

HOW TO READ YOUR CALIFORNIA CAR ACCIDENT REPORT

STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL TRAFFIC COLLISION REPOR								
CHP 555 Page 1 (Rev. 4-11) OPI 060 €	HIT & RUN	CITY				JUDICIAL DIS	STRICT LOCAL REPOR	Page of RT NUMBER
ED C	FELONY							
rtt tile top er page elle er year	HIT & RUN MISDEMEANOR	COUNTY			REPORTING DISTRICT	BEAT	S M T W	
CHP 555 Traffic Collision —					MO. DAY YEA	R TIME (2400)	NCIC#	OFFICER I.D.
Report, you'll find the date,			GPS COORDINA	ATES			PHOTOGRAPH	ISBY: DUONE
time, and location (city, county,			ATITUDE		LONGITUDE			NONE NONE
and district) of the crash. In						STATE HWY REL	LIO.	
addition, police will document		The second secon		SAFETY EQUIP	VEH. YEAR MAKE/M	ODEL/COLOR	NO LICENS	SE NUMBER STATE
towaways and photographs		▼		_				
taken at the crash scene.					OWNER'S NAME	SAME AS DRIV	VER	
Page one will also include								
driver and vehicle information					OWNER'S ADDRESS	SAME AS DRIV	VER	
such as:					DISPOSITION OF VEHIC	CLE ON ORDERS OF:	OFFICER D	RIVER OTHER
	WEIGHT	Mo. D	HDATE ay Year	RACE	PRIORMECHANICALD	EFECTS:	NONE ADDADENT	DEEED TO MADDA
	BUSINESS PH	ONE		_	VEHICLE IDENTIFICATI		NONE APPARENT	REFER TO NARRA
		POLICY NUME	250		VEHICLE TYPE	DESCRIBE VEHICLE I		SHADE IN DAMAGED A
Type of parties involved (driver, pedestrian,		POLICYMBIA	JER .				NE MINOR JOR ROLL-ON	ÆR Ø
parked vehicle, bicyclist or other)			SPEED LIM	IT	CA	DOT		
Driver name, address, and phone numberLicense plate number	TATE 0	CLASS	AIR BAG	SAFETY EQUIP	CAL-T	TCP/PSCN	MC/MXLICENS	SE NUMBER STATE
 Vehicle year, make, model and color 	•	•	•	•				
 Vehicle identification number (VIN) 					OWNER'S NAME	SAME AS DRIV	UED.	
 Insurance carrier and policy number 						SAME AS DRI	YER	
 Estimated damage to each vehicle 					OWNER'S ADDRESS	SAME AS DRIV	VER	
					DISPOSITION OF VEHIC	CLE ON ORDERS OF:	OFFICER D	RIVER OTHER
BICY- CLIST SEX HAIR EYES HEIGHT	WEIGHT		HDATE ay Year	RACE	PRIORMECHANICALD	EFECTS	NONE AND ADDRESS	
OTHER HOME PHONE	BUSINESS PH	ONE			VEHICLE IDENTIFICATI	(8-7 (3-7) 4-3(3)	NONE APPARENT	REFER TO NARRA
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INSURANCE CARRIER		POLICY NUME	3ER				NE MINOR JOR ROLL-ON	ÆR Ø
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PARTY DRIVERS LICENSE NUMBER	STATE C	CLASS	AIR BAG	SAFETY EQUIP	CAL-T MAKE/M	TCP/PBC N	MC/MX LICENS	SE NUMBER STATE
3	-	•	-					
DRIVER NAME (FIRST, MIDDLE, LAST)					OWNER'S NAME	SAME AS DRIV	/ED	
PEDES- STREET ADDRESS TRIAN						SAME AS DRIV	VER	
PARKED CITY/STATE/ZIP					OWNER'S ADDRESS	SAME AS DRIV		
VEHICLE					DISPOSITION OF VEHIC	LE ON ORDERS OF:	OFFICER D	RIVER OTHER
BICY- SEX HAIR EYES HEIGHT	WEIGHT	Mo. Di	HDATE ay Year	RACE				
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INSURANCE CARRIER		POLICYNUME	BER				NE MINOR	
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		DEDATOUS	MOTIFIED		CAL-T	TCP/PSCN	MC/MX	DATE DEVIEWED
PREPARER'S NAME		DISPATCH	NO	□ N/A	REVIEWER'S NAME			DATE REVIEWED
Add Party (Pages 1 and 2)					redited Agency			Chp555_041



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occurred.

