



December 2018

CITY OF ALBUQUERQUE  
YUCCA DRIVE - CLOUDCROFT ROAD  
TO CENTRAL AVENUE  
**SPEED STUDY**

NTMP P803000  
TASK 11.1

**WILSON**  
& COMPANY  
ENGINEERS & ARCHITECTS

City of Albuquerque

**YUCCA DRIVE -**

**CLOUDCROFT ROAD TO CENTRAL AVENUE**

# **SPEED STUDY**

NTMP P803000

NTP #11 - Task 11.1

WCI 1810002211

**December 2018**

*Updated April 2019 / May 2019*



May 9, 2019



## Table of Contents

|                                     |   |
|-------------------------------------|---|
| Tables .....                        | 1 |
| Introduction .....                  | 1 |
| Project Area and Background .....   | 1 |
| Existing Conditions.....            | 2 |
| Traffic Conditions.....             | 2 |
| Traffic Volumes .....               | 2 |
| Safety .....                        | 2 |
| Crash Data.....                     | 2 |
| Crash Analysis .....                | 2 |
| Speed .....                         | 3 |
| Typical Sections.....               | 3 |
| NTMP Traffic Calming Criteria ..... | 5 |
| Summary of Results .....            | 5 |
| Recommendations .....               | 5 |

## Figures

|                                                          |   |
|----------------------------------------------------------|---|
| Figure 1: Project Area and Existing Traffic Volumes..... | 1 |
| Figure 2: Yucca Drive Speed Limit.....                   | 3 |
| Figure 3: Yucca Drive looking north.....                 | 4 |
| Figure 4: Yucca Drive looking south.....                 | 4 |
| Figure 5: Yucca Drive Existing Typical Section .....     | 5 |

## Tables

|                                                  |   |
|--------------------------------------------------|---|
| Table 1: Crash Summary .....                     | 2 |
| Table 2: 85 <sup>th</sup> -Percentile Speed..... | 3 |
| Table 3: 10 mph Pace Speed.....                  | 3 |
| Table 4: Summary of Results.....                 | 5 |

## Appendices

- Appendix A – Traffic Data
- Appendix B – Crash Reports

## Introduction

This report documents the speed study analysis on Yucca Drive from Cloudcroft Road to Central Avenue in Albuquerque, New Mexico. The purpose of this project is to collect and analyze the traffic volumes, speed, and safety of Yucca Drive, a two-way street, from Cloudcroft Road to Central Avenue to determine if it meets the traffic calming criterion described in the *City of Albuquerque (COA) Neighborhood Traffic Management Program (NTMP)*, February 2015, and the *Institute of Transportation Engineers (ITE) Traffic Engineering Handbook*, 6<sup>th</sup> Edition.

## Project Area and Background

The Yucca Drive project is located in Albuquerque, New Mexico and is approximately 0.63 miles (3,339 feet) in length. Yucca Drive is a two-lane, undivided major collector that runs north-south, from Cloudcroft Road to Central Avenue. Cloudcroft Road is a two-lane, undivided local street that runs east-west and intersects the north end of Yucca Drive at a T-intersection. Central Avenue is a four-lane, divided principal arterial that runs east-west and intersects the south end of Yucca Drive at a cross-intersection. See **Figure 1** for a map of the project area.



Figure 1: Project Area and Existing Traffic Volumes

A request has been made to the City of Albuquerque to determine if traffic calming is appropriate for this location. Wilson & Company was tasked by the City of Albuquerque to determine if Yucca Drive from Cloudcroft Road to Central Avenue warrants traffic calming measures.

## Existing Conditions

### Traffic Conditions

Yucca Drive is an urban major collector with an Average Daily Traffic (ADT) of 2,639 vehicles (Counter 1), 4,478 vehicles (Counter 2), and 6,881 vehicles (Counter 3), which includes less than 1% heavy vehicles (buses and trucks), and an existing speed limit of 30 mph. See [Appendix A](#) for further information.

### Traffic Volumes

Existing tube count data (volume, speed, and class) was collected for 48-hours on Wednesday, October 17, 2018 and Thursday, October 18, 2018. See [Figure 1](#) for the peak hour volumes. The full traffic count data can be found in [Appendix A](#).

### Safety

#### Crash Data

Historical crash data was provided by the City of Albuquerque. Three years of crash data (2017, 2016, and 2015, no crashes in 2015) were obtained to evaluate the existing safety condition of Yucca Drive from Cloudcroft Road to Central Avenue. See [Table 1](#) for crash summary.

*Table 1: Crash Summary*

| Crash Date | Crash Intersecting Street | Crash Primary Street | Crash Analysis                              | Severity           | Contributing Factors                                              | Crash Correct with Traffic Calming | Location within Study Area? |
|------------|---------------------------|----------------------|---------------------------------------------|--------------------|-------------------------------------------------------------------|------------------------------------|-----------------------------|
| 12/22/2017 | Central Avenue            | Yucca Drive          | Other                                       | Damage 500 or more | Excessive speed, Disregarded traffic signal                       | No                                 | No, @ Central               |
| 3/2/2017   | Avalon Road               | Yucca Drive          | Sideswipe collision/From opposite direction | Damage 500 or more | Excessive speed, Inadequate brakes, Other mechanical defect       | No                                 | Yes                         |
| 2/16/2017  | North of Avalon Road      | Yucca Drive          | Both going straight/Rear end                | Damage 500 or more | Driver inattention, Excessive speed, Other improper driving       | Yes                                | Yes                         |
| 10/2/2016  | Bluewater Road            | Yucca Drive          | From opposite direction/Not stated          | Damage 500 or more | Driver inattention                                                | No                                 | No, @ Pat Hurley Park       |
| 11/17/2016 | Avalon Road               | Yucca Drive          | Both going straight/Entering at angle       | Damage 500 or more | Driver inattention, Excessive speed, Failed to yield right of way | No                                 | Yes                         |
| 7/13/2016  | Avalon Road               | Yucca Drive          | Both going straight/From opposite direction | Damage 500 or more | Failed to yield right of way                                      | No                                 | Yes                         |

#### Crash Analysis

The following observations were concluded from the review of the three years (2017, 2016, and 2015) of crash data (4 total crashes). Note – two (2) of the six (6) listed above were outside of the study area and are not included in the following analysis. See [Appendix B](#) for crash reports.



Task 11.1: Yucca Drive from Cloudcroft Road to Central Avenue

- All four crashes occurred in clear conditions;
- All four crashes resulted in property damage;
- One of the crashes (2/16/2017) resulted in an injury; and
- Three of the four crashes occurred during the day.
- The three crashes on 2/16/2017, 3/02/2017, and 11/17/2016 included excessive speed but also included contributing factors such as disregarded traffic signal, inadequate brakes, failed to yield right of way and driver inattention.

Speed

Speed data was collected on Yucca Drive for a 48-hour period. See **Table 2** for the 85<sup>th</sup>-Percentile speeds for Yucca Drive.

Table 2: 85<sup>th</sup>-Percentile Speed

| Location   | 85 <sup>th</sup> -Percentile Speed |           |           |
|------------|------------------------------------|-----------|-----------|
|            | Counter 1                          | Counter 2 | Counter 3 |
| Northbound | 36 mph                             | 36 mph    | 33 mph    |
| Southbound | 29 mph                             | 36 mph    | 28 mph    |

See **Table 3** for the 10 mph pace speeds for Yucca Drive.

Table 3: 10 mph Pace Speed

| Location   | 10 mph Pace Speed |             |             |
|------------|-------------------|-------------|-------------|
|            | Counter 1         | Counter 2   | Counter 3   |
| Northbound | 26 - 35 mph       | 26 - 35 mph | 26 - 35 mph |
| Southbound | 21 - 30 mph       | 26 - 35 mph | 21 - 30 mph |

Speed data can be found in the traffic counts located in **Appendix A**. The 85<sup>th</sup>-percentile speed exceeds the posted speed limit (30 mph) by 5 mph or more for northbound Yucca Drive at the Counter 1 and Counter 2 location and for southbound Yucca Drive at the Counter 2 location.

Typical Sections

Yucca Drive is a 24-ft wide roadway with 7-ft wide bicycle lanes, curb and gutter, and 4-ft wide sidewalks. See **Figure 3** and **Figure 4** for photos of the existing roadway, and **Figure 5** for the existing Yucca Drive typical section.



Figure 2: Yucca Drive Speed Limit

Task 11.1: Yucca Drive from Cloudcroft Road to Central Avenue

---



Figure 3: Yucca Drive looking north



Figure 4: Yucca Drive looking south

Task 11.1: Yucca Drive from Cloudcroft Road to Central Avenue

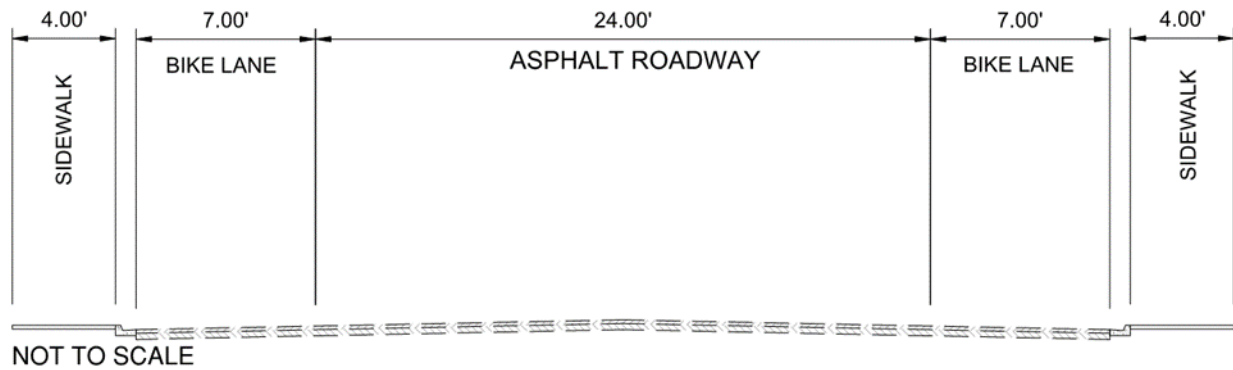


Figure 5: Yucca Drive Existing Typical Section

### NTMP Traffic Calming Criteria

In order to meet the traffic calming criterion described in the *COA NTMP*, two or more of the following threshold criteria must be met:

1. Reported crashes in the past 3 years that could be corrected with traffic calming
2. Peak-hour traffic volume greater than 400 vehicles in one direction
3. 25 percent of peak-hour traffic is non-local cut-through traffic
4. 85<sup>th</sup>-percentile speed exceeds the posted speed limit by 5 mph or more

### Summary of Results

Out of the six crashes that were reported in the past three years, one (1) could possibly have been corrected with traffic calming. The peak-hour traffic volumes for Yucca Drive were less than 400 vehicles in one direction. The 85<sup>th</sup>-percentile speed does exceed the posted speed limit by 5mph. See [Table 4](#) for the summary of results for Yucca Drive from Cloudcroft Road to Central Avenue.

Table 4: Summary of Results

| COA NMTP Threshold Criteria                                                              | Warranted?  |
|------------------------------------------------------------------------------------------|-------------|
| 1. Reported crashes in the past three years that could be corrected with traffic calming | Yes         |
| 2. Peak-hour traffic volume greater than 400 vehicles in one direction                   | No          |
| 3. 25 percent of peak-hour traffic is non-local cut-through traffic                      | Not studied |
| 4. 85 <sup>th</sup> -percentile speed exceeds the posted speed limit by 5 mph or more    | Yes         |

### Recommendations

After analyzing the crash, volume, and speed data, it was determined that Yucca Drive from Cloudcroft Road to Central Avenue meets two (2) of the four (4) criteria and, therefore, **does** meet the minimum traffic calming criterion as described in the *COA NTMP*.



## Appendix A – Traffic Data

# Wilson & Company

4401 Masthead St. NE  
Albuquerque, NM 87109

Site Code: YUCCA 1  
Station ID:

Latitude: 0' 0.0000 South  
Latitude: 0' 0.0000 South

| Start Time   | 15-Oct-18 |          | Tue          |              | Wed          |              | Thu          |              | Fri          |              | Sat      |          | Sun      |          | Week Average |              |
|--------------|-----------|----------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|----------|----------|----------|----------|--------------|--------------|
|              | South Bo  | North Bo | South Bo     | North Bo     | South Bo     | North Bo     | South Bo     | North Bo     | South Bo     | North Bo     | South Bo | North Bo | South Bo | North Bo | South Bo     | North Bo     |
| 12:00 AM     | *         | *        | *            | *            | 7            | 11           | 7            | 13           | 10           | 18           | *        | *        | *        | *        | 8            | 14           |
| 01:00        | *         | *        | *            | *            | 6            | 2            | 7            | 6            | 7            | 5            | *        | *        | *        | *        | 7            | 4            |
| 02:00        | *         | *        | *            | *            | 3            | 2            | 7            | 6            | 4            | 4            | *        | *        | *        | *        | 5            | 4            |
| 03:00        | *         | *        | *            | *            | 6            | 3            | 1            | 4            | 5            | 5            | *        | *        | *        | *        | 4            | 4            |
| 04:00        | *         | *        | *            | *            | 5            | 0            | 6            | 2            | 5            | 5            | *        | *        | *        | *        | 5            | 2            |
| 05:00        | *         | *        | *            | *            | 6            | 14           | 25           | 13           | 13           | 14           | *        | *        | *        | *        | 15           | 14           |
| 06:00        | *         | *        | *            | *            | 51           | 45           | 45           | 51           | 46           | 51           | *        | *        | *        | *        | 47           | 49           |
| 07:00        | *         | *        | *            | *            | <b>150</b>   | <b>196</b>   | <b>167</b>   | <b>202</b>   | <b>161</b>   | <b>182</b>   | *        | *        | *        | *        | <b>159</b>   | <b>193</b>   |
| 08:00        | *         | *        | *            | *            | 140          | 113          | 128          | 106          | 133          | 100          | *        | *        | *        | *        | 134          | 106          |
| 09:00        | *         | *        | *            | *            | 94           | 95           | 93           | 103          | 137          | 99           | *        | *        | *        | *        | 108          | 99           |
| 10:00        | *         | *        | 99           | 89           | 123          | 94           | 104          | 90           | *            | *            | *        | *        | *        | *        | 109          | 91           |
| 11:00        | *         | *        | <b>115</b>   | <b>90</b>    | 107          | 103          | 122          | 91           | *            | *            | *        | *        | *        | *        | 115          | 95           |
| 12:00 PM     | *         | *        | 123          | 126          | 126          | 125          | 106          | 101          | *            | *            | *        | *        | *        | *        | 118          | 117          |
| 01:00        | *         | *        | 125          | 147          | 137          | 153          | 114          | 138          | *            | *            | *        | *        | *        | *        | 125          | 146          |
| 02:00        | *         | *        | 179          | 146          | 168          | 145          | 158          | 165          | *            | *            | *        | *        | *        | *        | 168          | 152          |
| 03:00        | *         | *        | 198          | 180          | <b>186</b>   | 166          | 195          | 177          | *            | *            | *        | *        | *        | *        | 193          | 174          |
| 04:00        | *         | *        | <b>226</b>   | 173          | 173          | 171          | 203          | 154          | *            | *            | *        | *        | *        | *        | <b>201</b>   | 166          |
| 05:00        | *         | *        | 163          | <b>205</b>   | 166          | <b>183</b>   | <b>209</b>   | <b>203</b>   | *            | *            | *        | *        | *        | *        | <b>179</b>   | <b>197</b>   |
| 06:00        | *         | *        | 121          | 134          | 172          | 158          | 154          | 150          | *            | *            | *        | *        | *        | *        | 149          | 147          |
| 07:00        | *         | *        | 76           | 100          | 106          | 121          | 132          | 133          | *            | *            | *        | *        | *        | *        | 105          | 118          |
| 08:00        | *         | *        | 53           | 70           | 87           | 99           | 81           | 87           | *            | *            | *        | *        | *        | *        | 74           | 85           |
| 09:00        | *         | *        | 49           | 62           | 65           | 49           | 49           | 55           | *            | *            | *        | *        | *        | *        | 54           | 55           |
| 10:00        | *         | *        | 46           | 45           | 44           | 47           | 43           | 38           | *            | *            | *        | *        | *        | *        | 44           | 43           |
| 11:00        | *         | *        | 18           | 22           | 28           | 23           | 14           | 27           | *            | *            | *        | *        | *        | *        | 20           | 24           |
| Lane Day     | 0         | 0        | 1591         | 1589         | 2156         | 2118         | 2170         | 2115         | 521          | 483          | 0        | 0        | 0        | 0        | 2146         | 2099         |
|              | 0         |          | 3180         |              | 4274         |              | 4285         |              | 1004         |              | 0        |          | 0        |          | 4245         |              |
| AM Peak Vol. | -         | -        | 11:00<br>115 | 11:00<br>90  | 07:00<br>150 | 07:00<br>196 | 07:00<br>167 | 07:00<br>202 | 07:00<br>161 | 07:00<br>182 | -        | -        | -        | -        | 07:00<br>159 | 07:00<br>193 |
| PM Peak Vol. | -         | -        | 16:00<br>226 | 17:00<br>205 | 15:00<br>186 | 17:00<br>183 | 17:00<br>209 | 17:00<br>203 | -            | -            | -        | -        | -        | -        | 16:00<br>201 | 17:00<br>197 |

|             |           |            |      |      |      |   |   |      |
|-------------|-----------|------------|------|------|------|---|---|------|
| Comb. Total | 0         | 3180       | 4274 | 4285 | 1004 | 0 | 0 | 4245 |
| ADT         | ADT 4,248 | AADT 4,248 |      |      |      |   |   |      |

Site Code: YUCCA 1  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound

| Start Time | 1<br>15   | 16<br>20  | 21<br>25  | 26<br>30  | 31<br>35  | 36<br>40 | 41<br>45 | 46<br>50 | 51<br>55 | 56<br>60 | 61<br>65 | 66<br>70 | 71<br>75 | 76<br>999 | Total      | Pace<br>Speed | Number<br>in Pace |
|------------|-----------|-----------|-----------|-----------|-----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------|------------|---------------|-------------------|
| 10/16/18   | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 01:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 02:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 03:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 04:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 05:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 06:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 07:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 08:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 09:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *             | *                 |
| 10:00      | <b>19</b> | <b>20</b> | 30        | 27        | 3         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 99         | 21-30         | 57                |
| 11:00      | 13        | 14        | <b>46</b> | <b>31</b> | <b>10</b> | <b>1</b> | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | <b>115</b> | 21-30         | 77                |
| 12 PM      | 3         | 21        | 47        | 37        | 13        | 2        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 123        | 21-30         | 84                |
| 13:00      | 11        | 20        | 51        | 27        | <b>15</b> | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 125        | 21-30         | 78                |
| 14:00      | 16        | 39        | 63        | <b>47</b> | 13        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 179        | 21-30         | 110               |
| 15:00      | 26        | 41        | <b>79</b> | 42        | 8         | 1        | <b>1</b> | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 198        | 21-30         | 121               |
| 16:00      | <b>51</b> | <b>56</b> | 73        | 35        | 11        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | <b>226</b> | 16-25         | 129               |
| 17:00      | 18        | 37        | 67        | 30        | 8         | <b>3</b> | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 163        | 16-25         | 104               |
| 18:00      | 9         | 29        | 42        | 35        | 6         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 121        | 21-30         | 77                |
| 19:00      | 6         | 11        | 26        | 26        | 5         | 2        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 76         | 21-30         | 52                |
| 20:00      | 2         | 4         | 27        | 13        | 7         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 53         | 21-30         | 40                |
| 21:00      | 3         | 8         | 18        | 18        | 2         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 49         | 21-30         | 36                |
| 22:00      | 3         | 4         | 16        | 22        | 1         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 46         | 21-30         | 38                |
| 23:00      | 0         | 4         | 5         | 9         | 0         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 18         | 21-30         | 14                |
| Total      | 180       | 308       | 590       | 399       | 102       | 11       | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0         | 1591       |               |                   |
| Percent    | 11.3%     | 19.4%     | 37.1%     | 25.1%     | 6.4%      | 0.7%     | 0.1%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%      |            |               |                   |
| AM Peak    | 10:00     | 10:00     | 11:00     | 11:00     | 11:00     | 11:00    |          |          |          |          |          |          |          |           | 11:00      |               |                   |
| Vol.       | 19        | 20        | 46        | 31        | 10        | 1        |          |          |          |          |          |          |          |           | 115        |               |                   |
| PM Peak    | 16:00     | 16:00     | 15:00     | 14:00     | 13:00     | 17:00    | 15:00    |          |          |          |          |          |          |           | 16:00      |               |                   |
| Vol.       | 51        | 56        | 79        | 47        | 15        | 3        | 1        |          |          |          |          |          |          |           | 226        |               |                   |









|       |                                |           |
|-------|--------------------------------|-----------|
| Stats | 10 MPH Pace Speed :            | 21-30 MPH |
|       | Number in Pace :               | 4169      |
|       | Percent in Pace :              | 64.8%     |
|       | Number of Vehicles > 30 MPH :  | 528       |
|       | Percent of Vehicles > 30 MPH : | 8.2%      |
|       | Mean Speed(Average) :          | 23 MPH    |

Site Code: YUCCA 1  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

North Bound

| Start Time | 15        | 20        | 25        | 30        | 35        | 40        | 45       | 50       | 55       | 60   | 65   | 70   | 75   | 999  | Total      | Pace Speed | Number in Pace |
|------------|-----------|-----------|-----------|-----------|-----------|-----------|----------|----------|----------|------|------|------|------|------|------------|------------|----------------|
| 10/16/18   | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 01:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 02:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 03:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 04:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 05:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 06:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 07:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 08:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 09:00      | *         | *         | *         | *         | *         | *         | *        | *        | *        | *    | *    | *    | *    | *    | *          | *          | *              |
| 10:00      | <b>7</b>  | <b>5</b>  | 13        | 36        | <b>23</b> | <b>4</b>  | <b>1</b> | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 89         | 26-35      | 59             |
| 11:00      | 4         | 3         | <b>20</b> | <b>40</b> | 20        | 2         | 0        | <b>1</b> | 0        | 0    | 0    | 0    | 0    | 0    | <b>90</b>  | 26-35      | 60             |
| 12 PM      | 4         | 4         | 18        | 50        | 41        | 4         | <b>5</b> | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 126        | 26-35      | 91             |
| 13:00      | 4         | 9         | 34        | 55        | 31        | <b>12</b> | 1        | <b>1</b> | 0        | 0    | 0    | 0    | 0    | 0    | 147        | 21-30      | 89             |
| 14:00      | 8         | <b>10</b> | 24        | 62        | 39        | 3         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 146        | 26-35      | 101            |
| 15:00      | 6         | 8         | 32        | 77        | <b>53</b> | 4         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 180        | 26-35      | 130            |
| 16:00      | <b>11</b> | 3         | <b>47</b> | 64        | 37        | 8         | 2        | 1        | 0        | 0    | 0    | 0    | 0    | 0    | 173        | 21-30      | 111            |
| 17:00      | 9         | 9         | 39        | <b>96</b> | 45        | 7         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 0    | <b>205</b> | 26-35      | 141            |
| 18:00      | 7         | 8         | 33        | 46        | 28        | 9         | 2        | 1        | 0        | 0    | 0    | 0    | 0    | 0    | 134        | 21-30      | 79             |
| 19:00      | 3         | 5         | 22        | 38        | 26        | 6         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 100        | 26-35      | 64             |
| 20:00      | 4         | 1         | 14        | 28        | 20        | 3         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 70         | 26-35      | 48             |
| 21:00      | 1         | 4         | 13        | 25        | 14        | 3         | 1        | 0        | <b>1</b> | 0    | 0    | 0    | 0    | 0    | 62         | 24-33      | 39             |
| 22:00      | 3         | 5         | 5         | 18        | 8         | 6         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 45         | 26-35      | 26             |
| 23:00      | 0         | 1         | 7         | 6         | 4         | 4         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 22         | 21-30      | 13             |
| Total      | 71        | 75        | 321       | 641       | 389       | 75        | 12       | 4        | 1        | 0    | 0    | 0    | 0    | 0    | 1589       |            |                |
| Percent    | 4.5%      | 4.7%      | 20.2%     | 40.3%     | 24.5%     | 4.7%      | 0.8%     | 0.3%     | 0.1%     | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |            |            |                |
| AM Peak    | 10:00     | 10:00     | 11:00     | 11:00     | 10:00     | 10:00     | 10:00    | 11:00    |          |      |      |      |      |      | 11:00      |            |                |
| Vol.       | 7         | 5         | 20        | 40        | 23        | 4         | 1        | 1        |          |      |      |      |      |      | 90         |            |                |
| PM Peak    | 16:00     | 14:00     | 16:00     | 17:00     | 15:00     | 13:00     | 12:00    | 13:00    | 21:00    |      |      |      |      |      | 17:00      |            |                |
| Vol.       | 11        | 10        | 47        | 96        | 53        | 12        | 5        | 1        | 1        |      |      |      |      |      | 205        |            |                |









|       |                                |           |
|-------|--------------------------------|-----------|
| Stats | 10 MPH Pace Speed :            | 26-35 MPH |
|       | Number in Pace :               | 4171      |
|       | Percent in Pace :              | 66.2%     |
|       | Number of Vehicles > 30 MPH :  | 1974      |
|       | Percent of Vehicles > 30 MPH : | 31.3%     |
|       | Mean Speed(Average) :          | 28 MPH    |

Site Code: YUCCA 1  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound, North Bound

| Start Time | Bikes | Cars & Trailer | 2 Axle Long | Buses | 2 Axle 6 Tire | 3 Axle Single | 4 Axle Single | <5 Axl Double | 5 Axle Double | >6 Axl Double | <6 Axl Multi | 6 Axle Multi | >6 Axl Multi | Not Classe | Total |
|------------|-------|----------------|-------------|-------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|-------|
| 10/16/18   | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 01:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 02:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 03:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 04:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 05:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 06:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 07:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 08:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 09:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 10:00      | 2     | 117            | 36          | 0     | 11            | 3             | 0             | 3             | 0             | 0             | 0            | 0            | 0            | 16         | 188   |
| 11:00      | 0     | 138            | 49          | 1     | 6             | 2             | 2             | 0             | 0             | 0             | 0            | 0            | 0            | 7          | 205   |
| 12 PM      | 0     | 184            | 54          | 0     | 7             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 3          | 249   |
| 13:00      | 1     | 174            | 74          | 2     | 10            | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 10         | 272   |
| 14:00      | 1     | 223            | 71          | 2     | 9             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 19         | 325   |
| 15:00      | 2     | 258            | 93          | 0     | 7             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 17         | 378   |
| 16:00      | 1     | 266            | 82          | 2     | 17            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 31         | 399   |
| 17:00      | 2     | 257            | 81          | 1     | 10            | 0             | 0             | 2             | 0             | 0             | 0            | 0            | 0            | 15         | 368   |
| 18:00      | 0     | 192            | 48          | 0     | 4             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 11         | 255   |
| 19:00      | 0     | 117            | 50          | 0     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 6          | 176   |
| 20:00      | 1     | 96             | 22          | 0     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 123   |
| 21:00      | 0     | 80             | 24          | 0     | 4             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 3          | 111   |
| 22:00      | 2     | 74             | 13          | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 91    |
| 23:00      | 0     | 32             | 6           | 0     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 40    |
| Total      | 12    | 2208           | 703         | 8     | 94            | 7             | 2             | 6             | 0             | 0             | 0            | 0            | 0            | 140        | 3180  |
| Percent    | 0.4%  | 69.4%          | 22.1%       | 0.3%  | 3.0%          | 0.2%          | 0.1%          | 0.2%          | 0.0%          | 0.0%          | 0.0%         | 0.0%         | 0.0%         | 4.4%       |       |
| AM Peak    | 10:00 | 11:00          | 11:00       | 11:00 | 10:00         | 10:00         | 11:00         | 10:00         |               |               |              |              |              | 10:00      | 11:00 |
| Vol.       | 2     | 138            | 49          | 1     | 11            | 3             | 2             | 3             |               |               |              |              |              | 16         | 205   |
| PM Peak    | 15:00 | 16:00          | 15:00       | 13:00 | 16:00         | 13:00         |               | 17:00         |               |               |              |              |              | 16:00      | 16:00 |
| Vol.       | 2     | 266            | 93          | 2     | 17            | 1             |               | 2             |               |               |              |              |              | 31         | 399   |

Site Code: YUCCA 1  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound, North Bound

| Start Time | Bikes | Cars & Trailer | 2 Axle Long | Buses | 2 Axle 6 Tire | 3 Axle Single | 4 Axle Single | <5 Axl Double | 5 Axle Double | >6 Axl Double | <6 Axl Multi | 6 Axle Multi | >6 Axl Multi | Not Classe | Total |
|------------|-------|----------------|-------------|-------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|-------|
| 10/17/18   | 0     | 13             | 2           | 1     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 18    |
| 01:00      | 0     | 8              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 8     |
| 02:00      | 0     | 4              | 1           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 5     |
| 03:00      | 0     | 9              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 9     |
| 04:00      | 0     | 4              | 1           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 5     |
| 05:00      | 0     | 9              | 8           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 3          | 20    |
| 06:00      | 0     | 62             | 21          | 1     | 6             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 6          | 96    |
| 07:00      | 2     | 245            | 76          | 2     | 11            | 2             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 7          | 346   |
| 08:00      | 1     | 186            | 39          | 1     | 17            | 0             | 1             | 0             | 0             | 0             | 0            | 0            | 0            | 8          | 253   |
| 09:00      | 0     | 130            | 40          | 0     | 6             | 0             | 1             | 1             | 1             | 0             | 0            | 0            | 0            | 10         | 189   |
| 10:00      | 0     | 153            | 42          | 0     | 10            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 12         | 217   |
| 11:00      | 1     | 146            | 43          | 0     | 11            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 9          | 210   |
| 12 PM      | 0     | 172            | 58          | 0     | 9             | 2             | 1             | 1             | 0             | 0             | 0            | 0            | 0            | 8          | 251   |
| 13:00      | 0     | 208            | 62          | 1     | 12            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 6          | 290   |
| 14:00      | 1     | 222            | 68          | 1     | 12            | 0             | 0             | 0             | 1             | 0             | 0            | 0            | 0            | 8          | 313   |
| 15:00      | 2     | 232            | 75          | 2     | 19            | 2             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 19         | 352   |
| 16:00      | 2     | 245            | 59          | 1     | 20            | 1             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 15         | 344   |
| 17:00      | 1     | 231            | 79          | 1     | 14            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 23         | 349   |
| 18:00      | 1     | 225            | 84          | 1     | 8             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 10         | 330   |
| 19:00      | 3     | 158            | 54          | 0     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 9          | 227   |
| 20:00      | 2     | 138            | 32          | 0     | 7             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 7          | 186   |
| 21:00      | 0     | 91             | 19          | 0     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 2          | 114   |
| 22:00      | 1     | 67             | 14          | 1     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 7          | 91    |
| 23:00      | 0     | 39             | 9           | 0     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 51    |
| Total      | 17    | 2997           | 886         | 13    | 172           | 8             | 3             | 6             | 2             | 0             | 0            | 0            | 0            | 170        | 4274  |
| Percent    | 0.4%  | 70.1%          | 20.7%       | 0.3%  | 4.0%          | 0.2%          | 0.1%          | 0.1%          | 0.0%          | 0.0%          | 0.0%         | 0.0%         | 0.0%         | 4.0%       |       |
| AM Peak    | 07:00 | 07:00          | 07:00       | 07:00 | 08:00         | 07:00         | 08:00         | 07:00         | 09:00         |               |              |              |              | 10:00      | 07:00 |
| Vol.       | 2     | 245            | 76          | 2     | 17            | 2             | 1             | 1             | 1             |               |              |              |              | 12         | 346   |
| PM Peak    | 19:00 | 16:00          | 18:00       | 15:00 | 16:00         | 12:00         | 12:00         | 12:00         | 14:00         |               |              |              |              | 17:00      | 15:00 |
| Vol.       | 3     | 245            | 84          | 2     | 20            | 2             | 1             | 1             | 1             |               |              |              |              | 23         | 352   |

Site Code: YUCCA 1  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound, North Bound

| Start Time | Bikes | Cars & Trailer | 2 Axle Long | Buses | 2 Axle 6 Tire | 3 Axle Single | 4 Axle Single | <5 Axl Double | 5 Axle Double | >6 Axl Double | <6 Axl Multi | 6 Axle Multi | >6 Axl Multi | Not Classe | Total |
|------------|-------|----------------|-------------|-------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|-------|
| 10/18/18   | 0     | 17             | 3           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 20    |
| 01:00      | 0     | 10             | 3           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 13    |
| 02:00      | 0     | 13             | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 13    |
| 03:00      | 0     | 4              | 1           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 5     |
| 04:00      | 0     | 6              | 2           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 8     |
| 05:00      | 0     | 19             | 12          | 1     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 4          | 38    |
| 06:00      | 1     | 65             | 24          | 0     | 5             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 96    |
| 07:00      | 0     | 255            | 75          | 2     | 16            | 2             | 0             | 2             | 0             | 0             | 0            | 0            | 0            | 17         | 369   |
| 08:00      | 0     | 163            | 41          | 1     | 9             | 4             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 15         | 234   |
| 09:00      | 1     | 131            | 47          | 0     | 10            | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 6          | 196   |
| 10:00      | 0     | 133            | 43          | 0     | 10            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 8          | 194   |
| 11:00      | 1     | 135            | 53          | 4     | 10            | 1             | 0             | 2             | 0             | 0             | 0            | 0            | 0            | 7          | 213   |
| 12 PM      | 2     | 141            | 39          | 3     | 9             | 0             | 1             | 0             | 0             | 0             | 0            | 0            | 0            | 12         | 207   |
| 13:00      | 3     | 186            | 38          | 3     | 13            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 8          | 252   |
| 14:00      | 0     | 242            | 58          | 1     | 12            | 1             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 8          | 323   |
| 15:00      | 0     | 245            | 86          | 0     | 18            | 2             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 21         | 372   |
| 16:00      | 3     | 239            | 77          | 0     | 13            | 1             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 23         | 357   |
| 17:00      | 0     | 289            | 80          | 1     | 17            | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 24         | 412   |
| 18:00      | 0     | 212            | 72          | 0     | 9             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 11         | 304   |
| 19:00      | 0     | 192            | 64          | 0     | 4             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 4          | 265   |
| 20:00      | 1     | 126            | 36          | 1     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 3          | 168   |
| 21:00      | 0     | 82             | 20          | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 104   |
| 22:00      | 1     | 62             | 16          | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 2          | 81    |
| 23:00      | 0     | 37             | 3           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 41    |
| Total      | 13    | 3004           | 893         | 17    | 160           | 13            | 1             | 9             | 0             | 0             | 0            | 0            | 0            | 175        | 4285  |
| Percent    | 0.3%  | 70.1%          | 20.8%       | 0.4%  | 3.7%          | 0.3%          | 0.0%          | 0.2%          | 0.0%          | 0.0%          | 0.0%         | 0.0%         | 0.0%         | 4.1%       |       |
| AM Peak    | 06:00 | 07:00          | 07:00       | 11:00 | 07:00         | 08:00         |               | 07:00         |               |               |              |              |              | 07:00      | 07:00 |
| Vol.       | 1     | 255            | 75          | 4     | 16            | 4             |               | 2             |               |               |              |              |              | 17         | 369   |
| PM Peak    | 13:00 | 17:00          | 15:00       | 12:00 | 15:00         | 15:00         | 12:00         | 13:00         |               |               |              |              |              | 17:00      | 17:00 |
| Vol.       | 3     | 289            | 86          | 3     | 18            | 2             | 1             | 1             |               |               |              |              |              | 24         | 412   |





Site Code: YUCCA 2  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

| Start Time   | 15-Oct-18 |          | Tue        |            | Wed        |            | Thu        |            | Fri        |            | Sat      |          | Sun      |          | Week Average |            |
|--------------|-----------|----------|------------|------------|------------|------------|------------|------------|------------|------------|----------|----------|----------|----------|--------------|------------|
|              | South Bou | North Bo | South Bo   | North Bo   | South Bo   | North Bo   | South Bo   | North Bo   | South Bo   | North Bo   | South Bo | North Bo | South Bo | North Bo | South Bo     | North Bo   |
| 12:00 AM     | *         | *        | *          | *          | 6          | 8          | 8          | 7          | 14         | 16         | *        | *        | *        | *        | 9            | 10         |
| 01:00        | *         | *        | *          | *          | 6          | 2          | 6          | 6          | 8          | 9          | *        | *        | *        | *        | 7            | 6          |
| 02:00        | *         | *        | *          | *          | 4          | 2          | 4          | 3          | 5          | 5          | *        | *        | *        | *        | 4            | 3          |
| 03:00        | *         | *        | *          | *          | 5          | 1          | 2          | 4          | 4          | 2          | *        | *        | *        | *        | 4            | 2          |
| 04:00        | *         | *        | *          | *          | 8          | 0          | 7          | 2          | 5          | 3          | *        | *        | *        | *        | 7            | 2          |
| 05:00        | *         | *        | *          | *          | 14         | 19         | 24         | 17         | 17         | 17         | *        | *        | *        | *        | 18           | 18         |
| 06:00        | *         | *        | *          | *          | 52         | 47         | 43         | 57         | 48         | 61         | *        | *        | *        | *        | 48           | 55         |
| 07:00        | *         | *        | *          | *          | <b>181</b> | <b>239</b> | <b>200</b> | <b>242</b> | <b>189</b> | <b>217</b> | *        | *        | *        | *        | <b>190</b>   | <b>233</b> |
| 08:00        | *         | *        | *          | *          | 141        | 130        | 131        | 114        | 139        | 121        | *        | *        | *        | *        | 137          | 122        |
| 09:00        | *         | *        | *          | *          | 100        | 85         | 90         | 102        | 1          | 1          | *        | *        | *        | *        | 64           | 63         |
| 10:00        | *         | *        | *          | *          | 116        | 98         | 104        | 81         | *          | *          | *        | *        | *        | *        | 110          | 90         |
| 11:00        | *         | *        | <b>111</b> | <b>78</b>  | 109        | 110        | 122        | 90         | *          | *          | *        | *        | *        | *        | 114          | 93         |
| 12:00 PM     | *         | *        | 121        | 130        | 128        | 120        | 117        | 101        | *          | *          | *        | *        | *        | *        | 122          | 117        |
| 01:00        | *         | *        | 129        | 146        | 137        | 157        | 123        | 138        | *          | *          | *        | *        | *        | *        | 130          | 147        |
| 02:00        | *         | *        | 212        | 168        | 192        | 151        | 188        | 172        | *          | *          | *        | *        | *        | *        | 197          | 164        |
| 03:00        | *         | *        | 235        | 179        | <b>210</b> | 172        | 219        | 190        | *          | *          | *        | *        | *        | *        | 221          | 180        |
| 04:00        | *         | *        | <b>281</b> | 196        | 209        | 185        | <b>233</b> | 170        | *          | *          | *        | *        | *        | *        | <b>241</b>   | <b>184</b> |
| 05:00        | *         | *        | 181        | <b>211</b> | 194        | <b>188</b> | 221        | <b>203</b> | *          | *          | *        | *        | *        | *        | 199          | <b>201</b> |
| 06:00        | *         | *        | 148        | 140        | 191        | 172        | 169        | 161        | *          | *          | *        | *        | *        | *        | 169          | 158        |
| 07:00        | *         | *        | 89         | 95         | 117        | 115        | 140        | 131        | *          | *          | *        | *        | *        | *        | 115          | 114        |
| 08:00        | *         | *        | 59         | 63         | 97         | 90         | 89         | 80         | *          | *          | *        | *        | *        | *        | 82           | 78         |
| 09:00        | *         | *        | 44         | 65         | 78         | 56         | 69         | 47         | *          | *          | *        | *        | *        | *        | 64           | 56         |
| 10:00        | *         | *        | 51         | 35         | 44         | 35         | 57         | 39         | *          | *          | *        | *        | *        | *        | 51           | 36         |
| 11:00        | *         | *        | 20         | 18         | 31         | 22         | 21         | 28         | *          | *          | *        | *        | *        | *        | 24           | 23         |
| Lane Day     | 0         | 0        | 1681       | 1524       | 2370       | 2204       | 2387       | 2185       | 430        | 452        | 0        | 0        | 0        | 0        | 2327         | 2155       |
| AM Peak Vol. | -         | -        | 111        | 78         | 181        | 239        | 200        | 242        | 189        | 217        | -        | -        | -        | -        | 190          | 233        |
| PM Peak Vol. | -         | -        | 281        | 211        | 210        | 188        | 233        | 203        | -          | -          | -        | -        | -        | -        | 241          | 201        |

|             |           |            |      |      |     |   |   |      |
|-------------|-----------|------------|------|------|-----|---|---|------|
| Comb. Total | 0         | 3205       | 4574 | 4572 | 882 | 0 | 0 | 4482 |
| ADT         | ADT 4,478 | AADT 4,478 |      |      |     |   |   |      |

