Law Enforcement and TxDOT Use ONLY

☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
2	2	[redacted]

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2018)

Mail to: Texas Department of Transportation, Crash Data and Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844/274-7457

Refer to Attached Code Sheet for Numbered Fields

*=These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.).

IDENTIFICATION & LOCATION

*Crash Date (MM/DD/YYYY)	*Crash Time (24HRMM)	Case ID	Local Use
09/12/2022	2309	[redacted]	

*County Name	*City Name	Outside City Limit
DALLAS	DALLAS	☐

In your opinion, did this crash result in at least $1,000 damage to any one person's property? ☒ Yes ☐ No

Latitude (decimal degrees): . Longitude — (decimal degrees): .

ROAD ON WHICH CRASH OCCURRED

*1 Rdwy. Sys.	*Hwy. Num.	2 Rdwy. Part	Block Num.	3 Street Prefix	* Street Name	4 Street Suffix
LR		1	8200		WALNUT HILL	LN

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot	☐ Toll Road/ Toll Lane	Speed Limit	Const. Zone	Workers Present	Street Desc.
		35	☐ Yes ☒ No	☐ Yes ☒ No	

INTERSECTING ROAD, OR IF CRASH NOT AT INTERSECTION, NEAREST INTERSECTING ROAD OR REFERENCE MARKER

At Int.	1 Rdwy. Sys.	Hwy. Num.	2. Rdwy. Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☒ Yes ☐ No	LR		1	7500		RAMBLER	RD

Distance from Int. or Ref. Marker	☐ FT ☐ MI	3 Dir. from Int. or Ref. Marker	Reference Marker	Street Desc.	RRX Num.

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	[redacted]	[redacted]

Veh. Year	6. Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2019	BLK	KIA	OPTIMA	P4	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	MS	[redacted]	98	96	98	[redacted]

Address (Street, City, State, ZIP): [redacted]

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	[redacted]	N	46	[redacted]	1	1	1	5	97	N	96		96	97	97

Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.

☒ Owner ☐ Lessee — Owner/Lessee Name & Address: [redacted]

Proof of Fin. Resp. ☒ Yes ☐ No ☐ Expired ☐ Exempt — 26 Fin. Resp. Type: 5 — Fin. Resp. Name: [redacted] — Fin. Resp. Num.: [redacted]

Fin. Resp. Phone Num.: [redacted] — 27 Vehicle Damage Rating 1: 7-LFQ-5 — 27 Vehicle Damage Rating 2: — — Vehicle Inventoried ☒ Yes ☐ No

Towed By: CONTRACT WRECKER SERVICE — Towed To: [redacted]

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
2	1			TX	[redacted]	[redacted]

Veh. Year	6. Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2013	SIL	CHEVROLET	CRUZE	P4	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	[redacted]	C	96	96	[redacted]

Address (Street, City, State, ZIP): [redacted]

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	[redacted]	N	23	[redacted]	2	1	1	5	97	N	96		96	97	97

Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.

☒ Owner ☐ Lessee — Owner/Lessee Name & Address: [redacted]

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Proof of Fin. Resp. ☒ Yes ☐ No ☐ Expired ☐ Exempt — 26 Fin. Resp. Type: 1 — Fin. Resp. Name: [redacted] — Fin. Resp. Num.: [redacted]

Fin. Resp. Phone Num.: [redacted] — 27 Vehicle Damage Rating 1: -FD-7 — 27 Vehicle Damage Rating 2: -RP-5 — Vehicle Inventoried ☒ Yes ☐ No

Towed By: — Towed To:

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HR:MM)

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address

CMV

Unit Num.	☐ 10,001+ LBS.	☐ TRANSPORTING HAZARDOUS MATERIAL	☐ 9+ CAPACITY	CMV Disabling Damage? ☐ Yes ☐ No	28 Veh. Oper.	29 Carrier ID Type	Carrier ID Num.
Carrier's Corp. Name		Carrier's Primary Addr.					30 Veh. Type
31 Bus Type	☐ RGVW ☐ GVWR	HazMat Released ☐ Yes ☐ No	32 HazMat Class Num.	HazMat ID Num.	32 HazMat Class Num.	HazMat ID Num.	33 Cargo Body Type
Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type	CMV Disabling Damage? ☐ Yes ☐ No	Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type	CMV Disabling Damage? ☐ Yes ☐ No
Sequence Of Events	35 Seq. 1	35 Seq. 2	35 Seq. 3	35 Seq. 4	Intermodal Shipping Container Permit ☐ Yes ☐ No	Actual Gross Weight	Total Num. Axles

