analyses show the site traffic can be accommodated with the restriping of Congress Street in the immediate area of the site to accommodate a short left turn lane into the site.

- 3. Based on a review of the signal warrants contained in the Manual on Uniform Traffic Control Devices, none of the signal warrants are met.
- 4. Gorrill-Palmer Consulting Engineers, Inc. obtained the latest three year crash history (2009-2011) from MaineDOT to identify if there were High Crash Locations (HCL's) within the immediate area. Based on this information, there are no high crash locations.
- 5. The sight lines at the proposed driveway exceeds MaineDOT requirements. Gorrill-Palmer Consulting Engineers, Inc. recommends that all plantings, which will be located within the right-of-way, not exceed three feet in height and be maintained at or below that height. Signage should not interfere with sight lines. In addition, we recommend that during construction, when heavy equipment is entering and exiting into the site, that appropriate measures, such as signage and flag persons, be utilized in accordance with the Manual on Uniform Traffic Control Devices.

Based on these findings, it is the opinion of Gorrill-Palmer Consulting Engineers, Inc. that the adjacent street system can accommodate the traffic generated by the site with the recommended improvements.

Appendix A Site Location Map Traffic Count Data Sheets Turning Movement Diagrams



PO Box 1237, 15 Shaker Road Gray, ME 04039

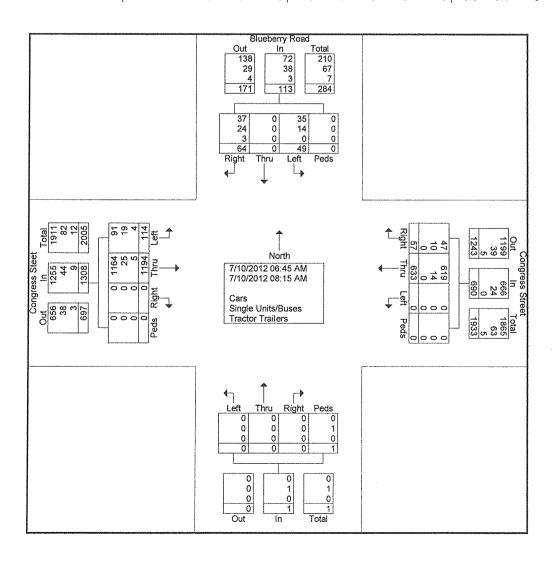
Location: Blueberry Rd @ Congress St Engineering Excellence Since 1998 Name: Blueberry@Congress_AM Raw

Counter: IAM Site Code : 2672
Board: DB400 Start Date : 7/10/2012

Weather: Sunny Page No : 1

Groups Printed- Cars - Single Units/Buses - Tractor Trailers

		Blu	eberry	Road			Con	gress	Street	"											
		F	rom No	orth			F	rom E	ast			Fı	om So	uth			F	rom W	est		
Start Time	Left	Thru	Right	Peds	App. Total	Left	Thru	Right	Peds	App. Total	Left	Thru	Right	Peds	App. Total	Left	Thru	Right	Peds	App. Total	Int. Total
06:45 AM	4	0	6	0	10	0	63	10	0	73	0	0	0	1	1	14	170	0	0	184	268
Total	4	0	6	0	10	0	63	10	0	73	0	0	0	1	1	14	170	0	0	184	268
																					,
07:00 AM	12	0	14	0	26	0	79	7	0	86	0	0	0	0	0	13	167	0	0	180	292
07:15 AM	6	0	7	0	13	0	93	2	0	95	0	0	0	0	0	17	173	0	0	190	298
07:30 AM	7	0	7	0	14	0	76	13	0	89	0	0	0	0	0	22	177	0	0	199	302
07:45 AM	4	0	10	0	14	0	134	9	0	143	0	0	0	0	0	14	173	0	0	187	344
Total	29	0	38	0	67	0	382	31	0	413	0	0	0	0	0	66	690	0	0	756	1236
		_			1																
08:00 AM	7	0	8	0	15	0	116	5	0	121	0	0	0	0	0	17	199	0	0	216	352
08:15 AM	9	0	12	0	21	0	72	11	0	83	0	0	0	0	0	17	135	0	0	152	256
Grand Total	49	0	64	0	113	0	633	57	0	690	0	0	0	1	1	114	1194	0	0	1308	2112
Apprch %	43.4	0	56.6	0		0	91.7	8.3	0		0	0	0	100		8.7	91.3	0	0		
Total %	2.3	0	3	0	5.4	0	30	2.7	0	32.7	0	0	0	0	0	5.4	56.5	0	. 0	61.9	
Cars	35	0	37	0	72	0	619	47	0	666	0	0	0	0	0	91	1164	0	0	1255	1993
% Cars	71.4	0	57.8	0	63.7	0	97.8	82.5	0	96.5	0	0	0	0	0	79.8	97.5	0	0	95.9	94.4
Single Units/Buses	14	0	24	0	38	0	14	10	0	24	0	0	0	1	1	19	25	0	0	44	107
% Single Units/Buses	28.6	0	37.5	0	33.6	0	2.2	17.5	0	3.5	0	0	0	100	100	16.7	2.1	0	0	3.4	5.1
Tractor Trailers	0	0	3	0	3	0	0	0	0	0	0	0	0	0	0	4	5	0	0	9	12
% Tractor Trailers	0	0	4.7	0	2.7	0	0	0	0	0	0	0	0	0	0	3.5	0.4	0	0	0.7	0.6



Gorrill-Palmer Consulting Engineers, Inc. PO Box 1237, 15 Shaker Road

Gray, ME 04039

Location: Blueberry Rd @ Congress St Engineering Excellence Since 1998 Name: Blueberry@Congress_AM Raw

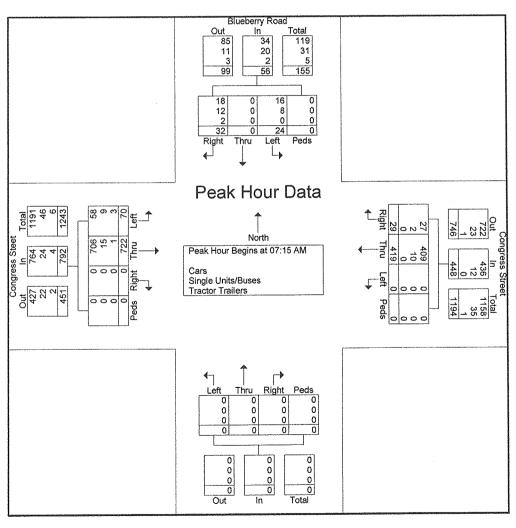
Counter: IAM Board: DB400

Weather: Sunny

Site Code : 2672 Start Date : 7/10/2012

Page No : 2

			eberry I			Congress Street From East					From South						Congress Steet From West					
Ot at Time	1 - 54					Left							Right			Left		,		A T-4-1	Int. Total	
Start Time	<u>Left</u>	Thru			App. Total				Peus	App. Total	Left	Thru	Trigitt	reus	App. Total	LOIL	TINU	ragne	i cus	App. Total	mic rotar j	
Peak Hour Ar							K 1 of	1														
Peak Hour for	r Entire	Inters	ection	Begins	at 07:1	5 AM												_				
07:15 AM	6	0	7	0	13	0	93	2	0	95	0	0	0	0	0	17	173	0	0	190	298	
07:30 AM	7	0	7	0	14	0	76	13	0	89	0	0	0	0	0	22	177	0	0	199	302	
07:45 AM	4	0	10	0	14	0	134	9	0	143	0	0	0	0	0	14	173	0	0	187	344	
08:00 AM	7	Õ	8	Ō	15	0	116	5	0	121	0	0	0	0	0	17	199	0	0	216	352	
Total Volume	24		32	0	56	0	419	29	0	448	0	0	0	0	0	70	722	0	0	792	1296	
	42.9	0	57.1	0		0	93.5	6.5	0		Ô	ō	Ō	0	_	8.8	91.2	0	0			
% App. Total			.800	.000	.933	.000	.782	.558	.000	.783	.000	.000	.000	.000	.000	.795	.907	.000	.000	.917	.920	
PHF	.857	.000	18	.000	.933	.000	409	27	.000	436	.000	000.	000.	.000	000.	58	706	0	0.00	764	1234	
Cars	16	0		-		-			0	97.3	0	0	0	0	0	82.9	97.8	Õ	. 0	96.5	95.2	
% Cars	66.7	0	56.3	0	60.7	0	97.6	93.1	U	91.3	U	U	U	U	١	02.5	57.0	U	U	30.0	30.2	
Single Units/Buses		_				•	٠.		_	0.7	^	•	^	^	o	12.9	2.1	0	0	3.0	4.3	
% Single Units/Buses	33.3	0	37.5	0	35.7	U	2.4	6.9	0	2.7	Ū	U	U	U	ŭ	12.9	2.1	-	_	3.0	4.5	
Tractor Trailers	0	0	2	0	2	0	0	0	0	0	0	0	U	U	0	3	1	0	0	4	ю	
% Tractor Trailers	0	0	6.3	0	3.6	0	0	0	0	0	0	0	0	0	0	4.3	0.1	0	0	0.5	0.5	

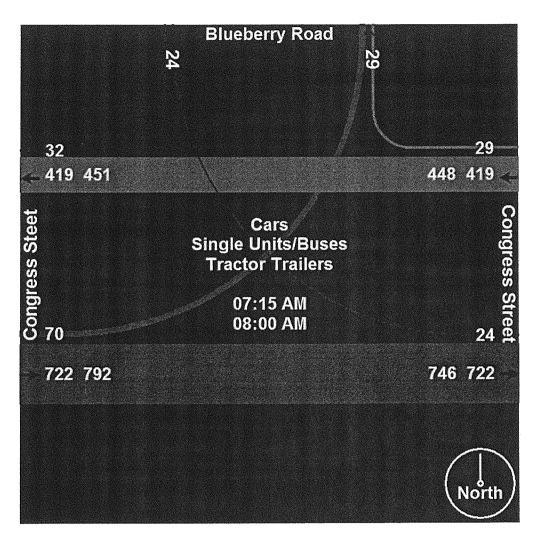


PO Box 1237, 15 Shaker Road Gray, ME 04039

Location: Blueberry Rd @ Congress St Engineering Excellence Since File Name: Blueberry@Congress_AM Raw

Counter: IAM Site Code : 2672
Board: DB400 Start Date : 7/10/2012

Weather: Sunny Page No : 3



Gorrill-Palmer Consulting Engineers, Inc. PO Box 1237, 15 Shaker Road

Gray, ME 04039

Location: Blueberry Road @ Congress St. Engineering Excellence Since 1998 Name: Blueberry@Congress_PM Raw

Site Code : 2672 Counter:IAM Start Date : 7/9/2012 Board:DB400

Page No : 1 Weather:Sunny

Groups Printed- Cars - Single Units/Buses - Tractor Trailers

	Blueberry Road Congress Street									Congress Street											
			rom No					rom E				Fı	om So	uth			F	rom W	est		
Start Time	Left	Thru	Right	Peds	App. Total	Left	Thru	Right	Peds	App. Total	Left	Thru	Right	Peds	App. Total	Left	Thru	Right	Peds	App. Total	Int. Total
03:30 PM	2	0	6	0	8	0	153	2	0	155	0	0	0	0	0	6	101	0	0	107	270
03:45 PM	7	0	11	0	18	0	141	6	0	147	0	0	0	1	1	6	88	0	0	94	260
Total	9	0	17	0	26	0	294	8	0	302	0	0	0	1	1	12	189	0	0	201	530
	•																				
04:00 PM	1	0	20	0	21	0	193	3	0	196	0	0	0	1	1	6	79	0	0	85	303
04:15 PM	15	0	13	0	28	0	176	3	0	179	0	0	0	2	2	4	67	0	0	71	280
04:30 PM	4	0	11	0	15	0	206	2	0	208	0	0	0	0	0	4	103	0	0	107	330
04:45 PM	7	0	10	0	17	0	170	2	0	172	0	0	0	2	2	9	89	0	0	98	289
Total	27	0	54	0	81	0	745	10	0	755	0	0	0	5	5	23	338	0	0	361	1202
	•																				
05:00 PM	8	0	13	0	21	0	200	1	0	201	0	0	0	5	5	3	93	0	0	96	323
05:15 PM	4	0	17	0	21	0	168	1	0	169	0	0	0	1	1	9	105	0	0	114	305
05:30 PM	5	0	8	0	13	0	160	2	0	162	0	0	0	1	1	7	99	0	0	106	282
05:45 PM	- 2	0	6	0	8	0	105	1	0	106	0	0	0	1	1	5	66	0	0	71	186
Total	19	0	44	0	63	0	633	5	0	638	0	0	0	8	8	24	363	0	0	387	1096
	•				•																
Grand Total	55	0	115	0	170	0	1672	23	0	1695	0	0	0	14	14	59	890	0	0	949	2828
Apprch %	32.4	0	67.6	0		0	98.6	1.4	0		0	0	0	100		6.2	93.8	0	0		
Total %	1.9	0	4.1	0	6	0	59.1	0.8	0	59.9	0	0	0	0.5	0.5	2.1	31.5	0	0	33.6	
Cars	54	0	97	0	151	0	1648	20	0	1668	0	0	0	2	2	50	878	0	0	928	2749
% Cars	98.2	0	84.3	0	88.8	0	98.6	87	0	98.4	0	0	0	14.3	14.3	84.7	98.7	0	0	97.8	97.2
Single Units/Buses	0	0	16	0	16	0	22	3	0	25	0	0	0	12	12	5	11	0	0	16	69
% Single Units/Buses	0	0	13.9	0	9.4	0	1.3	13	0	1.5	0	0	0	85.7	85.7	8.5	1.2	0	0	1.7	2.4
Tractor Trailers	1	0	2	0	3	0	2	0	0	2	0	0	0	0	0	4	1	0	0	5	10
% Tractor Trailers	1.8	0	1.7	0	1.8	. 0	0.1	0	0	0.1	0	0	0	0	0	6.8	0.1	0	0	0.5	0.4

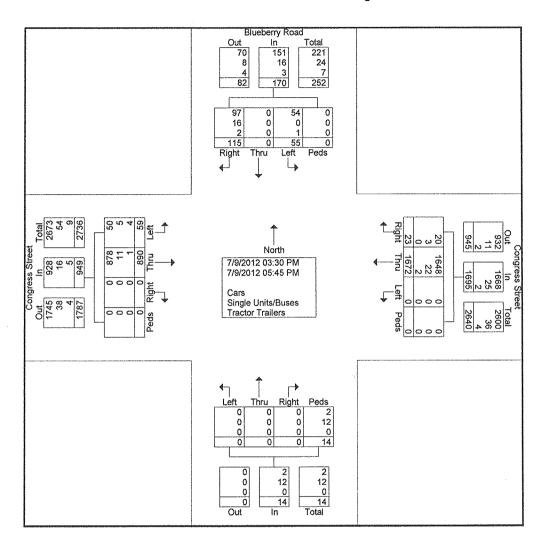
PO Box 1237, 15 Shaker Road Gray, ME 04039

Location: Blueberry Road @ Congress Stingineering Excellence Since 1998 Name: Blueberry@Congress_PM Raw

Counter:IAM Board:DB400 Site Code : 2672 Start Date : 7/9/2012

Weather:Sunny

Page No : 2



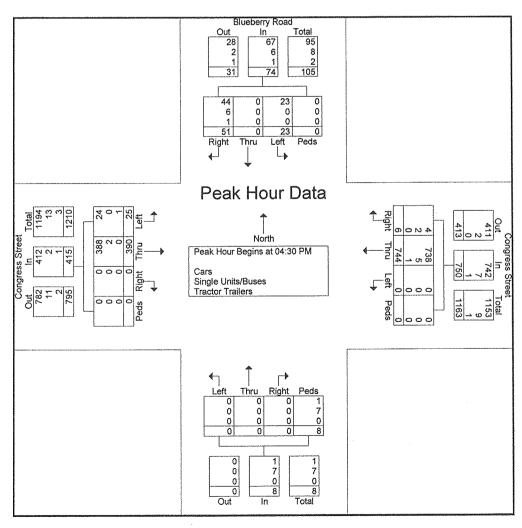
PO Box 1237, 15 Shaker Road Gray, ME 04039

Location: Blueberry Road @ Congress St Engineering Excellence Since 1998 Name : Blueberry@Congress_PM Raw

Counter:IAM Site Code : 2672
Board:DB400 Start Date : 7/9/2012

Weather:Sunny Page No : 3

	Blueberry Road Congress Street From North From East												rom So	uth								
1		r I	OIII NO	HUI			Г	TOTTLE	451		From South						From West					
Start Time	Left	Thru		Peds	App. Total	Left	Thru		Peds	App. Total	Left	Thru	Right	Peds	App. Total	Left	Thru	Right	Peds	App. Total	Int. Total	
Peak Hour Ar	nalysis	From	03:30 F	PM to 0)5:45 PN	/I - Pea	k 1 of	1														
Peak Hour for	r Entire	Inters	ection	Begins	at 04:3	0 PM																
04:30 PM	4	0	11	0	15	0	206	2	0	208	0	0	0	0	0	4	103	0	0	107	330	
04:45 PM	7	0	10	0	17	0	170	2	0	172	0	0	0	2	2	9	89	0	0	98	289	
05:00 PM	8	0	13	0	21	0	200	1	0	201	0	0	0	5	5	3	93	0	0	96	323	
05:15 PM	4	0	17	0	21	0	168	1	0	169	0	0	0	1	1	9	105	0	0	114	305	
Total Volume	23	0	51	0	74	0	744	6	0	750	0	0	0	8	8	25	390	0	0	415	1247	
% App. Total	31.1	0	68.9	0		0	99.2	8.0	0		0	0	0	100		6	94	0	0			
PHF	.719	.000	.750	.000	.881	.000	.903	.750	.000	.901	.000	.000	.000	.400	.400	.694	.929	.000	.000	.910	.945	
Cars	23	0	44	0	67	0	738	4	0	742	0	0	0	1	1	24	388	0	0	412	1222	
% Cars	100	0	86.3	0	90.5	0	99.2	66.7	0	98.9	0	0	0	12.5	12.5	96.0	99.5	0	0	99.3	98.0	
Single Units/Buses						_			_		_	_	_			_			_			
% Single Units/Buses	0	0	11.8	0	8.1	0	0.7	33.3	0	0.9	0	0	0	87.5	87.5	0	0.5	0	0	0.5	1.8	
Tractor Trailers	0	0	1	0	1	0	1	0	0	1	0	0	0	0	0	. 1	0	0	0	1	3	
% Tractor Trailers	0	0	2.0	0	1.4	0	0.1	0	0	0.1	0	0	0	0	0	4.0	0	0	0	0.2	0.2	



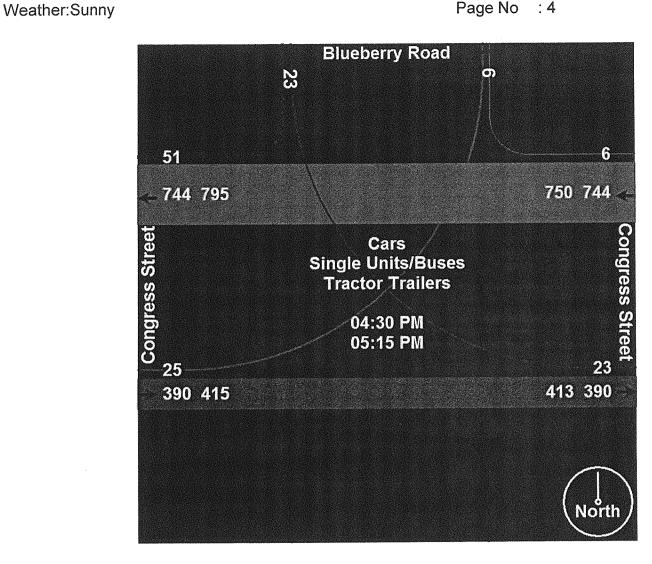
PO Box 1237, 15 Shaker Road Gray, ME 04039

Location: Blueberry Road @ Congress St Engineering Excellence Since 1998 Name: Blueberry@Congress_PM Raw Site Code: 2672

Counter: IAM Board:DB400

Start Date : 7/9/2012

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		*

PO Box 1237, 15 Shaker Road Gray, ME 04039 Engineering Excellence Since 1998

Location: Huchins/cong-ptld

Counter:PO Board:3364

Weather:Ptly cloudy

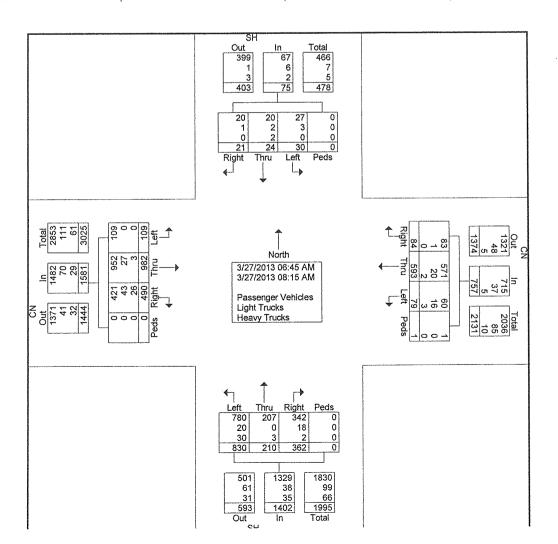
File Name: Congress@Hutchins-skyway AM

Site Code : 00000000 Start Date : 3/27/2013

Page No : 1

Groups Printed- Passenger Vehicles - Light Trucks - Heavy Trucks

	Groups Printed- Passenger Vehicles - Light Trucks - neavy Trucks																				
		SH					CN					SH					CN				
		Fr	om No	orth			F	rom Ea	ast			Fr	om Sc	outh			Fr	om W	est		
Start Time	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Int. Total
06:45 AM	4	2	2	0	8	4	70	11	0	85	31	35	100	0	166	56	129	19	0	204	463
Total	4	2	2	0	8	4	70	11	0	85	31	35	100	0	166	56	129	19	0	204	463
	,				,																
07:00 AM	1	2	0	0	3	6	49	11	0	66	38	8	82	0	128	86	148	5	0	239	436
07:15 AM	2	0	4	0	6	13	59	8	0	80	46	34	100	0	180	71	153	16	0	240	506
07:30 AM	6	4	12	0	22	8	98	15	1	122	72	29	122	0	223	73	136	15	0	224	591
07:45 AM	5	3	3	0	11	16	120	8	0	144	74	46	175	0	295	84	145	26	0	255	705
Total	14	9	19	0	42	43	326	42	1	412	230	117	479	0	826	314	582	62	0	958	2238
	•																				
MA 00:80	1	4	5	0	10	17	106	11	0	134	57	41	141	0	239	68	150	18	0	236	619
08:15 AM	2	9	4	0	15	20	91	15	0	126	44	17	110	0	171	52	121	10	0	183	495
Grand Total	21	24	30	0	75	84	593	79	1	757	362	210	830	0	1402	490	982	109	0	1581	3815
Apprch %	28	32	40	0		11.1	78.3	10.4	0.1		25.8	15	59.2	0		31	62.1	6.9	0		
Total %	0.6	0.6	8.0	0	2	2.2	15.5	2.1	0	19.8	9.5	5.5	21.8	0	36.7	12.8	25.7	2.9	0_	41.4	
Passenger Vehicles	20	20	27	0	67	83	571	60	1	715	342	207	780	0	1329	421	952	109	0	1482	3593
% Passenger Vehicles																					
Light Trucks	1	2	3	0	6	1	20	16	0	37	18	0	20	0	38	43	27	0	0	70	151
% Light Trucks	4.8	8.3	10	0	8	1.2	3.4	20.3	0	4.9	5	0	2.4	0	2.7	8.8	2.7	0	0	4.4	4
Heavy Trucks	0	2	0	0	2	0	2	3	0	5	2	3	30	0	35	26	3	0	0	29	71
% Heavy Trucks	0	8.3	0	0	2.7	0	0.3	3.8	0	0.7	0.6	1.4	3.6	0	2.5	5.3	0.3	0	0	1.8	1.9



PO Box 1237, 15 Shaker Road Gray, ME 04039

Engineering Excellence Since 1998

Location: Huchins/cong-ptld

Counter:PO Board:3364

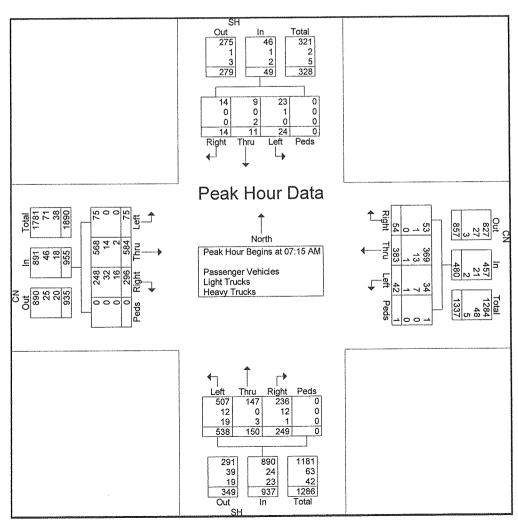
Weather:Ptly cloudy

File Name: Congress@Hutchins-skyway AM

Site Code : 00000000 Start Date : 3/27/2013

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		SH					CN					SH					CN]
			om No	rth				rom E	ast	į		Fr	om So	uth			Fr	om W	est		
Start Time	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Int. Total
Peak Hour Ar	nalysis	From (6:45 A	AM to 0	8:15 AN	√I - Pea	k 1 of	1													
Peak Hour fo	r Entire	Inters	ection	Begins	at 07:1	5 AM								_					_	0.40	
07:15 AM	2	0	4	0	6	13	59	8	0	80	46	34	100	0	180	71	153	16	0	240	506
07:30 AM	6	4	12	0	22	8	98	15	1	122	72	29	122	0	223	73	136	15	0	224	591
07:45 AM	5	3	3	0	11	16	120	8	0	144	74	46	175	0	295	84	145	26	0	255	705
08:00 AM	1	4	5	0	10	17	106	11	0	134	57	41	141	0	239	68	150	18	0	236	619
Total Volume	14	11	24	0	49	54	383	42	1	480	249	150	538	0	937	296	584	75	0	955	2421
% App. Total	28.6	22.4	49	0		11.2	79.8	8.8	0.2		26.6	16	57.4	0		31	61.2	7.9	0		
PHF	.583	.688	.500	.000	.557	.794	.798	.700	.250	.833	.841	.815	.769	.000	.794	.881	.954	.721	.000	.936	.859
Passenger Vehicles	14	9	23	0	46	53	369	34	1	457	236	147	507	0	890	248	568	75	0	891	2284
% Passenger Vehicles Light Trucks	0	0	1	0	1	1	13	7	0	21	12	0	12	0	24	32	14	0	0	46	92
% Light Trucks	0	0	4.2	0	2.0	1.9	3.4	16.7	0	4.4	4.8	0	2.2	0	2.6	10.8	2.4	0	0	4.8	3.8
Heavy Trucks	0	2	0	0	2	0	1	1	0	2	1	3	19	0	23	16	2	0	0	18	45
% Heavy Trucks	0	18.2	0	0	4.1	0	0.3	2.4	0	0.4	0.4	2.0	3.5	0	2.5	5.4	0.3	0	0	1.9	1.9



Gorrill-Palmer Consulting Engineers, Inc. PO Box 1237, 15 Shaker Road

Gray, ME 04039 Engineering Excellence Since 1998

Location:Congress/Hutchins-Ptld

Counter:PO Board:3364

Weather:cloudy

File Name: Congress@Hutchins-skywayPM

Site Code : 00000000 Start Date : 3/26/2013

Page No : 1

Groups Printed- Passenger Vehicles - Light Trucks - Heavy Trucks

	Groups Printed- Passenger Venicles																						
	1	HUTCH	1 SKY			C	OONG	RESS	ì		ŀ	HUTCH				C							
		Fi	om No	orth			F	rom Ea	ast			Fr	om Sc					om W					
Start Time	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	int, Total		
03:30 PM	26	24	13	0	63	3	146	24	0	173	10	6	77	0	93	90	70	4	0	164	493		
03:45 PM	6	14	7	0	27	7	116	22	0	145	8	2	57	0	67	64	75	4	0	143	382		
Total	32	38	20	0	90	10	262	46	0	318	18	8	134	0	160	154	145	8	0	307	875		
	1										•												
04:00 PM	9	19	12	0	40	4	160	63	0	227	8	10	62	0	80	119	97	5	0	221	568		
04:15 PM	12	15	9	0	36	3	140	39	0	182	8	9	61	0	78	86	73	2	0	161	457		
04:30 PM	26	27	15	1	69	5	175	69	0	249	7	9	70	0	86	141	88	11	0	240	644		
04:45 PM	10	28	8	0	46	3	140	51	0	194	5	8	95	0	108	135	69	8	0	212	560		
Total	57	89	44	1	191	15	615	222	0	852	28	36	288	0	352	481	327	26	0	834	2229		
· iotai)),	00	٠.	•			• • •									•					•		
05:00 PM	20	37	19	0	76	3	168	58	0	229	9	6	75	0	90	150	94	6	0	250	645		
05:15 PM	11	28	9	Ö	48	4	155	46	Ō	205	6	7	84	0	97	146	101	5	0	252	602		
05:30 PM	6 '6	21	5	ő	32	5	136	37	ō	178	5	9	75	0	89	101	78	3	0	182	481		
05:45 PM	6	9	7	ő	22	2	98	25	ŏ	125	6	9	47	0	62	71	54	6	0	131	340		
	43	95	40	0	178	14	557	166	0	737	26	31	281	0	338	468	327	20	0	815	2068		
Total	43	33	40	U	170	1 17	557	,00	Ū	, 0,	1 20	٠.		-							1		
Grand Total	132	222	104	1	459	39	1434	434	0	1907	72	75	703	0	850	1103	799	54	0	1956	5172		
	28.8	48.4	22.7	0.2	400	2	75.2	22.8	ŏ	1007	8.5	8.8	82.7	Ō		56.4	40.8	2.8	0				
Apprch %	2.6	4.3	22.7	0.2	8.9	0.8	27.7	8.4	ŏ	36.9	1.4	1.5	13.6	ō	16.4	21.3	15.4	1	0	37.8			
Total %	130	220	103	1	454	36	1412	422	0	1870	65	71	645	0	781	1072	787	52	0	1911	5016		
Passenger Vehicles	98.5	99.1	99	100	98.9	92.3	98.5	97.2	0	98.1	90.3	94.7	91.7	ō	91.9	97.2	98.5	96.3	0	97.7	97		
% Passenger Vehicles	90.5	29.1	33	100	50.5	32.3	20	11	0	34	6	4	25	0	35	13	12	2	0	27	101		
Light Trucks	1 5		1	0	1.1	7.7	1.4	2.5	0	1.8	8.3	5.3	3.6	ő	4.1	1.2	1.5	3.7	Ö	1.4	2		
% Light Trucks	1.5	0.9				0	2	2.5	0	3	1 1	0.0	33	0	34	18	0	0.7	0	18	55		
Heavy Trucks	0	0	0	0	0	0		0.2	0	0.2	1.4	Ô	4.7	ő	4	1.6	0	0	0	0.9	1.1		
% Heavy Trucks	0	. 0	0	0	0	0	0.1	0.2	U	0.2	1.4	U	4.1	U	7	1.0	J	U	U	0.0	1		

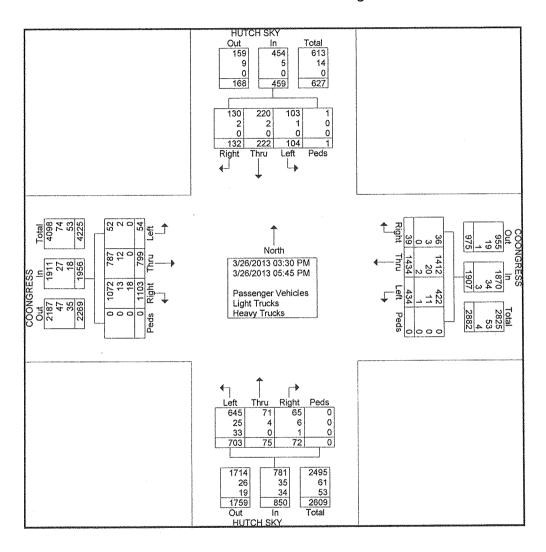
PO Box 1237, 15 Shaker Road Gray, ME 04039 Engineering Excellence Since 1998

Location: Congress/Hutchins-Ptld

Counter:PO Board:3364 Weather:cloudy File Name: Congress@Hutchins-skywayPM

Site Code : 00000000 Start Date : 3/26/2013

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	Н	UTCH	SKY			С	OONG	RESS	HUTCH SKY							С					
		Fr	om No	orth			F	rom Ea	ast			Fr	om So	uth				om W	est		
		Thru	Left		App. Total	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Right	Thru	Left	Peds	App. Total	Int. Total
Peak Hour Ana	alysis l	From C	3:30 F	PM to 0	5:45 PN	/I - Pea	k 1 of '	1													
Peak Hour for																					T
04:30 PM	26	27	15	1	69	5	175	69	0	249	7	9	70	0	86	141	88	11	0	240	644
04:45 PM	10	28	8	0	46	3	140	51	0	194	5	8	95	0	108	135	69	8	0	212	560
05:00 PM	20	37	19	0	76	3	168	58	0	229	9	6	75	0	90	150	94	6	0	250	645
05:15 PM	11	28	9	0	48	4	155	46	0	205	6	7	84	0	97	146	101	5	0	252	602
Total Volume	67	120	51	1	239	15	638	224	0	877	27	30	324	0	381	572	352	30	0	954	2451
% App. Total	28	50.2	21.3	0.4		1.7	72.7	25.5	0		7.1	7.9	85	0		60	36.9	3.1	0		
PHF	.644	.811	.671	.250	.786	.750	.911	.812	.000	.881	.750	.833	.853	.000	.882	.953	.871	.682	.000	.946	.950
Passenger Vehicles	65	119	51	1	236	15	631	223	0	869	27	27	305	0	359	557	347	28	0	932	2396
% Passenger Vehicles Light Trucks	2	1	0	0	3	n	7	0	0	7	0	3	6	0	9	6	5	2	0	13	32
- 1	3.0	0.8	n	Ö	1.3	ő	1.1	n	Ö	0.8	Ō	10.0	1.9	0	2.4	1.0	1.4	6.7	0	1.4	1.3
% Light Trucks	0.0	0.0	0	0	0.0	0	0	1	0	1	l o	0	13	ō	13	9	0	0	0	9	23
Heavy Trucks % Heavy Trucks	0	0	0	0	n	0	0	0.4	n	0.1	ő	Õ	4.0	Ō	3.4	1.6	0	0	0	0.9	0.9

PO Box 1237, 15 Shaker Road Gray, ME 04039

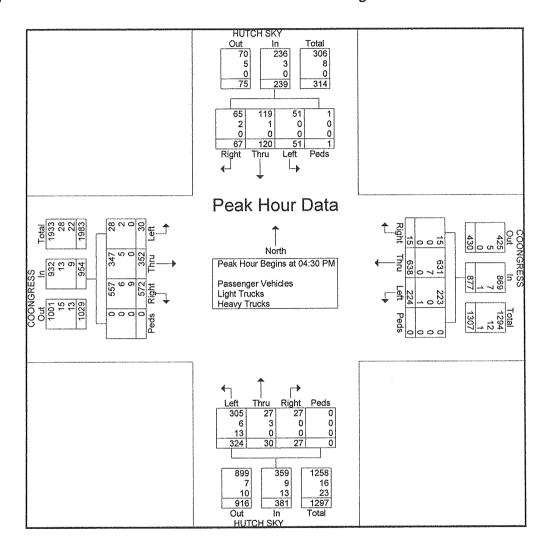
Engineering Excellence Since 1998

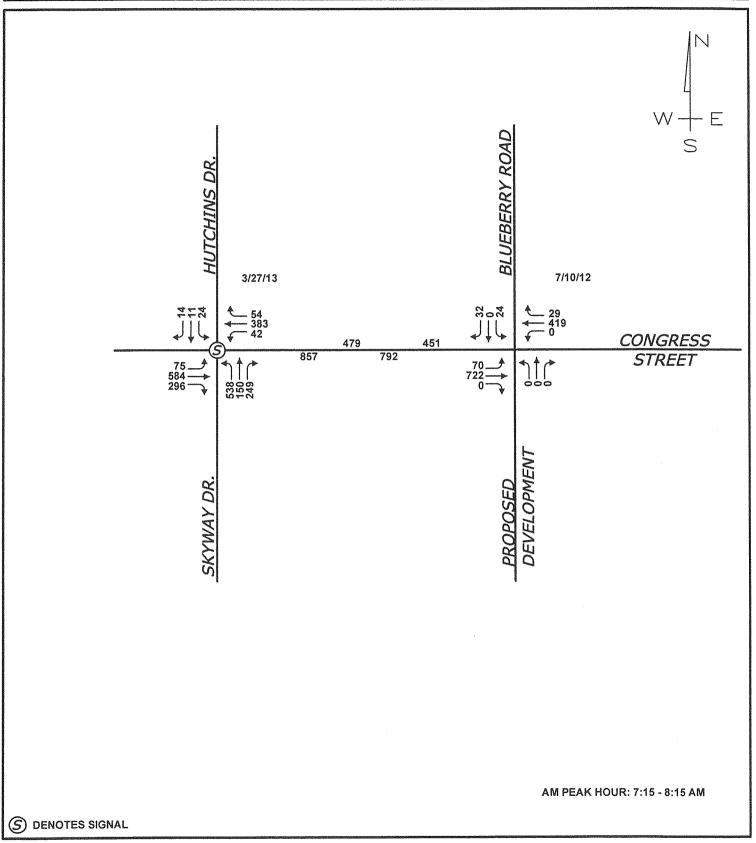
Location: Congress/Hutchins-Ptld

Counter:PO Board:3364 Weather:cloudy File Name: Congress@Hutchins-skywayPM

Site Code : 00000000 Start Date : 3/26/2013

Page No : 3





Design: Draft: Checked:

TLG DB TLG

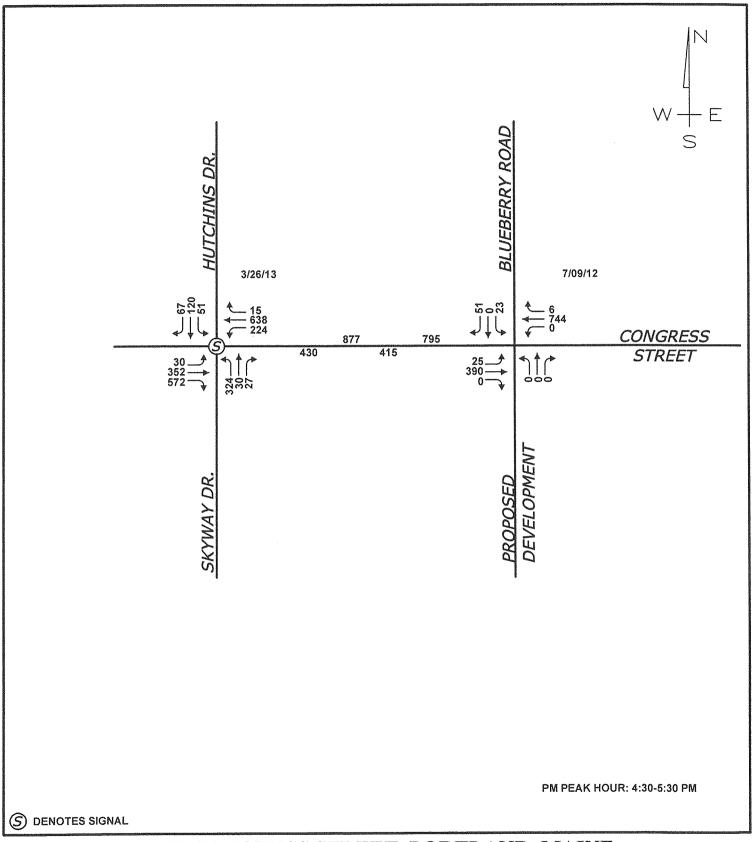
Scale: Date:

NONE MAR 2013 File Name: 2672-TRAFF2.dwg

PO Box 1237 15 Shaker Road

Gray, ME 04039

207-657-6910 Fax: 207-657-6912 mailbox@gorrillpalmer.com www.gorrillpalmer.com



Design: Draft:

TLG DB Checked: TLG Scale:

NONE

MAR 2013 File Name: 2672-TRAFF2.dwg

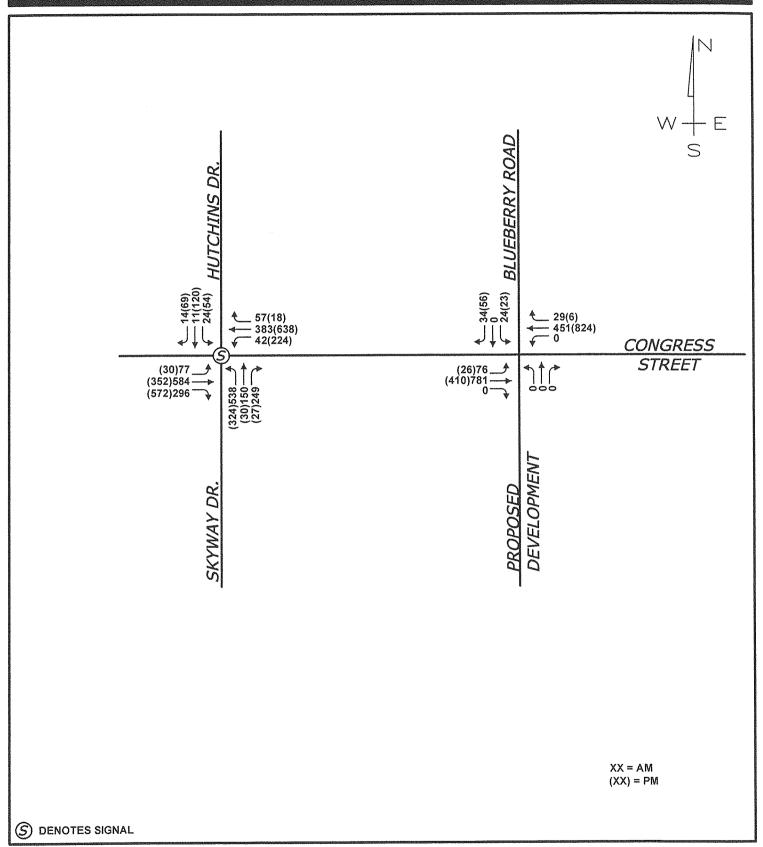
PO Box 1237

Gorrill-Palmer Consulting Engineers

Engineering Excellence Since 1998 15 Shaker Road Gray, ME 04039

Fax: 207-657-6912 mailbox@gorrillpalmer.com www.gomilpalmer.com

File Name: 2672-TRAFF2.dwg



Design: TLG Scale: NONE
Draft: DB Date: MAR 2013
Checked: TLG File Name: 2672-TRAFF2.dwg

Gorrill-Palmer Consulting Engineers, Inc.

