

Box 9 - Traffic Way - enter one of the following numbers:

- 1 - Two-way, not divided: a two-way traffic street or highway with opposing lanes of traffic separated by only a standard painted centerline; including roads with no highway markings.

NOTE: A roadway with turning lanes does not apply. (See #2.)

- 2 - Two-way, divided, unprotected median: a two-way traffic street or highway with opposing lanes of traffic separated by a median. Medians maybe depressed, raised, or flush with the pavement surface and may be grass, landscaped, or pavement in excess of two feet constructed of asphalt or concrete. For example, a continuous left-turn lane is a separation.
- 3 - Two-way, divided, physical median barrier: a two-way traffic street or highway with opposing lanes of traffic separated by a concrete wall, guardrail, or other barrier intended to restrain or redirect an errant vehicle.
- 4 - One-way, not divided: any roadway, including a ramp or one-way street, on which traffic moves in only one direction.
- 5 - Not reported

Box 10 - Access Control - enter the number which best describes the roadway at the time and place of the accident:

- 1 - No Access Control - a street where driveways provide access to and exit from adjacent properties, and where cross streets intersect at grade.
- 2 - Full Access Control - an expressway or freeway where the only means of entry to or exit from the roadway is by ramps connecting to other streets or highways. All cross streets are bridged over or under the main roadway.
- 4 - Partial Access Control - roadway with limited access by ramps and cross streets only.



**TRUCK and BUS SUPPLEMENTAL
POLICE ACCIDENT REPORT**

Local Codes
6074339999
SPIC10060037

MV-104S (10/05)

Mail To: NYS Dept. of Motor Vehicles, Accident Records Bureau,
PO Box 2084, Albany NY 12220-0084

AMENDED REPORT

<p>INSTRUCTIONS You must complete this form:</p> <ul style="list-style-type: none"> if at least one of the vehicles involved is: <ul style="list-style-type: none"> a truck having a GVWR or GCWR > 10,000 lbs.; or a vehicle with a Haz Mat placard; or a bus designed to carry 9 or more persons, including the driver. AND at least one of the following conditions is met: <ul style="list-style-type: none"> at least one person sustained fatal injuries at least one person was transported for IMMEDIATE medical treatment at least one vehicle is disabled and was towed/transported from the scene. 											
<p>ACCIDENT DATE Mo. Day Year 05 25 06</p>			<p>MILITARY TIME 2230</p>			<p>COUNTY OTSE</p>			<p>CITY/TOWN/VILLAGE ONEONTA</p>		
DRIVER	<p>DRIVER LICENSE # 9786543112 STATE OF LIC. CA</p>										
	<p>DRIVER NAME - exactly as printed on license (Last, First, M.I.) HAIGHT, W, RUSTY</p>										
1	<p>LICENSE CLASS 1 A 2 B 3 CDL C 4 D 5 DJ 6 E 7 M 8 MJ 9 OTHER 10 DM</p>					<p>DATE OF BIRTH Mo. Day Year 06 17 50</p>			<p>SEX 1 Male 2 Female</p>		
	<p>CARRIER NAME CSI FUEL, INC.</p>										
CARRIER	<p>STREET OR P.O. BOX P.O. BOX 208 CITY PLANO STATE TX ZIP CODE 75075</p>										
	<p>PLATE NUMBER 54032</p>		<p>STATE OF REG. TX</p>		<p>CARRIER'S IDENTIFICATION NUMBERS US DOT 78631124 ICC MC</p>			<p>TOTAL AXLES (Includes Trailers) 5</p>			
2	<p>WEIGHT RATING OF TRUCK POWER UNIT 1 Less than or equal to 10,000 lbs. 2 10,001 - 26,000 lbs. 3 More than 26,000 lbs.</p>					<p>VEHICLE IDENTIFICATION NUMBER 1XKADRX5MS5620661</p>					
	3	<p>VEHICLE CONFIGURATION 1 Bus (seats for more than 15 people, including driver) 8 Tractor/Triples 2 Single-unit Truck (2-axle, 6-tire) 9 Unknown Heavy Truck, cannot classify 3 Single-unit Truck (3 or more axles) 10 Passenger Car - only record when vehicle displays a Hazardous Material placard 4 Truck/Trailer 11 Light truck (van, mini-van, panel, pickup, sport utility vehicle) only record when vehicle displays an HM placard 5 Truck Tractor (bobtail) 12 Bus (seats for 9 - 15 people, including driver) 6 Tractor/Semi-trailer 7 Tractor/Doubles</p>							<p>TRAFFIC WAY 1 Two-way, not divided 2 Two-way, divided, unprotected median 3 Two-way, divided, positive median barrier 4 One-way not divided 5 Not reported</p>		
4		<p>CARGO BODY TYPE 1 Bus (seats for more than 15 people, including driver) 6 Concrete Mixer 10 Grain, Chips, Gravel 2 Van/Enclosed Box 7 Auto Transporter 11 Pole 3 Cargo Tank 8 Garbage/Refuse 12 Bus (seats for 9-15 people, including driver) 4 Flatbed 9 Other</p>					<p>ACCESS CONTROL 1 No Access Control 2 Full Access Control 4 Partial Access Control</p>				
	5	<p>HAZARDOUS MATERIALS INVOLVEMENT Does vehicle have Haz Mat placard? 1 Yes 2 No COPY FROM PLACARD: 4-digit identification number from diamond/orange panel 1 or 2-digit number from bottom of diamond: 11203 3 NAME OF HAZ MAT CLASS: FLAMMABLE LIQUID</p>					<p>SEQUENCE OF EVENTS (FOR THIS VEHICLE) 1 Ran Off Road (noncollision) 13 Involving Animal (collision) 2 Jackknife (noncollision) 14 Involving Fixed Object (collision) 3 Overturn/Rollover (noncollision) 18 Cross Median/Centerline (noncollision) 4 Downhill Runaway (noncollision) 19 Equipment Failure (noncollision) (brake failure, blown tires, etc.) 5 Cargo Loss or Shift (noncollision) 20 Other (noncollision) 6 Explosion or Fire (noncollision) 21 Unknown (noncollision) 7 Separation of Units (noncollision) 22 With Work Zone 8 Involving Pedestrian (collision) 23 With Other Movable Object (collision) 9 Involving Motor Vehicle in Transport (collision) 24 With Unknown Movable Object (collision) 10 Involving Parked Motor Vehicle (collision) 11 Involving Train (collision) 12 Involving Pedalcycle (collision)</p>				
6		<p>WAS HAZARDOUS CARGO RELEASED FROM VEHICLE (other than fuel from fuel tank)? 1 Yes 2 No</p>					<p>OFFICER'S RANK AND SIGNATURE PRINT NAME IN FULL</p>				
	<p>BADGE/ID NO.</p>		<p>NCIC NO.</p>		<p>DATE OF REPORT</p>						