Site Code: YUCCA 2  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound

| Start Time | 15       | 20       | 25        | 30        | 35         | 40        | 45       | 50       | 55       | 60       | 65       | 70       | 75       | 999      | Total      | Pace Speed | Number in Pace |
|------------|----------|----------|-----------|-----------|------------|-----------|----------|----------|----------|----------|----------|----------|----------|----------|------------|------------|----------------|
| 10/16/18   | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 01:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 02:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 03:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 04:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 05:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 06:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 07:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 08:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 09:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 10:00      | *        | *        | *         | *         | *          | *         | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 11:00      | <b>1</b> | <b>1</b> | <b>13</b> | <b>44</b> | <b>36</b>  | <b>14</b> | <b>2</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>111</b> | 26-35      | 80             |
| 12 PM      | 4        | 0        | 9         | 31        | 52         | 20        | 5        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 121        | 26-35      | 83             |
| 13:00      | 0        | 0        | 10        | 40        | 58         | 13        | 5        | 3        | 0        | 0        | 0        | 0        | 0        | 0        | 129        | 26-35      | 98             |
| 14:00      | 6        | <b>5</b> | 18        | 74        | 65         | <b>36</b> | <b>7</b> | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 212        | 26-35      | 139            |
| 15:00      | 4        | 0        | 11        | 93        | 87         | 34        | 4        | 1        | 0        | 0        | 0        | <b>1</b> | 0        | 0        | 235        | 26-35      | 180            |
| 16:00      | <b>8</b> | <b>3</b> | <b>25</b> | <b>99</b> | <b>113</b> | 27        | 5        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | <b>281</b> | 26-35      | 212            |
| 17:00      | 3        | 1        | 13        | 60        | 73         | 25        | 6        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 181        | 26-35      | 133            |
| 18:00      | 4        | 5        | 14        | 63        | 42         | 16        | 3        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 148        | 26-35      | 105            |
| 19:00      | 0        | 1        | 6         | 34        | 37         | 10        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 89         | 26-35      | 71             |
| 20:00      | 1        | 1        | 6         | 20        | 20         | 8         | 3        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 59         | 26-35      | 40             |
| 21:00      | 3        | 0        | 7         | 12        | 16         | 3         | 1        | 0        | 0        | <b>2</b> | 0        | 0        | 0        | 0        | 44         | 26-35      | 28             |
| 22:00      | 0        | 1        | 4         | 18        | 14         | 10        | 4        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 51         | 26-35      | 32             |
| 23:00      | 0        | 0        | 3         | 3         | 9          | 5         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 20         | 30-39      | 14             |
| Total      | 34       | 18       | 139       | 591       | 622        | 221       | 46       | 7        | 0        | 2        | 0        | 1        | 0        | 0        | 1681       |            |                |
| Percent    | 2.0%     | 1.1%     | 8.3%      | 35.2%     | 37.0%      | 13.1%     | 2.7%     | 0.4%     | 0.0%     | 0.1%     | 0.0%     | 0.1%     | 0.0%     | 0.0%     |            |            |                |
| AM Peak    | 11:00    | 11:00    | 11:00     | 11:00     | 11:00      | 11:00     | 11:00    |          |          |          |          |          |          |          | 11:00      |            |                |
| Vol.       | 1        | 1        | 13        | 44        | 36         | 14        | 2        |          |          |          |          |          |          |          | 111        |            |                |
| PM Peak    | 16:00    | 14:00    | 16:00     | 16:00     | 16:00      | 14:00     | 14:00    | 13:00    |          | 21:00    |          | 15:00    |          |          | 16:00      |            |                |
| Vol.       | 8        | 5        | 25        | 99        | 113        | 36        | 7        | 3        |          | 2        |          | 1        |          |          | 281        |            |                |

Site Code: YUCCA 2  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound

| Start Time     | 15          | 20          | 25          | 30           | 35           | 40           | 45          | 50          | 55          | 60          | 65          | 70          | 75          | 999         | Total       | Pace Speed | Number in Pace |
|----------------|-------------|-------------|-------------|--------------|--------------|--------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|------------|----------------|
| 10/17/18       | 0           | 0           | 4           | 0            | 2            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 6           | 16-25      | 4              |
| 01:00          | 0           | 0           | 1           | 4            | 0            | 1            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 6           | 21-30      | 5              |
| 02:00          | 0           | 0           | 0           | 1            | 2            | 1            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 4           | 25-34      | 3              |
| 03:00          | 0           | 0           | 0           | 2            | 1            | 2            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 5           | 24-33      | 3              |
| 04:00          | 0           | 0           | 1           | 2            | 3            | 1            | 0           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 8           | 26-35      | 5              |
| 05:00          | 1           | 0           | 2           | 4            | 3            | 3            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 14          | 24-33      | 7              |
| 06:00          | 0           | 2           | 2           | 15           | 15           | 14           | 3           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 52          | 26-35      | 30             |
| 07:00          | 6           | 1           | 8           | 43           | 71           | 41           | 11          | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 181         | 26-35      | 114            |
| 08:00          | 1           | 1           | 12          | 44           | 47           | 28           | 8           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 141         | 26-35      | 91             |
| 09:00          | 0           | 1           | 7           | 34           | 32           | 19           | 6           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 100         | 26-35      | 66             |
| 10:00          | 1           | 1           | 7           | 37           | 47           | 19           | 3           | 0           | 1           | 0           | 0           | 0           | 0           | 0           | 116         | 26-35      | 84             |
| 11:00          | 3           | 2           | 19          | 24           | 43           | 15           | 1           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 109         | 26-35      | 67             |
| 12 PM          | 4           | 3           | 11          | 42           | 45           | 19           | 4           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 128         | 26-35      | 87             |
| 13:00          | 0           | 0           | 5           | 48           | 50           | 28           | 3           | 3           | 0           | 0           | 0           | 0           | 0           | 0           | 137         | 26-35      | 98             |
| 14:00          | 5           | 2           | 7           | 53           | 79           | 41           | 4           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 192         | 26-35      | 132            |
| 15:00          | 6           | 0           | 11          | 63           | 94           | 27           | 8           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 210         | 26-35      | 157            |
| 16:00          | 5           | 2           | 16          | 74           | 82           | 24           | 6           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 209         | 26-35      | 156            |
| 17:00          | 5           | 0           | 15          | 73           | 66           | 31           | 4           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 194         | 26-35      | 139            |
| 18:00          | 4           | 2           | 19          | 72           | 73           | 19           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 191         | 26-35      | 145            |
| 19:00          | 2           | 2           | 22          | 48           | 30           | 10           | 3           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 117         | 26-35      | 78             |
| 20:00          | 1           | 0           | 10          | 37           | 32           | 15           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 97          | 26-35      | 69             |
| 21:00          | 0           | 3           | 13          | 30           | 22           | 6            | 3           | 0           | 1           | 0           | 0           | 0           | 0           | 0           | 78          | 26-35      | 52             |
| 22:00          | 0           | 0           | 5           | 14           | 17           | 3            | 3           | 1           | 1           | 0           | 0           | 0           | 0           | 0           | 44          | 26-35      | 31             |
| 23:00          | 0           | 0           | 4           | 13           | 8            | 3            | 2           | 0           | 0           | 1           | 0           | 0           | 0           | 0           | 31          | 26-35      | 21             |
| <b>Total</b>   | <b>44</b>   | <b>22</b>   | <b>201</b>  | <b>777</b>   | <b>864</b>   | <b>370</b>   | <b>77</b>   | <b>11</b>   | <b>3</b>    | <b>1</b>    | <b>0</b>    | <b>0</b>    | <b>0</b>    | <b>0</b>    | <b>2370</b> |            |                |
| <b>Percent</b> | <b>1.9%</b> | <b>0.9%</b> | <b>8.5%</b> | <b>32.8%</b> | <b>36.5%</b> | <b>15.6%</b> | <b>3.2%</b> | <b>0.5%</b> | <b>0.1%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> |             |            |                |
| AM Peak        | 07:00       | 06:00       | 11:00       | 08:00        | 07:00        | 07:00        | 07:00       | 11:00       | 10:00       |             |             |             |             |             |             | 07:00      |                |
| Vol.           | 6           | 2           | 19          | 44           | 71           | 41           | 11          | 2           | 1           |             |             |             |             |             |             | 181        |                |
| PM Peak        | 15:00       | 12:00       | 19:00       | 16:00        | 15:00        | 14:00        | 15:00       | 13:00       | 21:00       | 23:00       |             |             |             |             |             | 15:00      |                |
| Vol.           | 6           | 3           | 22          | 74           | 94           | 41           | 8           | 3           | 1           | 1           |             |             |             |             |             | 210        |                |

Site Code: YUCCA 2  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound

| Start Time     | 15          | 20          | 25           | 30           | 35           | 40           | 45          | 50          | 55          | 60          | 65          | 70          | 75          | 999         | Total       | Pace Speed | Number in Pace |
|----------------|-------------|-------------|--------------|--------------|--------------|--------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|------------|----------------|
| 10/18/18       | 0           | 0           | 1            | 2            | 4            | 1            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 8           | 26-35      | 6              |
| 01:00          | 0           | 1           | 2            | 2            | 1            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 6           | 21-30      | 4              |
| 02:00          | 0           | 0           | 0            | 1            | 3            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 4           | 26-35      | 4              |
| 03:00          | 0           | 0           | 0            | 1            | 1            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 2           | 24-33      | 2              |
| 04:00          | 0           | 0           | 1            | 3            | 1            | 1            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 7           | 26-35      | 4              |
| 05:00          | 4           | 0           | 3            | 6            | 7            | 3            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 24          | 26-35      | 13             |
| 06:00          | 2           | 0           | 6            | 14           | 14           | 5            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 43          | 26-35      | 28             |
| 07:00          | <b>9</b>    | 1           | 12           | <b>70</b>    | <b>78</b>    | <b>24</b>    | <b>6</b>    | 0           | 0           | 0           | 0           | 0           | 0           | 0           | <b>200</b>  | 26-35      | 148            |
| 08:00          | 2           | 2           | 14           | 49           | 42           | 16           | 6           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 131         | 26-35      | 91             |
| 09:00          | 3           | 1           | 12           | 28           | 31           | 11           | 2           | 1           | 0           | 0           | 0           | 0           | 0           | 1           | 90          | 26-35      | 59             |
| 10:00          | 6           | <b>3</b>    | <b>15</b>    | 38           | 31           | 7            | 2           | <b>2</b>    | 0           | 0           | 0           | 0           | 0           | 0           | 104         | 26-35      | 69             |
| 11:00          | 5           | 1           | 15           | 53           | 34           | 10           | 4           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 122         | 26-35      | 87             |
| 12 PM          | 5           | 3           | 17           | 42           | 33           | 12           | 3           | 0           | <b>2</b>    | 0           | 0           | 0           | 0           | 0           | 117         | 26-35      | 75             |
| 13:00          | 3           | <b>5</b>    | 14           | 38           | 38           | 18           | 5           | 1           | 0           | 0           | 1           | 0           | 0           | 0           | 123         | 26-35      | 76             |
| 14:00          | 5           | 3           | 16           | 72           | 62           | 22           | <b>6</b>    | 1           | 0           | <b>1</b>    | 0           | 0           | 0           | 0           | 188         | 26-35      | 134            |
| 15:00          | <b>7</b>    | 3           | 21           | 78           | 82           | 23           | 5           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 219         | 26-35      | 160            |
| 16:00          | 2           | 2           | <b>31</b>    | <b>80</b>    | <b>86</b>    | 23           | 6           | <b>2</b>    | 0           | 0           | 0           | 0           | 0           | 1           | <b>233</b>  | 26-35      | 166            |
| 17:00          | 0           | 3           | 17           | 79           | 82           | <b>38</b>    | 1           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 221         | 26-35      | 161            |
| 18:00          | 2           | 2           | 16           | 55           | 69           | 20           | 4           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 169         | 26-35      | 124            |
| 19:00          | 2           | 1           | 16           | 55           | 44           | 18           | 4           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 140         | 26-35      | 99             |
| 20:00          | 0           | 1           | 12           | 22           | 35           | 14           | 4           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 89          | 26-35      | 57             |
| 21:00          | 1           | 1           | 5            | 27           | 23           | 10           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 69          | 26-35      | 50             |
| 22:00          | 2           | 2           | 4            | 12           | 24           | 8            | 3           | 0           | 1           | 1           | 0           | 0           | 0           | 0           | 57          | 26-35      | 36             |
| 23:00          | 0           | 1           | 5            | 5            | 4            | 2            | 4           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 21          | 21-30      | 10             |
| <b>Total</b>   | <b>60</b>   | <b>36</b>   | <b>255</b>   | <b>832</b>   | <b>829</b>   | <b>286</b>   | <b>71</b>   | <b>10</b>   | <b>3</b>    | <b>2</b>    | <b>1</b>    | <b>0</b>    | <b>0</b>    | <b>2</b>    | <b>2387</b> |            |                |
| <b>Percent</b> | <b>2.5%</b> | <b>1.5%</b> | <b>10.7%</b> | <b>34.9%</b> | <b>34.7%</b> | <b>12.0%</b> | <b>3.0%</b> | <b>0.4%</b> | <b>0.1%</b> | <b>0.1%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.1%</b> |             |            |                |
| AM Peak        | 07:00       | 10:00       | 10:00        | 07:00        | 07:00        | 07:00        | 07:00       | 10:00       |             |             |             |             |             |             | 09:00       | 07:00      |                |
| Vol.           | 9           | 3           | 15           | 70           | 78           | 24           | 6           | 2           |             |             |             |             |             | 1           | 200         |            |                |
| PM Peak        | 15:00       | 13:00       | 16:00        | 16:00        | 16:00        | 17:00        | 14:00       | 16:00       | 12:00       | 14:00       | 13:00       |             |             |             | 16:00       | 16:00      |                |
| Vol.           | 7           | 5           | 31           | 80           | 86           | 38           | 6           | 2           | 2           | 1           | 1           |             |             | 1           | 233         |            |                |





|       |                                |           |
|-------|--------------------------------|-----------|
| Stats | 10 MPH Pace Speed :            | 26-35 MPH |
|       | Number in Pace :               | 4785      |
|       | Percent in Pace :              | 69.7%     |
|       | Number of Vehicles > 30 MPH :  | 3727      |
|       | Percent of Vehicles > 30 MPH : | 54.3%     |
|       | Mean Speed(Average) :          | 31 MPH    |

Site Code: YUCCA 2  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

North Bound

| Start Time   | 15        | 20       | 25        | 30        | 35        | 40        | 45       | 50       | 55   | 60   | 65   | 70   | 75   | 999  | Total      | Pace Speed | Number in Pace |
|--------------|-----------|----------|-----------|-----------|-----------|-----------|----------|----------|------|------|------|------|------|------|------------|------------|----------------|
| 10/16/18     | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 01:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 02:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 03:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 04:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 05:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 06:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 07:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 08:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 09:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 10:00        | *         | *        | *         | *         | *         | *         | *        | *        | *    | *    | *    | *    | *    | *    | *          | *          | *              |
| 11:00        | 0         | 0        | <b>6</b>  | <b>31</b> | <b>28</b> | <b>9</b>  | <b>3</b> | <b>1</b> | 0    | 0    | 0    | 0    | 0    | 0    | <b>78</b>  | 26-35      | 59             |
| 12 PM        | 7         | 0        | 4         | 24        | 47        | <b>39</b> | <b>7</b> | 2        | 0    | 0    | 0    | 0    | 0    | 0    | 130        | 31-40      | 86             |
| 13:00        | 1         | 1        | 12        | 40        | 53        | 30        | 7        | 2        | 0    | 0    | 0    | 0    | 0    | 0    | 146        | 26-35      | 93             |
| 14:00        | 6         | 1        | <b>16</b> | 53        | 62        | 28        | 2        | 0        | 0    | 0    | 0    | 0    | 0    | 0    | 168        | 26-35      | 115            |
| 15:00        | 3         | <b>3</b> | 8         | 45        | <b>95</b> | 23        | 2        | 0        | 0    | 0    | 0    | 0    | 0    | 0    | 179        | 26-35      | 140            |
| 16:00        | <b>15</b> | 2        | 13        | 55        | 68        | 38        | 4        | 1        | 0    | 0    | 0    | 0    | 0    | 0    | 196        | 26-35      | 123            |
| 17:00        | 12        | 1        | 11        | <b>64</b> | 80        | 35        | 7        | 1        | 0    | 0    | 0    | 0    | 0    | 0    | <b>211</b> | 26-35      | 144            |
| 18:00        | 4         | 3        | 12        | 40        | 48        | 26        | 4        | <b>3</b> | 0    | 0    | 0    | 0    | 0    | 0    | 140        | 26-35      | 88             |
| 19:00        | 0         | 2        | 5         | 30        | 42        | 14        | 1        | 1        | 0    | 0    | 0    | 0    | 0    | 0    | 95         | 26-35      | 72             |
| 20:00        | 0         | 0        | 1         | 20        | 32        | 8         | 2        | 0        | 0    | 0    | 0    | 0    | 0    | 0    | 63         | 26-35      | 52             |
| 21:00        | 2         | 1        | 10        | 16        | 31        | 2         | 2        | 1        | 0    | 0    | 0    | 0    | 0    | 0    | 65         | 26-35      | 47             |
| 22:00        | 0         | 0        | 2         | 11        | 11        | 8         | 3        | 0        | 0    | 0    | 0    | 0    | 0    | 0    | 35         | 26-35      | 22             |
| 23:00        | 0         | 0        | 1         | 3         | 7         | 5         | 2        | 0        | 0    | 0    | 0    | 0    | 0    | 0    | 18         | 31-40      | 12             |
| Total        | 50        | 14       | 101       | 432       | 604       | 265       | 46       | 12       | 0    | 0    | 0    | 0    | 0    | 0    | 1524       |            |                |
| Percent      | 3.3%      | 0.9%     | 6.6%      | 28.3%     | 39.6%     | 17.4%     | 3.0%     | 0.8%     | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |            |            |                |
| AM Peak Vol. |           |          | 11:00     | 11:00     | 11:00     | 11:00     | 11:00    | 11:00    |      |      |      |      |      |      | 11:00      |            |                |
| PM Peak Vol. | 16:00     | 15:00    | 14:00     | 17:00     | 15:00     | 12:00     | 12:00    | 18:00    |      |      |      |      |      |      | 17:00      |            |                |
|              | 15        | 3        | 16        | 64        | 95        | 39        | 7        | 3        |      |      |      |      |      |      | 211        |            |                |

Site Code: YUCCA 2  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

North Bound

| Start Time | 15       | 20       | 25        | 30        | 35         | 40        | 45        | 50       | 55       | 60       | 65   | 70   | 75   | 999  | Total      | Pace Speed | Number in Pace |
|------------|----------|----------|-----------|-----------|------------|-----------|-----------|----------|----------|----------|------|------|------|------|------------|------------|----------------|
| 10/17/18   | 0        | 0        | 0         | 2         | 5          | 1         | 0         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 8          | 26-35      | 7              |
| 01:00      | 0        | 0        | 0         | 0         | 2          | 0         | 0         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 2          | 25-34      | 2              |
| 02:00      | 0        | 0        | 0         | 0         | 1          | 1         | 0         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 2          | 29-38      | 2              |
| 03:00      | 0        | 0        | 0         | 0         | 1          | 0         | 0         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 1          | 24-33      | 1              |
| 04:00      | 0        | 0        | 0         | 0         | 0          | 0         | 0         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 0          | *          | *              |
| 05:00      | 1        | 0        | 0         | 1         | 9          | 6         | 1         | 1        | 0        | 0        | 0    | 0    | 0    | 0    | 19         | 31-40      | 15             |
| 06:00      | 0        | 0        | 1         | 8         | 22         | 12        | 4         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 47         | 31-40      | 34             |
| 07:00      | <b>6</b> | <b>1</b> | <b>14</b> | <b>61</b> | <b>103</b> | <b>44</b> | <b>8</b>  | <b>2</b> | 0        | 0        | 0    | 0    | 0    | 0    | <b>239</b> | 26-35      | 164            |
| 08:00      | 3        | <b>3</b> | 5         | 24        | 38         | <b>45</b> | <b>11</b> | 1        | 0        | 0        | 0    | 0    | 0    | 0    | 130        | 31-40      | 83             |
| 09:00      | 1        | 3        | 6         | 14        | 40         | 18        | 3         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 85         | 31-40      | 58             |
| 10:00      | 3        | 1        | 2         | 27        | 37         | 21        | 5         | 2        | 0        | 0        | 0    | 0    | 0    | 0    | 98         | 26-35      | 64             |
| 11:00      | 4        | 0        | 3         | 25        | 44         | 23        | 10        | 1        | 0        | 0        | 0    | 0    | 0    | 0    | 110        | 26-35      | 69             |
| 12 PM      | 6        | 0        | 9         | 33        | 48         | 19        | 3         | <b>1</b> | <b>1</b> | 0        | 0    | 0    | 0    | 0    | 120        | 26-35      | 81             |
| 13:00      | 5        | 1        | 4         | 49        | 61         | 29        | 7         | 1        | 0        | 0        | 0    | 0    | 0    | 0    | 157        | 26-35      | 110            |
| 14:00      | <b>8</b> | 1        | 5         | 36        | 51         | <b>47</b> | 2         | 0        | 0        | <b>1</b> | 0    | 0    | 0    | 0    | 151        | 31-40      | 98             |
| 15:00      | 3        | <b>3</b> | 7         | 46        | 69         | 33        | <b>11</b> | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 172        | 26-35      | 115            |
| 16:00      | 5        | 2        | 6         | 48        | 89         | 28        | 7         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 185        | 26-35      | 137            |
| 17:00      | 8        | 3        | 5         | 52        | <b>90</b>  | 24        | 6         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | <b>188</b> | 26-35      | 142            |
| 18:00      | 6        | 2        | <b>13</b> | <b>72</b> | 59         | 19        | 1         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 172        | 26-35      | 131            |
| 19:00      | 2        | 2        | 13        | 52        | 38         | 7         | 1         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 115        | 26-35      | 90             |
| 20:00      | 3        | 0        | 4         | 34        | 34         | 13        | 1         | 1        | 0        | 0        | 0    | 0    | 0    | 0    | 90         | 26-35      | 68             |
| 21:00      | 2        | 1        | 3         | 26        | 19         | 4         | 1         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 56         | 26-35      | 45             |
| 22:00      | 1        | 0        | 5         | 13        | 10         | 6         | 0         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 35         | 26-35      | 23             |
| 23:00      | 0        | 0        | 1         | 5         | 11         | 3         | 2         | 0        | 0        | 0        | 0    | 0    | 0    | 0    | 22         | 26-35      | 16             |
| Total      | 67       | 23       | 106       | 628       | 881        | 403       | 84        | 10       | 1        | 1        | 0    | 0    | 0    | 0    | 2204       |            |                |
| Percent    | 3.0%     | 1.0%     | 4.8%      | 28.5%     | 40.0%      | 18.3%     | 3.8%      | 0.5%     | 0.0%     | 0.0%     | 0.0% | 0.0% | 0.0% | 0.0% |            |            |                |
| AM Peak    | 07:00    | 08:00    | 07:00     | 07:00     | 07:00      | 08:00     | 08:00     | 07:00    |          |          |      |      |      |      | 07:00      |            |                |
| Vol.       | 6        | 3        | 14        | 61        | 103        | 45        | 11        | 2        |          |          |      |      |      |      | 239        |            |                |
| PM Peak    | 14:00    | 15:00    | 18:00     | 18:00     | 17:00      | 14:00     | 15:00     | 12:00    | 12:00    | 14:00    |      |      |      |      | 17:00      |            |                |
| Vol.       | 8        | 3        | 13        | 72        | 90         | 47        | 11        | 1        | 1        | 1        |      |      |      |      | 188        |            |                |

Site Code: YUCCA 2  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

North Bound

| Start Time     | 15          | 20          | 25          | 30           | 35           | 40           | 45          | 50          | 55          | 60          | 65          | 70          | 75          | 999         | Total       | Pace Speed | Number in Pace |
|----------------|-------------|-------------|-------------|--------------|--------------|--------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|------------|----------------|
| 10/18/18       | 0           | 0           | 0           | 2            | 3            | 1            | 0           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 7           | 26-35      | 5              |
| 01:00          | 0           | 0           | 1           | 1            | 1            | 3            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 6           | 30-39      | 4              |
| 02:00          | 0           | 0           | 0           | 2            | 1            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 3           | 24-33      | 3              |
| 03:00          | 0           | 0           | 1           | 1            | 0            | 0            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 4           | 19-28      | 2              |
| 04:00          | 0           | 0           | 0           | 1            | 0            | 0            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 2           | 19-28      | 1              |
| 05:00          | 0           | 0           | 1           | 1            | 6            | 8            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 17          | 31-40      | 14             |
| 06:00          | 0           | 0           | 2           | 18           | 25           | 10           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 57          | 26-35      | 43             |
| 07:00          | <b>10</b>   | <b>4</b>    | <b>22</b>   | <b>97</b>    | <b>93</b>    | <b>10</b>    | <b>4</b>    | <b>2</b>    | 0           | 0           | 0           | 0           | 0           | 0           | <b>242</b>  | 26-35      | 190            |
| 08:00          | 8           | 3           | 6           | 33           | 47           | 15           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 114         | 26-35      | 80             |
| 09:00          | 3           | 4           | 12          | 27           | 44           | 7            | 4           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 102         | 26-35      | 71             |
| 10:00          | 2           | 2           | 4           | 25           | 34           | 12           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 81          | 26-35      | 59             |
| 11:00          | 6           | 3           | 10          | 30           | 33           | 7            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 90          | 26-35      | 63             |
| 12 PM          | 3           | 2           | 8           | 22           | 39           | 18           | <b>6</b>    | 1           | 0           | 0           | <b>1</b>    | 0           | <b>1</b>    | 0           | 101         | 26-35      | 61             |
| 13:00          | 6           | <b>3</b>    | 10          | 42           | 50           | 25           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 138         | 26-35      | 92             |
| 14:00          | 5           | 0           | 12          | 57           | 65           | 29           | 2           | <b>2</b>    | 0           | 0           | 0           | 0           | 0           | 0           | 172         | 26-35      | 122            |
| 15:00          | <b>12</b>   | 3           | <b>24</b>   | 56           | 72           | 18           | 4           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 190         | 26-35      | 128            |
| 16:00          | 6           | 2           | 17          | 56           | 69           | 16           | 4           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 170         | 26-35      | 125            |
| 17:00          | 5           | 1           | 10          | 59           | <b>89</b>    | <b>32</b>    | 6           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | <b>203</b>  | 26-35      | 148            |
| 18:00          | 7           | 2           | 18          | 60           | 59           | 10           | 4           | 0           | <b>1</b>    | 0           | 0           | 0           | 0           | 0           | 161         | 26-35      | 119            |
| 19:00          | 6           | 0           | 3           | <b>63</b>    | 48           | 9            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 131         | 26-35      | 111            |
| 20:00          | 1           | 2           | 8           | 28           | 28           | 10           | 3           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 80          | 26-35      | 56             |
| 21:00          | 1           | 1           | 3           | 19           | 15           | 6            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 47          | 26-35      | 34             |
| 22:00          | 1           | 2           | 1           | 10           | 15           | 7            | 2           | 0           | 0           | <b>1</b>    | 0           | 0           | 0           | 0           | 39          | 26-35      | 25             |
| 23:00          | 0           | 0           | 1           | 9            | 15           | 2            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 28          | 26-35      | 24             |
| <b>Total</b>   | <b>82</b>   | <b>34</b>   | <b>174</b>  | <b>719</b>   | <b>851</b>   | <b>255</b>   | <b>57</b>   | <b>9</b>    | <b>1</b>    | <b>1</b>    | <b>1</b>    | <b>0</b>    | <b>1</b>    | <b>0</b>    | <b>2185</b> |            |                |
| <b>Percent</b> | <b>3.8%</b> | <b>1.6%</b> | <b>8.0%</b> | <b>32.9%</b> | <b>38.9%</b> | <b>11.7%</b> | <b>2.6%</b> | <b>0.4%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> |             |            |                |
| AM Peak        | 07:00       | 07:00       | 07:00       | 07:00        | 07:00        | 08:00        | 07:00       | 07:00       |             |             |             |             |             |             |             | 07:00      |                |
| Vol.           | 10          | 4           | 22          | 97           | 93           | 15           | 4           | 2           |             |             |             |             |             |             | 242         |            |                |
| PM Peak        | 15:00       | 13:00       | 15:00       | 19:00        | 17:00        | 17:00        | 12:00       | 14:00       | 18:00       | 22:00       | 12:00       |             | 12:00       |             | 17:00       |            |                |
| Vol.           | 12          | 3           | 24          | 63           | 89           | 32           | 6           | 2           | 1           | 1           | 1           |             | 1           |             | 203         |            |                |



|       |                                |           |
|-------|--------------------------------|-----------|
| Stats | 10 MPH Pace Speed :            | 26-35 MPH |
|       | Number in Pace :               | 4423      |
|       | Percent in Pace :              | 69.5%     |
|       | Number of Vehicles > 30 MPH :  | 3777      |
|       | Percent of Vehicles > 30 MPH : | 59.3%     |
|       | Mean Speed(Average) :          | 31 MPH    |



Site Code: YUCCA 2

Station ID:

Latitude: 0' 0.0000 South

Latitude: 0' 0.0000 South

South Bound, North bound

| Start Time | Bikes | Cars & Trailer | 2 Axle Long | Buses | 2 Axle 6 Tire | 3 Axle Single | 4 Axle Single | <5 Axl Double | 5 Axle Double | >6 Axl Double | <6 Axl Multi | 6 Axle Multi | >6 Axl Multi | Not Classe | Total |
|------------|-------|----------------|-------------|-------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|-------|
| 10/16/18   | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 01:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 02:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 03:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 04:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 05:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 06:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 07:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 08:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 09:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 10:00      | *     | *              | *           | *     | *             | *             | *             | *             | *             | *             | *            | *            | *            | *          | *     |
| 11:00      | 0     | 145            | 38          | 1     | 4             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 189   |
| 12 PM      | 0     | 201            | 37          | 0     | 3             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 9          | 251   |
| 13:00      | 1     | 199            | 70          | 2     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 275   |
| 14:00      | 0     | 285            | 69          | 3     | 12            | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 10         | 380   |
| 15:00      | 0     | 316            | 80          | 0     | 9             | 1             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 7          | 414   |
| 16:00      | 1     | 358            | 85          | 2     | 10            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 21         | 477   |
| 17:00      | 2     | 299            | 64          | 1     | 9             | 1             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 15         | 392   |
| 18:00      | 0     | 235            | 42          | 0     | 3             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 7          | 288   |
| 19:00      | 0     | 143            | 39          | 0     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 184   |
| 20:00      | 0     | 104            | 17          | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 122   |
| 21:00      | 1     | 84             | 18          | 0     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 3          | 109   |
| 22:00      | 0     | 79             | 7           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 86    |
| 23:00      | 0     | 32             | 4           | 0     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 38    |
| Total      | 5     | 2480           | 570         | 9     | 60            | 5             | 0             | 3             | 0             | 0             | 0            | 0            | 0            | 73         | 3205  |
| Percent    | 0.2%  | 77.4%          | 17.8%       | 0.3%  | 1.9%          | 0.2%          | 0.0%          | 0.1%          | 0.0%          | 0.0%          | 0.0%         | 0.0%         | 0.0%         | 2.3%       |       |
| AM Peak    |       | 11:00          | 11:00       | 11:00 | 11:00         | 11:00         |               |               |               |               |              |              |              |            | 11:00 |
| Vol.       |       | 145            | 38          | 1     | 4             | 1             |               |               |               |               |              |              |              |            | 189   |
| PM Peak    | 17:00 | 16:00          | 16:00       | 14:00 | 14:00         | 14:00         |               | 12:00         |               |               |              |              |              | 16:00      | 16:00 |
| Vol.       | 2     | 358            | 85          | 3     | 12            | 1             |               | 1             |               |               |              |              |              | 21         | 477   |

Site Code: YUCCA 2

Station ID:

Latitude: 0' 0.0000 South

Latitude: 0' 0.0000 South

South Bound, North bound

| Start Time | Bikes | Cars & Trailer | 2 Axle Long | Buses | 2 Axle 6 Tire | 3 Axle Single | 4 Axle Single | <5 Axl Double | 5 Axle Double | >6 Axl Double | <6 Axl Multi | 6 Axle Multi | >6 Axl Multi | Not Classe | Total |
|------------|-------|----------------|-------------|-------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|-------|
| 10/17/18   | 0     | 11             | 1           | 0     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 14    |
| 01:00      | 0     | 8              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 8     |
| 02:00      | 0     | 5              | 1           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 6     |
| 03:00      | 0     | 6              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 6     |
| 04:00      | 0     | 7              | 0           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 8     |
| 05:00      | 0     | 22             | 8           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 2          | 33    |
| 06:00      | 1     | 72             | 19          | 1     | 6             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 99    |
| 07:00      | 1     | 320            | 74          | 2     | 12            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 10         | 420   |
| 08:00      | 0     | 208            | 43          | 2     | 13            | 2             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 3          | 271   |
| 09:00      | 0     | 150            | 31          | 1     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 185   |
| 10:00      | 2     | 169            | 32          | 0     | 8             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 2          | 214   |
| 11:00      | 0     | 168            | 38          | 1     | 8             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 4          | 219   |
| 12 PM      | 1     | 186            | 44          | 0     | 7             | 2             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 8          | 248   |
| 13:00      | 0     | 225            | 52          | 0     | 11            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 5          | 294   |
| 14:00      | 1     | 257            | 63          | 2     | 7             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 12         | 343   |
| 15:00      | 2     | 286            | 71          | 1     | 15            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 7          | 382   |
| 16:00      | 0     | 325            | 45          | 1     | 16            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 6          | 394   |
| 17:00      | 0     | 296            | 66          | 0     | 6             | 2             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 11         | 382   |
| 18:00      | 0     | 291            | 54          | 0     | 8             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 10         | 363   |
| 19:00      | 2     | 192            | 37          | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 232   |
| 20:00      | 0     | 151            | 27          | 0     | 7             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 2          | 187   |
| 21:00      | 0     | 112            | 20          | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 134   |
| 22:00      | 1     | 67             | 10          | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 79    |
| 23:00      | 0     | 44             | 9           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 53    |
| Total      | 11    | 3578           | 745         | 11    | 133           | 7             | 0             | 5             | 0             | 0             | 0            | 0            | 0            | 84         | 4574  |
| Percent    | 0.2%  | 78.2%          | 16.3%       | 0.2%  | 2.9%          | 0.2%          | 0.0%          | 0.1%          | 0.0%          | 0.0%          | 0.0%         | 0.0%         | 0.0%         | 1.8%       |       |
| AM Peak    | 10:00 | 07:00          | 07:00       | 07:00 | 08:00         | 08:00         |               | 07:00         |               |               |              |              |              | 07:00      | 07:00 |
| Vol.       | 2     | 320            | 74          | 2     | 13            | 2             |               | 1             |               |               |              |              |              | 10         | 420   |
| PM Peak    | 15:00 | 16:00          | 15:00       | 14:00 | 16:00         | 12:00         |               | 13:00         |               |               |              |              |              | 14:00      | 16:00 |
| Vol.       | 2     | 325            | 71          | 2     | 16            | 2             |               | 1             |               |               |              |              |              | 12         | 394   |

Site Code: YUCCA 2

Station ID:

Latitude: 0' 0.0000 South

Latitude: 0' 0.0000 South

South Bound, North bound

| Start Time   | Bikes | Cars & Trailer | 2 Axle Long | Buses | 2 Axle 6 Tire | 3 Axle Single | 4 Axle Single | <5 Axl Double | 5 Axle Double | >6 Axl Double | <6 Axl Multi | 6 Axle Multi | >6 Axl Multi | Not Classe | Total |
|--------------|-------|----------------|-------------|-------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|-------|
| 10/18/18     | 0     | 13             | 2           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 15    |
| 01:00        | 0     | 11             | 1           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 12    |
| 02:00        | 0     | 7              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 7     |
| 03:00        | 0     | 5              | 1           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 6     |
| 04:00        | 0     | 9              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 9     |
| 05:00        | 3     | 26             | 10          | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 41    |
| 06:00        | 2     | 74             | 22          | 0     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 100   |
| 07:00        | 1     | 341            | 71          | 2     | 11            | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 15         | 442   |
| 08:00        | 0     | 188            | 39          | 2     | 7             | 1             | 0             | 2             | 0             | 0             | 0            | 0            | 0            | 6          | 245   |
| 09:00        | 0     | 154            | 27          | 0     | 3             | 2             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 6          | 192   |
| 10:00        | 2     | 142            | 30          | 1     | 4             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 6          | 185   |
| 11:00        | 2     | 152            | 39          | 2     | 7             | 3             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 6          | 212   |
| 12 PM        | 3     | 170            | 32          | 2     | 6             | 0             | 0             | 0             | 1             | 0             | 0            | 0            | 0            | 4          | 218   |
| 13:00        | 2     | 208            | 32          | 2     | 7             | 0             | 0             | 2             | 0             | 0             | 0            | 0            | 0            | 8          | 261   |
| 14:00        | 1     | 286            | 54          | 2     | 7             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 10         | 360   |
| 15:00        | 1     | 312            | 69          | 0     | 11            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 15         | 409   |
| 16:00        | 2     | 296            | 85          | 1     | 12            | 2             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 4          | 403   |
| 17:00        | 1     | 345            | 63          | 1     | 8             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 5          | 424   |
| 18:00        | 0     | 251            | 65          | 0     | 6             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 7          | 330   |
| 19:00        | 0     | 234            | 29          | 0     | 2             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 5          | 271   |
| 20:00        | 2     | 146            | 17          | 0     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 169   |
| 21:00        | 1     | 108            | 6           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 116   |
| 22:00        | 1     | 81             | 11          | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 3          | 96    |
| 23:00        | 0     | 47             | 1           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 49    |
| Total        | 24    | 3606           | 706         | 15    | 98            | 11            | 0             | 8             | 1             | 0             | 0            | 0            | 0            | 103        | 4572  |
| Percent      | 0.5%  | 78.9%          | 15.4%       | 0.3%  | 2.1%          | 0.2%          | 0.0%          | 0.2%          | 0.0%          | 0.0%          | 0.0%         | 0.0%         | 0.0%         | 2.3%       |       |
| AM Peak Vol. | 05:00 | 07:00          | 07:00       | 07:00 | 07:00         | 11:00         |               | 08:00         |               |               |              |              |              | 07:00      | 07:00 |
| PM Peak Vol. | 12:00 | 17:00          | 16:00       | 12:00 | 16:00         | 16:00         |               | 13:00         | 12:00         |               |              |              |              | 15:00      | 17:00 |