TLG Design: DB Draft:

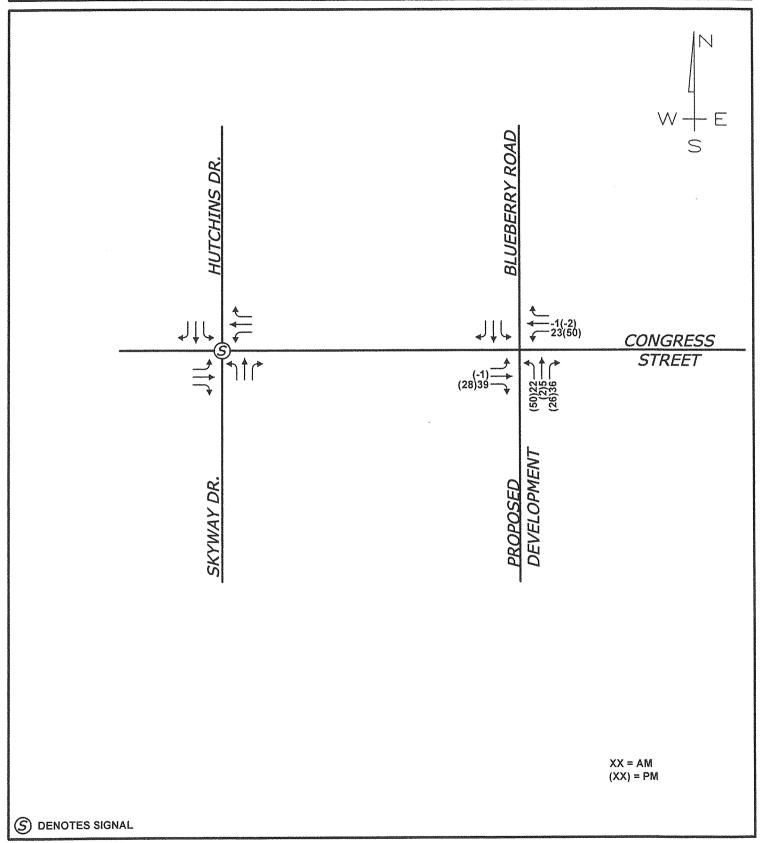
Checked: TLG

Scale: Date:

NONE MAR 2013 File Name: 2672-TRAFF2.dwg

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Scale: Date:

NONE

MAR 2013 File Name: 2672-TRAFF2.dwg Engineering Excellence Since 1998

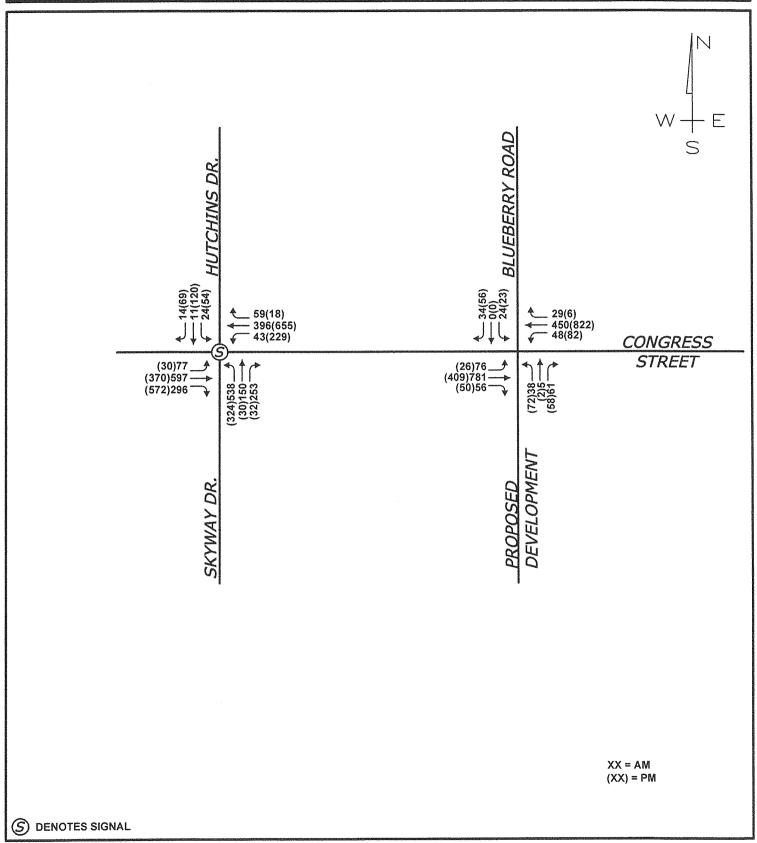
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Figure No



2282 CONGRESS STREET, PORTLAND, MAINE

GPG
PO Box 1237

Gray, ME 04039

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Appendix B Capacity Analyses

3: Site /Blueberry Road & Congress Street Performance by approach

Approach	EB	WB	NB	SB	All the second of the second o
Denied Delay (hr)	0.0	0.1	0.0	0.0	0.1
Denied Del/Veh (s)	0.1	0.7	0,1	0.1	0.3
Total Delay (hr)	1.0	0.3	0.6	0.2	2.1
Total Del/Veh (s)	3.8	1.8	26.6	16.6	4.8

6: Skyway/Hutchins & Congress Street Performance by approach

Approach	EΒ	WB	NB	SB	All and the second
Denied Delay (hr)	1.5	0.0	0.1	0.0	1.6
Denied Del/Veh (s)	5.5	0.0	0,4	1.6	2.4
Total Delay (hr)	11.7	3.0	6.9	0.4	22.0
Total Del/Veh (s)	42.4	21.1	26.3	34.0	31.8

Total Network Performance

Denied Delay (hr)	1.7	
Denied Del/Veh (s)	2.4	
Total Delay (hr)	25.3	
Total Del/Veh (s)	33.7	

Intersection: 3: Site /Blueberry Road & Congress Street

Movement	EB	EB	WB	WB	NB	NB	SB	SB	
Directions Served	L	TR	L	TR	LT	R	LT	R	
Maximum Queue (ft)	57	10	46	13	109	57	65	44	
Average Queue (ft)	19	0	18	0	39	25	20	19	
95th Queue (ft)	46	4	42	- 6	88	51	53	45	
Link Distance (ft)		1011		867	134	134	764	764	uurus en entenete (CE) te esutorio en livertalisti en var tivat, mindelet induseria (variable) siderio de vuid e
Upstream Blk Time (%)					1				
Queuing Penalty (veh)	SSE COLUMN TO COMPANY OF THE PROPERTY OF THE P				0		and a supplier of the	niemiero nazonalniem 6 februari 2 februari	o chomphony de précisor de la company de la company de company de la confession de propins de propins de la confession de la
Storage Bay Dist (ft)	500		100						
Storage Blk Time (%)						and the state of t	noted the Articular Articu	o tarzeno o o oscupenti estistable del Silo	
Queuing Penalty (veh)			- 15						

Intersection: 6: Skyway/Hutchins & Congress Street

Movement	EB	EB	EB	WB	WB	NB	NB	SB	SB	
Directions Served	L	Т	R	L	TR	L	TR	LT	R	
Maximum Queue (ft)	90	814	175	64	288	436	304	70	56	200
Average Queue (ft)	54	475	142	25	165	245	137	26	14	
95th Queue (ft)	103	861	235	54	264	397	234	59	44	
Link Distance (ft)	Control of the Contro	802		and the second of the second o	1011	838	838	276		
Upstream Blk Time (%)		7								
Queuing Penalty (veh)	A STATE OF THE PARTY OF THE PARTY OF	0							a constitutional de participat de la Cal	
Storage Bay Dist (ft)	65		150	500					155	
Storage Blk Time (%)	3	45	0					ne an artist of the second of the second	_orace with the control of the control web that	
Queuing Penalty (veh)	28	169	2							

Network Summary

Network wide Queuing Penalty: 200

Intersection: 6: Skyway/Hutchins & Congress Street

Phase	2.	3	- 4	5	6	7	- 8
Movement(s) Served	NBTL	WBL	EBTL	NBL	SBTL	EBL	WBTL
Maximum Green (s)	42.0	4.0	29.0	20.0	17.0	4.0	29.0
Minimum Green (s)	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Recall	None	None	None	None	None	None	None
Avg. Green (s)	30.1	4.0	30.1	22.1	10.8	4.3	29.1
g/C Ratio	-0.01	-0.01	NA	NA	-0.01	-0.01	NA
Cycles Skipped (%)	10	65	0	0	52	51	0
Cycles @ Minimum (%)	0	35	0	0	0	47	0
Cycles Maxed Out (%)	12	35	92	88	8	49	77
Cycles with Peds (%)	0	0	0	0	0	0	0

Average Cycle Length (s): NA

Number of Complete Cycles: 0

3: Site /Blueberry Road & Congress Street Performance by approach

Approach	EB	WB	NB	SB	All
Denied Delay (hr)	0.0	0.3	0.0	0.0	0.3
Denied Del/Veh (s)	0.0	1.2	0.1	0.1	0.7
Total Delay (hr)	0.5	0.5	0.9	0.4	2.3
Total Del/Veh (s)	3.8	2,1	24.5	17.4	5.2

6: Skyway/Hutchins & Congress Street Performance by approach

Approach	EB	WB	NB	SB	All	
Denied Delay (hr)	0.8	0.0	0.2	0.1	1.0	
Denied Del/Veh (s)	2,9	0.0	1.6	1,4	1.5	
Total Delay (hr)	6.3	6.7	9.2	2.0	24.3	
Total Del/Veh (s)	23.6	25,3	85.3	31.5	34.4	

Total Network Performance

Denied Delay (hr)	1.4
Denied Del/Veh (s)	1.8
Total Delay (hr)	28.0
Total Del/Veh (s)	36.4

Intersection: 3: Site /Blueberry Road & Congress Street

Movement	EB	EB	WB	WB	NB -	NB	SB	SB	
Directions Served	L	TR	L	TR	LT	R	LT	R	
Maximum Queue (ft)	44	8	50	4	117	56	52	75	
Average Queue (ft)	13	0	18	0	48	29	20	30	
95th Queue (ft)	37	4	42	- 3	96	53	48	61	
Link Distance (ft)		1010		867	134	134	764	764	
Upstream Blk Time (%)					0				
Queuing Penalty (veh)					0				
Storage Bay Dist (ft)	500		100						
Storage Blk Time (%)									
Queuing Penalty (veh)									

Intersection: 6: Skyway/Hutchins & Congress Street

Movement	EB	EB	EB	WB	WB	NB	NB	SB	SB	
Directions Served	L	Т	R	L	TR	L	TR	LT	R	
Maximum Queue (ft)	90	607	175	282	475	596	273	208	178	
Average Queue (ft)	28	223	137	117	243	290	53	100	38	
95th Queue (ft)	77	468	215	229	423	620	275	173	94	
Link Distance (ft)		675			1010	970	970	275		
Upstream Blk Time (%)		1				2	2	0		
Queuing Penalty (veh)		0				0	0	0		
Storage Bay Dist (ft)	65		150	500					155	
Storage Blk Time (%)	1	36	7		1			2	0	
Queuing Penalty (veh)	9	218	29		2			1	0	

Network Summary

Network wide Queuing Penalty: 260

Intersection: 6: Skyway/Hutchins & Congress Street

Phase	2	3	4	5	6	7	8
Movement(s) Served	NBTL	WBL	EBTL	NBL	SBTL	EBL	WBTL
Maximum Green (s)	35.0	10.0	30.0	12.0	18.0	5.0	35.0
Minimum Green (s)	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Recall	None	None	None	None	None	None	None
Avg. Green (s)	31.4	9.6	28.9	11.9	13.9	5.1	39.9
g/C Ratio	-0.01	-0.01	NA	NA	-0.01	-0.01	NA
Cycles Skipped (%)	52	5	0	0	2	71	0
Cycles @ Minimum (%)	0	0	0	0	0	0	0
Cycles Maxed Out (%)	17	77	77	93	28	29	88
Cycles with Peds (%)	0	0	0	0	0	0	. 0
Controller Summary						40	

Average Cycle Length (s): NA Number of Complete Cycles: 0

Appendix C MaineDOT Crash History Trip Generation Calculations Lane Warrant Sheets

1320 & Driver Report Included Exclude First NodeExclude Last Node 1320 Included Report Selections and Input Parameters Start Offset: 0 End Offset: 0 ✓ Crash Summary II Year 2009, Start Month 1 through Year 2011 End Month: 12 End Node: 18490 Start Node: 10097 Section Detail REPORT PARAMETERS REPORT DESCRIPTION REPORT SELECTIONS ✓ Crash Summary I Route: 0022X Congress St

Maine Department Of Transportation - Traffic Engineering, Crash Records Section Crash Summary I

		1.11	Z	sepo								Nodes		
Route - MP Node Description			U/R	Total		njury	Cras	hes	ፈ	rcent	nnual M	Crach Rate	Critical	נוסט
				Srashes	¥	⋖	മ	ပ	PD =	ijury	Ent-Veh	200	Rate	5
18488 0022X - 3.58 Int of BLUEBERRY RD CONGRESS ST	Int of BLUEBERRY RD CONGRESS ST		2	_	0	0	0	0	-	0.0	5.027 Stat	2 1 0 0 0 0 1 0.0 5.027 0.07 0.32 Statewide Crash Rate: 0.12	0.32 e: 0.12	0.00
18490 0022X - 3.78 Intof CONGRESS ST EXIT 7A CONN RD HUTCHINS DR 9	Int of CONGRESS ST EXIT 7A CONN RD HUTCHINS	3 DR	6	18	0	0	~	7	10	44.4	7.811 Stat	18 0 0 1 7 10 44.4 7.811 0.77 1.02 Statewide Crash Rate: 0.62	1.02 e: 0.62	00.00
Study Years: 3.00 NODE TOTALS:	NODE TO	TALS		19 0 0 1 7 11 42.1 12.838	0	0		7	1,1	42.1	12.838	0.49	0.49 0.68 0.72	0.72

										1							
							Sections	<u> </u>									
Start	End	Element	Offset	Route - MP	Section U	R	Fotal		Injun	Cras	hes	Ω.	ercent	Annual	Crash Rate	Critical	CRF
Node	Node		Begin - End		Length Crashes K	ບັ	ashes	쏘	A	മ	ပ	PD	Injury	HMVM	A B C PD Injury HMVM Rate	Rate	
10097	18488	10097 18488 3105101 0 - 0.30 0022X - 3.28	0 - 0.30	0022X - 3.28	0.30 2	2	1 0 0 0 0 1	0	0	0	0	- -	0.0	0.0 0.01469	22.69	22.69 320.06	0.00
Int of CON	GRESS ST	nt of CONGRESS ST, ENT TO UNMUTUAL	MUTUAL	ST RTE 22											Statewide Crash Rate: 170.96	ate: 170.96	
18488	18490	18488 18490 3106664 0 - 0.20	0 - 0.20	0022X - 3.38	0.20 2 4 0 0 0 2 2 50.0 0.00982	7	4	0	0	0	7	7	90.09	0.00982	135.72 350.19	350.19	0.00
Int of BLUI	EBERRY RI	INT OF BLUEBERRY RD CONGRESS ST	SST	ST RTE 22											Statewide Crash R	ate: 170.96	***************************************
Study Y	Study Years: 3.00	00.		Section Totals:	0.50		ς.	0	0	0	7	က	40.0	5 0 0 0 2 3 40.0 0.02451	62.39	67.99 288.36	0.24
				Grand Totals:	0.50		24	0	0	-	6	14	41.7	24 0 0 1 9 14 41.7 0.02451	326.35	326.35 412.80 0.79	0.79

Maine Department Of Transportation - Traffic Engineering, Crash Records Section Crash Summary

		Injury	Degree	PD	PD	O	В	O
		Crash	Mile Point	3.29	3.68	3.70	3.74	3.77
		Crash Date		12/21/2010	03/26/2011	07/13/2010	12/20/2010	02/16/2010
		Crash Report		2010-30437C	2011-5798C	2010-14623C	2010-30418C	2010-3515C
STORES CONTRACTOR			PD	τ	7			
		shes	ပ	0	7			
STATE	ails	Injury Crashes	A B C	0	0			
A STATE OF THE PARTY OF THE PAR	Section Details			0	0			
TO STATE OF THE PARTY OF THE PA	Section		¥	0	0			
		Total	Crashes K	~	4			
		Route - MP		0022X - 3.28	0022X - 3.58			
		Offset	Begin - End	 0 - 0.30	0 - 0.20			
		Element		3105101				
		End	Node	18488	18490			
		Start	Node	10097	18488	! :		

										<u> </u>	3	NEW.	Gesnes by Jay and Flou	110				В							
•					-	AM					Hon	Hour of Day	λķ					PM							
Day Of Week	12	~	2	3	4	သ	9	7	8	9	10 11	1 12	~	2	က	4	2	9	7	æ	6	10	dem dem	5	Tot
SUNDAY	0	0	0	0	0	0	. 0	0	0	0	0 0	0 (0	0	0	0	0	0	0	0	0	0	0	0	0
MONDAY	0	0	0	0	0	0	0	0	0	0	0 0	0 (0	0	0	0		~	ó	0	0	0	0	0	2
TUESDAY	0	0	0	0	0	0	0	_	0	0	0	0	0	0	7	က	က	~	0	0	0	0	0	0	7-
WEDNESDAY	0	0	0	0	0	0	0	~	-	~	0 0	7	0	0	0	7	0	0	0	0	o ·	0	0	0	9
THURSDAY	0	0	0	0	0	0	0	7	~	0	0 0	0	0	0	0	0	0	0	0	0	0	0	0	0	ಌ
FRIDAY	0	0	0	0	0	0	0	0		0	0 0	0 (0	0	0	0	0	0	0	0	0	0	0	0	~
SATURDAY	0	0	0	0	0	0	0	0	0	0	1 0	0 (0	0	0	0	0	0	0	0	0	0	0	0	·
Totals	0	0	0	0	0	0	0	4	3	~	_	-	0	0	2	5	4	7	0	0	0	0	0	0	24
										Veh	Vehicle Co	Counts	WI AG	9 6											
	15	Unit Type	Эе			Total				Unit Type	Type			Total											
1-Passenger Car						32	23-Bicyclis	yclist						0											
2-(Sport) Utility Vehicle	'ehicle	<i>a</i> .				တ	24-Witnes	ness						4											
3-Passenger Van	_						25-Oth	Jer				tal pally of the constraint defendance of		0	Į										
4-Cargo Van (10K lbs or Less)	K lbs	or Les	s)				Total			many and the same of the same	Pally terroristance of perspectation and control	والمراجعة ومحاوسه ويادخوا	early management of the second	56											
5-Pickup						7																			
6-Motor Home						0																			
7-School Bus						0																			
8-Transit Bus						0																			
9-Motor Coach						0																			
10-Other Bus						0																			
11-Motorcycle																									
12-Moped						0																			
13-Low Speed Vehicle	'ehicle					0																			
14-Autocycle						0																			
15-Experimental						0																			
16-Other Light Trucks (10,000 lbs or Less)	rucks	(10,00	o sql oc	or Less	~	0																			
17-Medium/Heavy Trucks (More than 10,000 lbs)	vy Tru	icks (N	fore th	an 10,	000	_																			
18-ATV - (4 wheel)	(le					0																			
20-ATV - (2 wheel)	(je					0																			
21-Snowmobile						0																			
22-Pedestrian						0						-											-		

Crashes by Driver Action at Time of Cra	er Ac	tion at	Time	of Cra	lsh			Crashes by Apparent Physical Condition And Driver	/ Apparen	l Physi	0) [83	nelition	And D	river		
Driver Action at Time of Crash	Dr.1	Dr 2	Dr 3	Dr 4	Dr 5	Other	Total	Apparent Physical Condition		Dr.10	Dr.2	Dr 3 D	Dr4 Di	Dr 5 Other	er Total	
								Apparently Normal		23	24	က	_	0 0	51	
No Contributing Action	-	7	_	0	0	0	4	Physically Impaired or Handicapped	dicapped	0	0	0	0	0 0	0	
Ran Off Roadway	0	0	0	0	0	0	0	Emotional(Depressed, Angry, Disturbed, etc.)	٠, د	0	0	0	0	0 0	0	
Failed to Yield Right-of-Way	7	~	0	0	0	0	က	III (Sick)		0	0	0	0	0	0	
Ran Red Light	0	0	0	0	0	0	0	Asleep or Fatigued		0	0	0	0	0 0	0	
Ran Stop Sign	0	0	0	0	0	0	0	Under the Influence of Medications/Drugs/Alcohol		-	0	0	0	0	~	
Disregarded Other Traffic Sign	0	0	0	0	0	0	0	Other		0	0	0	0	0 0	0	
Disregarded Other Road Markings	0	0	0	0	0	0	0	Total	e de la composiçõe de l	24	24	3	1	0	52	
Exceeded Posted Speed Limit	0	0	0	0	0	0	0								,	
Drove Too Fast For Conditions	←	0	0	0	0	0	~									
Improper Turn	~	0	0	0	0	0	τ-		Driver	Driver Age by Unit Type		ype				
Improper Backing	-	0	0	0	0	0	τ	Age Driver	Bicycle	SnowMobile		Pedestrian		ATV	Total	
Improper Passing	0	0	0	0	0	0	0	09-Under 0	0	0		0		0	0	
Wrong Way	0	0	0	0	0	0	0	10-14 0	0	0		0		0	0	
Followed Too Closely	4	9	0	0	0	0	10	15-19	0	0		0		0	~	
Failed to Keep in Proper Lane	0	0	0	0	0	0	0	20-24 6	0	0		0		0	ဖ	
Operated Motor Vehicle in Erratic.	C	0	0	0	0	0	0	25-29 7	0	0		0		0	7	
Reckless, Careless, Negligent or								30-39 10	0	0		0		0	9	
Aggressive manner								40-49	0	0		0		0	12	
Swerved or Avoided Due to Wind,	0	0	0	0	0	0	0	50-59	0	0		0		0	10	
Object, Non-Motorist in Roadway								60-69	0	0		0		0	က	
Over-Correcting/Over-Steering	0	0	0	0	0	0	0	70-79 3	0	0		0		0	က	
			• •	c	c	c	c	80-Over 0	0	0		0		0	0	
Other Contributing Action	o (> (> (> 4	o)	> +	Unknown 0	0	0		0		0	0	
Unknown	0	0	o	-	0	0	_	Total 42	0	0		0		0	52	
Total	10	6	~	· Prom	0	0	77		•	•						

X	lost H	Most Harmful Event		Injury Data	
Most Harmful Event	Total	Most Harmful Event Total	1		Number Of
1-Overturn / Rollover	0	38-Other Fixed Object (wall, building, tunnel, etc.) 0	Severity Code	seventy code injury crasnes	Injuries
2-Fire / Explosion	0	39-Unknown	¥	0	0
3-Immersion	0	40-Gate or Cable 0	4	0	0
4-Jackknife	0	41-Pressure Ridge 0	В	~	
5-Cargo / Equipment Loss Or Shift	0	Total	O	O	12
6-Fell / Jumped from Motor Vehicle	0		PD	14	0
7-Thrown or Falling Object	0		T-48		
8-Other Non-Collision	0		ola O	24	13
9-Pedestrian	0				
10-Pedalcycle	0			Road Character	
11-Railway Vehicle - Train, Engine	0			Road Grade	Total
12-Animal	0		1-Level		20
13-Motor Vehicle in Transport	τ→		2-On Grade		4
14-Parked Motor Vehicle	7		3-Top of Hill		0
15-Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle	0	Traffic Control Devices	4-Bottom of Hill		o c
16-Work Zone / Maintenance Equipment	0	Traffic Control Device Total		on also distributive medicine medicine di della consistenza	
17-Other Non-Fixed Object	0	1-Traffic Signals (Stop & Go)	lotal		74
18-Impact Attenuator / Crash Cushion	0	2-Traffic Signals (Flashing)			
19-Bridge Overhead Structure	0	3-Advisory/Warning Sign			
20-Bridge Pier or Support	0	4-Stop Signs - All Approaches		1 78.50	
21-Bridge Rail	0	5-Stop Signs - Other		Light Condition	Total
22-Cable Barrier	0	6-Yield Sign	1-Daylight		14
23-Culvert	0	7-Curve Warning Sign	2-Dawn		က
24-Curb	0	8-Officer, Flagman, School Patrol	3-Dusk		-
25-Ditch	0	9-School Bus Stop Arm	4-Dark - Lighted	70	ဖ
26-Embankment	0		5-Dark - Not Lighted	ahted	0
27-Guardrail Face	0	11-R.R. Crossing Device 0	6-Dark - Unknown Lighting	wn Lighting	0
28-Guardrail End	0	12-No Passing Zone 0	7-l Inknown)	0
29-Concrete Traffic Barrier	0	13-None 4	1-4-1	and and the constitution of the constitution o	***
30-Other Traffic Barrier	0	14-Other 0	lotai		***
31-Tree (Standing)	0	7.2.4.21			
32-Utility Pole / Light Support	0	10101			
33-Traffic Sign Support	0				
34-Traffic Signal Support	~~				
35-Fence	0				
36-Mailbox	0				
37-Other Post Pole or Support	0				

Maine Department Of Transportation - Traffic Engineering, Crash Records Section Crash Summary II - Characteristics

Crashes by Year and Month

Month	2009	2010	2011	To	Total
JANUARY		~	2	7	4
FEBRUARY	0		0		
MARCH	0	0			4
APRIL	0	0	0		0
MAY	7	0			ო
JUNE		0	0		~
JULY	0	~	0		
AUGUST		7	τ-	•	4
SEPTEMBER	Asses.	~	0		7
OCTOBER	0		0		
NOVEMBER	0	7	0		7
DECEMBER	0	ო	7-		4
Total	9	12	9		24

Report is limited to the last 10 years of data.

Maine Department Of Transportation - Traffic Engineering, Crash Records Section

Crash Summary II - Characteristics crashes by Crash Type and Type of Location

Crash Type	Straight Road	Curved Road	Three Leg Four Leg Fin Intersection Intersection In	Four Leg Intersection	Five or More Leg Intersection	Driveways	Bridges	Interchanges	Other	Parking Lot	Private Way	Cross Over	Railroad Crossing	Total
Object in Road	0	0	0			0	0	0	0	0	0	0	0	0
Rear End / Sideswipe	2	0	~	16	0	0	0	0	0	0	0	0	0	19
Head-on / Sideswipe	0	0.	0	0	0	0	0	0	0	0	0	0	0	0
Intersection Movement	0	0	0	7	0	7	0	0	0	0	0	0	0	4
Pedestrians	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Train	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Went Off Road	~	0	0	0	0	0	0	0	0	0	0	0	0	~-
All Other Animal	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bicycle	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Jackknife	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Rollover	0	0	0	0	0	0	.0	0	0	0	0	0	0	0
Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Submersion	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Thrown or Falling Object	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bear	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Deer	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Moose	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Turkey	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	8	0	-	18	0	2	0	0	0	0	0	0	0	24

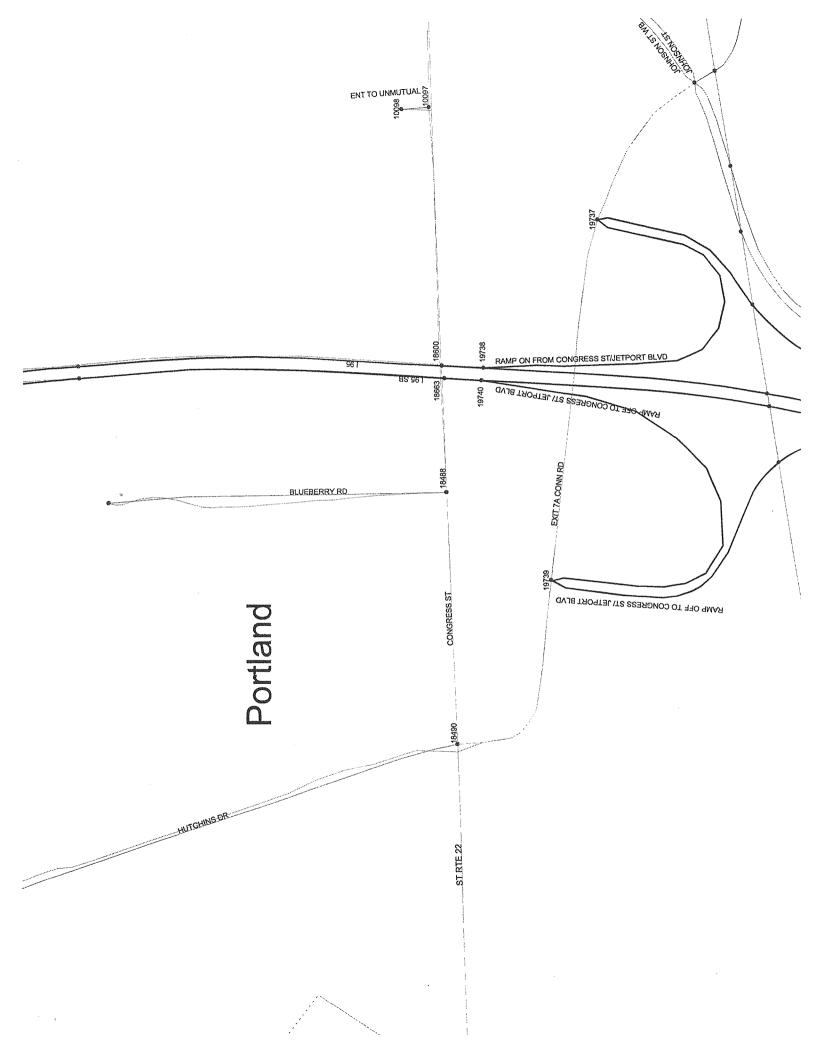
			Grashes	s by Weath	er, Light C	ondition a	Crashes by Weather, Light Condition and Road Surface	ırface				
Weather Light	Dry	Ice/Frost	Mud, Dirt, Gravel	IIO	Other	Sand	Slush	Snow	Unknown	Water (Standing, Moving)	Wet	Total
Blowing Sand, Soil, Dirt										an isa qirila aqina ana daqiq qiprisiyi isa daqiqi qirila sayo	ie nad an oppositellende destaction is de desse destaction de la constant de la c	- William Control of the Control of
Dark - Lighted	0	0	0	0	0	0	0	0	0	0	0	0
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0	0
Dark - Unknown Lighting	0	0	0	0	0	0	0	0	0	0	0	0
Dawn	0	0	0	0	0	0	0	0	0	0	0	0
Daylight	0	0	0	0	0	0	0	0	0	0	0	0
Dusk	0	0	0	0	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Blowing Snow												
Dark - Lighted	0	0	0	0	0	0	0	0	0	0	0	0
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0	0
Dark - Unknown Lighting	0	0	0	0	0	0	0	0	0	0	0	0
Dawn	0	0	0	0	0	0	0	0	0	0	0	0
Daylight	0	0	0	0	0	0	0	0	0	0	0	0
Dusk	0	0	0	0	0	0	0	0	0	0	0	0 '
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Clear									AND THE REPORT OF THE PROPERTY AND THE P			was simple and the state of the
Dark - Lighted	7	0	0	0	0	0	0	0	0	0	ζ	თ (
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0	0 '
Dark - Unknown Lighting	0	0	0	0	0	0	0	0	0	0	0	0 (
Dawn	က	0	0	0	0	0	0	0	0	0	0	ကျ
Daylight	တ	~	0	0	0	0	0	0	0	0	o •	,
Dusk	-	0	0	0	0	0	0	0	0	0	o ((
Unknown	0	0	0	0	0	0	0	0	0	٥	0	0
Cloudy					The state of the s	esame branching on the constitution of the con	in de la company a s'en de la company de	Andreas of the state of the state of the state of				
Dark - Lighted	0	0	0	0	0	0	0	0	0	0	0 (ɔ (
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0 ()
Dark - Unknown Lighting	0	0	0	0	0	0	0	0	0 (o (5 6	> 0
Dawn	0	0	0	0	0	0	0	0	0 (o (o (> (
Daylight	2	0	0	0	0	0	0	0 (0 (o 0	> C	и с
Dusk	0	0	0	0	0	0	0 ()	5 (> C) () C
Unknown	0	0	0	0	0	0	0	ɔ	>	>	>	>

Maine Department Of Transportation - Traffic Engineering, Crash Records Section Crash Summary II - Characteristics

			Orashes		Meather Light G	ondition and	ion and Road Surface	rface					
Weather Light	VuQ	lce/Frost	Mud, Dirt, Gravel	, IIO	Other	Sand	Slush	Snow	Unknown	Water (Standing, Moving)	Wet	Total	
Fog, Smog, Smoke													
Dark - Lighted	0	0	0	0	0	0	0	0	0	0	0	0	
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0	0	
Dark - Unknown Lighting	0	0	0	0	0	0	0	0	0	0	0	0	
Dawn	0	0	0	0	0	0	0	0	0	0	0	0	
Daylight	0	0	0	0	0	0	0	0	0	0	0	0	
Dusk	0	0	0	0	0	0	0	0	0	0	0	0	
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	•
Other													ļ
Dark - Lighted	0	0	0	0	0	0	0	0	0	0	0	0	
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0	0	
Dark - Unknown Lighting	0	0	0	0	0	0	0	0	0	0	0	0	
Dawn	0	0	0	0	0	0	0	0	0	0	0	0	
Daylight	0	0	0	0	0	0	0	0	0	0	0	0	
Dusk	0	0	0	0	0		0	0	0	0	0	0	
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	
Rain							at particular de de constante de			and described the second of th		and the constitution for the first field of the constitution of th	-
Dark - Lighted	0	0	0	0	0	0	0	0	0	0	0	0	
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0	0	
Dark - Unknown Lighting	0	0	0	0	0	0	0	0	0	0	0	0	
Dawn	0	0	0	0	0	0	0	0	0	0	0	0	
Davlight	0	0	0	0	0	0	0	0	0	0	4	4	
Dusk	0	0	0	0	0	0	0	0	0	0	0	0 (
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	
Severe Crosswinds						a de la composition della comp	***************************************						
Dark - Lighted	0	0	0	0	0	0	0	0	0	0	0	0 (
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0	0 (
Dark - Unknown Lighting	0	0	0	0	·O	0	0	0	0	0	0 '	0 (
Dawn	0	0	0	0	0	0	0	0	0	0	0 (0 (
Daylight	0	0	0	0	0	0	0	0	0	0	0 ()	
Dusk	0	0	0	0	0	0	0	0	0 (0 (0 0	> (
Unknown	0	0	0	0	0	0	0	0	0	Þ	5	ò	

Maine Department Of Transportation - Traffic Engineering, Crash Records Section Crash Summary II - Characteristics

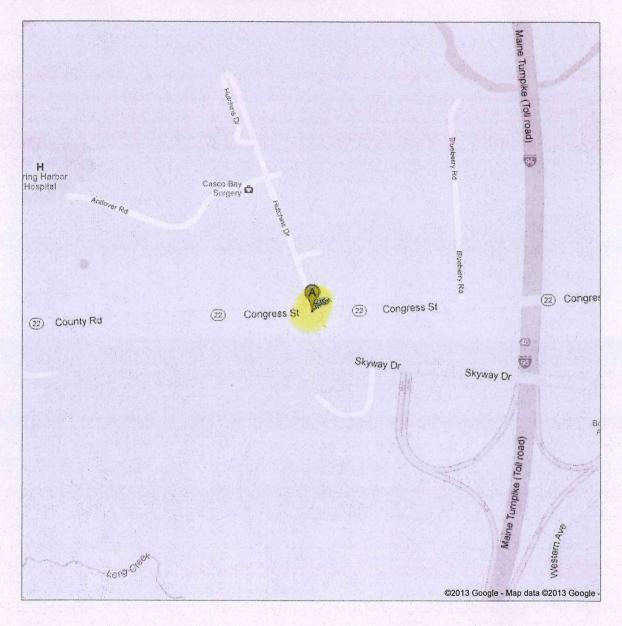
			Crashes	. by Weath	ier, Light G	onolition a	Light Condition and Road Surface	urface			4	
Weather Light	Day	lce/Frost	Mud, Dirt, Gravel	IIO	Other	Sand	Slush	Snow	Unknown	Water (Standing, Moving)	Wet	Total
Sleet, Hail (Freezing Rain or Drizzle)	rizzle)						A STATE OF THE PERSON NAMED OF	\$140 may 2 may	***************************************	angle copy of the first open special residence of the special residence	mysel a seite speisperich de speisperich de speisperich de speisperich de speisperich de speisperich de speisp	
Dark - Lighted	0	0	0	0	0	0	0	0	0	0	0	0
Dark - Not Lighted	0	0	0	.0	0	0	0	0	0	0	0	0
Dark - Unknown Lighting	0	0	0	0	0	0	0	0	0	0	0	0
Dawn	0	0	0	0	0	0	0	0	0	0	0	0
Daylight	0	τ	0	0	0	0	0	0	0	0	0	
Dusk	0	0	0	0	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Snow												is the content of the construction of the content o
Dark - Lighted	0	3	0	0	0	0	0	0	0	0	0	ო
Dark - Not Lighted	0	0	0	0	0	0	0	0	0	0	0	0
Dark - Unknown Lighting	0	0	ο.	0	0	0	0	0	0	0	0	0
Dawn	Q	0	0	0	0	0	0	0	0	0	0	0
Daylight	0	0	0	0	0	0	0	0	0	0	0	0
Dusk	0	0	0	0	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	14	2	0	0	0	0	0	0	0	0	0	24



Google

Address Congress St & Hutchins Dr Congress St & Hutchins Dr Portland, ME 04102

JN 2672 - Collision Diagrams



COLLISION DIAGRAM SHEFT 1 OF 2 LOCATION HUtchins/SKI ionaress Street 18490 NODE NO(S). YEARS REVIEWED_2009 - 201 DATE PREPARED O4.22.2013 HUTCHINS NT DRIVE CONGRESS ST. ٠, 414) 2 (3/14) 2 (14) 06.30 . > (05.27 (4) 2. 05.17 CONGRESS ST. SKYWAY DRIVE CRITICAL RATE FACTOR. EQUIV. PROP. DAMAGE ACC/YEAR. ACC/MEV LIGHT SYMBOLS 1. DAWN (MORNING)
4. DARK (ST. LIGHTS ON)
7. OTHER 2. DAYLIGHT 5. DARK (NO ST. LIGHTS) 3. DUSK (EVENING) 6. DARK (ST. LIGHTS OFF) PEDESTRIAN ANGLE P FATAL ACCIDENT ROAD SURFACE BACKING **M** REAR END 1. DRY
2. WET
4. ICE/PACKED SNOW-SANDED
5. MUDDY
7. OILY
8. SNOW/S

 2. WET
 J. SNOW/SLUSH-SANDED

 5. MUDDY
 6. DEBRIS

 8. SNOW/SLUSH-NOT SANDED
 9. ICE-PKD. SNOW-NOT SANDED

 FIXED OBJECT SIDE SWIPE 10. OTHER HEAD ON TURNING MOVE BICYCLE В APPARENT CONTRIBUTING FACTORS - HUMAN 1. NO IMPROPER ACTION 2. FAIL TO YLD. RIGHT OF WAY 3. ILLEGAL UNSAFE SPEED
4. FOLLOW TOO CLOSE 5. DISREGARD TRAFFIC CONTROL DEVICE
6. DRIVING LEFT OF CENTER-NO PASSING 7. IMPROPER PASS—OVERTAKING
8. IMP. UNSAFE LANE CHANGE 9. IMP. PARKING START/STOP 10. IMPROPER TURN
11. UNSAFE BACKING 12. NO SIGNAL OR IMP. SIGNAL 13. IMPEDING TRAFFIC OVERTURN CHANGE LANE ANIMAL -[A] PARKED OUT OF CONTROL SLED ---5 VEHICLE 14. DRIVER INATTENTION—DISTRACTION 15. DRIVER INEXPERIENCE 18. VISION OBSCURED-16. PEDEST. MOLATION ERROR 17. PHYSICAL IMPAIRMENT 18. MSION MINDSHIELD GLASS 19. MSION OBSCURED—SUN/HEADLIGHTS 20. OTHER HUMAN MOLATION FACTOR 31. HIT AND RUN 51. UNKNOWN WEATHER R = RAIN CL = CLOUDY XW = CROSS WINDS C = CLEAR SL = SLEET F = FOG S = SNOW **VEHICULAR** INJURIES 41. DEFECTIVE BRAKES 44. DEFECTIVE SUSPENSION OR FACTOR 42. DEFECTIVE TIRE/FAILURE 45. DEFECTIVE STEERING 51. UNKNOWN 43. DEFECTIVE LIGHTS 50. OTHER VEHICLE DEFECT B = NON-INCAPACITATING C = POSSIBLE INJURY K = FATAL A = INCAPACITATING INJURIES REPORT NO. TIME LIGHT ROAD SURFACE ACF OTHER ABC 01.22.09 000297 08:05 1 07:49 001521 05:14.09 001632 2 4 05.27.09 16:14 16:17 06.30.09 001931 14 21 16:39 002336 08.11.09 2630 09-10-09 07:08 2 19 SUN 4 LI 17:07 l 000117 01-12-10 4 08-17-10 16:50

COLLISION DIAGRAM

	SHEET 2 OF 2
LOCATION Hutchins / Skyway	/ Congress Street
	NODE NO(S) 18490
YEARS REVIEWED 2009 - 2011	DATE PREPARED 04.22.2013
YEARS REVIEWED	DATE PILL AND

REPORT NO.	DATE	TIME	V	INJU A	RIES B	c	LIGHT	ROAD SURFACE	ACF	OTHER
0021998	08.24.10	15:43	-1/		-	Ť	ì	· 1	4	. *
002274							l		14	
002825	10.27.10	07:28					ì	2	2	
081774							凵	2	4	
002984	11.12.10	08:30					1	l	14	
000024	01.04.11	07:58					2	ĺ	2/5	Ran Red Light
000036	01.05.11	09:18					l	5	4	ICE
001424	05.17.11	11:24					ı	2_	4	
2282							Ĭ	į	3/14	
003589	12.21.11	68.30					ì	5	3	ICE
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2009-2044C

STATE OF MAINE CRASH REPORT

FIRST PAGE

	Reporting Agency ME0030500	Report Numbe 09-000297	-		sh Date 22/2009	08:		At Scene E 1/22/200		At Scer 08:30	e Time
	City or Town Portland		et or Highway 7 7A CONN RD			Ne	arest Intersect	ing Street			Off Road
	Direction FROM Nearest Intersection ☐ At Intersection ☐ North ☐ So	processor.	Distanc West	e Fron	n Nearest Inl]Feet ☑M i	Non- Con-	titude		Longitud	е	
[1	Node 1 Node 2 0	i	Measurement No 19739	de	M o es T	enths	Posted Speed Wiles 30 c F	£	Jnknown I/A	Smercial	Posted 25 Posted 45
	F1) Type of Crash 2 - Rear End / Sideswipe				(F2) Type o						
(F3) Weather Condition			······································	(F4) Light (Condition			***************************************		
	2 - Cloudy F5) Road Grade				1 - Daylig (F6) Road		Condition	MIN			
1	L - Level		***************************************		1 - Dry						
	F7) Traffic Control Device L - Traffic Signals (Stop & Go)				Traffic Con	trol Devi	ce Operational	(pre-crash)´ Yes	? No	Пur	ık
	F8) Location of First Harmful Event		***************************************		Total Dama	ige over	Threshold?	✓Yes		vio	
(F9) Contributing Circumstances - Er	nvironment 1			(F9) Contril	outing Ci	rcumstances -	Environmen	t 2		
1	F10) Contributing Circumstances - F	Road 1			(F10) Conti	ibuting (Dircumstances	-Road 2			
-	n or Near a Construction, Maintenar	nce, or Utility W		Unk	Work Zone	Workers	Present?	Tyes [¬No	Mur	k
1	F11) Location of the Crash related t	- Innered	- L		(F12) Type	of Work	Zone	<u></u>			
Į.	aw Enforcement Present at Work Z	one? / Enforcement \	/ehicle Only ☐	¬No	School Bus	Related		es, Indirectly	Involved		No
	GHE THEN ROLLED INTO VEHIC					V	CONNECTOR RO	AD SSS STREET			
V	Vitness Last Name	First		MI	Address		Cit	/	St	ate	Zip
V	Vitness Last Name	First	***************************************	MI	Address		City	1	SI	ate	Zip
1	Ion Vehicle Property Damage Descr	ription			<u> </u>		State [City or To	wn []t	Jtilities	Private
P	roperty Owner Name				Address		Cit	1	St	ate	Zip
N	Ion Vehicle Property Damage Descr	ription			1		State [City or To	wn 🔲	Jtilities	Private
P	Property Owner Name			····	Address		Cit	/	SI	ate	Zip
	Reporting Officer			ort Da		Approve	d By UTCHESON			proved 1 22/20	
M	aine Department of Public Safety				ge 1	·····		Form 13			nuary 2010

Last Modified: 1/22/2009 12:16

09-0			7						STA	TE (OF MAI	NE	CRA	4SF	1 RE	PO	RT				UN	NIT F	ΆG
Unit	ID 1]Hit	Run	?	VIN 1GNI	DT13	WXY	(2273	470	Licen *	se Pla	te	State ME	(U1) U 2 - (S			y Veh	icle				
ΠN	lo l	nsur	ance	NΑ	(IC		1		ince Co	ompany	Name				1			icy Nu					
(U2) 11 -								**********		of the Administrative Constitution of the		1 '	ehicle Y	'ear		3) Vehi - Wh	cle Co	lor	***********				
				figura	ition								VWR o		/R						1. 0	~~ ~~	
Vehic	cle	: Has	s 9 or	More	e Seat	s?		TH-	AZMA	T Placar	ded ?	V	< 10 ehicle 1	,000 II Fravel				- 26,0 hboun] > thar Southb		OI U
(U5)	Sr	ecia	ıl Fur	nction	Vehic	es L	No				Yes No Exempt Veh		Easi merger	tbound		Westb	~			Roadw	ay	Unl	nov
	No	Spe	ecial	Fun	ction					<u> </u>		icie							· · · · · · · · · · · · · · · · · · ·	Y	es	No	
						Dam	age O	bser	ved	М	inor Damage				nal Da	-		То	wed D	ue to D)isablin	g Dan	age
(U6) 12 -				ged /	∤rea							((J7) Mos	it Harn	nful Eve	ent 							
(U8) 1 - F				Action road									19) Con - Non		ng Circu	umstar	ices - \	/ehicle	2				
					ents	1						(L	J10) Se	quenc	e of Ev	ents 2							
(U10) S	Sequ	ence	of Ev	ents:	3	******	***************************************				(L	J10) Se	quenc	e of Ev	ents 4							
V	Dr			cycle			strian			e Numb	er 🗸 Active	e N						nse C	lass E	Endorse	ements	Rest	rict
		La		lown	Opera	itor		Fin	* st Nam	 е				Susper	nded	ME	C	Cit]	<u> </u>	Sta	l ite	Zip
*			mber		endino	.[]						*	ME*						lation 2)			
						·														<u>.</u>			
k						same	as D	river)	First N	ame	MI		WNER ME*	Addre	SS			City			Sta	te Z	Ίp
D1)	Dr	iver	Distr	acted	Ву								2) Con - App a				ash						
(D3)	Dr	iver	Actio	ns at	Time	of Cra	sh 1	***************************************					3) Driv				f Cras	h 2			***************************************		
Alcoh				[www.c	t Not				Refused Test (Not	Blo]Alcoh	ol Tes	t Result	: Pendi	ng	Alcoh	ol BAC	Resul	t		
Drug	Te	est		П П U		t Not	Given 10the]Test I	Refused	Blo	od D	rug Tes	st Resi	ılt	□Po	sitive		Negati	ve [Pen	ding	
(D4)	No	n M	otoris	st Loc	ation	at Tim	ne of (Crash	!			(E)5) Non	Moto	ist Acti	on Pric	or to Ci	ash			*****	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
D6)	No	n M	otoris	st Act	ion at	Time	of Cra	ash 1				(C)6) Non	Moto	ist Acti	on at 1	ime of	Crash	12				
(D7)	Pe	des	trian	Mane	uvers	·····						(C	98) Bicy	clist N	laneuve	ers				***************************************		***********	
	Р	ERS	ON T	YPE 1	-Driver	, 2-Pa	ssenge	er, 3-P	edestria	ın, 6-Driv	er/Owner, 7-Bi	cycle, 8	-Passen	iger/Ov	ner, 24-	Last Kn	own O	perator :	25-Last	Known	Operato	or/Owne	
1-From 2-Sec 3-Thir 4-Four 5-Oth 6-Unk	Breath Urine Test Test N Urine To Test N Urine Non Motorist Location at Tin Non Motorist Action at Tin Pedestrian Maneuvers PERSON TYPE 1-Driver, 2- TROW SEAT POSITION SE ON 1-Left (driver) 1- cond Row 1-Left (driver) 1- cond Row 2-Middle 2- rd Row 3-Right 3- urth Row 4-Other 4- ter Row 5-Unknown 5- known (n- CTED HELMET USE				1-Sled 2-Oth 3- Un 4-Trad 5-Ridd (non-l 6- Un	eper Se er Encke enclose iling Uni ing on Na railing u known	ction o osed C ed Carg it flotor V unit)	f Cab (tru argo Area o Area 'ehicle Ex	ack)1-Not A 2-Not D 3-Depic 4-Depic t 5-Depic (knee, a 6-Depic	pplicable leployed lyed - Front lyed - Side lyed - Other lir belt,) lyed -	1-Not Ap 2-None I 3-Should 4-Should 5-Lap Be 6-Restra 7-Child F 8-Child F	Jsed - Mo der and La der Belt O elt Only U int Used - Restraint -	otor Vehi ap Belt U nly Used sed - Other - Forward - Rear Fr	sed	1-An pant 2-Ble 3-Bre 4-Bu 5-Co 6-Sh 7-Di: 8-Ab	oken Bor irns incussior lock izziness irasion/B	nes	8-Interna	Stomach I	1-Fatal 2-Incap 3-Nonir 4-Possi 5-No in INJURY 1-Office	acitating ncapacita ible Injur	ating y SOU vatio	
2-Eje	cte	PERSON TYPE 1-Driver, ROW SEAT POSITION 1 Row 1-Left (driver) 1 Row 3-Right 1 Row 4-Other 1 Row 5-Unknown				met	notorcy	cie Hel	met	. copic		10-Boos	ter Seat Restrain			10-C			10-Other			cal, Para	
Person	ı Ir	nclude	Drive	r, Pass	engers,	Bicyclis	t, and F	edestr	ians	Sex	DOD	Seat	Seat	Seat	Air Bag Deployed		, Restrair	nt Helme	t Injury	AMB Injury	CODES	- see coo	de s
Туре	T		ame, F	irst Na	me, Mi					(M,F,U		Pos Row	Pos	Pos Other	Deployed	-	1	Use	T	e Type	Area	Source	T
6	*									F	04/20/70	1	1	The state of the s		1	3		5		-	2	
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Haine	<u> </u>)ena	rtme	nt of	Publ	ic Saf	etv			and the state of t		Page	2		VIII-DON			For	m 13.1	20A Re	visod	lanua	

