



Human Performance Attachment – Truck Driver Crash Reports

Philadelphia, PA

HWY23FH014

(22 pages)

01	1. Case Number 23-027386	10. Crash Occurred On: NJ-38 Dir W 11. Speed Limit: 45 38 13. Milepost: 40	118b --
06	2. Police Dept. of PENNSAUKEN TOWNSHIP Code 01	12. Route No. Suffix 13. Milepost Limit 40	118a 03
02	3. Station/Precinct DISTRICT 6	14. At Intersection with <input checked="" type="checkbox"/> Feet <input type="checkbox"/> Miles <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	118b 02
01	4. Date of Crash 05/01/23 5. Day of Week MON	6. Time (use 2400 hrs.) 0126 7. Municipality Code 0427 8. Total Killed 00	120a 01
04	9. Total Injured 01	19. <input type="checkbox"/> Tax Ramp <input type="checkbox"/> Fictit: US-130 20. Route Name/Route No. <input type="checkbox"/> NB <input type="checkbox"/> EB <input type="checkbox"/> SB <input type="checkbox"/> WB	120b --
02	21. Latitude 39.9341 22. Longitude -75.0828	23. Vch # 01 24. Policy No. 01 25. NJ Ins Code: *	121a 01
02	26. Driver's First Name NATHAN Initial -- Last Name MOODY 29. Sex M	31. State PA	121b --
02	27. Number & Street ---	32. Driver's License Number --- 33. DOB --- 34. Expires 09/23	122 11
02	28. City PHILADELPHIA State PA Zip 19138	35. Owner's First Name AJBM LLC Initial --- Last Name ---	123 08
03	29. Eyes 04 30. DL Class A 31. Restrictions M 32. Driver's License Number ---	36. Number & Street ---	124 03
03	37. City PHILADELPHIA State PA Zip 19138	38. Make INTERNA 39. Model --- 40. Color WT 41. Year 2017 42. Plate No. AH23715 43. State PA	125 03
04	44. VIN 3HSDJAPR7HN473607 45. Expires 05/23	46. Vehicle Removed to: PRIVATE TOW	126 26
02	47. Authority <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Police	48. Alcohol Drug Test Given: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Refused <input type="checkbox"/> Breath <input type="checkbox"/> Blood <input type="checkbox"/> Urine	127a 26
02	49. Hazardous Material <input checked="" type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill	50. Carrier No. <input checked="" type="checkbox"/> USDOT 264473 <input type="checkbox"/> None	127b --
04	51. GVWR / GCWR (trucks & buses only) <input checked="" type="checkbox"/> < 10,000 lbs. <input type="checkbox"/> 10,001 - 26,000 lbs. <input type="checkbox"/> > 26,000 lbs.	52. Motor Carrier or Government Entity PENN TANK LINES INC	127c 26
01	53. Damage to Other Property <input type="checkbox"/> Yes (if Yes, describe) <input checked="" type="checkbox"/> No	53. Motor Carrier or Government Entity ---	127d --
01	54. Operator 01 136. Charge 39:4-97 137. Summons No. ---	54. Operator 02 136. Charge --- 137. Summons No. ---	127e 26
04	55. Operator 04 140. Charge --- 141. Summons No. ---	55. Operator 04 142. Charge --- 143. Summons No. ---	127f --

Names & Addresses of Occupants If Deceased, Date & Time of Death														
A	01	01	01	C	53	M	06	08	01	04	04	06	---	MOODY, NATHAN
B	02	01	01	O	47	F	---	---	---	04	04	06	---	VIRGILIO, BIANCA, DEPT 06096-5149
C	---	---	---	---	---	---	---	---	---	---	---	---	---	---
D	---	---	---	---	---	---	---	---	---	---	---	---	---	---

**New Jersey Police
Crash Investigation Report**

Case Number **23-027386**

Page **2** of **3**

	83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants If Deceased, Date & Time of Death	
E	--	--	--	--	--	--	--	--	--	--	--	--	--		
F	--	--	--	--	--	--	--	--	--	--	--	--	--		
G	--	--	--	--	--	--	--	--	--	--	--	--	--		
H	--	--	--	--	--	--	--	--	--	--	--	--	--		
I	--	--	--	--	--	--	--	--	--	--	--	--	--		
J	--	--	--	--	--	--	--	--	--	--	--	--	--		