Boxes 11 - 14 - Sequence of Events (For This Vehicle) - enter the number for the events involving this vehicle, in the order in which they occurred. Record only the first four events.

- | | |
|---|---|
| 1 - Ran Off Road (noncollision) | 13 - Involving Animal (collision) |
| 2 - Jackknife (noncollision) | 14 - Involving Fixed Object (collision) |
| 3 - Overturn/Rollover (noncollision) | 18 - Cross Median/Centerline (noncollision) |
| 4 - Downhill Runaway (noncollision) | 19 - Equipment Failure (noncollision)
(brake failure, blown tires, etc.) |
| 5 - Cargo Loss or Shift (noncollision) | 20 - Other (noncollision) |
| 6 - Explosion of Fire (noncollision) | 21 - Unknown (noncollision) |
| 7 - Separation of Units (noncollision) | 22 - With Work Zone Maintenance
Equipment (collision) |
| 8 - Involving Pedestrian (collision) | 23 - With Other Movable Object
(collision) |
| 9 - Involving Motor Vehicle in
Transport (collision) | 24 - With Unknown Movable Object
(collision) |
| 10 - Involving Parked Motor Vehicle | |
| 11 - Involving Train (collision) | |
| 12 - Involving Pedalcycle (collision) | |

POLICE IDENTIFICATION INFORMATION

Officer's Rank and Signature - the police officer that completes the report must sign it and identify his/her rank in this space.

Print Name in Full - the police officer must print his/her name.

Badge/ID No. - enter the Badge/Tax ID No. of the officer who completes the report.

NCIC No. - enter the **middle five positions** of the NCIC/ORI Agency Identification Number, for the police agency (for example, for NY1234500, enter only 12345).

Date of Report - enter the date the report is completed.