Site Code: YUCCA 3  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

| Start Time   | 15-Oct-18 |          | Tue        |            | Wed        |            | Thu        |            | Fri       |            | Sat      |          | Sun      |          | Week Average |            |
|--------------|-----------|----------|------------|------------|------------|------------|------------|------------|-----------|------------|----------|----------|----------|----------|--------------|------------|
|              | South Bo  | North Bo | South Bo   | North Bo   | South Bo   | North Bo   | South Bo   | North Bo   | South Bo  | North Bo   | South Bo | North Bo | South Bo | North Bo | South Bo     | North Bo   |
| 12:00 AM     | *         | *        | *          | *          | 4          | 5          | 3          | 5          | 8         | 15         | *        | *        | *        | *        | 5            | 8          |
| 01:00        | *         | *        | *          | *          | 5          | 1          | 4          | 2          | 6         | 7          | *        | *        | *        | *        | 5            | 3          |
| 02:00        | *         | *        | *          | *          | 2          | 0          | 2          | 1          | 0         | 3          | *        | *        | *        | *        | 1            | 1          |
| 03:00        | *         | *        | *          | *          | 3          | 0          | 0          | 1          | 2         | 0          | *        | *        | *        | *        | 2            | 0          |
| 04:00        | *         | *        | *          | *          | 5          | 2          | 3          | 2          | 3         | 5          | *        | *        | *        | *        | 4            | 3          |
| 05:00        | *         | *        | *          | *          | 5          | 10         | 9          | 9          | 5         | 18         | *        | *        | *        | *        | 6            | 12         |
| 06:00        | *         | *        | *          | *          | 24         | 34         | 17         | 32         | 20        | 33         | *        | *        | *        | *        | 20           | 33         |
| 07:00        | *         | *        | *          | *          | <b>80</b>  | <b>158</b> | <b>75</b>  | <b>171</b> | <b>96</b> | <b>149</b> | *        | *        | *        | *        | <b>84</b>    | <b>159</b> |
| 08:00        | *         | *        | *          | *          | 71         | 101        | <b>79</b>  | 97         | 71        | 90         | *        | *        | *        | *        | 74           | 96         |
| 09:00        | *         | *        | *          | *          | 56         | 57         | 40         | 63         | 70        | 63         | *        | *        | *        | *        | 55           | 61         |
| 10:00        | *         | *        | *          | *          | 55         | 61         | 64         | 58         | *         | *          | *        | *        | *        | *        | 60           | 60         |
| 11:00        | *         | *        | <b>71</b>  | <b>67</b>  | 55         | 56         | 59         | 62         | *         | *          | *        | *        | *        | *        | 62           | 62         |
| 12:00 PM     | *         | *        | 73         | 81         | 59         | 74         | 68         | 74         | *         | *          | *        | *        | *        | *        | 67           | 76         |
| 01:00        | *         | *        | 65         | 75         | 81         | 87         | 78         | 72         | *         | *          | *        | *        | *        | *        | 75           | 78         |
| 02:00        | *         | *        | <b>113</b> | <b>128</b> | 100        | <b>126</b> | 96         | 117        | *         | *          | *        | *        | *        | *        | 103          | <b>124</b> |
| 03:00        | *         | *        | <b>150</b> | 121        | <b>144</b> | 111        | <b>125</b> | <b>122</b> | *         | *          | *        | *        | *        | *        | <b>140</b>   | <b>118</b> |
| 04:00        | *         | *        | 106        | 121        | 112        | 118        | 116        | 99         | *         | *          | *        | *        | *        | *        | 111          | 113        |
| 05:00        | *         | *        | 94         | 115        | 106        | 109        | 122        | 119        | *         | *          | *        | *        | *        | *        | 107          | 114        |
| 06:00        | *         | *        | 76         | 75         | 99         | 116        | 90         | 104        | *         | *          | *        | *        | *        | *        | 88           | 98         |
| 07:00        | *         | *        | 46         | 55         | 61         | 63         | 89         | 83         | *         | *          | *        | *        | *        | *        | 65           | 67         |
| 08:00        | *         | *        | 21         | 31         | 56         | 63         | 50         | 45         | *         | *          | *        | *        | *        | *        | 42           | 46         |
| 09:00        | *         | *        | 30         | 32         | 43         | 22         | 40         | 26         | *         | *          | *        | *        | *        | *        | 38           | 27         |
| 10:00        | *         | *        | 21         | 21         | 21         | 21         | 28         | 17         | *         | *          | *        | *        | *        | *        | 23           | 20         |
| 11:00        | *         | *        | 6          | 8          | 9          | 7          | 14         | 22         | *         | *          | *        | *        | *        | *        | 10           | 12         |
| Lane Day     | 0         | 0        | 872        | 930        | 1256       | 1402       | 1271       | 1403       | 281       | 383        | 0        | 0        | 0        | 0        | 1247         | 1391       |
| AM Peak Vol. | -         | -        | 11:00      | 11:00      | 07:00      | 07:00      | 08:00      | 07:00      | 07:00     | 07:00      | -        | -        | -        | -        | 07:00        | 07:00      |
| PM Peak Vol. | -         | -        | 15:00      | 14:00      | 15:00      | 14:00      | 15:00      | 15:00      | -         | -          | -        | -        | -        | -        | 15:00        | 14:00      |

|             |           |            |      |      |     |   |   |      |
|-------------|-----------|------------|------|------|-----|---|---|------|
| Comb. Total | 0         | 1802       | 2658 | 2674 | 664 | 0 | 0 | 2638 |
| ADT         | ADT 2,639 | AADT 2,639 |      |      |     |   |   |      |

Site Code: YUCCA 3  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound

| Start Time | 15        | 20        | 25        | 30        | 35        | 40       | 45       | 50       | 55       | 60       | 65       | 70       | 75       | 999      | Total      | Pace Speed | Number in Pace |
|------------|-----------|-----------|-----------|-----------|-----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|------------|------------|----------------|
| 10/16/18   | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 01:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 02:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 03:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 04:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 05:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 06:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 07:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 08:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 09:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 10:00      | *         | *         | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *          | *          | *              |
| 11:00      | <b>15</b> | <b>6</b>  | <b>19</b> | <b>27</b> | <b>4</b>  | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>71</b>  | 21-30      | 46             |
| 12 PM      | 2         | 7         | 19        | 33        | 10        | 2        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 73         | 21-30      | 52             |
| 13:00      | 1         | 5         | 20        | 32        | 4         | 3        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 65         | 21-30      | 52             |
| 14:00      | <b>6</b>  | 10        | 49        | 36        | 10        | 2        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 113        | 21-30      | 85             |
| 15:00      | 3         | 2         | <b>65</b> | <b>70</b> | 10        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | <b>150</b> | 21-30      | 135            |
| 16:00      | 6         | <b>12</b> | 37        | 43        | 8         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 106        | 21-30      | 80             |
| 17:00      | 3         | 4         | 29        | 46        | 11        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 94         | 21-30      | 75             |
| 18:00      | 6         | 2         | 20        | 33        | <b>15</b> | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 76         | 21-30      | 53             |
| 19:00      | 1         | 1         | 21        | 18        | 5         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 46         | 21-30      | 39             |
| 20:00      | 1         | 2         | 7         | 8         | 2         | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 21         | 21-30      | 15             |
| 21:00      | 1         | 0         | 8         | 13        | 6         | 2        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 30         | 21-30      | 21             |
| 22:00      | 0         | 6         | 3         | 7         | 5         | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 21         | 26-35      | 12             |
| 23:00      | 0         | 0         | 1         | 2         | 1         | 2        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 6          | 20-29      | 3              |
| Total      | 45        | 57        | 298       | 368       | 91        | 13       | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 872        |            |                |
| Percent    | 5.2%      | 6.5%      | 34.2%     | 42.2%     | 10.4%     | 1.5%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     |            |            |                |
| AM Peak    | 11:00     | 11:00     | 11:00     | 11:00     | 11:00     |          |          |          |          |          |          |          |          |          |            | 11:00      |                |
| Vol.       | 15        | 6         | 19        | 27        | 4         |          |          |          |          |          |          |          |          |          | 71         |            |                |
| PM Peak    | 14:00     | 16:00     | 15:00     | 15:00     | 18:00     | 13:00    |          |          |          |          |          |          |          |          |            | 15:00      |                |
| Vol.       | 6         | 12        | 65        | 70        | 15        | 3        |          |          |          |          |          |          |          |          | 150        |            |                |

Site Code: YUCCA 3  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

South Bound

| Start Time     | 15          | 20          | 25           | 30           | 35           | 40          | 45          | 50          | 55          | 60          | 65          | 70          | 75          | 999         | Total       | Pace Speed | Number in Pace |
|----------------|-------------|-------------|--------------|--------------|--------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|------------|----------------|
| 10/17/18       | 2           | 1           | 1            | 0            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 4           | 9-18       | 2              |
| 01:00          | 0           | 0           | 2            | 2            | 1            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 5           | 21-30      | 4              |
| 02:00          | 1           | 0           | 0            | 1            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 2           | *          | 1              |
| 03:00          | 0           | 0           | 2            | 1            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 3           | 19-28      | 3              |
| 04:00          | 0           | 1           | 1            | 2            | 0            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 5           | 21-30      | 3              |
| 05:00          | 0           | 0           | 1            | 4            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 5           | 21-30      | 5              |
| 06:00          | 2           | 3           | 5            | 4            | 9            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 24          | 26-35      | 13             |
| 07:00          | 2           | 4           | 18           | 32           | 21           | 3           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 80          | 26-35      | 53             |
| 08:00          | 5           | 6           | 26           | 25           | 7            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 71          | 21-30      | 51             |
| 09:00          | 0           | 10          | 17           | 24           | 4            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 56          | 21-30      | 41             |
| 10:00          | 1           | 8           | 18           | 22           | 6            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 55          | 21-30      | 40             |
| 11:00          | 1           | 5           | 17           | 28           | 3            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 55          | 21-30      | 45             |
| 12 PM          | 0           | 4           | 22           | 27           | 5            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 59          | 21-30      | 49             |
| 13:00          | 2           | 6           | 21           | 36           | 15           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 1           | 81          | 21-30      | 57             |
| 14:00          | 2           | 1           | 21           | 50           | 26           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 100         | 26-35      | 76             |
| 15:00          | 4           | 8           | 46           | 68           | 16           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 144         | 21-30      | 114            |
| 16:00          | 5           | 3           | 42           | 52           | 9            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 112         | 21-30      | 94             |
| 17:00          | 1           | 3           | 38           | 46           | 17           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 106         | 21-30      | 84             |
| 18:00          | 2           | 8           | 24           | 58           | 7            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 99          | 21-30      | 82             |
| 19:00          | 1           | 7           | 23           | 25           | 3            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 61          | 21-30      | 48             |
| 20:00          | 2           | 5           | 17           | 27           | 5            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 56          | 21-30      | 44             |
| 21:00          | 0           | 1           | 19           | 21           | 2            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 43          | 21-30      | 40             |
| 22:00          | 0           | 1           | 5            | 9            | 6            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 21          | 24-33      | 15             |
| 23:00          | 1           | 0           | 2            | 4            | 1            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 9           | 21-30      | 6              |
| <b>Total</b>   | <b>34</b>   | <b>85</b>   | <b>388</b>   | <b>568</b>   | <b>163</b>   | <b>17</b>   | <b>0</b>    | <b>0</b>    | <b>0</b>    | <b>0</b>    | <b>0</b>    | <b>0</b>    | <b>0</b>    | <b>1</b>    | <b>1256</b> |            |                |
| <b>Percent</b> | <b>2.7%</b> | <b>6.8%</b> | <b>30.9%</b> | <b>45.2%</b> | <b>13.0%</b> | <b>1.4%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.1%</b> |             |            |                |
| AM Peak        | 08:00       | 09:00       | 08:00        | 07:00        | 07:00        | 07:00       |             |             |             |             |             |             |             |             |             | 07:00      |                |
| Vol.           | 5           | 10          | 26           | 32           | 21           | 3           |             |             |             |             |             |             |             |             |             | 80         |                |
| PM Peak        | 16:00       | 15:00       | 15:00        | 15:00        | 14:00        | 15:00       |             |             |             |             |             |             |             | 13:00       | 15:00       |            |                |
| Vol.           | 5           | 8           | 46           | 68           | 26           | 2           |             |             |             |             |             |             |             | 1           | 144         |            |                |







|       |                                |           |
|-------|--------------------------------|-----------|
| Stats | 10 MPH Pace Speed :            | 21-30 MPH |
|       | Number in Pace :               | 2802      |
|       | Percent in Pace :              | 76.1%     |
|       | Number of Vehicles > 30 MPH :  | 474       |
|       | Percent of Vehicles > 30 MPH : | 12.9%     |
|       | Mean Speed(Average) :          | 26 MPH    |

Site Code: YUCCA 3  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

North Bound

| Start Time | 15       | 20       | 25        | 30        | 35        | 40       | 45       | 50       | 55       | 60       | 65       | 70       | 75       | 999      | Total     | Pace Speed | Number in Pace |
|------------|----------|----------|-----------|-----------|-----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------|------------|----------------|
| 10/16/18   | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 01:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 02:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 03:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 04:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 05:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 06:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 07:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 08:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 09:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 10:00      | *        | *        | *         | *         | *         | *        | *        | *        | *        | *        | *        | *        | *        | *        | *         | *          | *              |
| 11:00      | <b>5</b> | <b>1</b> | <b>13</b> | <b>24</b> | <b>14</b> | <b>7</b> | <b>1</b> | <b>2</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>0</b> | <b>67</b> | 24-33      | 38             |
| 12 PM      | 1        | 3        | 9         | 25        | 19        | 17       | 5        | 1        | 1        | 0        | 0        | 0        | 0        | 0        | 81        | 26-35      | 44             |
| 13:00      | 1        | 3        | 11        | 18        | 23        | 13       | 5        | 0        | 1        | 0        | 0        | 0        | 0        | 0        | 75        | 26-35      | 41             |
| 14:00      | 2        | 5        | 11        | 38        | 46        | 23       | 3        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 128       | 26-35      | 84             |
| 15:00      | 2        | 3        | 12        | 37        | 49        | 15       | 3        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 121       | 26-35      | 86             |
| 16:00      | 5        | 3        | 21        | 25        | 42        | 21       | 3        | 0        | 1        | 0        | 0        | 0        | 0        | 0        | 121       | 26-35      | 67             |
| 17:00      | 2        | 1        | 12        | 36        | 44        | 17       | 1        | 1        | 1        | 0        | 0        | 0        | 0        | 0        | 115       | 26-35      | 80             |
| 18:00      | 2        | 4        | 10        | 16        | 27        | 12       | 3        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 75        | 26-35      | 43             |
| 19:00      | 1        | 3        | 7         | 23        | 14        | 6        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 55        | 26-35      | 37             |
| 20:00      | 1        | 1        | 4         | 10        | 7         | 6        | 2        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 31        | 26-35      | 17             |
| 21:00      | 0        | 3        | 6         | 12        | 8         | 2        | 1        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 32        | 26-35      | 20             |
| 22:00      | 1        | 2        | 1         | 7         | 7         | 0        | 0        | 1        | 0        | 1        | 0        | 1        | 0        | 0        | 21        | 26-35      | 14             |
| 23:00      | 0        | 0        | 0         | 4         | 0         | 4        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 8         | 21-30      | 4              |
| Total      | 23       | 32       | 117       | 275       | 300       | 143      | 28       | 6        | 4        | 1        | 0        | 1        | 0        | 0        | 930       |            |                |
| Percent    | 2.5%     | 3.4%     | 12.6%     | 29.6%     | 32.3%     | 15.4%    | 3.0%     | 0.6%     | 0.4%     | 0.1%     | 0.0%     | 0.1%     | 0.0%     | 0.0%     |           |            |                |
| AM Peak    | 11:00    | 11:00    | 11:00     | 11:00     | 11:00     | 11:00    | 11:00    | 11:00    |          |          |          |          |          |          | 11:00     |            |                |
| Vol.       | 5        | 1        | 13        | 24        | 14        | 7        | 1        | 2        |          |          |          |          |          |          | 67        |            |                |
| PM Peak    | 16:00    | 14:00    | 16:00     | 14:00     | 15:00     | 14:00    | 12:00    | 12:00    | 12:00    | 22:00    |          | 22:00    |          |          | 14:00     |            |                |
| Vol.       | 5        | 5        | 21        | 38        | 49        | 23       | 5        | 1        | 1        | 1        |          | 1        |          |          | 128       |            |                |

Site Code: YUCCA 3  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

North Bound

| Start Time | 15       | 20       | 25        | 30        | 35        | 40        | 45        | 50       | 55       | 60   | 65   | 70   | 75   | 999  | Total      | Pace Speed | Number in Pace |
|------------|----------|----------|-----------|-----------|-----------|-----------|-----------|----------|----------|------|------|------|------|------|------------|------------|----------------|
| 10/17/18   | 1        | 0        | 1         | 0         | 1         | 2         | 0         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 5          | 30-39      | 3              |
| 01:00      | 0        | 0        | 1         | 0         | 0         | 0         | 0         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 1          | 14-23      | 1              |
| 02:00      | 0        | 0        | 0         | 0         | 0         | 0         | 0         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 0          | *          | *              |
| 03:00      | 0        | 0        | 0         | 0         | 0         | 0         | 0         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 0          | *          | *              |
| 04:00      | 0        | 0        | 0         | 2         | 0         | 0         | 0         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 2          | 20-29      | 2              |
| 05:00      | 0        | 0        | 0         | 1         | 4         | 4         | 1         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 10         | 31-40      | 8              |
| 06:00      | 2        | 1        | 1         | 8         | 11        | 8         | 3         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 34         | 31-40      | 19             |
| 07:00      | 3        | 2        | 4         | <b>40</b> | <b>74</b> | <b>23</b> | <b>11</b> | 1        | 0        | 0    | 0    | 0    | 0    | 0    | <b>158</b> | 26-35      | 114            |
| 08:00      | <b>4</b> | 2        | 8         | 17        | 36        | <b>27</b> | 7         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 101        | 31-40      | 63             |
| 09:00      | 1        | <b>4</b> | 6         | 13        | 22        | 8         | 3         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 57         | 26-35      | 35             |
| 10:00      | 0        | 2        | <b>10</b> | 14        | 22        | 7         | 3         | <b>3</b> | 0        | 0    | 0    | 0    | 0    | 0    | 61         | 26-35      | 36             |
| 11:00      | 1        | 1        | 10        | 16        | 19        | 8         | 1         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 56         | 26-35      | 35             |
| 12 PM      | 0        | 0        | 11        | 22        | 29        | 8         | 2         | 1        | <b>1</b> | 0    | 0    | 0    | 0    | 0    | 74         | 26-35      | 51             |
| 13:00      | 1        | 1        | 13        | 18        | 38        | 12        | 4         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 87         | 26-35      | 56             |
| 14:00      | 2        | <b>3</b> | 7         | 26        | <b>47</b> | <b>30</b> | <b>9</b>  | 2        | 0        | 0    | 0    | 0    | 0    | 0    | <b>126</b> | 31-40      | 77             |
| 15:00      | 1        | 2        | 9         | 35        | 42        | 13        | 6         | <b>3</b> | 0        | 0    | 0    | 0    | 0    | 0    | 111        | 26-35      | 77             |
| 16:00      | 4        | 0        | 16        | 32        | 43        | 18        | 3         | 1        | 1        | 0    | 0    | 0    | 0    | 0    | 118        | 26-35      | 75             |
| 17:00      | 0        | 3        | 18        | 30        | 39        | 18        | 1         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 109        | 26-35      | 69             |
| 18:00      | <b>6</b> | 3        | <b>20</b> | <b>42</b> | 39        | 4         | 2         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 116        | 26-35      | 81             |
| 19:00      | 2        | 3        | 11        | 18        | 24        | 5         | 0         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 63         | 26-35      | 42             |
| 20:00      | 3        | 0        | 10        | 23        | 17        | 8         | 1         | 1        | 0        | 0    | 0    | 0    | 0    | 0    | 63         | 26-35      | 40             |
| 21:00      | 0        | 0        | 3         | 9         | 6         | 3         | 1         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 22         | 26-35      | 15             |
| 22:00      | 0        | 2        | 1         | 5         | 9         | 4         | 0         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 21         | 26-35      | 14             |
| 23:00      | 0        | 0        | 2         | 2         | 2         | 1         | 0         | 0        | 0        | 0    | 0    | 0    | 0    | 0    | 7          | 26-35      | 4              |
| Total      | 31       | 29       | 162       | 373       | 524       | 211       | 58        | 12       | 2        | 0    | 0    | 0    | 0    | 0    | 1402       |            |                |
| Percent    | 2.2%     | 2.1%     | 11.6%     | 26.6%     | 37.4%     | 15.0%     | 4.1%      | 0.9%     | 0.1%     | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% |            |            |                |
| AM Peak    | 08:00    | 09:00    | 10:00     | 07:00     | 07:00     | 08:00     | 07:00     | 10:00    |          |      |      |      |      |      | 07:00      |            |                |
| Vol.       | 4        | 4        | 10        | 40        | 74        | 27        | 11        | 3        |          |      |      |      |      |      | 158        |            |                |
| PM Peak    | 18:00    | 14:00    | 18:00     | 18:00     | 14:00     | 14:00     | 14:00     | 15:00    | 12:00    |      |      |      |      |      | 14:00      |            |                |
| Vol.       | 6        | 3        | 20        | 42        | 47        | 30        | 9         | 3        | 1        |      |      |      |      |      | 126        |            |                |

Site Code: YUCCA 3  
 Station ID:

Latitude: 0' 0.0000 South  
 Latitude: 0' 0.0000 South

North Bound

| Start Time     | 15          | 20          | 25           | 30           | 35           | 40           | 45          | 50          | 55          | 60          | 65          | 70          | 75          | 999         | Total       | Pace Speed | Number in Pace |
|----------------|-------------|-------------|--------------|--------------|--------------|--------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|------------|----------------|
| 10/18/18       | 0           | 0           | 1            | 2            | 2            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 5           | 24-33      | 4              |
| 01:00          | 0           | 0           | 0            | 0            | 2            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 2           | 25-34      | 2              |
| 02:00          | 0           | 0           | 0            | 1            | 0            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 1           | 19-28      | 1              |
| 03:00          | 0           | 0           | 0            | 1            | 0            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 1           | 19-28      | 1              |
| 04:00          | 0           | 0           | 1            | 0            | 1            | 0            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 2           | 14-23      | 1              |
| 05:00          | 0           | 0           | 0            | 0            | 4            | 3            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 9           | 31-40      | 7              |
| 06:00          | 0           | 1           | 1            | 7            | 13           | 8            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 32          | 29-38      | 21             |
| 07:00          | 3           | 0           | 10           | <b>50</b>    | <b>77</b>    | <b>24</b>    | <b>6</b>    | 0           | <b>1</b>    | 0           | 0           | 0           | 0           | 0           | <b>171</b>  | 26-35      | 127            |
| 08:00          | 3           | 2           | <b>20</b>    | 19           | 37           | 14           | 1           | 0           | 1           | 0           | 0           | 0           | 0           | 0           | 97          | 26-35      | 56             |
| 09:00          | <b>5</b>    | 1           | 7            | 13           | 28           | 9            | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 63          | 26-35      | 41             |
| 10:00          | 2           | 4           | 8            | 18           | 15           | 9            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 58          | 26-35      | 33             |
| 11:00          | 3           | <b>5</b>    | 15           | 13           | 17           | 8            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 62          | 25-34      | 30             |
| 12 PM          | <b>6</b>    | 4           | 12           | 21           | 20           | 5            | 2           | <b>3</b>    | 0           | 0           | 0           | <b>1</b>    | 0           | 0           | 74          | 26-35      | 41             |
| 13:00          | 3           | 3           | 8            | 23           | 20           | 14           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 72          | 26-35      | 43             |
| 14:00          | 5           | 5           | 19           | 32           | 34           | <b>21</b>    | 0           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 117         | 26-35      | 66             |
| 15:00          | 2           | <b>6</b>    | 10           | <b>45</b>    | <b>50</b>    | 7            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | <b>122</b>  | 26-35      | 95             |
| 16:00          | 1           | 3           | 8            | 30           | 38           | 17           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 99          | 26-35      | 68             |
| 17:00          | 1           | 1           | 15           | 35           | 45           | 18           | 4           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 119         | 26-35      | 80             |
| 18:00          | 6           | 2           | <b>20</b>    | 36           | 27           | 11           | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 104         | 26-35      | 63             |
| 19:00          | 0           | 1           | 8            | 25           | 28           | 11           | <b>8</b>    | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 83          | 26-35      | 53             |
| 20:00          | 1           | 0           | 2            | 17           | 15           | 7            | 2           | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 45          | 26-35      | 32             |
| 21:00          | 0           | 0           | 8            | 9            | 7            | 1            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 26          | 21-30      | 17             |
| 22:00          | 0           | 1           | 0            | 7            | 5            | 2            | 2           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 17          | 26-35      | 12             |
| 23:00          | 0           | 0           | 1            | 7            | 10           | 3            | 1           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 22          | 26-35      | 17             |
| <b>Total</b>   | <b>41</b>   | <b>39</b>   | <b>174</b>   | <b>411</b>   | <b>495</b>   | <b>192</b>   | <b>41</b>   | <b>7</b>    | <b>2</b>    | <b>0</b>    | <b>0</b>    | <b>1</b>    | <b>0</b>    | <b>0</b>    | <b>1403</b> |            |                |
| <b>Percent</b> | <b>2.9%</b> | <b>2.8%</b> | <b>12.4%</b> | <b>29.3%</b> | <b>35.3%</b> | <b>13.7%</b> | <b>2.9%</b> | <b>0.5%</b> | <b>0.1%</b> | <b>0.0%</b> | <b>0.0%</b> | <b>0.1%</b> | <b>0.0%</b> | <b>0.0%</b> |             |            |                |
| AM Peak        | 09:00       | 11:00       | 08:00        | 07:00        | 07:00        | 07:00        | 07:00       |             | 07:00       |             |             |             |             |             |             |            | 07:00          |
| AM Peak Vol.   | 5           | 5           | 20           | 50           | 77           | 24           | 6           |             | 1           |             |             |             |             |             |             |            | 171            |
| PM Peak        | 12:00       | 15:00       | 18:00        | 15:00        | 15:00        | 14:00        | 19:00       | 12:00       |             |             |             | 12:00       |             |             |             |            | 15:00          |
| PM Peak Vol.   | 6           | 6           | 20           | 45           | 50           | 21           | 8           | 3           |             |             |             | 1           |             |             |             |            | 122            |



|       |                                |           |
|-------|--------------------------------|-----------|
| Stats | 10 MPH Pace Speed :            | 26-35 MPH |
|       | Number in Pace :               | 2618      |
|       | Percent in Pace :              | 63.6%     |
|       | Number of Vehicles > 30 MPH :  | 2265      |
|       | Percent of Vehicles > 30 MPH : | 55.0%     |
|       | Mean Speed(Average) :          | 31 MPH    |





Site Code: YUCCA 3

Station ID:

Latitude: 0' 0.0000 South

Latitude: 0' 0.0000 South

South Bound, North Bound

| Start Time | Bikes | Cars & Trailer | 2 Axle Long | Buses | 2 Axle 6 Tire | 3 Axle Single | 4 Axle Single | <5 Axl Double | 5 Axle Double | >6 Axl Double | <6 Axl Multi | 6 Axle Multi | >6 Axl Multi | Not Classe | Total |
|------------|-------|----------------|-------------|-------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|-------|
| 10/17/18   | 2     | 6              | 1           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 9     |
| 01:00      | 0     | 6              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 6     |
| 02:00      | 0     | 1              | 1           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 2     |
| 03:00      | 0     | 3              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 3     |
| 04:00      | 0     | 5              | 1           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 7     |
| 05:00      | 0     | 10             | 4           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 15    |
| 06:00      | 0     | 30             | 18          | 1     | 8             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 58    |
| 07:00      | 1     | 148            | 65          | 1     | 17            | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 5          | 238   |
| 08:00      | 2     | 120            | 33          | 1     | 10            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 6          | 172   |
| 09:00      | 0     | 80             | 28          | 1     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 113   |
| 10:00      | 1     | 89             | 20          | 0     | 6             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 116   |
| 11:00      | 0     | 74             | 29          | 1     | 6             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 1          | 111   |
| 12 PM      | 0     | 91             | 35          | 0     | 6             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 0          | 133   |
| 13:00      | 0     | 112            | 44          | 0     | 8             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 3          | 168   |
| 14:00      | 0     | 157            | 50          | 1     | 14            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 4          | 226   |
| 15:00      | 1     | 184            | 47          | 1     | 18            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 4          | 255   |
| 16:00      | 2     | 165            | 48          | 1     | 8             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 5          | 230   |
| 17:00      | 0     | 151            | 52          | 0     | 11            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 0          | 215   |
| 18:00      | 0     | 147            | 55          | 0     | 6             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 6          | 215   |
| 19:00      | 0     | 91             | 28          | 0     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 2          | 124   |
| 20:00      | 0     | 88             | 24          | 0     | 4             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 3          | 119   |
| 21:00      | 0     | 54             | 10          | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 65    |
| 22:00      | 2     | 33             | 6           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 42    |
| 23:00      | 0     | 11             | 3           | 0     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 16    |
| Total      | 11    | 1856           | 602         | 8     | 134           | 2             | 0             | 4             | 0             | 0             | 0            | 0            | 0            | 41         | 2658  |
| Percent    | 0.4%  | 69.8%          | 22.6%       | 0.3%  | 5.0%          | 0.1%          | 0.0%          | 0.2%          | 0.0%          | 0.0%          | 0.0%         | 0.0%         | 0.0%         | 1.5%       |       |
| AM Peak    | 00:00 | 07:00          | 07:00       | 06:00 | 07:00         | 07:00         |               |               |               |               |              |              |              | 08:00      | 07:00 |
| Vol.       | 2     | 148            | 65          | 1     | 17            | 1             |               |               |               |               |              |              |              | 6          | 238   |
| PM Peak    | 16:00 | 15:00          | 18:00       | 14:00 | 15:00         | 18:00         |               | 12:00         |               |               |              |              |              | 18:00      | 15:00 |
| Vol.       | 2     | 184            | 55          | 1     | 18            | 1             |               | 1             |               |               |              |              |              | 6          | 255   |

Site Code: YUCCA 3

Station ID:

Latitude: 0' 0.0000 South

Latitude: 0' 0.0000 South

South Bound, North Bound

| Start Time   | Bikes | Cars & Trailer | 2 Axle Long | Buses | 2 Axle 6 Tire | 3 Axle Single | 4 Axle Single | <5 Axl Double | 5 Axle Double | >6 Axl Double | <6 Axl Multi | 6 Axle Multi | >6 Axl Multi | Not Classe | Total |
|--------------|-------|----------------|-------------|-------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|-------|
| 10/18/18     | 0     | 5              | 3           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 8     |
| 01:00        | 0     | 6              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 6     |
| 02:00        | 0     | 3              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 3     |
| 03:00        | 0     | 1              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 1     |
| 04:00        | 0     | 5              | 0           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 5     |
| 05:00        | 0     | 13             | 4           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 18    |
| 06:00        | 1     | 31             | 12          | 0     | 5             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 49    |
| 07:00        | 1     | 162            | 64          | 1     | 12            | 0             | 1             | 1             | 0             | 0             | 0            | 0            | 0            | 4          | 246   |
| 08:00        | 1     | 128            | 35          | 2     | 7             | 1             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 1          | 176   |
| 09:00        | 1     | 71             | 20          | 0     | 6             | 3             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 2          | 103   |
| 10:00        | 0     | 97             | 19          | 0     | 6             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 122   |
| 11:00        | 0     | 78             | 31          | 0     | 6             | 1             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 4          | 121   |
| 12 PM        | 3     | 102            | 20          | 1     | 3             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 12         | 142   |
| 13:00        | 1     | 115            | 24          | 0     | 8             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 1          | 150   |
| 14:00        | 2     | 155            | 36          | 1     | 10            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 8          | 213   |
| 15:00        | 1     | 171            | 56          | 0     | 16            | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 3          | 247   |
| 16:00        | 2     | 153            | 46          | 0     | 10            | 0             | 0             | 2             | 0             | 0             | 0            | 0            | 0            | 2          | 215   |
| 17:00        | 0     | 171            | 57          | 0     | 11            | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 1          | 241   |
| 18:00        | 1     | 130            | 51          | 0     | 6             | 1             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 5          | 194   |
| 19:00        | 0     | 122            | 40          | 0     | 7             | 0             | 0             | 1             | 0             | 0             | 0            | 0            | 0            | 2          | 172   |
| 20:00        | 1     | 69             | 20          | 0     | 3             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 2          | 95    |
| 21:00        | 0     | 57             | 8           | 0     | 1             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 66    |
| 22:00        | 0     | 39             | 6           | 0     | 0             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 45    |
| 23:00        | 0     | 32             | 2           | 0     | 2             | 0             | 0             | 0             | 0             | 0             | 0            | 0            | 0            | 0          | 36    |
| Total        | 15    | 1916           | 554         | 5     | 120           | 6             | 1             | 10            | 0             | 0             | 0            | 0            | 0            | 47         | 2674  |
| Percent      | 0.6%  | 71.7%          | 20.7%       | 0.2%  | 4.5%          | 0.2%          | 0.0%          | 0.4%          | 0.0%          | 0.0%          | 0.0%         | 0.0%         | 0.0%         | 1.8%       |       |
| AM Peak Vol. | 06:00 | 07:00          | 07:00       | 08:00 | 07:00         | 09:00         | 07:00         | 07:00         |               |               |              |              |              | 07:00      | 07:00 |
| PM Peak Vol. | 12:00 | 15:00          | 17:00       | 12:00 | 15:00         | 18:00         |               | 16:00         |               |               |              |              |              | 12:00      | 15:00 |



## Appendix B – Crash Reports

**Task 11.1: Yucca Drive (Cloudcroft Road to Central Ave)**

| Case No.  | Date       | Description of crash                                                                                                                                                                                                                                                                                                | Injury?   | Apparent Contributing Factors                                     | Roadway Design Contributing | Discussion                                                              |
|-----------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------|
| 140088708 | 9/26/2014  | Vehicle SB on Yucca sideswiped by vehicle exiting Church's Chicken parking lot onto Yucca.                                                                                                                                                                                                                          | Noninjury | Driver inattention                                                | Not likely                  | Within study area but not within three-year analysis period             |
| 140113849 | 12/14/2014 | Three-vehicle, chain-reaction rear-end crash. Vehicles 1 and 2 were waiting at stop light, SB on Yucca, when Vehicle 2 was rear-ended by Vehicle 3, pushing Vehicle 2 into Vehicle 1.                                                                                                                               | Injury    | Driver inattention                                                | Not likely                  | Within study area but not within three-year analysis period             |
| 170016165 | 2/16/2017  | Vehicle NB on Yucca was pulling onto shoulder, and was hit from behind by second NB vehicle (vehicle did not slow down).                                                                                                                                                                                            | Injurt    | Driver inattention, excessive speed, other improper driving       | Not likely                  |                                                                         |
| 160064325 | 7/13/2016  | SB vehicle attempted to start a U-turn or pulled out of a driveway just south of Avalon, without realizing NB motorcycle was approaching. Motorcycle hit right side of vehicle.                                                                                                                                     | Injury    | Driver inattention                                                | Not likely                  |                                                                         |
| 160092931 | 10/2/2016  | Crash occurred in parking lot at Pat Hurley Park. Vehicle 2 backed out of a parking space into Vehicle 1.                                                                                                                                                                                                           | Noninjury | Driver inattention                                                | Not likely                  | Outside of study area. Accident occurred at Pat Hurley Park parking lot |
| 160108933 | 11/17/2016 | Vehicle NB on Yucca was hit by vehicle traveling EB on Avalon, which did not yield at the stop sign.                                                                                                                                                                                                                | Noninjury | Driver inattention; excessive speed; failed to yield right-of-way | Not likely                  |                                                                         |
| 170020959 | 3/2/2017   | Vehicle WB on Avalon Rd failed to stop at stop sign and collided with vehicle traveling NB on Yucca Dr.                                                                                                                                                                                                             | Noninjury | Excessive speed; inadequate brakes, other mechanical failure      | Not likely                  |                                                                         |
| 170124424 | 12/22/2017 | Three-vehicle crash -- vehicle failed to yield at red left-turn signal, attempting to turn left from Central onto NB Yucca Dr. The left-turning vehicle was hit by another vehicle traveling WB on Central, which forced the first vehicle into a third SB vehicle waiting to turn left onto Central from SB Yucca. | Noninjury | Disregarded traffic signal                                        | Not likely                  | Outside of study area. Accident occurred on Central Avenue.             |
| 180020389 | 2/28/2018  | Vehicle attempting to turn left from Central onto Yucca to go SB was hit by an vehicle EB on Central Ave that disregarded its red signal.                                                                                                                                                                           | Noninjury | Disregarded traffic signal                                        | Not likely                  | Outside of study area. Accident occurred on Central Avenue.             |
|           |            |                                                                                                                                                                                                                                                                                                                     |           |                                                                   |                             |                                                                         |
|           |            |                                                                                                                                                                                                                                                                                                                     |           |                                                                   |                             |                                                                         |

ALBUQUERQUE POLICE DEPT  
 REPORTING DEPARTMENT

|                                     |                                                        |                                                  |                                                           |                                             |                           |                                |          |                            |  |
|-------------------------------------|--------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------|---------------------------------------------|---------------------------|--------------------------------|----------|----------------------------|--|
| Private Property?<br><b>NO</b>      | Fatal Injury<br><input type="checkbox"/>               | Property Damage Only<br><input type="checkbox"/> | Under \$500<br><input checked="" type="checkbox"/>        | \$500 or More<br><input type="checkbox"/>   | Hit and Run?<br><b>NO</b> | Case Number: <b>14-0088708</b> | NMDOT:   | CAD Num: <b>P142700351</b> |  |
| Crash Date<br><b>09/26/2014</b>     | Military Time<br><b>14:25</b>                          | City Occurred In<br><b>ALBUQUERQUE</b>           | County<br><b>BERNALILLO</b>                               |                                             |                           | Tribal Land?<br><b>NO</b>      |          |                            |  |
| Day of Week<br><b>FRIDAY</b>        | Occurred On: (Route No. or Name)<br><b>YUCCA DR NW</b> |                                                  |                                                           | At Intersection With:<br><b>CENTRAL AVE</b> |                           |                                | Milepost |                            |  |
| Other Location                      | Measurement                                            | Direction                                        | Permanent Landmark - County Line - Intersection           |                                             |                           |                                | Lat:     | Long:                      |  |
| Crash Occurred<br><b>ON ROADWAY</b> | Crash Classification<br><b>OTHER VEHICLE</b>           |                                                  | Analysis Code<br><b>03 - ONE LEFT TURN/ENTER AT ANGLE</b> |                                             |                           |                                |          |                            |  |

|                                                                                  |                                      |                                  |                                                          |                         |                        |
|----------------------------------------------------------------------------------|--------------------------------------|----------------------------------|----------------------------------------------------------|-------------------------|------------------------|
| VEHICLE NO.<br><b>HEADED 01</b>                                                  | Unit Direction<br><b>SOUTH</b>       | On:<br><b>YUCCA DR NW</b>        | Left the Scene of the Crash?<br><b>NO</b>                | Posted Speed            | Safe Speed             |
| Driver's Last Name<br><b>RAEL</b>                                                | Driver's First Name<br><b>JANICE</b> | Driver's Middle Name<br><b>M</b> | Driver's Street Address<br><b>2779 JESSE JAMES DR SW</b> |                         |                        |
| Driver's License Number<br><b>028367619</b>                                      | State<br><b>NM</b>                   | Type<br><b>D</b>                 | Statu<br><b>V</b>                                        | Restriction             | Endorsements           |
| Date of Birth<br><b>09/26/1961</b>                                               | Occupation                           | Expires<br><b>10/26/2017</b>     | City<br><b>ALBUQUERQUE</b>                               |                         | Stat<br><b>NM</b>      |
| Seat Pos<br><b>LF</b>                                                            | Age<br><b>53</b>                     | Sex<br><b>F</b>                  | Race<br><b>H</b>                                         | Injury Code<br><b>O</b> | OP Code<br><b>6</b>    |
| Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) | OP Used Property<br><b>YES</b>       | Airbag Deploy<br><b>N</b>        | Ejected<br><b>N</b>                                      | EMS Num                 | Med Trans<br><b>NO</b> |
| RF<br><b>RAEL</b>                                                                | <b>JEREMY</b>                        |                                  | <b>21</b>                                                | <b>M</b>                | <b>H</b>               |
| <b>2779 JESSE JAMES DR SW</b>                                                    |                                      | <b>ALBUQUERQUE</b>               | <b>NM</b>                                                | <b>87121</b>            | <b>6</b>               |
| RR<br><b>MONTES</b>                                                              | <b>TIANNA</b>                        |                                  | <b>17</b>                                                | <b>F</b>                | <b>H</b>               |
| <b>2779 JESSE JAMES DR SW</b>                                                    |                                      | <b>ALBUQUERQUE</b>               | <b>NM</b>                                                | <b>87121</b>            | <b>6</b>               |


|                          |                             |                                       |                                 |                             |                      |                                  |                          |                               |
|--------------------------|-----------------------------|---------------------------------------|---------------------------------|-----------------------------|----------------------|----------------------------------|--------------------------|-------------------------------|
| Veh. Year<br><b>2008</b> | Vehicle Make<br><b>FORD</b> | Color<br><b>CREAM - CRM</b>           | Body Style<br><b>PC</b>         | Cargo Body Type             | Veh. Use<br><b>P</b> | Veh. Use<br><b>P</b>             | Veh. Towed?<br><b>NO</b> | Vehicle Disabled<br><b>NO</b> |
| Lic. Year<br><b>2015</b> | State<br><b>NM</b>          | License Plate Number<br><b>434SNF</b> | VIN<br><b>1ZVHT80N385136591</b> | DOT #                       |                      | Damage Severity<br><b>SLIGHT</b> |                          | Damage Area<br>1 2 3 4 5      |
| Interstate Carrier?      | Towed By                    | Towed To                              |                                 | Extent<br><b>APPEARANCE</b> |                      | 11 10 9 8 7<br><b>08</b>         |                          |                               |

|                                                 |                                     |                                 |                                       |               |           |                              |
|-------------------------------------------------|-------------------------------------|---------------------------------|---------------------------------------|---------------|-----------|------------------------------|
| Number of Axles                                 | Gross Vehicle/Comb Weight Rating    | HazMat Placard?                 | Hazmat Placard 4-digit OR Hazmat Name | AND           | 1-digit # | HazMat Released<br><b>NO</b> |
| Carrier's Name                                  | Street Address                      |                                 | Carrier City                          |               | State     | Carrier's Zip                |
| Owner's Last Name<br><b>RAEL</b>                | Owner's First Name<br><b>JANICE</b> | Owner's Middle Name<br><b>M</b> | Owner's Company Name                  |               |           |                              |
| Street Address<br><b>2779 JESSE JAMES DR SW</b> | Owner's City<br><b>ALBUQUERQUE</b>  | State<br><b>NM</b>              | Owner Zip<br><b>87121-0000</b>        | Owner's Phone |           |                              |
| Insured By: (Name of Company)                   | Policy Number                       | Trailer or Towed Vehicles (1)   | Type                                  | Year          | Make      | Lic. Year                    |
| Trailer or Towed Vehicles (2)                   | Type                                | Year                            | Make                                  | Lic. Year     | Lic State | License Num                  |
| Trailer or Towed Vehicles (3)                   | Type                                | Year                            | Make                                  | Lic. Year     | Lic State | License Num                  |