144. Crash Diagram



SEE ATTACHED DIAGRAM PAGE

145. Crash Description/ Narrative

On scene investigation revealed the following: Vehicle 01, V01, was traveling N/B on US-130 towards NJ-38 occupying the right lane. Vehicle 02, V02, was stopped at the red light on NJ-38 W/B at the intersection of US-130 N, occupying the center lane. V01 began changing to the center lane to account for the upcoming curve in the roadway. V02 began slowly moving forward through the red traffic signal on Rt-38 at US-130. V02 then came to a complete stop in the intersection. V01 did not have enough time or space to stop causing V01 to strike V02 in a right-angle type of collision.

Driver 01, D01, complained of pain to the lower back. Pennsauken EMS responded to the scene for medical evaluation. D01 ultimately refused further medical assistance. There were no other injuries reported on scene. V01's gas tank was broken as a result of the collision causing diesel fuel to spill in the roadway. V02 sustained heavy disabling front end damage. V01 was privately towed from the scene. Immediately following the collision, V02 traveled to the lot of 7600 Kaighn Ave where V02 remained.

D01 advised that they observed V02 enter the intersection, however, did not have enough time or space to avoid a collision. A witness on scene confirmed the sequence of events stated above.

V01 is a 3-axle truck with a tanker trailer, PA PT5183V. The trailer was not involved in this collision. Due to the diesel fuel spill, Pennsauken Fire Department, Camden County OEM and NJ DOT responded to the scene for cleanup procedures.


V01 out of state NAIC #11371.

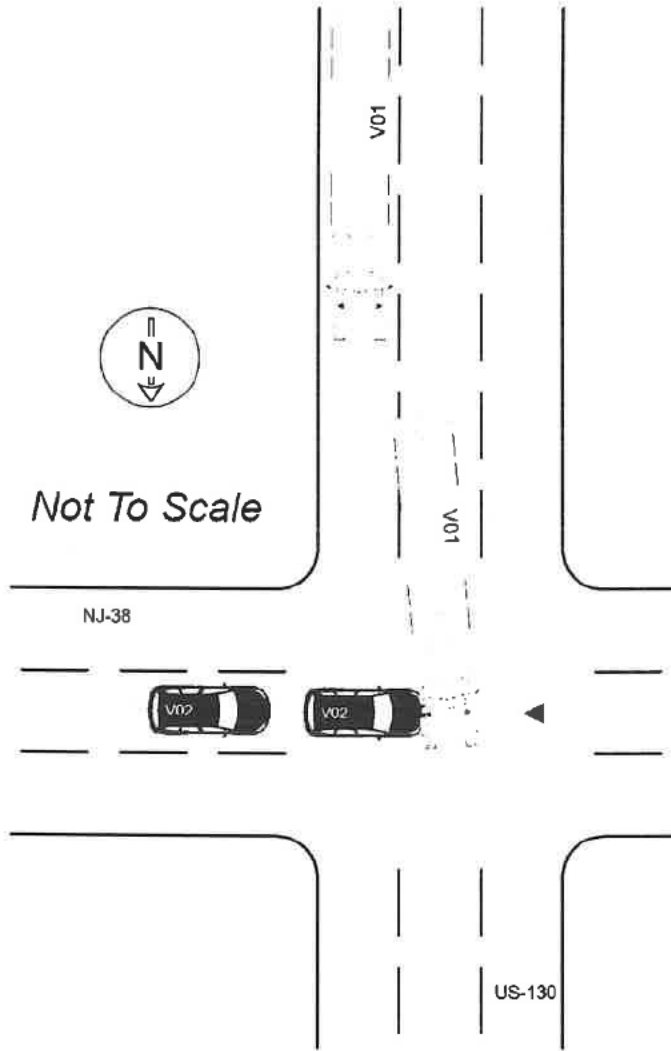
146. Officer's Signature PATROLMAN DIEGO VIERA 	147. Badge # 245	148. Reviewer SERGEANT PETER E FABIANI 	Badge # 187	149. Case Status COMPLETE
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New Jersey Police Crash Investigation Report
Motor Vehicle Crash Diagram

Police Dept.: PENNSAUKEN TOWNSHIP Code: 01
Station: DISTRICT 6 Case No: 23-027386

144. Crash Diagram

 Show NORTH by Arrow
(Not to Scale)