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Unit I	ID Hit F		VIN YS3EB59E	72302994)	Licensi *	Plate	9			Init Typ		r					
	o Insurance	NAIC	*	nsurance Cor	npany I	Name		•		1	nsuran:	ce Poli	cy Nun	nber				
, ,	Vehicle Make)			·		1	nicle Y	ear	1.	B) Vehic		or					
	SAAB Vehicle Confi	guration						WR o	GCW	R					francos			
Vahir	cle Has 9 or N	Aore Seat	e ?	HAZMAT	Placarr	tad 2	Ve	mad.	,000 lb ravel E		*************		- 26,00 nbound		harand	> than outhbo		0 lt
		☐ Ye	es No	V 11 (111) (11)	(commency	Yes No]East	bound		Westbo	ound		ot on F	Roadwa		Unk	nov
	Special Function of the Special F		le			Exempt Vehic	le Em	nergen	cy Veh	icle Re	espondi	ing to S	Scene '	?	Ye	s [□No	
Exte	nt of Damage	No	Damage O	bserved	✓Mi	nor Damage		F	unctio	nal Da	mage		Tov	wed Du	ie to D	isablin	g Dam	agı
	Most Damag	ed Area	······································				(U7	7) Mos	t Harm	ful Eve	ent							
	Rear Pre Crash Ac	tíons					(US) Con	tributin	g Circu	ımstan	ces - V	'ehicle			····		
	Stopped in Sequence of			***************************************				None	quence	ofEv	ents 2							
	, ,																	
U10) Sequence c	TEvents 3	<u>.</u>					•	quence									
V	Driver Bicy		Pedestrian tor	License	Numbe	er 🗸 Active	No	Licens	se F Suspen	ermit ded	State ME	Lice C	nse Cla	ass E	ndorse	ments	Rest	ict
ORIV	ER Last Nan			First Name	***************************************	٨		***************************************	Addres			1-	Cit	У		Sta		Zip
Citati	ion Number	Pending						ME* lation	1				Viola	ation 2				
AVVC	IER Last Nan	ne (skin if	same as Di	iver) First Na	me	MI	OV	VNER	Addres	ss			City			Stat	e 7	ip
k	Driver Distrac						* [ME*			of Cra	eh						*.
		*					1 -	Appa	rently	/ Nori	nal			******		·		
D3)	Driver Action	s at Time	of Crash 1				(D3	3) Driv	er Actio	ons at	Time of	f Crash	12					
********	nol Test Breath	Tes	t Not Given	Test R		Bloo		Alcoh	ol Test	Resul	Pendi	ng	Alcoho	ol BAC	Result			
<u> </u>	Test	Tes	t Not Given	Test R		Bloo		.ig Tes	t Resu	i de	□Po:	sitive	П	legativ	<u> </u>	Pen	dina	
D4)	L Non Motorist	Urine Location	Othe				(D:	5) Non	Motori	st Acti	on Prio							
06)	Non Motorist	Action at	Time of Cra	eh 1			/D#	S) Non	Motori	et Acti	on at T	ime of	Crash	2				
······			Time or are													····		
D7)	Pedestrian M	aneuvers					(DE	3) Bicy	clist M	aneuv	ers							
CEAT		E 1-Driver POSITION	-			er/Owner, 7-Bicy		Passen NT SYS	_	ner, 24-		own Op		25-Last VJURY A			r/Owne	
1-Fro 2-Sec	nt Row 1-Left cond Row 2-Mid	(driver) dle	1-Sleeper Se 2-Other Enclo	ction of Cab (truc sed Cargo Area	k)1-Not Ap 2-Not De	oplicable 1- eployed 2-	Not App None U	ilicable sed - Mo	tor Vehic	le Occup	1-Am ant 2-Ble	putation eding	1	-Face -Head		1-Fatal 2-Incap	acitating	
4-Fou	rd Row 3-Rig urth Row 4-Oth eer Row 5-Unl	er	3- Unenclose 4-Trailing Uni	d Cargo Area t lotor Vehicle Ext	4-Deplo	yed - Side 4.	Shoulde		p Belt Us nly Used	sed	4-Bur	iken Bon ns ncussion	4	-Neck -Back -Arm(s)			ncapacita ble Injury	
	known	3 IOWI I	(non-trailing to 6- Unknown		(knee, a	ir belt,) 6- yed - 7-	Restrair	nt Used -		Facing	6-Sho 7-Diz	ock ziness	6 7	i-Leg(s) '-Chest S	tomach	INJURY	' INFO S	οU
	Ejected	HELMET US	SE pliant Motorcyc	le Helmet	Combine 7-Deploy	yment - Curtain 9.	Child Re	estraint -	Rear Fa	cing correctly	9-Co		f Pain 9	I-Internal I-Entire B	ody	2-Indivi	er Observ dual Stat	eme
	cted Partially cted Totally	2-Other Hel 3-No Helme					-Booste -Child	er Seat Restraint	- Other		10-0	uiei	ı	0-Other		Observ		
ersor	Include Driver,	Passengers,	Bicyclist, and P	edestrians	Sex	DOB	Seat	Seat	Seat	Air Bag	Ejected	Restrain	t Helmet	Injury	AMB (CODES - Injury	- see coo	le si
Туре	Last Name, Fir	st Name, Mi			(M,F,U)	1	Pos Row	Pos	Pos Other	Deployed	Ljectou	System	Use	Degree	Туре	Area	Source	С
6	*				M	06/07/56	1	1			1	3		5			2	
					Vidake income	eponicion propriori della constanta della cons			With the particular of the control o	NAME OF THE PERSON OF THE PERS	-	-	and the second s		and decrease management and	A STATE OF THE STA		
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					-	Transcript de la constitución de			The state of the s			-			Para district			
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					elegation of the second	PRINCIPAL PRINCI			To the state of th	THE PROPERTY OF THE PROPERTY O		decomposition of the control of the				***************************************		The same of the sa
laine	e Departmen	t of Publi	c Safety			-	age 3	3					Forr	n 13:2	0A Re	vised .	Januai	y 2

2009-10620C

STATE OF MAINE CRASH REPORT

FIRST PAGE

	Reporting Agency ME0030500	Report Number 09-001521		rash Date /14/2009	Crash 07:49		ene Date 1/2009	At Sce 07:55	ne Time
	City or Town Portland	Street or Hi			Near	est Intersecting Str	eet		Off Road
	Direction FROM Nearest Intersectio. At Intersection North So	n to Crash Site outh East We		om Nearest In ☐Feet ☑M	1	ıde	Longitu	ıde	
1	Node 1 Node 2 18490 0	Measu 1849	rement Node	M 0 /s 7	enths	sted Speed Limit Millas Per Hour	Unknow N/A	homenned	t Posted 25 t Posted 45
	(F1) Type of Crash 2 - Rear End / Sideswipe			(F2) Type (4 - Four L		ection			
1	(F3) Weather Condition			(F4) Light (Condition		***************************************		
L	1 - Clear (F5) Road Grade			1 - Daylig (F6) Road		ndition			
L	1 - Level (F7) Traffic Control Device		·····	1 - Dry Traffic Con	trol Device	Operational (pre-c	rash)?		
1	1 - Traffic Signals (Stop & Go)					Yes	∭No	<u></u>	nk
1	(F8) Location of First Harmful Event			Total Dama	age over Ti	nreshold?	Yes []No	
	(F9) Contributing Circumstances - E	nvironment 1		(F9) Contri	buting Circ	umstances - Enviro	nment 2		
((F10) Contributing Circumstances -	Road 1		(F10) Cont	ributing Cir	cumstances -Road	2		
1.000	in or Near a Construction, Maintena	nce, or Utility Work Zo Yes			Workers F	resent?	□No	Пυ	nk
((F11) Location of the Crash related (Swowed	(F12) Type	of Work Z		hannarai	Secretaria	
I	Law Enforcement Present at Work 2	Zone? w Enforcement Vehicle	Only No	School Bus	Related? Directly Invo	olved Yes, Ind	irectly Involve	ed [No
***	transported to mercy for treatr	ment. no statement	rs		2461 congrs	vand d			
>	Mitness Last Name	First	MI	Address		City		State	Zip
V	Witness Last Name	First	MI	Address		City		State	Zip
1	Non Vehicle Property Damage Desc	cription				State City	or Town	Utilities	Private
F	Property Owner Name	Market Control of the		Address		City		State	Zįp
1	Non Vehicle Property Damage Desc	cription				State City	or Town	Utilities	Private
F	Property Owner Name	· · · · · · · · · · · · · · · · · · ·		Address		City		State	Zip
j	Reporting Officer john curran	Badge# 44	Report D 5/14/2		Approved SGT. HU	TCHESON		Approved 5/14/2 (09
N	laine Department of Public Safety	<i>-</i>	F	Page 1		Fo	rm 13:20A F	Revised J	anuary 2010

Last Modified: 5/14/2009 14:26

09-0								STA	TE C	F MAII	NE	CR/	4SH	IRE	PO	RT				UN	IIT P	AGF
Unit		Ē		t Rui	n?	VIN	3E46K0	7307056	 8	Licens *	e Plat	e	State ME	(U1) L			r					, () -
N	lo Ir	nsura	ance	→ N	IAIC			surance Cor		lame				<u> </u>		ce Poli		nber				
(U2) 67 -				ike			1		***************************************	***************************************		hicle Y	'ear			cle Col						
				nfigu	ratior							/WR o		/R							. 00 00	0.4
Vehi	cle	Has	9 0	r Ma	re Se	ats ?		HAZMAT	Placard	ed ?	Ve		,000 lt Fravel l	os. Directio		0.001 ·				> than outhbo		U IDS.
(115)	Sn	eria	Fu	netic	n Vel	Yes [No		- toward	res No	[_(_ Fr		tbound	nicle Re	Westbo				Roadwa	зу [Unk	nown
1-1	Vo	Spe	cial	Fu	nctio					Exempt Vehi	ule								Ye	s [No	
Exte							age Ob	served	✓ Mir	or Damage				nal Da			□ Tov	ved Du	ie to D	isablin	g Dam	age
(U6) 6 - F			ama	aged	Area						(U	7) Mos	st Harn	nful Eve	ent 							
(U8)					ons affic							9) Con - Non		ng Circu	ımstan	ces - V	'ehicle					
					Event									e of Ev	ents 2							
(U10) S	eque	ence	e of I	Event	s 3					(U	10) Se	quenc	e of Ev	ents 4							
	Dri	ver	Ві	cycle	e 🗍	Pede	estrian	License	Numbe	r 🗸 Active						1	nse Cla	1	ndorse	ments		riction
DRIV	 /EF				1 Оре	rator		* First Name			MI DI	RIVER	Susper Addre		ME	C	City	0 √	<u> </u>	Sta	0 ate 2	Zip
* Citat					Pendi	no[]				W		ME*	1				Viola	ation 2				
						- 100-0000				8. X (C4-1	£	···
*						ır same	e as Dny	er) First Na	ime 	MI	*	MNER					City			Stat	.e z	(ip
(D1)	Dri	ver I	Dist	racte	ed By									at Time y Nor i		ish						
(D3)	Dri	ver /	Actio	ons a	at Tin	e of Cr	ash 1				(D	3) Driv	er Acti	ons at	Time o	f Crash	12					
Alcol	_	Test	į		T Urine	est Not		Test R		Bloc		Alcoh	ol Test	Result	t Pendi	ng	Alcoho	I BAC	Result			
Drug					Пт	est Not	Given	Test R		Bloc		ug Tes	st Resu	ılt	ПРо	 sitive		legativ	re [Pen	ding	
(D4)	No	n Mo	otori	_ L	Urine ocatio	n at Tir	Other ne of Cr	ash			(D	5) Nor	Moto	ist Acti	on Pric	r to Cr	ash					
(D6)	No	n Me	otori	st A	ction	at Time	of Cras	h 1			(D	6) Nor	Moto	ist Acti	on at T	ime of	Crash	2				
(D7)	Pa	doet	rian	Mar	neuve	rs					(D	8) Rica	volist M	laneuv	ers.							***************************************
(07)								2 Dadaatiis	C Drive	r/Owner, 7-Bio	Ĺ					On	orotor 1	E Loot	Vnouvn	Oporate	ar/Owne	
SEA ⁻	TRO	W	SE	AT P	OSITIC	N SEA	T POSITIO	ON OTHER ion of Cab (truc	AIRBAG	DEPLOYED F	RESTRA	INT SYS		1161, 24-	INJU	RY TYPE	E 11	JURY / -Face			Y DEGRE	
1-Fro 2-Sed 3-Thi	cond ird R	d Row low	2-1 3-1	Middle Right	river)	2-Ott 3- Ur	ner Enclose nenclosed	ed Cargo Area Cargo Area	2-Not De 3-Deploy	ed - Front	-Should	Jsed - Mo er and La	ap Belt U		ant 2-Ble	eding oken Bon	2 es 3	-Head -Neck -Back		2-Incap 3-Nonir	acitating ncapacita	ating
4-For 5-Oth 6-Uni	her F	Row		Other Jnkno	wn	5-Ric	ailing Unit ting on Mo trailing uni	tor Vehicle Ext it)	5-Deploy (knee, air	ed - Other 5 r belt,) 6	i-Lap Be i-Restrai	er Belt O It Only U int Used	sed - Other		5-Co 6-Sh	ncussion ock	5 6	-Arm(s) -Leg(s)		5-No In		
EJEC 1-No	CTE	0			ELMET	USE	nknown	Lloimat	6-Deploy Combina 7-Deploy		-Child R	Restraint - Restraint -	- Rear Fa	acina	8-Ab	ziness rasion/Br mplaint o	uises 8	-Chest S -Internal -Entire E		1-Office	Y INFO S er Obsen idual Stat	vation
2-Eje 3-Eje	ectéc	i Parti	ally lly	2-	Other I	lelmet	Motorcycle	: nemet	, ,	1	0-Boost	er Seat Restrair			10-0	ther	1	0-Other	·	3-Medic Observa	cal, Para ation	medical
Persor	n In	clude	Drive	er, Pa	ssenge	rs, Bicycli	st, and Ped	destrians	Sex	DOB	Seat	Seat	Seat	Air Bag Deployed	Fiected	Restrain	t Helmet	Injury	Injury	CODES - Injury	lnj Info	Amb
Туре	7	ast Na	me,	First	Name,	Mi			(M,F,U)		Pos Row	Pos	Pos Other	Deployed	1	T	Use	Ī	Туре	Area	Source	Code
6	*								-	03/31/40	1	1	<u> </u>	and the second s	1	3	And the second	5			1	ļ
2	*								F	07/30/44	1	3	ļ		1	3		5			1	
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	T. Mariante						******											0	ne a management a m		The state of the s	

Comparison Com	cle Year (L	Unit Type Motorcycle Insurance Polic * J3) Vehicle Colc	cy Number		JNIT F	
(U2) Vehicle Make 66 - SUZUKI (U4) Vehicle Configuration Vehicle Has 9 or More Seats? Vehicle HazMAT Placarded? Vehicle Yes No Exempt Vehicle 1 - No Special Function Extent of Damage No Damage Observed Minor Damage (U6) Most Damaged Area 3 - Center Passenger Side (U9) October 10	8 1	*	cy Number			
Comparison Com	8 1	13) Vahicle Colr				
(U4) Vehicle Configuration Vehicle Has 9 or More Seats? Yes No Yes No Yes No Exempt Vehicle 1 - No Special Function Extent of Damage No Damage Observed Minor Damage (U6) Most Damaged Area 3 - Center Passenger Side (U9) Or Seats? HAZMAT Placarded? Yes No Exempt Vehicle Exempt Vehicle Minor Damage (U7) No Damage Observed Minor Damage (U8) Pre Crash Actions)r			
Vehicle Has 9 or More Seats? Vehicle Has 9 or More Seats? Yes No Yes No Yes No Exempt Vehicle 1 - No Special Function Extent of Damage No Damage Observed Minor Damage (U6) Most Damaged Area 3 - Center Passenger Side (U8) Pre Crash Actions	ALC OL CONNEC	0 - Red				
Yes No Yes No Exempt Vehicle Emer Extent of Damage No Damage Observed Minor Damage (U6) Most Damaged Area (U7) I 3 - Center Passenger Side (U8) Pre Crash Actions (U9) October (U9) October	< 10,000 lbs.		26,000 lbs.	***************************************	nan 26,00	0 lbs
1 - No Special Function Extent of Damage	cle Travel Directi Eastbound	tion ☑North Westbound		Sout	hbound	cnowi
(U6) Most Damaged Area 3 - Center Passenger Side (U8) Pre Crash Actions (U9) 0	rgency Vehicle F	Responding to S	icene ?	Yes	No	
3 - Center Passenger Side (U8) Pre Crash Actions (U9) (U9)	✓ Functional Da	amage [Towed D	ue to Disab	oling Dam	nage
(U8) Pre Crash Actions (U9) (Most Harmful Ex	vent			***************************************	
	Contributing Circ	cumstances - V	ehicle			
	Vone					
(U10) Sequence of Events 1 (U10)) Sequence of E	vents 2				
(U10) Sequence of Events 3 (U10)) Sequence of E	Events 4				-
✓ Driver Bicycle Pedestrian License Number ✓ Active No Li Last Known Operator *	icense Permit	State Licer	nse Class E	Endorseme [nts Rest	rictio
DRIVER Last Name First Name MI DRIV	VER Address		City		State .	Zip
* * ME Citation Number Pending Violat	E* ation 1		Violation 2	2		
	NER Address		City		State Z	Žip
* * ME	E*		City		naic z	.ip
	Condition at Tim Apparently No.					
	Driver Actions a		2			
Alcohol Test	Icohol Test Resu	Ilt Donding	Alcohol BAC	Result		
Breath Other Chemical Test (Not Field Sobriety or PB1)	Test Result		ATT PARTY.			
Urine Other	•	Positive	Negativ	ve	ending	
(D4) Non Motorist Location at Time of Crash (D5) I	Non Motorist Ac	ction Prior to Gra	ish			
(D6) Non Motorist Action at Time of Crash 1 (D6) I	Non Motorist Ac	ction at Time of	Crash 2		***************************************	
(D7) Pedestrian Maneuvers (D8) I	Bicyclist Maneur	vers				
PERSON TYPE 1-Driver, 2-Passenger, 3-Pedestrian, 6-Driver/Owner, 7-Bicycle, 8-Pas	assenger/Owner 24	4-I ast Known Ope	erator 25-Last	Known Ope	rator/Own	
SEAT ROW SEAT POSITION SEAT POSITION OTHER AIRBAG DEPLOYED RESTRAINT	r system	INJURY TYPE 1-Amputation		AREA INJ	URY DEGRI	
2-Second Row 2-Middle 2-Other Enclosed Cargo Area 2-Not Deployed 2-None Used 3-Third Row 3-Right 3-Unenclosed Cargo Area 3-Deployed - Front 3-Shoulder at	able d - Motor Vehicle Occi and Lap Belt Used	upant 2-Bleeding 3-Broken Bone	2-Head	2-Ir	ncapacitating Ionincapacit	
4-Fourth Row 4-Other 4-Trailing Unit 4-Deployed - Side 4-Shoulder B 5-Other Row 5-Unknown 5-Riding on Motor Vehicle Ext 5-Deployed - Other 5-Lap Belt Or		4-Burns 5-Concussion 6-Shock	4-Back 5-Arm(s)	5-N	Possible Injur Io Injury	У
Combination outside the contraction of the process	Used - Other traint - Forward Facing traint - Rear Facing		6-Leg(s) 7-Chest s sises 8-Interna	Stomach INJ	IURY INFO S	
1-Not Ejected 1-DOT-Compliant Motorcycle Helmet 7-Deployment - Curtain 9-Child Restr 10-Booster S 10-Booster S	traint - Used Incorrecti Seat	ly 9-Complaint of 10-Other	Pain 9-Entire if 10-Other	Body 2-Ir 3-N	ndividual Sta Medical, Para	tement
3-Ejected Totally 3-No Helmet 11-Child Res	estraint - Other			AMB COD	servation DES - see co	de she
Type (MEII) DOB Pos e	Seat Seat Air Ba Pos Pos Deploye	ag Ejected Restraint ved System	Helmet Injury Use Degree	Injury Inju	ury Inj Info ea Source	Am Cod
Last Name, First Name, MI Row	1 Other	1 2	3	T	5 3	T
10/07/33 1			· management	+		Consessed Consessed
			WITTE AND THE STATE OF THE STAT			
			CAS ARTHUR MAKE		wanti wa Antiya Alikasiya	Publisher supplements of
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Maine Department of Public Safety Page 3					1	

2009-11895C

STATE OF MAINE CRASH REPORT

FIRST PAGE

Reporting Agency ME0030500	Report Num 09-001632		Crash Date 5/27/2009	16:		At Scene Da 5/27/2009		Scene Time 32
City or Town Portland		eet or Highway ONGRESS ST		Ne	arest Interse	cting Street		Off Road
1	st Intersection to Crash Site North	e Distance	From Nearest	\$	titude	L	ongitude.	
Node 1 18490	Node 2	Measurement Noo	te Distance	to Scene I	Posted Spee	E1 ***	Tantager	Not Posted 25 Not Posted 45
(F1) Type of Crash 2 - Rear End / Sides	wine			of Location				
(F3) Weather Condition 4 - Rain				t Condition		····		
(F5) Road Grade			(F6) Roa	d Surface	Condition			
(F7) Traffic Control Dev	/ice		2 - Wet	ontrol Devi	ce Operation	al (pre-crash)?		
1 - Traffic Signals (S	Stop & Go)					Yes []No [Unk
(F8) Location of First Ha	armful Event		Total Dai	nage over	Threshold?	✓Yes	□No	
(F9) Contributing Circur	mstances - Environment 1		(F9) Con	iributing Ci	rcumstances	- Environment	2	
(F10) Contributing Circu	umstances - Road 1		(F10) Co	ntributing (Circumstance	s -Road 2		
In or Near a Construction	on, Maintenance, or Utility		Work Zoi	ne Workers	s Present?	☐Yes ☐]No [Unk
(F11) Location of the Ci	rash related to Work Zone	Non-record State Control of State Contro	(F12) Ty	e of Work	Zone	Valuation Valuation	ON ADDRESS	
Law Enforcement Prese		t Vehicle Only		us Related		Yes, Indirectly I	nvolved	Пио
				THE COL	WECTOR RD (=	CONGRESS ST	HUTCHINS DR	
Witness Last Name	First	***************************************	Mi Address		C	City	State	Zip
Witness Last Name	First		MI Address		C	ity	State	Zip
Non Vehicle Property D	amage Description				State	City or Tov	vn Utiliti	es Private
Property Owner Name			Address		C	ity	State	Zip
Non Vehicle Property D	amage Description				State	City or Tov	vn Utiliti	es Private
Property Owner Name			Address		C	City	State	Zip
Reporting Officer M. CLAVET			I ort Date 8/2009	Approve	ed By u tcheson		Approv 5/28	ved Date

Last Modified: 5/28/2009 06:56

09-0		umber 532				STA	TE (OF MAII	٧E	CRA	\SH	I RE	POI	RT				UN	IIT P	AG
Unit I			Run?	VIN	DN46D	04U8356	92	Licens	e Plat	e		(U1) U 1 - P a			ır			<u> </u>		
		urance	NAIC	180.681		ırance Coı		Name					nsuran		icy Nur	mber				
1,		icle Mal	 (e							hicle Y	ear	(U3) Vehic					· · · · · · · · · · · · · · · · · · ·		
99 -			figuratio	n			·			104 /WR or	r GCW		Grey,	Silve	r				······	
								***************************************		<u> </u>	,000 lb	S.	<u> </u>		- 26,0(> than		0 lbs
Vehic	cle F	las 9 or	More S	eats?]Yes []No	HAZMAT	· constant	led ? Yes \No	Ve		ravel (bound	Directio ✓	n Vestbo		hbound N	d lot on F		outhboay [ound Unk	now
			ction Ve Functi e					Exempt Vehi	de Er	nergen	cy Veh	nicle Re	spond	ing to	Scene	?	ΠYε	es [No	
		Damag	Ω	No Dama	age Obs	erved	✓ Mir	nor Damage		П	unctio	nal Dar	nage		To	wed Du	ue to D	isablin	g Dam	age
			ged Are	a				·····	(U	7) Mos	t Harm	ıful Eve	nt							
6 - R		Crash A	ctions						- la	9) Con	tributin	g Circu	mstan	ces - \	/ehicle		·····			
11 -	Sto	pped i	n traffi						1	- None	2									
(U10 _.) Sei	quence	of Even	ts 1					I(U	10) Sec	quence	e of Eve	ents 2							
(U10)) Se	quence	of Even	ts 3					(U	10) Se	quence	e of Eve	ents 4							
V	Drive		ycle []		strian _	License	Numbe	r 🗸 Active	No		se F Susper	Permit	State MN	Lice O	nse Cl	ass E		ements	Restr	ictic
	- Lungi	Last Na		Craw	j	First Name				RIVER					Cit			Sta		Zip
* Citati	ion N	lumber	Penc	ling 🔲						MN* olation	1				Viol	ation 2			***********	
AVO	JER	Last Na	me (ski	o if same	as Drive	er) First Na	ame	MI	0/	MNER	Addre	 SS			City			Stat	e Z	ip
*			acted By							MN*	dition :	at Time	of Cra	ch				·*	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			•						1	- Appa	arenti	y Norn	nal							
(D3)	Drive	er Actio	ns at Tir	me of Cra	ish 1				(D	3) Drive	er Acti	ons at [*]	rime o	f Crasi	n 2					
Alcoh	hol T Brea		Urine	Test Not (Test R		Bloc		Alcoho	ol Test	Result	Pendi	ng	Alcoh	ol BAC	Resul	t		
Drug				Fest Not	Given	Test R		Bloc		ug Tes	t Resu	ılt	Po	sitive	 	Vegativ	e [Pen	ding	
(D4)	Non	Motoris	Urine t Locati	on at Tim	Other e of Cra	sh	.,-,,		(D	5) Non	Motor	ist Actio	on Prio	r to Cr	ash					
(D6)	Non	Motoris	t Action	at Time	of Crash	1			- I(D	6) Non	Motor	ist Actio	on at T	ime of	Crash	2				
							····		- (5)	0) Diag										
(D7)	Ped	estrian i	Maneuv	ers 					(L)	g) Ricy	CHST IVI	aneuve	rs							
SEAT	PEF ROV		/PE 1-Dr	ON SEAT	POSITION	OTHER	AIRBAG	er/Owner, 7-Bio DEPLOYED F	•	-Passen INT SYS	~	ner, 24-l		own Op Ry Typi		25-Last NJURY A		•	r/Owne	
1-Fro 2-Sec	ont Rov cond F	w 1-Le Row 2-M	eft (driver) iddle	1-Slee 2-Oth	eper Section er Enclose	n of Cab (truc d Cargo Area	2-Not De	pplicable 1 eployed 2	-Not Ap	plicable Jsed - Mo	tor Vehic	cle Occup	ant 2-Ble	putation eding	2	1-Face 2-Head			acitating	
4-Fot	rd Rov urth Ro ner Ro	ow 4-0		4-Troi	enclosed C ling Unit	argo Area r Vehicle Ext	4-Deploy	ed - Side	-Should	er and La er Belt Or It Only Us	nly Used		4-Bu	ken Bor ms ncussior	4	3-Neck 4-Back 5-Arm(s)			icapacita ble Injury iurv	
	known		III. IOWII	(non-t	railing unit) known	T VOINGIO EXC	(knee, a	r peit,) 6 /ed - 7	-Restrai	nt Used - estraint -	Other	f Facing	6-Sh	ock ziness	6	3-Leg(s) 7-Chest S		INJURY	'INFO S	
	t Eject		HELME 1-DOT-			Helmet	Combina 7-Deploy	ation g ment - Curtain g	-Child R -Child R	estraint - estraint -	Rear Fa	icina	9-Co	rasion/Bi mplaint o	of Pain 9	3-Internal 9-Entire B		2-Indivi	r Observ dual Stat	emer
	cted F	artially otally	2-Other 3-No He						0-Boost 1-Child	er Seat Restraini	t - Other		10-0	rner	·	10-Other		Observ	al, Para ation	nea
Persor	Inch	ude Driver	, Passeng	ers, Bicyclis	t, and Pede	strians	Sex		Seat	Seat	Seat	Air Bag		Restrair	nt Helmel	Injury	AMB Injury	CODES Injury	see coo	le sh Aı
Type		t Name, F	irst Name	Mi			(M,F,U)	DOB	Pos Row	Pos	Pos Other	Air Bag Deployed	⊏jected	System	Use	1	Туре	Area	Source	Cc
6	*						М	03/10/81	1	1			1	3	Proposition de la constant de la con	5	<u> </u>	-	2	
2	*			,			М	05/21/83	1	3		A PRINCIPLE OF THE PRIN	1	3	The second secon	5			2	
2	*						F	09/06/86	2	3			1	3	Value of the latest of the lat	5		-	2	
	To a supplementary		vices .				5	THE CONTRACTOR OF THE CONTRACT												
	-							enclus de constantina					- Partition and the same of th		-	-				
		narimo	nt of Di	ıblic Saf	otv			decision	Page	2	<u> </u>			<u> </u>	For	m 13:2	OA Ro	visod	lanua	

09-001632	K13T61J165825 [Insurance Company	License	Plate	: State	(111) [nit Tyr							AGI
U2) Vehicle Make	Insurance Company	1		ME	1 - Pa			r					
()	*	Name) 	nsuran	ce Poli	cy Nun	nber			 	
11 - CHEVROLET			Vehicle	Year		3) Vehic							
(U4)Vehicle Configuration			2001	or GCW		Grey,	Silve	<u>r</u>					
(04) venicle Comiguration				10,000 lb		. 🔲 1	0,001	- 26,00	0 lbs.		> than	26,00) lbs
	No HAZMAT Placa	rded ?]Yes	E	Travel I	V	Westbo	ound	havened	ot on F	∏S Roadwa	outhbo y [und Unk	now
(U5) Special Function Vehicle 1 - No Special Function	Land to the state of the state	Exempt Vehicle	Emerg	ency Veł	nicle Re	espond	ing to \$	Scene '	?	Ye	s [□No	
Extent of Damage No Damag	ge Observed 🗸 N	linor Damage]Functio	nal Dai	nage		□To\	wed Du	ie to D	sablin	g Dam	age
(U6) Most Damaged Area 1 - Front Passenger Corner			(U7) M	ost Harn	nful Eve	ent							
(U8) Pre Crash Actions 1 - Following roadway			(U9) C	ontributir one	ng Circu	ımstan	ces - V	'ehicle					
(U10) Sequence of Events 1			(U10)	Sequenc	e of Ev	ents 2							***************************************
(U10) Sequence of Events 3			(U10) :	Sequenc	e of Ev	ents 4							***************************************
✓ Driver Bicycle Pedes Last Known Operator	trian License Numb	er 🗸 Active	No Lic	ense [] I Susper		State ME	Lice C	nse Cla	ass E	ndorse	ments	Restr	ictio
DRIVER Last Name	First Name	MI	DRIVE * ME*	R Addre	1			City			Sta	1	Zip
Citation Number Pending			Violatio					Viola	ation 2				
OWNER Last Name (skip if same a	as Driver) First Name	MI	OWNE * ME*	R Addre	ss			City		•••••	Stat	e Z	ip
(D1) Driver Distracted By			(D2) C	ondition parentl			sh						
(D3) Driver Actions at Time of Cras	sh 1			river Acti			f Crash	12		***************************************			
Alcohol Test Test Not G	iven Test Refused Other Chemical Test (No		Alc	ohol Test	Result	: Pendi	ng	Alcoho	ol BAC	Result			
Drug Test	iven Test Refused	d Blood	Drug 7	est Resu	jlį	□Ро	sitive		legativ	e []Pen	ding	***************************************
(D4) Non Motorist Location at Time	of Crash		(D5) N	on Motor	ist Acti	on Prio	r to Cr	ash	······································				
(D6) Non Motorist Action at Time o	f Crash 1		(D6) N	on Motor	ist Acti	on at T	ime of	Crash	2				
(D7) Pedestrian Maneuvers			(D8) B	icyclist N	laneuve	ers							
PERSON TYPE 1-Driver, 2-Pass	enger, 3-Pedestrian, 6-Driv	ver/Owner, 7-Bicycl	e, 8-Pass	enger/Ow	ner, 24-	Last Kn	own Op	erator 2	25-Last	Known	Operato	r/Owne	r
SEAT ROW SEAT POSITION SEAT F 1-Front Row 1-Left (driver) 1-Sleep	er Section of Cab (truck)1-Not	Applicable 1_N/	STRAINT S	le		1-Am	RY TYPE	1	NJURY A -Face	REA	1-Fatal	DEGRE	£
2-Second Row 2-Middle 2-Other	Enclosed Cargo Area 2-NOT Inclosed Cargo Area 3-Depl	oyed - Front 3-St	noulder and	Motor Vehi	sed	3-Bro	oken Bon	es 3	-Head -Neck		3-Nonin	acitating capacita	ting
	g on Motor Vehicle Ext 5-Depl	oyed - Other 5-La	p Belt Onl		I		ncussion	5	-Back -Arm(s)		4-Possi 5-No In	ole Injury ury	
6- Unkn	nown 6-Depl	oyed - 7-Cf		nt - Forward			ziness	7	-Leg(s) -Chest S			INFO S	
EJECTED HELMET USE 1-Not Ejected 1-DOT-Compliant Mc	Combi otorcycle Helmet 7-Depl	oyment - Curtain 9-Cl	hild Restra		acing correctly			f Pain 9	I-Internal I-Entire E 0-Other		2-Indivi	r Observ dual Stat al, Parar	emer
2-Ejected Partially 2-Other Helmet 3-Ejected Totally 3-No Helmet			Booster Se Child Resti	at aint - Other		10-0	u ici	•	0-Outer		Observa	ai, Farai ation	neur
Person Include Driver, Passengers, Bicyclist,	and Pedestrians		Seat co	. Seat	A . D	·	Dantonio				CODES -		
Type Last Name, First Name, Mi	(M,F,l	n DOB	Pos Po Row	at Pos Other	Air Bag Deployed	Ejected	System	Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Ar Co
1 *	F	04/09/67	1 1	- Maria	The same of the sa	1	3		5	-		2	
				The state of the s				and the same of th			The state of the s		
		A Comment of the Comm		and the same of th				To the second se			the second secon	***************************************	
						and a few section of the section of	and the same of th	and the same of th			THE RESIDENCE OF THE PERSON OF		
		And the second s		THE CONTRACTOR OF THE CONTRACT				Control of the Contro					
Maine Department of Public Safe	ty	 Pa	age 3			1	1	For	m 13:2	OA Re	vised .	lanuar	y 20

2009-15014C

STATE OF MAINE CRASH REPORT

FIRST PAGE

	Reporting Agency ME0030500		Report Num 09-001931			Crash D 6/30/ 2			rash Time 6:17	At Scer 6/30/		At Sce 17:08	ne Time
	City or Town Portland			eet or High ONGRESS					Nearest Inte	rsecting Stree	•		Off Road
1	Direction FROM Nearest ☐At Intersection ☐ No			January .	Distance		earest Ir		Latitude		Longitud	le	
		Node 2	harannad	Canadagar	ment Node	e Dis	tance to		Posted Sp	eed Limit [Unknown N/A	princerng	t Posted 25 t Posted 45
	(F1) Type of Crash				· · · · · · · · · · · · · · · · · · ·	(F2	2) Type	of Loca	ation	0. 1.10.00,41	114//		11 03(04 43
1-	2 - Rear End / Sidesw (F3) Weather Condition	ipe					+) Light		tersection on	· ····			
į.	1 - Clear (F5) Road Grade						- Daylig		e Condition		***************************************		
	1 - Level				4	1 -	- Dry						
	(F7) Traffic Control Device 1 - Traffic Signals (Sto					Tra	affic Cor	ntrol De	evice Operat	ional (pre-cra Yes	sh)? No	<u> </u>	nk
+	(F8) Location of First Har					To	tal Dam	age ov	er Threshold	1? V Y	es 🗍	No	***************************************
	(F9) Contributing Circums	stances - Er	nvironment 1			(FS	9) Contr	ibuting	Circumstand	ces - Environr			
	(F10) Contributing Circum	nstances - F	Road 1			(F1	10) Cont	tributin	g Circumstar	nces -Road 2			
	In or Near a Construction	, Maintenar	nce, or Utility	Work Zone ✓ No		nk Wo	ork Zone	∋ Work	ers Present?	Yes	 ПNo	——— Пи	nk
-	(F11) Location of the Cras	sh related to		<u> </u>			12) Туре	e of Wo	ork Zone	<u></u>	<u> </u>		
	Law Enforcement Presen		one? V Enforcemer	ıt Vehicle ∩	inly [7]	No Sc	hool Bu Yes. I		ted?	Yes Indire	ctíy Involved		No
l	NARRATIVE VEH 1 STOPPED IN TR	horamoni .	·····			CF	RASH D			mod '		<u> </u>	
									CONNECTOR RD		нитсянк	DR	
-	Witness Last Name		First		N	il Ad	dress	······································		City	S	tate	Zip
1	Witness Last Name		First		N	il Ad	dress	*******		City	S	tate	Zip
1	Non Vehicle Property Dar	nage Desci	ription						Stat	e City o	r Town	Utilities	Private
	Property Owner Name		***************************************			Ad	dress			City	S	itate	Zip
	Non Vehicle Property Dar	mage Desci	ription						Stat	e City o	r Town	Utilities	Private
1	Property Owner Name					Ad	dress			City	S	itate	Zip
	Reporting Officer M. CLAVET			Badge#	Repor	 t Date 2009			oved By Hutcheso n			pproved /1/200	
	laine Department of Pu	blic Safety	'	<u> </u>	1-1-1	Page 1	 1	1-30					anuary 2010

Last Modified: 7/1/2009 07:52

09-001931 ST	ATE OF MAINI	CRASH F	REPORT	U	IIT PAGI
Unit ID Hit Run? VIN 138HG48K27C6264	License F		1) Unit Type - (Sport) Utility Vehi		
	ompany Name	1 1 -	Insurance Policy Nur		
(U2) Vehicle Make			(U3) Vehicle Color		***************************************
33 - JEEP (U4)Vehicle Configuration	***************************************	2007 GVWR or GCWR	4 - Blue		
	77 F33	< 10,000 lbs.	10,001 - 26,00		26,000 lbs
Vehicle Has 9 or More Seats? HAZMA	T Placarded ?	Samuel	✓ Westbound N	ot on Roadway	ouna Unknowr
(U5) Special Function Vehicle 1 - No Special Function	Exempt Vehicle	Emergency Vehicle	e Responding to Scene	? Yes	∏No
Extent of Damage	✓ Minor Damage	Functional	DamageTo	wed Due to Disablir	g Damage
(U6) Most Damaged Area 6 - Rear		(U7) Most Harmful	Event		
(U8) Pre Crash Actions			Circumstances - Vehicle		
11 - Stopped in traffic (U10) Sequence of Events 1		1 - None (U10) Sequence of	f Events 2		
(U10) Sequence of Events 3		(U10) Sequence of			
✓ Driver Bicycle Pedestrian Licens Last Known Operator *	se Number 🗸 Active 🗌	No License Perr Suspended		ass Endorsements 0	Restriction 0
DRIVER Last Name First Nar	ne MI	DRIVER Address * ME*	Cit	y Sta	ite Zip
Citation Number Pending		Violation 1	Viol	ation 2	
OWNER Last Name (skip if same as Driver) First	Name MI	OWNER Address	City	Sta	te Zip
(D1) Driver Distracted By		* ME* (D2) Condition at T			
(D3) Driver Actions at Time of Crash 1		1 - Apparently N (D3) Driver Actions	Normal sat Time of Crash 2		
Alcohol Test	Refused Blood		Alcoh	ol BAC Result	
Breath Urine Other Chemical	Test (Not Field Sobriety or PBT	Alcohol Test Re	esult Pending		
Urine Other	Refused Blood	Drug Test Result	Instance Investor	Negative Pen	ding
(D4) Non Motorist Location at Time of Crash		(D5) Non Motorist /	Action Prior to Crash		
(D6) Non Motorist Action at Time of Crash 1	***************************************	(D6) Non Motorist A	Action at Time of Crash	2	
(D7) Pedestrian Maneuvers		(D8) Bicyclist Mane	euvers		
PERSON TYPE 1-Driver, 2-Passenger, 3-Pedestr	an, 6-Driver/Owner, 7-Bicycle	, 8-Passenger/Owner,	, 24-Last Known Operator 2	25-Last Known Operate	or/Owner
SEAT ROW SEAT POSITION SEAT POSITION OTHER 1-Front Row 1-Left (driver) 1-Sleeper Section of Cab (to	uck1-Not Applicable 1-No	RAINT SYSTEM Applicable	1-Amputation 1	I-Face 1-Fatal	
2-Second Row 2-Middle 2-Other Enclosed Cargo An 3-Third Row 3-Right 3- Unenclosed Cargo Area	ea 2-Not Deployed 2-No 3-Deployed - Front 3-Sh	ne Used - Motor Vehicle O Hulder and Lap Belt Used	3-Broken Bones 3	3-Neck 3-Noni	pacitating ncapacitating ible Injury
4-Fourth Row 4-Other 4-Trailing Unit 5-Other Row 5-Unknown 5-Riding on Motor Vehicle E 6-Unknown (non-trailing unit)	xt 5-Deployed - Other 5-La	ulder Belt Only Used Belt Only Used traint Used - Other	5-Concussion 5	5-Arm(s) 5-No Ir 5-Leg(s)	
6- Unknown	6-Deployed - 7-Ch	d Restraint - Forward Fac d Restraint - Rear Facing	cing 7-Dizziness 7	7-Chest Stomach INJUR	Y INFO SOURC
1-Not Ejected 1-DOT-Compliant Motorcycle Helmet	7-Deployment - Curtain 9-Ch	d Restraint - Used Incorre	ectly 9-Complaint of Pain 9	3-Entire Body 2-Indiv	idual Statement cal, Paramedica
2-Ejected Partially 2-Other Helmet 3-Ejected Totally 3-No Helmet		ild Restraint - Other		Observ	ration
Person Include Driver, Passengers, Bicyclist, and Pedestrians	Sex SOR	eat Seat Seat Air	- Rag Restraint Helmet		- see code shee
Type Last Name, First Name, Mi	(MEII) DOB F	os Pos Pos Depl Ow Other	Bag Ejected Restraint Helmet bloyed System Use	Degree Type Area	Source Cod
6 *	F 07/01/74	1	1 3	5	2
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		A STATE OF THE STA			
Maine Department of Public Safety	Pa	ge 2	For	m 13:20A Revised	January 20

09-001931	STATE OF MA	NE CRA	SH RE	POR1	-			UN	IT P	٩G
Unit ID Hit Run? VIN 5FFN	Licer RL38216B12990 *		late (U1) (FL 3 - P	Jnit Type assenger	Van					·····
☐ No Insurance NAIC	Insurance Company Name	***************************************		insurance f	Policy Nur	mber				
(U2) Vehicle Make		Vehicle Yea		3) Vehicle						
26 - HONDA (U4)Vehicle Configuration		2000 GVWR or 0		- Grey, Sil	ver					
(04) verice configuration		< 10,0		10.0	01 - 26,00	00 lbs.	: []	> than :	26,000) lbs
Vehicle Has 9 or More Seats ?	HAZMAT Placarded ? No Yes No	harrowed	ound 🔽	Westbound		lot on F	∏Sc Roadwa	outhbou y [und]Unkr	10W
(U5) Special Function Vehicle 1 - No Special Function	Exempt Ver	icle Emergency	/ Vehicle R	esponding	to Scene	?	Yes	3 <u>[</u>	No	
Extent of Damage No Dama	ge Observed	ПЕ	nctional Da	mage	Пто	wed Du	ie to Di:	sabling	Dama	age
(U6) Most Damaged Area 12 - Front		(U7) Most I	Harmful Ev	ent						
(U8) Pre Crash Actions 1 - Following roadway		(U9) Contri	buting Circ	umstances	- Vehicle					
(U10) Sequence of Events 1		(U10) Sequ	ience of Ev	rents 2	***************************************					
(U10) Sequence of Events 3		(U10) Sequ	ience of Ev	rents 4		***************************************	. 			
✓ Driver Bicycle Pedes	trian License Number Activ			State L	icense Cl	ass E	ndorser		Restri	icti
DRIVER Last Name	First Name	MI DRIVER A		1	Cit			State	L	ip
Citation Number Pending		Violation 1	····	····	Viol	ation 2				
OWNER Last Name (skip if same	as Driver) First Name MI	OWNER A	ddress	 	City			State	e Zi	p
(D1) Driver Distracted By		(D2) Condi 1 - Appar								
(D3) Driver Actions at Time of Cra	sh 1	(D3) Driver			ash 2					
Alcohol Test Test Not C	Siven Test Refused Blo Other Chemical Test (Not Field Sobriety or		Test Resul	t Pending	Alcoh	ol BAC	Result			
Drug Test Test Not C			Result	Positiv	e []	Vegativ	e [Pend	ing	
(D4) Non Motorist Location at Time		(D5) Non N	Notorist Act	ion Prior to	Crash				~~~	
(D6) Non Motorist Action at Time of	of Crash 1	(D6) Non N	Notorist Act	ion at Time	of Crash	2				
(D7) Pedestrian Maneuvers		(D8) Bicycl	ist Maneuv	ers						
PERSON TYPE 1-Driver, 2-Pas	senger, 3-Pedestrian, 6-Driver/Owner, 7-B	cycle, 8-Passenge	er/Owner, 24	-Last Known	Operator :	25-Last I	Known C	perator	/Owner	r
SEAT ROW SEAT POSITION SEAT 1-Front Row 1-Left (driver) 1-Slee	POSITION OTHER AIRBAG DEPLOYED per Section of Cab (truck)1-Not Applicable	RESTRAINT SYSTE	М	INJURY 1 1-Amputa		NJURY A 1-Face		INJURY	DEGRE	E
2-Second Row 2-Middle 2-Othe	r Enclosed Cargo Area 2-Not Deployed nclosed Cargo Area 3-Deployed - Front	2-None Used - Motor 3-Shoulder and Lap	r Vehicle Occu Belt Used	pant 2-Bleedin 3-Broken	g 2	2-Head 3-Neck		2-Incapa 3-Noninc	citating capacitat	ting
4-Fourth Row 4-Other 4-Trail	ng Unit 4-Deployed - Side a on Motor Vehicle Ext 5-Deployed - Other	4-Shoulder Belt Only 5-Lap Belt Only Used	Used	4-Burns 5-Concus	sion :	4-Back 5-Arm(s)		4-Possib 5-No Inju		
	ailing unit) (knee, air belt,) nown 6-Deployed -	6-Restraint Used - O 7-Child Restraint - Fo	ther orward Facing	6-Shock 7-Dizzine	ss 7	3-Leg(s) 7-Chest S		INJURY		
EJECTED HELMET USE 1-Not Ejected 1-DOT-Compliant M	Combination 7-Deployment - Curtain	8-Child Restraint - R 9-Child Restraint - U	ear Facing sed Incorrectly	9-Compla	int of Pain		ody	1-Officer 2-Individu	ual State	eme
2-Ejected Partially 2-Other Helmet 3-No Helmet		10-Booster Seat 11-Child Restraint -	Other	10-Other		10-Other		3-Medica Observat		nec
Rerson Include Driver, Passengers, Bicyclist	and Pedestrians	Seat Seat	Seat Air Bac					ODES -		
Person Include Driver, Passengers, Bicyclist Type Last Name, First Name, Mi	Sex DOB (M,F,U)	Pos Pos	Pos Deploye Other	Ejected Res	tem Use	t Injury Degree	Injury Type		Inj Info Source	Ć
6 *	M 02/28/72	2 1 1	ele por ces esta ella ella ella ella ella ella ella el	1 :	3	5	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -		2	
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					_	-				
Maine Department of Public Safe	ety	Page 3			For	m 13:2	0A Rev	ised J	anuar	y 2
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2009-17958C