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	E (2400)				OFFICER I	D.	NU	NUMBER				
At the top of page two, police			OWN	ERS.	ADDR	RESS				NOTIFIED		
will document any property that										YES NO		
was damaged during the crash.												
		SAFETY EQUIPME	ENT		. 207-		AIR BAG			INATTENTION CODES		
This will include the property	CUPANTS NONE IN VEHICLE		ILD R	100000000000000000			B - UNKNOWN L - AIR BAG DEPLOYED			A - CELLPHONE HANDHELD B - CELLPHONE HANDSFREE		
owner's name and address, as	JNKNOWN LAP BELT USED					T USED E UNKNOWN	M - AIR BAG NOT DEPLO N - OTHER	YED		C - ELECTRONIC EQUIPMENT D - RADIO / CD		
well as a description of the	LAP BELT NOT USE SHOULDER HARNE		NONE			PROPERUSE CLE	P-NOT REQUIRED	EUI	CLE	E - SMOKING F - EATING		
damage. In the second section	LAP/SHOULDER HA				STATE OF SHORE	LMET	0 - NOT EJECTED		CLL	H - ANIMALS		
of page two, police will	LAP/SHOULDER HA PASSIVE RESTRAIN PASSIVE RESTRAIN	T USED V-	RIVER - NO '- YES		PASS X - Ni Y - YE		1 - FULLY EJECTED 2 - PARTIALLY EJECTED 3 - UNKNOWN	Š		J - PERSONAL HYGIENE J - READING K - OTHER		
document certain details in	NOT REQUIRED				-	-201		DD A	TIM	50 C		
	14 MARCA S. 42 74 J. 45 J. 45 J. 10 S. 12 S.	NTROL DEVICES	1		3	55.55.55	IAL INFORMATION	1	2	MOVEMENT PRECEDING		
number and letter codes. These	A CONTROLS FUI		6.65			A HAZARDO	HERRICANICA E MARKAGAMA AN ANCHE		-	A STOPPED		
details include:	B CONTROLS NO					The state of the s	NE HANDHELD IN USE			B PROCEEDING STRAIGHT		
	D NO CONTROLS	PRESENT / FACTOR*	+				NE HANDSFREE IN USE NE NOT IN USE			C RAN OFF ROAD D MAKING RIGHT TURN		
C OTHER THAN DRIVER.		COLLISION				12 THE STREET,	USRELATED			E MAKING LEFT TURN		
D I I I I I Z N I O Y N A 1 A	A HEAD ON					F 75 FT MOT G 32 FT TRA	ORTRUCK COMBO			F MAKING U TURN G BACKING		
						H	ILLER COMBO	H		H SLOWING / STOPPING		
 The seating position of each vehicle occu 	pant					1				I PASSING OTHER VEHICLE		
 Any safety equipment used at the time of 	the crash					J K				J CHANGING LANES K PARKING MANEUVER		
(seat belts, child restraints, etc.)		RIAN				L				L ENTERING TRAFFIC		
			_			M				M OTHER UNSAFE TURNING		
 Whether or not an airbag deployed in the 	crash	NVOLVED WITH				N O				N XING INTO OPPOSING LANE O PARKED		
 If anyone was fully or partially ejected from 	m the									P MERGING		
vehicle		HICLE			1000	OTHER AS	SSOCIATED FACTOR(S)	-		R OTHER*:		
 Inattention that likely contributed to or ca 	used the	N OTHER ROADWAY	1	2	3	(MA	RK 1 TO 2 ITEMS)					
crash		EHICLE				A VC SECTION VI	CITED YES	S				
	othor					B VC SECTION VI		5				
Factors that contributed to the crash (weak						C YOSECTION Y	□NO		2	SOBRIETY - DRUG PHYSICAL		
lighting, and road surface and conditions							CITED YES		Z	(MARK 1 TO 2 ITEMS)		
 Traffic control devices 						D VISION OF	SCUREMENT:			A HAD NOT BEEN DRINKING B HBD - UNDER THE INFLUENCE		
 Type of crash 						F INATTENT				C HBD - NOT UNDER INFLUENCE*		
 Types of vehicles, objects and parties inv 	olved in the	SACTIONS	G STOP & GO TRAFFIC							D HBD - IMPAIRMENT UNKNOWN*		
crash			+	\vdash	\vdash	H ENTERING / LEAVING RAMP I PREVIOUS COLLISION				F IMPAIRMENT - PHYSICAL*		
	SSWALK-					R WITH ROAD			G IMPAIRMENT NOT KNOWN			
Pedestrian actions at the time of the crasl	II (II a	SSWALK - NOT	-			K DEFECTIV	E VEH. EQUIP.: CITED			H NOT APPLICABLE I SLEEPY / FATIGUED*		
pedestrian was involved)				L		•	NO			. 00000		
 Vehicle movement that occurred prior to t 		I CROSSWALK ES SHOULDER				L UNINVOLV	ED VEHICLE					
 If a drunk or drugged driver was involved 	in the crash					N NONE APP						
		EAVING SCHOOL BUS				O RUNAWAY	VEHICLE MISCELLANEOU	5				
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Clear Diagram		, iii iii. Orriuti				- Joney	ske	(Cr	10	of how the crash		



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	WIINESS PASSENGER		ATAL	SEVERE		OTHER VISIBLE INJURY	COMPLAINT OF PAIN	1 1020100	Tara consumer		BICYCLIST	TM.	PARTY NUMBER	POS.	AIR BAG	SAFETY EQUIP.	EJECTED
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Add Inj/Wit/Pass (Page 3)



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STATE OF CALIFORNIA DEPARTMENT OF CALIFORNIA HIGHWAY PATROL FACTUAL DIAGRAM CHP 555 Page 4 (Rev. 4-11) OPI 060 DATE OF COLLISION (MD. DAY YEAR) NCIC# OFFICER I.D. TIME (2400) NUMBER ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE = On page four, you'll find the OTE: Click in the graph or INDICATE NORTH fields to import a graphic. factual diagram of how the INDICATE crash occurred. This should be NORTH strictly factual and not based on the investigating officer's opinion. At the bottom of the page, REVIEWER'S N PREPARED BY I.D. NUMBER MO. DAY YEAR you'll find the investigating officer's name and ID number. An Internationally Accredited Agency Clear Diagram