Officer's Signature

245
Badge Number

Incident No: PA 2021-1107473
Reportable: Y

Commonwealth of Pennsylvania
Police Crash Report

Report Number: F0614980
Case Closed: Y

Police Agency	Agency Philadelphia State Police	Patrol Zone	Dispatch Time 0205	Arrival Time 0218
	Investigator ADKISSON, STEPHEN	Badge 13482	Precinct	Investigation Date 08-15-2021
	Reviewer MATTHEW KOHUT	Badge		Approval Date 09-27-2021

Crash Data	County/Municipality Philadelphia/Philadelphia City		Crash Date 08-15-2021		Crash Time 0204	Day of Week SUNDAY		
	Crash Description Sideswipe(same dir.)		Units 2	People 2	Injured 0	Killed 0	School Bus No	School Zone No
	Type of Intersection Mid-block	Special Location Not applicable	Intersection Related No		Secondary Crash No		PennDOT Property Damage No	
	Illumination Dark - street lights		Road Surface Conditions Dry					
	Relation to Roadway On roadway		Weather Conditions 1 Clear			Weather Conditions 2 Clear		

Work Zone	Work Zone No	Works Injured/Killed	Speed Limit	Work Zone Characteristics
	Work Zone Type		Workers Present	
	Where in Work Zone		Officer Present	

Location	Principal Road				
	Route Signing Interstate - non turnpike		Route No. 0076	Speed Limit 50 Mph	Travel Lanes 03
	Street SCHUYLKILL		Street Ending Expressway	Orientation West	House #
	Landmark Landmark 1 .				
	GPS Degrees Minutes:Seconds.Decimal Latitude : 39 57:56.480 Longitude : - 75 11:10.020				
	Traffic Control Device Not applicable			Traffic Control Functioning No controls	
	Lane Closed Fully	Lane Closure Direction West		Traffic Detoured No	Roadway Cleared 0045
	Accident Investigation Notification Issued? Yes			Property Damage No	

Crash Events/Factors	First Harmful Event		Environmental/Roadway Potential Factor	
	Unit: 1	Event: Hit unit 02	1	None
	Most Harmful Event		2	
	Unit: 1	Event: Hit Concrete Traffic Barrier	3	
	Indicated Prime Factor Source Driver		Unit No. 001	Prime Factor Careless passing or lane change

Incident No: PA 2021-1107473
 Reportable: Y

Commonwealth of Pennsylvania
 Police Crash Report

Report Number: F0614980
 Case Closed: Y

Driver/Pedestrian Information	Unit No. 1	Name/Address WILLIAM NORTON;III			Date of Birth [REDACTED]		Telephone No. [REDACTED]		
	Commercial N	[REDACTED]			Class C	License Number [REDACTED]	License State Pennsylvania, US		
	Type Unit Motor vehicle in transport				Owner/Driver Private vehicle owned/leased by driver				
	Driver Presence Driver operated vehicle		Driver or Pedestrian Physical Condition Had been drinking			Drug Test Type None		Drug Test Result	
	Alcohol/Drugs Suspected Alcohol		Alcohol Test Type Blood			Alcohol Test Results		Alcohol Interlock	
	Harmful Events		Side of Road	Most Harmful	Utility Pole #	Violations			Charged
	1	Hit unit 02		No		1	33091 - FAILED TO DRIVE WITHIN A SINGLE LANE AND OR MOVEMENT FROM LANE WAS NOT MADE SAFELY		Y
	2	Hit Concrete Traffic Barrier	Left	Yes		2	1543A - OPERATION OF VEHICLE WITH SUSPENDED OR REVOKED LICENSE		Y
	3					3	3802A1 - DRIVE/OPERATE VEHICLE AFTER IMBIBING ALCOHOL RENDERING THEM INCAPABLE OF SAFE DRIVING		Y
	4					4	None		
Driver Action 1 Careless passing or lane change		Driver Action 2			Driver Action 3		Driver Action 4		
Distracted by Action Not Distracted					Distracted by Source Not Applicable				