STATE OF MAINE CRASH REPORT

FIRST PAGE

Reporting Agency ME0030500		Report Num 09-002336)	8/	ash Date ′11/2009	Crash Time 16:39	At Scene 8/11/2	2009	At Scer 17:16	
City or Town Portland		Str C0	eet or Highwa ONGRESS S	Ť		Nearest Inters	ecting Street			Off Road
Direction FROM Nea		n to Crash Site outh ☐East	yearness .	istance Fro	om Nearest Int ∏Feet ☑ Mi			Longitud	le	
Node 1 18490	Node 2 0		Measureme	ent Node	MOss T	Scene Posted Spectoralities 30	<u></u>]Unknown]N/A		t Posted 2: t Posted 4:
(F1) Type of Crash 2 - Rear End / Sid	eswipe				(F2) Type o	of Location .eg Intersection				
(F3) Weather Conditi					(F4) Light (Condition				
4 - Rain (F5) Road Grade					(F6) Road	Surface Condition				
1 - Level (F7) Traffic Control D	evice				2 - Wet Traffic Con	trol Device Operatio	nal (pre-cras	h)?	·····	
1 - Traffic Signals	(Stop & Go)		,				Yes	□No	Uı	nk
(F8) Location of First	Harmiui Event					age over Threshold?	✓Ye		No	
(F9) Contributing Circ	cumstances - E	nvironment 1			(F9) Contril	buting Circumstance	s - Environm	ient 2		
(F10) Contributing Ci	rcumstances -	Road 1			(F10) Conti	ributing Circumstand	es -Road 2			
In or Near a Construc	ction, Maintena	nce, or Utility	Work Zone? ✓ No	∏Unk		Workers Present?	∏Yes	ПNо	Πυι	nk
(F11) Location of the	Crash related t	hand I		lonand		of Work Zone	Land 1	Land.	hi	
Law Enforcement Pro	esent at Work 2	Zone? w Enforcemer	y Vahiala Oal	 v ПNo	School Bus	s Related? Directly Involved	TYes, Indired	thy Involved	4 [7]	No
	ociii Lucai	- Littorocino	it somore on	3	CRASH DI	· · · · · · · · · · · · · · · · · · ·] , 00,			
NARRATIVE VEH 1 SLOWED IN VEH 2 DID NOT SI TRAFFIC. VEH 2 S	OW DOWN V	VHEN VEH 1					WISE BUSINE	ss (Å)		
NARRATIVE VEH 1 SLOWED IN VEH 2 DID NOT SI	OW DOWN V	VHEN VEH 1				CONNEC	FORMS Solution Co	SS N N N N N N N N N N N N N N N N N N		
NARRATIVE VEH 1 SLOWED IN VEH 2 DID NOT SI	OW DOWN V	VHEN VEH 1			Address	CONNEC	FORMS Solution Co	DNGRESS ST	State	Zip
NARRATIVE VEH 1 SLOWED IN VEH 2 DID NOT SI TRAFFIC. VEH 2 S	OW DOWN V	VHEN VEH 1		OOWN IN	Address	CONNEC	TOR FO	DNGRESS ST	State	Zip Zip
NARRATIVE VEH 1 SLOWED IN VEH 2 DID NOT SI TRAFFIC. VEH 2 S	OW DOWN V	First		MI		CONNEC	INS DR FORMS COTOR RD	DNGRESS ST		Zip
NARRATIVE VEH 1 SLOWED IN VEH 2 DID NOT SI TRAFFIC. VEH 2 S Witness Last Name Witness Last Name	Damage Desc	First		MI		CONNEC	City	DNGRESS ST	State	Zip
NARRATIVE VEH 1 SLOWED IN VEH 2 DID NOT SI TRAFFIC. VEH 2 S Witness Last Name Witness Last Name Non Vehicle Property	Damage Desc	First First cription		MI	Address	CONNEC	City City or	Congress st	State Utilities	Zip Privat
Witness Last Name Witness Last Name Witness Last Name Won Vehicle Property Property Owner Nam	Damage Description	First First Cription		MI	Address	State	City City City City City	Dongress st	State Utilities State	Zip Privat Zip
NARRATIVE VEH 1 SLOWED IN VEH 2 DID NOT SI TRAFFIC. VEH 2 S Witness Last Name Witness Last Name Non Vehicle Property Property Owner Nam Non Vehicle Property	Damage Description	First First Cription		MI	Address Address Address	State	City City City City City City City Crity	Town A	Otate Utilities State Utilities	Zip Privat Zip Privat Zip Date

Last Modified: 8/12/2009 07:33

09-002336	er		STA	TE C	F MAII	VE (CRA	\SH	RE	POF	₹1				UN	IIT P	ΑG
Unit ID	Hit Run?	VIN 1N4CL21E	69C10840	8	Licens *	e Plate	e	State ME	(U1) U 1 - P a			r					
☐ No Insura	nce NAIC	!n	nsurance Co	mpany N	ame				 	nsuran	ce Poli	cy Nur	nber				
(U2) Vehicle						1	hicle Y	ear) Vehic		or					
50 - NISSA (U4)Vehicle (***************************************		G۱	/WR or		R								
Vehicle Has	or More Se	ats 2	HAZMAT	Placard	ed ?		< 10. hicle T	***************************************	s. Directio		0.001 - 7 North				> than outhbo		O lbs
		Yes No			es No			bound		Nestbo	und		ot on F	£		Unk	now
(U5) Special 1 - No Spec					Exempt Vehic	ole En	nergen	cy ver	icle Re	sponai	ng to s	scene		Ye	s [□No	
Extent of Dar	nageN	lo Damage Ol	pserved	✓ Min	or Damage		□F	unctio	nal Dar	nage		□To\	wed Du	ie to D	isablin	g Dam	age
(U6) Most Da	maged Area					(U	7) Mos	t Harm	ful Eve	nt							
6 - Rear (U8) Pre Cra	h Actions								g Circu	ımstanı	ces - V	'ehicle					
10 - Slowin (U10) Seguei		. 1					None		e of Eve	ents 2							
· · ·						<u> </u>										*************	
(U10) Seque	ice of Events	; 3				(0	10) Se	quence	e of Eve	ents 4							
✓ Driver	Bicycle Known Oper	Pedestrian	License	Number	✓ Active	□No		se [] F Suspen		State ME	Lice C	nse Cl	ass E		ments	Restr 0	icti
DRIVER Last		: (1:01	First Name)			RIVER				1-	Cit	y -	······································	Sta	1	Zip
* Citation Num	ber Pendir	ng 🔲					ME*	1				Viol	ation 2				
OWNER Las	Name (skip	if same as Dr	iver) First Na	ame	MI	OV	WNER	Addre:	SS.			City		·	Stat	e Z	ip
*	` .					*	ME*		at Time	of Cza	ah.						
(D1) Driver D	stracted By					1	- Appa	rentl	y Norr	nal			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
(D3) Driver A	ctions at Time	e of Crash 1				(D	3) Driv	er Acti	ons at	Time of	f Crash	12					
Alcohol Test	T∈	est Not Given	Test R	Refused	□Bloc	11	Alcoh	ol Test	Result	Pendi	ng	Alcoho	I BAC	Result	***************************************		
Drug Test		est Not Given	Test R	Refused	Bloc		ug Tes	t Resu	ılt	———	sitive		legativ	е Г	Pend	dina	
(D4) Non Mo	Urine orist Location	Othe				(D	5) Non	Motor	ist Acti								
				·		- 10	E) Non	Matar	ist Acti	on of T	imo of	Crach	2				····
(Db) Nan Mo	onst Action a	at Time of Cra	.Sn 1			(0	o) 14011	IVIOTOI	ISLACII	onaci	mie oi	Clasii					
(D7) Pedestri	an Maneuver	rs				(D	8) Bicy	clist M	aneuve	ers							
		er, 2-Passenge							ner, 24-							r/Owne	
SEAT ROW 1-Front Row 2-Second Row	SEAT POSITION 1-Left (driver) 2-Middle	1-Sleeper Sec	ION OTHER ction of Cab (truc osed Cargo Area	ck)1-Not App	olicable 1	-Not Ant	INT SYS' plicable Ised - Mo		cle Occup	1-Am	RY TYPE putation eding	1	NJURY A -Face !-Head	KEA	1-Fatal	acitating	
3-Third Row 4-Fourth Row	3-Right 4-Other	3- Unenclosed 4-Trailing Unit	d Cargo Area t	3-Deploy 4-Deploy	ed - Front 3 ed - Side 2	-Should -Should	er and La er Belt O	ip Belt U nly Used	sed	3-Bro 4-Bu	ns Bon	4	-Neck -Back		4-Possi	capacita ble Injury	
5-Other Row 6-Unknown	5-Unknown	(non-trailing u	flotor Vehicle Ext unit)	5-Deploy (knee, air 6-Deploy	belt,)	-Restrai	It Only Us nt Used -	Other	. Casina	6-Sh	ncussion ock ziness	6	i-Arm(s) i-Leg(s) '-Chest S	tomach	5-No Inj	iury 'INFO S	:OUI
EJECTED 1-Not Ejected	HELMET	6- Unknown USE		Combina		-Child R	testraint - testraint -	Rear Fa	cina	8-Abi	rasion/Br	uises 8	I-Internal I-Entire B		1-Office	r Observ dual Stat	/atio
2-Ejected Partia 3-Ejected Totall	2-Other H		ae Heimet		1	0-Boost	er Seat Restrain		concour	10-0			0-Other	•	3-Medio	al, Para ation	med
Include		rs, Bicyclist, and P	Pedestrians			Seat		Seat							CODES		
Typo	ne. First Name, I			Sex (M,F,U)	DOB	Pos Row	Seat Pos	Pos Other	Air Bag Deployed	Ejected	System	Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	C
6 *				М	05/14/69	1	1		-	1	3		5	**************************************		2	THE PARTY OF THE P
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Unit II]H	it R	un?		VIN 3C4F	T48E	325T	55874			Licens	e Plat	e	State ME	(U1) L 2 - (S			/ Vehi	cle				
□No	o Ir	ารน	rand	e	NAI	3		 *		ince Ci	ompany	y Na	me		,,,		k	nsuran	ce Poli	cy Nur	nber				
(U2) \										······	~				hicle Y	ear) Vehic	cle Col	or	······				
12 - ((U4)V					urati	on									/WR o	r GCW		Blue							
Vehic	-1	11.	~ 0	- N	iana	Cant	. "		- I, ;	107540	T Place		1 n			,000 lb	s. Directio			- 26,00 hbound			> than Southbo		0 lb
venic	JIC	Па	50	JI 1V	[Ye	Person	No		7-12.1917-1	L	$Y\epsilon$	prominents;	Lynnau	☐East	bound	V	Westbo	ound		ot on F			Unk	nov
(U5) S							le					∏Ех	empt Vehi	cle Er	nergen	cy Vel	nicle Re	espond	ing to	Scene	?	Y	es [No	
Exten			_				Dama	age O	bser	ved	VI	Mino	r Damage		F	unctio	nal Da	nage	,	ПТол	wed Du	ue to C	isablin	g Dam	age
(U6) N				age	d Ar	ea								(U	7) Mos	t Harn	ıful Eve	ent							
(U8) F				Act	ions										9) Con	tributir	ng Circu	ımstan	ces - \	ehicle			***************************************		
1 - Fc	oll	low	/ing	ro	adw	ау		····	·····					1	- Non	e									
(U10)) 5	equ	ienc	e 01	EVE	ints i								1(0	10) 56	quenc	e of Ev	enis z							
(U10)) S	equ	ienc	e of	Eve	nts 3								(U	10) Se	quenc	e of Ev	ents 4							
V	Dri			Bicy				strian		Licens	e Num	ber	✓ Active	□N(se[] Susper	ermit	State ME	Lice C	nse Cl	ass E		ements	Resti	rici
DRIVI	EF					pera	(OI		Fir	st Nam	ie				RIVER			1"16-		Cit			Sta	1-	Zip
* Citation	ion	Nı	mb	÷1.	Per	nding		***************************************							ME* olation	1				Viol	ation 2				
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*	lbh	₹ La	ast r	vam	e (si	ар іт	same	as Di	aver)	First N	lame		MI	*	NNER ME*					City			Stat	e z	ĺр
(D1) E	Dri	ver	Dis	trac	ted E	Зу								1 '			at Time y Nor i		ish						
(D3) E								ish 1									ons at		f Crasi	12		······			
14 - I Alcoh				9 10				Given	T	Test	Refuse	ed	Bloc	od -	Alooh	ol Tani	Resulf	Doneli		Alcoho	I BAC	Resul	Ť		
Drug `		eath	1] Urii		Not	Othe Given			Test (N		d Sobriety or I	PBT)	rug Tes										
]Urii	ne		Othe	er			, Ci						LJ	sitive		legativ	'e	Pen	gnib	
(D4) N	No	in IV	1010	rist i	oca	tion a	at tim	e or c	,rasr	1				KL	o) Non	IVIOTO	ist Acti	on Prio	ir to Ci	asn					
(D6) N	No	n N	ioto	rist	Actic	in at	Time	of Cra	ash 1					(D	6) Non	Moto	rist Acti	on at T	ime of	Crash	2				
(D7) F	Pe	des	tria	n Ma	aneu	vers								(D	8) Bicy	clist N	laneuv	ers							
	PE	ERS	ON	TYP	E 1-[Oriver,	2-Pas	ssenge	 ∍r, 3-F	edestri	an, 6-Dr	river/0	Owner, 7-Bio	ycle, 8	-Passer	ger/Ow	ner, 24-	Last Kn	own Op	erator 2	25-Last	Known	Operato	r/Owne	r
SEAT 1-Fron	nt R	Row	1	-Left	(drive	TION r)	1-Sie	POSIT	ection o	of Cab (tri	uck)1-Not	t Appli	cable -	-Not An	INT SYS plicable			1-Am	RY TYP	1	VJURY A	AREA	1-Fatal	DEGRE	
2-Seco 3-Third 4-Four	d R	NO2	3	-Midd -Righ -Othe	t		3- Un	er Enclo enclose iling Uni	ed Carg	argo Are go Area	3-Dep 4-Dep	ployed	- Front 3	3-Should	Jsed - Mo ler and La ler Belt O	ap Belt U		ant 2-ble 3-Bro 4-Bu	oken Bor	ies 3	-Head -Neck -Back		3-Nonir	acitating capacita ble Injun	atin
5-Othe 6-Unkr	er F	₹ow			nown		5-Ridi (non-t	ing on N trailing u	viotor \	/ehicle E	(knee	ployed e, air b ployed	- Other { elt,)	5-Lap Be 5-Restra	ilt Only U int Used	sed - Other		6-Sh	ncussior ock ziness	6	i-Arm(s) i-Leg(s) '-Chest S	tomach	5-No in	•	· OI
EJECT			i		HELM	MET US	SE.	known Aotorcy	alo Mai	lmat	Comb	binatio	n (3-Child F	Restraint - Restraint - Restraint -	Rear Fa		8-Ab	rasion/B		I-Internal		1-Office 2-Indivi	r Obsendual Stat	vati ten
2-Ejec 3-Ejec	cted	l Pa	rtially		2-Oth	er Heli Helme	net	10101091	J.C 1 1C1	mer				0-Boost			•	10-0	ther	1	0-Other		3-Medio Observ	al, Para ation	me
Person	, In	nclud	e Dri	ver, F	asser	ngers,	Bicyclis	t, and F	oedestr	rians	Se		200	Seat	Seat	Seat	Air Bag	F*111	Restrair	nt Helmet	Injury	AMB Injury	CODES	see coo	
Туре		ast N	lame	Firs	t Nam	ne, Mi					(M,F		DOB	Pos Row	Pos	Other	Deployer	i Elected	T	t Helmet Use	Ţ	Туре	Area	Source	
6	*										M	1 0	5/21/91	1	1		ļ	1	3		5			2	- Company
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2009-24825C

STATE OF MAINE CRASH REPORT

FIRST PAGE

City or Town Portland	09-2630		Crash Date 9/10/2009	07:0	3 9,	Scene Date /10/2009	At Scer 07:20	ne Time
,		r Highway RESS ST		Nea	rest Intersecting	Street	Language	Off Road
Direction FROM Nearest Interset At Intersection North	ction to Crash Site South East	Distance West	From Nearest Inte		ude	Longitu	ıde	
Node 1 Node 2 18490 0	2 Me	asurement Nod	1	Ricene Po	osted Speed Limi	broomer	presentation of	t Posted 25 t Posted 45
(F1) Type of Crash 2 - Rear End / Sideswipe			(F2) Type of 4 - Four Le	Location		t-m-sand.		
(F3) Weather Condition			(F4) Light Co		Section			***************************************
1 - Clear (F5) Road Grade			2 - Dawn (F6) Road S	urface C	ondition			
1 - Level (F7) Traffic Control Device			1 - Dry	of Davio	e Operational (pre	a craphi?		*****
1 - Traffic Signals (Stop & G					Y		U	nk
(F8) Location of First Harmful Ev	/ent		Total Damas	ge over T	hreshold?	✓Yes]No	
(F9) Contributing Circumstances	- Environment 1		(F9) Contrib	uting Circ	cumstances - Env	vironment 2		
(F10) Contributing Circumstance	es - Road 1		(F10) Contril	buting Ci	rcumstances -Ro	ad 2		
In or Near a Construction, Mainte			Work Zone \	Vorkers	Present?	es No		nk
(F11) Location of the Crash relat	ted to Work Zone		(F12) Type o	of Work 2	one			<u> </u>
Law Enforcement Present at Wo	ork Zone? Law Enforcement Vel	nicle Only	School Bus No Yes, Di	Related? rectly Inv	olved Yes.	Indirectly Involve	ed 🔲	No
WINDSPIELD IU BKEAK.					(•N-)			
WINDSHIELD TO BREAK. UNIT 2 HAD MAJOR REAR UNIT 3 HAD MINOR DAMA		UMPER.			TO Sing	TES STEE		
UNIT 2 HAD MAJOR REAR			ЛI Address	<u></u>	10 SME	ent.	State	Zip
UNIT 2 HAD MAJOR REAR UNIT 3 HAD MINOR DAMA	GE TO THE REAR B	Ą	ЛI Address	<u></u>	TO STALE	ent.	State	Zip
UNIT 2 HAD MAJOR REAR UNIT 3 HAD MINOR DAMA	First	Ą		<u></u>	TO SILVE	ent.		
Witness Last Name Witness Last Name	First	Ą		<u></u>	TO SILVE	TEXA	State	Zip
Witness Last Name Witness Last Name Non Vehicle Property Damage D	First First Description	Ą	ЛI Address	<u></u>	City City City City	TEXA	State] Utilities	Zip Private
Witness Last Name Witness Last Name Witness Last Name Non Vehicle Property Damage D Property Owner Name	First First Description	Ą	ЛI Address	<u></u>	City City City City	City or Town	State Utilities State	Zip Private Zip

Last Modified: 9/10/2009 10:30

	eport N 9-263 (ST	ATE (OF MAIN	IE (CRA	\SH	RE	POF	RТ				UN	IIT P	AG
	nit ID	T	Run?	VIN YV1JW8614R110) 0637	License *	Plate	4		(U1) U 1 - Pa			r					
	No Ins	surance	NAIC		Company f	Vame				<u></u>	suran			nber		***************************************		
		icle Mak	æ	-				nicle Y	ear	1,) Vehic		or					
	0 - VO J4)Vehi		îguration				19 GV	94 WR or	GCW		Black					***************************************		
					IAT Placard	lad O]< 10,		s. Direction	Same		- 26,00 nbound		lu-und		26.000	0 lbs
			E.m.e.al	Yes No	Comme	Yes No]Eastl	oound	U	Vestbo	und		ot on R		outhbo	Unki	nowi
			ction Veh Functio i			Exempt Vehic	e Em	ergen	cy Veh	icle Re	spondi	ng to S	Scene	?	Ye	es [No	
Ε	xtent of	f Damag	e 🔲 v	lo Damage Observed	Mii	nor Damage		ПЕ	unctio	nal Dan	nage		√ To\	wed Du	e to D	isablin	g Dam	age
			ged Area				(U7	7) Most	Harm	ful Eve	nt							
(L		Crash A								g Circu	mstan	ces - V	ehicle					
			traffic of Events	<u> </u>				None		of Eve	nts 2							
Ĺ		,					100	(A) Ca		e of Eve	unin d							
(1	nuj se	equence	of Events	5 3									····					
	☑ Driv		ycle 🗌 own Ope	hanned .	nse Numbe	r ✓ Active	No		se[]F uspen	Permit Sided	State ME	Lice:	nse Cl	ass Ei	ndorse	ments	Restr A,M	ictio
D *	RIVER	Last Na	me	First Na	ıme	N		RIVER.	Addre	SS			Cit	γ		Sta	te Z	'ip
C	itation I	Number	Pendi	ng 🔲				lation	1				Viol	ation 2		***************************************		
_ *	WNER	Last Na	me (skip	if same as Driver) Firs	i Name	MI	1	VNER .	Addres	ŝŝ			City			Stat	te Z	ip
(C)1) Driv	er Distra	icted By				(D2	2) Cond		at Time		sh						
	,			e of Crash 1						ons at 1		Crash	12					
-	Icohol 7	Гest		it-of-Way est Not Given ☐ Te ☐ Other Chemic	st Refused	Bloom		Alcoho	ol Test	Result	Pendii	ng	Alcoho	I BAC	Result			
D	rug Tes	st [Te Urine		st Refused	Blood		ug Tes	t Resu	ilt	Po:	sitive		Vegativ	e []Pen	ding	
(L)4) Non	Motoris	t Locatio	n at Time of Crash			(D:	5) Non	Motor	ist Actio	n Prio	r to Cr	ash					
(Ľ	06) Nan	Motoris	t Action a	at Time of Crash 1			(D(6) Non	Motor	ist Actio	n at T	me of	Crash	2				
(E	7) Ped	lestrian l	Vaneuve	rs			(D8	B) Bicy	clist M	aneuve	rs							
_	PE	RSON TY	PE 1-Driv	er, 2-Passenger, 3-Pedes	trian, 6-Drive	er/Owner, 7-Bicy	cle, 8-	Passen	ger/Ow	ner, 24-l	ast Kn	own Op	erator 2	25-Last H	Known	Operato	or/Owne	r
1	EAT ROV	ow 1-Le	T POSITIO	1-Sleeper Section of Cab	(truck)1-Not Ap	oplicable 1.	Not Ann	NT SYST			1-Am	RY TYPE putation	1	NJURY A -Face -Head	REA	1-Fatal	Y DEGRE	E
3	-Second I -Third Ro -Fourth R	w 3-Ri	iddle ght ther	2-Other Enclosed Cargo A3- Unenclosed Cargo Are4-Trailing Unit	a 3-Deploy 4-Deploy	yed - Front 3. ved - Side 4.	Shoulde	sed - Mo er and La er Belt Or	p Belt U		ant 2-Ble 3-Bro 4-But	ken Bon	es 3	-Neck -Back		3-NonIr	ncapacita ible Injury	
Ę	i-Other Ro i-Unknow	ow 5-Ur	nknown	5-Riding on Motor Vehicle (non-trailing unit)	Ext 5-Deplo	yed - Other 5- ir belt,) 6-	ap Bel	t Only Us nt Used -	sed		6-Sho		5	i-Arm(s) i-Leg(s)		5-No In	ijury	
	JECTED		HELMET	6- Unknown USE	6-Deploy Combina	ation 8.	Child Re	estraint - estraint -	Rear Fa	cina	8-Abi	ziness asion/Br	uises 8	'-Chest Si 3-Internal		1-Office	Y INFO S or Observ	ration
2	-Not Ejec !-Ejected !	Partially	1-DOT-C 2-Other h	ompliant Motorcycle Helmet lelmet	7-Debio	yment - Curtain 9-	-Booste	estraint - er Seat Restraint		correctly	10-0	nplaint c her		9-Entire B 10-Other	oay		idual Stat cal, Parar	
_	-Ejected	lotally	3-No Heli	met			-Cimu	r Cou an i							AMB		- see cod	le sh
	vne		_	s, Bicyclist, and Pedestrians	Sex (M,F,U)	DOB	Seat Pos Row	Seat Pos	Seat Pos Other	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	An Co
	6 *	stivame, r	irst Name,	Wil	М	04/22/41	1.	1	Other		1	3		5			2	
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M	aine De	epartme	nt of Pul	olic Safety			age :	2					For	m 13:2	0A Re	vised .	Januar	y 20

09-2630	3	STA	TE (OF MAIN	IE (CRA	\SH	RE	POP	RT				UN	IT P	٩G
Unit ID 2	lit Run?	VIN KMKDN46DX6U330	603	License *	Plate			(U1) U 1 - P a			r					
No Insuran	ce NAIC	Insurance Co	ompany I	Vame				ir *		ce Poli	cy Nur	nber				
(U2) Vehicle N 27 - HYUND					Vel 20	nicle Y	ear	1,) Vehic	cle Col	or			***************************************		
(U4)Vehicle C					GV	WR or T< 10,		R		0.001	- 26.00	ID Ibo		> than	26.00(\ Ih
Vehicle Has 9	promong	ts? HAZMA	T Placard	ded ? Yes □No		hicle T		Directio	Samuel	Norti	nbound	1	✓ S	outhbo	und	
(U5) Special F	unction Vehi			Exempt Vehicl	e Em	und		icle Re				ot on R	/manay	y	Unkr	104
1 - No Speci Extent of Dam	200	Damage Observed	———	nor Damage		——— Пғ	unctio	nal Dar	nage		√ To	wed Du	Ye le to Di	isabling	No Dama	306
(U6) Most Dai			\$J		(U7	-		ful Eve	~						,	
12 - Front (U8) Pre Cras								g Circu	mstan	ces - V	'ehicle					
11 - Stoppe (U10) Sequen		1		***************************************		None		of Eve	ents 2				······································			
(U10) Sequen								of Eve								
			n hirante -							Lion	nse Cl	200 E	ndorco	mante	Dest	i of
Last	Bicycle Known Opera	ator *	e Numbe				uspen	ded	State ME	C		0	ndorse		Restri 0	
DRIVER Last *		First Nam	e 	M	* [NVER NE*		SS 			Cit			Stat	e Z	ip
Citation Numb	er Pendin	g			Vio	lation	1				Viol	ation 2				
OWNER Last	Name (skip it	f same as Driver) First N	lame	MI		VNER. ME*	Addres	SS			City			State	e Zi	р
(D1) Driver Di	tracted By							at Time y Norn		sh						.,.,
(D3) Driver Ac	tions at Time	of Crash 1						ons at		f Crast	12					
Alcohol Test	Tes	st Not Given Test	Refused	Blood		Alcoho	ol Test	Result	Pendi	ng	Alcoho	I BAC	Result			
Drug Test	 ∏Te: ∏Urine	- Louis	Refused	Blood		ug Tes	t Resu	i i	Po	sitive		legativ	e [Pend	ling	
(D4) Non Moto	hand	at Time of Crash			(D.	5) Non	Motor	ist Actio	n Prio	r to Cr	ash					
(D6) Non Moto	rist Action at	Time of Crash 1		· · · · · · · · · · · · · · · · · · ·	(D6	3) Non	Motor	ist Actio	on at T	ime of	Crash	2				
(D7) Pedestria	n Maneuvers	5			(D8	3) Bicy	clist M	aneuve	rs							
PERSON	TYPE 1-Drive	r, 2-Passenger, 3-Pedestria	an, 6-Drive	er/Owner, 7-Bicy	cle, 8-l	Passen	ger/Ow	ner, 24-	_ast Kn	own Op	erator 2	25-Last I	Known (Operato	r/Owner	r
1-Front Row	SEAT POSITION Left (driver)	SEAT POSITION OTHER 1-Sleeper Section of Cab (tru 2-Other Enclosed Cargo Are	CK1-Not A	onlicable 1_t	Int Ann	NT SYST		le Occup	1-Am	RY TYPI putation	1	NJURY A -Face -Head	REA	INJURY 1-Fatal 2-Incapa		E
3-Third Row	2-Middle 3-Right 1-Other	3- Unenclosed Cargo Area 4-Trailing Unit	4-Deplo	yed - Front 3.5 yed - Side 4.5	Shoulde	er and La er Belt Or	p Belt Us	sed	3-Bro 4-Bu	ns ns	es 3	I-Neck I-Back		3-Noning 4-Possib	capacitat de Injury	
5-Other Row 6-Unknown	5-Unknown	5-Riding on Motor Vehicle Ex (non-trailing unit)		ir belt,) 6-r	Restrair	t Only Us nt Used -	Other		6-Sh	ncussion ock ziness	ϵ	i-Arm(s) i-Leg(s) '-Chest Si	tomoob	5-No Inju	•	~
EJECTED 1-Not Ejected	HELMET		Combina		hild Re	estraint - estraint -	Rear Fa	cina	8-Ab	asion/Br	uises 8	I-Internal I-Entire B		1-Officer 2-Individ	r Observa	atio
2-Ejected Partiall 3-Ejected Totally	2-Other He 3-No Helm			10	-Booste	er Seat Restraint		,	10-0	ther	1	0-Other		3-Medica Observa		ned
Person Include Di	ver. Passengers	, Bicyclist, and Pedestrians	Sex		Seat	Seat	Seat	Air Pog		Poetroin	t Halmat	laiun	AMB (CODES - Injury	see code	e sl
Tune	, First Name, M		(M,F,U)	DOB	Pos Row	Pos	Pos Other	Air Bag Deployed	Ejected	System	Use	Degree			Source	ĉ
6 *			F	08/12/60	1	1			1	3		5			2	
			South Park					Particular		Table State						
		A control of the cont														
						Transcored Transcored				- Contraction of the Contraction				\vdash		
				In control of control				-	- Parameter							
				Organiya da de parte de la de		THE PARTY AND ADDRESS OF THE PARTY AND ADDRESS						Paralle and Principles				
laine Depart	nent of Pub	lic Safety		F	age :	3					For	m 13:2	0A Rev	vised J	anuar	v :

Form 13:20A Revised January 2010

09-2630	STATE OF I	MAINE	E CRA	SH	RE	POF	RT				UN	IIT P.	AGE
Unit ID VIN	DB03E04S592301	License Pl			(U1) Ui			Vehic	cle				
No Insurance NAIC 22055	Insurance Company Name		i				ce Polic					***********	
(U2) Vehicle Make 8 - BUICK		1	Vehicle Yo	ear	(U3) Vehic	le Colo	or Or	w1	***************************************	-		
8 - BUICK (U4)Vehicle Configuration	×40.94		GVWR or		R		0.001	00.00	0.0			00.00	5 fk
Vehicle Has 9 or More Seats ?	HAZMAT Placarded ?	Constraint	Vehicle T	000 lb ravel D		beaused	0,001 -]North	bound		√s	outhbo		
	No Yes	No pt Vehicle	Emergen	oound cy Veh		Vestbo spondi		- branned	ot on F ?	loadwa	ay [Unk	nown
1 - No Special Function		ipi veniole								Ye	<u>L</u>	No	·····
- No Daw	age Observed		1-11-12		nal Dan		-	Tov	ved Du	ie to D	isablin	g Dam	age ——
(U6) Most Damaged Area 6 - Rear			(U7) Most							· · · · · · · · · · · · · · · · · · ·			
(U8) Pre Crash Actions 11 - Stopped in traffic			(Ú9) Cont 1 - None				ces - V	ehicle					
(U10) Sequence of Events 1			(U10) Sec	uence	of Eve	nts 2							
(U10) Sequence of Events 3	,		(U10) Sec	uence	of Eve	nts 4							
	estrian License Number	Active		se F			Licer C	nse Cla	ass E		ments	Restr	iction
Last Known Operator DRIVER Last Name	First Name		DRIVER.			ME	<u> </u>	City			Sta		.ip
Citation Number Pending			* ME* Violation	1				Viola	ation 2				
OWNER Last Name (skip if same	as Driver) First Name M	A	OWNER	Addres	SS			City			Stat	e Z	in
* (D1) Driver Distracted By			* ME*	dition s	ıt Time	of Cra	eh .						,
			1 - Appa	rently	/ Norn	ıal							
(D3) Driver Actions at Time of Cra	asn 1		(D3) Drive	er Actio	ons at i	ime or							
Alcohol Test	Given Test Refused Other Chemical Test (Not Field So	Blood briety or PBT)	Alcoho	l Test	Result	Pendir	ng	Alcoho	I BAC	Result			
Drug Test Not	Given Test Refused	Blood	Drug Tes	Resu	t to	Pos	sitive		legativ	e []Pen	ding	
(D4) Non Motorist Location at Tin	ne of Crash		(D5) Non	Motori	st Actio	n Prio	r to Cra	ash					
(D6) Non Motorist Action at Time	of Crash 1		(D6) Non	Motori	st Actio	n at Ti	me of	Crash	2				
(D7) Pedestrian Maneuvers	***************************************		(D8) Bicy	clist M	aneuve	rs							
PERSON TYPE 1-Driver, 2-Pa	ssenger, 3-Pedestrian, 6-Driver/Own	er, 7-Bicycle,	, 8-Passen	ger/Owi	ner, 24-L	ast Kno	own Ope	erator 2	5-Last I	Known	Operato	or/Owne	r
1-Front Row 1-Left (driver) 1-Sle	POSITION OTHER AIRBAG DEPLO eper Section of Cab (truck)1-Not Applicable	e 1-Not	RAINT SYST Applicable			1-Am	RY TYPE putation	1	JURY A -Face	REA	1-Fatal	DEGRE	E
3-Third Row 3-Right 3- Un	ner Enclosed Cargo Area 2-Not Deployed nenclosed Cargo Area 3-Deployed - Fro illing Unit 4-Deployed - Sid	ont 3-Sho	e Used - Mol uider and La uider Belt Or	p Belt Us	sed	ant 2-Blei 3-Bro 4-Bur	ken Bone	es 3	-Head -Neck -Back		3-Nonir	acitating ncapacita ble Injury	
5-Other Row 5-Unknown 5-Rid	ling on Motor Vehicle Ext 5-Deployed - Ot trailing unit) (knee, air belt,	ther 5-Lap	Belt Only Us traint Used -	ed			ncussion	5	-Arm(s) -Leg(s)		5-No In	jury	
	known 6-Deployed - Combination	7-Chile 8-Chile	d Restraint - d Restraint -	Forward Rear Fa	cina	8-Abr	ziness asion/Bru	uises 8	-Chest S -Internal		1-Office	/ INFO S or Observ	ation
1-Not Ejected 1-DOT-Compliant f 2-Ejected Partially 2-Other Helmet	Motorcycle Helmet 7-Deployment -	10-Bo	oster Seat		correctly	9-Cor 10-Ot	nplaint of ther		-Entire B 0-Other	ody	3-Medic	dual Stat cal, Parar	
3-Ejected Totally 3-No Helmet		11-Ch	ild Restraint							AMB	Observ CODES	- see cod	e shee
Person Include Driver, Passengers, Bicyclis Type Loct Name, First Name, Mil	st, and Pedestrians Sex (M,F,U)	Se DOB Po	os Pos	Seat	Air Bag Deployed	Ejected	Restraint System	Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Amb
6 *	F 04/:	17/85 1		Other	and the state of t	1	3		5			2	
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					and the same of th					-			
		Acceptance and the second										widowwww.	
		Company and a second								AND AND ADDRESS OF THE ADDRESS OF TH			
Maine Department of Public Sa	fety	Pag	ge 4		1		l	For	n 13:2	0A Re	vised .	Januar	v 201

2010-1188C

STATE OF MAINE CRASH REPORT

FIRST PAGE

	eport Number)-000117		ish Date 12/2010	Crash Time 17:07	At Scene Date 1/12/2010	At Scer 17:30	ne Time
City or Town Portland	Street or Highw CONGRESS ST			Nearest Interse	cting Street	[max	Off Road
Direction FROM Nearest Intersection to At Intersection North South	processes processes	istance Fron	m Nearest Inter.]Feet ☑ Miles	1 mm April 1 mm 1 mm 1 mm	Loi	ngitude	
Node 1 Node 2 18490 0	Measurem 18490	ent Node	Distance to So	ene Posted Spee	Tonamour!	\$constraint.	t Posted 25 t Posted 45
(F1) Type of Crash 2 - Rear End / Sideswipe			(F2) Type of L	ocation Intersection			
(F3) Weather Condition			(F4) Light Cor	dition		· · · · · · · · · · · · · · · · · · ·	
1 - Clear (F5) Road Grade		· · · · · · · · · · · · · · · · · · ·	4 - Dark - Li	ghted face Condition			
1 - Level			1 - Dry	race Condition			
(F7) Traffic Control Device 1 - Traffic Signals (Stop & Go)			Traffic Control	Device Operation		√o ∏Ui	nk
(F8) Location of First Harmful Event			Total Damage	over Threshold?	✓Yes		
(F9) Contributing Circumstances - Envir	onment 1		(F9) Contribut	ing Circumstances		The second secon	
(F10) Contributing Circumstances - Roa	ad 1		(F10) Contribu	iting Circumstance	s -Road 2		
In or Near a Construction, Maintenance	, or Utility Work Zone? Yes No	Unk	Work Zone W	orkers Present?	Yes D	No U	nk
(F11) Location of the Crash related to V	Vork Zone		(F12) Type of	Work Zone			
Law Enforcement Present at Work Zone Officer Present Law E	e? nforcement Vehicle On	y No	School Bus R		Yes, Indirectly Inv	volved	No
1-12-10 JTE.				CONGRESS STRI		CONGRESS STREET &	
Witness Last Name	First	Mi	Address		Sity	State	Zip
Witness Last Name Witness Last Name	First First	MI	Address Address		Sity	State	Zip
	First					State	
Witness Last Name	First			() State	City	State	Zip
Witness Last Name Non Vehicle Property Damage Descript	First		Address	() State	City or Town	State Utilities State	Zip Private
Witness Last Name Non Vehicle Property Damage Descript Property Owner Name	First		Address	State	City Or Town	State Utilities State	Zip Private

Last Modified: 1/13/2010 07:24

10-000117	STATE C	F MAIN	IE (CRA	\SH	RE	POF	RТ				UN	IIT P	AGE
Unit ID UNIT DIMA	BH679547643496	License *	Plate			(U1) U 1 - Pa			r					
☐ No Insurance NAIC	Insurance Company N	lame				<u> </u>	nsurano			nber				
(U2) Vehicle Make 65 - SUBARU			Vel 20	nicle Y	ear) Vehic		or				***************************************	
(U4)Vehicle Configuration			GV	₩R or 7< 10.		R		0.001 -	26.00	O Iba		> than	26.00	n lbe
Vehicle Has 9 or More Seats ?	HAZMAT Placard	ed? /es □No	1	hicle T		Direction		North	nbound		- Lourned	outhbo	ound	nown
(U5) Special Function Vehicle 1 - No Special Function		Exempt Vehic	ie Em			icle Re			Scene 1	?	Ye	s [No	
Extent of Damage	mage Observed	or Damage		П	unctio	nal Dar	mage		Tov	ved Dı	ie to Di	sablin	g Dam	age
(U6) Most Damaged Area 6 - Rear	***************************************		(U7	7) Most	t Harm	ıful Eve	nt					****		
(U8) Pre Crash Actions 11 - Stopped in traffic				9) Cont		g Circu	ımstanı	ces - V	ehicle					
(U10) Sequence of Events 1						e of Eve	ents 2							
(U10) Sequence of Events 3			(U	10) Sec	quence	e of Eve	ents 4		····			***************************************		***************************************
✓ Driver Bicycle Pec	lestrian License Number	r ✓Active [No		se [] f		State ME	Lice:	nse Cla	iss E	ndorse	ments	Resti	ictions
DRIVER Last Name	First Name	N		RIVER . ME*	Addre	SS			City	/		Sta	ite Z	Žip
Citation Number Pending				lation	1				Viola	ition 2				
OWNER Last Name (skip if sam	ne as Driver) First Name	MI		VNER .	Addres	SS	· · · · · · · · · · · · · · · · · · ·		City			Sta	le Z	ip
(D1) Driver Distracted By			(D2	2) Cond		at Time		sh						***************************************
(D3) Driver Actions at Time of C	rash 1					ons at		f Crash	12			****		
Alcohol Test Test No		Blood	11 1	Alcoho	ol Test	Result	Pendir	ng	Alcoho	I BAC	Result			
Breath Urine Drug Test Test No Urine	Other Chemical Test (Not F t Given Test Refused Other	Blood		ug Tes	t Resu	ılt	Pos	sitive		legativ	re [Pen	ding	***************************************
(D4) Non Motorist Location at Ti			(D	5) Non	Motor	ist Actio	on Prio	r to Cra	ash					
(D6) Non Motorist Action at Time	e of Crash 1		(D	â) Non	Motor	ist Action	on at T	ime of	Crash	2				
(D7) Pedestrian Maneuvers			(D	8) Bicy	clist M	aneuve	ers							
PERSON TYPE 1-Driver, 2-P	assenger, 3-Pedestrian, 6-Drive		cle, 8-	Passen	ger/Ow	ner, 24-								
1 Front Day 1 Loft (driver) 1 C	AT POSITION OTHER AIRBAG leeper Section of Cab (truck)1-Not Applither Enclosed Cargo Area 2-Not De	olicable 1-	Not Ann	NT SYST		cle Occup	1-Am	RY TYPE putation eding	1	NJURY A -Face -Head	REA	1-Fatal	DEGRE acitating	:E
3-Third Row 3-Right 3-U 4-Fourth Row 4-Other 4-Ti	Jnenclosed Cargo Area 3-Deployeralling Unit 4-Deployer	ed - Front 3 ed - Side 4	Shoulde Shoulde	er and La er Belt Or	ip Belt U nly Used	sed	3-Bro 4-But	ns Bon	es 3 4	-Neck -Back		3-Nonli 4-Poss	ncapacita ible Injun	
6-Unknown (no	n-trailing unit) (knee, air	ed - Other 5- r belt,) 6-	Lap Bel Restrair	t Only Us nt Used -	Sed Other		6-Sho	ncussion ock ziness	6	-Arm(s) -Leg(s) -Chest S	tomach	5-No In	ijury Y INFO S	OF IDO
EJECTED HELMET USE 1-Not Ejected 1-DOT-Complian 2-Ejected Partially 2-Other Helmet	Combina	tion 8- ment - Curtain 9- 10	Child Ro Child Ro D-Booste	estraint - estraint - estraint - er Seat Restraint	Rear Fa Used In	cina -	8-Abr	rasion/Br mplaint o	uises 8 f Pain 9	-Internal		1-Office 2-Indivi	er Obsen dual Stat cal, Para	ation ement
3-Ejected Totaliy 3-No Helmet	No. of Data Line	11									AMB	CODES	- see coo	
Person Include Driver, Passengers, Bicyc Type Last Name, First Name, Mi	Sex (M,F,U)	DOB	Seat Pos Row	Seat Pos	Seat Pos Other	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Amb Code
6 *	F	11/23/61	1	1		man a grant and a	1	3		4	9	3	2	
						NAME OF TAXABLE PARTY.								
						and the state of t			Anna Caracteristic Caracterist					
						and of every first to the latest designation of the latest designation	THE PROPERTY OF THE PROPERTY O							
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Form 13:20A Revised January 2010

Report Number 10-000117	STATE C	F MAIN	E CR	ASH	IRE	POF	₹T				UN	IT P	٩GF
Unit ID Fluit Dung VIN	(12E6SU609957	License *			(U1) U 1 - Pa	nit Typ	e				<u> </u>	1 /	
No Insurance NAIC	Insurance Company N	lame				nsuran	ce Poli		nber				**********
No Insurance (U2) Vehicle Make			Vehicle	Year	(U3) Vehic	cle Col	or	·····				
67 - TOYOTA (U4)Vehicle Configuration			1995 GVWR	or GCV		Greer	1						
Vehicle Has 9 or More Seats ?	HAZMAT Placard	ed 2		0,000 lb		+	0,001	26,00 bound			> than outhbo) lbs.
Yes	n (res ☐No	☐ Ea	stbound	V	Nestbo	und	□ N	ot on F	toadwa		Unkı	nwor
(U5) Special Function Vehicle 1 - No Special Function	E	Exempt Vehicle	Emerge	ency Vel	nicle Re	spond	ing to S	icene '		Ye:	s []No	
Extent of Damage No Damag	ge Observed Min	or Damage	✓	Functio	nal Dar	nage		Tov	ved Du	e to Di	sabling) Dam	age
(U6) Most Damaged Area 12 - Front	W. W		(U7) M	ost Harn	iful Eve	nt							
(U8) Pre Crash Actions			1 .	ontributir	ig Circu	mstan	ces - V	ehicle	····				
10 - Slowing in traffic (U10) Sequence of Events 1			1 - No (U10) S	ne Sequenc	e of Eve	ents 2							
(U10) Sequence of Events 3				equenc					······································				
	-						To a		r <u>-</u> -			<u></u>	
✓ Driver Bicycle ☐ Pedes ☐ Last Known Operator	trian License Number	Active	No Lice	nse[_] Susper		State ME	Licei C	nse Cla	iss E	ndorsei	ments	Restr 0	ictions
DRIVER Last Name *	First Name	M	DRIVE * ME*	R Addre	SS			City	í		Stat	e Z	ip
Citation Number Pending			Violatio	n 1		-,-,		Viola	ation 2				
OWNER Last Name (skip if same a	as Driver) First Name	MI	OWNE	R Addre	SS			City			State	e Zi	p
(D1) Driver Distracted By			4 ' '	ondition parenti			sh						
(D3) Driver Actions at Time of Cras	sh 1			iver Acti			f Crash	2					
14 - Followed Too Closely Alcohol Test Test Not G		Blood	Alco	hol Test	Result	Pendi	na	Alcoho	I BAC	Result			
Breath Urine Drug Test Not G	Other Chemical Test (Not F Given Test Refused	ield Sobriety or PB Blood	7)	est Resu			sitive	П	 legativ		¬Penc	lina	
Urine (D4) Non Motorist Location at Time	Other e of Crash		(D5) No	on Mator	ist Actio	housed		<u> </u>		- L	71.010		
(D6) Non Motorist Action at Time o				on Motor					2			***************************************	
	Grasii i												
(D7) Pedestrian Maneuvers			(D8) Bi	cyclist N	aneuve	ers							
PERSON TYPE 1-Driver, 2-Pass SEAT ROW SEAT POSITION SEAT F			le, 8-Pass		ner, 24-l		own Op RY TYPE		5-Last I JURY A		Operato INJURY		
1-Front Row 1-Left (driver) 1-Sleep 2-Second Row 2-Middle 2-Other	per Section of Cab (truck)1-Not Appr r Enclosed Cargo Area 2-Not Dep	olicable 1-N ployed 2-N	ot Applicable one Used - I	e Motor Vehi	cle Occup	1-Am ant 2-Ble	putation	1- 2-	-Face -Head		1-Fatal 2-incapa	citating	
4-Fourth Row 4-Other 4-Trailin	nclosed Cargo Area 3-Deploye ng Unit 4-Deploye ng on Motor Vehicle Ext 5-Deploye	ed Side 4-S	houlder and houlder Belt ap Belt Only	Only Used		4-Bu		4	-Neck -Back -Arm(s)		3-Nonin 4-Possit 5-No inj	le Injury	ang
6-Unknown (non-tra 6- Unkr	ailing unit) (knee, air nown 6-Deploye	belt,) 6-R ed - 7-C	estraint Use hild Restrair	d - Other nt - Forward	f Facing		ziness	6- 7-	-Leg(s) -Chest S	tomach	INJURY	INFO S	
EJECTED HELMET USE 1-Not Ejected 1-DOT-Compliant Mo	Combinat otorcycle Helmet 7-Deploys	tion 8-C ment - Curtain 9-C	hild Restrair hild Restrair	nt - Rear Fa nt - Used In	cing		rasion/Br mplaint o	f Pain 9	-Internal -Entire B 0-Other	ody	1-Officer 2-Individ 3-Medic	ual State	ement
2-Ejected Partially 3-Ejected Totally 2-Other Helmet 3-No Helmet			Booster Sea Child Restra			10-0	a ioi		0-01161	1145	Observa	tion	
Person Include Driver, Passengers, Bicyclist,	OUX	DOB	Seat Sea	s Seat	Air Bag Deployed	Fiected	Restrain	Helmet	Injury	Injury		Inj Info	Amb
Type Last Name, First Name, Mi	(M,F,U)		Pos Pos Row	S Pos Other	Deployed	T	1	Use		Type	Area	Source	Code
6 *	F	04/05/67	1 1	Para San Carlo Car		1	3		5			2	
			e compositor esta de compositor	The state of the s	Value of the second sec		The state of the s				And the state of t		
			or delication of the second										
			and the state of t	a parametria de la constitución	-	T-							
Maine Department of Public Safe	ety [P	age 3	and the same of th	T. C.	1	<u></u>	Forr	n 13:2	0A Rev	rised J	anuar	y 201