VEHICLE NO. 001

VEHICLE NO. 002

14-0088708

|                               |                               |                                                                                  |                      |                           |                               |                                       |                                  |             |                               |                  |                  |                                                                                     |                    |           |           |             |  |
|-------------------------------|-------------------------------|----------------------------------------------------------------------------------|----------------------|---------------------------|-------------------------------|---------------------------------------|----------------------------------|-------------|-------------------------------|------------------|------------------|-------------------------------------------------------------------------------------|--------------------|-----------|-----------|-------------|--|
| VEHICLE NO. HEADED 02         |                               | Unit Direction WEST                                                              |                      | On: FROM PRIVATE DRIVE    |                               |                                       | Left the Scene of the Crash? YES |             | Posted Speed                  |                  | Safe Speed       |                                                                                     |                    |           |           |             |  |
| Driver's Last Name            |                               |                                                                                  | Driver's First Name  |                           |                               | Driver's Middle Name                  |                                  |             | Driver's Street Address       |                  |                  |                                                                                     |                    |           |           |             |  |
| Driver's License Number       |                               | State                                                                            | Type                 | Statu                     | Restriction                   | Endorsements                          | Expires                          | City        |                               | Stat             | Zip Code         | Phone                                                                               |                    |           |           |             |  |
| Date of Birth                 |                               | Occupation                                                                       |                      |                           | Seat Pos LF                   | Age                                   | Sex                              | Race        | Injury Code                   | OP Code          | OP Used Properly | Airbag Deploy                                                                       | Ejected            | EMS Num   | Med Trans |             |  |
| Seat Pos                      |                               | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                      |                           | 70                            | M                                     | H                                | O           | 0                             | YES              | N                | N                                                                                   |                    |           | NO        |             |  |
| Veh. Year                     |                               | Vehicle Make                                                                     |                      | Color                     |                               | Body Style                            | Cargo Body Type                  | Veh. Use    | Veh. Use                      | Veh. Towed?      |                  | Vehicle Disabled                                                                    |                    |           |           |             |  |
| 1997                          |                               | NISSAN                                                                           |                      | SILVER - SIL              |                               | PC                                    |                                  | U           |                               | NO               |                  | NO                                                                                  |                    |           |           |             |  |
| Lic. Year                     |                               | State                                                                            | License Plate Number |                           | VIN                           |                                       |                                  | DOT #       |                               | Damage Severity  |                  | Damage Area                                                                         |                    |           |           |             |  |
| 2015                          |                               | NM                                                                               | 434SNF               |                           | 1N4BU31D1VC123186             |                                       |                                  |             |                               | UNKNOWN          |                  |  |                    |           |           |             |  |
| Interstate Carrier?           |                               | Towed By                                                                         |                      | Towed To                  |                               | Extent                                |                                  | UNKNOWN     |                               | 16               |                  |                                                                                     |                    |           |           |             |  |
| Number of Axles               |                               | Gross Vehicle/Comb Weight Rating                                                 |                      | HazMat Placard?           |                               | HazMat Placard 4-digit OR HazMat Name |                                  | AND         |                               | 1-digit #        |                  | HazMat Released                                                                     |                    |           |           |             |  |
|                               |                               |                                                                                  |                      |                           |                               |                                       |                                  |             |                               |                  |                  | NO                                                                                  |                    |           |           |             |  |
| Carrier's Name                |                               |                                                                                  | Street Address       |                           |                               | Carrier City                          |                                  |             | State                         |                  | Carrier's Zip    |                                                                                     |                    |           |           |             |  |
| Owner's Last Name             |                               |                                                                                  | Owner's First Name   |                           |                               | Owner's Middle Name                   |                                  |             | Owner's Company Name          |                  |                  |                                                                                     |                    |           |           |             |  |
| GONZALES                      |                               |                                                                                  | JESUS                |                           |                               | G                                     |                                  |             |                               |                  |                  |                                                                                     |                    |           |           |             |  |
| Street Address                |                               |                                                                                  | Owner's City         |                           |                               | State                                 | Owner Zip                        |             | Owner's Phone                 |                  |                  |                                                                                     |                    |           |           |             |  |
| 807 SIMPIER LN SW             |                               |                                                                                  | ALBUQUERQUE          |                           |                               | NM                                    | 87102                            |             |                               |                  |                  |                                                                                     |                    |           |           |             |  |
| Insured By: (Name of Company) |                               |                                                                                  | Policy Number        |                           | Trailer or Towed Vehicles (1) |                                       | Type                             | Year        | Make                          | Lic. Year        | Lic State        | License Num                                                                         |                    |           |           |             |  |
|                               |                               |                                                                                  |                      |                           |                               |                                       |                                  |             |                               |                  |                  |                                                                                     |                    |           |           |             |  |
| Trailer or Towed Vehicles (2) |                               | Type                                                                             | Year                 | Make                      | Lic. Year                     | Lic State                             | License Num                      |             | Trailer or Towed Vehicles (3) |                  | Type             | Year                                                                                | Make               | Lic. Year | Lic State | License Num |  |
|                               |                               |                                                                                  |                      |                           |                               |                                       |                                  |             |                               |                  |                  |                                                                                     |                    |           |           |             |  |
| Veh. Num                      | Seat Pos                      | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                      |                           | Age                           | Sex                                   | Race                             | Injury Code | OP Code                       | OP Used Properly | Airbag Deploy    | Ejected                                                                             | EMS Num            | Med Trans |           |             |  |
|                               |                               |                                                                                  |                      |                           |                               |                                       |                                  |             |                               |                  |                  |                                                                                     |                    |           |           |             |  |
| COND                          | Lighting                      |                                                                                  | Weather              |                           | Road Character                |                                       |                                  | Road Grade  |                               |                  |                  |                                                                                     |                    |           |           |             |  |
|                               | DAYLIGHT                      |                                                                                  | CLEAR                |                           | STRAIGHT                      |                                       |                                  | LEVEL       |                               |                  |                  |                                                                                     |                    |           |           |             |  |
| ROAD                          | VEH NO.                       | Road Condition                                                                   |                      | Road Surface              |                               | Traffic Control                       |                                  | Road Lanes  | Road Design Div               | Road Design      |                  |                                                                                     |                    |           |           |             |  |
|                               | 01                            | DRY                                                                              |                      | PAVED CENTER AND EDGE LIN |                               | TRAFFIC SIGNALS                       |                                  | 2 LANES     | UNDIVIDED                     | FULL ACCESS CT   |                  |                                                                                     |                    |           |           |             |  |
| EVENT                         | APPARENT CONTRIBUTING FACTORS |                                                                                  |                      |                           |                               |                                       | DRIVER'S ACTIONS                 |             |                               |                  |                  |                                                                                     | SEQUENCE OF EVENTS |           |           |             |  |
|                               | NONE                          |                                                                                  |                      |                           |                               |                                       | LEFT TURN                        |             |                               |                  |                  |                                                                                     | FIRST EVENT        |           |           |             |  |
|                               |                               |                                                                                  |                      |                           |                               |                                       |                                  |             |                               |                  |                  |                                                                                     | SECOND EVENT       |           |           |             |  |
|                               |                               |                                                                                  |                      |                           |                               |                                       |                                  |             |                               |                  |                  |                                                                                     | THIRD EVENT        |           |           |             |  |
|                               |                               |                                                                                  |                      |                           |                               |                                       |                                  |             |                               |                  |                  | FOURTH EVENT                                                                        |                    |           |           |             |  |

3018841

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

|             |         |                |                           |                 |            |                 |             |
|-------------|---------|----------------|---------------------------|-----------------|------------|-----------------|-------------|
| <b>ROAD</b> | VEH NO. | Road Condition | Road Surface              | Traffic Control | Road Lanes | Road Design Div | Road Design |
|             | 02      | DRY            | PAVED CENTER AND EDGE LIN | NO CONTROLS     | NOT APPL   | UNDIVIDED       | OTHER       |

|              |                               |  |  |                  |  |                    |  |
|--------------|-------------------------------|--|--|------------------|--|--------------------|--|
| <b>EVENT</b> | APPARENT CONTRIBUTING FACTORS |  |  | DRIVER'S ACTIONS |  | SEQUENCE OF EVENTS |  |
|              | DRIVER INATTENTION            |  |  | RIGHT TURN       |  | FIRST EVENT        |  |
|              |                               |  |  |                  |  | SECOND EVENT       |  |
|              |                               |  |  |                  |  | THIRD EVENT        |  |
|              |                               |  |  |                  |  | FOURTH EVENT       |  |

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | SOBRIETY UNKNOWN                        |  | UNKNOWN                                    |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

**NARRATIVE**

DRIVER # 1 SAID THAT SHE WAS HEADED SOUTH ON YUCCA AND PREPARING TO MAKE A LEFT TURN ONTO EAST BOUND CENTRAL AVE. VEHICLE # 2 PULLED OUT FROM THE CHURCH'S CHICKEN RESTAURANT ONTO YUCCA AND HIS VEHICLE GRAZED THE LEFT REAR OF VEHICLE # 1. VEHICLE # 2 LEFT THE AREA.

|                                |                        |                                    |  |                     |          |               |  |
|--------------------------------|------------------------|------------------------------------|--|---------------------|----------|---------------|--|
| <b>Other Property Involved</b> | Type                   | Description of Property and Damage |  |                     |          |               |  |
|                                | Owner's Last Name      | Owner's First Name                 |  | Owner's Middle Name |          |               |  |
|                                | Owner's Street Address | Owner's City                       |  | State               | Zip Code | Owner's Phone |  |

|                |                          |  |                      |  |                       |          |                 |
|----------------|--------------------------|--|----------------------|--|-----------------------|----------|-----------------|
| <b>WITNESS</b> | Witness's Last Name      |  | Witness's First Name |  | Witness's Middle Name |          | Age             |
|                | Witness's Street Address |  | Witness's City       |  | State                 | Zip Code | Witness's Phone |

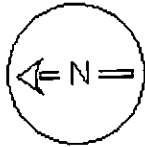
| ENFORCEMENT ACTION - VIOLATIONS |           |            |             |                         |        |
|---------------------------------|-----------|------------|-------------|-------------------------|--------|
| VEH NO.                         | Last Name | First Name | Middle Name | Violation (Common Name) | Action |

|                     |                |             |                     |                    |             |
|---------------------|----------------|-------------|---------------------|--------------------|-------------|
| Time Notified       | Time Arrived   | Notified By | Supervisor at Scene | Checked By         |             |
| 08:40               | 08:55          | RADIO       |                     | <i>[Signature]</i> |             |
| Officer's Signature | Officer's Name | Rank        | ID Number           | District           | Report Date |
| <i>[Signature]</i>  | KEMP, R.D.     | P1/C        | 0130                | 115                | 09/27/2014  |

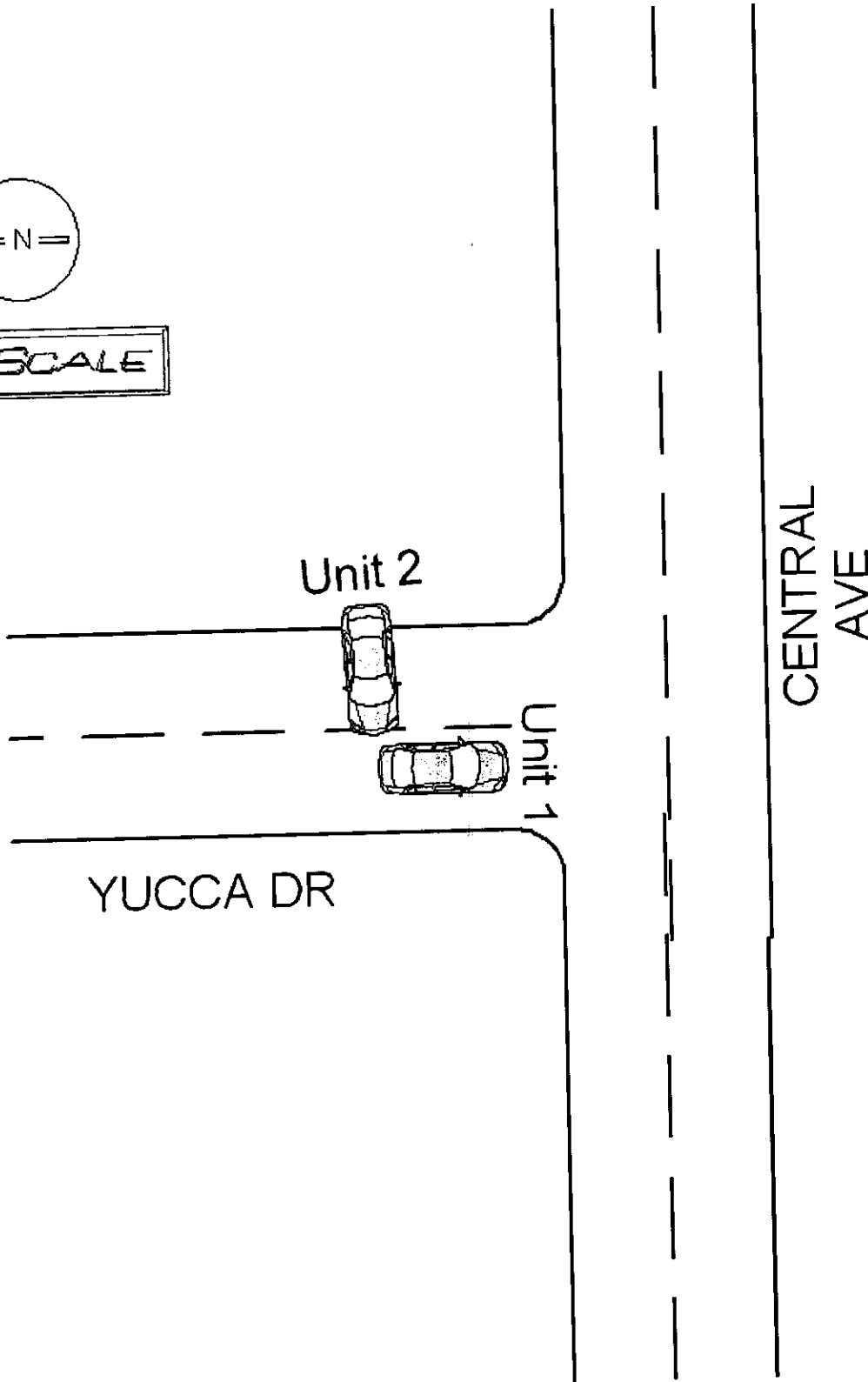


DIAGRAM

14 008708



NOT TO SCALE



**CRASH INVESTIGATION**  
 SH 10074  
 REVISED MAR. 4 2008  
 NMDOT UCR  
 E MAR. 2009  
 T042009M

**ALBUQUERQUE POLICE DEPT**  
 REPORTING DEPARTMENT

STATE OF NEW MEXICO  
 UNIFORM CRASH REPORT  
**0071020763**


|                                     |                                                                          |                                                                                                                   |                                                 |                               |
|-------------------------------------|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-------------------------------|
| Private Property?<br><b>NO</b>      | <input type="checkbox"/> Fatal Injury<br><input type="checkbox"/> Injury | Property Damage Only<br><input type="checkbox"/> Under \$500<br><input checked="" type="checkbox"/> \$500 or More | Hit and Run?<br><b>NO</b>                       | Case Number: <b>140113849</b> |
|                                     |                                                                          | NMDOT:                                                                                                            |                                                 | CAD Num: <b>143480459</b>     |
| Crash Date<br><b>12/14/2014</b>     | Military Time<br><b>11:58</b>                                            | City Occurred In<br><b>ALBUQUERQUE</b>                                                                            | County<br><b>BERNALILLO</b>                     |                               |
| Day of Week<br><b>SUNDAY</b>        | Occurred On: (Route No. or Name)<br><b>YUCCA DR NW</b>                   |                                                                                                                   | At Intersection With:<br><b>CENTRAL AVE</b>     | Tribal Land?<br><b>NO</b>     |
| Other Location                      | Measurement                                                              | Direction<br><b>SOUTH</b>                                                                                         | Permanent Landmark - County Line - Intersection | Milepost<br>Lat:<br>Long:     |
| Crash Occurred<br><b>ON ROADWAY</b> | Crash Classification<br><b>OTHER VEHICLE</b>                             | Analysis Code<br><b>15 - ALL OTHERS/FROM SAME DIR</b>                                                             |                                                 |                               |

|                                            |                                    |                                    |                                                                                     |                                                     |                           |
|--------------------------------------------|------------------------------------|------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------|---------------------------|
| VEHICLE NO.<br><b>HEADED 01</b>            | Unit Direction<br><b>SOUTH</b>     | On:<br><b>YUCCA DR NW</b>          | Left the Scene of the Crash?<br><b>NO</b>                                           | Posted Speed<br><b>35</b>                           | Safe Speed<br><b>35</b>   |
| Driver's Last Name<br><b>MAESTAS</b>       |                                    | Driver's First Name<br><b>JOHN</b> | Driver's Middle Name<br><b>P</b>                                                    | Driver's Street Address<br><b>1607 SOUTH STATON</b> |                           |
| Driver's License Number<br><b>37881279</b> | State<br><b>NM</b>                 | Type<br><b>D</b>                   | Statu<br><b>V</b>                                                                   | Restriction                                         | Endorsements              |
| Expires<br><b>09/04/2018</b>               |                                    | City<br><b>ROSWELL</b>             |                                                                                     | Stat<br><b>NM</b>                                   | Zip Code<br><b>88201</b>  |
| Phone<br><b>(505) 573-0413</b>             | Date of Birth<br><b>08/04/1951</b> | Occupation<br><b>UNKNOWN</b>       |                                                                                     | Seat Pos<br><b>LF</b>                               | Age<br><b>63</b>          |
| Sex<br><b>M</b>                            | Race<br><b>H</b>                   | Injury Code<br><b>O</b>            | OP Code<br><b>6</b>                                                                 | OP Used Property<br><b>YES</b>                      | Airbag Deploy<br><b>N</b> |
| Ejected<br><b>N</b>                        | EMS Num<br><b>7</b>                | Med Trans<br><b>YES</b>            | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |                                                     |                           |

|                          |                               |                                       |                                |                             |                      |                                    |                         |                                                           |
|--------------------------|-------------------------------|---------------------------------------|--------------------------------|-----------------------------|----------------------|------------------------------------|-------------------------|-----------------------------------------------------------|
| Veh. Year<br><b>2002</b> | Vehicle Make<br><b>TOYOTA</b> | Color<br><b>BURGUNDY (PURPLE) - M</b> | Body Style<br><b>PC</b>        | Cargo Body Type             | Veh. Use<br><b>P</b> | Veh. Use                           | Veh Towed?<br><b>NO</b> | Vehicle Disabled<br><b>NO</b>                             |
| Lic. Year<br><b>2015</b> | State<br><b>NM</b>            | License Plate Number<br><b>HAR916</b> | VIN<br><b>5TBBT481YS073662</b> | DOT #                       |                      | Damage Severity<br><b>MODERATE</b> |                         | Damage Area<br>1 2 3 4 5<br>6 7 8 9 10 11 12<br><b>06</b> |
| Interstate Carrier?      | Towed By                      | Towed To                              |                                | Extent<br><b>APPEARANCE</b> |                      | 2015 FEB 20 PM 05                  |                         |                                                           |

|                                                    |                                          |                                 |                                       |                           |                                        |                              |
|----------------------------------------------------|------------------------------------------|---------------------------------|---------------------------------------|---------------------------|----------------------------------------|------------------------------|
| Number of Axles                                    | Gross Vehicle/Comb Weight Rating         | HazMat Placard?                 | HazMat Placard 4-digit OR Hazmat Name | AND                       | 1-digit #                              | HazMat Released<br><b>NO</b> |
| Carrier's Name                                     | Street Address                           |                                 | Carrier City                          |                           | State                                  | Carrier's Zip                |
| Owner's Last Name<br><b>MAESTAS</b>                | Owner's First Name<br><b>JOHN</b>        | Owner's Middle Name<br><b>P</b> | Owner's Company Name                  |                           |                                        |                              |
| Street Address<br><b>1607 SOUTH STATON</b>         |                                          | Owner's City<br><b>ROSWELL</b>  | State<br><b>NM</b>                    | Owner Zip<br><b>88201</b> | Owner's Phone<br><b>(505) 573-0413</b> |                              |
| Insured By: (Name of Company)<br><b>STATE FARM</b> | Policy Number<br><b>035 7421-C07-31A</b> |                                 | Trailer or Towed Vehicles (1)         | Type                      | Year                                   | Make                         |
| Trailer or Towed Vehicles (2)                      | Type                                     | Year                            | Make                                  | Lic. Year                 | Lic State                              | License Num                  |
| Trailer or Towed Vehicles (3)                      | Type                                     | Year                            | Make                                  | Lic. Year                 | Lic State                              | License Num                  |

14-113849

|                                                    |                                                                                     |                                       |                                    |                                          |                                       |                               |                               |                                           |                                    |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
|----------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------|------------------------------------|------------------------------------------|---------------------------------------|-------------------------------|-------------------------------|-------------------------------------------|------------------------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------|---------------------|---------------------|--------------------------|
| VEHICLE NO.<br><b>HEADED 02</b>                    |                                                                                     | Unit Direction<br><b>SOUTH</b>        |                                    | On:<br><b>YUCCA DR NW</b>                |                                       |                               |                               | Left the Scene of the Crash?<br><b>NO</b> |                                    | Posted Speed<br><b>35</b>                       |                                                                                                    | Safe Speed<br><b>35</b>        |                                |                     |                     |                          |
| Driver's Last Name<br><b>MONTOYA</b>               |                                                                                     |                                       |                                    | Driver's First Name<br><b>JAMES</b>      |                                       |                               | Driver's Middle Name          |                                           |                                    | Driver's Street Address<br><b>5729 EDITH NE</b> |                                                                                                    |                                |                                |                     |                     |                          |
| Driver's License Number<br><b>052258065</b>        |                                                                                     | State<br><b>NM</b>                    | Type<br><b>D</b>                   | Statu<br><b>V</b>                        | Restriction<br><b>B</b>               | Endorsements                  | Expires<br><b>10/15/2015</b>  | City<br><b>ALBUQUERQUE</b>                |                                    |                                                 | Stat<br><b>NM</b>                                                                                  | Zip Code<br><b>87107</b>       | Phone<br><b>(505) 550-5763</b> |                     |                     |                          |
| Date of Birth<br><b>09/19/1950</b>                 |                                                                                     | Occupation<br><b>UNKNOWN</b>          |                                    |                                          |                                       | Seat Pos<br><b>LF</b>         | Age<br><b>64</b>              | Sex<br><b>M</b>                           | Race<br><b>H</b>                   | Injury Code<br><b>C</b>                         | OP Code<br><b>6</b>                                                                                | OP Used Properly<br><b>YES</b> | Airbag Deploy<br><b>N</b>      | Ejected<br><b>N</b> | EMS Num<br><b>7</b> | Med Trans.<br><b>YES</b> |
| Seat Pos                                           | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |                                       |                                    |                                          |                                       |                               |                               |                                           |                                    |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
|                                                    |                                                                                     |                                       |                                    |                                          |                                       |                               |                               |                                           |                                    |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
|                                                    |                                                                                     |                                       |                                    |                                          |                                       |                               |                               |                                           |                                    |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
|                                                    |                                                                                     |                                       |                                    |                                          |                                       |                               |                               |                                           |                                    |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
|                                                    |                                                                                     |                                       |                                    |                                          |                                       |                               |                               |                                           |                                    |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
|                                                    |                                                                                     |                                       |                                    |                                          |                                       |                               |                               |                                           |                                    |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
| Veh. Year<br><b>1997</b>                           | Vehicle Make<br><b>FORD</b>                                                         |                                       | Color<br><b>RED - RED</b>          |                                          |                                       | Body Style<br><b>PK</b>       | Cargo Body Type               | Veh. Use                                  | Veh. Use<br><b>P</b>               | Veh Towed?<br><b>NO</b>                         |                                                                                                    | Vehicle Disabled<br><b>NO</b>  |                                |                     |                     |                          |
| Lic. Year<br><b>2015</b>                           | State<br><b>NM</b>                                                                  | License Plate Number<br><b>104JLZ</b> |                                    | VIN<br><b>1FTDF1865VKA18312</b>          |                                       |                               | DOT #                         |                                           | Damage Severity<br><b>MODERATE</b> |                                                 | Damage Area<br> |                                | Extent<br><b>APPEARANCE</b>    |                     |                     |                          |
| Interstate Carrier?                                |                                                                                     | Towed By                              |                                    |                                          | Towed To                              |                               |                               |                                           |                                    |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
| Number of Axles                                    | Gross Vehicle/Comb Weight Rating                                                    |                                       | HazMat Placard?                    |                                          | Hazmat Placard 4-digit OR Hazmat Name |                               | AND                           | 1-digit #                                 | HazMat Released<br><b>NO</b>       |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
| Carrier's Name                                     |                                                                                     |                                       | Street Address                     |                                          |                                       |                               | Carrier City                  |                                           |                                    | State                                           | Carrier's Zip                                                                                      |                                |                                |                     |                     |                          |
| Owner's Last Name<br><b>MONTOYA</b>                |                                                                                     |                                       | Owner's First Name<br><b>JAMES</b> |                                          |                                       | Owner's Middle Name           |                               |                                           | Owner's Company Name               |                                                 |                                                                                                    |                                |                                |                     |                     |                          |
| Street Address<br><b>5729 EDITH NE</b>             |                                                                                     |                                       |                                    | Owner's City<br><b>ALBUQUERQUE</b>       |                                       |                               |                               | State<br><b>NM</b>                        | Owner Zip<br><b>87107</b>          | Owner's Phone<br><b>(505) 550-5763</b>          |                                                                                                    |                                |                                |                     |                     |                          |
| Insured By: (Name of Company)<br><b>STATE FARM</b> |                                                                                     |                                       |                                    | Policy Number<br><b>041 1931-C20-31D</b> |                                       | Trailer or Towed Vehicles (1) |                               | Type                                      | Year                               | Make                                            | Lic. Year                                                                                          | Lic State                      | License Num                    |                     |                     |                          |
| Trailer or Towed Vehicles (2)                      | Type                                                                                | Year                                  | Make                               | Lic. Year                                | Lic State                             | License Num                   | Trailer or Towed Vehicles (3) | Type                                      | Year                               | Make                                            | Lic. Year                                                                                          | Lic State                      | License Num                    |                     |                     |                          |

VEHICLE NO. 002

14-113849

|                                            |                                                                                     |                                                                                     |                      |                                           |                                       |                               |                                             |                                    |                             |                                                     |                                                                                  |                         |                         |              |           |           |
|--------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------|-------------------------------------------|---------------------------------------|-------------------------------|---------------------------------------------|------------------------------------|-----------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------|-------------------------|-------------------------|--------------|-----------|-----------|
| VEHICLE NO.<br>HEADED 03                   |                                                                                     | Unit Direction<br>SOUTH                                                             |                      | On:<br>YUCCA DR NW                        |                                       |                               |                                             | Left the Scene of the Crash?<br>NO |                             | Posted Speed<br>35                                  |                                                                                  | Safe Speed<br>35        |                         |              |           |           |
| Driver's Last Name<br>MAESTAS              |                                                                                     |                                                                                     |                      | Driver's First Name<br>LEANN              |                                       |                               |                                             | Driver's Middle Name               |                             | Driver's Street Address<br>6205 EDITH BLVD NE SPC B |                                                                                  |                         |                         |              |           |           |
| Driver's License Number<br>126953178       |                                                                                     | State<br>NM                                                                         | Type<br>D            | Statu<br>R                                | Restriction                           | Endorsements                  | Expires<br>04/20/2014                       | City<br>ALBUQUERQUE                |                             |                                                     | Stat<br>NM                                                                       | Zip Code<br>97107       | Phone<br>(505) 573-0413 |              |           |           |
| Date of Birth<br>03/19/1983                |                                                                                     | Occupation<br>UNKNOWN                                                               |                      |                                           |                                       | Seat Pos<br>LF                | Age<br>31                                   | Sex<br>F                           | Race<br>H                   | Injury Code<br>O                                    | OP Code<br>6                                                                     | OP Used Properly<br>YES | Airbag Deploy<br>N      | Ejected<br>N | EMS Num   | Med Trans |
| Seat Pos                                   | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |                                                                                     |                      |                                           |                                       |                               | Age                                         | Sex                                | Race                        | Injury Code                                         | OP Code                                                                          | OP Used Properly        | Airbag Deploy           | Ejected      | EMS Num   | Med Trans |
| Veh. Year<br>2005                          | Vehicle Make<br>LINCOLN                                                             |                                                                                     | Color<br>GREEN - GRN |                                           |                                       | Body Style<br>SV              | Cargo Body Type                             | Veh. Use                           | Veh. Use<br>P               | Veh. Towed?<br>NO                                   |                                                                                  | Vehicle Disabled<br>NO  |                         |              |           |           |
| Lic. Year<br>2015                          | State<br>NM                                                                         | License Plate Number<br>857SAB                                                      |                      | VIN<br>5LMFU27565LJ01196                  |                                       |                               | DOT #                                       |                                    | Damage Severity<br>MODERATE |                                                     | Damage Area<br>1 2 3 4 5<br>12 10 9 8 7                                          |                         | Extent<br>APPEARANCE    |              | 12        |           |
| Interstate Carrier?                        |                                                                                     | Towed By                                                                            |                      |                                           | Towed To                              |                               |                                             |                                    |                             |                                                     |                                                                                  |                         |                         |              |           |           |
| Number of Axles                            | Gross Vehicle/Comb Weight Rating                                                    |                                                                                     |                      | HazMat Placard?                           | HazMat Placard 4-digit OR Hazmat Name |                               |                                             | AND                                | 1-digit #                   | HazMat Released<br>NO                               |                                                                                  |                         |                         |              |           |           |
| Carrier's Name                             |                                                                                     |                                                                                     |                      | Street Address                            |                                       |                               |                                             | Carrier City                       |                             |                                                     |                                                                                  | State                   | Carrier's Zip           |              |           |           |
| Owner's Last Name<br>MAESTAS               |                                                                                     |                                                                                     |                      | Owner's First Name<br>LEANN               |                                       |                               |                                             | Owner's Middle Name                |                             | Owner's Company Name                                |                                                                                  |                         |                         |              |           |           |
| Street Address<br>6205 EDITH BLVD NE SPC B |                                                                                     |                                                                                     |                      | Owner's City<br>ALBUQUERQUE               |                                       |                               |                                             | State<br>NM                        | Owner Zip<br>97107          | Owner's Phone<br>(505) 573-0413                     |                                                                                  |                         |                         |              |           |           |
| Insured By: (Name of Company)<br>UNKNOWN   |                                                                                     |                                                                                     |                      | Policy Number                             |                                       | Trailer or Towed Vehicles (1) | Type                                        | Year                               | Make                        | Lic. Year                                           | Lic State                                                                        | License Num             |                         |              |           |           |
| Trailer or Towed Vehicles (2)              | Type                                                                                | Year                                                                                | Make                 | Lic. Year                                 | Lic State                             | License Num                   | Trailer or Towed Vehicles (3)               | Type                               | Year                        | Make                                                | Lic. Year                                                                        | Lic State               | License Num             |              |           |           |
| Veh. Num                                   | Seat Pos                                                                            | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |                      |                                           |                                       | Age                           | Sex                                         | Race                               | Injury Code                 | OP Code                                             | OP Used Properly                                                                 | Airbag Deploy           | Ejected                 | EMS Num      | Med Trans |           |
| COND                                       | Lighting<br>DAYLIGHT                                                                |                                                                                     |                      | Weather<br>CLEAR                          |                                       |                               | Road Character<br>STRAIGHT                  |                                    |                             | Road Grade<br>LEVEL                                 |                                                                                  |                         |                         |              |           |           |
| ROAD                                       | VEH NO.<br>01                                                                       | Road Condition<br>DRY                                                               |                      | Road Surface<br>PAVED CENTER AND EDGE LIN |                                       |                               | Traffic Control<br>TRAFFIC SIGNALS          |                                    | Road Lanes<br>1 LANE        | Road Design Div<br>PAINTED DIVIDE                   | Road Design<br>FULL ACCESS CT                                                    |                         |                         |              |           |           |
| EVENT                                      | APPARENT CONTRIBUTING FACTORS<br>OTHER - NO DRIVER ERROR                            |                                                                                     |                      |                                           |                                       |                               | DRIVER'S ACTIONS<br>STOPPED FOR SIGN/SIGNAL |                                    |                             |                                                     | SEQUENCE OF EVENTS<br>FIRST EVENT<br>SECOND EVENT<br>THIRD EVENT<br>FOURTH EVENT |                         |                         |              |           |           |

14-113849

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

|             |               |                       |                                           |                                    |                      |                                   |                               |
|-------------|---------------|-----------------------|-------------------------------------------|------------------------------------|----------------------|-----------------------------------|-------------------------------|
| <b>ROAD</b> | VEH NO.<br>02 | Road Condition<br>DRY | Road Surface<br>PAVED CENTER AND EDGE LIN | Traffic Control<br>TRAFFIC SIGNALS | Road Lanes<br>1 LANE | Road Design Div<br>PAINTED DIVIDE | Road Design<br>FULL ACCESS CT |
|-------------|---------------|-----------------------|-------------------------------------------|------------------------------------|----------------------|-----------------------------------|-------------------------------|

|              |                               |  |  |                         |              |                    |  |
|--------------|-------------------------------|--|--|-------------------------|--------------|--------------------|--|
| <b>EVENT</b> | APPARENT CONTRIBUTING FACTORS |  |  | DRIVER'S ACTIONS        |              | SEQUENCE OF EVENTS |  |
|              | OTHER - NO DRIVER ERROR       |  |  | STOPPED FOR SIGN/SIGNAL |              | FIRST EVENT        |  |
|              |                               |  |  |                         |              | SECOND EVENT       |  |
|              |                               |  |  |                         |              | THIRD EVENT        |  |
|              |                               |  |  |                         | FOURTH EVENT |                    |  |

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

|             |               |                       |                                           |                                    |                      |                                   |                               |
|-------------|---------------|-----------------------|-------------------------------------------|------------------------------------|----------------------|-----------------------------------|-------------------------------|
| <b>ROAD</b> | VEH NO.<br>03 | Road Condition<br>DRY | Road Surface<br>PAVED CENTER AND EDGE LIN | Traffic Control<br>TRAFFIC SIGNALS | Road Lanes<br>1 LANE | Road Design Div<br>PAINTED DIVIDE | Road Design<br>FULL ACCESS CT |
|-------------|---------------|-----------------------|-------------------------------------------|------------------------------------|----------------------|-----------------------------------|-------------------------------|

|              |                               |  |  |                  |              |                    |  |
|--------------|-------------------------------|--|--|------------------|--------------|--------------------|--|
| <b>EVENT</b> | APPARENT CONTRIBUTING FACTORS |  |  | DRIVER'S ACTIONS |              | SEQUENCE OF EVENTS |  |
|              | DRIVER INATTENTION            |  |  | GOING STRAIGHT   |              | FIRST EVENT        |  |
|              |                               |  |  |                  |              | SECOND EVENT       |  |
|              |                               |  |  |                  |              | THIRD EVENT        |  |
|              |                               |  |  |                  | FOURTH EVENT |                    |  |

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

**NARRATIVE**

VEHICLE #1 AND VEHICLE # 2 WERE STOPPED AT THE STOP LIGHT AT YUCCA NW AND CENTRAL AVE. VEHICLE # 2 WAS STRUCK FROM BEHIND BY VEHICLE# 3 WHO ADVISED OFFICER'S SHE WAS "NOT PAYING ATTENTION" DUE TO SHE WAS ON THE PHONE "ARGUING" WITH HER BOYFRIEND WHICH CAUSED HER TO BE "DISTRACTED".

VEHICLE # 2 THEN REAR-ENDED VEHICLE # 1 DUE TO THE FORCE OF VEHICLE # 3 REAR-ENDING VEHICLE # 2 CAUSING VEHICLE # 2 TO REAR-END VEHICLE #1.

EMS #7 AND AFD #7 ARRIVED TO THE SCENE AND ADMINISTERED MEDICAL ATTENTION TO ALL DRIVERS. DRIVER # 2 JAMES MONTOYA WAS TRANSPORTED UNMH FOR FURTHER MEDICAL EVALUATION.

VEHICLE # 1 AND VEHICLE # 2 WERE DRIVABLE AND DRIVER # 1 LEFT THE SCENE WITH NO FURTHER INCIDENT VEHICLE # 2 WAS DRIVEN FROM THE SCENE BY AN UNKNOWN FRIEND OF DRIVER # 2 JAMES MONTOYA WITH NO FURTHER INCIDENT.

DRIVER # 3 WAS ARRESTED AND BOOKED INTO MDC FOR DRIVING ON A REVOKED/SUSPENDED DRIVER'S LICENSE PURSUANT TO 66-8-122G. VEHICLE # 3 WAS TOWED TO THE LISTED TOW COMPANY. THERE WAS NO FURTHER INCIDENT AT THIS TIME.

14-113849

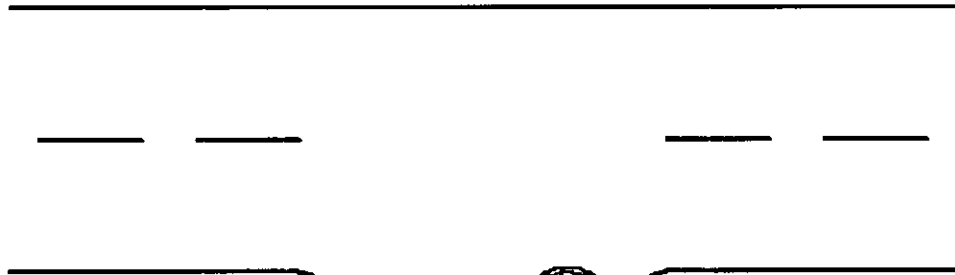
|                                             |                          |                                    |                      |                     |                         |                 |                           |
|---------------------------------------------|--------------------------|------------------------------------|----------------------|---------------------|-------------------------|-----------------|---------------------------|
| Other<br>Property<br>Involved               | Type                     | Description of Property and Damage |                      |                     |                         |                 |                           |
|                                             | Owner's Last Name        |                                    | Owner's First Name   |                     | Owner's Middle Name     |                 |                           |
|                                             | Owner's Street Address   |                                    | Owner's City         |                     | State                   | Zip Code        | Owner's Phone             |
| WITNESS                                     | Witness's Last Name      |                                    | Witness's First Name |                     | Witness's Middle Name   |                 | Age                       |
|                                             | Witness's Street Address |                                    | Witness's City       |                     | State                   | Zip Code        | Witness's Phone           |
| <b>ENFORCEMENT ACTION - VIOLATIONS</b>      |                          |                                    |                      |                     |                         |                 |                           |
| VEH NO.                                     | Last Name                |                                    | First Name           | Middle Name         | Violation (Common Name) |                 | Action                    |
| Time Notified<br>11:55                      | Time Arrived<br>11:58    | Notified By<br>RADIO               |                      | Supervisor at Scene |                         | Checked By      |                           |
| Officer's Signature<br><i>D. Candalaria</i> |                          | Officer's Name<br>CANDELARIA, D.   |                      | Rank<br>P1/C        | ID Number<br>3005       | District<br>114 | Report Date<br>12/14/2014 |

Diagram Drawn By  
CANDELARIA, D.

Measurements Taken By  
NOT TO SCALE

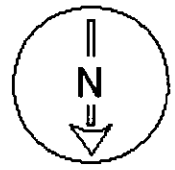
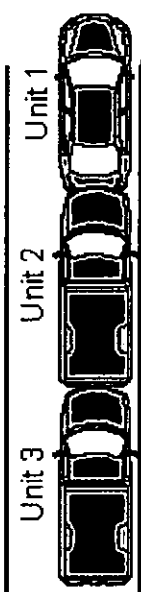
DIAGRAM

CENTRAL AVE



NOT TO SCALE

YUCCA  
NW





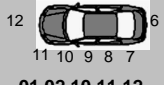
ALBUQUERQUE POLICE DEPT REPORTING DEPARTMENT

STATE OF NEW MEXICO UNIFORM CRASH REPORT

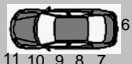
710284509

Form containing crash details: Private Property? NO, Case Number: 160064325, NMDOT: , CAD Num: 161951022, Crash Date: 07/13/2016, City: ALBUQUERQUE, County: BERNALILLO, Day of Week: WEDNESDAY, Occurred On: YUCCA DR NW, At Intersection With: AVALON RD NW, Other Location: , Crash Occurred: ON ROADWAY, Crash Classification: OTHER VEHICLE, Analysis Code: 16 - BOTH GOING STRAIGHT/FROM OPP DIR, Vehicle No. 001, Driver: MAESTAS, JAMES, MICHAEL, 300 55TH ST SW, License: 501573132, State: NM, Type: D, Status: V, Expires: 01/17/2024, City: ALB, State: NM, Zip Code: 87105, Phone: (505) 859-9400, Date of Birth: 12/18/1987, Occupation: , Seat Pos: LF, Age: 28, Sex: M, Race: O, Injury Code: B, OP Code: 1, OP Used Properly: YES, Airbag Deploy: N, Ejected: N, EMS Num: , Med Trans: , Veh. Year: 2005, Vehicle Make: HARLEY-DAVIDSON, Color: SILVER - SIL, Body Style: MC, Cargo Body Type: , Veh. Use1: , Veh. Use2: P, Veh. Towed?: YES, Vehicle Disabled: YES, Damage Severity: HEAVY, Damage Area: 12, Extent: DISABLED, Towed By: OWNERS REQUEST, VIN: 1HD1FRW375Y609327, DOT #: , Interstate Carrier?: , Towed To: , Number of Axles: , Gross Vehicle/Comb Weight Rating: , HazMat Placard?: , Hazmat Placard 4-digit OR Hazmat Name: , AND: , 1-digit #: , HazMat Released: NO, Carrier's Name: , Street Address: , Carrier City: , State: , Carrier's Zip: , Owner's Last Name: MAESTAS, Owner's First Name: RUBEN, Owner's Middle Name: , Owner's Company Name: , Street Address: 6200 FLOR DEL SOL, Owner's City: ALB, State: NM, Owner Zip: 87120, Owner's Phone: , Insured By: ALLSTATE, Policy Number: 829148997, Trailer or Towed Vehicles (1): , Type: , Year: , Make: , Lic. Year: , Lic State: , License Num: , Trailer or Towed Vehicles (2): , Type: , Year: , Make: , Lic. Year: , Lic State: , License Num: , Trailer or Towed Vehicles (3): , Type: , Year: , Make: , Lic. Year: , Lic State: , License Num: .