Vehicle Information	Name/Address/Phone WILLIAM NORTON 3RD [REDACTED]				Insurance Yes	Insurance Co. PROGRESSIVE	Policy Number [REDACTED]	
	Vehicle Type Automobile		Vehicle Automation No Automation (00)		Reg. State Pennsylvania, US	Plate Number [REDACTED]	Special Usage Not applicable	
	Model Year 2011	Vehicle Make MASERATI	Vehicle Model QUATTROPORTE		Vehicle Color Red	VIN ZAM39FKA6B0 [REDACTED]		
	Trailer#	Tri Tag State	Type Trailing Unit		Tag Number	Tag Year	Trailer VIN	
	Est. Speed 045	Towed Yes	Towed By BROTHERS AUTO		Vehicle Movement Changing lanes or merging		Vehicle Position Right lane (Curb)	
	Travel Dir. West	Gradient Level roadway	Road Alignment Straight		Initial Impact Point 10 O'clock		Damage Indicator Disabling (severe - not driveable)	
	Possible Vehicle Failure 1 None				Possible Vehicle Failure 2			

Incident No: PA 2021-1107473
Reportable: Y

Commonwealth of Pennsylvania
Police Crash Report

Report Number: F0614980
Case Closed: Y

Driver/Pedestrian Information	Unit No. 2	Name/Address NATHAN MOODY		Date of Birth [REDACTED]		Telephone No. [REDACTED]		
	Commercial Y	[REDACTED] PHILADELPHIA PA 19138		Class A *	License Number [REDACTED]	License State Pennsylvania, US		
	Type Unit Motor vehicle in transport			Owner/Driver Private vehicle not owned/leased by driver				
	Driver Presence Driver operated vehicle		Driver or Pedestrian Physical Condition Apparently normal		Drug Test Type None		Drug Test Result	
	Alcohol/Drugs Suspected No		Alcohol Test Type Test not given		Alcohol Test Results Test not given		Alcohol Interlock	
	Harmful Events		Side of Road	Most Harmful	Utility Pole #	Violations		Charged
	1 Struck by unit 01			Yes		1		
	2					2		
	3					3		
	4					4		
Driver Action 1 No contributing action		Driver Action 2		Driver Action 3		Driver Action 4		
Distracted by Action Not Distracted				Distracted by Source Not Applicable				

Vehicle Information	Name/Address/Phone RIGGINS, INC 3938 S. MAIN RD VINELAND NJ 08360			Insurance Yes	Insurance Co. BROWN AND BROWN INS CO	Policy Number [REDACTED]	
	Vehicle Type Large truck		Vehicle Automation No Automation (00)		Reg. State New Jersey, US	Plate Number AW580V	Special Usage Tractor trailer
	Model Year 2021	Vehicle Make FREIGHTLINER	Vehicle Model TT		Vehicle Color Black	VIN 1FUJHLDV3MLMU0196	
	Trailer# 0	Trl Tag State New Jersey, US	Type Trailing Unit Semi-trailer		Tag Number AW580V	Tag Year 2021	Trailer VIN
	Est. Speed 045	Towed No	Towed By		Vehicle Movement Going straight		Vehicle Position Right lane (Curb)
	Travel Dir. West	Gradient Level roadway	Road Alignment Straight		Initial Impact Point 5 O'clock		Damage Indicator Minor (driveable)
	Possible Vehicle Failure 1 None				Possible Vehicle Failure 2		