2010-17576C

STATE OF MAINE CRASH REPORT

FIRST PAGE

	Reporting Agency ME0030500	Report Num 10-002125	i	8/:	sh Date 1 7/2010	Crash Time 16:50	8/17	ene Date 7/2010	At Sce 17:55	ne Time
	City or Town Portland		eet or Highwa DNGRESS ST			Nearest In	tersecting Str	eet		Off Road
	Direction FROM Nearest Intersection ☐ At Intersection ☐ North ☐ So			stance Fror	n Nearest Inte]Feet ☑ Mil e	es		Longiti	ıde	
- 1	Node 1 Node 2 18490 0		Measureme 18490	nt Node	M o s To		Speed Limit s Per Hour	Unknow N/A		t Posted 25 t Posted 45
	(F1) Type of Crash 2 - Rear End / Sideswipe				(F2) Type of 4 - Four Le	Location g Intersection	n			
	(F3) Weather Condition 1 - Clear				(F4) Light Co					
	(F5) Road Grade					urface Conditio	n			
-	1 - Level (F7) Traffic Control Device					ol Device Oper				
	1 - Traffic Signals (Stop & Go) (F8) Location of First Harmful Event				Total Damas	ge over Thresh	Yes old?	No		nk
-	(F9) Contributing Circumstances - Er	virnnment 1			(F9) Contrib	uting Circumsta		l town	No	·····
-	· · · ·									
-	(F10) Contributing Circumstances - I	<oad 1<="" td=""><td></td><td></td><td><u> </u></td><td>buting Circums</td><td></td><td></td><td></td><td></td></oad>			<u> </u>	buting Circums				
-	In or Near a Construction, Maintenar	ice, or Utility Yes	Work Zone? ✓ No	Unk	Work Zone	Norkers Prese	nt?	□No		nk
-	(F11) Location of the Crash related t	o Work Zone			(F12) Type	of Work Zone				
-	Law Enforcement Present at Work Z		t Vehicle Only	□No	School Bus	Related?	Tyes Ind	irectly Involv]No
	NARRATIVE U1 was heading South On Cong		· · · · · · · · · · · · · · · · · · ·	lamand.	CRASH DIA		bound		Santaran	,
	8-18-10 jte.						Congress St.	N I	Hutchings Drive	
***************************************	Witness Last Name	First		MI	Address		Gity	***************************************	State	Zip
	Witness Last Name	First		MI	Address		City		State	Zip
	Non Vehicle Property Damage Desc	ription				□s	tate City	or Town	Utilities	Private
-	Property Owner Name		70-7-00-10-10-0-0-		Address		City		State	Zip
	Non Vehicle Property Damage Desc	ription				Пѕ	tate City	or Town	Utilities	Private
	Property Owner Name				Address		City		State	Zip
	Reporting Officer Officer Edwards		Badge# 170	Report Da 8/18/20		Approved By Sgt. Bowden	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Approved 8/18/2 (
- 1	Maine Department of Public Safety		4		age 1		Fo	rm 13:20A I		

Last Modified: 8/18/2010 07:36

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	o Ins	urance	NAIC		Insurance C		lame		<u> </u>		<u> </u>			cy Nun	nber	····			
		icle Mal							hicle Y	ear) Vehi	cle Col	or					
			igen figuratio	า					/WR o		/R					p			
Vehic	ole H	las 9 or	More Se	eats ?		T Placard	led ?	Ve		,000 lb ravel l	os. Dírectio	- Lunioni		- 26,00 abound		ئىسسا	> than outhbo	26.00	0 lbs
				Yes	No		Yes No			bound	nicle Re	Nestbo	ound	□N	ot on F				nowr
1 - N	lo S	pecial	ction Ve Functio				Exempt Vehi	cle Ell	nergen	cy ver	iicie re	sponu	ing to c	ocene 		Ye	s [No	
Exter	nt of	Damag	le 🔲	No Dama	je Observed	✓ Mir	nor Damage		□г	unctio	nal Dar	nage		☐ To\	wed Du	ie to D	isablin	g Dam	age
(U6) I			ged Area	3				(U	7) Mos	t Harn	nful Eve	nt							
(U8) F	Pre	Crash A									ng Circu	mstan	ces - V	'ehicle				***************************************	
			of Event						- None 10) Se		e of Eve	ents 2	•	~~~					
(U10)) Sec	quence	of Eveni	ts 3		·····	·····	- (U	10) Se	quenc	e of Eve	ents 4							
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DRIV *	ER	Last Na	ime		First Nan	ne			RIVER ME*	Addre	SS			Cit	Y		Sta	ite 2	Cip
Citati	ion N	Vumber	Pend	ing 🗌				Vic	olation	1				Viol	ation 2				
OWN *	IER	Last Na	ıme (skir	if same	ıs Driver) First f	Vame	MI	1	WNER ME	Addre	SS			City			Stat	te Z	ip
	Drive	er Distri	acted By					(D)	2) Con		at Time		sh						
(D3) [Drive	er Actio	ns at Tin	ne of Cra	h 1						y Norr		f Crash	12	······································		-		
Alcoh	ol T	est	Пт	est Not G	iven Test	Refused	∏Bloc	od —	1					Alcoho	I BAC	Result			
1	Brea	ıth	Urine		Other Chemical	Test (Not I		⊃вт) —	ug Tes		Result	_							
			Urine		Other	Refused							sitive		legativ	e [Pen	ding	
(D4) Ì	Non	Motoris	st Locatio	on at Time	of Crash			(D	5) Non	Motor	rist Action	on Pric	r to Cr	ash					
(D6) N	Non	Motoris	t Action	at Time o	f Crash 1			(D	6) Non	Motor	rist Actio	on at T	ime of	Crash	2				
(D7) F	Pede	estrian	Maneuve	ers				(D	8) Bicy	clist M	laneuve	ers							
	PEF	RSON T	YPE 1-Dri	ver, 2-Pas	enger, 3-Pedestri			ycle, 8-	Passen	ger/Ow	ner, 24-		-						
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3-Thin 4-Fou	d Rov orth Ro	w 3-R ow 4-C	ight ther	3- Une 4-Traili	nclosed Cargo Ārea ng Unit	3-Deploy 4-Deploy	red - Front 3 red - Side 2	3-Should I-Should	er and La er Belt O	ip Belt U nly Used	sed	3-Bro 4-Bu	ken Bon	4	-Neck -Back -Arm(s)		3-Nonir	ncapacita ible Injury	ting (
5-Othe 6-Unk	nown		nknown	5-Rigin (non-tr 6- Unk	g on Motor Vehicle E illing unit) iown	(knee, ai 6-Deploy	r belt,) e	-Restrai '-Child R	It Only U: nt Used - estraint -	Other Forward		6-Sh 7-Diz	ock ziness	6 7	i-Leg(s) '-Chest S	tomach	INJURY	Y INFO S	
EJEC 1-Not 2-Eiec	Eject	ed Partially	HELME 1-DOT-0 2-Other	Compliant M	torcycle Helmet	Combina 7-Deploy	ment - Curtain	3-Child R 3-Child R 10-Boost		Rear Fa Used In	acing acorrectly			f Pain 9	I-Internal I-Entire B 0-Other	ody	2-Indivi	er Observ dual Stat cal, Para	emer
3-Ejec	cted T	otally	3-No He						Restrain	t - Other						AMB	Observ CODES	ation - see cod	le she
Person Type			-	-	and Pedestrians	Sex (M,F,U)	DOB	Seat Pos	Seat Pos	Seat Pos	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	Injury Degree	Injury	Injury	Inj Info Source	An Co
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Maine	De	partme	nt of Pu	iblic Safe	ty	1	J	Page	2			<u></u>		For	m 13:2	0A Re	vised .	Januar	y 20

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(C	6) N	Vor	Mc	tori	st A	ction	at °	Time	of C	rasi	า 1				······································	***************************************		6) Noi	n Moto	rist A	ctio	n at 1	ime (of C	rash	2				···	************
(C	7) F	² ed	estr	ian	Mai	neuv	ers			************							T(D	8) Bic	yclist N	Maneu	ıver	S									
F		PE	RSC	N T	YPE	1-D	iver,	2-P	ssen	ger,	3-P€	edestr				er, 7-Bio	ycle, 8	Passe	nger/O\	vner, 2	24-L										
1	EAT Fron	nt Ro	W	1-1		OSIT driver)		1.01	T POS	Saction	on of	Cah /t	truck\1	-Not A	G DEPLO Applicable Deployed	. 1	Not An	INT SYS	STEM otor Veh	icle Oc	cripa	1-Ar	JRY TY nputatio eedina		1	VJUR\ -Face -Head		ΞA	INJURY 1-Fatal 2-Incap		
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	JECT				F-	ELMI	ET US	E	nknow Motor		Hein	net	(Combir	nation		-Child R	estraint	- Rear F	acing	_	8-At	rasion/ mplain	Bruis	ses 8 Pain 9	-Interr -Entire	al Body		1-Office 2-Indivi	r Obsen dual Sta	ration ement
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	ype	Las	t Na	ne,	First	Name	, Mi							(M,F,U		OB	Pos Row	Pos	Pos Othe	Air B Deplo	yed	Ejected	Syste	m	Use	Degr	ee 1	уре	Area	Source	
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2010-19754C

STATE OF MAINE CRASH REPORT

FIRST PAGE

Reporting Agency ME0030500	Report Number 10-0021998	8	rash Date /24/2010	Crash Time 15:43	At Scene Date 8/24/2010	At Scene Time 15:55
City or Town Portland	Street I 95	t or Highway SB		Nearest Inte	ersecting Street	☐ Off Road
Direction FROM Nearest In At Intersection North		Distance Fr	om Nearest Int ∏Feet ☑ M il	200001110000	Longi	ude
Node 1 N 18490 0	- OGC 12	Measurement Node	1	Scene Posted S	peed Limit Unknov	vn Not Posted 25 Not Posted 45
(F1) Type of Crash 2 - Rear End / Sideswip	e		(F2) Type o	f Location eg Intersection	n	
(F3) Weather Condition 1 - Clear			(F4) Light C	ondition		
(F5) Road Grade	<u>, , , , , , , , , , , , , , , , , , , </u>	***************************************	(F6) Road S	Surface Condition	1	
(F7) Traffic Control Device			1 - Dry Traffic Cont	rol Device Opera	ational (pre-crash)?	
1 - Traffic Signals (Stop					Yes No	Unk
(F8) Location of First Harm				ge over Thresho	✓ Yes	No
(F9) Contributing Circumsta	ances - Environment 1		(F9) Contrik	outing Circumstar	nces - Environment 2	
(F10) Contributing Circums	tances - Road 1		(F10) Contr	ibuting Circumsta	ances -Road 2	
In or Near a Construction, N	Maintenance, or Utility Wo	ork Zone? ✓ No Uni		Workers Presen	t? Yes No	Unk
(F11) Location of the Crash	related to Work Zone	Indivoya ((F12) Type	of Work Zone		
Law Enforcement Present a	at Work Zone? Law Enforcement V	ehicle Only	School Bus	Related? irectly Involved	Yes, Indirectly Involv	ved ∏No
STRUCK V2. V1 PUSHED MINOR DAMAGE.	7 VZ INTO VS. ALL VEI	NOLES HAD		HJTHINS DR.	COMORESS STREET S SKYWAY DRIVE	SOME STATES
Witness Last Name	First	MI	Address		City	State Zip
Witness Last Name	First	MI	Address	11000	City	State Zip
Non Vehicle Property Dama	age Description			Sta	ate City or Town	Utilities Private
Property Owner Name			Address		City	State Zip
Non Vehicle Property Dama	age Description			Sta	ate City or Town	Utilities Private
Property Owner Name			Address		City	State Zip
Reporting Officer THOMAS B. REAGAN	Ba 9:	adge# Report 9/8/20		Approved By Sgt. Bowden		Approved Date 9/8/2010
Maine Department of Publ			Page 1		Form 13:20A	Revised January 2010

Last Modified: 9/8/2010 07:21

1 '		uniber 1998			ST	ATE (OF MAII	VΕ	CRA	\SF	IRE	POF	RT				UN	IIT P	AGE
Unit	ID 1	☐ Hit F	Run?	VIN 1P3ES	46C2YD539	79	Licens *	e Plat	e	State ME	(U1) U 1 - P a			r				***************************************	**************************************
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1 '		icle Mak	<u> </u>					1	hicle Y	ear) Vehic		or					
15 - (U4)		DGE cle Confi	guration				······		000 WR 01	GCW		Greer	1						
Vebi	ola L	lac G or l	More Sea	ate 2	HAZNA	AT Placard	tart 2	\/s		dl 000,	is. Directio		<u></u>	- 26,00 nbound		License de la constante de la	> than		0 lbs.
				res 🗌	No No	, months ma	Yes No		☐East	bound		Nestbo	ound		ot on l	Roadwa		en encera	nown
			tion Veh				Exempt Vehic	cle Er	nergen 	cy Ver	nicle Re	spond	ing to S	scene '	·?	Ye	s [No	
Exte	nt of	Damage)N	o Dama	ge Observed	Mi	nor Damage		√ F	unctio	nal Dar	nage		Tov	wed D	ue to D	isablin	g Dam	age
(U6) 12 -		t Damag	ed Area	, , , , , , , , , , , , , , , , , , , ,				(U	7) Mos	t Harm	ıful Eve	nt						***************************************	
(U8)	Pre	Crash A									ıg Circu	ımstan	ces - V	'ehicle					
			adway of Events	1				1	- None 10) Se	_	e of Eve	ents 2							
(U10) Se	auence d	of Events	3				- -	10) Sec	auence	e of Eve	ents 4							
						51l	er 🗸 Active		,				li ion	nse Cla	202	ndorse	manta	Restr	dating
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DRI\ *	/ER	Last Nar	ne		First Na	me		1	RIVER Me*	Addre	SS			City	ý		Sta	te Z	Zip
Citat	ion ì	Vumber	Pendir	ng 🗌				Vi	olation	1				Viola	ation 2				
OWN	VER	Last Nai	me (skip	if same a	as Driver) First	Name	MI	4 .	NNER ME*	Addre	SS			City			Stat	e Z	ip
(D1)	Driv	er Distra	cted By					(D	2) Con		at Time		sh						
(D3)	Driv	er Action	ıs at Time	e of Cras	.h 1						y Norr		f Crash	12					
14 - Alcoi			oo Clos	ely st Not G	iven []Tes	st Refused	 ∏Bloc	d						Alcoho	I BAC	Result			
	Brea	ith [Urine		Other Chemica	al Test (Not i	Field Sobriety or f	°ВТ)			Result	Pendi	ng						
Drug		[Urine		Other	st Refused	Bloc		ug Tes			Laured	sitive	Cymani	legativ	/e [Pend	gnit	
(D4)	Non	Motorist	Location	n at Time	of Crash			(D	5) Non	Motor	ist Actio	on Prio	r to Cr	ash					
(D6)	Non	Motorist	Action a	t Time o	f Crash 1			(D	6) Non	Motor	ist Acti	on at T	ime of	Crash	2				
(D7)	Ped	estrian N	laneuver	S				(D	8) Bicy	clist M	aneuve	ers						***************************************	
-	PE	RSON TY	PE 1-Drive	er, 2-Pass	enger, 3-Pedes	trian, 6-Drive	er/Owner, 7-Bio	ycle, 8-	-Passen	ger/Ow	ner, 24-	Last Kn	own Op	erator 2	25-Last	Known	Operato	r/Owne	r
1-Fro	T ROV ont Ro cond F	w 1-Let	T POSITION t (driver)	1_Cloor	POSITION OTHER per Section of Cab Enclosed Cargo A	truck1-Not Ar	oplicable 1	-Not An	INT SYS		cle Occup	1-Am	RY TYPE putation eding	1	NJURY / -Face -Head	AREA	1-Fatal	DEGRE	
3-Thi 4-Fo	ird Ro urth R	w 3-Rig ow 4-Oth	jht ner	3- Unei 4-Traili	าclosed Cargo Area าg Unit	4-Deploy	yed - Front 3 yed - Side 4	-Should -Should	er and La er Beit Oi	ip Belt U nly Used	sed	3-Bro 4-Bu	ken Bon	es 3 4	-Neck -Back -Arm(s)		3-Nonir	ncapacita ble Injury	iting
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1-No	CTED t Eject ected F	ed Partially	HELMET 1-DOT-Co 2-Other H	ompliant Mo	otorcycle Helmet	Combina 7-Deploy	yment - Curtain	-Child R -Child R 0-Boost	testraint - testraint - er Seat	Rear Fa Used In	correctly		mplaint c	uises 8 of Pain 9 1		Body	2-Individ	er Observ dual Stat cal, Parar	ement
	ected T		3-No Helr						Restrain							AMB	Observa CODES -		ie shee
Persor Type					and Pedestrians	Sex (M,F,U)	DOB	Seat Pos	Seat Pos	Seat Pos	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Ami Cod
1	Las *	uvame, Fi	rst Name, I	vii		М	04/03/86	Row 1	1	Other	-	1	3		5			1	
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Form 13:20A Revised January 2010

- 1	Report i 10-00 2	Number 21998		ST	TATE C	F MAIN	IE (CRA	ιSΗ	RE	POF	RT				UN	IT P	٩G
-	Unit ID 2		Run?	VIN WDBUF87X28B24	16788	License *	Plate			(U1) Ur 1 - Pa			r					
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Ł	, ,	hicle Mak		1			Ver 20	nicle Ye	ear		Vehic	cle Col	or					
٠		ERCEDES hicle Confi						WR or		R							00.000	N. H.
-	Vehicle	Has 9 or	More Se	ats? HAZN	/AT Placard	ed ?	Vel		000 lb ravel E	s. Direction	1	0.001 - North	bound	 I		outhbo	26,000 und) 10S
	(115) Sn	ecial Fund		Yes No	hanna	∕es No	n Em		oound cv Veh	icle Re	Vestbo			ot on R ?	oadwa	ıy [Unkı	าดพ
	1 - No	Special I	Functio			Exempt Vehicl			-,						Ye	s [No	
		of Damage		lo Damage Observed	Mir	or Damage				nal Dan			Tov	wed Du	e to Di	sabling	g Dama	age
- 1	(U6) Mc 12 - Fr	ost Damag ont	jed Area							ful Eve								
1	. /	e Crash A lowing r e					1.) Cont None		g Circu	mstan	ces - V	'ehicle					
		Sequence					(U1	0) Sec	quence	of Eve	nts 2							
-	(U10) S	Sequence	of Events	3 3			(U1	0) Sec	quence	of Eve	nts 4			***************************************				·····
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	DRIVEF	Last Kno R Last Nai	own Ope me	rator * First N	ame			IVER	uspen Addres		ME	C	Cit	<u> </u>		Sta	A te Z	(ip
l	*	n Number	Pendi	ng 🗍				1E *	1				Viol	ation 2	***************************************			
				if same as Driver) Firs	t Name	MI		VNER /					City			Stat	e Zi	ip
L	*			3000 00 DOVO() 1 83	, rostro	4988	* [∕E*		at Time	of Cro	ch					- 4000	·r·
l	` ,	iver Distra					1 -	Appa	renti	y Norn	nal		<u>.</u>					
	(D3) Dri	iver Actior	ns at Tim	e of Crash 1			(D3	3) Drive	er Actio	ons at 1	ime o	f Crast	12					
	Alcohol Bre	Test eath [T∈	est Not GivenTe Other Chemic	st Refused al Test (Not F	Blood	16 3	Alcoho	ol Test	Result	Pendi	ng	Alcoho	I BAC	Result			
	Drug Te		To Turine	est Not Given Te	st Refused	Blood	i Dri	.ig Tes	t Resu	lt	Po	sitive		Vegativ	e [Pend	ding	
-	(D4) No	on Motoris		n at Time of Crash			(Dé	š) Non	Motor	ist Actio	on Prio	r to Cr	ash					
	(D6) No	on Motoris	t Action a	at Time of Crash 1			(D6	3) Non	Motor	ist Actio	on at T	ime of	Crash	2				
	(D7) Pe	edestrian N	Maneuve	rs			(D8	3) Bicy	clist M	aneuve	rs	<u></u>						
	P	ERSON TY	PE 1-Driv	er, 2-Passenger, 3-Pede	strian, 6-Drive	r/Owner, 7-Bicy	cle, 8-l	Passen	ger/Ow	ner, 24-l	_ast Kn	own Op	erator 2	25-Last ł	Known (Operato	r/Owne	r
	SEAT RO	Row 1-Le	T POSITIO	1-Sleener Section of Cat	/truck)1-Not Ap	plicable 1_	Vot Ann	NT SYS1 licable			1-Am	RY TYPE	1	NJURY A I-Face	REA	1-Fatal	DEGRE	Ε
	2-Second 3-Third F 4-Fourth		ght	2-Other Enclosed Cargo 3- Unenclosed Cargo Are 4-Trailing Unit	Area 2-Not De a 3-Deploy	red - Front 3.	Shoulde	sed - Mo er and La er Beit Or	p Belt U		ant 2-Ble 3-Bro 4-Bu	oken Bon	es 3	?-Head 3-Neck I-Back		3-Nonir	acitating Icapacita ble Injury	
	5-Other I	Row 5-Ur	nknown	5-Riding on Motor Vehicl (non-trailing unit)	e Ext 5-Deploy (knee, ai	red - Other 5- r belt,) 6-	ap Belt	t Only Us nt Used -	sed		5-Co 6-Sh	ncussion ock	. 5 6	5-Arm(s) 5-Leg(s)		5-No In	jury	
-	EJECTE	ED O	HELMET	6- Unknown USE	6-Deploy Combina	ition 8-	Child Re	estraint - estraint -	Rear Fa	cing	8-Ab	ziness rasion/Br	uises 8	-Chest St 3-Internal		1-Office	' INFO S r Observ dual Stat	atior
-	1-Not Eje 2-Ejected 3-Ejected	d Partially	2-Other I		7-Deploy		-Booste			correctly	10-0			3-Entire Bo 10-Other	ody		al, Parar	
	•	-	3-No Hel												AMB	CODES	see cod	le sh
	Type	nclude Driver ast Name, F		rs, Bicyclist, and Pedestrians Mi	Sex (M,F,U)	DOB	Seat Pos Row	Seat Pos	Seat Pos Other	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Ar Co
	6 *				М	11/08/66	1	1			1	3		5			1	
-	And the state of t																	
	NAME OF TAXABLE PARTY.					And the second s		are the same and t						-				The second secon
-	VERNOLED CO.					distribution of the second of								-				Total Control of the
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-					ta construction of the con	Appropriate Association								42.5	04 ==			
ĺ	Maine 🛭	Departme	nt of Pu	blic Safety		F	age :	3					For	m 13:2	ua Re	vised .	Januai	ry 20

10-0021998	STA	ATE OF M	AINE	CRA	\SH	RE	POF	RT				UN	IIT P	AGE
Unit ID Hit Run?	VIN 1GCGG25C491133		cense Plat	te		(U1) U 3 - P a			1	***************************************				Done
No Insurance NA		ompany Name				L	suran	ce Polic		nber			***************************************	
(U2) Vehicle Make			1	ehicle Y	ear	(U3		le Colo	or			***************************************		
(U4)Vehicle Configura	ìon		G'	VWR or < 10.		R		0,001 -	28.00	O Ibe	——	> than	26.00	n Ihe
Vehicle Has 9 or More	Seats? HAZMA	T Placarded ?		ehicle T East	ravel D	Direction	barrent	North	bound		- tomored	outhbo	und	nown
(U5) Special Function 1 - No Special Func		Exempt	Vehicle Er	nergen		icle Re	spondi	ng to S	Scene 3	?	[]Ye	s [No	
Extant of Damago	No Damage Observed	✓ Minor Dam	age	F	unctio	nal Dar	nage		Tov	ved Du	e to Di	sablin	g Dam	age
(U6) Most Damaged A	rea		(U	17) Most	t Harm	ful Eve	nt	·····			•			
(U8) Pre Crash Action				i9) Coni - None		g Circu	mstan	ces - V	ehicle					- <u> </u>
1 - Following roads (U10) Sequence of Ev				- None (10) Sec		of Eve	ents 2							
(U10) Sequence of Ev	ents 3	···········	(U	110) Sed	quence	of Eve	ents 4					·		
☑ Driver Bicycle		se Number 🗸 A	ctive N		se [] F Suspen		State ME	Licer C	nse Cla	iss E	ndorse	ments	Rest	ictions
DRIVER Last Name	First Nar	ne		RIVER ME*	Addres	SS .		L	City	f		Sta	te Z	Zip
Citation Number Pe	nding [olation	1				Viola	ation 2				
OWNER Last Name (s	kip if same as Driver) First	Name MI	1	WNER	Addres	BS		.,	City			Stat	e Z	ip
(D1) Driver Distracted	Ву		(D)	2) Con - Appa				sh					***************************************	
(D3) Driver Actions at	Time of Crash 1			3) Drive				Crash	2			 		
Alcohol Test		Refused	Blood	Alcoho	ol Test	Result	Pendi	na	Alcoho	I BAC	Result			
Drug Test	- Land	Test (Not Field Sobrie Refused		rug Tes				sitive		legativ	e []Pend	ding	
	ation at Time of Crash		(0)5) Non	Mator	ist Action	on Prio	r to Cra	ash					
(D6) Non Motorist Acti	on at Time of Crash 1)6) Non	Motor	ist Actio	on at T	ime of	Crash :	2				
(D7) Pedestrian Mane	uvers		(0	8) Bicy	clist M	aneuve	ers							
PERSON TYPE 1	Driver, 2-Passenger, 3-Pedestr			-Passen	ger/Ow	ner, 24-								
SEAT ROW SEAT POS 1-Front Row 1-Left (driv 2-Second Row 2-Middle		AIRBAG DEPLOYE ruck)1-Not Applicable a 2-Not Deployed	1-Not An	AINT SYS [*] oplicable Used - Mo		اه (۱۹۰۰	1-Am	RY TYPE putation eding	1-	IJURY A -Face -Head	REA	1-Fatal	DEGRE	
3-Third Row 3-Right 4-Fourth Row 4-Other	3- Unenclosed Cargo Area	4-Deployed - Front	3-Should	ter and La ter Belt Or	ip Belt U: nly Used	sed	3-Bro 4-Bur	ns Tis	es 3- 4-	-Neck -Back		3-Nonir 4-Possi	capacita ble Injun	iting
5-Other Row 5-Unknown 6-Unknown	5-Riding on Motor Vehicle I (non-trailing unit) 6- Unknown	Ext 5-Deployed - Other (knee, air belt,) 6-Deployed -	6-Restra	elt Only Us iint Used - Restraint -	Other	l Egoino	6-Sho	ncussion ock ziness	6	-Arm(s) -Leg(s) -Chest S	tomach	5-No in	•	OURCE
1-Not Ejected 1-Do	MET USE DT-Compliant Motorcycle Helmet	Combination 7-Deployment - Cui	8-Child F	Restraint - Restraint -	Rear Fa	cina	8-Abr	asion/Bromplaint o	uises 8- f Pain 9-	-Internal		1-Office 2-Indivi-	r Obsen dual Stat al, Para	ration ement
A E	ner Helmet Helmet			Restrain							AMB	Observ CODES	ation	
Person Include Driver, Passe Type Last Name, First Na	ingers, Bicyclist, and Pedestrians	Sex (M,F,U) DOE	Seat Pos Row	Seat Pos	Seat Pos Other	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	Injury Degree	Injury Type	Injury Area	inj info Source	Amb Code
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Form 13:20A Revised January 2010

2010-18451C

STATE OF MAINE CRASH REPORT

FIRST PAGE

Reporting Agency ME0030500		Report Num 10-002274		9	ash Date /1/2010	Crash Time 12:15	At Scene 9/1/20		At Scen 12:15	ie iiiie
City or Town Portland			eet or High NGRESS S			Nearest Interse	cting Street			Off Roa
Direction FROM N	earest Intersection			Distance Fr	om Nearest Inter ☐ Feet	I MILLOUIS CO. O. O.		Longitud	е	
Node 1 18490	Node 2	Assessed	Measuren	nent Node	Distance to So	cene Posted Speed	1	Unknown	invered.	Posted 2
(F1) Type of Crash				, , , , , , , , , , , , , , , , , , , 	(F2) Type of I		. 1 44 4.5	ł		
2 - Rear End / S (F3) Weather Cond		www.			(F4) Light Cor	ndition		***************************************		
1 - Clear (F5) Road Grade				***************************************	1 - Daylight	rface Condition				
1 - Level					1 - Dry					
(F7) Traffic Contro 1 - Traffic Signa					Traffic Contro	I Device Operation	<u>al (</u> pre-crash I Yes)? No	ПUr	ık
(F8) Location of Fi		***************************************	μ		Total Damage	over Threshold?	□ □Ye:	s V 1	herman d	
(F9) Contributing (Dircumstances - En	nvironment 1			(F9) Contribu	ting Circumstances	house		10	
(F10) Contributing	Circumstances - R	Road 1			(F10) Contrib	uting Circumstance	s -Road 2			
in or Near a Const	ruction, Maintenan	nce, or Utility	Work Zone¹	? 		orkers Present?	Yes	∏No	——— ПUr	 nk
(F11) Location of t	he Crash related to	hd		Lancard W. 177	(F12) Type of	Work Zone	homeonik	Income I	January 1	
Law Enforcement	 Present at Work Zo Present ☐Law	one? / Enforcemen	nt Vehicle O	nly \square No	School Bus R		Yes, Indirec	tly Involved		No
VEHICLE 1 SAID THE ROAD AT SO AND WAS DISTI	OF CONGRESS SO HE WAS LOOK! OMEONE HE WARACTED. HE SA!	ING OFF TO S GOING T	THE RIGIO OF THE R	HT SIDE O RIDE TO,						
VEHICLE 2 WAS INTERSECTION VEHICLE 1 SAID THE ROAD AT SO	OF CONGRESS S HE WAS LOOK! OMEONE HE WA	ING OFF TO S GOING T	THE RIGIO OF THE R	HT SIDE O RIDE TO,		SKYWAY DR CONGRE	→ MJT	CHRIS DR	SALE SALE	
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Last Modified: 9/2/2010 07:20

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(U2) V				<u></u> е			******								************	1	nicle Y	ear				le Co	lor							
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(U5) S	Spe o S	cial F peci	uni al	ction F un	ı Vel ctio	nicle n							Exe	mpt V	ehicle	Em	iergen	cy Ve	hicle I	Resp	ondi	ng to	Scene	9?		Y	'es	□No)	
Exten	t of	Dam	ıagı	∋		40 E)ama	ge Ob	oserv	/ed	[∠ Mi	nor I	Dama	ge		П	uncti	onal D	ama	age		Пт	owe	d Du	e to [Disabli	ng Dai	mag	je
(U6) N			na(jed	Area											(U7	') Mos	t Harr	nful E	vent										
12 - F (U8) F			hΑ	ctio	าร									······································		(US	B) Con	tributi	ng Cir	cum	stan	ces - \	/ehicl	e						
1 - Fo	ollo	win	g r	oad	way												None		o of E	n	to 2						***************************************			
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(U10)	Se	quen	ce	of E	vent	s 3										(U1	0) Se	quen	e of E	ven	ts 4									
V		er Last		ycle				trian[Licen:	se N	umbe	er	√ Ac	tive	No	Licen	se[] Suspe		it St		Lice C	nse (Clas	s Ei	ndors	ement	s Res	tric	tio
DRIVE	Lucian					- att	;		Fir	st Nar	ne				M		IVER			1-1			C	ity			St	ate	Zip	i
* Citatio	on N	Vumt	 oer	F	end	ng											4E* lation	1				,, .,, <u>.</u>	Vid	olati	on 2		***************************************			
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(D1) E)riv	ar Di	stra	cte	d By											1.	?) Con • App a					sn 								
(D3) C	Oriv	er Ac	tior	ns a	t Tín	ie of	Cras	sh 1								(D3	3) Driv	er Ac	ions a	it Ti	me of	Cras	h 2							
Alcoh			1				Not G			Test					Blood		Alcoh	ol Tes	t Res	ult P	endir	ng	Alcol	hol l	ЗАС	Resu	lt			
Drug	Brea Tes					est l	Not G	Siven				used		VANCOUS .	y or PB Blood		ıg Tes	st Res	ult		TP0	sitíve		Ne	gativ		ПРе	ndina		
(D4) N	Van	Mot	oris	warened	Irine catic		Lannet	Other e of C								(D:	5) Non	Moto	rist A	 ction			Garage	1,10			L_1. 0,			
(D6) N	Vlan	Mot	nrio	· Ac	tion	ot T	ime	of Cra	ch 1							(D4	3) Non	Moto	rict A	rtion	at T	ime o	Crae	h 2						
								1 010.								Ĺ														
(D7) F	² ed	estría	an N	/lan	euve	rs										(D8	3) Bicy	clist l	Maneu	iver	3									
								senger						vner, 7			Passer NT SYS		wner, 2	!4-La		own O			Last I JRY A		Opera	tor/Owi		-
SEAT 1-Fron 2-Seco	nt Ro	w Row	1-Le 2-Mi	ft (dr ddle	SITIC ver)	;	1-Sleep 2-Othe	per Sec	ction o	f Cab (t argo Ar	ruck) ¹ ea ²	-Not A	pplica eploy	ble ed	1-N 2-N	lot App Ione U	licable sed - Mo	otor Veh	icle Oc	cupar	1-Am t 2-Ble	putation eding	1	1-Fa 2-H	ace ead		1-Fata 2-Inca	al apacitatir	ng	
3-Third 4-Four 5-Othe	rth R	ow	3-Ri 4-Of		vn		4-Traili	nclosed ng Unit	t T	jo Area ′ehicle l	4	-Deplo -Deplo -Deplo	yed -	Side	4-8	houlde	r and La r Belt O t Only U	nly Use			4-Bu	ken Bo ns ncussio		3-N 4-B 5-A				ilncapac sible Inji Injury		g
6-Unkr			5-01	IKI IOY	VII.	(ailing ur		CHOICE	6	knee, a -Deplo	ir beli yed -		6-R 7-C	lestrair hild Re	t Used	- Other - Forwa		g	6-Sho 7-Diz	ock ziness		6-Le 7-C	eg(s) hest S	tomach		RY INFO		
EJECT 1-Not I	Eject	ted		1-1	OT-C		liant Mo	otorcycl	ie Hel	met		combin -Deplo		t - Curt	ain 9-C	hild Re	estraint estraint			tly		mplaint	ruises of Pain	9-E		ody	2-Indi	cer Obse vidual S tical, Pa	atem	ner
2-Ejeci 3-Ejeci					Other No He	Helme Imet	∍t										er Seat Restrair	t - Othe	r					,,,	outo	A 845		vation		
Person	Incl	ude D	river	Pas	senge	rs, Bi	cyclist,	and Pe	edesti	ians		Sex	`	DOB		Seat Pos	Seat	Sea Pos		ag E	jected	Restrai	nt Helm	et I	njury	Injury	/ Injury	inj in	o .	An
Type	Las	t Nam	e, F	irst N	ame,	Mi						(M,F,U	T			Row	Pos	Othe	L nebio	yea		Syster 3	US	7	egree 5	Type	Area	Т	,e '	Co
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	J2) V6			ke			***************************************	».···	Vei	nicle Y	ear) Vehi		or					
	8 - F (J4)Ve			nfigurat	lion					WR or	GCW	R								
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Ĺ					Ye	s No		Yes No	<u> </u> E]East	bound	V	Vestbo	ound		ot on F	Roadwa		Unk	nowr
				nction ' Func		9		Exempt Vehicl	e En	nergen	cy ven	icle Re	spona	ing to :	Scene	<i>`</i>	∏Y€	s [□No	
E	xtent	of D	ama	ge [No	Damage Observed	✓ Mi	nor Damage		П	unction	nal Dar	nage		Пточ	wed Di	ue to D	isablin	g Dam	age
	J6) M - Re)ama	aged A	rea				(U)) Mos	t Harm	ful Eve	nt							
(1	J8) Pi	re Cr		Actions								g Circu	ımstan	ces - V	/ehicle				***************************************	
				in traf						None		of Eve	ents 2				·····			
	·			of Eve					(4.1)	IN\ Sar	Honce	e of Eve	ante d							
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	V D₁	r iver La		icycle [nown C		Pedestrian License r	Numbe	r ✓Active [_] No		sel F Suspen	Permit : ded	State ME	C Lice	nse Cl	ass E 0	ndorse	ments	Resti 0	iction
D *	RIVE	R La	st N	ame		First Name	}	N	ŧ	NE*	Addres	38			Cit	γ		Sta	te Z	Zip
C	itatio	n Nu	mbe	r Pe	nding					lation	1	***************************************	·····		Viol	ation 2				
· *		R La	ist N	ame (s	kip if s	ame as Driver) First Na	ame	MI	1	VNER	Addres	38			City			Stat	e Z	ip
(E)1) Di	river	Dist	racted	Ву				(D:	2) Con		at Time		sh					************	
([03) Di	river	Action	ons at	Time o	of Crash 1						ons at		f Crasl	n 2					
А	Icoho				Test	Not Given Test F		Blood	11 1	Alcohr	nl Test	Result	Pendi	na	Alcoho	ol BAC	Result			
D	Br rug T	eath est		Uri		Other Chemical T Not Given Test F		Field Sobriety or Pf	37)		t Resu		200000000		L	. (70		
			otori	☐ Úri	ine	Other t Time of Crash		terment .		5) Mon	Motor	ist Actio		sitive		vegativ	/e []Pen	ang	
Ĺ	,									,										
([)6) N	on M	otori	ist Action	on at	ime of Crash 1			(DI	3) Non	Motor	ist Acti	on at I	ime of	Crash	2				
([07) Pe	edes	trian	Mane	uvers				(Di	B) Bicy	clist M	aneuve	ers							
						2-Passenger, 3-Pedestria						ner, 24-		own Op		25-Last			r/Owne	
	SEAT R I-Front 2-Secor	Row	1-1	EAT POS Left (drive Middle		SEAT POSITION OTHER 1-Sleeper Section of Cab (true 2-Other Enclosed Cargo Area	k)1-Not Ap 2-Not D	oplicable 1-l	Vot Ann	NT SYS licable sed - Mo		cle Occup	1-An ant 2-Ble	nputation eding	1 1	I-Face 2-Head	ALLEN .	1-Fatal 2-Incap	acitating	
3	3-Third 1-Fourth 5-Other	Row h Row	3-f 4-(Right Other Unknown		3- Unenclosed Cargo Area 4-Trailing Unit 5-Riding on Motor Vehicle Ext	4-Deplo	yed - Front 3-: yed - Side 4-:	Shoulde Shoulde	er and La	ıp Belt U: nly Used	sed	3-Bro 4-Bu	oken Bor	4	3-Neck 1-Back 5-Arm(s)		3-Nontr 4-Possi 5-No In	ncapacita ble Injur jury	ating V
1 6	3-Unkno	own	J-((non-trailing unit) 6- Unknown		ir belt,) 6- yed - 7-	Restrair Child R	nt Used - estraint -	Other Forward		6-Sh 7-Diz		6	S-Leg(s) 7-Chest S 3-Internal		INJURY	/ INFO S er Obsen	
	EJECTE 1-Not Ej 2-Ejecte	jected		1-DC	MET US DT-Com her Helr	oliant Motorcycle Helmet		yment - Curtain 9 10	Child R -Booste	estraint - er Seat		correctly		mplaint o	of Pain 9			2-Indivi 3-Medi	dual Stat cal, Para	tement
	3-Ejecte	ed Tota	ally		Helmet			11	-Child	Restrain								Observ CODES		de she
	VOR			er, Passe First Nar	-	Sicyclist, and Pedestrians	Sex (M,F,U	DOB	Seat Pos Row	Seat Pos	Seat Pos Other	Air Bag Deployed	Ejected	Restrair System	nt Helmel n Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Am Cod
T	6 3		uilio,	, not ivel	IVII		F	12/17/79	1	1	2,,,01		1	3		4	9	3	2	
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	the characters of residence of the																4	tion of the second		
M	aine	Depa	artm	ent of	Publi	Safety		F	age	3					For	m 13:2	20A Re	vised.	Janua	ry 20

2010-23325C

STATE OF MAINE CRASH REPORT

FIRST PAGE

ME0030500	Report Number 10-002825		Crash Date 10/27/2010	Crash Time 07:28	At Scene 10/27/2		At Scene Time 08:01
City or Town Portland	Street o	r Highway RESS ST		Nearest Inters	secting Street		□ Off F
Direction FROM Nearest ☐ At Intersection ☐ No	Intersection to Crash Site	Distance F West	From Nearest Inte			Longitude	е
	Node 2 Me	asurement Node	1	cene Posted Spenths Miles 3	hamand	Unknown N/A	Not Posted
F1) Type of Crash 4 - Intersection Move	ment		(F2) Type of 4 - Four Le	Location g Intersection			
(F3) Weather Condition			(F4) Light Co	ondition			
4 - Rain (F5) Road Grade			1 - Dayligh (F6) Road St	t urface Condition			
1 - Level			2 - Wet				***************************************
(F7) Traffic Control Device 1 - Traffic Signals (Sto			Traffic Contr	of Device Operation	onal (pre-crash Yes	i)? No	Unk
(F8) Location of First Harr			Total Damag	e over Threshold	? ✓Yes	. П	do.
(F9) Contributing Circums	stances - Environment 1		(F9) Contribu	uting Circumstance			4 0
(F10) Contributing Circum	nstances - Road 1		(F10) Contrib	outing Circumstan	ces -Road 2		
n or Near a Construction	, Maintenance, or Utility Work	Zone?		Vorkers Present?	☐Yes	ПNо	
(F11) Location of the Cras		7110		of Work Zone		Lpun!	January O'CA
Law Enforcement Presen		aicle Only	School Bus I	Related?	Yes, Indirect	ilv Involved	∏No
VEH 2 DID NOT NOTION	OM CONGRESS ST. ON TO CE VEH 1. VEH 1 STRUCK	O SKYWAY DR (VEH 2. VEH 2					
TAKE A LEFT TURN FR VEH 2 DID NOT NOTIC	OM CONGRESS ST. ON TO	O SKYWAY DR (VEH 2. VEH 2		SKYWAY DR	CONGRESS ST	HATCHINS	DR
TAKE A LEFT TURN FR VEH 2 DID NOT NOTIC	OM CONGRESS ST. ON TO CE VEH 1. VEH 1 STRUCK	O SKYWAY DR (VEH 2. VEH 2		<i>D</i>	w to the second		DR
TAKE A LEFT TURN FR VEH 2 DID NOT NOTIC FAILED TO YIELD THE	OM CONGRESS ST. ON TO CE VEH 1. VEH 1 STRUCK E RIGHT OF WAY TO VEH	O SKYWAY DR (VEH 2. VEH 2 1.	l Address	<i>D</i>	CONGRESS ST	S	
TAKE A LEFT TURN FR VEH 2 DID NOT NOTIC FAILED TO YIELD THE Witness Last Name Witness Last Name	EOM CONGRESS ST. ON TO CE VEH 1. VEH 1 STRUCK E RIGHT OF WAY TO VEH First	O SKYWAY DR (VEH 2. VEH 2 1.	l Address	<i>D</i>	congress st	S	tate 2
Witness Last Name Witness Last Name Won Vehicle Property Dar	EOM CONGRESS ST. ON TO CE VEH 1. VEH 1 STRUCK E RIGHT OF WAY TO VEH First	O SKYWAY DR (VEH 2. VEH 2 1.	l Address	2370 CONGRESS 51	congress st	S S Town	tate Z
TAKE A LEFT TURN FR VEH 2 DID NOT NOTIO FAILED TO YIELD THE	First mage Description	O SKYWAY DR (VEH 2. VEH 2 1.	II Address	2370 CONGRESS 51	congress str City City City City City	S S Town S	tate Z
Witness Last Name Witness Last Name Witness Last Name Non Vehicle Property Dar	First mage Description	O SKYWAY DR (VEH 2. VEH 2 1.	II Address	2370 CONGRESS ST	City City City City City	S Town S Town S	tate Z tate Z Utilities Pri