VEHICLE NO. 001



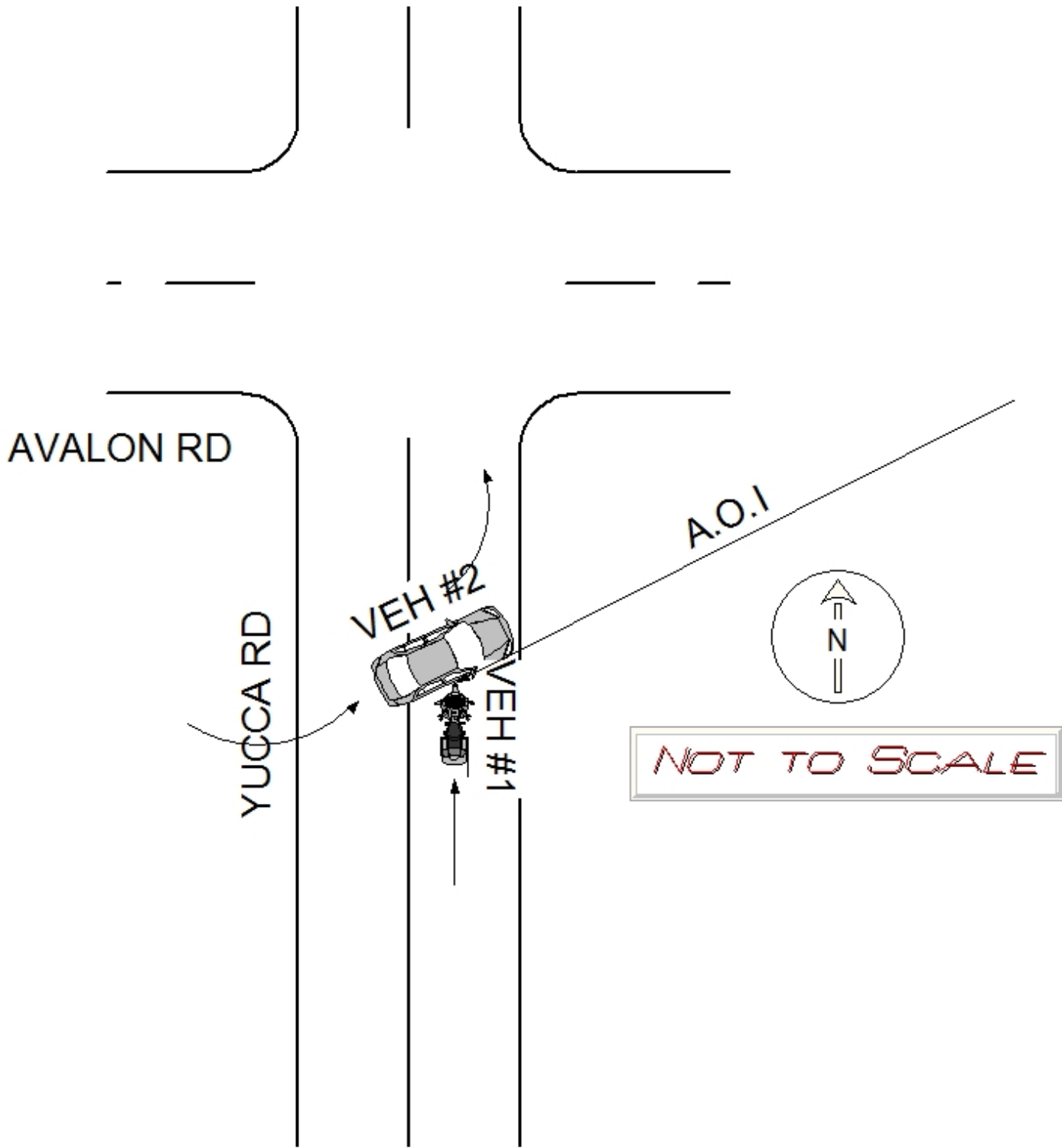


|                                        |                                                                                     |                                                                                     |                              |                               |                                       |                               |                               |                                    |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
|----------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------|-------------------------------|---------------------------------------|-------------------------------|-------------------------------|------------------------------------|----------------|------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------|-----------|-----------|
| <b>VEHICLE NO.</b><br>HEADED 02        |                                                                                     | Unit Direction<br>EAST                                                              |                              | On:<br>YUCCA DR NW            |                                       |                               |                               | Left the Scene of the Crash?<br>NO |                | Posted Speed<br>10                       |                  | Safe Speed<br>10                                                                                                                    |                    |              |           |           |
| Driver's Last Name<br>MILLIGAN         |                                                                                     |                                                                                     |                              | Driver's First Name<br>DARIUS |                                       |                               |                               | Driver's Middle Name               |                | Driver's Street Address<br>2216 CARLISLE |                  |                                                                                                                                     |                    |              |           |           |
| Driver's License Number<br>510805976   |                                                                                     | State<br>NM                                                                         | Type<br>D                    | Status<br>V                   | Restrictions                          | Endorsements                  | Expires<br>08/02/2019         | City<br>ALB                        |                |                                          | State<br>NM      | Zip Code<br>87106                                                                                                                   | Phone              |              |           |           |
| Date of Birth<br>07/03/1988            |                                                                                     | Occupation                                                                          |                              |                               |                                       | Seat Pos<br>LF                | Age<br>28                     | Sex<br>M                           | Race<br>O      | Injury Code<br>O                         | OP Code<br>6     | OP Used Properly<br>YES                                                                                                             | Airbag Deploy<br>N | Ejected<br>N | EMS Num   | Med Trans |
| Seat Pos                               | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |                                                                                     |                              |                               |                                       |                               | 28                            | M                                  | O              | O                                        | 6                | YES                                                                                                                                 | N                  | N            |           |           |
|                                        |                                                                                     |                                                                                     |                              |                               |                                       |                               |                               |                                    |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
|                                        |                                                                                     |                                                                                     |                              |                               |                                       |                               |                               |                                    |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
|                                        |                                                                                     |                                                                                     |                              |                               |                                       |                               |                               |                                    |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
|                                        |                                                                                     |                                                                                     |                              |                               |                                       |                               |                               |                                    |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
|                                        |                                                                                     |                                                                                     |                              |                               |                                       |                               |                               |                                    |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
|                                        |                                                                                     |                                                                                     |                              |                               |                                       |                               |                               |                                    |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
| Veh. Year<br>2008                      | Vehicle Make<br>CHEVROLET                                                           |                                                                                     | Color<br>WHITE - WHI         |                               |                                       | Body Style<br>PC              | Cargo Body Type               | Veh. Use1                          | Veh. Use2<br>P | Veh. Towed?<br>NO                        |                  | Vehicle Disabled<br>NO                                                                                                              |                    |              |           |           |
| Lic. Year<br>2017                      | State<br>NM                                                                         | License Plate Number<br>LWY676                                                      |                              | VIN<br>2G1WB58K681280054      |                                       |                               | DOT #                         |                                    |                | Damage Severity<br>HEAVY                 |                  | Damage Area<br>1 2 3 4 5<br>12  6<br>11 10 9 8 7 |                    |              |           |           |
| Interstate Carrier?                    |                                                                                     | Towed By                                                                            |                              |                               | Towed To                              |                               |                               |                                    |                | Extent<br>FUNCTIONAL                     |                  | 01,02,03,04,05                                                                                                                      |                    |              |           |           |
| Number of Axles                        | Gross Vehicle/Comb Weight Rating                                                    |                                                                                     | HazMat Placard?              |                               | Hazmat Placard 4-digit OR Hazmat Name |                               |                               | AND                                | 1-digit #      | HazMat Released<br>NO                    |                  |                                                                                                                                     |                    |              |           |           |
| Carrier's Name                         |                                                                                     |                                                                                     | Street Address               |                               |                                       |                               | Carrier City                  |                                    |                | State                                    | Carrier's Zip    |                                                                                                                                     |                    |              |           |           |
| Owner's Last Name<br>MILLIGAN          |                                                                                     |                                                                                     | Owner's First Name<br>DARIUS |                               |                                       | Owner's Middle Name           |                               | Owner's Company Name               |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
| Street Address<br>2216 CARLISLE        |                                                                                     |                                                                                     | Owner's City<br>ALB          |                               |                                       | State<br>NM                   | Owner Zip<br>87106            |                                    | Owner's Phone  |                                          |                  |                                                                                                                                     |                    |              |           |           |
| Insured By: (Name of Company)<br>GEICO |                                                                                     |                                                                                     |                              | Policy Number<br>4392879450   |                                       | Trailer or Towed Vehicles (1) | Type                          | Year                               | Make           | Lic. Year                                | Lic State        | License Num                                                                                                                         |                    |              |           |           |
| Trailer or Towed Vehicles (2)          | Type                                                                                | Year                                                                                | Make                         | Lic. Year                     | Lic State                             | License Num                   | Trailer or Towed Vehicles (3) | Type                               | Year           | Make                                     | Lic. Year        | Lic State                                                                                                                           | License Num        |              |           |           |
| Veh. Num                               | Seat Pos                                                                            | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |                              |                               |                                       | Age                           | Sex                           | Race                               | Injury Code    | OP Code                                  | OP Used Properly | Airbag Deploy                                                                                                                       | Ejected            | EMS Num      | Med Trans |           |
|                                        |                                                                                     |                                                                                     |                              |                               |                                       |                               |                               |                                    |                |                                          |                  |                                                                                                                                     |                    |              |           |           |
| <b>COND</b>                            | Lighting<br>DAYLIGHT                                                                |                                                                                     |                              | Weather<br>CLEAR              |                                       |                               | Road Character<br>STRAIGHT    |                                    |                | Road Grade<br>HILLCREST                  |                  |                                                                                                                                     |                    |              |           |           |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                    |                                            |                                       |                                |                                     |                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------------------------------------|--------------------------------------------|---------------------------------------|--------------------------------|-------------------------------------|-----------------------------|
| <b>ROAD</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | VEH NO.<br><b>01</b>                    | Road Condition<br><b>DRY</b>       | Road Surface<br><b>PAVED CENTER STRIPE</b> | Traffic Control<br><b>NO CONTROLS</b> | Road Lanes<br><b>2 LANES</b>   | Road Design Div<br><b>UNDIVIDED</b> | Road Design<br><b>OTHER</b> |
| <b>EVENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | APPARENT CONTRIBUTING FACTORS           |                                    |                                            | DRIVER'S ACTIONS                      |                                | SEQUENCE OF EVENTS                  |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>NONE</b>                             |                                    |                                            | <b>GOING STRAIGHT</b>                 |                                | FIRST EVENT                         | <b>MVT</b>                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                    |                                            |                                       |                                | SECOND EVENT                        |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                    |                                            |                                       |                                | THIRD EVENT                         |                             |
| FOURTH EVENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         |                                    |                                            |                                       |                                |                                     |                             |
| <b>DRIVER</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |                                    | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |                                       | PEDESTRIAN/PEDALCYCLIST ACTION |                                     |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>HAD NOT CONSUMED ALCOHOL</b>         |                                    | <b>NO APP. DEFECTS</b>                     |                                       | At Intersection                |                                     |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Breath Test Results                     |                                    | Driver Physical Condition - Other          |                                       | Not At Intersection            |                                     |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                    |                                            |                                       |                                | Pedestrian Action - Other           |                             |
| <b>ROAD</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | VEH NO.<br><b>02</b>                    | Road Condition<br><b>DRY</b>       | Road Surface<br><b>PAVED CENTER STRIPE</b> | Traffic Control<br><b>NO CONTROLS</b> | Road Lanes<br><b>2 LANES</b>   | Road Design Div<br><b>UNDIVIDED</b> | Road Design<br><b>OTHER</b> |
| <b>EVENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | APPARENT CONTRIBUTING FACTORS           |                                    |                                            | DRIVER'S ACTIONS                      |                                | SEQUENCE OF EVENTS                  |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>FAILED TO YIELD RIGHT OF WAY</b>     |                                    |                                            | <b>LEFT TURN</b>                      |                                | FIRST EVENT                         | <b>MVT</b>                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                    |                                            |                                       |                                | SECOND EVENT                        |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                    |                                            |                                       |                                | THIRD EVENT                         |                             |
| FOURTH EVENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         |                                    |                                            |                                       |                                |                                     |                             |
| <b>DRIVER</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |                                    | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |                                       | PEDESTRIAN/PEDALCYCLIST ACTION |                                     |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>HAD NOT CONSUMED ALCOHOL</b>         |                                    | <b>NO APP. DEFECTS</b>                     |                                       | At Intersection                |                                     |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Breath Test Results                     |                                    | Driver Physical Condition - Other          |                                       | Not At Intersection            |                                     |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |                                    |                                            |                                       |                                | Pedestrian Action - Other           |                             |
| <b>NARRATIVE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                         |                                    |                                            |                                       |                                |                                     |                             |
| <p><b>DRIVER 1 STATED THAT HE WAS HEADING NORTH BOUND ON YUCCA COMING UP TO THE INTERSECTION ON AVALON WHEN VEHICLE 2 PULLED ON IN FRONT OF HIM CAUSING THE COLLISION.</b></p> <p><b>DRIVER 2 STATED THAT HE WAS DROPPING HIS FRIEND OFF AT HIS RESIDENCE AND WHEN HE WAS LEAVING HE PULLED OUT OF THE DRIVER WAY HEADING EAST ON YUCCA AT THIS POINT WHEN HE DRIVER 1 COLLIDED WITH HIS VEHICLE. DRIVER 2 WAS ATTEMPTING TO GO NORTH ON YUCCA BEFORE THE COLLISION.</b></p> <p><b>DRIVER 1 HAD THE RIGHT OF WAY WHEN DRIVER 2 PULLED OUT IN FRONT OF HIM HEADING NORTH ON YUCCA.</b></p> <p><b>VEHICLE 1 WAS TOWED AT OWNERS REQUEST AND VEHICLE 2 DROVE AWAY FROM THE SCENE.</b></p> <p><b>DRIVER 1 WAS TRANSPORTED TO THE HOSPITAL FOR FURTHER OBSERVATION.</b></p> |                                         |                                    |                                            |                                       |                                |                                     |                             |
| <b>Other Property Involved</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Type                                    | Description of Property and Damage |                                            |                                       |                                |                                     |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Owner's Last Name                       |                                    | Owner's First Name                         |                                       | Owner's Middle Name            |                                     |                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Owner's Street Address                  |                                    | Owner's City                               |                                       | State                          | Zip Code                            | Owner's Phone               |
| <b>WITNESS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Witness's Last Name                     |                                    | Witness's First Name                       |                                       | Witness's Middle Name          |                                     | Age                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Witness's Street Address                |                                    | Witness's City                             |                                       | State                          | Zip Code                            | Witness's Phone             |

| ENFORCEMENT ACTION - VIOLATIONS                  |                                         |                             |                          |                                                   |                                  |  |
|--------------------------------------------------|-----------------------------------------|-----------------------------|--------------------------|---------------------------------------------------|----------------------------------|--|
| VEH NO.<br><b>02</b>                             | Last Name<br><b>MILLIGAN</b>            | First Name<br><b>DARIUS</b> | Middle Name              | Violation (Common Name)<br><b>EXPIRED PLATE</b>   | Action<br><b>CITED</b>           |  |
| ENFORCEMENT ACTION - VIOLATIONS                  |                                         |                             |                          |                                                   |                                  |  |
| VEH NO.<br><b>02</b>                             | Last Name<br><b>MILLIGAN</b>            | First Name<br><b>DARIUS</b> | Middle Name              | Violation (Common Name)<br><b>FAILED TO YEILD</b> | Action<br><b>CITED</b>           |  |
| Time Notified<br><b>16:17</b>                    | Time Arrived<br><b>16:23</b>            | Notified By<br><b>RADIO</b> | Supervisor at Scene      |                                                   |                                  |  |
| Checked By<br><b>3065 - BACA, D. - 7/26/2016</b> |                                         |                             |                          |                                                   |                                  |  |
| Officer's Signature<br><i>Leeann Gurule</i>      | Officer's Name<br><b>GURULE, LEEANN</b> | Rank<br><b>PSA</b>          | ID Number<br><b>5609</b> | District<br><b>114</b>                            | Report Date<br><b>07/13/2016</b> |  |

DIAGRAM



**STATE OF NEW MEXICO UNIFORM CRASH REPORT - SUPPLEMENTAL NARRATIVE**

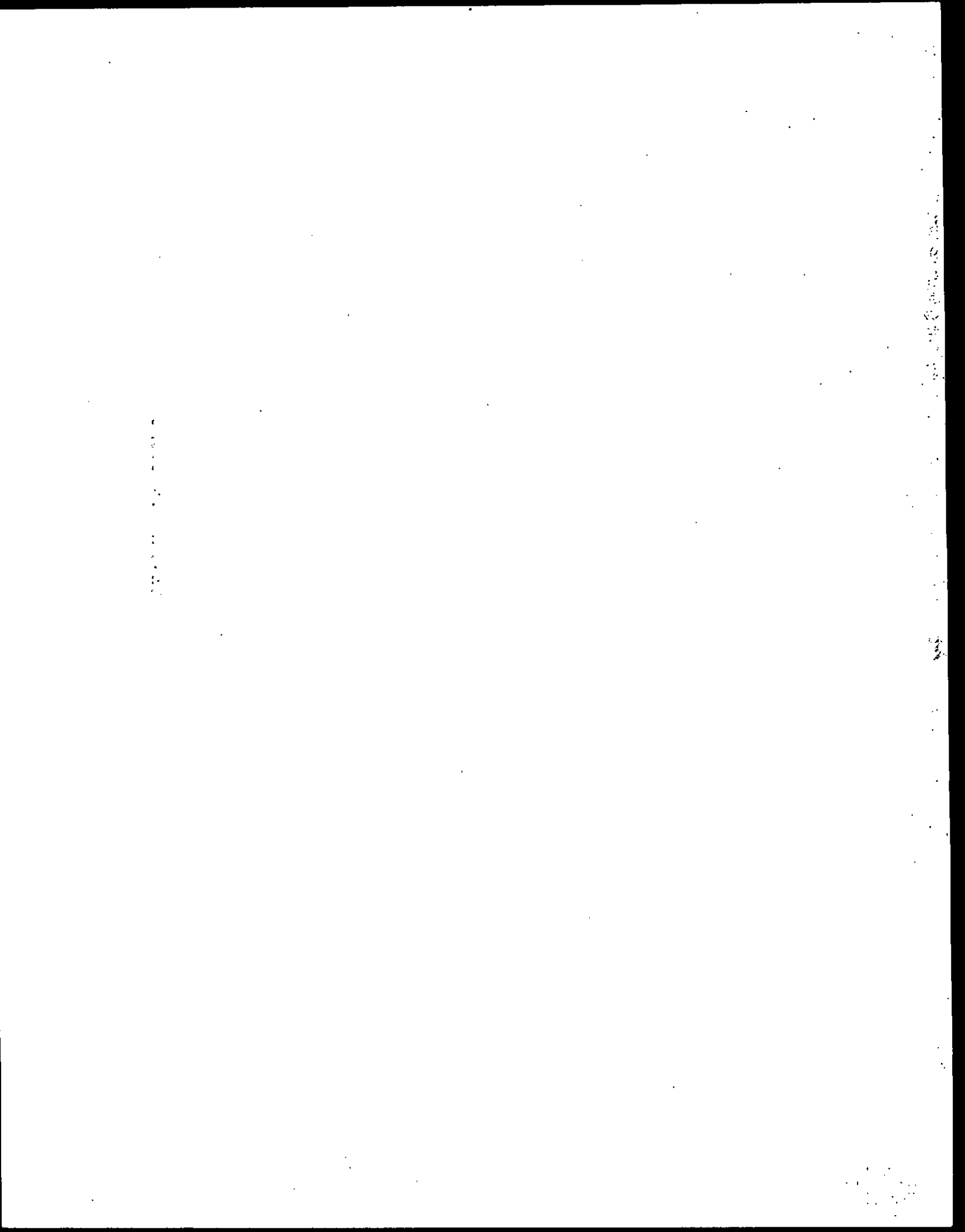
160064325

|                                                                        |                            |                                         |                                        |                        |                                  |
|------------------------------------------------------------------------|----------------------------|-----------------------------------------|----------------------------------------|------------------------|----------------------------------|
| Crash Date<br><b>07/13/2016</b>                                        | Crash Time<br><b>16:17</b> | Crash Report Number<br><b>710284509</b> | Agency Case Number<br><b>160064325</b> |                        |                                  |
| Officer/Person Submitting Supplemental Report<br><b>GURULE, LEEANN</b> |                            | Rank<br><b>PSA</b>                      | ID Number<br><b>5609</b>               | District<br><b>114</b> | Report Date<br><b>10/26/2016</b> |

**NARRATIVE**

ON 10/26/2016 I WAS INFORMED THAT ONE OF THE LICENSE PLATE NUMBERS ON MY REPORT WAS POSSIBLY INCORRECT. I ATTEMPTED TO CONTACT DRIVER 2, DARIUS MILLIGAN, TO GET THE CORRECTED LICENSE PLATE NUMBER, BUT WAS UNABLE TO CONTACT HIM. THROUGH FURTHER INVESTIGATION I WAS ABLE TO FIND THE CORRECT LICENSE PLATE NUMBER WHICH WAS ONLY ONE PHONETIC LETTER OFF FROM WHAT WAS LISTED ON THE ORIGINAL REPORT. ON THE ORIGINAL REPORT THE LICENSE PLATE NUMBER FOR VEHICLE 2 WAS LISTED AS NM/LWY676 WHICH CAME BACK TO A WHITE 2008 CHEVY. THE CORRECT LICENSE PLATE IS NM/LNY676 AND IT COMES BACK TO A 2005 CHEVY WITH A VIN NUMBER 1G1JC52FX57121538 WHICH LISTS DARIUS MILLIGAN AS THE REGISTERED OWNER.

2016 OCT 31 AM 9:56



DIAGRAM/NARRATIVE

Use Additional Sheets As Necessary

CRASH REPORT NUMBER:

CASE NUMBER:  
160064325

DIAGRAM DRAWING BY:

MEASUREMENTS TAKEN BY:

MY name is James Maestas. I was involved in a accident on July 13th at 4:30 pm. I was riding a motorcycle I was looking into Buying From my father, in other words Test driving.

I was Riding north bound on Yucca Dr NW. I noticed a white car going south bound on Yucca Dr NW. The driver of the ~~white~~ white car was on the phone when he turned his vehicle into the north bound lane to make a u turn ~~without~~ without looking up from his phone. leaving me no time to try pushing the breaks. My motorcycle ~~made~~ made contact on the passenger side of the car, throwing me over the roof of the car. the car finally stopped along the north bound curb. The driver ran over to me while I was laying on the ground. The first thing he said was "I'm sorry I didn't see you". I was able to walk so I got up from the street and walked over to the side of the road. A Fire Rescue and a ambulance arrived shortly after. But before a officer was on site. I was unable to ~~not~~ give a statement because I was taken to the hospital before the officer arrived.

2016 JUL 22 PM 12:29

Thank you.

*James Maestas*

Crash Report Number

Case Number

160064325

STATE OF NEW MEXICO UNIFORM CRASH REPORT  
NM Statute 66-7-209  
NMDOT COPY

SHEET

OF

SHEETS


T042009M

ALBUQUERQUE POLICE DEPT

REPORTING DEPARTMENT

710366537

|                                     |                                                        |                                                                                                                   |                                                 |                                                           |
|-------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------|
| Private Property?<br><b>NO</b>      | <input type="checkbox"/> Fatal Injury                  | Property Damage Only<br><input type="checkbox"/> Under \$500<br><input checked="" type="checkbox"/> \$500 or More | Hit and Run?<br><b>YES</b>                      | Case Number: <b>160092931</b>                             |
|                                     |                                                        | NMDOT:                                                                                                            |                                                 | CAD Num: <b>162761013</b>                                 |
| Crash Date<br><b>10/02/2016</b>     | Military Time<br><b>18:14</b>                          | City Occurred In<br><b>ALBUQUERQUE</b>                                                                            |                                                 | County<br><b>BERNALILLO</b>                               |
| Day of Week<br><b>SUNDAY</b>        | Occurred On: (Route No. or Name)<br><b>YUCCA DR NW</b> |                                                                                                                   | At Intersection With:<br><b>BLUEWATER RD NW</b> |                                                           |
| Other Location                      |                                                        | Measurement                                                                                                       | Direction                                       | Permanent Landmark - County Line - Intersection           |
|                                     |                                                        |                                                                                                                   |                                                 | Milepost                                                  |
|                                     |                                                        |                                                                                                                   |                                                 | Lat:                                                      |
|                                     |                                                        |                                                                                                                   |                                                 | Long:                                                     |
| Crash Occurred<br><b>ON ROADWAY</b> |                                                        | Crash Classification<br><b>OTHER VEHICLE</b>                                                                      |                                                 | Analysis Code<br><b>00 - FROM OPPOSITE DIR/NOT STATED</b> |

|                                                                  |                                  |                                                                                     |                                     |                                       |                                    |                                           |                                                                                                                                                       |                                        |               |
|------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------|------------------------------------|-------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|---------------|
| VEHICLE NO. 001                                                  | VEHICLE NO.<br><b>HEADED 01</b>  | Unit Direction<br><b>NORTH</b>                                                      | On:<br><b>P-LOT PAT HURLEY PARK</b> |                                       |                                    | Left the Scene of the Crash?<br><b>NO</b> | Posted Speed                                                                                                                                          | Safe Speed                             |               |
|                                                                  | Driver's Last Name               |                                                                                     | Driver's First Name                 |                                       | Driver's Middle Name               | Driver's Street Address                   |                                                                                                                                                       |                                        |               |
|                                                                  | Driver's License Number          |                                                                                     | State                               | Type                                  | Statu                              | Restriction                               | Endorsements                                                                                                                                          | Expires                                | City          |
|                                                                  | Date of Birth                    |                                                                                     | Occupation                          |                                       |                                    | Seat Pos<br><b>NA</b>                     | Age                                                                                                                                                   | Sex                                    | Race          |
|                                                                  |                                  |                                                                                     |                                     |                                       |                                    | Injury Code                               | OP Code                                                                                                                                               | OP Used Properly                       | Airbag Deploy |
|                                                                  |                                  |                                                                                     |                                     |                                       |                                    | Ejected                                   | EMS Num                                                                                                                                               | Med Trans                              |               |
|                                                                  | Seat Pos                         | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |                                     |                                       |                                    |                                           |                                                                                                                                                       |                                        |               |
|                                                                  |                                  |                                                                                     |                                     |                                       |                                    |                                           |                                                                                                                                                       |                                        |               |
|                                                                  |                                  |                                                                                     |                                     |                                       |                                    |                                           |                                                                                                                                                       |                                        |               |
|                                                                  |                                  |                                                                                     |                                     |                                       |                                    |                                           |                                                                                                                                                       |                                        |               |
| Veh. Year<br><b>2006</b>                                         | Vehicle Make<br><b>CHRYSLER</b>  |                                                                                     | Color<br><b>SILVER - SIL</b>        |                                       | Body Style<br><b>PC</b>            | Cargo Body Type                           | Veh. Use<br><b>P</b>                                                                                                                                  | Veh. Use                               |               |
| Veh. Towed?<br><b>NO</b>                                         |                                  | Vehicle Disabled<br><b>NO</b>                                                       |                                     |                                       | Damage Severity<br><b>MODERATE</b> |                                           | Damage Area<br>1 2 3 4 5<br><br>6<br>11 10 9 8 7<br><b>03,04</b> |                                        |               |
| Lic. Year<br><b>2016</b>                                         | State<br><b>NM</b>               | License Plate Number<br><b>TEMP TAG</b>                                             |                                     | VIN<br><b>1C3AL46X96N161681</b>       | DOT #                              |                                           | Extent<br><b>APPEARANCE</b>                                                                                                                           |                                        |               |
| Interstate Carrier?                                              |                                  | Towed By                                                                            |                                     | Towed To                              |                                    | 2016 OCT - 4 AM 7:25                      |                                                                                                                                                       |                                        |               |
| Number of Axles                                                  | Gross Vehicle/Comb Weight Rating |                                                                                     | HazMat Placard?                     | Hazmat Placard 4-digit OR Hazmat Name |                                    | AND                                       | 1-digit                                                                                                                                               | HazMat Released<br><b>NO</b>           |               |
| Carrier's Name                                                   |                                  |                                                                                     | Street Address                      |                                       |                                    | Carrier City                              |                                                                                                                                                       | State                                  |               |
| Carrier's Name                                                   |                                  |                                                                                     | Street Address                      |                                       |                                    | Carrier City                              |                                                                                                                                                       | State                                  |               |
| Owner's Last Name<br><b>ROYBAL</b>                               |                                  | Owner's First Name<br><b>CRYSTAL</b>                                                |                                     | Owner's Middle Name                   |                                    | Owner's Company Name                      |                                                                                                                                                       |                                        |               |
| Street Address<br><b>7104 ZINNIA PL NW</b>                       |                                  |                                                                                     | Owner's City<br><b>ALBUQUERQUE</b>  |                                       |                                    | State<br><b>NM</b>                        | Owner Zip<br><b>87121</b>                                                                                                                             | Owner's Phone<br><b>(505) 322-9285</b> |               |
| Insured By: (Name of Company)<br><b>UNIQUE INSURANCE COMPANY</b> |                                  |                                                                                     | Policy Number<br><b>NMP3009899</b>  |                                       | Trailer or Towed Vehicles (1)      | Type                                      | Year                                                                                                                                                  | Make                                   |               |
|                                                                  |                                  |                                                                                     |                                     |                                       |                                    |                                           |                                                                                                                                                       |                                        |               |
| Trailer or Towed Vehicles (2)                                    | Type                             | Year                                                                                | Make                                | Lic. Year                             | Lic State                          | License Num                               | Trailer or Towed Vehicles (3)                                                                                                                         | Type                                   |               |
|                                                                  |                                  |                                                                                     |                                     |                                       |                                    |                                           |                                                                                                                                                       |                                        |               |



160092931

VEHICLE NO. 002

|                                      |                               |                                     |                                            |              |            |
|--------------------------------------|-------------------------------|-------------------------------------|--------------------------------------------|--------------|------------|
| VEHICLE NO.<br><b>HEADED 02 WEST</b> | Unit Direction<br><b>WEST</b> | On:<br><b>P-LOT PAT HURLEY PARK</b> | Left the Scene of the Crash?<br><b>YES</b> | Posted Speed | Safe Speed |
|--------------------------------------|-------------------------------|-------------------------------------|--------------------------------------------|--------------|------------|

|                                      |                                       |                      |                                           |
|--------------------------------------|---------------------------------------|----------------------|-------------------------------------------|
| Driver's Last Name<br><b>UNKNOWN</b> | Driver's First Name<br><b>UNKNOWN</b> | Driver's Middle Name | Driver's Street Address<br><b>UNKNOWN</b> |
|--------------------------------------|---------------------------------------|----------------------|-------------------------------------------|

|                                       |                    |                  |                   |             |              |                              |                            |                   |                          |                                |
|---------------------------------------|--------------------|------------------|-------------------|-------------|--------------|------------------------------|----------------------------|-------------------|--------------------------|--------------------------------|
| Driver's License Number<br><b>UNK</b> | State<br><b>NM</b> | Type<br><b>D</b> | Statu<br><b>V</b> | Restriction | Endorsements | Expires<br><b>10/02/2016</b> | City<br><b>ALBUQUERQUE</b> | Stat<br><b>NM</b> | Zip Code<br><b>87105</b> | Phone<br><b>(505) 315-6108</b> |
|---------------------------------------|--------------------|------------------|-------------------|-------------|--------------|------------------------------|----------------------------|-------------------|--------------------------|--------------------------------|

|               |            |                       |     |     |                  |                         |                     |                                |                            |                     |         |           |
|---------------|------------|-----------------------|-----|-----|------------------|-------------------------|---------------------|--------------------------------|----------------------------|---------------------|---------|-----------|
| Date of Birth | Occupation | Seat Pos<br><b>LF</b> | Age | Sex | Race<br><b>C</b> | Injury Code<br><b>O</b> | OP Code<br><b>6</b> | OP Used Property<br><b>YES</b> | Airbag Deploy<br><b>-N</b> | Ejected<br><b>N</b> | EMS Num | Med Trans |
|---------------|------------|-----------------------|-----|-----|------------------|-------------------------|---------------------|--------------------------------|----------------------------|---------------------|---------|-----------|

|          |                                                                                     |   |  |  |  |  |  |  |  |  |  |  |
|----------|-------------------------------------------------------------------------------------|---|--|--|--|--|--|--|--|--|--|--|
| Seat Pos | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) | M |  |  |  |  |  |  |  |  |  |  |
|          |                                                                                     |   |  |  |  |  |  |  |  |  |  |  |
|          |                                                                                     |   |  |  |  |  |  |  |  |  |  |  |
|          |                                                                                     |   |  |  |  |  |  |  |  |  |  |  |
|          |                                                                                     |   |  |  |  |  |  |  |  |  |  |  |
|          |                                                                                     |   |  |  |  |  |  |  |  |  |  |  |

|                          |                              |                              |                         |                 |                      |          |                          |                               |
|--------------------------|------------------------------|------------------------------|-------------------------|-----------------|----------------------|----------|--------------------------|-------------------------------|
| Veh. Year<br><b>1999</b> | Vehicle Make<br><b>HONDA</b> | Color<br><b>SILVER - SIL</b> | Body Style<br><b>PC</b> | Cargo Body Type | Veh. Use<br><b>P</b> | Veh. Use | Veh. Towed?<br><b>NO</b> | Vehicle Disabled<br><b>NO</b> |
|--------------------------|------------------------------|------------------------------|-------------------------|-----------------|----------------------|----------|--------------------------|-------------------------------|

|                          |                    |                                       |                                 |       |                                  |                                                                                                                 |
|--------------------------|--------------------|---------------------------------------|---------------------------------|-------|----------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Lic. Year<br><b>2016</b> | State<br><b>NM</b> | License Plate Number<br><b>NGF447</b> | VIN<br><b>4S6CM58W9X4426301</b> | DOT # | Damage Severity<br><b>SLIGHT</b> | Damage Area<br>1 2 3 4 5<br> |
|--------------------------|--------------------|---------------------------------------|---------------------------------|-------|----------------------------------|-----------------------------------------------------------------------------------------------------------------|

|                     |          |          |                             |
|---------------------|----------|----------|-----------------------------|
| Interstate Carrier? | Towed By | Towed To | Extent<br><b>APPEARANCE</b> |
|---------------------|----------|----------|-----------------------------|

|                 |                                  |                 |                                       |     |           |                              |
|-----------------|----------------------------------|-----------------|---------------------------------------|-----|-----------|------------------------------|
| Number of Axles | Gross Vehicle/Comb Weight Rating | HazMat Placard? | Hazmat Placard 4-digit OR Hazmat Name | AND | 1-digit # | HazMat Released<br><b>NO</b> |
|-----------------|----------------------------------|-----------------|---------------------------------------|-----|-----------|------------------------------|

|                |                |              |       |               |
|----------------|----------------|--------------|-------|---------------|
| Carrier's Name | Street Address | Carrier City | State | Carrier's Zip |
|----------------|----------------|--------------|-------|---------------|

|                                     |                                      |                     |                      |
|-------------------------------------|--------------------------------------|---------------------|----------------------|
| Owner's Last Name<br><b>UNKNOWN</b> | Owner's First Name<br><b>UNKNOWN</b> | Owner's Middle Name | Owner's Company Name |
|-------------------------------------|--------------------------------------|---------------------|----------------------|

|                                  |                                    |                    |                           |                                        |
|----------------------------------|------------------------------------|--------------------|---------------------------|----------------------------------------|
| Street Address<br><b>UNKNOWN</b> | Owner's City<br><b>ALBUQUERQUE</b> | State<br><b>NM</b> | Owner Zip<br><b>87105</b> | Owner's Phone<br><b>(505) 315-6108</b> |
|----------------------------------|------------------------------------|--------------------|---------------------------|----------------------------------------|

|                                                 |                             |                               |      |      |      |           |           |             |
|-------------------------------------------------|-----------------------------|-------------------------------|------|------|------|-----------|-----------|-------------|
| Insured By: (Name of Company)<br><b>UNKNOWN</b> | Policy Number<br><b>UNK</b> | Trailer or Towed Vehicles (1) | Type | Year | Make | Lic. Year | Lic State | License Num |
|-------------------------------------------------|-----------------------------|-------------------------------|------|------|------|-----------|-----------|-------------|

|                               |      |      |      |           |           |             |                               |      |      |      |           |           |             |
|-------------------------------|------|------|------|-----------|-----------|-------------|-------------------------------|------|------|------|-----------|-----------|-------------|
| Trailer or Towed Vehicles (2) | Type | Year | Make | Lic. Year | Lic State | License Num | Trailer or Towed Vehicles (3) | Type | Year | Make | Lic. Year | Lic State | License Num |
|-------------------------------|------|------|------|-----------|-----------|-------------|-------------------------------|------|------|------|-----------|-----------|-------------|

|          |          |                                                                                     |     |     |      |             |         |                  |               |         |         |           |
|----------|----------|-------------------------------------------------------------------------------------|-----|-----|------|-------------|---------|------------------|---------------|---------|---------|-----------|
| Veh. Num | Seat Pos | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) | Age | Sex | Race | Injury Code | OP Code | OP Used Property | Airbag Deploy | Ejected | EMS Num | Med Trans |
|          |          |                                                                                     |     |     |      |             |         |                  |               |         |         |           |

|      |                         |                         |                                   |                            |
|------|-------------------------|-------------------------|-----------------------------------|----------------------------|
| COND | Lighting<br><b>DUSK</b> | Weather<br><b>CLEAR</b> | Road Character<br><b>STRAIGHT</b> | Road Grade<br><b>LEVEL</b> |
|------|-------------------------|-------------------------|-----------------------------------|----------------------------|

|      |                      |                              |                                                  |                                       |                               |                                     |                             |
|------|----------------------|------------------------------|--------------------------------------------------|---------------------------------------|-------------------------------|-------------------------------------|-----------------------------|
| ROAD | VEH NO.<br><b>01</b> | Road Condition<br><b>DRY</b> | Road Surface<br><b>PAVED CENTER AND EDGE LIN</b> | Traffic Control<br><b>NO CONTROLS</b> | Road Lanes<br><b>NOT APPL</b> | Road Design Div<br><b>UNDIVIDED</b> | Road Design<br><b>OTHER</b> |
|------|----------------------|------------------------------|--------------------------------------------------|---------------------------------------|-------------------------------|-------------------------------------|-----------------------------|

|       |                               |  |  |  |  |                  |  |  |                    |  |  |
|-------|-------------------------------|--|--|--|--|------------------|--|--|--------------------|--|--|
| EVENT | APPARENT CONTRIBUTING FACTORS |  |  |  |  | DRIVER'S ACTIONS |  |  | SEQUENCE OF EVENTS |  |  |
|       | <b>NONE</b>                   |  |  |  |  | <b>PARKED</b>    |  |  | FIRST EVENT        |  |  |
|       |                               |  |  |  |  |                  |  |  | SECOND EVENT       |  |  |
|       |                               |  |  |  |  |                  |  |  | THIRD EVENT        |  |  |
|       |                               |  |  |  |  |                  |  |  | FOURTH EVENT       |  |  |

|        |                                         |  |                                            |  |            |                                |  |
|--------|-----------------------------------------|--|--------------------------------------------|--|------------|--------------------------------|--|
| DRIVER | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | PEDESTRIAN | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|        | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |            | At Intersection                |  |
|        | Breath Test Results                     |  | Driver Physical Condition - Other          |  |            | Not At Intersection            |  |
|        |                                         |  |                                            |  |            | Pedestrian Action - Other      |  |

160092931

|      |               |                       |                                           |                                |                        |                              |                      |
|------|---------------|-----------------------|-------------------------------------------|--------------------------------|------------------------|------------------------------|----------------------|
| ROAD | VEH NO.<br>02 | Road Condition<br>DRY | Road Surface<br>PAVED CENTER AND EDGE LIN | Traffic Control<br>NO CONTROLS | Road Lanes<br>NOT APPL | Road Design Div<br>UNDIVIDED | Road Design<br>OTHER |
|------|---------------|-----------------------|-------------------------------------------|--------------------------------|------------------------|------------------------------|----------------------|

|       |                               |  |  |                  |  |                    |  |
|-------|-------------------------------|--|--|------------------|--|--------------------|--|
| EVENT | APPARENT CONTRIBUTING FACTORS |  |  | DRIVER'S ACTIONS |  | SEQUENCE OF EVENTS |  |
|       | DRIVER INATTENTION            |  |  | BACKING          |  | FIRST EVENT        |  |
|       |                               |  |  |                  |  | SECOND EVENT       |  |
|       |                               |  |  |                  |  | THIRD EVENT        |  |
|       |                               |  |  |                  |  | FOURTH EVENT       |  |

|        |                                         |  |                                            |  |            |                                |  |
|--------|-----------------------------------------|--|--------------------------------------------|--|------------|--------------------------------|--|
| DRIVER | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | PEDESTRIAN | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|        | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |            | At Intersection                |  |
|        | Breath Test Results                     |  | Driver Physical Condition - Other          |  |            | Not At Intersection            |  |
|        |                                         |  |                                            |  |            | Pedestrian Action - Other      |  |

**NARRATIVE**

V1 WAS STRUCK BY V2 WHEN V2 WAS BACKING IN THE PARKING LOT TO PAT HURLEY PARK.