FACTORS & CONDITIONS

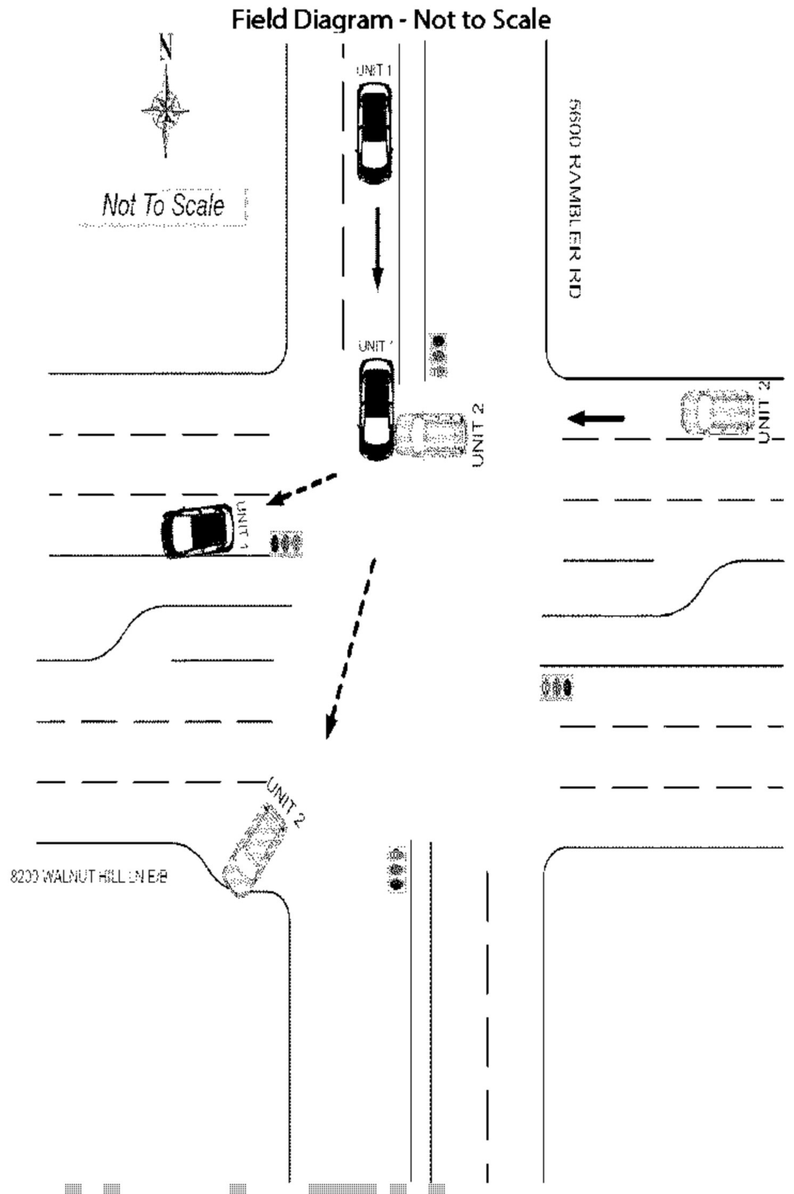
36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)					38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
Unit #	Contributing			May Have Contrib.		Contributing			May Have Contrib.		Environmental and Roadway Conditions						
1	15										1	3	4	2	1	1	5

NARRATIVE AND DIAGRAM

Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets if Necessary)

UNIT 1 WAS TRAVELING S/B 5600 RAMBLER RD IN THE LEFT TURN LANE. UNIT 2 WAS TRAVELING W/B 8200 WALNUT HILL LN IN THE RIGHT LANE. UNIT 1 DISREGARDED STOP AND GO SIGNAL AND COLLIDED LFQ TO FD OF UNIT 2. UNIT 1 STATED THEY HAD A YELLOW LIGHT AND UNIT 2 STATED THEY HAD A GREEN LIGHT.BWC AVAILABLE.

Field Diagram - Not to Scale



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INVESTIGATOR

Time Notified (24HR:MM) 2350	How Notified DISPATCHED	Time Arrived (24HRMM) 2352	Report Date (MM/DD/YYYY) 09/13/2022
Invest. Comp. ☒ Yes ☐ No	Investigator Name (Printed) Rodriguez, Ruben		ID Num. 11595
ORI Num. TX0000006	*Agency DALLAS POLICE DEPARTMENT		Service/ Region/DA 02