**TRUCK and BUS SUPPLEMENTAL
POLICE ACCIDENT REPORT**

Local Codes
6074339999
SPIC10060037

AMENDED REPORT

MV-104S (10/05)
Mail To: NYS Dept. of Motor Vehicles, Accident Records Bureau,
PO Box 2084, Albany NY 12220-0084

INSTRUCTIONS You must complete this form: • if at least one of the vehicles involved is: - a truck having a GVWR or GCWR > 10,000 lbs.; or - a vehicle with a Haz Mat placard; or - a bus designed to carry 9 or more persons, including the driver; • AND at least one of the following conditions is met: - at least one person sustained fatal injuries - at least one person was transported for IMMEDIATE medical treatment - at least one vehicle is disabled and was towed/transported from the scene.		Number of: 1 Trucks having a GVWR or GCWR > 10,000 lbs. 1 Vehicles with a Haz Mat placard 0 Buses designed to carry 9 or more persons	Number of Vehicles: 1 Towed/transported from scene due to damage Number of Persons: 1 Sustaining fatal injuries 0 Transported for IMMEDIATE medical treatment
ACCIDENT DATE Mo 05 Day 25 Year 06 MILITARY TIME 2230 COUNTY OTSE CITY/TOWN/VILLAGE ONEONTA			
DRIVER LICENSE ID # 9171816543112 DRIVER NAME - exactly as printed on license (Last, First, M.I.) HAIGHT, W, RUSTY	STATE OF LIC. CA		
	LICENSE CLASS 1 A 6 E	2 B 7 M	3 CDL C 8 MJ
DATE OF BIRTH Mo 06 Day 17 Year 50	SEX 1 Male 2 Female		
CARRIER CARRIER NAME CSI FUEL, INC. STREET OR P.O. BOX P.O. BOX 208 CITY PLANO STATE TX ZIP CODE 75075 TOTAL AXLES (includes trailers) 5 PLATE NUMBER 54032 STATE OF REG. TX CARRIER'S IDENTIFICATION NUMBERS US DOT 786311241 ICC MC			
	WEIGHT RATING OF TRUCK POWER UNIT 1 Less than or equal to 10,000 lbs. 2 10,001 - 26,000 lbs. 3 More than 26,000 lbs.		VEHICLE IDENTIFICATION NUMBER 1 X K A D R X 5 M S 5 6 2 0 6 6 1
	VEHICLE CONFIGURATION 1 Bus (seats for more than 15 people, including driver) 2 Single-unit Truck (2-axle, 6-tire) 3 Single-unit Truck (3 or more axles) 4 Truck/Trailer 5 Truck Tractor (bobtail) 6 Tractor/Semi-trailer 7 Tractor/Doubles 8 Tractor/Triples 9 Unknown Heavy Truck, cannot classify 10 Passenger Car - only record when vehicle displays a Hazardous Material placard 11 Light truck (van, mini-van, panel, pickup, sport utility vehicle) only record when vehicle displays an HM placard 12 Bus (seats for 9 - 15 people, including driver)		TRAFFIC WAY 1 Two-way, not divided 2 Two-way, divided, unprotected median 3 Two-way, divided, positive median barrier 4 One-way not divided 5 Not reported
CARGO BODY TYPE 1 Bus (seats for more than 15 people, including driver) 2 Van/Enclosed Box 3 Cargo Tank 4 Flatbed 5 Dump 6 Concrete Mixer 7 Auto Transporter 8 Garbage/Refuse 9 Other 10 Grain, Chips, Gravel 11 Pole 12 Bus (seats for 9-15 people, including driver)		ACCESS CONTROL 1 No Access Control 2 Full Access Control 4 Partial Access Control	
HAZARDOUS MATERIALS INVOLVEMENT Does vehicle have Haz Mat placard? 1 Yes 2 No COPY FROM PLACARD: 4-digit identification number from diamond/orange panel 1121013 1 or 2-digit number from bottom of diamond: 3 NAME OF HAZ MAT CLASS: FLAMMABLE LIQUID		SEQUENCE OF EVENTS (FOR THIS VEHICLE) 1 Ran Off Road (noncollision) 2 Jackknife (noncollision) 3 Overturn/Rollover (noncollision) 4 Downhill Runaway (noncollision) 5 Cargo Loss or Shift (noncollision) 6 Explosion or Fire (noncollision) 7 Separation of Units (noncollision) 8 Involving Pedestrian (collision) 9 Involving Motor Vehicle in Transport (collision) 10 Involving Parked Motor Vehicle (collision) 11 Involving Train (collision) 12 Involving Pedalcycle (collision) 13 Involving Animal (collision) 14 Involving Fixed Object (collision) 18 Cross Median/Centerline (noncollision) 19 Equipment Failure (noncollision) (brake failure, blown tires, etc.) 20 Other (noncollision) 21 Unknown (noncollision) 22 With Work Zone Maintenance Equipment (collision) 23 With Other Movable Object (collision) 24 With Unknown Movable Object (collision)	
WAS HAZARDOUS CARGO RELEASED FROM VEHICLE (other than fuel from fuel tank)? 1 Yes 2 No			
OFFICER'S RANK AND SIGNATURE TPR JO Smith PRINT NAME IN FULL TROOPER JO SMITH		BADGE/ID NO. 10378	NCIC NO. 13801
		DATE OF REPORT 05/26/06	



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