OWNER(CRYSTAL ROYBAL) OF V1 STATED SHE WAS OUT OF HER VEHICLE WHICH WAS PARKED IN THE PARKING LOT TO PAT HURLEY PARK. SHE STATED SHE WITNESSED V2 BACK INTO THE PASSENGER SIDE OF HER VEHICLE. D2 EXITED HIS VEHICLE(WHITE MALE WEARING A WHITE TANK TOP AND JEANS ABOUT 25-30 YOA) AND STARTED TO SPEAK WITH CRYSTAL. CRYSTAL STATED THEY EXCHANGED TELEPHONE NUMBERS AND ASKED THE MALE FOR HIS INSURANCE INFORMATION. THE MALE THEN GOT EXTREMELY UPSET AND STATED HE DID NOT HAVE INSURANCE TO HIS VEHICLE. HE THEN FLED QUICKLY, THROWING GANG SIGNS AS HE LEFT.

CRYSTAL TOOK A PICTURE OF THE LICENSE PLATE TO V2 AND DESCRIBED V2 AS A LATE 90S MODEL OF A HONDA. I RAN THE PLATE THROUGH NCIC AND CONFIRMED IT WAS A 1999 SILVER HONDA AND MATCHED THE DESCRIPTION CRYSTAL GAVE ME.

I ATTEMPTED TO CALL THE MALE WITH THE NUMBER CRYSTAL OBTAINED FROM HIM. I WAS ABLE TO SPEAK TO HIM HOWEVER HE DENIED BEING INVOLVED. IT APPEARED TO ME HE WAS EXTREMELY NERVOUS WHEN TALKING TO ME AND HESITATED AS HE ANSWERED MY QUESTIONS. I WAS UNABLE TO IDENTIFY HIM AT THIS TIME. HIS TELEPHONE NUMBER IS 505-315-6108.

V1 OBTAINED MODERATE DAMAGE TO THE PASSENGER SIDE DOORS AND WAS NOT TOWED.

|                         |                        |                                    |  |                     |          |               |  |
|-------------------------|------------------------|------------------------------------|--|---------------------|----------|---------------|--|
| Other Property Involved | Type                   | Description of Property and Damage |  |                     |          |               |  |
|                         | Owner's Last Name      | Owner's First Name                 |  | Owner's Middle Name |          |               |  |
|                         | Owner's Street Address | Owner's City                       |  | State               | Zip Code | Owner's Phone |  |

2016 OCT 4 AM 7:25

|         |                          |  |                      |  |                       |          |                 |
|---------|--------------------------|--|----------------------|--|-----------------------|----------|-----------------|
| WITNESS | Witness's Last Name      |  | Witness's First Name |  | Witness's Middle Name |          | Age             |
|         | Witness's Street Address |  | Witness's City       |  | State                 | Zip Code | Witness's Phone |

| ENFORCEMENT ACTION - VIOLATIONS |           |            |             |                         |        |  |
|---------------------------------|-----------|------------|-------------|-------------------------|--------|--|
| VEH NO.                         | Last Name | First Name | Middle Name | Violation (Common Name) | Action |  |

|                        |                       |                         |                     |                                              |
|------------------------|-----------------------|-------------------------|---------------------|----------------------------------------------|
| Time Notified<br>18:31 | Time Arrived<br>18:35 | Notified By<br>DISPATCH | Supervisor at Scene | Checked By<br>3996 - DIETZEL, M. - 10/3/2016 |
|------------------------|-----------------------|-------------------------|---------------------|----------------------------------------------|

|                                   |                              |              |                   |                 |                           |
|-----------------------------------|------------------------------|--------------|-------------------|-----------------|---------------------------|
| Officer's Signature<br><i>ACH</i> | Officer's Name<br>CHAVEZ, F. | Rank<br>P1/C | ID Number<br>4206 | District<br>115 | Report Date<br>10/02/2016 |
|-----------------------------------|------------------------------|--------------|-------------------|-----------------|---------------------------|

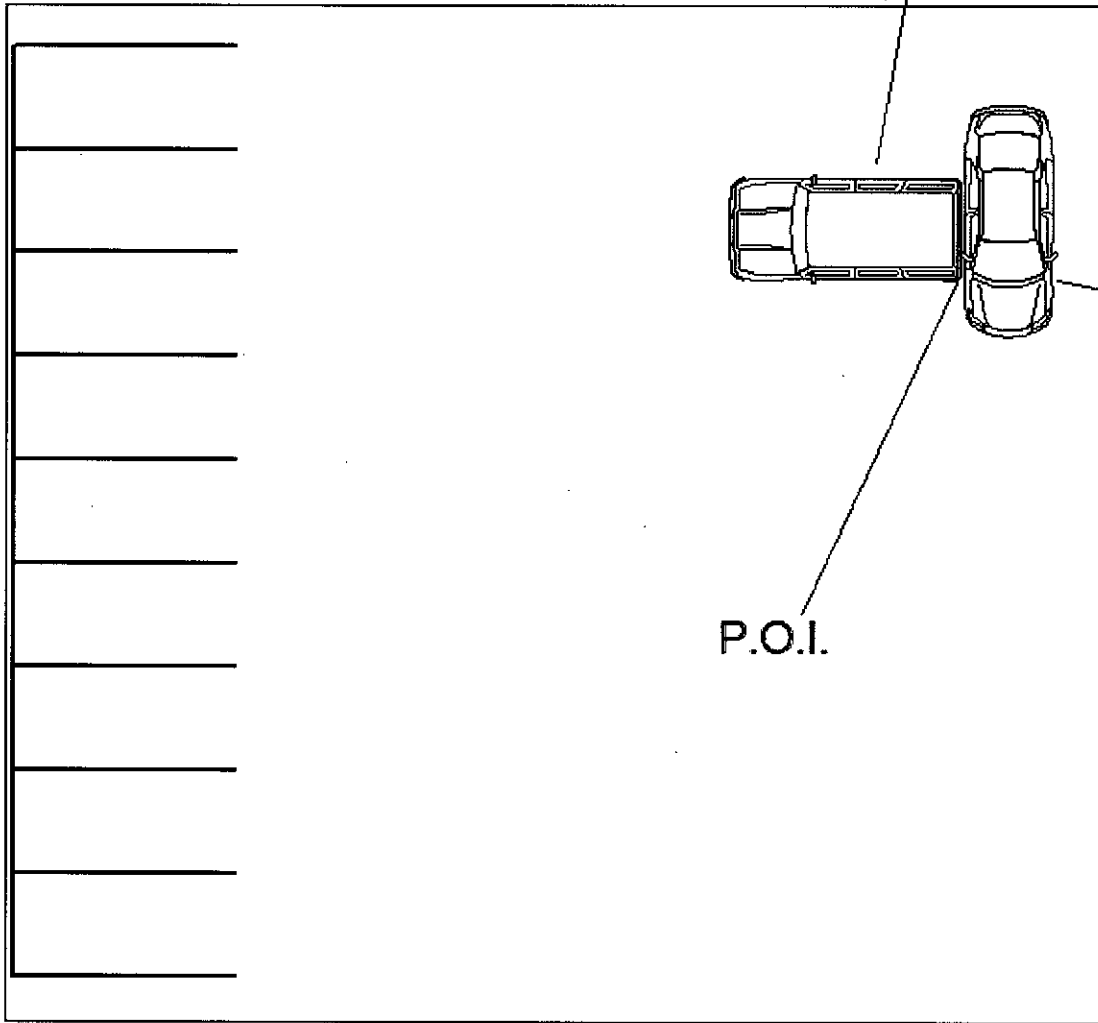
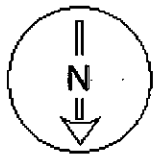
160092931

2016 OCT -4 AM 7:25

160092931

DIAGRAM

P-Lot Pat Hurley Park

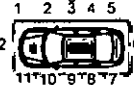


2016 OCT -4 AM 7:25

ALBUQUERQUE POLICE DEPT REPORTING DEPARTMENT

710370007

|                                     |                                                        |                                                                                                                   |                                                                    |                               |
|-------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------|
| Private Property?<br><b>NO</b>      | Fatal Injury<br><input type="checkbox"/>               | Property Damage Only<br><input type="checkbox"/> Under \$500<br><input checked="" type="checkbox"/> \$500 or More | Hit and Run?<br><b>YES</b>                                         | Case Number: <b>160108933</b> |
|                                     |                                                        | NMDOT:                                                                                                            |                                                                    | CAD Num: <b>163220380</b>     |
| Crash Date<br><b>11/17/2016</b>     | Military Time<br><b>09:45</b>                          | City Occurred In<br><b>ALBUQUERQUE</b>                                                                            | County<br><b>BERNALILLO</b>                                        |                               |
| Day of Week<br><b>THURSDAY</b>      | Occurred On: (Route No. or Name)<br><b>YUCCA DR NW</b> |                                                                                                                   | At Intersection With:<br><b>AVALON RD NW</b>                       | Tribal Land?<br><b>NO</b>     |
| Other Location                      | Measurement                                            | Direction                                                                                                         | Permanent Landmark - County Line - Intersection                    | Milepost<br>Lat:<br>Long:     |
| Crash Occurred<br><b>ON ROADWAY</b> |                                                        | Crash Classification<br><b>OTHER VEHICLE</b>                                                                      | Analysis Code<br><b>01 - BOTH GOING STRAIGHT/ENTERING AT ANGLE</b> |                               |

|                                                    |                                             |                                                                                                                                                 |                                                    |                                                     |                                                   |                                 |                               |                                                                                                                                       |                                |                                |                           |                     |             |           |
|----------------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------------------------|---------------------------------------------------|---------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------|---------------------------|---------------------|-------------|-----------|
| VEHICLE NO. 001                                    | VEHICLE NO.<br><b>HEADED 01</b>             | Unit Direction<br><b>NORTH</b>                                                                                                                  | On:<br><b>YUCCA DR NW</b>                          | Left the Scene of the Crash?<br><b>NO</b>           | Posted Speed                                      | Safe Speed                      |                               |                                                                                                                                       |                                |                                |                           |                     |             |           |
|                                                    | Driver's Last Name<br><b>ARMIJO</b>         |                                                                                                                                                 | Driver's First Name<br><b>JOE</b>                  | Driver's Middle Name                                | Driver's Street Address<br><b>1409 55TH ST NW</b> |                                 |                               |                                                                                                                                       |                                |                                |                           |                     |             |           |
|                                                    | Driver's License Number<br><b>012330201</b> | State<br><b>NM</b>                                                                                                                              | Type<br><b>V</b>                                   | Restriction                                         | Endorsements                                      | Expires<br><b>07/13/2020</b>    | City<br><b>ALBUQUERQUE</b>    | Stat<br><b>NM</b>                                                                                                                     | Zip Code<br><b>87105</b>       | Phone<br><b>(505) 831-2385</b> |                           |                     |             |           |
|                                                    | Date of Birth<br><b>06/13/1948</b>          | Occupation                                                                                                                                      |                                                    | Seat Pos<br><b>LF</b>                               | Age<br><b>68</b>                                  | Sex<br><b>M</b>                 | Race<br><b>H</b>              | Injury Code<br><b>C</b>                                                                                                               | OP Code<br><b>6</b>            | OP Used Properly<br><b>YES</b> | Airbag Deploy<br><b>F</b> | Ejected<br><b>N</b> | EMS Num     | Med Trans |
|                                                    | Seat Pos<br><b>RF</b>                       | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip)<br><b>BRADFORD DIANA<br/>2430 RICE NW ALBUQUERQUE NM 87104</b> |                                                    |                                                     | <b>70</b>                                         | <b>F</b>                        | <b>H</b>                      | <b>C</b>                                                                                                                              | <b>6</b>                       | <b>YES</b>                     | <b>F</b>                  | <b>N</b>            |             |           |
|                                                    | Veh. Year<br><b>2010</b>                    | Vehicle Make<br><b>CHEVROLET</b>                                                                                                                | Color<br><b>SILVER - SIL</b>                       | Body Style<br><b>PC</b>                             | Cargo Body Type                                   | Veh. Use<br><b>P</b>            | Veh. Use                      | Veh. Towed?<br><b>YES</b>                                                                                                             | Vehicle Disabled<br><b>YES</b> |                                |                           |                     |             |           |
|                                                    | Lic. Year<br><b>2017</b>                    | State<br><b>NM</b>                                                                                                                              | License Plate Number<br><b>832TFY</b>              | VIN<br><b>1G1AD5F56A7213075</b>                     | DOT #                                             | Damage Severity<br><b>HEAVY</b> |                               | Damage Area<br>1 2 3 4 5<br><br>11'10" 9'8" 7'7" |                                |                                |                           |                     |             |           |
|                                                    | Interstate Carrier?                         | Towed By<br><b>BONES TOWING &amp; SALVAGE</b>                                                                                                   | Towed To<br><b>105 DALE AVE. NE ALBUQUERQUE, N</b> |                                                     | Extent<br><b>DISABLED</b>                         |                                 | 01,11,12                      |                                                                                                                                       |                                |                                |                           |                     |             |           |
|                                                    | Number of Axles                             | Gross Vehicle/Comb Weight Rating                                                                                                                | HazMat Placard?                                    | Hazmat Placard 4-digit OR Hazmat Name AND 1-digit # |                                                   | HazMat Released<br><b>NO</b>    |                               |                                                                                                                                       |                                |                                |                           |                     |             |           |
|                                                    | Carrier's Name                              | Street Address                                                                                                                                  |                                                    | Carrier City                                        |                                                   | State                           | Carrier's Zip                 |                                                                                                                                       |                                |                                |                           |                     |             |           |
| Owner's Last Name<br><b>ARMIJO</b>                 | Owner's First Name<br><b>SALLY</b>          | Owner's Middle Name                                                                                                                             | Owner's Company Name                               |                                                     | 28<br>M 7:59                                      |                                 |                               |                                                                                                                                       |                                |                                |                           |                     |             |           |
| Street Address<br><b>1409 55TH ST NW</b>           |                                             | Owner's City<br><b>ALBUQUERQUE</b>                                                                                                              | State<br><b>NM</b>                                 | Owner Zip<br><b>87105</b>                           | Owner's Phone                                     |                                 |                               |                                                                                                                                       |                                |                                |                           |                     |             |           |
| Insured By: (Name of Company)<br><b>STATE FARM</b> |                                             |                                                                                                                                                 | Policy Number<br><b>712 8896-E08-31L</b>           | Trailer or Towed Vehicles (1)                       | Type                                              | Year                            | Make                          | Lic. Year                                                                                                                             | Lic State                      | License Num                    |                           |                     |             |           |
| Trailer or Towed Vehicles (2)                      | Type                                        | Year                                                                                                                                            | Make                                               | Lic. Year                                           | Lic State                                         | License Num                     | Trailer or Towed Vehicles (3) | Type                                                                                                                                  | Year                           | Make                           | Lic. Year                 | Lic State           | License Num |           |

|                               |                                                                                     |                                                                                     |      |                                           |             |                                       |                  |                                     |                                   |                         |                                                           |                        |                    |               |             |           |           |
|-------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------|-------------------------------------------|-------------|---------------------------------------|------------------|-------------------------------------|-----------------------------------|-------------------------|-----------------------------------------------------------|------------------------|--------------------|---------------|-------------|-----------|-----------|
| VEHICLE NO.<br>HEADED 02      |                                                                                     | Unit Direction<br>EAST                                                              |      | On:<br>AVALON RD NW                       |             |                                       |                  | Left the Scene of the Crash?<br>YES |                                   | Posted Speed            |                                                           | Safe Speed             |                    |               |             |           |           |
| Driver's Last Name            |                                                                                     |                                                                                     |      | Driver's First Name                       |             |                                       |                  | Driver's Middle Name                |                                   | Driver's Street Address |                                                           |                        |                    |               |             |           |           |
| Driver's License Number       |                                                                                     | State                                                                               | Type | Statu                                     | Restriction | Endorsements                          | Expires          | City                                |                                   |                         | Stat                                                      | Zip Code               | Phone              |               |             |           |           |
| Date of Birth                 |                                                                                     | Occupation                                                                          |      |                                           |             |                                       | Seat Pos<br>LF   | Age                                 | Sex                               | Race                    | Injury Code                                               | OP Code                | OP Used Property   | Airbag Deploy | Ejected     | EMS Num   | Med Trans |
| Seat Pos                      | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |                                                                                     |      |                                           |             |                                       |                  |                                     | M                                 | I                       | O                                                         | NA                     | UNK                | N             | N           |           |           |
| Veh. Year<br>2014             |                                                                                     | Vehicle Make<br>NISSAN                                                              |      | Color<br>BLUE, DARK - DBL                 |             | Body Style<br>PC                      | Cargo Body Type  | Veh. Use                            | Veh. Use<br>P                     | Veh. Towed?<br>NO       |                                                           | Vehicle Disabled<br>NO |                    |               |             |           |           |
| Lic. Year<br>2017             | State<br>NM                                                                         | License Plate Number<br>NXB668                                                      |      | VIN<br>1N4AL3AP9EC276438                  |             |                                       | DOT #            |                                     | Damage Severity<br>UNKNOWN        |                         | Damage Area<br>1 2 3 4 5<br>12 16<br>11'10" 9'8" 7'<br>16 |                        |                    |               |             |           |           |
| Interstate Carrier?           |                                                                                     | Towed By                                                                            |      |                                           | Towed To    |                                       |                  | Extent<br>UNKNOWN                   |                                   |                         |                                                           |                        |                    |               |             |           |           |
| Number of Axles               |                                                                                     | Gross Vehicle/Comb Weight Rating                                                    |      | HazMat Placard?                           |             | Hazmat Placard 4-digit OR Hazmat Name |                  |                                     | AND                               | 1-digit #               |                                                           | HazMat Released<br>NO  |                    |               |             |           |           |
| Carrier's Name                |                                                                                     |                                                                                     |      | Street Address                            |             |                                       |                  | Carrier City                        |                                   |                         |                                                           | State                  | Carrier's Zip      |               |             |           |           |
| Owner's Last Name             |                                                                                     |                                                                                     |      | Owner's First Name                        |             |                                       |                  | Owner's Middle Name                 |                                   | Owner's Company Name    |                                                           |                        |                    |               |             |           |           |
| Street Address                |                                                                                     |                                                                                     |      | Owner's City                              |             |                                       |                  | State                               | Owner Zip                         | Owner's Phone           |                                                           |                        |                    |               |             |           |           |
| Insured By: (Name of Company) |                                                                                     |                                                                                     |      | Policy Number                             |             | Trailer or Towed Vehicles (1)         |                  | Type                                | Year                              | Make                    | Lic. Year                                                 | Lic State              | License Num        |               |             |           |           |
| Trailer or Towed Vehicles (2) |                                                                                     | Type                                                                                | Year | Make                                      | Lic. Year   | Lic State                             | License Num      | Trailer or Towed Vehicles (3)       |                                   | Type                    | Year                                                      | Make                   | Lic. Year          | Lic State     | License Num |           |           |
| Veh. Num                      | Seat Pos                                                                            | Occupant's Name (Last First Middle) /<br>Occupant's Address (Street City State Zip) |      |                                           |             |                                       | Age              | Sex                                 | Race                              | Injury Code             | OP Code                                                   | OP Used Property       | Airbag Deploy      | Ejected       | EMS Num     | Med Trans |           |
| COND                          |                                                                                     | Lighting<br>DAYLIGHT                                                                |      | Weather<br>CLEAR                          |             | Road Character<br>STRAIGHT            |                  |                                     |                                   | Road Grade<br>LEVEL     |                                                           |                        |                    | NOV           |             |           |           |
| ROAD                          | VEH NO.<br>01                                                                       | Road Condition<br>DRY                                                               |      | Road Surface<br>PAVED CENTER AND EDGE LIN |             | Traffic Control<br>NO CONTROLS        |                  | Road Lanes<br>2 LANES               | Road Design Div<br>PHYSICAL DIVID |                         | Road Design<br>OTHER                                      |                        |                    |               |             |           |           |
| EVENT                         | APPARENT CONTRIBUTING FACTORS                                                       |                                                                                     |      |                                           |             |                                       | DRIVER'S ACTIONS |                                     |                                   |                         |                                                           |                        | SEQUENCE OF EVENTS |               |             |           |           |
|                               | NONE                                                                                |                                                                                     |      |                                           |             |                                       | GOING STRAIGHT   |                                     |                                   |                         |                                                           |                        | FIRST EVENT        |               |             |           |           |
|                               |                                                                                     |                                                                                     |      |                                           |             |                                       |                  |                                     |                                   |                         |                                                           |                        | SECOND EVENT       |               |             |           |           |
|                               |                                                                                     |                                                                                     |      |                                           |             |                                       |                  |                                     |                                   |                         |                                                           |                        | THIRD EVENT        |               |             |           |           |
|                               |                                                                                     |                                                                                     |      |                                           |             |                                       |                  |                                     |                                   |                         |                                                           | FOURTH EVENT           |                    |               |             |           |           |

160108933

|        |                                         |  |                                            |  |            |                                |  |
|--------|-----------------------------------------|--|--------------------------------------------|--|------------|--------------------------------|--|
| DRIVER | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | PEDESTRIAN | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|        | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |            | At Intersection                |  |
|        | Breath Test Results                     |  | Driver Physical Condition - Other          |  |            | Not At Intersection            |  |
|        |                                         |  |                                            |  |            | Pedestrian Action - Other      |  |

160108933

|      |               |                       |                                           |                              |                       |                                   |                      |
|------|---------------|-----------------------|-------------------------------------------|------------------------------|-----------------------|-----------------------------------|----------------------|
| ROAD | VEH NO.<br>02 | Road Condition<br>DRY | Road Surface<br>PAVED CENTER AND EDGE LIN | Traffic Control<br>STOP SIGN | Road Lanes<br>2 LANES | Road Design Div<br>PHYSICAL DIVID | Road Design<br>OTHER |
|------|---------------|-----------------------|-------------------------------------------|------------------------------|-----------------------|-----------------------------------|----------------------|

|       |                                                                   |  |  |                  |              |                    |  |
|-------|-------------------------------------------------------------------|--|--|------------------|--------------|--------------------|--|
| EVENT | APPARENT CONTRIBUTING FACTORS                                     |  |  | DRIVER'S ACTIONS |              | SEQUENCE OF EVENTS |  |
|       | DRIVER INATTENTION, EXCESSIVE SPEED, FAILED TO YIELD RIGHT OF WAY |  |  | GOING STRAIGHT   |              | FIRST EVENT        |  |
|       |                                                                   |  |  |                  |              | SECOND EVENT       |  |
|       |                                                                   |  |  |                  |              | THIRD EVENT        |  |
|       |                                                                   |  |  |                  | FOURTH EVENT |                    |  |

|        |                                         |  |                                            |  |            |                                |  |
|--------|-----------------------------------------|--|--------------------------------------------|--|------------|--------------------------------|--|
| DRIVER | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | PEDESTRIAN | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|        | SOBRIETY UNKNOWN                        |  | NO APP. DEFECTS                            |  |            | At Intersection                |  |
|        | Breath Test Results                     |  | Driver Physical Condition - Other          |  |            | Not At Intersection            |  |
|        |                                         |  |                                            |  |            | Pedestrian Action - Other      |  |

**NARRATIVE**

V1 WAS NB YUCCA AT AVALON NW. V2 WAS EB AVALON DID NOT SLOW OR STOP FOR STOP SIGN. V2 DID NOT YIELD FOR TRAFFIC CAUSING V1 & V2 TO COLLIDE. AN UNKNOWN FEMALE GOT OUT OF V2. V2 THEN TURNED AROUND PICKED UP THE FEMALE THEN V2 LEFT THE SCENE. WIT STATED HE DID NOT OBSERVE THE ACCIDENT BUT SAW THE FEMALE OUT OF THE VEHICLE, BUNDLED UP SO WIT 1 COULD NOT GET A DESCRIPTION OF THE FEMALE. WIT OBSERVED THE VEH TURN AROUND AND THE FEMALE GET IN. WIT THEN REALIZED THE VEHICLE IS POSSIBLY INVOLVED IN THE ACCIDENT AND GOT THE LICENSE PLATE NUMBER. WIT IS NOT SURE IF THE LICENSE PLATE NUMBER HE GOT IS CORRECT. WIT STATED V2 WAS A NISSAN SEDAN DARK IN COLOR, HE DID NOT THINK IT WAS BLUE OR BLACK. THE DRIVER WAS A MALE POSSIBLY IN HIS 20S, NATIVE AMERICAN, THIN BUILD, WEARING DARK CLOTHING. AT THIS TIME THE VEHICLE WAS NOT LOCATED.

|                         |                        |                                    |  |                     |          |               |  |
|-------------------------|------------------------|------------------------------------|--|---------------------|----------|---------------|--|
| Other Property Involved | Type                   | Description of Property and Damage |  |                     |          |               |  |
|                         | Owner's Last Name      | Owner's First Name                 |  | Owner's Middle Name |          |               |  |
|                         | Owner's Street Address | Owner's City                       |  | State               | Zip Code | Owner's Phone |  |

2016 NOV 28 AM 7:59

|         |                                                       |  |                               |  |                       |                   |                                   |
|---------|-------------------------------------------------------|--|-------------------------------|--|-----------------------|-------------------|-----------------------------------|
| WITNESS | Witness's Last Name<br>VALENCIA                       |  | Witness's First Name<br>BRIAN |  | Witness's Middle Name |                   | Age<br>45                         |
|         | Witness's Street Address<br>1801 SUNSET GARDENS RD SW |  | Witness's City<br>ALBUQUERQUE |  | State<br>NM           | Zip Code<br>87105 | Witness's Phone<br>(505) 480-3412 |

| ENFORCEMENT ACTION - VIOLATIONS |           |            |             |                         |        |  |
|---------------------------------|-----------|------------|-------------|-------------------------|--------|--|
| VEH NO.                         | Last Name | First Name | Middle Name | Violation (Common Name) | Action |  |

|                                    |                       |                              |                     |                           |                                              |                 |
|------------------------------------|-----------------------|------------------------------|---------------------|---------------------------|----------------------------------------------|-----------------|
| Time Notified<br>09:45             | Time Arrived<br>09:53 | Notified By<br>DISPATCH      | Supervisor at Scene |                           | Checked By<br>3345 - BAILEY, C. - 11/25/2016 |                 |
| Officer's Signature<br><i>Dull</i> |                       | Officer's Name<br>MADRID, D. |                     | Rank<br>P1/C              | ID Number<br>2700                            | District<br>114 |
|                                    |                       |                              |                     | Report Date<br>11/17/2016 |                                              |                 |

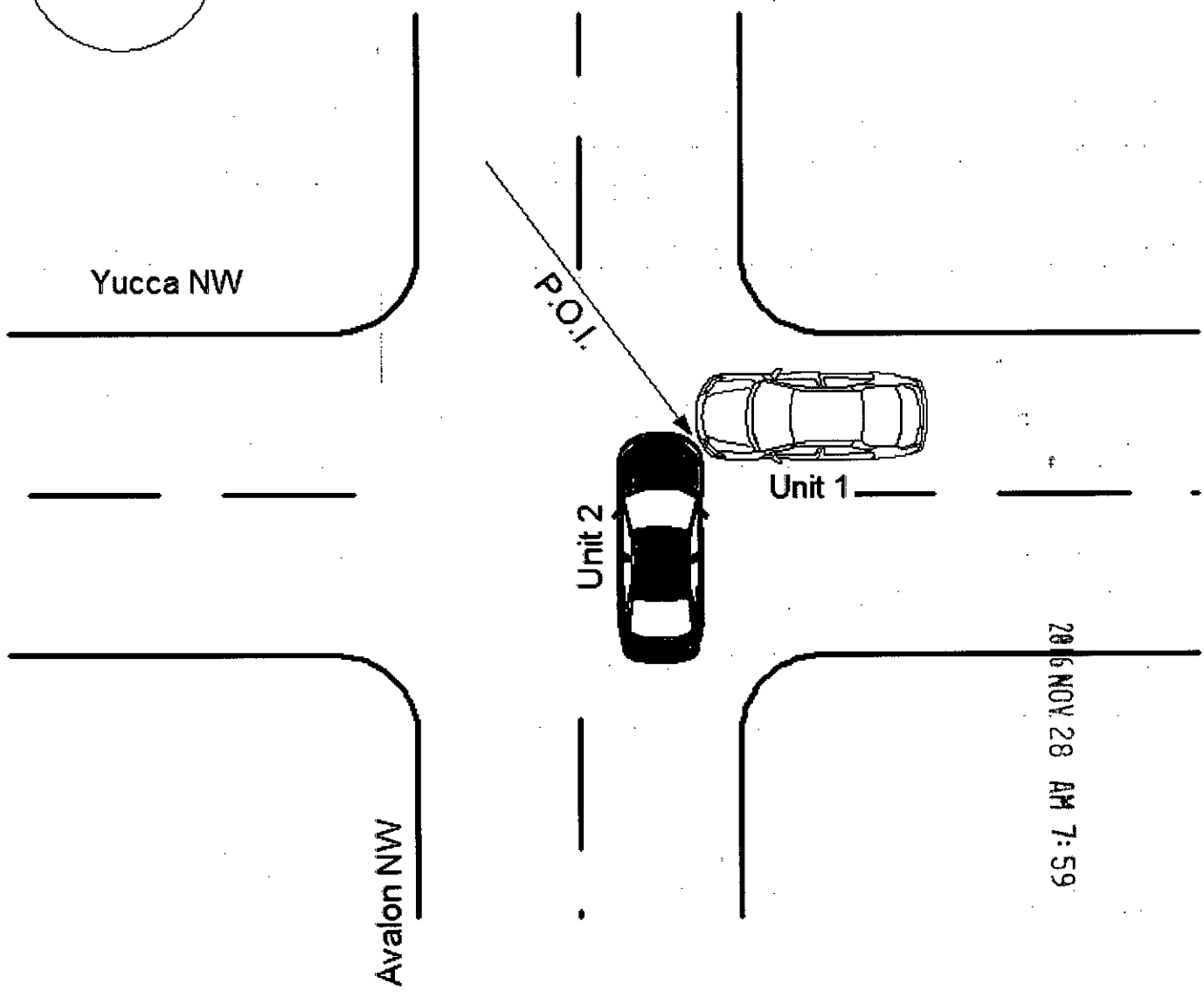
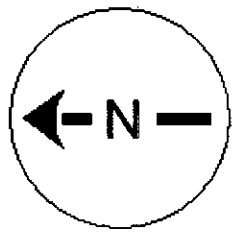
Diagram Drawn By  
MADRID, D.

Measurements Taken By  
NOT TO SCALE

DIAGRAM

160108933

NOT TO SCALE



28 6 NOV 28 AM 7:59

Crash Report Number: 710370007  
Case Number: 160108933

STATE OF NEW MEXICO UNIFORM CRASH REPORT  
NM STATUTE 66-7-209  
ISSUING AGENCY COPY

Sheet 4 Of 4





ALBUQUERQUE POLICE DEPT REPORTING DEPARTMENT

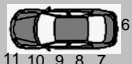
STATE OF NEW MEXICO UNIFORM CRASH REPORT

710402671

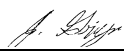
Form containing crash details: Private Property? NO, Fatal Injury checked, Property Damage Only, Case Number: 170016165, NMDOT, CAD Num: 170470851, Crash Date: 02/16/2017, City: ALBUQUERQUE, County: BERNALILLO, Crash Classification: OTHER VEHICLE, Analysis Code: 08 - BOTH GOING STRAIGHT/FROM SAME DIR, Vehicle No. 01, Driver: ROBERT BERG, License: 120482807, Date of Birth: 07/09/1981, Vehicle: 1998 FORD WHITE - WHI, License Plate: 881RYT, VIN: 1FAFP4043WF100234, Insured By: HIGHER GROUND INSURANCE.

VEHICLE NO. 001

Damage Severity: UNKNOWN, Damage Area: 12, Extent: UNKNOWN, Vehicle Disabled: NO, Damage Area Diagram: 1 2 3 4 5 6 7 8 9 10 11 12

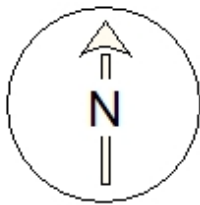
|                                 |                                                                                  |                                                                                  |           |                                |                 |              |                                       |                                     |                               |                 |                         |                                                                                                                            |                  |               |             |             |           |
|---------------------------------|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------|--------------------------------|-----------------|--------------|---------------------------------------|-------------------------------------|-------------------------------|-----------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------|------------------|---------------|-------------|-------------|-----------|
| <b>VEHICLE NO.</b><br>HEADED 02 |                                                                                  | Unit Direction<br>NORTH                                                          |           | On:<br>312 YUCCA DR NW         |                 |              |                                       | Left the Scene of the Crash?<br>YES |                               | Posted Speed    |                         | Safe Speed                                                                                                                 |                  |               |             |             |           |
| Driver's Last Name<br>UNKNOWN   |                                                                                  |                                                                                  |           | Driver's First Name<br>UNKNOWN |                 |              |                                       | Driver's Middle Name                |                               |                 | Driver's Street Address |                                                                                                                            |                  |               |             |             |           |
| Driver's License Number         |                                                                                  | State                                                                            | Type      | Status                         | Restrictions    | Endorsements | Expires                               | City                                |                               |                 | State                   | Zip Code                                                                                                                   | Phone            |               |             |             |           |
| Date of Birth                   |                                                                                  | Occupation                                                                       |           |                                |                 |              | Seat Pos<br>LF                        | Age                                 | Sex                           | Race            | Injury Code             | OP Code                                                                                                                    | OP Used Properly | Airbag Deploy | Ejected     | EMS Num     | Med Trans |
| Seat Pos                        | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                                                                  |           |                                |                 |              |                                       | UN                                  | U                             | O               | O                       | 0                                                                                                                          | UNK              | N             | N           |             | NO        |
|                                 |                                                                                  |                                                                                  |           |                                |                 |              |                                       |                                     |                               |                 |                         |                                                                                                                            |                  |               |             |             |           |
|                                 |                                                                                  |                                                                                  |           |                                |                 |              |                                       |                                     |                               |                 |                         |                                                                                                                            |                  |               |             |             |           |
|                                 |                                                                                  |                                                                                  |           |                                |                 |              |                                       |                                     |                               |                 |                         |                                                                                                                            |                  |               |             |             |           |
|                                 |                                                                                  |                                                                                  |           |                                |                 |              |                                       |                                     |                               |                 |                         |                                                                                                                            |                  |               |             |             |           |
| Veh. Year                       | Vehicle Make                                                                     |                                                                                  | Color     |                                |                 | Body Style   | Cargo Body Type                       | Veh. Use1                           | Veh. Use2                     | Veh. Towed?     |                         | Vehicle Disabled                                                                                                           |                  |               |             |             |           |
| 2000                            | DODGE                                                                            |                                                                                  | RED - RED |                                |                 | PC           |                                       |                                     | P                             | NO              |                         | NO                                                                                                                         |                  |               |             |             |           |
| Lic. Year                       | State                                                                            | License Plate Number                                                             |           |                                | VIN             |              |                                       | DOT #                               |                               | Damage Severity |                         | Damage Area                                                                                                                |                  |               |             |             |           |
|                                 | NM                                                                               |                                                                                  |           |                                |                 |              |                                       |                                     |                               | UNKNOWN         |                         | 1 2 3 4 5<br>12  6<br>11 10 9 8 7<br>12 |                  |               |             |             |           |
| Interstate Carrier?             |                                                                                  | Towed By                                                                         |           |                                | Towed To        |              |                                       |                                     |                               | Extent          |                         |                                                                                                                            |                  |               |             |             |           |
|                                 |                                                                                  |                                                                                  |           |                                |                 |              |                                       |                                     |                               | UNKNOWN         |                         |                                                                                                                            |                  |               |             |             |           |
| Number of Axles                 |                                                                                  | Gross Vehicle/Comb Weight Rating                                                 |           |                                | HazMat Placard? |              | Hazmat Placard 4-digit OR Hazmat Name |                                     |                               | AND             | 1-digit #               | HazMat Released                                                                                                            |                  |               |             |             |           |
|                                 |                                                                                  |                                                                                  |           |                                |                 |              |                                       |                                     |                               |                 |                         | NO                                                                                                                         |                  |               |             |             |           |
| Carrier's Name                  |                                                                                  |                                                                                  |           | Street Address                 |                 |              |                                       | Carrier City                        |                               |                 |                         | State                                                                                                                      | Carrier's Zip    |               |             |             |           |
| Owner's Last Name<br>UNKNOWN    |                                                                                  |                                                                                  |           | Owner's First Name<br>UNKNOWN  |                 |              |                                       | Owner's Middle Name                 |                               |                 | Owner's Company Name    |                                                                                                                            |                  |               |             |             |           |
| Street Address                  |                                                                                  |                                                                                  |           | Owner's City                   |                 |              |                                       | State                               | Owner Zip                     |                 | Owner's Phone           |                                                                                                                            |                  |               |             |             |           |
| Insured By: (Name of Company)   |                                                                                  |                                                                                  |           |                                | Policy Number   |              |                                       | Trailer or Towed Vehicles (1)       |                               | Type            | Year                    | Make                                                                                                                       | Lic. Year        | Lic State     | License Num |             |           |
| Trailer or Towed Vehicles (2)   |                                                                                  | Type                                                                             | Year      | Make                           | Lic. Year       | Lic State    | License Num                           |                                     | Trailer or Towed Vehicles (3) |                 | Type                    | Year                                                                                                                       | Make             | Lic. Year     | Lic State   | License Num |           |
| Veh. Num                        | Seat Pos                                                                         | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |           |                                |                 |              |                                       | Age                                 | Sex                           | Race            | Injury Code             | OP Code                                                                                                                    | OP Used Properly | Airbag Deploy | Ejected     | EMS Num     | Med Trans |
|                                 |                                                                                  |                                                                                  |           |                                |                 |              |                                       |                                     |                               |                 |                         |                                                                                                                            |                  |               |             |             |           |
| <b>COND</b>                     | Lighting<br>DAYLIGHT                                                             |                                                                                  |           | Weather<br>CLEAR               |                 |              |                                       | Road Character<br>STRAIGHT          |                               |                 |                         | Road Grade<br>LEVEL                                                                                                        |                  |               |             |             |           |

|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------|------------------------------------------|-----------------------------|------------------------------------------|
| <b>ROAD</b>                                                                                                                                                                                                                                                                                                                    | VEH NO.<br><b>01</b>                                        | Road Condition<br><b>DRY</b>       | Road Surface<br><b>PAVED CENTER STRIPE</b> | Traffic Control<br><b>OTHER</b>            | Road Lanes<br><b>1 LANE</b> | Road Design Div<br><b>PAINTED DIVIDE</b> | Road Design<br><b>OTHER</b> |                                          |
| <b>EVENT</b>                                                                                                                                                                                                                                                                                                                   | APPARENT CONTRIBUTING FACTORS                               |                                    |                                            |                                            | DRIVER'S ACTIONS            |                                          | SEQUENCE OF EVENTS          |                                          |
|                                                                                                                                                                                                                                                                                                                                | NONE                                                        |                                    |                                            |                                            | GOING STRAIGHT              |                                          | FIRST EVENT<br><b>MVT</b>   |                                          |
|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          | SECOND EVENT                |                                          |
|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          | THIRD EVENT                 |                                          |
| <b>DRIVER</b>                                                                                                                                                                                                                                                                                                                  | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY                     |                                    |                                            | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |                             | PEDESTRIAN/PEDALCYCLIST ACTION           |                             |                                          |
|                                                                                                                                                                                                                                                                                                                                | HAD NOT CONSUMED ALCOHOL                                    |                                    |                                            | NO APP. DEFECTS                            |                             | At Intersection                          |                             |                                          |
|                                                                                                                                                                                                                                                                                                                                | Breath Test Results                                         |                                    |                                            | Driver Physical Condition - Other          |                             | Not At Intersection                      |                             |                                          |
| <b>PEDESTRIAN</b>                                                                                                                                                                                                                                                                                                              |                                                             |                                    |                                            |                                            |                             |                                          | PEDESTRIAN ACTION - Other   |                                          |
|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
| <b>ROAD</b>                                                                                                                                                                                                                                                                                                                    | VEH NO.<br><b>02</b>                                        | Road Condition<br><b>DRY</b>       | Road Surface<br><b>PAVED CENTER STRIPE</b> | Traffic Control<br><b>OTHER</b>            | Road Lanes<br><b>1 LANE</b> | Road Design Div<br><b>PAINTED DIVIDE</b> | Road Design<br><b>OTHER</b> |                                          |
| <b>EVENT</b>                                                                                                                                                                                                                                                                                                                   | APPARENT CONTRIBUTING FACTORS                               |                                    |                                            |                                            | DRIVER'S ACTIONS            |                                          | SEQUENCE OF EVENTS          |                                          |
|                                                                                                                                                                                                                                                                                                                                | DRIVER INATTENTION, EXCESSIVE SPEED, OTHER IMPROPER DRIVING |                                    |                                            |                                            | GOING STRAIGHT              |                                          | FIRST EVENT<br><b>MVT</b>   |                                          |
|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          | SECOND EVENT                |                                          |
|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          | THIRD EVENT                 |                                          |
| <b>DRIVER</b>                                                                                                                                                                                                                                                                                                                  | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY                     |                                    |                                            | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |                             | PEDESTRIAN/PEDALCYCLIST ACTION           |                             |                                          |
|                                                                                                                                                                                                                                                                                                                                | HAD NOT CONSUMED ALCOHOL                                    |                                    |                                            | NO APP. DEFECTS                            |                             | At Intersection                          |                             |                                          |
|                                                                                                                                                                                                                                                                                                                                | Breath Test Results                                         |                                    |                                            | Driver Physical Condition - Other          |                             | Not At Intersection                      |                             |                                          |
| <b>PEDESTRIAN</b>                                                                                                                                                                                                                                                                                                              |                                                             |                                    |                                            |                                            |                             |                                          | PEDESTRIAN ACTION - Other   |                                          |
|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
|                                                                                                                                                                                                                                                                                                                                |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
| <b>NARRATIVE</b>                                                                                                                                                                                                                                                                                                               |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
| DRIVER 1 STATED HE WAS TRAVELING NB ON YUCCA DR WHEN HE WAS STRUCK BY VEHICLE 2. DRIVER 1 STATED THAT HE WAS PULLING ONTO THE SHOULDER WHEN VEHICLE 2 DID NOT SLOW DOWN STRIKING VEHICLE 1 FROM BEHIND. DRIVER DID HAVE COMPLAINTS OF ARM PAIN BUT WAS CLEARED BY RESCUE. DRIVER 1 WAS ABLE TO DRIVE VEHICLE 1 FROM THE SCENE. |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
| WITNESS 1 STATED SHE OBSERVED VEHICLE 1 AND 2 BOTH TRAVELING NB ON YUCCA DR WHEN VEHICLE 2 COLLIDED INTO VEHICLE 1. WITNESS 1 STATED THAT VEHICLE 1 WAS PULLING OFF ONTO THE SHOULDER TO STOP BUT VEHICLE 2 DID NOT SLOW DOWN CAUSING THEM TO COLLIDE.                                                                         |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
| VEHICLE 2 WAS DESCRIBED AS A RED AND BLACK DODGE CHARGER. NO LICENSE PLATE COULD BE OBTAINED. VEHICLE 2 DID FLEE THE SCENE.                                                                                                                                                                                                    |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
| <b>Other Property Involved</b>                                                                                                                                                                                                                                                                                                 | Type                                                        | Description of Property and Damage |                                            |                                            |                             |                                          |                             |                                          |
|                                                                                                                                                                                                                                                                                                                                | Owner's Last Name                                           |                                    | Owner's First Name                         |                                            |                             | Owner's Middle Name                      |                             |                                          |
|                                                                                                                                                                                                                                                                                                                                | Owner's Street Address                                      |                                    |                                            | Owner's City                               |                             | State                                    | Zip Code                    | Owner's Phone                            |
| <b>WITNESS</b>                                                                                                                                                                                                                                                                                                                 | Witness's Last Name<br><b>CHAVEZ</b>                        |                                    |                                            | Witness's First Name<br><b>JUDY</b>        |                             | Witness's Middle Name                    |                             | Age<br><b>56</b>                         |
|                                                                                                                                                                                                                                                                                                                                | Witness's Street Address<br><b>316 YUCCA DR NW</b>          |                                    |                                            | Witness's City<br><b>ALBUQUERQUE</b>       |                             | State<br><b>NM</b>                       | Zip Code<br><b>87105</b>    | Witness's Phone<br><b>(505) 907-6215</b> |
| <b>ENFORCEMENT ACTION - VIOLATIONS</b>                                                                                                                                                                                                                                                                                         |                                                             |                                    |                                            |                                            |                             |                                          |                             |                                          |
| VEH NO.                                                                                                                                                                                                                                                                                                                        | Last Name                                                   |                                    | First Name                                 |                                            | Middle Name                 | Violation (Common Name)                  |                             | Action                                   |