Last Modified: 10/27/2010 10:49

(U5) Special Function Vehicle	.000 lb d Jnknov No eamage
No Insurance NAIC	d Jnknov No ramage
Compared to the configuration Compared to the configuratio	d Jnknov No ramage
CU4)Vehicle Configuration	d Jnknov No ramage
Vehicle Has 9 or More Seats? Yes	d Jnknov No ramage
Yes	Jnknov No ramage
Tower Description Tower Distracted By Tower Distract Test Not Given Test Refused Blood Drug Test Result Pending Negative Pending	amage
(U6) Most Damage Observed Million Damage Variational Damage Industry Due to Disabling D (U6) Most Damaged Area (U7) Most Harmful Event 1 - Front Passenger Corner (U9) Contributing Circumstances - Vehicle 1 - Rone (U10) Sequence of Events 2 (U10) Sequence of Events 3 (U10) Sequence of Events 4 Violation Sequence of Events 3 (U10) Sequence of Events 4 Violation Parisity Variational Damage Variational Damage	
1 - Front Passenger Corner (U8) Pre Crash Actions 1 - Following roadway (U10) Sequence of Events 1 (U10) Sequence of Events 3 (U10) Sequence of Events 2 (U10) Sequence of Events 3 (U10) Sequence of Events 4 Driver Bicycle Pedestrian License Number Active No License Permit State License Class Endorsements Recompany Recompany	estrictiv
(U8) Pre Crash Actions (U9) Contributing Circumstances - Vehicle 1 - None	estricti
(U10) Sequence of Events 1 (U10) Sequence of Events 2 (U10) Sequence of Events 3 (U10) Sequence of Events 4 Driver	estricti
(U10) Sequence of Events 3 (U10) Sequence of Events 4	estricti
✓ Driver Bicycle Pedestrian License Number ✓ Active No License Permit State License Class Endorsements Record No License Permit Record Record No License Permit Record Permit	estricti
Cast Known Operator Suspended ME C O O	estriction
DRIVER Last Name First Name MI DRIVER Address City State * ME* Citation Number Pending Violation 1 Violation 2 OWNER Last Name (skip if same as Driver) First Name MI OWNER Address City State * ME* (D1) Driver Distracted By (D2) Condition at Time of Crash 1 - Apparently Normal (D3) Driver Actions at Time of Crash 1 (D3) Driver Actions at Time of Crash 2 Alcohol Test Test Not Given Test Refused Blood Blood Drug Test Result Pending Alcohol BAC Result Drug Test Test Not Given Test Refused Blood Drug Test Result Pending Pending	
Citation Number Pending Violation 1 Violation 2 OWNER Last Name (skip if same as Driver) First Name MI OWNER Address City State * ME* (D1) Driver Distracted By (D2) Condition at Time of Crash 1 - Apparently Normal (D3) Driver Actions at Time of Crash 1 (D3) Driver Actions at Time of Crash 2 Alcohol Test Test Not Given Test Refused Blood Original Alcohol Test Result Pending Drug Test Test Not Given Test Refused Blood Drug Test Result Pending Drug Test Drug Test Drug Test Drug Test Drug Test Pending P	Zip
OWNER Last Name (skip if same as Driver) First Name * ME* (D1) Driver Distracted By (D2) Condition at Time of Crash 1 - Apparently Normal (D3) Driver Actions at Time of Crash 1 (D3) Driver Actions at Time of Crash 1 Alcohol Test Test Not Given Test Refused Blood Alcohol Test Result Pending Drug Test Test Not Given Test Refused Blood Drug Test Drug Test Test Not Given Test Refused Blood Drug Test Result Test Result Positive Negative Pending	
* ME* (D1) Driver Distracted By (D2) Condition at Time of Crash 1 - Apparently Normal (D3) Driver Actions at Time of Crash 1 (D3) Driver Actions at Time of Crash 1 (D3) Driver Actions at Time of Crash 2 Alcohol Test Test Not Given Test Refused Blood Breath Urine Other Chemical Test (Not Field Sobriety or PBT) Drug Test Test Not Given Test Refused Blood Drug Test Result Pending Test Not Given Test Refused Blood Drug Test Result Pending Pending	Zip
1 - Apparently Normal	
Alcohol Test	
Breath Urine Other Chemical Test (Not Field Sobriety or PBT) Drug Test Test Not Given Test Refused Blood Drug Test Result Pending Positive Negative Pending	
Breath Unine Other Chemical Test (Not Field Sobriety or PBT)	
Urine Other	
(D4) Non Motorist Location at Time of Crash (D5) Non Motorist Action Prior to Crash	
(D6) Non Motorist Action at Time of Crash 1 (D6) Non Motorist Action at Time of Crash 2	
(D7) Pedestrian Maneuvers (D8) Bicyclist Maneuvers	
PERSON TYPE 1-Driver, 2-Passenger, 3-Pedestrian, 6-Driver/Owner, 7-Bicycle, 8-Passenger/Owner, 24-Last Known Operator 25-Last Known Operator/O	
SEAT ROW SEAT POSITION SEAT POSITION OTHER AIRBAG DEPLOYED RESTRAINT SYSTEM INJURY TYPE INJURY AREA INJURY DE 1-Front Row 1-Left (driver) 1-Sleeper Section of Cab (trucky1-Not Applicable 1-Not Applicable 1-Not Applicable 1-Not Applicable 2-Second Row 2-Middle 2-Other Enclosed Cargo Area 2-Not Deployed 2-None Used - Motor Vehicle Occupant 2-Bleeding 2-Head 2-Incapacite	ating
3-Third Row 3-Right 3- Unenclosed Cargo Area 3-Deployed - Front 3-Shoulder and Lap Belt Used 3-Broken Bones 3-Neck 3-Nonincap 4-Fourth Row 4-Other 4-Trailing Unit 4-Deployed - Side 4-Shoulder Belt Only Used 4-Burns 4-Back 4-Possible I	
5-Other Row 5-Unknown 5-Riding on Motor Vehicle Ext 5-Deployed - Other 6-Unknown 5-Unknown 5-Riding on Motor Vehicle Ext 5-Deployed - Other 5-Lap Belt Only Used 5-Concussion 5-Arm(s) 5-No Injury 6-No Injury 1-No Injury 1-N	FO SOU!
EJECTED HELMET USE Combination 8-Child Restraint - Rear Facing 8-Abrasion/Bruises 8-Internal 1-Officer Ot 1-Not Ejected 1-DOT-Compliant Motorcycle Helmet 7-Deployment - Curtain 9-Child Restraint - Used Incorrectly 9-Compliant of Pain 9-Entire Body 2-Individual	bservatio I Stateme
2-Ejected Partially 2-Other Heimet 10-Booster Seat 10-Other 10-Oth	n
AMB CODES - see Person Include Driver, Passengers, Bicyclist, and Pedestrians Sex DOB Pos Pos Pos Deployed System Sex Sex Restraint Helmet Injury Injury Injury Injury System Sex Other	e code sh Info A
Lost Name, 1 as Name, Mil	urce C
6 * F 05/01/70 1 1 1 2 4 9 3	2
Maine Department of Public Safety Page 2 Form 13:20A Revised Jan	

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	(U2) V 26 - F			ake)									hicle Y	ear	1 / "	3) Veh		lor		***************************************			
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	Vehicl	le H	as 9	or N	Nore S	eats ?]Yes [No	HAZI	ИАТ F	lacaro	ded ? Yes	No	Ve	hicle T	noon! ravel bound	Directio	herene .	Nor	- 26,0 hboun			Southb		nown
					tion Ve						Exempl	t Vehic	le En	nergen	cy Vel	nicle R	espon	ling to	Scene	?	Пү	35	□No	
	Extent					·····	age Obs	served		—— Пміг	nor Dan	mage		ПЕ	unctio	nal Da	mage			wed Di				age
					ed Are	a							(U	7) Mos										
-	3 - Ce (U8) P	~~~			enger ctions	Side			······	·····			(U	9) Con	tributir	ng Circ	umstar	nces - '	Vehicle)				
	6 - M				turn of Even	te 1								- Non 10) Se	_	e of Ev	ante 2							
	<u> </u>																						~	
	(U10)	Sec	quenc	e o	f Even	ts 3							(U	10) Se	quenc	e of Ev	ents 4							
* SERVICE	V				rcle 🔲 wn Op		estrian 🗌] Lice	ense N	lumbe	er 🔲	Active	No	Licen	se 🔲 l Susper		State ME	Lico C	ense C	lass E		ements	Restr 0	riction
	DRIVE	ERI	Last N	Van	ne			First N	ame	***************************************		ħ		RIVER ME*	Addre	\$\$			Ci	ty		Sta	ite Z	Zip
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	(D1) D	Drive	er Dis	trac	cted By	ſ	· · · · · · · · · · · · · · · · · · ·						(D:				of Cr.	ash						
						ne of Cr											Time (of Cras	h 2					
	Alcoho	ol T	est	116		est Not	Given		st Re			Bloo		Alcoh	ol Test	Resu	t Pend	ing	Alcoh	ol BAC	Resul	t		
	Drug 3	rea Tes				est Not		Aminomi	st Re		Field Sobr	fiety or F		ug Tes	t Resu	ult	Про	sitive		Negativ	re f	Pen	dina	
	(D4) N	Von	Moto	<u>l</u> rist	Urine Location		Other	ash			 		(D	5) Non	Moto	ist Act	on Pri							
	(D6) N	don	Moto	rist	Action	at Time	of Crasi	h 1	· · · · · ·				- (D)	6) Non	Moto	ist Act	on at	fime o	f Crash	12				
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	, ,				laneuv									8) Bicy										
	SEAT I				PE 1-Dri	ON SEA	issenger, T POSITIOI	N OTHER	٦ ,	AIRBAG	DEPLOY			Passen INT SYS		ner, 24	INJU	JRY TYF	E	25-Last INJURY A			or/Owne Y DEGRE	
	1-Front 2-Seco 3-Third	t Roy and F	w 1 Row 2		t (driver) idle	1-Ste 2-Ot	eper Section er Enclose nenclosed (on of Cab ed Cargo	(truck) Area	2-Not De	oplicable oployed yed - Fron	2	Not App None U	olicable Ised - Mo er and La	otor Vehi	cle Occu	oant 2-Bl	nputation eeding oken Bo		1-Face 2-Head 3-Neck			acitating ncapacita	ifina
-	4-Four 5-Othe	th Ro	ow 4	-Oth		4-Tra 5-Rid	ailing Unit ding on Mot	or Vehicl	e Ext	4-Deploy 5-Deploy	yed - Side yed - Othe	er 5	Shoulde Lap Bei	er Belt O It Only U	nly Used sed		4-Bi 5-Ci	ims oncussio	n	4-Back 5-Arm(s)			ible Injury	
	6-Unkn	nown				6- U	-trailing unit nknown	t)	((knee, ai 3-Deploy Combina		7	Child R	nt Used - estraint -	Forward		7-D	nock zziness orasion/E		6-Leg(s) 7-Chest S 8-Internal			Y INFO S	
	EJECT 1-Not E 2-Eject	Eject					Motorcycle	Helmet			yment - Cı	urtain 9	Child R Child R D-Booste	estraint - estraint - er Seat	Used Ir	correctly	9-C		of Pain	9-Entire E 10-Other		2-Indiv	idual Stat cal, Parai	emen
	3-Eject	ted T	otally		3-No He							1	1-Child	Restrain	t - Other						AMB	Observ	ration - see cod	ie she
	Type						st, and Ped	lestrians		Sex (M,F,U)	DC)B	Seat Pos	Seat Pos	Seat Pos	Air Bag Deploye	d Ejecte	Restrai Syster	nt Helme n Use	t Injury Degree	Injury	Injury	Inj Info Source	Am
		Las ∗	t Name	Fir	st Name,	Mi				М	10/19	9/82	Row 1	1	Other	T	1	3		5		<u> </u>	2	
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i	Maine	De	partn	nen	t of Pu	ıblic Sa	fety				1		Page	3				_1	For	m 13:2	20A Re	vised	Januai	ry 20

2010-24169C

STATE OF MAINE CRASH REPORT

FIRST PAGE

Reporting Agency MEMSP0G00	Report N SP10-0	81774		Crash Date 11/8/2010	Crash Time 17:46	At Scene Date 11/8/2010	At Scene Tin 17:47	ne
City or Town Portland		Street or High CONGRESS			Intersection C Skyway Drive	Of Congress St An	d Off	f Road
Direction FROM Neare At Intersection		Site ast West	1	Fom Nearest Inte	and the property of	Longit	ude	
Node 1 18490	Node 2 0	Measure 19210	ment Node		cene Posted Speed https://www.miles.cene		/n Not Post Not Post	
(F1) Type of Crash 2 - Rear End / Sides	swipe			(F2) Type of 4 - Four Le	Location g Intersection			
(F3) Weather Condition 1 - Clear				(F4) Light Co 4 - Dark - I				
(F5) Road Grade				(F6) Road S	urface Condition			
1 - Level (F7) Traffic Control Dev				2 - Wet Traffic Contr	ol Device Operation		processing .	
1 - Traffic Signals (\$ (F8) Location of First H		· · · · · · · · · · · · · · · · · · ·		Total Damac	e over Threshold?	Yes No	Unk	
(F9) Contributing Circui	metanose - Environmor				Iting Circumstances	Yes Environment 2	No	
		11 1						
(F10) Contributing Circ	umstances - Road 1			(F10) Contrit	outing Circumstance	s -Road 2		
In or Near a Construction	on, Maintenance, or Uti		? ∏Ur		Vorkers Present?	 ∏Yes ∏No	Unk	
(F11) Location of the C	rash related to Work Zo	one	ld	(F12) Type o	f Work Zone	Assertantial Secretarial	3-managed	
Law Enforcement Pres				School Bus I		/ tiiiiii		·
Officer Press NARRATIVE V-1 was stopped at		ment Vehicle C		CRASH DIA		Yes, Indirectly Involv	ed No	
						Skyway Delve		
Witness Last Name	Fir	st	M	Address	C	ity	State	Zip
Witness Last Name	Firs	st	M	Address	C	ity	State	
Non Vehicle Property D	Damage Description			I	State	City or Town	Utilities P	Zip
Property Owner Name				Address	C	ity	State	,
	amage Description	LANCES SEARCH LANCES CONTROL SEARCH	LANGE AND SALE.	Address	C State	City or Town		Private Zip
Property Owner Name Non Vehicle Property D Property Owner Name	amage Description			Address Address	State		Utilities P	Private
Non Vehicle Property D		Badge# 4750	Report 11/8 /	Address Date /	State	City or Town	Utilities P	Private Zip Private

Last Modified: 11/8/2010 22:09

SP10-081774 ST	TATE OF MA	INE C	CRAS	Н	REP	ORT	•			U١	IIT P	ΑC
Unit ID Hit Run? VIN 1FTEF14N5RLB26		ise Plate	Sta M		U1) Unit 5 - Pick							
	Company Name						olicy Nu	ımber				
U2) Vehicle Make			icle Year			/ehicle (Color					
18 - FORD (U4)Vehicle Configuration	and the state of t	199 GV	NR or G	CWR	7 - B	rown						
]< 10,00	O lbs.)1 - 26,0			> than		0 lt
Vehicle Has 9 or More Seats ? HAZN	IAT Placarded ? ☐Yes ☐No		iicle Trav Eastbou		74-44-00	N.∐ stbound	orthbour	id Not on I		Southbo av	ound Unk	nov
(U5) Special Function Vehicle 1 - No Special Function	Exempt Vel	y	ergency '		de Resp	onding I			□Y€		No	
Extent of Damage	✓ Minor Damage	;	Fund	ctiona	al Dama	ge	Пто	owed Di	ue to D	isablin	g Dam	ag
(U6) Most Damaged Area		(U7) Most H	armfu	ıl Event							
6 - Rear (U8) Pre Crash Actions		(U9) Contrib	utina	Circum	stances	- Vehicle	<i>z</i>		***************************************		
9 - Starting in traffic	 	1 -	None									
(U10) Sequence of Events 1		(U1	0) Seque	nce (of Event	s 2						
(U10) Sequence of Events 3		(U1	0) Seque	nce (of Eveni	s 4						
✓ Driver Bicycle Pedestrian Lice	nse Number Activ	e No	License	Pe	ermit Sta	ate L	cense C	lass E	Indorse	ements	Rest	rict
Last Known Operator *		tommed	Sus	pend	ed MI			0			0	
DRIVER Last Name First Na *	ame	MI DRI	IVER Ad I E*	ress	3		C	ity		Sta	te 2	Zip
Citation Number Pending		Viol	ation 1				Vic	lation 2				
DWNER Last Name (skip if same as Driver) Firs	t Name MI	0W * !	NER Add	dress	3		Cit	У		Stai	e Z	lip
D1) Driver Distracted By) Condition	on at	Time of	Crash						
(D3) Driver Actions at Time of Crash 1			Appare) Driver A				ach 2	······································				
		(00)	, 10111151 /		· v at 111						·····	
	st Refused Blo al Test (Not Field Sobriety o		Alcohol T	est R	Result P	ending	Alcoh	iol BAC	Resul	1		
Drug Test	water.		g Test R	esult		Positív		Negativ	/e [Pen	dina	
Urine Other (D4) Non Motorist Location at Time of Crash		(D5) Non Mo	otoris	hann			- 5 - 4 - 1				
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \										
(D6) Non Motorist Action at Time of Crash 1		(D6) Non Mo	otoris	t Action	at Time	of Crasi	12				
(D7) Pedestrian Maneuvers	THE STATE OF THE S	(D8) Bicyclis	t Mai	neuvers							
PERSON TYPE 1-Driver, 2-Passenger, 3-Pedes	trian, 6-Driver/Owner, 7-R	icvcle. 8-P	assenger	/Owne	er. 24-La:	st Known	Operator	25-Last	Known	Operato	r/Owne	er
SEAT ROW SEAT POSITION SEAT POSITION OTHER	AIRBAG DEPLOYED	•	IT SYSTEM			INJURY T	YPE	INJURY A			DEGRE	
1-Front Row 2-Second Row 2-Middle 2-Other Enclosed Cargo Are 3-Third Row 3-Right 3-Unenclosed Cargo Are	Area 2-Not Deployed a 3-Deployed - Front	2-None Us	icable ed - Motor \ and Lap Be	/ehicle	Occupant	2-Bleeding 3-Broken	}	2-Head 3-Neck		2-Incap 3-Nonli	acitating ncapacita	ating
4-Fourth Row 4-Other 4-Trailing Unit 5-Other Row 5-Unknown 5-Riding on Motor Vehicle	4-Deployed - Side Ext 5-Deployed - Other	4-Shoulder 5-Lap Belt	Belt Only U	Ised		4-Burns 5-Concus:	sion	4-Back 5-Arm(s)		4-Possi 5-No In	ble injury jury	y `
6-Unknown (non-trailing unit) 6- Unknown EJECTED HEIMETINE	(knee, air belt,) 6-Deployed - Combination	7-Child Re	: Used - Oth straint - For straint - Rea	ward F	na	6-Shock 7-Dizzines 8-Abrasion	s n/Bruises	6-Leg(s) 7-Chest 5 8-Internal			/ INFO S	
1-Not Ejected 1-DOT-Compliant Motorcycle Helmet 2-Ejected Partially 2-Other Helmet	7-Deployment - Curtain	9-Child Re 10-Booster	straint - Use Seat	d Inco	rrectly		nt of Pain			2-Indivi 3-Medi	dual Stat cal, Para	lem
3-Ejected Totally 3-No Helmet		11-Child R	testraint - O						AMB	Observ		ie s
Person Include Driver, Passengers, Bicyclist, and Pedestrians	Sex DOB	Seat Pos	Pos F	eat A	Air Bag eployed Ej	ected Rest	raint Helme lem Use	et Injury Degree	Injury Type	Injury Area	Inj Info Source	,
Type Last Name, First Name, Mi		Row		her					. ,,,,,			T
6 *	M 09/08/8	7 1	1	4		1 3		5			2	<u> </u>
2 *	F 10/23/8	7 1	3			1 3	3	4	9	2	2	
						Anna de la constanta de la con						
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	ALCONOMINATE OF THE PROPERTY O	**************************************	Contrology	e (translate of the state of		Water and the same of the same				A.		
Maine Department of Public Safety		Page 2					Fo	rm 13:2	20A Re	vised.	Janua	ry:

Unit ID 2 Hit Run? 2HGEJ2221RH543509 License Plate	nd Unknov No
Wehicle Make	nd Unknov No
1994 1 - Black	nd Unknov No
Cut Vehicle Configuration GVWR or GCWR GVWR or GCWR Cut.eng-color: blue; cut.eng-color: blue; cut.e	nd Unknov No
Vehicle Has 9 or More Seats? HAZMAT Placarded? Vehicle Travel Direction Northbound Southbourd [U5) Special Function Vehicle 1 - No Special Function Exempt Vehicle Exempt Vehicle Exempt Vehicle Responding to Scene? Yes [Vehicle Travel Direction Northbound Not on Roadway [Vestound Not on Roa	nd Unknov No
Yes No Yes No ✓ Eastbound Westbound Not on Roadway (U5) Special Function Vehicle Exempt Vehicle Emergency Vehicle Responding to Scene? 1 - No Special Function Yes Yes	No
1 - No Special Function Extent of Damage No Damage Observed Minor Damage Functional Damage Towed Due to Disabling I (U6) Most Damaged Area (U7) Most Harmful Event 12 - Front (U8) Pre Crash Actions 9 - Starting in traffic (U10) Sequence of Events 1 (U10) Sequence of Events 2	
(U6) Most Damaged Area (U7) Most Harmful Event 12 - Front (U8) Pre Crash Actions 9 - Starting in traffic (U10) Sequence of Events 1 (U10) Sequence of Events 2	Damag
12 - Front (U8) Pre Crash Actions (U9) Contributing Circumstances - Vehicle 1 - None (U10) Sequence of Events 1 (U10) Sequence of Events 2	
(U8) Pre Crash Actions 9 - Starting in traffic (U10) Sequence of Events 1 (U2) Contributing Circumstances - Vehicle 1 - None (U10) Sequence of Events 2	
(U10) Sequence of Events 1 (U10) Sequence of Events 2	
(U10) Sequence of Events 3 (U10) Sequence of Events 4	
✓ Driver Bicycle Pedestrian License Number ✓ Active No License Permit State License Class Endorsements F	₹estricti
Last Known Operator * Suspended ME C	1
DRIVER Last Name First Name MI DRIVER Address City State * ME*	Zip
Citation Number Pending Violation 2	
DWNER Last Name (skip if same as Driver) First Name MI OWNER Address City State * ME*	Zip
D1) Driver Distracted By (D2) Condition at Time of Crash	
D3) Driver Actions at Time of Crash 1 (D3) Driver Actions at Time of Crash 2	
14 - Followed Too Closely Alcohol Test	
Breath Urine Other Chemical Test (Not Field Sobriety or PBT) Alcohol Test Result Pending	
Drug Test	ıg
(D4) Non Motorist Location at Time of Crash (D5) Non Motorist Action Prior to Crash	
D6) Non Motorist Action at Time of Crash 1 (D6) Non Motorist Action at Time of Crash 2	
D7) Pedestrian Maneuvers (D8) Bicyclist Maneuvers	
PERSON TYPE 1-Driver, 2-Passenger, 3-Pedestrian, 6-Driver/Owner, 7-Bicycle, 8-Passenger/Owner, 24-Last Known Operator 25-Last Known Operator/Owner, 24-Last Known Operator/Owner, 24-Last Known Operator/Owner, 25-Last Cnowner, 2	 Owner
SEAT ROW SEAT POSITION SEAT POSITION OTHER AIRBAG DEPLOYED RESTRAINT SYSTEM INJURY TYPE INJURY AREA INJURY DI 1-Front Row 1-Left (driver) 1-Sleeper Section of Cab (truck)1-Not Applicable 1-Not Applicable 1-Amputation 1-Face 1-Fatal	
2-Second Row 2-Middle 2-Other Enclosed Cargo Area 2-Not Deployed 2-None Used - Motor Vehicle Occupant 2-Bleeding 2-Head 2-Incapacit 3-Third Row 3-Right 3-Unenclosed Cargo Area 3-Deployed - From 3-Shoulder and Lap Belt Used 3-Broken Bones 3-Neck 3-Nonine Used 4-Fourth Row 4-Other 4-Trailing Unit 4-Deployed - Side 4-Shoulder Belt Only Used 4-Burns 4-Back 4-Possible	pacitating
4-Fourth Row 4-Other 4-Trailing Unit 4-Deployed - Side 4-Shoulder Belt Only Used 4-Burns 4-Back 4-Possible 5-Other Row 5-Unknown 5-Riding on Motor Vehicle Ext 5-Deployed - Other 5-Lap Belt Only Used 5-Concussion 5-Arm(s) 5-No Injury 6-Unknown (non-trailing unit) (knee, air belt,) 6-Restraint Used - Other 6-Shock 6-Leg(s)	
6-Unknown 6-Deployed 7-Child Restraint - Forward Facing 7-Dizziness 7-Chest Stomach INJURY IN	IFO SOU
EJECTED HELMET USE S-Child Restraint - Rear Facing S-Child Restraint - Rear Facing S-Individuals S-I	
3-Ejected Totally 3-No Helmet 11-Child Restraint - Other Observation AMB CODES - se	
Derson Include Driver, Passengers, Bicyclist, and Pedestrians Sex DOB ONE Type ONE	ij Info A
6 * M 01/08/87 1 1 1 3 5	2
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Waine Department of Public Safety Page 3 Form 13:20A Revised Jai	ĺ

2010-24496C

STATE OF MAINE CRASH REPORT

FIRST PAGE

Reporting Agency ME0030500	Report Nu 10-0029	34	1	rash Date 1/12/2010	Crash Time 08:30	11/12	ne Date 2/2010	At Scen 08:39	e Time
City or Town Portland		Street or High CONGRESS	ST		Nearest Inters	ecting Stree	et		OffRo
Direction FROM Nearest Inter ☐ At Intersection ☐ North	section to Crash		Distance Fr	om Nearest Inte Feet ✓ Mil e			Longitud	de	
Node 1 Nod 18490	e 2	Measure	ment Node		Scene Posted Spe	ţ,	✓ Unknown N/A	mount	Posted Posted
(F1) Type of Crash 2 - Rear End / Sideswipe				(F2) Type of		***************************************		- Secretary	
(F3) Weather Condition				(F4) Light Co	ondition			***************************************	
1 - Clear (F5) Road Grade	······································			(F6) Road S	urface Condition				
1 - Level (F7) Traffic Control Device				1 - Dry Traffic Contr	ol Device Operation	nal (pre-cra	ish)?	/IIM##	
1 - Traffic Signals (Stop &						Yes	No	Un	ık
(F8) Location of First Harmful	Event			Total Damag	ge over Threshold?	` ☑ Υ	es	No	
(F9) Contributing Circumstance	ces - Environment	1		(F9) Contrib	uting Circumstance	es - Environi	ment 2		
(F10) Contributing Circumstar	ices - Road 1		·····	(F10) Contril	outing Circumstand	ces -Road 2)	· · · · · · · · · · · · · · · · · · ·	
In or Near a Construction, Ma	intenance, or Utili Yes		i? Unl		Norkers Present?	Yes	□No	Ur	ık
(F11) Location of the Crash re	elated to Work Zor		Virginia	(F12) Type o	of Work Zone				
Law Enforcement Present at \	Work Zone? ☐Law Enforcem	ent Vehicle (only N	School Bus Yes. Di		Yes, Indire	ectly Involve	d \square	No
V2 was stopped at a red I Drive. V1 was traveling w looked down and did not V2 on the rear bumper.	rest behind V2.						(†))	
Drive. V1 was traveling w looked down and did not	rest behind V2.				COMBRESS STREET VI VI VI	Manual Ma	N N N N N N N N N N N N N N N N N N N)	
Drive. V1 was traveling w looked down and did not	rest behind V2.	at the ligh			VE EW	Hand Hand	HUTCHINGS ORIVE	State	Zi
Drive. V1 was traveling w looked down and did not V2 on the rear bumper.	est behind V2. see V1 stopped	at the ligh	t. V1 struc		VE EW		HUTCHINGS ORIVE		
Drive. V1 was traveling w looked down and did not V2 on the rear bumper.	rest behind V2. see V1 stopped Firs	at the ligh	t. V1 struc l	Address	VE EW	City	HUTCHINGS ORIVE	State	Zi
Drive. V1 was traveling wollooked down and did not V2 on the rear bumper. Witness Last Name Witness Last Name	rest behind V2. see V1 stopped Firs	at the ligh	t. V1 struc l	Address	NOT TO SCALE	City	HUTCHINGS DRIVE	State	Zi
Drive. V1 was traveling wollooked down and did not V2 on the rear bumper. Witness Last Name Witness Last Name Non Vehicle Property Damage	Firs Est behind V2. See V1 stopped Firs Eirs	at the ligh	t. V1 struc l	Address Address	NOT TO SCALE	City City City City	HUTCHINGS DRIVE	State State	Zi Priv Zi
Drive. V1 was traveling wollooked down and did not V2 on the rear bumper. Witness Last Name Witness Last Name Non Vehicle Property Damage Property Owner Name	Firs Est behind V2. See V1 stopped Firs Eirs	at the ligh	t. V1 struc l	Address Address	NOT TO SCALE	City City City City	HUTCHINGS DRIVE	State State JUtilities State	Zij Zij Priv Zij

Last Modified: 11/12/2010 10:35

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Unit I	D		it R	un?	VIN 1GND	T13W0SK226	827	Licens *	e Pla	te	State ME	(U1) L 2 - (S	nit Typ		v Vehi	cle				
□ No	o Ins	uranc	е	NAIC	·	Insurance C	ompany I	Vame					nsuran							
		cie Ma							- 1	ehicle Y	'ear) Vehi		or					
				juration		,				VWR o		/R		***************************************	00.00	0.0		n 11	00.00	0.15
Vehic	ole H	as 9 c	or N	lore Sea	its ?	HAZMA	T Placard	ded ?			,000 lt Fravel	os. Directio		0.001 7 North	- 26,00 abounc	····		> thar outhb	26,00 ound	U IDS
(115)	Save	sial Eu	met	ion Vehi	es [No	- E	Yes No	. [tbound	vicle Re	Vestbo				Roadwa			nowr
1 - N	lo S	pecia	F	unction				Exempt Vehic	le L	merger	icy vei	HOIC 1	spond	ing to t	Joene		Ye	es .	No	
		Dama	_		o Dama	ge Observed	✓ Mii	nor Damage			unctic	nal Da	nage		□To\	wed Di	ue to D	isablin	g Dam	age
(U6) 1 12 -			age	ed Area					(L	J7) Mos	t Harn	nful Eve	nt							
1 '		Crash		tions traffic				**************************************		9) Cor - Non		ng Circu	ımstan	ces - V	'ehicle					
				f Events	1							e of Ev	ents 2							
(U10)) Sec	quence	e of	f Events	3	lander delta de Albandilando de Landerson de			- (U	/10) Se	quenc	e of Ev	ents 4							
	Drive	ar R	icva	cle	Pedes	trian Licens	e Numbe	er 🗸 Active	Пм	n Liren	الاعوا	Permit	State	Lice	nse Cla	ass F	ndorse	ments	Restr	iction
		_ast K	nov	vn Öper		* First Nan					Susper	nded	ME	С		0			0	
*		_ast N				riist nan	ie 		*	RIVER ME*		\$8			City			Sta	ne 2	Zip
Citati	ion N	lumbe	er"	Pendin	gLJ				Vi	olation	1				Viola	ation 2				
OWN *	IER I	_ast N	am	ie (skip i	f same	as Driver) First f	Vame	MI		WNER ME*	Addre	SS			City			Sta	te Z	ip
(D1) [Drive	er Dist	rac	ted By					(C	2) Cor		at Time		sh						
(D3) [Drive	er Acti	ons	at Time	of Cra	sh 1						ons at		f Crash	ı 2					
Alcoh	nol To	est		Te	st Not G	iven Test	Refused	Bloo	d -	Talaah	al Tani	t Result	Dondi		Alcoho	I BAC	Result			
Drug	Brea Test			Urine	st Not G	Other Chemical	Test (Not)	Field Sobriety or P	_	rug Tes			>noma		princensus					
Ů				Urine		Other of Crash	1010000						·	sitive		legativ	re []Pen	ding	
Ĺ												rist Acti								
(D6) t	Non	Motor	ist ,	Action a	t Time o	of Crash 1			(C)6) Nor	Moto!	rist Acti	on at T	ime of	Crash	2				
(D7) F	Pede	estrian	Ma	aneuver	S				(C	08) Bicy	rclist N	laneuvo	ers					***************************************		10000
Į.						senger, 3-Pedestri						ner, 24-								
SEAT 1-Fror 2-Sec	nt Rov	v 1-1		POSITION (driver) lle	1_5 00	POSITION OTHER per Section of Cab (tr r Enclosed Cargo Are	uck)1-Not Ap a 2-Not De	oplicable 1. oployed 2.	Not An	VINT SYS oplicable Jsed - Mo		cle Occup	1-Am	RY TYPE putation eding	1	VJURY / -Face -Head	AKEA	1-Fatal 2-Incap	acitating	
3-Third 4-Four 5-Other	d Row orth Ro	/ 3-l	Righ Othe		3- Une 4-Traili	nclosed Cargo Area	4-Deploy	/ed - Front 3. /ed - Side 4.	Should Should	ter and La fer Belt O elt Only U	ap Belt U Inly Used	sed	3-Bro 4-Bu	ken Bon	4	-Neck -Back -Arm(s)			ncapacita ble Injury	
6-Unk	nown		OHA	IOWII	(non-tr	ailing unit)	(knee, a	r belt,) 6. /ed - 7.	Restra Child F	int Used Restraint	- Other - Forward		6-Sh 7-Diz	ock ziness	6 7	-Leg(s) -Chest S		INJUR	/ INFO S	
1-Not								/ment - Curtain g.	8-Child Restraint - Rear Facing 1-Officer Observe 10-Booster Seat 10-Booster Seat 10-Booster Seat 10-Child Restraint - Used Incorrectly 10-Other 10-Other 10-Other 10-Other 10-Other 10-Other 10-Other								ement			
3-Ejec	2-Ejected Partially 2-Other Helmet 3-No Helmet									Restrair							AMB	Observ CODES	ation - see cod	le shee
Person Type				assengers t Name, M	-	and Pedestrians	Sex (M,F,U)	DOB	Seat Pos Row	Seat Pos	Seat Pos Other	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Amt Cod
6	*	, NGITIO,	1.113	. Harrie, IV	15		М	06/04/65	1 1	1	Julei		1	3	The state of the s	5			2	
2	*						м	10/09/70	1	3	***************************************		1	3		5			2	
				······	······································					+-	No and Address of the				7					
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				***************************************				Section 2017								tary management of the control of th				
																	Open and the second			

Report 1		•		STA	TE	OF MAII	ΝE	CRA	\SH	IRE	POI	RT				UN	IIT P.	AGI
Unit ID 2		it Run?	VIN 45 4	BP61C77731063	0	Licens	e Plate	e į	State CO	(U1) U			r				1 1 1	• 1
	nsurano	e NA		Insurance Co		Vame		i		1	nsuran			nber				
(U2) Ve								hicle Y	ear) Vehi							
65 - SL (U4)Veh			tion	w				/WR or	· GCW		Grey,			***************************************				
Vehicle	Has 9	or More	Seats?	HAZMAT	Placaro	ied ?	Ve		,000 lb ravel I	s. Directio			- 26,00 hbound			> than	26,000	0 lbs.
			Yes	No		Yes No		∃East	bound		Nestbo	ound		lot on F			and the same of th	nowr
(U5) Sp 1 - No	Specia	l Func		************************************		Exempt Vehic	ole En	nergen	cy ver	ucie Ke	espona	ing to a	Scene		Ye	es	No	
Extent of	of Dama	ige [☐No Dar	nage Observed	✓ Mir	nor Damage		□F	unctio	nal Dai	nage		□ To	wed Du	ie to D	isablin	g Dam	age
(U6) Mo		aged A	rea				(U	7) Mos	t Harm	ıful Eve	nt							
(U8) Pre	e Crash						1.			g Circu	ımstan	ces - V	ehicle/	· · · · · · · · · · · · · · · · · · ·				
11 - St (U10) S				***************************************				- None 10) Se		e of Eve	ents 2						~~~~~	
(U10) S	eauenc	e of Ev	ents 3				/U	10) Sec	auence	e of Eve	ents 4							
				Inatrian [7] [1:	Ni . mar 1-	μ [d] Λ =41:						Line	nse Cl	200 TF	ndoro	most-	Restr	intic
✓ Dri]Last k		Ped Operator	*	Numbe				Susper		State CO	C		0	ndorse		0	
DRIVEF	R Last N	lame		First Name	9	1		RIVER Me*	Addre	SS			Cit	У		Sta	ite Z	Zip
Citation	Numbe	er Pe	nding 🗌				Vic	olation	1				Viol	ation 2				
OWNEF	R Last N	lame (s	kip if sam	ie as Driver) First N	ame	MI		NNER ME*	Addre	ss			City			Sta	te Z	ip
(D1) Dri	iver Dis	racted	Ву				(D	2) Con		at Time		sh						
(D3) Dri	iver Act	ons at	Time of C	rash 1						y Norr		f Crasi	n 2					
Alcohol	Test		Test No	t Given Test F	Refused	∏Bloc	d -						Alcoho	ol BAC	Result			
Bre	eath		ine [Other Chemical	est (Not I	Field Sobriety or F	ет)	·		Result	Pendi	ng ———			w will			
Drug Te		Land	Test No ine [Other	Refused	Bloc		rug Tes			haman)	sitive		vegativ	e [Pen	ding	
(D4) No	n Moto	ist Loc	ation at T	me of Crash			(D	5) Non	Motor	ist Acti	on Prio	r to Cr	ash					
(D6) No	n Moto	ist Acti	on at Tim	e of Crash 1			(D	6) Non	Motor	ist Acti	on at T	ime of	Crash	2				
(D7) Pe	destriar	Mane	uvers				(D	8) Bicy	clist M	aneuve	ers							
PI	ERSON	TYPE 1-	Driver, 2-F	assenger, 3-Pedestria	n, 6-Drive	er/Owner, 7-Bio	ycle, 8-	-Passen	ger/Ow	ner, 24-	Last Kn	own Op	erator 2	25-Last	Known	Operato	or/Owne	r
SEAT RO	Row 1	EAT POS Left (driv	er) 1-9	AT POSITION OTHER leeper Section of Cab (true	-k11-Not At	policable 1	-Not Ant	INT SYS			1-Arr	RY TYPI	1	NJURY A I-Face 2-Head	REA	1-Fatal		E
2-Second 3-Third R 4-Fourth	Row 3	Middle Right Other	3-1	ther Enclosed Cargo Area Inenclosed Cargo Area railing Unit	4-Deploy	red - Front 3 red - Side 4	-Should	Jsed - Mo er and La er Belt Oi	p Belt U		3-Bro 4-Bu	oken Bon rns	es 3	3-Neck I-Back		3-Nonli 4-Poss	acitating ncapacita ible Injury	
5-Other F 6-Unknov		-Unknowr	(no	iding on Motor Vehicle Ex n-trailing unit) Jnknown		r belt,) 6	-Restrai	lt Only Us nt Used - testraint -	Other	l Facino	6-Sh	ncussion ock ziness	6	5-Arm(s) 5-Leg(s) 7-Chest S	tomach	5-No In	ijury 1 INFO S	OUR
EJECTEI 1-Not Eje	ected	1-D0	MET USE DT-Complian	t Motorcycle Helmet	Combina	ition g ment - Curtain g	-Child R -Child R	testraint - testraint -	Rear Fa	cina -			uises 8 of Pain 9	3-Internal 9-Entire B 10-Other		1-Office 2-Indivi	er Observ dual Stati cal. Parar	ation emer
3-Ejected	d Partially d Totally		her Helmet Helmet				0-Boost 1-Child	Restraini	t - Other		100		,	10-0410	ΔMR	Observ		
Type				list, and Pedestrians	Sex (M,F,U)	DOB	Seat Pos	Seat Pos	Seat Pos	Air Bag Deployed	Ejected	Restrain	t Helmet	Injury Degree	!njury	Injury	Inj Info Source	An
6 *	ast Name,	First Na	me, Mi		(M,1 ,0)	01/30/83	Row 1	1	Other	7.5,00	1	3	T	5			1	
					1	22,30,03	-				-			-		-		
1					-	energy (r) justice (r) energy (r) ene										-		
						approximation and the second												
The second secon					***************************************	As a Park Proposed and Address		and the same of th	Personal Land de California de							The second secon		
The state of the s								And the second s	en e									
Maine D	epartn	ent of	Public S	afety		<u> </u>	Page	3	1		<u> </u>	<u> </u>	For	<u> </u>	0A Re	vised	Januar	v 20

2011-34C

STATE OF MAINE CRASH REPORT

FIRST PAGE

Reporting Agency ME0030500	Report N 11-000			ash Date 4/2011	Crash Time 07:58	At Scene Date 1/4/2011	At Scen 08:21	e Time
City or Town Portland		Street or High CONGRESS			Nearest Interse	cting Street		Off Road
Direction FROM Neares		Site ast ∏West		m Nearest Inte ☐Feet	manda at a dat dat dat one	Longi	tude	
Node 1 18490	Node 2	Measure	ment Node	Distance to S	cene Posted Speed	branco:	francost.	Posted 25
(F1) Type of Crash 4 - Intersection Mov	rement	<u></u>		(F2) Type of		Andrew Control of the		
(F3) Weather Condition				(F4) Light Co				
1 - Clear (F5) Road Grade				2 - Dawn (F6) Road St	urface Condition			
1 - Level (F7) Traffic Control Dev	ice			1 - Dry	ol Device Operation	al (nre-crash)?	· · · · · · · · · · · · · · · · · · ·	
1 - Traffic Signals (S	top & Go)					Yes No	Ur	nk
(F8) Location of First Ha	armful Event			Total Damag	e over Threshold?	✓Yes	No	
(F9) Contributing Circur	mstances - Environmer	nt i		(F9) Contribu	iting Circumstances	- Environment 2		
(F10) Contributing Circu	ımstances - Road 1	***************************************	<u> </u>	(F10) Contrik	outing Circumstance	s -Road 2		
In or Near a Construction	on, Maintenance, or Uti		? TUnk	Work Zone V	Vorkers Present?	☐Yes ☐No		nk
(F11) Location of the Ci			komanak	(F12) Type o	f Work Zone	Name of American	fanound	
Law Enforcement Prese		ment Vehicle C	only TNo	School Bus I		Yes, Indirectly Invol	 /ed □	 No
the process of turning arrested for Operation			or was		N Congress Street	Way Drive Way Drive AND T TO	SCALE	
Witness Last Name	Fir	st	MI	Address	C	- Dily	State	Zip
Witness Last Name	Fir	st	MI	Address	C	Pity	State	Zip
Non Vehicle Property D	amage Description				State	City or Town	Utilities	Private
Property Owner Name		**************************************		Address	C	Dity	State	Zip
Non Vehicle Property D	amage Description			1	State	City or Town	Utilities	
Property Owner Name								Private
1	77517			Address	C	Dity	State	Private Zip
Reporting Officer Thomas B. Reagan		Badge# 91	Report D 1/4/20	ate /	Approved By SGT. BOWDEN	City	State Approved 1/4/201	Zip Date

Last Modified: 1/4/2011 11:57

11-00024	STATE OF MAIN	IE CRASH	REPORT		UNIT PA
Unit ID Hit Run? VIN	62L047691 License	Plate State	(U1) Unit Type 1 - Passenger Ca	ır	
	nsurance Company Name		Insurance Pol		~
(U2) Vehicle Make		Vehicle Year	(U3) Vehicle Co	lor	
26 - HONDA (U4)Vehicle Configuration		2002 GVWR or GCW	6 - Gold R		
	I CO TRACT TO SELECT TO	< 10,000 lb		- 26,000 lbs.	> than 26,000 l
Vehicle Has 9 or More Seats ? Yes No	HAZMAT Placarded ?	Vehicle Travel I Eastbound	Westbound	☐ Not on Road	Southbound way Unkno
(U5) Special Function Vehicle 1 - No Special Function	Exempt Vehic	le Emergency Veh	nicle Responding to		Yes No
Extent of Damage No Damage O	bserved Minor Damage	Functio	nal Damage	Towed Due to	Disabling Damag
(U6) Most Damaged Area 9 - Center Driver Side		(U7) Most Harm	ıful Event	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(U8) Pre Crash Actions			g Circumstances - \	/ehicle	
1 - Following roadway (U10) Sequence of Events 1	W114 12 11 11 12 12 12 12 12 12 12 12 12 12	1 - None (U10) Sequence	e of Events 2		
(U10) Sequence of Events 3		(U10) Sequence			
✓ Driver Bicycle ☐ Pedestrian ☐ Last Known Operator	License Number Active *	Susper	ded ME C	ense Class Endors 0	sements Restrict
DRIVER Last Name *	First Name N	II DRIVER Addre * ME*	SS	City	State Zip
Citation Number Pending		Violation 1		Violation 2	
OWNER Last Name (skip if same as Di	river) First Name MI	OWNER Addre	SS	City	State Zip
(D1) Driver Distracted By		(D2) Condition	at Time of Crash Influence of Med	dications/Drugs	/Alcohol
(D3) Driver Actions at Time of Crash 1			ons at Time of Cras		ACOIO
3 - Failed to Yield Right-of-Way Alcohol Test	Test Refused Blood	1	P	Alcohol BAC Resu	<u>J</u> lt
Breath Urine Othe Drug Test Test Not Given	er Chemical Test (Not Field Sobriety or Pl	31)	Result Pending		Marries
Urine Othe	er	- 0	Positive	Negative	Pending
(D4) Non Motorist Location at Time of (Jrasn	,	ist Action Prior to C		
(D6) Non Motorist Action at Time of Cra	ash 1	(D6) Non Motor	ist Action at Time of	f Crash 2	
(D7) Pedestrian Maneuvers	A STATE OF THE PARTY OF THE PAR	(D8) Bicyclist M	aneuvers		
PERSON TYPE 1-Driver, 2-Passenge	er, 3-Pedestrian, 6-Driver/Owner, 7-Bicy	cle, 8-Passenger/Ow			n Operator/Owner
SEAT ROW SEAT POSITION SEAT POSIT 1-Front Row 1-Left (driver) 1-Sleeper Se	action of Cah (truck)1-Not Applicable 1	ESTRAINT SYSTEM Not Applicable	INJURY TYP 1-Amputation cle Occupant 2-Bleeding		INJURY DEGREE 1-Fatal 2-Incapacitating
2-Second Row 2-Middle 2-Other Enck 3-Third Row 3-Right 3- Unenclose 4-Fourth Row 4-Other 4-Trailing Un	ed Cargo Area 3-Deployed - Front 3-	Shoulder and Lap Belt U Shoulder Belt Only Used	sed 3-Broken Boi		3-NonIncapacitatin 4-Possible Injury
	Motor Vehicle Ext 5-Deployed - Other 5- unit) (knee, air belt,) 6-	Lap Belt Only Used Restraint Used - Other	5-Concussion 6-Shock	6-Leg(s)	5-No Injury
6- Unknown EJECTED HELMET USE	Combination 8.	Child Restraint - Forward Child Restraint - Rear Fa	rcing 8-Abrasion/B		1-Officer Observati
1-Not Ejected 1-DOT-Compliant Motorcy 2-Ejected Partially 2-Other Helmet 3-Ejected Totally 3-No Helmet	10	Child Restraint - Used In I-Booster Seat I-Child Restraint - Other	10-Other	of Pain 9-Entire Body 10-Other	2-Individual Statem 3-Medical, Parame Observation
3-NO Heillet				AM	B CODES - see code s
Person Include Driver, Passengers, Bicyclist, and F Type Last Name, First Name, Mi	Pedestrians Sex DOB (M,F,U)	Seat Seat Seat Pos Pos Row Other	Air Bag Ejected Restrain Deployed Ejected System	nt Helmet Injury Injur n Use Degree Typ	ry Injury Inj Info e Area Source
1 *	M 06/24/88	1 1	1 3	5	1
					200
		30 A A A A A A A A A A A A A A A A A A A			
		The state of the s		Magnatorian and a	
	Commission of the Commission o				Control of the contro
	Transmission and the second se				
Maine Department of Public Safety		Page 2		Form 13:20A F	Revised January