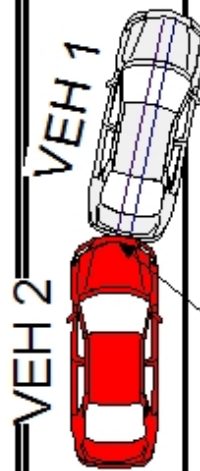
|                                                                                                          |                                        |                                |                                        |                          |                        |                                  |
|----------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------|----------------------------------------|--------------------------|------------------------|----------------------------------|
| Time Notified<br><b>15:12</b>                                                                            | Time Arrived<br><b>15:18</b>           | Notified By<br><b>DISPATCH</b> | Supervisor at Scene<br><b>SGT BACA</b> |                          |                        |                                  |
| Checked By<br><b>3065 - BACA, DAVID - 2/23/2017</b>                                                      |                                        |                                |                                        |                          |                        |                                  |
| Officer's Signature<br> | Officer's Name<br><b>GRIEGO, JONAH</b> |                                | Rank<br><b>PSA</b>                     | ID Number<br><b>5769</b> | District<br><b>115</b> | Report Date<br><b>02/16/2017</b> |

DIAGRAM

NOT TO SCALE



YUCCA DR NW



312  
YUCCA DR  
NW

A.O.I.

**ALBUQUERQUE POLICE DEPT**  
 REPORTING DEPARTMENT

T042009M

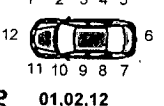
710367166

|                                     |                                                        |                                                                                                                   |                                                          |                               |
|-------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------|
| Private Property?<br><b>NO</b>      | <input type="checkbox"/> Fatal Injury                  | Property Damage Only<br><input type="checkbox"/> Under \$500<br><input checked="" type="checkbox"/> \$500 or More | Hit and Run?<br><b>NO</b>                                | Case Number: <b>170020959</b> |
| Crash Date<br><b>03/02/2017</b>     |                                                        | Military Time<br><b>19:43</b>                                                                                     | City Occurred In<br><b>ALBUQUERQUE</b>                   | County<br><b>BERNALILLO</b>   |
| Day of Week<br><b>THURSDAY</b>      | Occurred On: (Route No. or Name)<br><b>YUCCA DR NW</b> |                                                                                                                   | At Intersection With:<br><b>AVALON RD NW</b>             | Tribal Land?<br><b>NO</b>     |
| Other Location                      | Measurement                                            | Direction                                                                                                         | Permanent Landmark - County Line - Intersection          | Milepost<br>Lat:<br>Long:     |
| Crash Occurred<br><b>ON ROADWAY</b> | Crash Classification<br><b>OTHER VEHICLE</b>           |                                                                                                                   | Analysis Code<br><b>22 - SIDESWIPE COLL/FROM OPP DIR</b> |                               |

VEHICLE NO. 001

|                                                                                  |                                       |                                                  |                                           |                                                        |                              |
|----------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------|-------------------------------------------|--------------------------------------------------------|------------------------------|
| VEHICLE NO.<br><b>HEADED 01</b>                                                  | Unit Direction<br><b>EAST</b>         | On:<br><b>AVALON RD NW</b>                       | Left the Scene of the Crash?<br><b>NO</b> | Posted Speed<br><b>30</b>                              | Safe Speed<br><b>30</b>      |
| Driver's Last Name<br><b>GUZMAN PEREZ</b>                                        |                                       | Driver's First Name<br><b>JACOBO</b>             | Driver's Middle Name<br><b>ELIAS</b>      | Driver's Street Address<br><b>643 RED BLUFF AVE SW</b> |                              |
| Driver's License Number<br><b>515028137</b>                                      | State<br><b>NM</b>                    | Type<br><b>D</b>                                 | Statu<br><b>V</b>                         | Restriction                                            | Endorsements                 |
| Expires<br><b>05/17/2018</b>                                                     |                                       | City<br><b>ALBUQUERQUE</b>                       |                                           | Stat<br><b>NM</b>                                      | Zip Code<br><b>87105</b>     |
| Date of Birth<br><b>04/17/1997</b>                                               | Occupation                            |                                                  | Seat Pos<br><b>LF</b>                     | Age                                                    | Sex                          |
| Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                       | Age                                              | Sex                                       | Race                                                   | Injury Code                  |
| Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                       | OP Code                                          | OP Used Properly                          | Airbag Deploy                                          | Ejected                      |
| Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                       | EMS Num                                          | Med Trans                                 |                                                        |                              |
| Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                       |                                                  |                                           |                                                        |                              |
| Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                       |                                                  |                                           |                                                        |                              |
| Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                       |                                                  |                                           |                                                        |                              |
| Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                       |                                                  |                                           |                                                        |                              |
| Veh. Year<br><b>2003</b>                                                         | Vehicle Make<br><b>CHEVROLET</b>      | Color<br><b>SILVER - SIL</b>                     | Body Style<br><b>PC</b>                   | Cargo Body Type                                        | Veh. Use<br><b>P</b>         |
| Lic. Year<br><b>2018</b>                                                         | State<br><b>NM</b>                    | License Plate Number<br><b>PAX503</b>            | VIN<br><b>1G1JC12F837376744</b>           | DOT #                                                  |                              |
| Interstate Carrier?                                                              | Towed By<br><b>TOWN &amp; COUNTRY</b> | Towed To<br><b>150 WOODWARD RD. SE ALBUQUERQ</b> |                                           |                                                        |                              |
| Number of Axles                                                                  | Gross Vehicle/Comb Weight Rating      | HazMat Placard?                                  | Hazmat Placard 4-digit OR Hazmat Name     | AND                                                    | 1-digit #                    |
| Carrier's Name                                                                   |                                       | Street Address                                   | Carrier City                              |                                                        | HazMat Released<br><b>NO</b> |
| Owner's Last Name                                                                |                                       | Owner's First Name                               | Owner's Middle Name                       | Owner's Company Name                                   |                              |
| Street Address                                                                   |                                       | Owner's City                                     | State                                     | Owner Zip                                              | Owner's Phone                |
| Insured By: (Name of Company)<br><b>SNAP INSURANCE</b>                           |                                       | Policy Number<br><b>SNA053874-000</b>            | Trailer or Towed Vehicles (1)             | Type                                                   | Year                         |
| Trailer or Towed Vehicles (2)                                                    | Type                                  | Year                                             | Make                                      | Lic. Year                                              | Lic State                    |
| Trailer or Towed Vehicles (3)                                                    | Type                                  | Year                                             | Make                                      | Lic. Year                                              | Lic State                    |

2017 MAR - 6 AM 9:41



|                                              |                                                                                                                                              |                                                                                              |                                |                               |                                           |                                       |                              |                                    |                                          |                                   |                                              |                                                                                      |                         |                 |               |                 |
|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--------------------------------|-------------------------------|-------------------------------------------|---------------------------------------|------------------------------|------------------------------------|------------------------------------------|-----------------------------------|----------------------------------------------|--------------------------------------------------------------------------------------|-------------------------|-----------------|---------------|-----------------|
| <b>VEHICLE NO.</b><br>HEADED 02              |                                                                                                                                              | Unit Direction<br>NORTH                                                                      |                                | On:<br>YUCCA DR NW            |                                           |                                       |                              | Left the Scene of the Crash?<br>NO |                                          | Posted Speed<br>30                |                                              | Safe Speed<br>30                                                                     |                         |                 |               |                 |
| Driver's Last Name<br>APODACA                |                                                                                                                                              |                                                                                              |                                | Driver's First Name<br>RICKEY |                                           |                                       | Driver's Middle Name<br>M    |                                    | Driver's Street Address<br>1419 CRESCENT |                                   |                                              |                                                                                      |                         |                 |               |                 |
| Driver's License Number<br>120371762         |                                                                                                                                              | State<br>NM                                                                                  | Type<br>D                      | Statu<br>V                    | Restriction                               | Endorsements<br>W                     | Expires<br>09/12/2022        | City<br>ALBUQUERQUE                |                                          |                                   | Stat<br>NM                                   | Zip Code<br>87105                                                                    | Phone<br>(505) 417-3344 |                 |               |                 |
| Date of Birth<br>08/12/1982                  |                                                                                                                                              | Occupation                                                                                   |                                |                               |                                           | Seat Pos<br>LF                        | Age<br>34                    | Sex<br>M                           | Race<br>H                                | Injury Code<br>C                  | OP Code<br>6                                 | OP Used Properly<br>YES                                                              | Airbag Deploy<br>B      | Ejected<br>N    | EMS Num<br>14 | Med Trans<br>NO |
| Seat Pos<br>RF                               | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip)<br>APODACA KRYSTLE<br>1419 CRESCENT SW ALBUQUERQUE NM 87105 |                                                                                              |                                |                               | Age<br>34                                 | Sex<br>F                              | Race<br>C                    | Injury Code<br>O                   | OP Code<br>6                             | OP Used Properly<br>YES           | Airbag Deploy<br>B                           | Ejected<br>N                                                                         | EMS Num<br>14           | Med Trans<br>NO |               |                 |
| Veh. Year<br>2007                            |                                                                                                                                              | Vehicle Make<br>FORD                                                                         |                                | Color<br>RED - RED            |                                           | Body Style<br>PK                      | Cargo Body Type              | Veh. Use<br>P                      | Veh. Towed?<br>YES                       |                                   | Vehicle Disabled<br>YES                      |                                                                                      |                         |                 |               |                 |
| Lic. Year<br>2017                            |                                                                                                                                              | State<br>NM                                                                                  | License Plate Number<br>JAH577 |                               | VIN<br>1FTPW14VX7KD44295                  |                                       | DOT #                        |                                    | Damage Severity<br>HEAVY                 |                                   | Damage Area<br>1 2 3 4 5<br>11 10 9 8 7<br>6 |                                                                                      |                         |                 |               |                 |
| Interstate Carrier?<br>TOWN & COUNTRY        |                                                                                                                                              | Towed By                                                                                     |                                |                               | Towed To<br>150 WOODWARD RD. SE ALBUQUERQ |                                       |                              |                                    |                                          |                                   |                                              | Extent<br>DISABLED                                                                   |                         |                 |               |                 |
| Number of Axles                              |                                                                                                                                              | Gross Vehicle/Comb Weight Rating                                                             |                                | HazMat Placard?               |                                           | Hazmat Placard 4-digit OR Hazmat Name |                              |                                    | AND                                      |                                   | 1-digit #                                    |                                                                                      | HazMat Released<br>NO   |                 |               |                 |
| Carrier's Name                               |                                                                                                                                              |                                                                                              |                                | Street Address                |                                           |                                       |                              | Carrier City                       |                                          |                                   |                                              | State                                                                                |                         | Carrier's Zip   |               |                 |
| Owner's Last Name                            |                                                                                                                                              |                                                                                              |                                | Owner's First Name            |                                           |                                       | Owner's Middle Name          |                                    | Owner's Company Name                     |                                   |                                              |                                                                                      |                         |                 |               |                 |
| Street Address                               |                                                                                                                                              |                                                                                              |                                | Owner's City                  |                                           |                                       |                              | State                              |                                          | Owner Zip                         |                                              | Owner's Phone                                                                        |                         |                 |               |                 |
| Insured By: (Name of Company)<br>PROGRESSIVE |                                                                                                                                              |                                                                                              |                                | Policy Number<br>25762902     |                                           | Trailer or Towed Vehicles (1)         |                              | Type                               | Year                                     | Make                              | Lic. Year                                    | Lic State                                                                            | License Num             |                 |               |                 |
| Trailer or Towed Vehicles (2)                |                                                                                                                                              | Type                                                                                         | Year                           | Make                          | Lic. Year                                 | Lic State                             | License Num                  |                                    | Trailer or Towed Vehicles (3)            |                                   | Type                                         | Year                                                                                 | Make                    | Lic. Year       | Lic State     | License Num     |
| Veh. Num                                     | Seat Pos                                                                                                                                     | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip)             |                                |                               |                                           | Age                                   | Sex                          | Race                               | Injury Code                              | OP Code                           | OP Used Properly                             | Airbag Deploy                                                                        | Ejected                 | EMS Num         | Med Trans     |                 |
|                                              |                                                                                                                                              |                                                                                              |                                |                               |                                           |                                       |                              |                                    |                                          |                                   |                                              |                                                                                      |                         |                 |               |                 |
| <b>COND</b>                                  |                                                                                                                                              | Lighting<br>DARK LIGHTED                                                                     |                                | Weather<br>CLEAR              |                                           | Road Character<br>STRAIGHT            |                              |                                    | Road Grade<br>LEVEL                      |                                   |                                              |                                                                                      |                         |                 |               |                 |
| <b>ROAD</b>                                  |                                                                                                                                              | VEH NO.<br>01                                                                                | Road Condition<br>DRY          |                               | Road Surface<br>PAVED CENTER STRIPE       |                                       | Traffic Control<br>STOP SIGN |                                    | Road Lanes<br>2 LANES                    | Road Design Div<br>PAINTED DIVIDE |                                              | Road Design<br>OTHER                                                                 |                         |                 |               |                 |
| <b>EVENT</b>                                 |                                                                                                                                              | APPARENT CONTRIBUTING FACTORS<br>EXCESSIVE SPEED, INADEQUATE BRAKES, OTHER MECHANICAL DEFECT |                                |                               |                                           |                                       |                              | DRIVER'S ACTIONS<br>GOING STRAIGHT |                                          |                                   |                                              | SEQUENCE OF EVENTS<br>FIRST EVENT MVT<br>SECOND EVENT<br>THIRD EVENT<br>FOURTH EVENT |                         |                 |               |                 |

170020959

VEHICLE NO. 002

2017 MAR 1

170020959

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

|             |               |                       |                                     |                                |                       |                                   |                      |
|-------------|---------------|-----------------------|-------------------------------------|--------------------------------|-----------------------|-----------------------------------|----------------------|
| <b>ROAD</b> | VEH NO.<br>02 | Road Condition<br>DRY | Road Surface<br>PAVED CENTER STRIPE | Traffic Control<br>NO CONTROLS | Road Lanes<br>2 LANES | Road Design Div<br>PHYSICAL DIVID | Road Design<br>OTHER |
|-------------|---------------|-----------------------|-------------------------------------|--------------------------------|-----------------------|-----------------------------------|----------------------|

|              |                               |  |  |                  |              |                        |  |
|--------------|-------------------------------|--|--|------------------|--------------|------------------------|--|
| <b>EVENT</b> | APPARENT CONTRIBUTING FACTORS |  |  | DRIVER'S ACTIONS |              | SEQUENCE OF EVENTS     |  |
|              | NONE                          |  |  | GOING STRAIGHT   |              | FIRST EVENT <b>MVT</b> |  |
|              |                               |  |  |                  |              | SECOND EVENT           |  |
|              |                               |  |  |                  |              | THIRD EVENT            |  |
|              |                               |  |  |                  | FOURTH EVENT |                        |  |

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

**NARRATIVE**

ON 3/2/2017 I WAS DISPATCHED TO THE INTERSECTION OF YUCCA NW AND AVALON NW REFERENCE A TRAFFIC ACCIDENT. I ARRIVED ON SCENE AND OBSERVED VEHICLE 1 AND VEHICLE ON YUCCA NORTH OF AVALON NW. VEHICLE 1 WAS AGAINST A CURB WITH EXTENSIVE DAMAGE FACING NORTHBOUND YUCCA. VEHICLE 2 WAS OFF THE ROAD ON THE PROPERTY OF 301 YUCCA NW THROUGH A DAMAGED FENCE. VEHICLE 2 WAS ALSO HIGHLY DAMAGED. ALL PERSONS INVOLVED WERE ASSESSED BY ALBUQUERQUE AMBULANCE AND REFUSED TRANSPORT.

I SPOKE WITH PASSENGER 1 WHO SAID DRIVER 1 DROVE THROUGH A STOP SIGN AND VEHICLE 2 STRUCK VEHICLE 1. DRIVER 1 TOLD OFFICERS HE WAS DRIVING EASTBOUND ON AVALON WHEN HE REALIZED HIS BRAKES WERE ACTING WEIRD. DRIVER 1 SAID HE TRIED TO USE HIS BRAKES AS HE DROVE THROUGH THE INTERSECTION OF 55TH STREET AND AVALON RD NW BUT WOULD NOT STOP. DRIVER 1 SAID HE DID NOT SUFFER ANY INJURIES FROM THE ACCIDENT. VEHICLE 1 WAS TOWED FROM THE SCENE.

I SPOKE WITH DRIVER 2 WHO SAID HIS LEFT WRIST HURT FROM THE ACCIDENT. PASSENGER 2 STATED SHE DID NOT NEED MEDICAL ATTENTION. DRIVER 2 TOLD ME HE DROVE NORTHBOUND ON YUCCA NW WHEN VEHICLE 2 DROVE THROUGH THE STOP SIGN AND STRUCK THERE VEHICLE VEERING THEM INTO THE FENCE AT 301 YUCCA NW. DRIVER 2 SAID HE OBTAINED WITNESS INFORMATION. VEHICLE 2 WAS TOWED FROM THE SCENE.

I WAS APPROACHED BY PROPERTY OWNER OF 301 YUCCA NW WHO SAID HER FENCE WAS DAMAGED FROM THE TRAFFIC ACCIDENT.

|                                |                                           |                                                        |             |                     |                                 |  |  |
|--------------------------------|-------------------------------------------|--------------------------------------------------------|-------------|---------------------|---------------------------------|--|--|
| <b>Other Property Involved</b> | Type<br>P                                 | Description of Property and Damage<br>CHAIN LINK FENCE |             |                     |                                 |  |  |
|                                | Owner's Last Name<br>ROMERO               | Owner's First Name<br>OLIVIA                           |             | Owner's Middle Name |                                 |  |  |
|                                | Owner's Street Address<br>304 YUCCA DR NW | Owner's City<br>ALBUQUERQUE                            | State<br>NM | Zip Code<br>87105   | Owner's Phone<br>(505) 550-9420 |  |  |

2017 MAR 5 PM 9:44

|                |                                     |  |                                 |  |                       |                   |                                   |
|----------------|-------------------------------------|--|---------------------------------|--|-----------------------|-------------------|-----------------------------------|
| <b>WITNESS</b> | Witness's Last Name<br>MONTES       |  | Witness's First Name<br>MELISSA |  | Witness's Middle Name |                   | Age                               |
|                | Witness's Street Address<br>UNKNOWN |  | Witness's City<br>UNKNOWN       |  | State<br>NM           | Zip Code<br>00000 | Witness's Phone<br>(505) 504-9667 |

| ENFORCEMENT ACTION - VIOLATIONS |                       |                         |                             |                                                |        |  |
|---------------------------------|-----------------------|-------------------------|-----------------------------|------------------------------------------------|--------|--|
| VEH NO.                         | Last Name             | First Name              | Middle Name                 | Violation (Common Name)                        | Action |  |
| Time Notified<br>19:44          | Time Arrived<br>19:51 | Notified By<br>DISPATCH | Supervisor at Scene<br>NONE | Checked By<br>5238 - GOMEZ, GUSTAVO - 3/2/2017 |        |  |

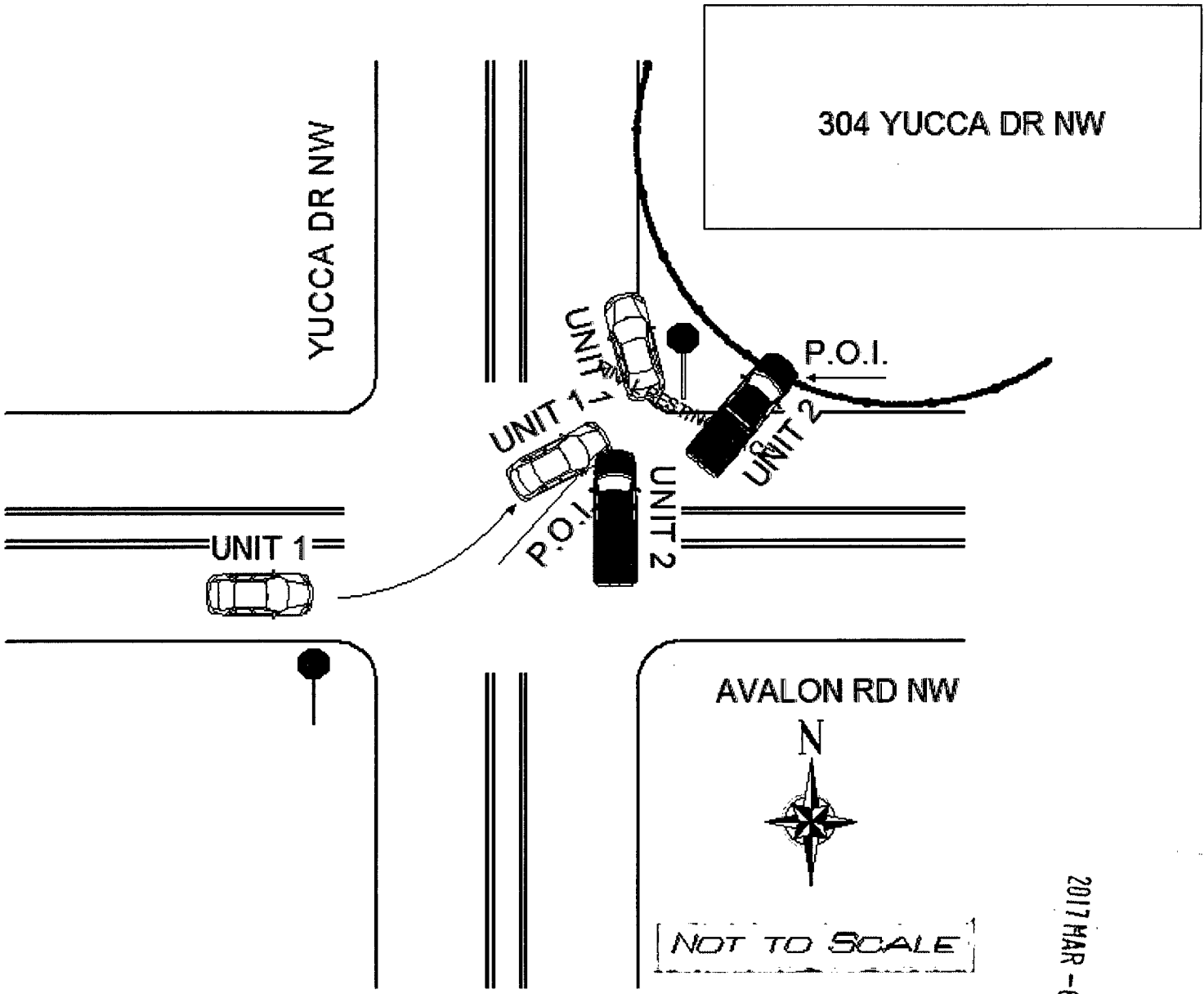


|                                                                                                         |                                      |                     |                          |                        |                                  |
|---------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------|--------------------------|------------------------|----------------------------------|
| Officer's Signature<br> | Officer's Name<br><b>ACCILIE, M.</b> | Rank<br><b>P1/C</b> | ID Number<br><b>5453</b> | District<br><b>114</b> | Report Date<br><b>03/02/2017</b> |
|---------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------|--------------------------|------------------------|----------------------------------|

170020959

2017 MAR -5 AM 9:44

DIAGRAM



2017 MAR -6 AM 9:44

CRASH INVESTIGATION SH 10074 REVISED MAR. 6 2009 NMDOT UCR E MAR. 2009 T042009M

17-124424

STATE OF NEW MEXICO UNIFORM CRASH REPORT

710454268

ALBUQUERQUE POLICE DEPT REPORTING DEPARTMENT

|                                     |                                                        |                                                                                                                   |                                                 |                                    |                           |
|-------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|------------------------------------|---------------------------|
| Private Property?<br><b>NO</b>      | <input type="checkbox"/> Fatal Injury                  | Property Damage Only<br><input type="checkbox"/> Under \$500<br><input checked="" type="checkbox"/> \$500 or More | Hit and Run?<br><b>NO</b>                       | Case Number: <b>170124424</b>      |                           |
|                                     |                                                        |                                                                                                                   |                                                 | NMDOT:                             | CAD Num: <b>173561033</b> |
| Crash Date<br><b>12/22/2017</b>     | Military Time<br><b>16:51</b>                          | City Occurred In<br><b>ALBUQUERQUE</b>                                                                            | County<br><b>BERNALILLO</b>                     |                                    |                           |
| Day of Week<br><b>FRIDAY</b>        | Occurred On: (Route No. or Name)<br><b>YUCCA DR NW</b> |                                                                                                                   | At Intersection With:<br><b>CENTRAL AVE</b>     |                                    | Tribal Land?<br><b>NO</b> |
| Other Location                      | Measurement                                            | Direction                                                                                                         | Permanent Landmark - County Line - Intersection |                                    | Milepost<br>Lat:<br>Long: |
| Crash Occurred<br><b>ON ROADWAY</b> |                                                        | Crash Classification<br><b>OTHER VEHICLE</b>                                                                      |                                                 | Analysis Code<br><b>47 - OTHER</b> |                           |

|                                                |                                             |                                                                                  |                                      |                                       |                               |                              |                                                       |                                    |                              |                                                           |                                |                           |                     |         |                        |
|------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------|--------------------------------------|---------------------------------------|-------------------------------|------------------------------|-------------------------------------------------------|------------------------------------|------------------------------|-----------------------------------------------------------|--------------------------------|---------------------------|---------------------|---------|------------------------|
| VEHICLE NO. 001                                | VEHICLE NO. HEADED                          | Unit Direction                                                                   | On:                                  |                                       |                               | Left the Scene of the Crash? | Posted Speed                                          | Safe Speed                         |                              |                                                           |                                |                           |                     |         |                        |
|                                                | <b>01</b>                                   | <b>SOUTH</b>                                                                     | <b>YUCCA DR NW</b>                   |                                       |                               | <b>NO</b>                    |                                                       |                                    |                              |                                                           |                                |                           |                     |         |                        |
|                                                | Driver's Last Name<br><b>FERNANDEZ</b>      |                                                                                  | Driver's First Name<br><b>ARTURO</b> |                                       | Driver's Middle Name          |                              | Driver's Street Address<br><b>9600 CENTRAL AVE SW</b> |                                    |                              |                                                           |                                |                           |                     |         |                        |
|                                                | Driver's License Number<br><b>514961191</b> | State<br><b>MA</b>                                                               | Type<br><b>D</b>                     | Statu<br><b>V</b>                     | Restriction                   | Endorsements                 | Expires<br><b>10/15/2024</b>                          | City<br><b>ALBUQUERQUE</b>         | Stat<br><b>NM</b>            | Zip Code<br><b>87121</b>                                  | Phone                          |                           |                     |         |                        |
|                                                | Date of Birth<br><b>09/15/1973</b>          | Occupation                                                                       |                                      |                                       | Seat Pos<br><b>LF</b>         | Age<br><b>44</b>             | Sex<br><b>M</b>                                       | Race<br><b>O</b>                   | Injury Code<br><b>O</b>      | OP Code<br><b>6</b>                                       | OP Used Property<br><b>YES</b> | Airbag Deploy<br><b>N</b> | Ejected<br><b>N</b> | EMS Num | Med Trans<br><b>NO</b> |
|                                                | Seat Pos                                    | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                      |                                       |                               |                              |                                                       |                                    |                              |                                                           |                                |                           |                     |         |                        |
|                                                |                                             |                                                                                  |                                      |                                       |                               |                              |                                                       |                                    |                              |                                                           |                                |                           |                     |         |                        |
|                                                |                                             |                                                                                  |                                      |                                       |                               |                              |                                                       |                                    |                              |                                                           |                                |                           |                     |         |                        |
|                                                |                                             |                                                                                  |                                      |                                       |                               |                              |                                                       |                                    |                              |                                                           |                                |                           |                     |         |                        |
|                                                |                                             |                                                                                  |                                      |                                       |                               |                              |                                                       |                                    |                              |                                                           |                                |                           |                     |         |                        |
| Veh. Year<br><b>2007</b>                       | Vehicle Make<br><b>CADILLAC</b>             | Color<br><b>GOLD - GLD</b>                                                       |                                      | Body Style<br><b>PC</b>               | Cargo Body Type               | Veh. Use<br><b>P</b>         | Veh. Use                                              | Veh. Towed?<br><b>NO</b>           |                              | Vehicle Disabled<br><b>NO</b>                             |                                |                           |                     |         |                        |
| Lic. Year<br><b>2019</b>                       | State<br><b>NM</b>                          | License Plate Number<br><b>4030FR</b>                                            |                                      | VIN<br><b>1GYFK63877R393729</b>       |                               | DOT #                        |                                                       | Damage Severity<br><b>MODERATE</b> |                              | Damage Area<br>1 2 3 4 5<br>12 11 10 9 8 7 6<br><b>12</b> |                                |                           |                     |         |                        |
| Interstate Carrier?                            |                                             | Towed By                                                                         |                                      |                                       | Towed To                      |                              |                                                       |                                    |                              |                                                           |                                |                           |                     |         |                        |
| Number of Axles                                | Gross Vehicle/Comb Weight Rating            |                                                                                  | HazMat Placard?                      | Hazmat Placard 4-digit OR Hazmat Name |                               |                              | AND                                                   | 1-digit #                          | HazMat Released<br><b>NO</b> |                                                           |                                |                           |                     |         |                        |
| Carrier's Name                                 |                                             |                                                                                  | Street Address                       |                                       |                               | Carrier City                 |                                                       |                                    | State                        | Carrier's Zip                                             |                                |                           |                     |         |                        |
| Owner's Last Name<br><b>FERNANDEZ</b>          |                                             |                                                                                  | Owner's First Name<br><b>ARTURO</b>  |                                       | Owner's Middle Name           |                              | Owner's Company Name                                  |                                    |                              |                                                           |                                |                           |                     |         |                        |
| Street Address<br><b>9600 CENTRAL AVE SW</b>   |                                             |                                                                                  | Owner's City<br><b>ALBUQUERQUE</b>   |                                       |                               | State<br><b>NM</b>           | Owner Zip<br><b>87121</b>                             | Owner's Phone                      |                              |                                                           |                                |                           |                     |         |                        |
| Insured By: (Name of Company)<br><b>SENTRY</b> |                                             |                                                                                  | Policy Number<br><b>314726742</b>    |                                       | Trailer or Towed Vehicles (1) | Type                         | Year                                                  | Make                               | Lic. Year                    | Lic State                                                 | License Num                    |                           |                     |         |                        |
| Trailer or Towed Vehicles (2)                  | Type                                        | Year                                                                             | Make                                 | Lic. Year                             | Lic State                     | License Num                  | Trailer or Towed Vehicles (3)                         | Type                               | Year                         | Make                                                      | Lic. Year                      | Lic State                 | License Num         |         |                        |

2018 JAN - 8 AM 8:37

VEHICLE NO. 002

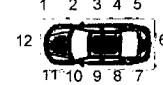
17-124424

|                                         |                                                                                  |                                    |      |                                |                |                                       |                 |                                    |                             |                         |                                                  |                        |               |           |             |           |
|-----------------------------------------|----------------------------------------------------------------------------------|------------------------------------|------|--------------------------------|----------------|---------------------------------------|-----------------|------------------------------------|-----------------------------|-------------------------|--------------------------------------------------|------------------------|---------------|-----------|-------------|-----------|
| VEHICLE NO.<br>HEADED 02                |                                                                                  | Unit Direction<br>WEST             |      | On:<br>CENTRAL AVE             |                |                                       |                 | Left the Scene of the Crash?<br>NO |                             | Posted Speed            |                                                  | Safe Speed             |               |           |             |           |
| Driver's Last Name<br>OLIVAS            |                                                                                  |                                    |      | Driver's First Name<br>CAIN    |                |                                       |                 | Driver's Middle Name               |                             | Driver's Street Address |                                                  |                        |               |           |             |           |
| Driver's License Number                 |                                                                                  | State                              | Type | Statu                          | Restriction    | Endorsements                          | Expires         | City                               |                             |                         | Stat                                             | Zip Code               | Phone         |           |             |           |
| Date of Birth<br>08/11/1991             |                                                                                  | Occupation                         |      |                                |                | Seat Pos<br>LF                        | Age             | Sex                                | Race                        | Injury Code             | OP Code                                          | OP Used Properly       | Airbag Deploy | Ejected   | EMS Num     | Med Trans |
| Seat Pos                                | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                    |      |                                |                |                                       | 26              | M                                  | O                           | O                       | 6                                                | YES                    | N             | N         |             | NO        |
| RF                                      | QUINONEZ RIGOBERTO                                                               |                                    |      |                                | ALBUQUERQUE NM |                                       | 26              | M                                  | O                           | O                       | 6                                                | YES                    | N             | N         |             | NO        |
| Veh. Year<br>2013                       |                                                                                  | Vehicle Make<br>BUICK              |      | Color<br>BROWN - BRO           |                | Body Style<br>PC                      | Cargo Body Type | Veh. Use                           | Veh. Use<br>P               | Veh. Towed?<br>NO       |                                                  | Vehicle Disabled<br>NO |               |           |             |           |
| Lic. Year<br>2018                       | State<br>NM                                                                      | License Plate Number<br>17T-448827 |      | VIN<br>5GAKRCKD6DJ259819       |                |                                       | DOT #           |                                    | Damage Severity<br>MODERATE |                         | Damage Area<br>1 2 3 4 5<br>12 11 10 9 8 7<br>12 |                        |               |           |             |           |
| Interstate Carrier?                     |                                                                                  | Towed By                           |      |                                | Towed To       |                                       |                 | Extent<br>FUNCTIONAL               |                             |                         |                                                  |                        |               |           |             |           |
| Number of Axles                         |                                                                                  | Gross Vehicle/Comb Weight Rating   |      | HazMat Placard?                |                | Hazmat Placard 4-digit OR Hazmat Name |                 | AND                                | 1-digit #                   |                         | HazMat Released<br>NO                            |                        |               |           |             |           |
| Carrier's Name                          |                                                                                  |                                    |      | Street Address                 |                |                                       |                 | Carrier City                       |                             |                         |                                                  | State                  | Carrier's Zip |           |             |           |
| Owner's Last Name<br>MUTUAL             |                                                                                  |                                    |      | Owner's First Name<br>LIBERTY  |                |                                       |                 | Owner's Middle Name                |                             | Owner's Company Name    |                                                  |                        |               |           |             |           |
| Street Address<br>7705 BROADWAY BLVD SE |                                                                                  |                                    |      | Owner's City<br>ALBUQUERQUE    |                |                                       |                 | State<br>NM                        | Owner Zip<br>87105          |                         | Owner's Phone                                    |                        |               |           |             |           |
| Insured By: (Name of Company)<br>SNAP   |                                                                                  |                                    |      | Policy Number<br>SNA117265-000 |                | Trailer or Towed Vehicles (1)         |                 | Type                               | Year                        | Make                    | Lic. Year                                        | Lic State              | License Num   |           |             |           |
| Trailer or Towed Vehicles (2)           |                                                                                  | Type                               | Year | Make                           | Lic. Year      | Lic State                             | License Num     | Trailer or Towed Vehicles (3)      |                             | Type                    | Year                                             | Make                   | Lic. Year     | Lic State | License Num |           |