Yes No Yes No Eastbound Westbound Not on Roadv (U5) Special Function Vehicle Exempt Vehicle Emergency Vehicle Responding to Scene? 1 - No Special Function Yes Minor Damage Functional Damage Towed Due to Improve to	UNIT PAGE
No Insurance NAIC	
Vehicle Make Vehicle Golor	
Comparison Com	
Cuty Vehicle Configuration Vehicle C	
1. Tractor/Semi-Trailler (one trailer - 5 axles)	4
Ves	> than 26,000 lbs.
Extent of Damage No Damage Observed Minor Damage Functional Damage Towed Due to I (U5) Most Damaged Area 1 - Front Passenger Corner (U8) Pre Crash Actions 5 - Making right turn (U10) Sequence of Events 1 21 - Motor Vehicle In Transport (U10) Sequence of Events 3 (U10) Sequence of Events 3 (U10) Sequence of Events 4 21 - Motor Vehicle In Transport (U10) Sequence of Events 4 Driver Bicycle Pedestrian License Number Active Not License Permit State License Class Endors DRIVER Last Name First Name MI DRIVER Address City Citation Number Pending Violation 1 Violation 2 OWNER Last Name (skip if same as Driver) First Name MI DRIVER Address City City 1 - Name MI DRIVER Address City City 1 - Name MI DRIVER Address City City 1 - Name MI DRIVER Address City City 2 - Name MI DRIVER Address City 2 - Name MI DRIVER Address City 3 - Name MI DRIVER Address City 3 - Name MI DRIVER Address City 4 - Name MI DRIVER Address City 2 - Name MI DRIVER Address City 3 - Name MI DRIVER Address City 4 - Name MI DRIVER Address City 5 - Name MI DRIVER Address City 6 - Name MI DRIVER Address City 7 - Name MI DRIVER Address City 6 - Name MI DRIVER Address Ci	Southbound ray Unknown
U(0) Most Damage Area (U7) Most Harmful Event (U8) Pre Crash Actions (U9) Contributing Circumstances - Vehicle (U9) Pre Crash Actions (U9) Contributing Circumstances - Vehicle (U9) Sequence of Events 2 (U10) Sequence of Events 2 (U10) Sequence of Events 3 (U10) Sequence of Events 3 (U10) Sequence of Events 4 (es 🔲 No
Li-Front Passenger Corner	Disabling Damage
U(1) Pre Crash Actions U(1) Sequence of Events 1 U(10) Sequence of Events 2 U(10) Sequence of Events 3 U(10) Sequence of Events 4 U(1	
Cut Sequence of Events 1 Cut Sequence of Events 2	
21 - Motor Vehicle In Transport (U10) Sequence of Events 3 (U10) Sequence of Events 4 Driver Bicycle Pedestrian License Number Active No License Permit State License Class Endors Suspended NY A	
Driver Bicycle Pedestrian License Number Active No License Permit State License Class Endors	***************************************
Last Known Operator	
* NY* Citation Number Pending	ements Restriction
OWNER Last Name (skip if same as Driver) First Name OWNER Address City	State Zip
* IL* (D1) Driver Distracted By (D2) Condition at Time of Crash 1 - Apparently Normal (D3) Driver Actions at Time of Crash 1 Alcohol Test	
Cash	State Zip
Alcohol Test	
Breath Urine Other Chemical Test (Not Field Sobriety or PBT) Alcohol Test Result Pending	
Drug Test	t
(D6) Non Motorist Action at Time of Crash 1 (D7) Pedestrian Maneuvers (D8) Bicyclist Maneuvers	Pending
(D7) Pedestrian Maneuvers (D8) Bicyclist Ma	
PERSON TYPE 1-Driver, 2-Passenger, 3-Pedestrian, 6-Driver/Owner, 7-Bicycle, 8-Passenger/Owner, 24-Last Known Operator 25-Last Known Operator 24-Last Known Operator 24-Last Known Operator 24-Last Known Operator 24-Last Known Operator 2-None 15-Ration 1-Face 2-None	
SEAT ROW SEAT POSITION SEAT POSITION OTHER 1-Front Row 1-Left (driver) 1-Sleeper Section of Cab (truck)1-Not Applicable 2-Second Row 2-Middle 2-Other Enclosed Cargo Area 3-Third Row 3-Right 3-Unenclosed Cargo Area 3-Deployed - Front 4-Fourth Row 4-Other 4-Trailing Unit 5-Other Row 5-Other Row 5-Unknown 6-Unknown 6-	
1-Front Row 1-Left (driver) 1-Sleeper Section of Cab (truck)1-Not Applicable 2-Second Row 2-Middle 2-Unter Enclosed Cargo Area 3-Third Row 3-Right 3-Unenclosed Cargo Area 3-Deployed - Front 4-Fourth Row 4-Other 4-Trailing Unit 4-Fourth Row 5-Other Row 6-Unknown 5-Unknown 6-Unknown 6-Un	
3-Third Row 3-Right 3- Unenclosed Cargo Area 4-Deployed - Front 4-Deployed - Side 5-Lap Belt Only Used 5-Concussion 5-Arm(s) 6-Deployed - Side 4-Deployed -	INJURY DEGREE 1-Fatal 2-Incapacitating
5-Other Row 5-Unknown 5-Inking on Motor Vehicle Ext 6-Deployed - Other 6-Unknown (non-trailing unit) (knee, air belt,) 6-Unknown 6-Unknown 6-Unknown 6-Unknown 6-Unknown 6-Unknown 6-Unknown 6-Deployed - Other 6-Restraint Used - Other 7-Child Restraint - Forward Facing 8-Child Restraint - Forward Facing 9-Child Restraint - Forw	3-NonIncapacitating 4-Possible Injury
6- Unknown 6-Deployed 7-Child Restraint - Forward Facing 8-Abrasion/Bruises 7-Chest Stomact 8-Abrasion/Bruises 8-Internal 9-Complaint of Pain 9-Complaint 0-Complaint	5-No Injury
1-Not Ejected 1-DOT-Compliant Motorcycle Helmet 7-Deployment - Curtain 9-Child Restraint - Used Incorrectly 9-Complaint on Pain 9-Entire Body 10-Booster Seat 10-Other 10-Other 10-Other	1-Officer Observation
·	2-Individual Statement 3-Medical, Paramedical Observation
	S CODES - see code sheet
Type Lock Name First Name Mi (M.F.U) DOB Pos Pos Deployed Ejected System Use Degrée Type	
1 * M 03/10/53 1 1 1 3 5	1

STATE OF MAINE CRASH REPORT

Report Number 11-00024	Commercial Vehi	icle Supplementa	al No Carrier Iden	tification Numbers
Unit ID USDOT Number 2 071821	MC/MX Number	State Number	MCSAP Number	
✓ Interstate Carrier Intrastate	: Carrier Not in Co	mmerce-Government	Not in Commerc	ce-Other Trucks s. GVWR/GCWR)
Carrier Name			Carrier Phone	
Address	City		State	Zip
*, Morton IL 61550		Processed		
Oversize Permit Weight	Oversize Permit Length	Oversize Permit	HeightOve	rsize Permit Width
98 Cargo Body Type (enter or	ne code from below)	Unloaded	Partially Loaded	Loaded
1 Bus (9-15 Seats, Including D	river) 6 Dump		11 Pole	
	J. J. B. G.		₩ <u>₩</u> 50	-800
2 Bus (16 or More Seats, Including D	Priver) 7 Concrete M	lixer	12 Log	
O O O O O			州 克克	
3 Van/Enclosed Box	8 Auto Transp	oorter	13 Intermodal C	hassis
			7 655	
4 Cargo Tank	9 Garbage/Re	fuse	14 Vehicle Towir	ng Motor Vehicle
	To Control	J. J.	No constant	6-2-3-10
5 Flat Bed	10 Grain, Chips	s, Gravel	15 No Cargo Bo	ody
	COLUMN TO THE		10 m	
	98 Other Cargo Boo	dy (not listed abov	re)	
A Commodity Code (enter of A General Freight B Household Goods C Metal: Sheets, Coils, Roll D Motor Vehicles E DriveAway / TowAway F Forest Products G Building Products H Mobile Homes I Machinery, Large Objects	J Fresh Prod K Liquids / Ga s L Intermodal M Passengers N Oil Field Eq 0 Livestock P Grain, Feed Q Coal / Coke	ases in Cargo Tank s Juipment d, Hay	S Garbage, R T U.S. Mail U Chemicals V Commoditie W Refrigerated X Beverage Y Paper Prodi Z Other	es, Dry Bulk d Foods
Bus Use (enter one code f	rom below)			
0 Not a Bus 1 School (Public or Private)	2 Transit) 3 Intercity		4 Charter 5 Other	
* HAZMAT Class Number (e 1 Explosives 2 Gases - Compressed, Dir 3 Flammable Liquids 4 Flammable Solids-Combi 5 Oxidizing Substances-Or	ssolved or Refrigerated ustible, Water Reactive	elow) 6 Poisonous (Toxic) a 7 Radioactive Materia 8 Corrosives 9 Miscellaneous Dang	<u> </u>	
* HAZMAT 4 Digit	Number Was HAZMA	T released from THIS ve	ehicle's cargo? YES	☑NO □UNK
Maine Department of Dublic Cofety	D	- 2 ^	E 4202 D	wicod January 2010

Maine Department of Public Safety

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2011-96C

STATE OF MAINE CRASH REPORT

FIRST PAGE

	Reporting Agency ME0030500	Report Nur 11-00003	6		Crash Date 1/5/2011	09	ash Time :18	At Scene 1/5/201		At Scer 09:29	ne Time
	City or Town Portland	SI	reet or High ONGRESS	way ST		N	learest Interse	cting Street			Off Road
	Direction FROM Nearest Intersect ☐ At Intersection ☐ North ☐ 5	ion to Crash S South Eas	personners.	1	From Nearest Ir	1	atitude		Longitud	е	
	Node 1 Node 2 18490 0		Measure	ment Node	1	Scene Fonths	Posted Spee		Unknown N/A	Supposed.	t Posted 25 t Posted 45
	(F1) Type of Crash 2 - Rear End / Sideswipe				(F2) Type		ion ersection				
((F3) Weather Condition 1 - Clear				(F4) Light	Conditic				***************************************	
((F5) Road Grade				(F6) Road	Surface	Condition				
(1 - Level (F7) Traffic Control Device		***************************************		5 - Ice/F Traffic Cor		vice Operation			· · · · · · · · · · · · · · · · · · ·	
	1 - Traffic Signals (Stop & Go (F8) Location of First Harmful Evel		·····		Total Dam	age ove	r Threshold?	Yes	No	Uı	nk
`	(F9) Contributing Circumstances -						Dircumstances	✓ Yes	nt 2	No	
((F10) Contributing Circumstances	- Road 1			(F10) Coni	tributing	Circumstance	es -Road 2			
Without	In or Near a Construction, Mainter	ance, or Utility	Work Zone ✓ No	? □U		e VVorke	rs Present?	∏Yes	No	Пи	nk
((F11) Location of the Crash related	t to Work Zone		breadow!	(F12) Type	e of Wor	k Zone	**************************************	**************************************		
-	Law Enforcement Present at Work	Zone? aw Enforceme	nt Vahiola C	only	School Bu			Yes, Indirecti	v Involvec		No
-	NARRATIVE VEH 1 WAS STOPPED AT A TR	· · · · · · · · · · · · · · · · · · ·		7119	CRASH D		- Louis	100, 1101001	y 1111 Old Oc	<u>'</u>	
							CONGRESS ST		CONGR	ESS ST	
	Witness Last Name	First		N				City		tate	Zip
Ī	Witness Last Name	First		N	II Address			City	S	tate	Zip
thouse	Non Vehicle Property Damage De	scription					State	City or T	own 🗌	Utilities	Private
-	Property Owner Name				Address			Dity	S	itate	Zip
À	Non Vehicle Property Damage De	scription					State	City or T	own 🔲	Utilities	Private
Santon	Property Owner Name				Address		(City	S	tate	Zip
	Reporting Officer M. CLAVET		Badge#	Repor		Appro	ved By Bowden		A:	pproved /5/201	Date 1
	Maine Department of Public Safe	ofv	1200	14,01	Page 1	1236. 8		Form 1			anuary 2010

Last Modified: 1/5/2011 10:07

11-00036 STA	TE OF MAIN	E CRA							UN	IIT P	<u>A</u> G
Unit ID Hit Run? VIN 1G1AK55F37723350	License *	Plate		J1) Unit Typ - Passeng							
No Insurance NAIC Insurance Co	mpany Name			Insuran *	ce Polic	y Numi	ber				
(U2) Vehicle Make 11 - CHEVROLET		Vehicle Y	ear	(U3) Vehi	cle Colo	r			, , , , , , , , , , , , , , , , , , , 		
(U4)Vehicle Configuration		GVWR or	GCWR		0.001 -	26 000	\ lba		> than	26.00	
proving proving	Placarded ?	Vehicle T	ravel Dir	ection [North	bound			outhbo	ound	
YesNo (U5) Special Function Vehicle	Yes No Exempt Vehicle	Emergen		Westbo le Respond		brownerd		oadwa	-	Unki	110/
1 - No Special Function Extent of Damage No Damage Observed	✓ Minor Damage	<u></u>	unctiona	I Damage		Tow	ed Du	e to Di	L	<u> </u>	900
(U6) Most Damaged Area	<u> </u>	(U7) Mos								,	
6 - Rear (U8) Pre Crash Actions		(U9) Con	tributing	Circumstan	ces - Ve	ehicle					
11 - Stopped in traffic (U10) Sequence of Events 1		1 - None		of Events 2							
(U10) Sequence of Events 3				of Events 4							
	Number Active		1	rmit State	licen	se Cla	ee Er	adores	ments	Restr	ioi
Last Known Operator *	to the second se		Suspende		C	City		,00130		A	
DRIVER Last Name First Name *	e MI	* ME*							Sta		<u></u>
Citation Number Pending		Violation				Violat	tion 2				
OWNER Last Name (skip if same as Driver) First Na *	ame MI	OWNER * ME*			······································	City			Stat	e Z	ip —
(D1) Driver Distracted By		1 - Appa	rently I								
(D3) Driver Actions at Time of Crash 1		(D3) Driv	er Action	s at Time o	f Crash	2					
I-many E-many I-many	Refused Blood est (Not Field Sobriety or PB)	Alcoh	ol Test R	esult Pendi	ng A	Alcahol	BAC	Result			
Land Land Land	Refused Blood		t Result	□Ро	sitive	N€	egative	e - [Pend	gnit	
(D4) Non Motorist Location at Time of Crash		(D5) Non	Motorist	Action Pric	r to Cra	sh					
(D6) Non Motorist Action at Time of Crash 1		(D6) Non	Motorist	Action at T	ime of C	Crash 2)		***************************************		
(D7) Pedestrian Maneuvers		(D8) Bicy	clist Mar	ieuvers							
PERSON TYPE 1-Driver, 2-Passenger, 3-Pedestrial		le, 8-Passen	ger/Owne								
SEAT ROW SEAT POSITION SEAT POSITION OTHER 1-Front Row 1-Left (driver) 1-Sleeper Section of Cab (truc 2-Second Row 2-Middle 2-Other Enclosed Cargo Area	1_Not Applicable 1_N	STRAINT SYS ot Applicable			RY TYPE putation eding	1-F	JURY Al Face Head	REA	INJURY 1-Fatal 2-Incapa	DEGRE	E
3-Third Row 3-Right 3- Unenclosed Cargo Area 4-Fourth Row 4-Other 4-Trailing Unit	3-Deployed - Front 3-S 4-Deployed - Side 4-S	houlder and La houlder Belt O	ıp Belt Used niy Used	1 3-Br 4-Bu	oken Bone: ms	s 3-1 4-8	Neck Back		3-Nonin 4-Possil	ncapacita ble Injury	iting /
5-Other Row 5-Unknown 5-Riding on Motor Vehicle Ext 6-Unknown (non-trailing unit)	(knee, air belt,) 6-R	ap Belt Only Used -	Other	6-Sh	ncussion ock ziness	6-≀	Arm(s) Leg(s) Chest St	nmach	5-No Inj	jury ′ INFO S	OF 1
6- Unknown EJECTED HELMET USE 1-Not Ejected 1-DOT Compliant Materials Helmet		hild Restraint - hild Restraint - hild Restraint -	Rear Facin	a 8-Ab	rasion/Brui mplaint of	ises 8-l	nternal		1-Office	r Observ	atic
1-Not Ejected 1-DOT-Compliant Motorcycle Helmet 2-Ejected Partially 3-Ejected Totally 3-No Helmet	10-1	Booster Seat Child Restrain		10-C			-Other	٠		al, Parar	
Descap Include Driver, Passengers, Bicyclist, and Pedestrians		Seat Seat	Seat A	ir Baa	Pactraint	Halmot	Inion		CODES -		
Person Include Driver, Passerigers, Bicyclist, and Pedestrans Type Last Name, First Name, Mi	(MEID DOB	Pos Pos Row	Pos De Other	r Bag ployed Ejected	System	Use I	Degree	Injury Type		Inj Info Source	C
6 *	F 11/11/37	1 1		1	3	-	5			2	
				on the section	THE PERSON NAMED IN COLUMN 1						
				Sir no America							
				Parket Parket		and the state of t					<u></u>
				And a population of the popula							
				The second secon		The second secon				: 	
Maine Department of Public Safety	Pi	age 2		<u> </u>	<u></u>	Form	13:20	0A Rev	vised .	Januar	ry 2

11-00036	STATE	OF MAIN	E CR	ASH	IRE	POF	? T				UN	IT P	٩GE
	IN N4AL11D66N444617	License *	Plate		(U1) Ui			r		, ,		,	
No Insurance NAIC	Insurance Company	Name			ir *		e Poli	cy Num	ber				
(U2) Vehicle Make 50 - NISSAN			Vehicle 2006	Year	1 ') Vehic		or					
(U4)Vehicle Configuration			GVWR	or GCW 0,000 lb	R			26,00	O Iba		> than	28.000) the
Vehicle Has 9 or More Seats	particular granters		Vehicle	Travel [Direction	ı [North	bound			outhbo	und	***************************************
Ye (U5) Special Function Vehicle	the state of the s	Yes No Exempt Vehicle	T	stbound ncy Veh	· · · · · · · · · · · · · · · · · · ·	Vestbo spondi		berned		Roadwa	iy <u>[</u>	_Unki	nown
1 - No Special Function Extent of Damage		, ,								☐Ye		No	
(U6) Most Damaged Area	Damage ObservedM	inor Damage	(U7) Mo	Functio				<u>√</u> 10∨	ved Du	ie to Di	sablin(J Dama	age
12 - Front		***************************************	<u> </u>				- A - 1 - 1	ahiata					
(U8) Pre Crash Actions 1 - Following roadway			(U9) Co 1 - No	ne .			ces - v 	enicie					
(U10) Sequence of Events 1			(U10) S	equence	e of Eve	ints 2							
(U10) Sequence of Events 3			(U10) S	equenc	e of Eve	ents 4							
✓ Driver Bicycle	Pedestrian License Numb	er 🗸 Active	No Lice	nse [] [Susper		State VE	Lice:	nse Cla	iss E	ndorse	ments	Restr 0	ctions
DRIVER Last Name	First Name	M	DRIVEI					City	,		Sta	ie Z	ip
Citation Number Pending			Violatio	n 1				Viola	ation 2	ermennen krist absolute en is 1000			
OWNER Last Name (skip if s	ame as Driver) First Name	MI	OWNE	R Addre	SS			City		· · · · · · · · · · · · · · · · · · ·	Stat	e Zi	р
* (D1) Driver Distracted By			* ME*				sh						
(D3) Driver Actions at Time of	f Crash 1		1 - App (D3) Dri				Crash	12					
14 - Followed Too Closel Alcohol Test	Y Not Given ☐ Test Refused	∥Blood		,				Alcoho	I BAC	Result			
Breath Urine	Other Chemical Test (No	Field Sobriety or PB	Drug Te	hol Test		Pendir	ng						·····
	Other					Land	sitive	hd	legativ	e [Pend	ling ———	
(D4) Non Motorist Location a				n Mator									·····
(D6) Non Motorist Action at T	ime of Crash 1		(D6) No	in Motor	ist Actio	on at Ti	me of	Crash	2				
(D7) Pedestrian Maneuvers			(D8) Bid	cyclist M	aneuve	rs							
	2-Passenger, 3-Pedestrian, 6-Driv SEAT POSITION OTHER AIRBA		le, 8-Passe		ner, 24-l		own Op		5-Last I		Operato		
1-Front Row 1-Left (driver) 2-Second Row 2-Middle	1-Sleeper Section of Cab (truck)1-Not A 2-Other Enclosed Cargo Area 2-Not D	Applicable 1-N Deployed 2-N	ot Applicable one Used - N	e Nator Vehic	cle Occup	1-Am ant 2-Ble	putation	1- 2-	-Face -Head -Neck		1-Fatal 2-Incapa 3-Nonin	acitating	-
3-Third Row 3-Right 4-Fourth Row 4-Other 5-Other Row 5-Unknown	4-Trailing Unit 4-Depletion on Motor Vehicle Ext 5-Depletion	oyed - Side 4-S oyed - Other 5-La	houlder and houlder Belt ap Belt Only	Only Used		4-Bur 5-Cor	ns ncussion	4- 5-	-Back -Arm(s)		4-Possil 5-No Inj	ole Injury	ung
6-Unknown	(non-trailing unit) (knee, 6- Unknown 6-Deple	air belt,) 6-R byed - 7-C	estraint Use hild Restrain	d - Other t - Forward			ziness		-Leg(s) -Chest S	tomach	INJURY		
	oliant Motorcycle Helmet 7-Depi	oyment - Curtain 9-C	hild Restrain hild Restrain 3ooster Seal	t - Used In			nplaint o	f Pain 9		ody	2-Individ 3-Medic	lual State	ement
2-Ejected Partially 2-Other Helm 3-Ejected Totally 3-No Helmet	et		Child Restra							AMR	Observa	ation	
Person Include Driver, Passengers, E	icyclist, and Pedestrians Sex (M,F,L	n DOB	Seat Sea Pos Pos	Seat Pos	Air Bag Deployed	Ejected	Restraini System	t Helmet Use	Injury Degree	Injury	Injury	Inj Info Source	Amb Code
Last Name, First Name, Mi 6 *	F	07/13/80	1 1	Other		1	3		5			2	
				THE PERSON NAMED IN						October 1			
				44						****			
				-						A			
		weekeen her had been her had be		4									
	Cofet	Various de la decembra de la companya del companya del companya de la companya de			The state of the s				40.5	0.4.7			
Maine Department of Public	: Sarety	P	age 3					rorr	ท 13:2	0A Re	vised .	anuar	y 201

Form 13:20A Revised January 2010

2011-7906C

STATE OF MAINE CRASH REPORT

FIRST PAGE

	Reporting Agency ME0030500	Report Nur 11-00142			ash Date 17/2011	Crash Time 11:24	At Scene Dat 5/17/2011		ene Time L
	City or Town Portland	S	treet or High	way ST		Nearest Inte	rsecting Street		Off Road
-	Direction FROM Nearest Intersect At Intersection North		ite stWest	Distance Fro	m Nearest Int ☐Feet ☑Mi	les		ongitude	
	Node 1 Node 2 18490		Measure	ment Node	M o s T		peed Limit Unk 30/ Hour N/A	incomi	ot Posted 25 ot Posted 45
	(F1) Type of Crash 2 - Rear End / Sideswipe				(F2) Type o	f Location eg Intersection			
((F3) Weather Condition				(F4) Light (Condition			
1	4 - Rain (F5) Road Grade		<u> </u>		1 - Daylig (F6) Road	Surface Condition			· · · · · · · · · · · · · · · · · · ·
_	1 - Level (F7) Traffic Control Device		····		2 - Wet	trol Davina Onera	tional (pre-crash)?		
•	1 - Traffic Signals (Stop & Go						Yes [No []	Jnk
{	(F8) Location of First Harmful Ever	nt			Total Dama	age over Threshol	d? ☑Yes	□No	
((F9) Contributing Circumstances -	Environment	1		(F9) Contri	outing Circumstan	ces - Environment 2		
((F10) Contributing Circumstances	- Road 1			(F10) Cont	ributing Circumsta	nces -Road 2		
Table 1	In or Near a Construction, Mainter	nance, or Utilit	y Work Zone ✓ No	i? Unk	Work Zone	Workers Present		No 🔲	Jnk
((F11) Location of the Crash related	d to Work Zon	·····	Automatical distribution of the state of the	(F12) Type	of Work Zone	Section 1		
all the same	Law Enforcement Present at Work	z Zone? aw Enforceme	ent Vehicle C	only No	School Bus	Related? Directly Involved	Yes, Indirectly In	volved [No
						Hatchins Drive	Congress Sireet	OT TO SCALE	
1	Witness Last Name	First		Mi	Address		City	State	Zip
100	Witness Last Name	First		Mi	Address		City	State	Zip
*******	Non Vehicle Property Damage De	scription	***************************************			Sta	te City or Tow	n Utilities	s Private
- Contract	Property Owner Name				Address		City	State	Zip
400000	Non Vehicle Property Damage De	scription				Sta	te City or Tow	n Utilitie:	Private
-	Property Owner Name		· · · · · · · · · · · · · · · · · · ·		Address		City	State	Zip
	Reporting Officer Thomas B. Reagan		Badge#	Report D		Approved By Sgt. Bowden		Approve 5/17/2	
	Maine Department of Public Safe	etv	1		Page 1		Form 13:2	20A Revised	

Last Modified: 5/17/2011 12:36

1	Report Number 11-001424	STATE (OF MAIN	E C	RA:	SH	REI	POF	RT				IJN	IT P	AGE
)	Unit ID Use Dung VIN	K14V9YE392745	License		St	ate	(U1) Ur 5 - Pic	nit Typ					<u> </u>		<u>, </u>
and and and	No Insurance NAIC	Insurance Company I	Vame			16.			e Polic	cy Nun	nber				
9	(U2) Vehicle Make			1	le Yea	ar	(U3)		le Col	or					
1	11 - CHEVROLET (U4)Vehicle Configuration		······	200 5 GVM	7 R or 6	GCWF		· Whit	:e			province			
	Vehicle Has 9 or More Seats?	HAZMAT Placard	lad 2		< 10,00		irection	t-man-J		26,00 bound		hamand manus	> than outhbo	26,000) lbs.
	TYes [Yes No		Eastbo	ound	V	Vestbo	und		ot on R			Unkı	nown
	(U5) Special Function Vehicle 1 - No Special Function		Exempt Vehicle	Eme	rgency	v Vehi	cle Res	spondi	ng to S	Scene 1	?	Ye	s []No	
	Extent of Damage No Dama	age Observed Mi	nor Damage		Fur	nction	al Dam	nage		✓ Tov	ved Du	e to Di	sablin	g Dama	age
	(U6) Most Damaged Area			(U7)	Most F	larmf	ul Ever	nt							
	12 - Front (U8) Pre Crash Actions			(U9)	Contril	buting	Gircui	mstand	es - V	ehicle					
	1 - Following roadway (U10) Sequence of Events 1			1 - 1	lone		of Eve		***************************************	.,					

	(U10) Sequence of Events 3			(U10) Sequ	ience	of Eve	nts 4							
C		strian License Numbe	r 🗸 Active]No L		□P spend		State 4E	Licer C	nse Cla	ass Er	ndorse	ments	Restr	ictions
iocalis ^{al po}	Last Known Operator DRIVER Last Name	First Name	M	I DRIN	Imme-d			16	10	City			Sta		ip
a.	* Citation Number Pending			* MI	E* tion 1					Viola	ation 2	·			
station	Vising Vising										200712				
72.	OWNER Last Name (skip if same *	as Driver) First Name	MI .	OWN * MI	VER A	ddres	S			City			Stat	e Zi	p
icom exec exec	(D1) Driver Distracted By			, ,			t Time Norm		sh						
	(D3) Driver Actions at Time of Cra	ash 1					ns at T		Crash	2	·····				-
	14 - Followed Too Closely Alcohol Test Test Not (Given Test Refused	∏Blood							Alcoho	I BAC	Result			
	Breath Urine	Other Chemical Test (Not	Field Sobriety or PB	T) LJA			Result	Pendir	ng						
	Drug Test	GivenTest Refused]Other	Blood	Drug	Test	resui	I	Pos	sitive		legativ	= []Pend	ding	
	(D4) Non Motorist Location at Tim	ne of Crash		(D5)	Non N	lotori	st Actio	n Prio	r to Cra	ash					
	(D6) Non Motorist Action at Time	of Crash 1		(D6)	Non N	1otori:	st Actio	n at Ti	me of	Crash	2				
	(D7) Pedestrian Maneuvers			(D8)	Bicycl	ist Ma	aneuve	rs							
	PERSON TYPE 1-Driver, 2-Pas	ssenger 3-Pedestrian 6-Drive	er/Owner, 7-Bicvo	le, 8-Pa	ssenge	er/Owr	ner. 24-L	ast Kno	aO nwo	erator 2	5-Last H	(nown (Operato	r/Owne	
2414	SEAT ROW SEAT POSITION SEAT	POSITION OTHER AIRBAG	DEPLOYED RE	STRAINT lot Applic	SYSTE		,	INJUI	RY TYPE putation	11	NJURY A -Face			DEGRE	
end Lud	2-Second Row 2-Middle 2-Oth 3-Third Row 3-Right 3- Uni	er Enclosed Cargo Area 2-Not De enclosed Cargo Area 3-Deplo	eployed 2-N yed - Front 3-S	lone Use houlder a	d - Motor and Lap I	Belt Us	e Occupa	3-Bro	ken Bon	es 3	-Head -Neck		3-Nonin	acitating capacita ble Injury	
enk Will	5-Other Row 5-Unknown 5-Ridi	ing on Motor Vehicle Ext 5-Deplo	yed - Other 5-L	shoulder E ap Belt O Restraint l	nly Used	d		4-Bur 5-Cor 6-Sho	ncussion	5	-Back -Arm(s) -Leg(s)		5-No Inj		
Appropri	6- Uni	known 6-Deplo	yed - 7-0 ation 8-0	hild Rest	raint - Fo	orward ear Fac	cina -	8-Abr	ziness asion/Br	7 uises 8	-Chest St -Internal		1-Office	' INFO Servidual State	ation
and to the	1-Not Ejected 1-DOT-Compliant M 2-Ejected Partially 2-Other Helmet 3-Ejected Totally 3-No Helmet	Notorcycle Helmet 7-Deplo		Child Rest Booster S Child Re	Seat		orrectly	10-01			-Entire Bo 0-Other	ody		al, Parar	
Ą	Institute Deliver Desconders Biovelie	t and Dedestrians		Cont								~		see cod	
	Person Type Last Name, First Name, Mi	t, and Pedestrians Sex (M,F,U)	DOD	D '	Dos.	Pos Dother	Air Bag Deployed	Ejected	Restraini System	t Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Amb Code
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1	Maine Department of Public Saf	ety	P	age 2			·	····	h	Forr	n 13:2	0A Re	vised .	Januar	y 2010

11-001424	STATE C	OF MAIN	IE CR	ASH	IRE	POF	RT				UN	IIT P	AGI
Unit ID Hit Run? VI	N GCEK14V9YE392745	License *	Plate	State ME	(U1) U 5 - Pi		е						
No Insurance NAIC	Insurance Company N	Vame			ir *		ce Polic	cy Nurr	nber			***************************************	
(U2) Vehicle Make			Vehicle 2000	Year	F 1) Vehic		or					
11 - CHEVROLET (U4)Vehicle Configuration			GVWR		/R	- Whit	*************						
Vehicle Has 9 or More Seats 7	? HAZMAT Placard	led ?		0,000 lb				- 26,000 nbound			> than outhbo		0 lbs
Yes		Yes No	✓Ea	stbound		/Vestbo	und		ot on F	Roadwa			nowr
(U5) Special Function Vehicle 1 - No Special Function]	Exempt Vehicle	Emerge	ncy Vel	nicle Re	spondi	ng to S	Scene 1	?	Ye	s [No	
Extent of Damage No D	amage Observed Mir	nor Damage	V	Functio	nal Dar	nage		Tow	ved Du	ıe to Di	sablin	g Dam	age
(U6) Most Damaged Area 6 - Rear			(U7) Mo	st Ham	ıful Eve	nt				·····			
(U8) Pre Crash Actions				intributir	ng Circu	ımstanı	ces - V	ehicle		······			
1 - Following roadway (U10) Sequence of Events 1			1 - No		e of Eve	ents 2						~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
				`									
(U10) Sequence of Events 3				equenc								··	
☑ Driver Bicycle ☐ Pe	edestrian License Numbe r	r ✓ Active	☐No Lice	nse Susper		State ME	Licer C	nse Cla	iss E	ndorse	ments	Restr 0	ictio
DRIVER Last Name	First Name	M	DRIVE	R Addre	SS			City	ſ		Sta	te Z	Zip
Citation Number Pending			Violatio	n 1				Viola	ition 2				
OWNER Last Name (skip if sa	ıme as Driver) First Name	MI	1	R Addre	SS			City			Stat	e Z	ip
* (D1) Driver Distracted By			* ME*	ndition	at Time	of Cra	sh						
(D3) Driver Actions at Time of	Crash 1			parentl iver Acti			f Crash	12					
, ,		framed to 1						Alcoho	1040	Desuit			
Alcohol Test Test N Breath Urine	Not Given Test Refused Other Chemical Test (Not F	Blood Field Sobriety or PB		hol Test	Result	Pendir	ng	AICOHO	IBAU	Resuit			
Drug Test N	Not Given Test Refused Other	Blood	Drug T	est Resi	ult	Po:	sitive		legativ	e [∏Pend	ding	
(D4) Non Motorist Location at	Time of Crash		(D5) No	n Moto	ist Actio	on Prio	r to Cra	ash		***************************************	***************************************		
(D6) Non Motorist Action at Ti	me of Crash 1		(D6) No	n Moto	rist Actio	on at T	ime of	Crash	2				
(D7) Pedestrian Maneuvers			(D8) Bi	cyclist N	laneuve	ers							
PFRSON TYPE 1-Driver, 2	-Passenger, 3-Pedestrian, 6-Drive	er/Owner, 7-Bicvo	de. 8-Pass	enger/Ow	ner, 24-	Last Kn	qO nwo	erator 2	5-Last I	Known (Operato	or/Owne	r
SEAT ROW SEAT POSITION S	SEAT POSITION OTHER AIRBAG	DEPLOYED RE	STRAINT SY	STEM		INJU	RY TYPE	i i	JURY A -Face			DEGRE	
2-Second Row 2-Middle 2 3-Third Row 3-Right 3	2-Other Enclosed Cargo Area 2-Not De 3-Unenclosed Cargo Area 3-Deploy	epioyea 2-N /ed - Front 3-S	lone Used - I Shoulder and	Vlotor Vehi Lap Belt U	sed	3-Bro	meu Roue	es 3-	Head Neck		3-Nonir	acitating ncapacita	iting
5-Other Row 5-Unknown 5	-Riding on Motor Vehicle Ext 5-Deploy	ed - Other 5-L	shoulder Belt ap Belt Only	Used	ı	4-Bur 5-Coi 6-Sho	ncussion	5-	-Back -Arm(s) -Leg(s)		4-Possi 5-No Inj	ble Injun jury	,
6	6-Deploy	/ed - 7-0	Restraint Use Child Restrair Child Restrair	it - Forwar		7-Diz	ziness rasion/Bri	7-	-Chest S -Internal	tomach		/ INFO S	
I A MARIE TO THE STATE OF THE S	ant Motorcycle Helmet 7-Deploy	ment - Curtain 9-0	Child Restrair Booster Sea	t - Used Ir	correctly	9-Coi 10-O		f Pain 9-	-Entire B 0-Other	lody	2-Individual 3-Medic	dual Stat cal, Para	emer
3-Ejected Totally 3-No Helmet		11-	Child Restra							AMB	Observa CODES		ie sh
Person Include Driver, Passengers, Bio	cyclist, and Pedestrians Sex (M,F,U)	DOB	Seat Sea Pos Pos	t Seat Pos	Air Bag Deployed	Ejected	Restraini System	t Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	Ar Cc
Last Name, First Name, Mi	M	12/10/60	1 1.	Other		1	3		5	T		1	
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Form 13:20A Revised January 2010

2011-7448

STATE OF MAINE CRASH REPORT

FIRST PAGE

	Reporting Agency ME0030500	Report Number 11-2282	8	rash Date /9/2011	Crash Time 15:54	At Scene Date 8/9/2011	At Scene Time 15:54
	City or Town Portland	Street or Highw	R			cting Street SS,HUTCHINS,7	'A CONN Off Road
	Direction FROM Nearest Intersectio ✓ At Intersection ☐ North ☐ So	n to Crash Site outhEastWest	Distance Fr 0.01	om Nearest Inter ☐ Feet ☑ Miles	2. C. C. C. C. C. C.		gitude 336940
J	Node 1 Node 2 18490 0	Measuren	nent Node	Distance to So	cene Posted Speed	V OING	Not Posted 25 Not Posted 45
	(F1) Type of Crash 2 - Rear End / Sideswipe		***************************************	(F2) Type of L		longy).	
-	(F3) Weather Condition			(F4) Light Cor	ndition		
Ł	2 - Cloudy (F5) Road Grade			1 - Daylight (F6) Road Su	rface Condition		
1	1 - Level			1 - Dry	I Davisa Operation	al (usa esanta)	
1	(F7) Traffic Control Device 1 - Traffic Signals (Stop & Go)			Traffic Contro	l Device Operation	ai (pre-crash)? V Yes No	Unk
3	(F8) Location of First Harmful Event 1 - On Roadway			Total Damage	over Threshold?	✓Yes	□No
	(F9) Contributing Circumstances - E	nvironment 1	, , ,	(F9) Contribu	ting Circumstances		Second 1 1 1
Ł	1 - None (F10) Contributing Circumstances -	 Road 1	· · · · · · · · · · · · · · · · · · ·	(F10) Contrib	uting Circumstance	s -Road 2	
l	1 - None			1 - None		T V SAT SAT SAT	
-	In or Near a Construction, Maintena	nce, or Utility Work Zone? ☐ Yes ☑ No	? Uni	1	/orkers Present?	Yes N	0 Unk
-	(F11) Location of the Crash related	to Work Zone		(F12) Type of	Work Zone		
-	Law Enforcement Present at Work 2	Zone? w Enforcement Vehicle Or	nlv []N	School Bus R		Yes, Indirectly Invo	olved No
	MAKE A LEFT ON TO JETPORT ISTRUCK FROM BEHIND BY V.# TRAFFIC, WHO WAS IN TURN SWHO WAS STOPPED IN TRAFFIBY V.#4 FOLLOWING THE ROAWITNESSES SAID THAT IT APPOTE THE ROADWAY AND DID NOT ATTAFFIC IN THE LEFT TURN LAPPOACHING THE LINE OF SWAKE LEFT ON TO JETPORT BLU.#4 THEN STRUCK V#3 DIRECTORY ONCE AT REST V.#4 WAS FACING TO THE THE MEDIAN FINALLY COMING ONCE AT REST V.#4 WAS FACING STAFFICH TO THE WAS BEING TREATER ONLY ON THE TRANSPORTED BY MEDCU.	2 WHO WAS STOPPED STRUCK FROM BEHING IC, WHO IN TURN WADWAY. PEARED V.#4 WAS FOLA PPEAR TO SLOW DOVANE OF CONGRESS STOPPED TRAFFIC WADWD. AT RED LIGHT. CITLY FROM BEHIND A LEFT AND TRAVELLING TO REST ON THE MENG SOUTHWEST TOW STRIP. ATED BY MEDCU UPONESS AND BACK PAI	D IN D BY V.#3 S STRUCK LOWING WN IN ITING TO ND G OVER DIAN. ARD THE N POLICE N SHORTI	-Y	JETPORT BLVD	CONGRESS ST. HATCH	RT SET TURNPIKE N 1) NHINS DRI 7A
	Witness Last Name *	First	MI	Address * ME*	C	City	State Zip
1	Witness Last Name *	First	MI	Address * ME*	C	Dity	State Zip
l	Non Vehicle Property Damage Desc	cription			State	City or Town	Utilities Private
	Property Owner Name	STATE OF THE STATE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Address	C	City	State Zip
	Non Vehicle Property Damage Desc	cription			State	City or Town	Utilities Private
	Property Owner Name			Address	C	City	State Zip
	Reporting Officer Officer Robert Hawkins	Badge#	Report 8/9/2	011 A	pproved By dministrator Tro		Approved Date 8/11/2011
t	Maine Department of Public Safet			Page 1			A Revised January 20

Last Modified: 8/11/2011 08:42

2011-7448

STATE OF MAINE CRASH REPORT

FIRST PAGE (cont.)