2010 JAN -8 AM 8:37

17-124424

VEHICLE NO. 003

|                               |                                                                                  |                                  |                    |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
|-------------------------------|----------------------------------------------------------------------------------|----------------------------------|--------------------|---------------------|-------------|---------------------------------------|-------------------------------|------------------------------|-------------|-------------------------------------------------------------------------------------------------|------------------|------------------|---------------|---------|---------|-----------|
| VEHICLE NO. HEADED            |                                                                                  | Unit Direction                   |                    | On:                 |             |                                       |                               | Left the Scene of the Crash? |             | Posted Speed                                                                                    |                  | Safe Speed       |               |         |         |           |
| 03                            |                                                                                  | EAST                             |                    | CENTRAL AVE         |             |                                       |                               | NO                           |             |                                                                                                 |                  |                  |               |         |         |           |
| Driver's Last Name            |                                                                                  |                                  |                    | Driver's First Name |             |                                       |                               | Driver's Middle Name         |             | Driver's Street Address                                                                         |                  |                  |               |         |         |           |
| BACA                          |                                                                                  |                                  |                    | HERMAN              |             |                                       |                               |                              |             | 357 DOLORES DR NW                                                                               |                  |                  |               |         |         |           |
| Driver's License Number       |                                                                                  | State                            | Type               | Statu               | Restriction | Endorsements                          | Expires                       | City                         |             | Stat                                                                                            | Zip Code         | Phone            |               |         |         |           |
| 000307661                     |                                                                                  | NM                               | D                  | V                   |             |                                       | 09/19/2018                    | ALBUQUERQUE                  |             | NM                                                                                              | 87105            |                  |               |         |         |           |
| Date of Birth                 |                                                                                  | Occupation                       |                    |                     |             | Seat Pos                              | Age                           | Sex                          | Race        | Injury Code                                                                                     | OP Code          | OP Used Properly | Airbag Deploy | Ejected | EMS Num | Med Trans |
| 08/20/1943                    |                                                                                  |                                  |                    |                     |             | LF                                    | 74                            | M                            | O           | O                                                                                               | 6                | YES              | N             | N       |         | NO        |
| Seat Pos                      | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                  |                    |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
|                               |                                                                                  |                                  |                    |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
|                               |                                                                                  |                                  |                    |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
|                               |                                                                                  |                                  |                    |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
|                               |                                                                                  |                                  |                    |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
| Veh. Year                     | Vehicle Make                                                                     |                                  | Color              |                     | Body Style  | Cargo Body Type                       | Veh. Use                      | Veh. Use                     | Veh. Towed? |                                                                                                 | Vehicle Disabled |                  |               |         |         |           |
| 1996                          | FORD                                                                             |                                  | WHITE - WHI        |                     | PC          |                                       |                               | P                            | NO          |                                                                                                 | NO               |                  |               |         |         |           |
| Lic. Year                     | State                                                                            | License Plate Number             |                    | VIN                 |             | DOT #                                 |                               | Damage Severity              |             | Damage Area                                                                                     |                  |                  |               |         |         |           |
| 2018                          | NM                                                                               | NCG496                           |                    | 1FALP624XTH177288   |             |                                       |                               | HEAVY                        |             | 1 2 3 4 5                                                                                       |                  |                  |               |         |         |           |
| Interstate Carrier?           |                                                                                  | Towed By                         |                    | Towed To            |             |                                       |                               | Extent                       |             | <br>02,03,04 |                  |                  |               |         |         |           |
| Number of Axles               |                                                                                  | Gross Vehicle/Comb Weight Rating |                    | HazMat Placard?     |             | HazMat Placard 4-digit OR Hazmat Name |                               | AND                          | 1-digit #   | HazMat Released                                                                                 |                  |                  |               |         |         |           |
|                               |                                                                                  |                                  |                    |                     |             |                                       |                               |                              |             | NO                                                                                              |                  |                  |               |         |         |           |
| Carrier's Name                |                                                                                  |                                  | Street Address     |                     |             |                                       | Carrier City                  |                              |             | State                                                                                           | Carrier's Zip    |                  |               |         |         |           |
|                               |                                                                                  |                                  |                    |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
| Owner's Last Name             |                                                                                  |                                  | Owner's First Name |                     |             | Owner's Middle Name                   |                               | Owner's Company Name         |             |                                                                                                 |                  |                  |               |         |         |           |
| BACA                          |                                                                                  |                                  | THERESA            |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
| Street Address                |                                                                                  |                                  | Owner's City       |                     |             | State                                 | Owner Zip                     | Owner's Phone                |             |                                                                                                 |                  |                  |               |         |         |           |
| 357 DOLORES NW                |                                                                                  |                                  | ALBUQUERQUE        |                     |             | NM                                    | 87105                         |                              |             |                                                                                                 |                  |                  |               |         |         |           |
| Insured By: (Name of Company) |                                                                                  |                                  |                    | Policy Number       |             | Trailer or Towed Vehicles (1)         | Type                          | Year                         | Make        | Lic. Year                                                                                       | Lic State        | License Num      |               |         |         |           |
| YOUNG AMERICA                 |                                                                                  |                                  |                    | 64 436145297        |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |
| Trailer or Towed Vehicles (2) | Type                                                                             | Year                             | Make               | Lic. Year           | Lic State   | License Num                           | Trailer or Towed Vehicles (3) | Type                         | Year        | Make                                                                                            | Lic. Year        | Lic State        | License Num   |         |         |           |
|                               |                                                                                  |                                  |                    |                     |             |                                       |                               |                              |             |                                                                                                 |                  |                  |               |         |         |           |

|          |          |                                                                                  |  |  |  |     |     |      |             |         |                  |               |         |         |           |
|----------|----------|----------------------------------------------------------------------------------|--|--|--|-----|-----|------|-------------|---------|------------------|---------------|---------|---------|-----------|
| Veh. Num | Seat Pos | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |  |  |  | Age | Sex | Race | Injury Code | OP Code | OP Used Properly | Airbag Deploy | Ejected | EMS Num | Med Trans |
|          |          |                                                                                  |  |  |  |     |     |      |             |         |                  |               |         |         |           |

|      |          |         |                |            |
|------|----------|---------|----------------|------------|
| COND | Lighting | Weather | Road Character | Road Grade |
|      | DAYLIGHT | CLEAR   | STRAIGHT       | LEVEL      |

|      |         |                |                           |                 |            |                 |                |
|------|---------|----------------|---------------------------|-----------------|------------|-----------------|----------------|
| ROAD | VEH NO. | Road Condition | Road Surface              | Traffic Control | Road Lanes | Road Design Div | Road Design    |
|      | 01      | DRY            | PAVED CENTER AND EDGE LIN | 4 WAY STOP      | 4+ LANES   | PHYSICAL DIVID  | FULL ACCESS CT |

|              |                               |  |  |  |  |                         |  |  |  |  |                    |  |  |  |  |
|--------------|-------------------------------|--|--|--|--|-------------------------|--|--|--|--|--------------------|--|--|--|--|
| EVENT        | APPARENT CONTRIBUTING FACTORS |  |  |  |  | DRIVER'S ACTIONS        |  |  |  |  | SEQUENCE OF EVENTS |  |  |  |  |
|              | NONE                          |  |  |  |  | STOPPED FOR SIGN/SIGNAL |  |  |  |  | FIRST EVENT MVT    |  |  |  |  |
|              |                               |  |  |  |  |                         |  |  |  |  | SECOND EVENT       |  |  |  |  |
|              |                               |  |  |  |  |                         |  |  |  |  | THIRD EVENT        |  |  |  |  |
| FOURTH EVENT |                               |  |  |  |  |                         |  |  |  |  |                    |  |  |  |  |

17-124424

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

|             |               |                       |                                           |                               |                        |                                   |                               |
|-------------|---------------|-----------------------|-------------------------------------------|-------------------------------|------------------------|-----------------------------------|-------------------------------|
| <b>ROAD</b> | VEH NO.<br>02 | Road Condition<br>DRY | Road Surface<br>PAVED CENTER AND EDGE LIN | Traffic Control<br>4 WAY STOP | Road Lanes<br>4+ LANES | Road Design Div<br>PHYSICAL DIVID | Road Design<br>FULL ACCESS CT |
|-------------|---------------|-----------------------|-------------------------------------------|-------------------------------|------------------------|-----------------------------------|-------------------------------|

|              |                               |  |  |  |                  |  |                    |  |
|--------------|-------------------------------|--|--|--|------------------|--|--------------------|--|
| <b>EVENT</b> | APPARENT CONTRIBUTING FACTORS |  |  |  | DRIVER'S ACTIONS |  | SEQUENCE OF EVENTS |  |
|              | EXCESSIVE SPEED               |  |  |  | GOING STRAIGHT   |  | FIRST EVENT MVT    |  |
|              |                               |  |  |  |                  |  | SECOND EVENT       |  |
|              |                               |  |  |  |                  |  | THIRD EVENT        |  |
|              |                               |  |  |  |                  |  | FOURTH EVENT       |  |

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

|             |               |                       |                                           |                               |                        |                                   |                               |
|-------------|---------------|-----------------------|-------------------------------------------|-------------------------------|------------------------|-----------------------------------|-------------------------------|
| <b>ROAD</b> | VEH NO.<br>03 | Road Condition<br>DRY | Road Surface<br>PAVED CENTER AND EDGE LIN | Traffic Control<br>4 WAY STOP | Road Lanes<br>4+ LANES | Road Design Div<br>PHYSICAL DIVID | Road Design<br>FULL ACCESS CT |
|-------------|---------------|-----------------------|-------------------------------------------|-------------------------------|------------------------|-----------------------------------|-------------------------------|

|              |                               |  |  |  |                  |  |                    |  |
|--------------|-------------------------------|--|--|--|------------------|--|--------------------|--|
| <b>EVENT</b> | APPARENT CONTRIBUTING FACTORS |  |  |  | DRIVER'S ACTIONS |  | SEQUENCE OF EVENTS |  |
|              | DISREGARDED TRAFFIC SIGNAL    |  |  |  | LEFT TURN        |  | FIRST EVENT MVT    |  |
|              |                               |  |  |  |                  |  | SECOND EVENT MVT   |  |
|              |                               |  |  |  |                  |  | THIRD EVENT        |  |
|              |                               |  |  |  |                  |  | FOURTH EVENT       |  |

|               |                                         |  |                                            |  |                   |                                |  |
|---------------|-----------------------------------------|--|--------------------------------------------|--|-------------------|--------------------------------|--|
| <b>DRIVER</b> | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | <b>PEDESTRIAN</b> | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|               | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |                   | At Intersection                |  |
|               | Breath Test Results                     |  | Driver Physical Condition - Other          |  |                   | Not At Intersection            |  |
|               |                                         |  |                                            |  |                   | Pedestrian Action - Other      |  |

**NARRATIVE**

DRIVER #1 INFORMED ME HE WAS HEADED SOUTHBOUND ON YUCCA STOPPED FOR THE TRAFFIC SIGNAL PREPARING TO MAKE A LEFT HAND TURN ONTO CENTRAL AVE WHEN VEHICLE #3 HIT VEHICLE #1S FRONT END. DRIVER #2 INFORMED ME HE WAS HEADED WESTBOUND ON CENTRAL AVE AT EXCESSIVE SPEED WHEN VEHICLE #3 MADE A LET HAND TURN IN FRONT OF HIM DAMAGING VEHICLE #2S FRONT END AND VEHICLE #3S PASSENGER SIDE. DRIVER #3 INFORMED ME HE WAS HEADED EASTBOUND ON CENTRAL PREPARING TO MAKE A LEFT HAND TURN ONTO YUCCA DR NW WHEN HE DISREGARDED THE RED SIGNAL AND HIT VEHICLE #2S FRONT END PUSHING HIM INTO VEHICLE #1S FRONT END. NO INJURIES WERE REPORTED. ALL VEHICLES WERE OPERABLE. NO FURTHER INFORMATION.

|                                |                        |                                    |                    |  |                     |          |               |
|--------------------------------|------------------------|------------------------------------|--------------------|--|---------------------|----------|---------------|
| <b>Other Property Involved</b> | Type                   | Description of Property and Damage |                    |  |                     |          |               |
|                                | Owner's Last Name      |                                    | Owner's First Name |  | Owner's Middle Name |          |               |
|                                | Owner's Street Address |                                    | Owner's City       |  | State               | Zip Code | Owner's Phone |

|                                        |                          |                |                      |                     |             |                       |                               |             |        |
|----------------------------------------|--------------------------|----------------|----------------------|---------------------|-------------|-----------------------|-------------------------------|-------------|--------|
| WITNESS                                | Witness's Last Name      |                | Witness's First Name |                     |             | Witness's Middle Name |                               | Age         |        |
|                                        | Witness's Street Address |                | Witness's City       |                     | State       | Zip Code              | Witness's Phone               |             |        |
| <b>ENFORCEMENT ACTION - VIOLATIONS</b> |                          |                |                      |                     |             |                       |                               |             |        |
| VEH NO.                                | Last Name                |                | First Name           |                     | Middle Name |                       | Violation (Common Name)       |             | Action |
| Time Notified                          | Time Arrived             | Notified By    |                      | Supervisor at Scene |             |                       | Checked By                    |             |        |
| 16:53                                  | 16:59                    | DISPATCH       |                      |                     |             |                       | 5244 - CLIPP, R. - 12/23/2017 |             |        |
| Officer's Signature                    |                          | Officer's Name |                      |                     | Rank        | ID Number             | District                      | Report Date |        |
| <i>m Orta</i>                          |                          | ROYBAL, ELIAS  |                      |                     | PSA         | 6311                  | 114                           | 12/22/2017  |        |

17-124424

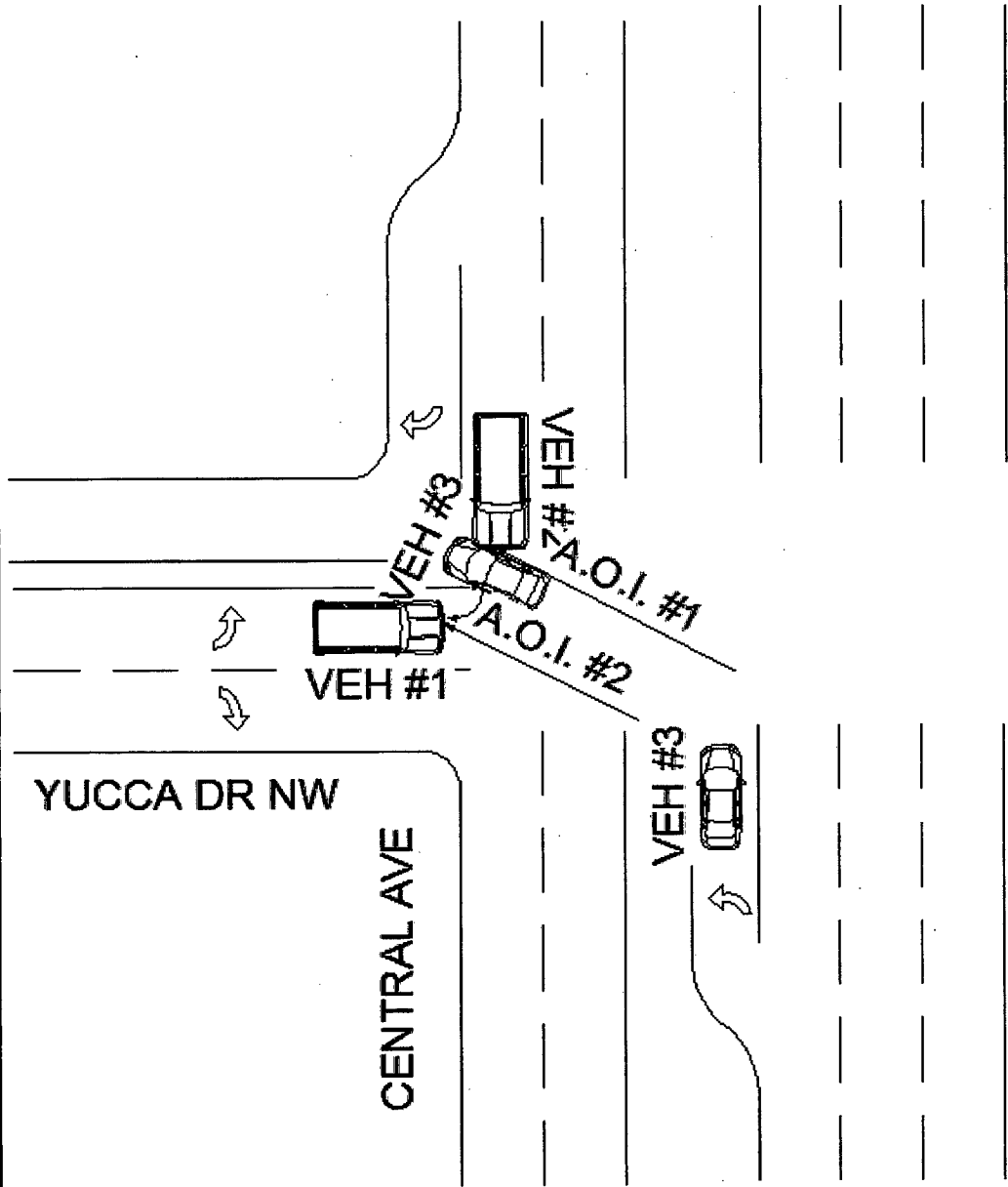
2018 JAN -8 AM 8:37

Diagram Drawn By  
ROYBAL, ELIAS

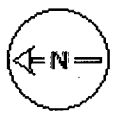
Measurements Taken By  
NOT TO SCALE

17-124424

DIAGRAM



NOT TO SCALE



YUCCA DR NW

CENTRAL AVE

2018 JAN - 8 AM 8:37

Crash Report Number: 710454268  
Case Number: 170124424

STATE OF NEW MEXICO UNIFORM CRASH REPORT  
NM STATUTE 66-7-209  
ISSUING AGENCY COPY

Sheet 6 Of 6






180020389

STATE OF NEW MEXICO UNIFORM CRASH REPORT


ALBUQUERQUE POLICE DEPT REPORTING DEPARTMENT

710460134

|                                     |                                                        |                                                                                                                   |                                                 |                                                           |
|-------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------|
| Private Property?<br><b>NO</b>      | <input type="checkbox"/> Fatal Injury                  | Property Damage Only<br><input type="checkbox"/> Under \$500<br><input checked="" type="checkbox"/> \$500 or More | Hit and Run?<br><b>NO</b>                       | Case Number: <b>180020389</b>                             |
| Crash Date<br><b>02/28/2018</b>     |                                                        | Military Time<br><b>18:56</b>                                                                                     | City Occurred In<br><b>ALBUQUERQUE</b>          | County<br><b>BERNALILLO</b>                               |
| Day of Week<br><b>WEDNESDAY</b>     | Occurred On: (Route No. or Name)<br><b>YUCCA DR NW</b> |                                                                                                                   | At Intersection With:<br><b>CENTRAL AVE</b>     |                                                           |
| Other Location                      | Measurement                                            | Direction                                                                                                         | Permanent Landmark - County Line - Intersection | Milepost<br>Lat:<br>Long:                                 |
| Crash Occurred<br><b>ON ROADWAY</b> |                                                        | Crash Classification<br><b>OTHER VEHICLE</b>                                                                      |                                                 | Analysis Code<br><b>03 - ONE LEFT TURN/ENTER AT ANGLE</b> |

|                                                     |                                             |                                                                                  |                                       |                             |                               |                                                      |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
|-----------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------|---------------------------------------|-----------------------------|-------------------------------|------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------|--------------------------------|---------------------------|---------------------|---------|------------------------|
| VEHICLE NO. 001                                     | VEHICLE NO.<br><b>HEADED 01</b>             | Unit Direction<br><b>SOUTH</b>                                                   | On:<br><b>YUCCA DR NW</b>             |                             |                               | Left the Scene of the Crash?<br><b>NO</b>            | Posted Speed                  | Safe Speed                                                                                                                |                               |                          |                                |                           |                     |         |                        |
|                                                     | Driver's Last Name<br><b>TRONOLONE</b>      |                                                                                  | Driver's First Name<br><b>EVA</b>     |                             | Driver's Middle Name          | Driver's Street Address<br><b>3322 HERRERA RD NW</b> |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
|                                                     | Driver's License Number<br><b>011484239</b> | State<br><b>NM</b>                                                               | Type<br><b>D</b>                      | Statu<br><b>V</b>           | Restriction                   | Endorsements                                         | Expires<br><b>02/04/2021</b>  | City<br><b>ALBUQUERQUE</b>                                                                                                | Stat<br><b>NM</b>             | Zip Code<br><b>87121</b> | Phone<br><b>(505) 221-7177</b> |                           |                     |         |                        |
|                                                     | Date of Birth<br><b>01/04/1957</b>          | Occupation                                                                       |                                       |                             | Seat Pos<br><b>LF</b>         | Age<br><b>61</b>                                     | Sex<br><b>F</b>               | Race<br><b>O</b>                                                                                                          | Injury Code<br><b>C</b>       | OP Code<br><b>6</b>      | OP Used Properly<br><b>YES</b> | Airbag Deploy<br><b>N</b> | Ejected<br><b>N</b> | EMS Num | Med Trans<br><b>NO</b> |
|                                                     | Seat Pos                                    | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                       |                             |                               |                                                      |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
|                                                     |                                             |                                                                                  |                                       |                             |                               |                                                      |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
|                                                     |                                             |                                                                                  |                                       |                             |                               |                                                      |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
|                                                     |                                             |                                                                                  |                                       |                             |                               |                                                      |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
|                                                     |                                             |                                                                                  |                                       |                             |                               |                                                      |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
|                                                     |                                             |                                                                                  |                                       |                             |                               |                                                      |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
| Veh. Year<br><b>2017</b>                            | Vehicle Make<br><b>TOYOTA</b>               | Color<br><b>BLUE - BLU</b>                                                       | Body Style<br><b>PC</b>               | Cargo Body Type             | Veh. Use<br><b>P</b>          | Veh. Use                                             | Veh. Towed?<br><b>NO</b>      |                                                                                                                           | Vehicle Disabled<br><b>NO</b> |                          |                                |                           |                     |         |                        |
| Lic. Year<br><b>2018</b>                            | State<br><b>NM</b>                          | License Plate Number<br><b>616WAG</b>                                            | VIN<br><b>2T3WFREV1HW332487</b>       | DOT #                       |                               | Damage Severity<br><b>MODERATE</b>                   |                               | Damage Area<br>1 2 3 4 5 6<br><br>12 |                               |                          |                                |                           |                     |         |                        |
| Interstate Carrier?                                 | Towed By                                    | Towed To                                                                         |                                       | Extent<br><b>FUNCTIONAL</b> |                               | 12                                                   |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
| Number of Axles                                     | Gross Vehicle/Comb Weight Rating            | HazMat Placard?                                                                  | Hazmat Placard 4-digit OR Hazmat Name |                             | AND                           | 1-digit #                                            | HazMat Released<br><b>NO</b>  |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
| Carrier's Name                                      |                                             | Street Address                                                                   |                                       |                             | Carrier City                  |                                                      |                               | State                                                                                                                     | Carrier's Zip                 |                          |                                |                           |                     |         |                        |
| Owner's Last Name<br><b>TRONOLONE</b>               |                                             | Owner's First Name<br><b>EVA</b>                                                 |                                       | Owner's Middle Name         |                               | Owner's Company Name                                 |                               |                                                                                                                           |                               |                          |                                |                           |                     |         |                        |
| Street Address<br><b>3322 HERRERA RD NW</b>         |                                             |                                                                                  | Owner's City<br><b>ALBUQUERQUE</b>    |                             |                               | State<br><b>NM</b>                                   | Owner Zip<br><b>87121</b>     | Owner's Phone<br><b>(505) 221-7177</b>                                                                                    |                               |                          |                                |                           |                     |         |                        |
| Insured By: (Name of Company)<br><b>PROGRESSIVE</b> |                                             |                                                                                  | Policy Number<br><b>71107776</b>      |                             | Trailer or Towed Vehicles (1) | Type                                                 | Year                          | Make                                                                                                                      | Lic. Year                     | Lic State                | License Num                    |                           |                     |         |                        |
| Trailer or Towed Vehicles (2)                       | Type                                        | Year                                                                             | Make                                  | Lic. Year                   | Lic State                     | License Num                                          | Trailer or Towed Vehicles (3) | Type                                                                                                                      | Year                          | Make                     | Lic. Year                      | Lic State                 | License Num         |         |                        |

180020389

|                                             |                                                                                  |                                                                                  |                              |                                     |                                                  |                                       |                                      |                                           |                                    |                                                      |                                                                                                                                                             |                               |                                |           |                        |
|---------------------------------------------|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------------------------|-------------------------------------|--------------------------------------------------|---------------------------------------|--------------------------------------|-------------------------------------------|------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------|-----------|------------------------|
| VEHICLE NO.<br><b>HEADED 02</b>             |                                                                                  | Unit Direction<br><b>WEST</b>                                                    |                              | On:<br><b>CENTRAL AVE</b>           |                                                  |                                       |                                      | Left the Scene of the Crash?<br><b>NO</b> |                                    | Posted Speed                                         |                                                                                                                                                             | Safe Speed                    |                                |           |                        |
| Driver's Last Name<br><b>OCHOA</b>          |                                                                                  |                                                                                  |                              | Driver's First Name<br><b>STACY</b> |                                                  |                                       |                                      | Driver's Middle Name                      |                                    | Driver's Street Address<br><b>2505 CUATRO MILPAS</b> |                                                                                                                                                             |                               |                                |           |                        |
| Driver's License Number<br><b>120414895</b> |                                                                                  | State<br><b>NM</b>                                                               | Type<br><b>D</b>             | Statu<br><b>V</b>                   | Restriction                                      | Endorsements                          | Expires<br><b>06/26/2019</b>         | City<br><b>ALBUQUERQUE</b>                |                                    |                                                      | Stat<br><b>NM</b>                                                                                                                                           | Zip Code<br><b>87105</b>      | Phone<br><b>(505) 544-1135</b> |           |                        |
| Date of Birth<br><b>05/26/1983</b>          | Occupation                                                                       |                                                                                  |                              |                                     | Seat Pos<br><b>LF</b>                            | Age<br><b>34</b>                      | Sex<br><b>F</b>                      | Race<br><b>O</b>                          | Injury Code<br><b>O</b>            | OP Code<br><b>6</b>                                  | OP Used Properly<br><b>YES</b>                                                                                                                              | Airbag Deploy<br><b>N</b>     | Ejected<br><b>N</b>            | EMS Num   | Med Trans<br><b>NO</b> |
| Seat Pos                                    | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                                                                                  |                              |                                     |                                                  |                                       |                                      |                                           |                                    |                                                      |                                                                                                                                                             |                               |                                |           |                        |
| Veh. Year<br><b>2005</b>                    |                                                                                  | Vehicle Make<br><b>FORD</b>                                                      |                              | Color<br><b>BLUE - BLU</b>          |                                                  | Body Style<br><b>PC</b>               | Cargo Body Type                      | Veh. Use                                  | Veh. Use<br><b>P</b>               | Veh. Towed?<br><b>NO</b>                             |                                                                                                                                                             | Vehicle Disabled<br><b>NO</b> |                                |           |                        |
| Lic. Year<br><b>2018</b>                    | State<br><b>NM</b>                                                               | License Plate Number<br><b>17T329342</b>                                         |                              | VIN                                 |                                                  |                                       | DOT #                                |                                           | Damage Severity<br><b>MODERATE</b> |                                                      | Damage Area<br>1 2 3 4 5<br><br>6<br>11' 10" 9' 8" 7'<br><b>09,10,11</b> |                               |                                |           |                        |
| Interstate Carrier?                         |                                                                                  | Towed By                                                                         |                              |                                     | Towed To                                         |                                       |                                      | Extent<br><b>DISABLED</b>                 |                                    |                                                      |                                                                                                                                                             |                               |                                |           |                        |
| Number of Axles                             |                                                                                  | Gross Vehicle/Comb Weight Rating                                                 |                              | HazMat Placard?                     |                                                  | Hazmat Placard 4-digit OR Hazmat Name |                                      | AND                                       | 1-digit #                          |                                                      | HazMat Released<br><b>NO</b>                                                                                                                                |                               |                                |           |                        |
| Carrier's Name                              |                                                                                  |                                                                                  |                              | Street Address                      |                                                  |                                       |                                      | Carrier City                              |                                    |                                                      |                                                                                                                                                             | State                         | Carrier's Zip                  |           |                        |
| Owner's Last Name<br><b>OCHOA</b>           |                                                                                  |                                                                                  |                              | Owner's First Name<br><b>STACY</b>  |                                                  |                                       |                                      | Owner's Middle Name                       |                                    | Owner's Company Name                                 |                                                                                                                                                             |                               |                                |           |                        |
| Street Address<br><b>2505 CUATRO MILPAS</b> |                                                                                  |                                                                                  |                              | Owner's City<br><b>ALBUQUERQUE</b>  |                                                  |                                       |                                      | State<br><b>NM</b>                        | Owner Zip<br><b>87105</b>          |                                                      | Owner's Phone<br><b>(505) 544-1135</b>                                                                                                                      |                               |                                |           |                        |
| Insured By: (Name of Company)<br><b>N/A</b> |                                                                                  |                                                                                  |                              | Policy Number<br><b>N/A</b>         |                                                  | Trailer or Towed Vehicles (1)         |                                      | Type                                      | Year                               | Make                                                 | Lic. Year                                                                                                                                                   | Lic State                     | License Num                    |           |                        |
| Trailer or Towed Vehicles (2)               |                                                                                  | Type                                                                             | Year                         | Make                                | Lic. Year                                        | Lic State                             | License Num                          | Trailer or Towed Vehicles (3)             |                                    | Type                                                 | Year                                                                                                                                                        | Make                          | Lic. Year                      | Lic State | License Num            |
| Veh. Num                                    | Seat Pos                                                                         | Occupant's Name (Last First Middle) / Occupant's Address (Street City State Zip) |                              |                                     |                                                  | Age                                   | Sex                                  | Race                                      | Injury Code                        | OP Code                                              | OP Used Properly                                                                                                                                            | Airbag Deploy                 | Ejected                        | EMS Num   | Med Trans              |
| <b>COND</b>                                 |                                                                                  | Lighting<br><b>DARK - NOT LIGHTED</b>                                            |                              | Weather<br><b>CLEAR</b>             |                                                  | Road Character<br><b>STRAIGHT</b>     |                                      |                                           |                                    | Road Grade<br><b>LEVEL</b>                           |                                                                                                                                                             |                               |                                |           |                        |
| <b>ROAD</b>                                 |                                                                                  | VEH NO.<br><b>01</b>                                                             | Road Condition<br><b>DRY</b> |                                     | Road Surface<br><b>PAVED CENTER AND EDGE LIN</b> |                                       | Traffic Control<br><b>4 WAY STOP</b> |                                           | Road Lanes<br><b>4+ LANES</b>      | Road Design Div<br><b>PHYSICAL DIVID</b>             | Road Design<br><b>FULL ACCESS CT</b>                                                                                                                        |                               |                                |           |                        |
| <b>EVENT</b>                                |                                                                                  | APPARENT CONTRIBUTING FACTORS<br><b>NONE</b>                                     |                              |                                     |                                                  |                                       |                                      | DRIVER'S ACTIONS<br><b>LEFT TURN</b>      |                                    |                                                      |                                                                                                                                                             | SEQUENCE OF EVENTS            |                                |           |                        |
|                                             |                                                                                  |                                                                                  |                              |                                     |                                                  |                                       |                                      |                                           |                                    |                                                      |                                                                                                                                                             | FIRST EVENT<br><b>MVT</b>     |                                |           |                        |
|                                             |                                                                                  |                                                                                  |                              |                                     |                                                  |                                       |                                      |                                           |                                    |                                                      |                                                                                                                                                             | SECOND EVENT                  |                                |           |                        |
|                                             |                                                                                  |                                                                                  |                              |                                     |                                                  |                                       |                                      |                                           |                                    |                                                      |                                                                                                                                                             | THIRD EVENT                   |                                |           |                        |
|                                             |                                                                                  |                                                                                  |                              |                                     |                                                  |                                       |                                      |                                           |                                    |                                                      |                                                                                                                                                             | FOURTH EVENT                  |                                |           |                        |

180020389

|        |                                         |  |                                            |  |            |                                |  |
|--------|-----------------------------------------|--|--------------------------------------------|--|------------|--------------------------------|--|
| DRIVER | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | PEDESTRIAN | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|        | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |            | At Intersection                |  |
|        | Breath Test Results                     |  | Driver Physical Condition - Other          |  |            | Not At Intersection            |  |
|        |                                         |  |                                            |  |            | Pedestrian Action - Other      |  |

|      |               |                       |                                           |                               |                        |                                   |                               |
|------|---------------|-----------------------|-------------------------------------------|-------------------------------|------------------------|-----------------------------------|-------------------------------|
| ROAD | VEH NO.<br>02 | Road Condition<br>DRY | Road Surface<br>PAVED CENTER AND EDGE LIN | Traffic Control<br>4 WAY STOP | Road Lanes<br>4+ LANES | Road Design Div<br>PHYSICAL DIVID | Road Design<br>FULL ACCESS CT |
|------|---------------|-----------------------|-------------------------------------------|-------------------------------|------------------------|-----------------------------------|-------------------------------|

|       |                               |  |  |                  |  |                    |     |
|-------|-------------------------------|--|--|------------------|--|--------------------|-----|
| EVENT | APPARENT CONTRIBUTING FACTORS |  |  | DRIVER'S ACTIONS |  | SEQUENCE OF EVENTS |     |
|       | DISREGARDED TRAFFIC SIGNAL    |  |  | GOING STRAIGHT   |  | FIRST EVENT        | MVT |
|       |                               |  |  |                  |  | SECOND EVENT       |     |
|       |                               |  |  |                  |  | THIRD EVENT        |     |
|       |                               |  |  |                  |  | FOURTH EVENT       |     |

|        |                                         |  |                                            |  |            |                                |  |
|--------|-----------------------------------------|--|--------------------------------------------|--|------------|--------------------------------|--|
| DRIVER | DRIVER/PEDESTRIAN/PEDALCYCLIST SOBRIETY |  | DRIVER/PED/PEDALCYCLIST PHYSICAL CONDITION |  | PEDESTRIAN | PEDESTRIAN/PEDALCYCLIST ACTION |  |
|        | HAD NOT CONSUMED ALCOHOL                |  | NO APP. DEFECTS                            |  |            | At Intersection                |  |
|        | Breath Test Results                     |  | Driver Physical Condition - Other          |  |            | Not At Intersection            |  |
|        |                                         |  |                                            |  |            | Pedestrian Action - Other      |  |

**NARRATIVE**

DRIVER #1 STATED SHE WAS MAKING A SOUTHBOUND TURN FROM CENTRAL AVE TO YUCCA DR NW WHEN VEHICLE #2 PROCEED OUT INTO THE INTERSECTION DAMAGING VEHICLE #1S FRONT END. DRIVER #2 STATED SHE WAS HEADED EASTBOUND ON CENTRAL AVE WHEN SHE SAW THE LEFT TURN GREEN ARROW LIGHT SHE PROCEEDED OUT INTO THE INTERSECTION DAMAGING VEHICLE #2S DRIVER SIDE AND VEHICLE #1S FRONT END. DRIVER #1 WAS SEEN BY AFD FOR CHEST PAIN BUT WAS NOT TRANSPORTED. DRIVER #2 HAD NO COMPLAINTS OF INJURY. VEHICLE #1 WAS OPERABLE. VEHICLE #2 WAS TOWED AT OWNERS REQUEST. NO FURTHER INFORMATION.

|                         |                        |                                    |  |                     |          |               |  |
|-------------------------|------------------------|------------------------------------|--|---------------------|----------|---------------|--|
| Other Property Involved | Type                   | Description of Property and Damage |  |                     |          |               |  |
|                         | Owner's Last Name      | Owner's First Name                 |  | Owner's Middle Name |          |               |  |
|                         | Owner's Street Address | Owner's City                       |  | State               | Zip Code | Owner's Phone |  |

|         |                          |  |                      |  |                       |          |                 |
|---------|--------------------------|--|----------------------|--|-----------------------|----------|-----------------|
| WITNESS | Witness's Last Name      |  | Witness's First Name |  | Witness's Middle Name |          | Age             |
|         | Witness's Street Address |  | Witness's City       |  | State                 | Zip Code | Witness's Phone |

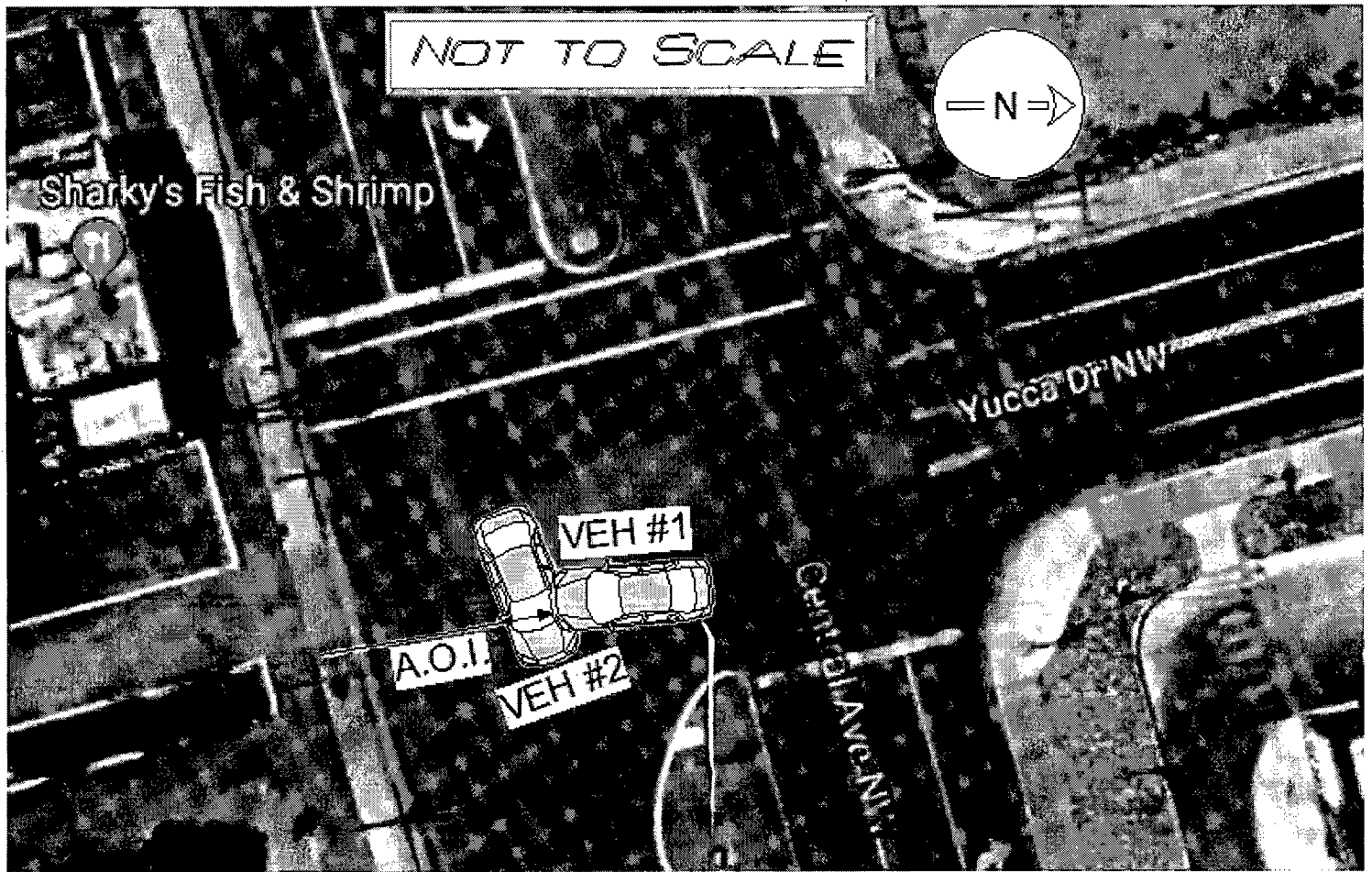
| ENFORCEMENT ACTION - VIOLATIONS |           |            |             |                         |        |  |
|---------------------------------|-----------|------------|-------------|-------------------------|--------|--|
| VEH NO.                         | Last Name | First Name | Middle Name | Violation (Common Name) | Action |  |

|                                   |                                 |                         |                     |                   |                                            |                           |
|-----------------------------------|---------------------------------|-------------------------|---------------------|-------------------|--------------------------------------------|---------------------------|
| Time Notified<br>18:56            | Time Arrived<br>18:56           | Notified By<br>DISPATCH | Supervisor at Scene |                   | Checked By<br>5244 - CLIPP, R. - 2/28/2018 |                           |
| Officer's Signature<br><i>mra</i> | Officer's Name<br>ROYBAL, ELIAS |                         | Rank<br>PSA         | ID Number<br>6311 | District<br>13                             | Report Date<br>02/28/2018 |

FEB 28 13 13 06

DIAGRAM

180020389



2019 APR 13 14 54



**WILSON**  
**& COMPANY**  
ENGINEERS & ARCHITECTS

4401 Masthead Street NE, Suite 150  
Albuquerque, NM 87109  
phone: 505-348-4000  
fax: 505-348-4055

[www.wilsonco.com](http://www.wilsonco.com)