Reporting Agency ME0030500	Report Numb 11-2282	per	Cras	sh Date	Crash Time	At Scene	∋ Date #	\t Scer	ne Time
City or Town		eet or Highway			Nearest In	tersecting Street		American Control	Off Road
Direction FROM Nearest Intersection At Intersection North Sou		Dis	tance Fron	Nearest Inte			Longitude		
Node 1 Node 2		Measuremen	t Node	Distance to	Scene Posted S	Speed Limit Speed Limit	Unknown N/A	processors;	Posted 25 Posted 45
(F1) Type of Crash			i.	(F2) Type o		Annae de la companya		beautiful and the second secon	
(F3) Weather Condition			***************************************	(F4) Light C	Condition				****
(F5) Road Grade		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(F6) Road S	Surface Conditio	n			
(F7) Traffic Control Device				Traffic Cont	rol Device Oper	rational (pre-cras	h)? No	Tur	nk
(F8) Location of First Harmful Event			······································	Total Dama	ge over Thresh	old?	s DN	· · · · · · · · · · · · · · · · · · ·	
(F9) Contributing Circumstances - En	nvironment 1			(F9) Contrib	outing Circumsta	ances - Environm			***************************************
(F10) Contributing Circumstances - R	Road 1			(F10) Contr	ibuting Circums	tances -Road 2			***************************************
In or Near a Construction, Maintenan	ice, or Utility V	Nork Zone?	□Unk	Wark Zone	Workers Preser	nt?	 ПNo	———	
(F11) Location of the Crash related to	lunnad		l	(F12) Type	of Work Zone	Land 1	Larrad 1 1 2		
Law Enforcement Present at Work Zo	one?	t Vehicle Only	ПNo	School Bus	Related? irectly Involved	☐Yes Indired	tly involved		No
NARRATIVE		e vernois orny		CRASH DIA		[Ay 81101100	d	
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			is their area and their work that is the fact and their area and their area.						
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	and the second s		nyayr da dawar an da, no ya an be an uu uu ar dadd						
Witness Last Name	First		MI	Address		City	Stá	ate	Zip
* Witness Last Name	First		Mi	* ME* Address		City	Sta		Zip
* Non Vehicle Property Damage Descr			· · · · · · · · · · · · · · · · · · ·	* ME*		tate City or		tilities	Private
Property Owner Name				Address	L	City	Sta		Zip
Non Vehicle Property Damage Descr	ription				Пѕ	tate  City or		tilities	Private
Property Owner Name				Address		City	Sta		Zip
Reporting Officer		Badge#	Report Da		Approved By			proved	
Maine Department of Public Safety		num had had gag had 20		ge 1A	hhimsen my	Form	13:20A Rev		

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6	J6) N	ea	r											*********				34	4 -	Traf	Harm fic Si	gna	al S	ıppo									
	J8) F																	1.		Contr <b>one</b>	ibutin	g C	ircu	nstar	ces -	Ve	hicle						
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(1	07) F	Pe	des	triai	ı N	lane	uver	S										(E	08) E	Bicyc	líst M	ane	euve	rs									
-		PE	ERS	ON	TYI	PE 1-	-Drive	er, 2-	Passe	enge	r, 3-F	Pedes	strian	, 6-Dr	iver/C	Owner,	7-Bio	ycle, 8	3-Pas	sseng	er/Ow	ner,	, 24-L	ast Kr	own (	pe	rator 2	25-Las	t K	nown (	Operato	or/Owne	r
	SEAT 1-Fron	nt R	ow	1	-Lef	t (driv	iTION er)	- 1	Claan	or Sac	tion o	THER	(true)	1-Not	Applia	PLOYE	1	RESTRA -Not Ap	onlica	hle				1-Ar	IRY TY		1	NJURY -Face -Head		REA	1-Fatal	/ DEGRI	E
	2-Seco 3-Third 4-Four	d R	ow	3	-Mic -Rig -Oth	ht		3- 4-	Unen Trailin	closed g Unit	d Car	go Are	a	4-Der	loyed	- Front - Side	3	-None -Should -Should	der ar der B	nd Lap elt On	Beit U ly Used	sed	ccupa	3-Br 4-Br	oken B Ims		3 3	-Neck I-Back			3-Nonli 4-Poss	ncapacita ible Injur	
	5-Othe 6-Unki			5	-Uni	knowr	1	(n	Riding on-trai Unkn	ling u		/ehicle	e Ext		, air b		ē	i-Lap Bi i-Restra '-Child I	aint U	sed -	Other	i Fac	cina	6-SI	ncussi iock zziness		6	i-Arm(s i-Leg(s '-Chest	)	omach	5-No Ir INJUR	jury 1 INFO S	OURCE
	EJEC1 1-Not   2-Ejec	Eje	cted			1-D0		USE mplia	nt Moi		le He	lmet		Comb 7-Dep		n ent - Cur	tain ç	-Child f	Restr Restr	aint - I aint - I	Rear Fa	cina		9-C	rasion/ mplain ther		Pain 9	3-Intern 3-Entire 10-Othe	Во	dy	2-Indivi	er Obsen dual Stat cal, Para	ement
	3-Ejec						her H											1-Child			- Other									AMB	Observ		
	erson Type				·		-		clist, a	and P	edest	rians		Se (M,F		DOE	3	Seat Pos Row	5	Seat Pos	Seat Pos Other	Den	Bag loyed	Ejecte	Restra	int H	-lelmet Use	Injur Degre	y ee	Injury Type	Injury Area	inj Info Source	Amb Code
$\mid$	6	*	ast iv	arrie	FII	SUNA	me, N	<u>//11</u>						M	0	9/30	/57	1		1	Other	T	1	1	3		3	5				2	1
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L														-					-							- Contraction		<u></u>			L	<u></u>	
N	laine	e D	epa	artn	ner	it of	۲ub	HC S	atei	:y								Page	2								For	m 13	:20	A Re	/ised	Janua	ry 201

11-2282	STATE C	F MAIN	IE (	CRA	SH	RE	POF	RT				UN	IT P	AG
Unit ID Ult Dung VIN	L58K85W554183	License *	Plate			(U1) Uı <b>2 - (S</b> ı			Vehic	ie				
No Insurance NAIC	Insurance Company N	lame						e Políc				***************************************		
(U2) Vehicle Make			Vet	nicle Ye	ear		Vehic Green	le Colo	)r					
<b>33 - JEEP</b> (U4)Vehicle Configuration			GV	WR or		R								
Vehicle Has 9 or More Seats ?	HAZMAT Placard	ed 2		]< 10,		s. Direction	Emmani	0,001 - North	····		- Lamenton	> than outhbo		) lbs
Yes V		Yes ✓ No		]Eastt	oound	V	Vestbo	und		ot on R	loadwa		Unk	now
(U5) Special Function Vehicle  1 - No Special Function	E	Exempt Vehicl	e Em	ergeno	y Veh	icle Re	spondi	ng to S	cene ?	?	Ye	s [	]No	
Extent of Damage No Dama	ge Observed  Min	nor Damage		П	unctio	nal Dan	nage	hate also also also also also also also also	Tov	ved Du	e to Di	sablin	g Dam	age
(U6) Most Damaged Area <b>6 - Rear</b>	***************************************					ful Eve lotor V		<u> </u>		***************************************				
(U8) Pre Crash Actions			(US	) Cont	ributin	g Circu			ehicle					~
<b>11 - Stopped in traffic</b> (U10) Sequence of Events 1				None		of Eve	nts 2		*****			W-4		
50 - No Other Events			50	- No	Other	Event	s							
(U10) Sequence of Events 3  50 - No Other Events						of Eve <b>Event</b>								
✓ Driver Bicycle Pedes ☐ Last Known Operator	strian License Number	r 🗸 Active	No	Licens	e [] F uspen	ermit s	State <b>VE</b>	Licer <b>C</b>	ise Cla	iss Ei	ndorse	ments	Restr	ictio
DRIVER Last Name	First Name	M		UVER /	Addres	SS			City	í		Sta	te Z	Zip
Citation Number Pending	• • • • • • • • • • • • • • • • • • •		_	lation '	1				Viola	ation 2				
OWNER Last Name (skip if same	as Driver) First Name	MI		VNER /	Addres	SS			City			Stat	e Z	.ip
(D1) Driver Distracted By			(D2	2) Cond		at Time		sh			-			
1 - Not Distracted (D3) Driver Actions at Time of Cra	sh 1					y Norn ons at 1		Crash	2					
1 - No Contributing Action		portures.												
Alcohol Test ✓ Test Not C ☐ Breath ☐ Urine ☐	Given Test Refused Other Chemical Test (Not F	Blood Field Sobriety or PE	1 1	Alcoho	I Test	Result	Pendir	ng (	4VCONO	IBAC	Result			
Drug Test Not C	Given Test Refused Other	Blood	Dru	ug Test	t Resu	lt	Pos	sitive		legativ	e [	]Pend	ding	
(D4) Non Motorist Location at Tim			(D	5) Non	Motor	ist Actio	on Prio	r to Cra	ash					
(D6) Non Motorist Action at Time	of Crash 1		(D6	3) Non	Motor	ist Actio	n at T	ime of	Crash	2				
(D7) Pedestrian Maneuvers	***************************************		(D8	B) Bicy	clist M	aneuve	rs					***************************************		
PERSON TYPE 1-Driver, 2-Pas	senger, 3-Pedestrian, 6-Drive	r/Owner, 7-Bicy	cle, 8-l	Passen	ger/Ow	ner, 24-l	ast Kn	own Op	erator 2	5-Last I	Known (	Operato	r/Owne	r
1 Front Pour 1   aft (driver) 1-Slee	oner Section of Cab (truck)1-Not AD	plicable 1.1	Not Ann	NT SYST			1-Am	RY TYPE putation		JURY A -Face	REA	INJURY 1-Fatal	DEGRE	ΞE
2-Second Row 2-Middle 2-Othe 3-Third Row 3-Right 3- Une	er Enclosed Cargo Area 2-Not De enclosed Cargo Area 3-Deploy	red - Front 3-	None U: Shoulde	sed - Mol er and La	p Belt U		3-Br0	keu Roue	es 3-	-Head -Neck		2-Incap 3-Nonir	capacita	ating
5-Other Row 5-Unknown 5-Ridii	ng on Motor Vehicle Ext 5-Deploy	red - Other 5-(	ap Bel	er Belt Or t Only Us	ed		4-Bur 5-Coi 6-Sho	ncussion	5-	-Back -Arm(s) -Leg(s)		5-No In	ble Injury ury	,
6- Uni	1	red - 7-0	Child Re	nt Used - estraint - estraint -	Forward		7-Diz	ziness asion/Br	7-	-Chest S -Internal	tomach	INJURY	INFO S	
1-Not Ejected 1-DOT-Compliant M 2-Ejected Partially 2-Other Helmet	7 Donlov	ment - Curtain 9.0	Child Re -Booste	estraint - er Seat	Used In	correctly		mplaint o	Pain 9		ody	2-Indivi-	dual Stat	teme
3-Ejected Totally 3-No Helmet		11		Restraint							AMB	CODES -		ie si
Person Include Driver, Passengers, Bicyclist Type Last Name, First Name, Mi	t, and Pedestrians Sex (M,F,U)	DOB	Seat Pos Row	Seat Pos	Seat Pos Other	Air Bag Deployed	Ejected	Restraint System	Helmet Use	Injury Degree	Injury Type	Injury Area	Inj Info Source	
6 *	М	10/28/81	1.	1	Julei	1	1	3	3	5	October Company of the Company of th		2	
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								Pro-manual						-
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			,,	,		1								T

Form 13:20A Revised January 2010

11-2282	STATE OF MAIN	E CRASH REPORT UNIT PAGE
Unit ID Ulit Dung VIN	License   A36267S011017 *	
No Insurance NAIC	Insurance Company Name	Insurance Policy Number
(U2) Vehicle Make		Vehicle Year (U3) Vehicle Color 2007 4 - Blue
<b>26 - HONDA</b> (U4)Vehicle Configuration		GVWR or GCWR
Vehicle Has 9 or More Seats?	HAZMAT Placarded ?	Image: Second Section       10.001 - 26,000 lbs.       > than 26,000 lbs.         Vehicle Travel Direction       Northbound       Southbound
☐ Yes 🔽 (U5) Special Function Vehicle	No Yes No Exempt Vehicle	Eastbound ✓ Westbound Not on Roadway Unknown  Emergency Vehicle Responding to Scene ?
1 - No Special Function		Yes No
	ge Observed Minor Damage	☐ Functional Damage
(U6) Most Damaged Area <b>6 - Rear</b>		(U7) Most Harmful Event  14 - Parked Motor Vehicle
(U8) Pre Crash Actions  11 - Stopped in traffic		(U9) Contributing Circumstances - Vehicle  1 - None
(U10) Sequence of Events 1  50 - No Other Events		(U10) Sequence of Events 2 50 - No Other Events
(U10) Sequence of Events 3  50 - No Other Events		(U10) Sequence of Events 4 50 - No Other Events
✓ Driver Bicycle Pedes  Last Known Operator	trian License Number Active	
DRIVER Last Name	First Name MI	DRIVER Address City State Zip
* Citation Number Pending	444	* ME* Violation 1 Violation 2
OWNER Last Name (skip if same a	as Driver) First Name MI	OWNER Address City State Zip
* (D1) Driver Distracted By		* ME* (D2) Condition at Time of Crash
1 - Not Distracted (D3) Driver Actions at Time of Cras	2h 1	1 - Apparently Normal (D3) Driver Actions at Time of Crash 2
1 - No Contributing Action		
	Other Chemical Test (Not Field Sobriety or PBT	TACORDI Test Result Pending
Drug Test	Siven Test Refused Blood Other	Positive Negative Pending
(D4) Non Motorist Location at Time	e of Crash	(D5) Non Motorist Action Prior to Crash
(D6) Non Motorist Action at Time o	f Crash 1	(D6) Non Motorist Action at Time of Crash 2
(D7) Pedestrian Maneuvers		(D8) Bicyclist Maneuvers
		cle, 8-Passenger/Owner, 24-Last Known Operator 25-Last Known Operator/Owner
1 Front Pow 1 Left (driver) 1-Sleen	per Section of Cab (truck)1-Not Applicable 1-Not Enclosed Cargo Area 2-Not Deployed 2-Not Deployed	STRAINT SYSTEM INJURY TYPE INJURY AREA INJURY DEGREE lot Applicable 1-Amputation 1-Face 1-Fatal lone Used - Motor Vehicle Occupant 2-Bleeding 2-Head 2-Incapacitating
3-Third Row 3-Right 3- Uner 4-Fourth Row 4-Other 4-Trailin	nclosed Cargo Area 3-Deployed - Front 3-Sr ng Unit 4-Deployed - Side 4-Sr g on Motor Vehicle Ext 5-Deployed - Other 5-La	thoulder and Lap Belt Used 3-Broken Bones 3-Neck 3-NonIncapacitating thoulder Belt Only Used 4-Burns 4-Back 4-Possible Injury ab Belt Only Used 5-Concussion 5-Arm(s) 5-No Injury
6-Unknown (non-tra	alling unit) (knee, air belt,) 6-Re nown 6-Deployed - 7-Ch	Lestraint Used - Other     6-Shock     6-Leg(s)       Child Restraint - Forward Facing     7-Dizziness     7-Chest Stomach     INJURY INFO SOURCE       Child Restraint - Rear Facing     8-Abrasion/Bruises     8-Internal     1-Officer Observation
1-Not Ejected 1-DOT-Compliant Mo 2-Ejected Partially 2-Other Helmet	otorcycle Helmet 7-Deployment - Curtain 9-Cr 10-E	hild Restraint - Used Incorrectly Booster Seat  9-Complaint of Pain 9-Entire Body 10-Other 2-Individual Statement 3-Medical, Paramedical
3-Ejected Totally 3-No Helmet	and Dedectrions	AMB CODES - see code sheet
Person Include Driver, Passengers, Bicyclist, Type Last Name, First Name, Mi	(MEII) DOB	Seat Seat Air Bag Ejected Restraint Helmet Injury Injury Injury Inj Info Amb Pos Deployed Ejected Restraint Helmet Injury Injury Injury Inj Info Amb System Use Degree Type Area Source Code
6 *	F 04/23/33	1 1 2 1 3 3 4 9 4 2 546

Form 13:20A Revised January 2010

11-2282	STATE (	OF MAIN	IE (	JKA	SH	KE	POF	₹1				UN	IIT P	AG
Unit ID UNITED VIN	ID52F55M231137	License	Plate				nit Typ		r		***************************************		1	
No Insurance NAIC	Insurance Company I	Name			1-16-		nsurano			nber	*******	T-T-00-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
U2) Vehicle Make			Vah	iicle Ye	or		) Vehic	ie Col	or					
11 - CHEVROLET			200		वा		Grey,							
(U4)Vehicle Configuration				WR or	GCWF		<u> </u>	<u> </u>				·····		
				]< 10,	000 lbs	ŝ.	1	0,001 -	- 26,00	)0 lbs.		> than	26,00	0 lbs
Vehicle Has 9 or More Seats ?	HAZMAT Placard		Ver	nicle Tr		.,		North				Southby		
	funnessel	Yes VNo		Easth			Vestbo		PARTICULAR PROPERTY.		Roadw	ay [	Unk	now
(U5) Special Function Vehicle  1 - No Special Function		Exempt Vehicle	e   Em	ergenc	y veni	icie Re	spondi	ng to s	scene		TY	es	No	
Eviant of Damage	age Observed Mi	nor Damage		□ Ft	unction	nal Dar	nage		✓ To	wed D	ue to D	isablin	g Dam	age
(U6) Most Damaged Area			(U7	) Most	Harmf	rul Eve	nt					<del></del>		
12 - Front							n Trar							
(U8) Pre Crash Actions						g Circu	mstand	ces - V	'ehicle					
1 - Following roadway				None				~~~~~						
(U10) Sequence of Events 1				0) Seq - <b>Unk</b>			ents 2							
21 - Motor Vehicle In Transpo (U10) Sequence of Events 3	Jrt			0) Seq			onte d					***************************************		
47 - Unknown				- Unk			71115 4							
✓ Driver Bicycle Pede:	strian License Numbe	er 🗸 Active [	No	Licens	e P	ermit	State <b>ME</b>	Lice:	nse Cl	ass E	Endorse	ements	Rest	rictio
DRIVER Last Name	First Name	М		IVER /				10	Cit	у		Sta	ite 2	Zip
*		***************************************		1E*					1.61	ation 2	>			
Citation Number Pending [_]			VIO	lation 1	I				VIOI	auufi z	•			
OWNER Last Name (skip if same	as Driver) First Name	MI	1	NER /	Addres	S			City			Sta	te Z	ip
(D1) Driver Distracted By					lition a	t Time	of Cra	sh						
6 - Unkown			1.	Appa										
(D3) Driver Actions at Time of Cra	sh 1	***************************************	(D3	) Drive	r Actio	ns at	Time of	Crash	12					
20 - Unknown	g			- Unk	nown	1			·					
Alcohol Test	Given Test Refused Other Chemical Test (Not)			Alcoho	l Test l	Result	Pendir	ng	Alcoho	ol BAC	Resul	Į.		
Drug Test  ✓ Test Not (	<u> </u>			ıg Test	Resul	t		l		vegatî	·/o 1	Pen		
Urine	Other	New served.			~		Iversand	sitive	hamind	ncAq11,			anığ	
(D4) Non Motorist Location at Tim	e of Crash		(D5	i) Non	Motoris	st Action	on Prio	r to Cr	ash					
(D6) Non Motorist Action at Time	of Crach 1		/De	Non	Motori	et Actio	on at Ti	ime o*	Crach	2			·····	
(DO) MOU MOTOURE WOTOU OF THIS	VI WIGOII I		1,00	ij iNUH	HUJUH	ur muli	211 GL 11	and UI	J. 0311	6				
(D7) Pedestrian Maneuvers		***************************************	(D8	Bicyc	dist Ma	aneuve	ers					************		
•														
PERSON TYPE 1-Driver, 2-Pas						ner, 24-								
SEAT ROW SEAT POSITION SEAT  1-Front Row 1-Left (driver) 1-Sleet	eper Section of Cab (truck)1-Not Ap	pplicable 1-N	Int Anni	VT SYST licable			1-Am	RY TYPE putation	1	NJURY . 1-Face	AKEA	1-Fatal		
2-Second Row 2-Middle 2-Other	er Enclosed Cargo Area 2-Not Di enclosed Cargo Area 3-Deplo	epioyed 2-6 oyed - Front 3-6	lone Us	ed - Mot r and Lap	or Vehicl	le Occup ed	ant 2-Ble 3-Bro	eding ken Bon		2-Head 3-Neck		2-Incap 3-Nonli	acitating ncapacita	tina
4-Fourth Row 4-Other 4-Trail	ling Unit 4-Deplo	yed - Side 4-S	Shoulder	r Belt On	ly Used		4-Bur	ns	4	1-Back			ible injur	
	railing unit) (knee, a	air belt,) 6-F		Only Uset 1			6-Sho		6	5-Arm(s) 5-Leg(s)				
6- Unl	known 6-Deplo			straint - I straint - I				ziness asion/Br		7-Chest : 3-Interna	Stomach I		Y INFO S er Obsen	
1-Not Ejected 1-DOT-Compliant M	7.0	yment - Curtain g_C	child Re	straint - I	Used Inc	orrectly	9-Cor	mplaint o	f Pain 9	9-Entire I	3ody	2-Indivi	dual Sta	eme
2-Ejected Partially 2-Other Helmet 3-No Helmet	•		Booster Child F	r Seat Restraint	- Other		10-01	rner		10-Other		Observ	cal, Para ation	mea
												CODES	- see coo	ie st
Person Include Driver, Passengers, Bicyclist	00%	DOB	Seat Pos	Seat Pos	Seat Pos r	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	l Injury Degree	Injury Type	Injury Area	Inj Info Source	A C
Type Last Name, First Name, Mi	(M,F,U)	T	Row	1	Other			Oystem	1	Togics	7		T	
6 *	F	07/26/36	1	1	are consequent	3	1	3	3	4	9	3	2	5
			1	~		_	-4	-	-	5				1
2 *	М	11/18/32	1	3		3	1	3	3	)		- National Park	2	and the state of t
2 *	М	11/18/32	1	3	-	3	-	3	3	3			2	
2 *	M	11/18/32	1	3		3	According to the Control of the Cont	3	3	3	And a handle of the second sec		2	
2 *	M	11/18/32	1	3	47.00	3	And an article state of the latest and the latest a	3	3				2	um unde collected y chalantal errel ausur tro-tune, da prodressed enterespendent. Se grados
2 *	M	11/18/32	1	3		3	The second secon	3				evised		THE CONTRACTOR OF CONTRACTOR AND

### 2011-19464

# STATE OF MAINE CRASH REPORT

FIRST PAGE

Reporting Agency Report 11-00			sh Date <b>21/2011</b>	Crash Time <b>08:30</b>	At Scene Date 12/21/2011	At Scene Time 08:50
City or Town Portland	Street or Highway CONGRESS ST			05089110ters	ecting Street ESS,HUTCHINS,7	A CONN Off Road
Direction FROM Nearest Intersection to Cras	sh Site Dist East West	ance Fron	n Nearest Inter.  Feet □ Miles	Latitude <b>43.650760</b>		itude <b>336940</b>
Node 1 Node 2 <b>18490</b>	Measurement	t Node	Distance to Sc	ene Posted Spec hs Miles <b>35</b>	the same of the sa	Not Posted 25 Not Posted 45
(F1) Type of Crash  2 - Rear End / Sideswipe			(F2) Type of L 4 - Four Leg	ocation Intersection		
(F3) Weather Condition			(F4) Light Con	dition		
5 - Sleet, Hail (Freezing Rain or Drizzle (F5) Road Grade	е)		1 - Daylight (F6) Road Sur	face Condition		
2 - On Grade			5 - Ice/Fros	t		
(F7) Traffic Control Device  1 - Traffic Signals (Stop & Go)			Traffic Control	Device Operation	nal (pre-crash)? ☑ Yes	Unk
(F8) Location of First Harmful Event  1 - On Roadway			Total Damage	over Threshold?	✓Yes	 ∏No
(F9) Contributing Circumstances - Environm	ent 1		(F9) Contributi	ng Circumstance	s - Environment 2	turani
2 - Weather Conditions						
(F10) Contributing Circumstances - Road 1 2 - Road Surface Condition (Wet, Icy,		)		iting Circumstanc	es -Koad 2	
In or Near a Construction, Maintenance, or U	Jtìlity Work Zone? ∕es ☑No	Unk	Work Zone W	orkers Present?	☐Yes ☐No	Unk
(F11) Location of the Crash related to Work	Zone		(F12) Type of	Work Zone		A Hill Mark and Mark
Law Enforcement Present at Work Zone? Officer Present Law Enforce	ement Vehicle Only	□No	School Bus Re	elated? ctly Involved	Yes, Indirectly Invo	lved VNo
INTO THE REAR OF UNIT TWO. THE D STATED THAT SHE WAS EXPERIENCIN DRIVER OF UNIT TWO STATED THAT S A HEADACHE. BOTH REFUSED A MEDI TRANSPORT. THERE WAS NO OTHER I	IG NECK PAIN. TH SHE WAS EXPERIE CU EVALUATION C	E NCING OR		NOT TO SCAL	CONGRESS ST.	
Witness Last Name F	irst	MI	Address		City	State Zip
Witness Last Name F	First	MI	Address		City	State Zip
Non Vehicle Property Damage Description			1	State	City or Town	Utilities Private
Property Owner Name			Address		City	State Zip
Non Vehicle Property Damage Description			.L	State	City or Town	Utilities Private
Property Owner Name			Address		City	State Zip
Reporting Officer  Officer Anthony Ampezzan  Maine Department of Public Safety		Report Da 12/21/2		proved By Iministrator Er		Approved Date 12/21/2011 A Revised January 201

Report Numbe 11-003589	r		STAT	TE C	F MAII	VE (	CRA	\SH	IRE	POF	₹T				(JN	IIT P.	AGF
Linit ID	lit Run?	VIN 1NXBR3	32E85Z363117	,	Licens *	e Plate	e		(U1) U <b>1 - P</b> a	nit Typ		·		***************************************		\$ 1	• .
No Insuranc	ce NAIC	1	Insurance Com		ame		<u> </u>			nsuran			nber				
(U2) Vehicle M			1				hicle Y	ear		) Vehic	le Col	or		······································			
<b>67 - TOYOTA</b> (U4)Vehicle Co	····						/WR or		'R	Blue		***************************************		· Sentence ·			
Vehicle Has 9	or More Sea	fe 2	HAZMAT F	Placardi	ed 2	L		dl 000, ravel [	s. Directio		0,001 -	26,00 bound		- hanned	> than outhbo		0 lbs
		′es ✓N			es No		<b>∠</b> East	bound		Nestbo	und		ot on I	Roadwa		Unk	nowr
(U5) Special Fi 1 - No Special					Exempt Vehic	le En	nergen	cy ver	nicle Re	spona	ng to S	scene		[]Ye	s [	No	
Extent of Dama	age N	Damage	Observed	<b>✓</b> Min	or Damage		П	unctio	nal Dar	nage		Tov	ved Di	ue to D	isablin	g Dam	age
(U6) Most Dam	aged Area		White WATER			1,	7) Mos		ıful Eve	nt							
(U8) Pre Crash						(U	9) Con	tributin	g Circu	imstan	ces - V	ehicle				***************************************	
10 - Slowing (U10) Sequence		1					- <b>None</b> 10) Se		e of Eve	ents 2							
50 - No Othe (U10) Sequence		3				(1)	10) Se	nuence	e of Eve	ants 4			·	·····			
				, ,							Ti de a	01-	In			TESTA	
	Bicycle Known Oper	Pedestri ator	an License M	vumber	Active			Suspen		State ME	C	nse Cla	0	Endorse )	ments	0	
DRIVER Last 1	lame		First Name		ř.		RIVER ME*	Addre	SS			City	1		Sta	ite Z	Zip
Citation Numb	er Pendin	g 🗌	,,,,,			Vic	olation	1				Viola	ation 2	2			
OWNER Last I	lame (skip i	f same as	Driver) First Nar	ne	MI		VNER ME*	Addre:	SS			City			Stat	e Z	ip
(D1) Driver Dis						(D:	2) Con		at Time		sh						
1 - Not Distra (D3) Driver Act	ions at Time					(D	3) Driv	er Acti	<b>y Norr</b> ons at	Time o		2			<b></b>		
9 - Drove To		Condition st Not Give		fused	∏Bloo	7			outing			Alcoho	I BAC	Result			
Breath Drug Test	Urine		her Chemical Te	st (Not F		вт)	ug Tes		Result	Penali	19					***************************************	
Ŭ	Urine	Ot	her	iuseu						Po		i	legativ	ve [	Pen	ding	
(D4) Non Moto	rist Location	at Time o	f Crash			(D.	5) Non	Motor	ist Acti	on Prio	r to Cra	ash					
(D6) Non Moto	rist Action a	Time of (	Crash 1			(D	6) Non	Motor	ist Acti	on at T	ime of	Crash	2				
(D7) Pedestria	n Maneuver					(D	8) Bicy	clist M	aneuve	ers	***************************************	***************************************					
PERSON	TYPE 1-Drive	r, 2-Passer	iger, 3-Pedestrian,	6-Drive	r/Owner, 7-Bic	/cle, 8-	Passen	ger/Ow	ner, 24-	Last Kn	own Op	erator 2	5-Last	Known	Operato	or/Owne	r
1-Front Row 1	EAT POSITION -Left (driver)	1-Sleener	SITION OTHER Section of Cab (truck) nclosed Cargo Area	1-Not Apr	olicable 1	Not Ann	INT SYS		cle Occup	1-Am	RY TYPE putation	1.	NJURY / -Face -Head	AREA	1-Fatal	DEGRE	
4-Fourth Row 4	-Right -Other	3- Unenclo 4-Trailing	osed Cargo Area Unit	3-Deployi 4-Deployi	ed - Front 3 ed - Side 4	-Should: -Should:	er and La er Belt O	ip Belt U nly Used	sed	3-Bro 4-Bu	iken Boni Ins	es 3- 4-	-Neck -Back		3-Nonir 4-Possi	ncapacita ble Injury	iting
5-Other Row 5 6-Unknown	-Unknown	5-Riding o (non-trailir 6- Unknov	ng unit)	(knee, air 6-Deploy	· belt,) 6 ed - 7	Restrai	lt Only U: nt Used - .estraint -	Other	i Facing	6-Sho 7-Diz	ziness	6· 7·		Stomach		· · / INFO S	
EJECTED  1-Not Ejected  2-Ejected Partially  3-Ejected Totally	2-Other He	mpliant Moto elmet		Combinat 7-Deployi	ment - Curtain g	-Child R 0-Boost		Used In	correctly		rasion/Bri mplaint o ther	f Pain 9	-Interna -Entire E 0-Other	Body	2-Indivi	er Observ dual Stat cal, Parar ation	emen
Institute Dei	3-No Helm		d Pedestrians		,	Seat									CODES -		
Type	ver, Passengers , First Name, M	-	u i cucollidis	Sex (M,F,U)	DOB	Pos Row	Seat Pos	Pos Other	Air Bag Deployed	Ejected	Restrain System	t Helmet Use	Injury Degree	Injury e Type	Injury Area	Inj Info Source	Arr Cod
6 *				F	12/26/62	1	1		2	1	3		4	9	3	2	1
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Report Number	STA	TE OF MA	AINE	CRΔ	SH	RF	POF	₹Τ				1 14	117 C	۸ ^
Unit ID Hit Run?	VIN	Lic	ense Plate		tate (	(U1) U	nit Typ	e	<del></del>		<del></del>	UN	<u>IIT P</u>	AG
NAIC	5NPET46C78H34338	89 * ompany Name			ME			jer Cai		nhar				
No Insurance	*	mpany ivame				*								
U2) Vehicle Make 27 - HYUNDAI			Vel 20	nicle Ye <b>08</b>	ar		) Vehic <b>Beige</b>	cle Col	or					
U4)Vehicle Configuration	on		GV	WR or 1		₹		0.001 -	20.00	ιΛ Ib.s		> than	26,00	O fibr
Vehicle Has 9 or More 5		Γ Placarded ?	Vel	nicle Tra			·		bound			outhbo	<del></del>	U IU:
	Yes No	Yes 🗸		<b>ZEastb</b> ergenc			Vestbo		h-m-d		Roadwa	ay [	Unk	now
U5) Special Function V <b>1 - No Special Funct</b>		Exempt ∨	ehicle   Ell	ergenc	y vern	icie re	spuriui	ing to a	scene		Ye	S	□No	
Extent of Damage	No Damage Observed	✓ Minor Dama	ge	□Fu	unction	nal Dar	nage		□ To\	wed Du	ue to D	isablin	ig Dam	age
(U6) Most Damaged Are 5 - Rear Passenger (				') Most - Unkı			nt		*************			***************************************		
(U8) Pre Crash Actions	OTTICI		(US	) Contr	ibuting		mstan	ces - V	ehicle					
11 - Stopped in traff (U10) Sequence of Ever				None 0) Sequ		of Eve	ants 2							
47 - Unknown														
(U10) Sequence of Ever	nts 3		(U1	0) Seq	uence	of Eve	ents 4							
✓ Driver Bicycle		e Number 🔽 Ac	tive No	Licens	· lonnand		State <b>ME</b>	Lice:	nse Cla	ass E	ndorse	ments	Rest	rictic
☐ Last Known O _l DRIVER Last Name	erator /* First Name	e	MI DR	IVER A	uspend Addres		ME	<u> </u>	City	<u> </u>		Sta	ite 7	Zip
k  Citation Number Pen	ding	·····		<b>1E*</b> lation 1					Mak	ation 2				
							~~~			311011 2				
⊃WNER Last Name (sk ≰	p if same as Driver) First N	ame MI		NER A 1 e *	ddres	8			City			Sta	te Z	Ϊp
D1) Driver Distracted B	У		1.	2) Cond				sh					***************************************	
1 - Not Distracted D3) Driver Actions at T	me of Crash 1			Appar Drive				f Crash	2	,				
1 - No Contributing Alcohol Test		Refused	Blood —		************	····			Alcoho	IBAC	Result			
Breath Urin	e Other Chemical	Test (Not Field Sobriet	y or PBT)	Alcohol			Pendi	ng						
Drug Test ☑ ☐Urir	possessed formand	Refused	Blood Dru	ıg Test	Resul	it.	□Po:	sitive		legativ	e [Pen	ding	
(D4) Non Motorist Locat	ion at Time of Crash		(Dŧ	i) Non I	Motoris	st Actio	on Prio	r to Cra	ash					
(D6) Non Motorist Action	at Time of Crash 1		(D6	i) Non I	Votoris	st Actio	on at T	ime of	Crash	2				
(D7) Pedestrian Maneu	(Arc			B) Bicyc	liet Mis	aneuve	irs			***************************************	· · · · · · · · · · · · · · · · · · ·	***************************************	***************************************	
·			<u> </u>											
PERSON TYPE 1-D SEAT ROW SEAT POSIT	river, 2-Passenger, 3-Pedestria	AIRBAG DEPLOYED		_		ner, 24-1	INJU	RY TYPE	11	NJURY A		INJUR	Y DEGRE	
1-Front Row 1-Left (driver) 2-Second Row 2-Middle	2-Other Enclosed Cargo Area	ck)1-Not Applicable 2-Not Deployed 3-Deployed - Front	1-Not App 2-None Us	sed - Moto	or Vehicle	le Occup	ant 2-Ble	putation eding ken Bon	2	-Face -Head -Neck			acitating ncapacita	
3-Third Row 3-Right 4-Fourth Row 4-Other 5-Other Row 5-Unknown	3- Unenclosed Cargo Area4-Trailing Unit5-Riding on Motor Vehicle Ex	4-Deployed - Side	3-Shoulde 4-Shoulde 5-Lap Bell	r Belt Onl	y Used	eu	4-Bur		4 5	-Back -Arm(s)			ible İnjur	
6-Unknown	(non-trailing unit) 6- Unknown	(knee, air belt,) 6-Deployed -	6-Restrain 7-Child Re	t Used - C estraint - F	Other Forward I			ziness	7	-Leg(s) -Chest S	tomach		Y INFO S	
1-Not Ejected 1-DOT	ET USE -Compliant Motorcycle Helmet	Combination 7-Deployment - Curti	8-Child Re ain 9-Child Re 10-Booste	estraint - L	Rear Fac Used Inc	cing correctly		rasion/Bri mplaint o ther	f Pain 9	-Internal -Entire B 0-Other	ody	2-Indivi	er Observ idual Stat cal, Para	eme
3-Ejected Totally 3-No h	r Helmet elmet		11-Child		- Other		,,,,			0 0 11.01	A M D	Observ		
-619011	gers, Bicyclist, and Pedestrians	Sex DOB	Seat Pos	Seat	Seat Pos	Air Bag	Ejected	Restraint System	Helmet	Injury	Injury	Injury	Inj Info	Α
Type Last Name, First Name	e, Mi	(M,F,U)	Row	Pos	Other				Use	Τ	T	Area	Source	T
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Form 13:20A Revised January 2010

JN; Project Description: Project Location: Date:

Convenience Market with Gasoline Pumps Land Use Code (LUC) 853

Gorrill-Palmer Consulting Engineers, Inc. P.O. Box 1237
15 Shaker Road
Gray, Maine 04039

4

Vehicle Fueling Positions:

ኤ ²	N/A	N/A	N/A	N/A	N/A	N/A	ΔN	(V	peter description of the second of the secon		. ኢ	N17A	K K	X/N	ξ X	Ϋ́ X		N/A	N/A	N/A		R²	N/A	A/A	Α/Z	N/A	A/N		Ψ/N	Α'N A	N/V.	
Sistribution OUT	3798	116	133	119	140	1431	2 6	1168	Ĭ		Distribution	- 0000	1620	115	87	120	2	2788	88	2275	%	Distribution OUT	2713	107	125	103	134	2	2110	80	77.1	%
Directional Distribution IN OUT	3798	116	134	119	140	1432	702	1168	* Percentages rounded to nearest 5%		Directional Distribution	MI	1626	115	87	121	4	2788	68	2276	* Percentages rounded to nearest 5%	Directional Distribution	2713	100	124	103	7.5	3	2110	79	77.7	 Percentages rounded to nearest 5%
	20%	20%	20%	20%	%09	£0%	200	%0%	es rounder		al Split*	500	20%	20%	20%	2000	900	%09	%09	20%	epunos sel	Directional Split *	50%	20%	808	20%	200	8	20%	20%	20%	jes rounae
Directional Split * OUT	20%	20%	20%	20%	20%	20%	2002	50%	* Percentag		Directional Split *	P.11	20% 20%	20%	20 % 20 %	200	800	20%	20%	20%	* Percentaç	Direction	50%	20%	50%	20%	200	90.00	%09	20%	20%	* Percenta
Trip Ends	7596	232	267	238	280	2863	2007	2336	Exploration for the contraction of the contraction		Trip Ends	Characteristics and control of the C	3256	230	174	176	74.1	5576	177	4551	in the state of th	Trip Ends	5426	200	249	20°	2 6	707	4220	159	3444	
# of Sources	10	28	54	26	46	"	, c	VI en	оналиннанский метом поставленной поставленной поставленной поставлений поставлений поставлений поставлений пост Поставлений поставлений п		# of Sources	INVARIGITATION OF THE PROPERTY	200	6.4 8.5	S 80	70	04	က	ო	က		# of Sources) () () () () () () () () () () () () ()	(° 7	() () () () () () () () () ()	(/ <u>)</u>	¥/N	N/A	N/A	N/A The second contract of the second contrac	
ITE Trip Rate (Average Rate)	T = 542(60 (X))	T = 16.57 (X)	T = 19.07 (X)	T = 17.03 (X)	T = 19.98 (X)	(Y) (X) T = 000 T T	(X) (A) (A) (A)	T = 10.00 (X)		3,850	ITE Trip Rate	(Average Kale)	1 = 845.60 (X)	(X) 08.30 (T)	T = 45.23 (X)	(X) 53.54 # 1	(Y) /c.zq = 1	T = 1448.33 (X)	T = 45.94 (X)	T = 1182.08 (X)	<u>a principarator versover from the principarator versover from</u>	ITE Trip Rate	(Average hate)	() · ·	K/N	C/N	K/N	ΑŻ.	N/A	A/Z	N/A	
Time Period	Weekday	AM Peak Hour of Adjacent Street Traffic	PM Peak Hour of Adjacent Street Traffic	AM Peak Hour of Generator	PM Peak Hour of Generator	70 party 0	Saturday	Sat Peak nt Gen	Sullady	Gross Floor Area (ft²):	Time Period	не достой не водине съблика на	Weekday	AM Peak Hour of Adjacent Street Traffic	FM Peak Hour of Adjacent Sueet Hamo	Aivi Fear nour of Generator	PM Peak Hour of Generator	Saturday	Sat Peak Hr Gen	Sunday	Average	Time Period	And the second s	Weenday	AM Peak Hour of Adjacent Street Traffic	PM Peak Hour of Adjacent Street Hamic	AM Peak Hour of Generator	PM Peak Hour of Generator	Saturday	Sat Peak Hr Gen	Sunday	

JN:

Date:

Project Description: Project Location:

2672 CJ Developers Portland

7/10/2012

Gorrill-Palmer Consulting Engineers, Inc. P.O. Box 1237 15 Shaker Road Gray, Maine 04039

Drive-in Bank Land Use Code (LUC) 912

Gross Floor Area (ft²):

0

Time Period	ITE Trip Rate	Trip Ends	Directio	nal Split *	Directiona	l Distribution	B40
Time Period	IIE IIIp Rate	rnp enus	IN	OUT	IN	OUT	R^2
Weekday	T = 148.15 (X)	O	50%	50%	0	0	0.59
AM Peak Adjacent Street	T = 12.35 (X)	0	55%	45%	0	0	****
PM Peak Adjacent Street	T = 25.82(X)	0	50%	50%	0	0	
AM Peak Hour of Generator	T = 17.31 (X)	0	50%	50%	0	0	0.51
PM Peak Hour of Generator	T = 26.69 (X)	0	50%	50%	0	0	
Saturday	T =86.32 (X)	0	50%	50%	0	0	0.52
Saturday Peak Hour of Gen.	T = 26.53 (X)	0	50%	50%	0	0	

^{*} Percentages rounded to nearest 5%

Number of Drive-in Lanes:

Time Period	ITE Trip Rate	Trip Ends	Directio	nal Split *	Directiona	R^2	
Time r eriou	IIL IIIp Nace	TIP LIIUS	IN	OUT	IN	OUT	N°2
Weekday	T = 139.258 (X)	139	50%	50%	70	69	0.52
AM Peak Adjacent Street	T = 9.44(X)	9	60%	40%	5	4	
PM Peak Adjacent Street	T = 27.41 (X)	27	50%	50%	14	13	
AM Peak Hour of Generator	T = 21.64 (X)	22	50%	50%	11	11	
PM Peak Hour of Generator	T = 29.05 (X)	29	50%	50%	15	14	0.55
Saturday	Not Given	0	50%	50%	0	0	
Saturday Peak Hour of Gen.	T = 29.88 (X)	30	50%	50%	15	15	***

^{*} Percentages rounded to nearest 5%

AVERAGE

Time Period	Trip Ends	Directio	nal Split *	Directional Distribution		
illile reliou	Trip citus	IN		OUT		
Weekday	70	50%	50%	35	35	
AM Peak Adjacent Street	5	58%	42%	3	2	
PM Peak Adjacent Street	14	50%	50%	7	7	
AM Peak Hour of Generator	11	50%	50%	6	5	
PM Peak Hour of Generator	15	50%	50%	7	8	
Saturday Peak Hour of Gen.	15	50%	50%	8	7	

Standard:

- The need for a traffic control signal shall be considered if an engineering study finds that one of the following conditions exist for each of any 8 hours of an average day:
 - A. The vehicles per hour given in both of the 100 percent columns of Condition A in Table 4C-1 exist on the major-street and the higher-volume minor-street approaches, respectively, to the intersection; or
 - B. The vehicles per hour given in both of the 100 percent columns of Condition B in Table 4C-1 exist on the major-street and the higher-volume minor-street approaches, respectively, to the intersection.

In applying each condition the major-street and minor-street volumes shall be for the same 8 hours. On the minor street, the higher volume shall not be required to be on the same approach during each of these 8 hours.

Option:

- If the posted or statutory speed limit or the 85th-percentile speed on the major street exceeds 40 mph, or if the intersection lies within the built-up area of an isolated community having a population of less than 10,000, the traffic volumes in the 70 percent columns in Table 4C-1 may be used in place of the 100 percent columns. *Guidance:*
- The combination of Conditions A and B is intended for application at locations where Condition A is not satisfied and Condition B is not satisfied and should be applied only after an adequate trial of other alternatives that could cause less delay and inconvenience to traffic has failed to solve the traffic problems.

Standard

- The need for a traffic control signal shall be considered if an engineering study finds that both of the following conditions exist for each of any 8 hours of an average day:
 - A. The vehicles per hour given in both of the 80 percent columns of Condition A in Table 4C-1 exist on the major-street and the higher-volume minor-street approaches, respectively, to the intersection; and
 - B. The vehicles per hour given in both of the 80 percent columns of Condition B in Table 4C-1 exist on the major-street and the higher-volume minor-street approaches, respectively, to the intersection.

These major-street and minor-street volumes shall be for the same 8 hours for each condition; however, the 8 hours satisfied in Condition A shall not be required to be the same 8 hours satisfied in Condition B. On the minor street, the higher volume shall not be required to be on the same approach during each of the 8 hours.

Table 4C-1. Warrant 1, Eight-Hour Vehicular Volume

Condition A-Minimum Vehicular Volume

	nes for moving ch approach	Vehicle (total	s per hou al of both	ır on majo approach	r street les)	Vehicle minor-stre	es per hour et approac	on higher- h (one dire	olume ction only
Major Street	Minor Street	100%ª	80%b	70%°	56% ^d	100%ª	80% ^b	70%⁰	56% ^d
1	1	500	400	350	280	150	120	105	84
2 or more	1	600	480	420	336	150	120	105	84
2 or more	2 or more	600	480	420	336	200	160	140	112
1	2 or more	500	400	350	280	200	160	140	112

Condition B-Interruption of Continuous Traffic

	nes for moving ch approach	Vehicle (tota	s per hou al of both	ır on majo approach	r street les)			on higher- h (one dire	
Major Street	Minor Street	100%ª	80%b	70%°	56% ^d	100%ª	80% ^b	70%°	56% ^d
1	1	750	600	525	420	75	60	53	42
2 or more	1	900	720	630	504	75	60	53	42
2 or more	2 or more	900	720	630	504	100	80	70	56
1	2 or more	750	600	525	420	100	80	70	56

a Basic minimum hourly volume

^b Used for combination of Conditions A and B after adequate trial of other remedial measures

^c May be used when the major-street speed exceeds 40 mph or in an isolated community with a population of less than 10 000

^d May be used for combination of Conditions A and B after adequate trial of other remedial measures when the major-street speed exceeds 40 mph or in an isolated community with a population of less than 10,000

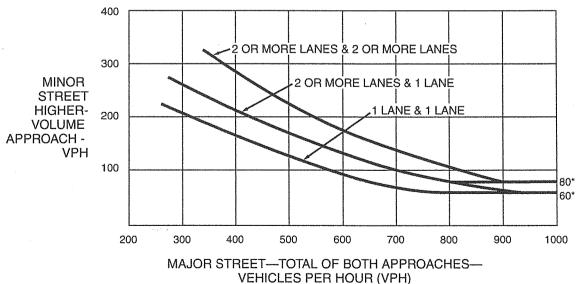
500 2 OR MORE LANES & 2 OR MORE LANES 400 2 OR MORÉ LANES & 1 LANE **MINOR** 1 LANE & 1 LANE STREET 300 HIGHER-**VOLUME** 200 APPROACH -**VPH** 115* 100 80* ≪ 300 400 500 600 700 800 900 1200 1300 1400 1000 1100

Figure 4C-1. Warrant 2, Four-Hour Vehicular Volume

*Note: 115 vph applies as the lower threshold volume for a minor-street approach with two or more lanes and 80 vph applies as the lower threshold volume for a minor-street approach with one lane.

MAJOR STREET—TOTAL OF BOTH APPROACHES— VEHICLES PER HOUR (VPH)

Figure 4C-2. Warrant 2, Four-Hour Vehicular Volume (70% Factor) (COMMUNITY LESS THAN 10,000 POPULATION OR ABOVE 40 MPH ON MAJOR STREET)

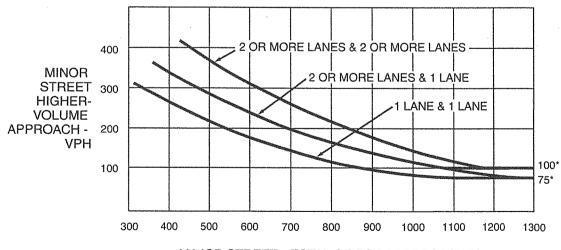


*Note: 80 vph applies as the lower threshold volume for a minor-street approach with two or more lanes and 60 vph applies as the lower threshold volume for a minor-street approach with one lane.

Figure 4C-3. Warrant 3, Peak Hour 600 500 2 OR MORÉ LANÉS & 2'OR MORE L'ANES **MINOR** 400 STREET 2 OR MORE LANES & 1 LANE HIGHER-300 VOLUME 1 LANE & 1 LANE APPROACH -VPH ₂₀₀ 150* 100 100* 400 500 600 800 900 .1000 1100 1200 1300 1400 1500 1600 1700 1800 MAJOR STREET-TOTAL OF BOTH APPROACHES-VEHICLES PER HOUR (VPH)

*Note: 150 vph applies as the lower threshold volume for a minor-street approach with two or more lanes and 100 vph applies as the lower threshold volume for a minor-street approach with one lane.

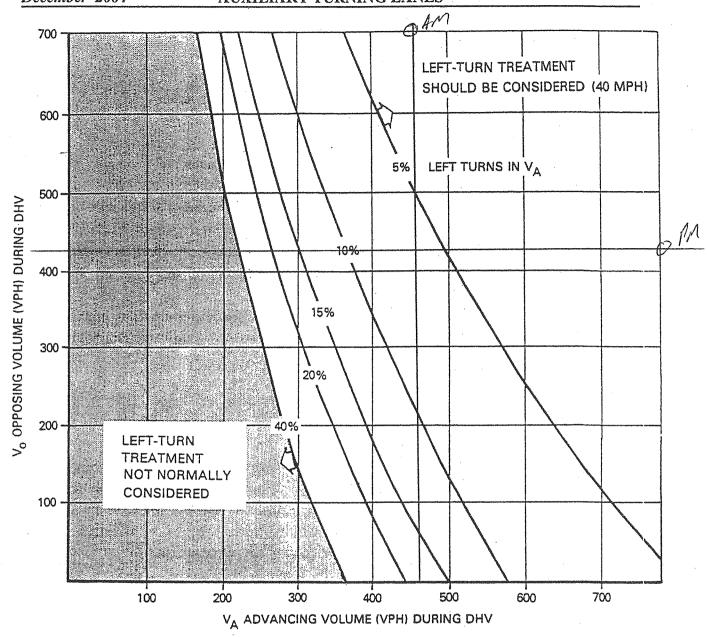
Figure 4C-4. Warrant 3, Peak Hour (70% Factor)
(COMMUNITY LESS THAN 10,000 POPULATION OR ABOVE 40 MPH ON MAJOR STREET)



MAJOR STREET—TOTAL OF BOTH APPROACHES— VEHICLES PER HOUR (VPH)

*Note: 100 vph applies as the lower threshold volume for a minor-street approach with two or more lanes and 75 vph applies as the lower threshold volume for a minor-street approach with one lane.

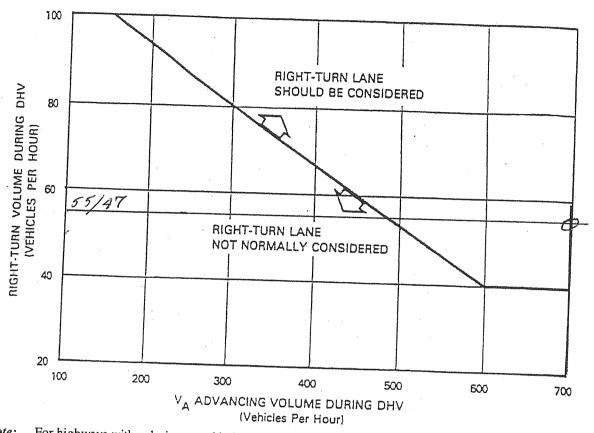
				*
*				



Instructions:

- 1. The family of curves represent the percent of left turns in the advancing volume (V_A) . The designer should locate the curve for the actual percentage of left turns. When this is not an even increment of 5, the designer should estimate where the curve lies.
- 4. Read V_A and V_O into the chart and locate the intersection of the two volumes.
- 5. Note the location of the point in #2 relative to the line in #1. If the point is to the right of the line, then a left-turn lane is warranted. If the point is to the left of the line, then a left-turn lane is not warranted based on traffic volumes.

VOLUME WARRANTS FOR LEFT-TURN LANES AT UNSIGNALIZED INTERSECTIONS ON 2-LANE HIGHWAYS (40 mph)



Note: For highways with a design speed below 50 mph and DHV<300 and Right Turns>40, an adjustment should be used. To read the vertical axis of the chart, subtract 20 from the actual number of right turns.

Example

Given:

Design Speed = 40 mph

 $V_A = 250 \text{ vph}$

Right Turns = 100 vph

Problem: Determine if a right-turn lane should be considered.

Solution: To read the vertical axis, use 100-20 = 80 vph. The figure indicates that a right-turn lane should not normally be considered, unless other factors (e.g., high accident rate)

indicate a lane is needed.

GUIDELINES FOR RIGHT-TURN LANES AT UNSIGNALIZED INTERSECTIONS ON 2-LANE HIGHWAYS