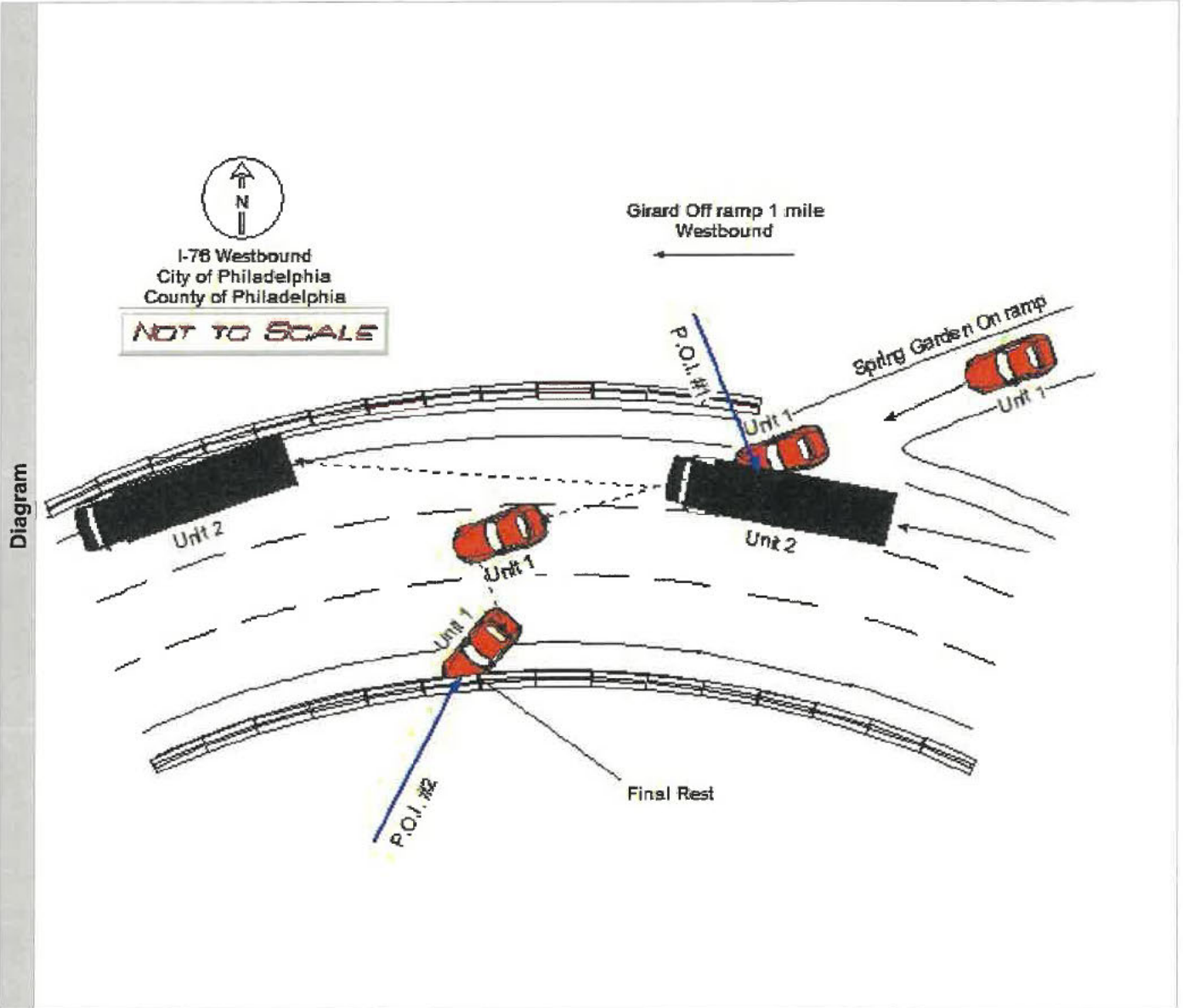
Incident No: PA 2021-1107473
 Reportable: Y

Commonwealth of Pennsylvania
Police Crash Report

Report Number: F0614980
 Case Closed: Y

People Information	Unit No.	Name/Address	Date of Birth	Telephone No.	WZ Worker
	01	WILLIAM NORTON	[REDACTED]	[REDACTED]	No
	Person No.	[REDACTED]	Person Type	Sex	
	01	[REDACTED]	Driver	Male	
	Injury Severity	Seat Position	Safety Equipment 1		
	Not injured	Driver - all vehicles	Lap and Shoulder Belt Used		
Safety Equipment 2	Airbags Deployed (for this person)				
Airbag Deployed	Front				
Ejection	Ejection Path	Extrication			
Not ejected	Not Ejected / Not Applicable	Not extricated			
EMS Transport	EMS Agency	Medical Facility			
No	NONE()	NONE			

People Information	Unit No.	Name/Address	Date of Birth	Telephone No.	WZ Worker
	02	NATHAN MOODY	[REDACTED]	[REDACTED]	No
	Person No.	[REDACTED]	Person Type	Sex	
	02	PHILADELPHIA PA 19138	Driver	Male	
	Injury Severity	Seat Position	Safety Equipment 1		
	Not injured	Driver - all vehicles	Lap and Shoulder Belt Used		
Safety Equipment 2	Airbags Deployed (for this person)				
Air Bag Not Deployed	Not Deployed				
Ejection	Ejection Path	Extrication			
Not ejected	Not Ejected / Not Applicable	Not extricated			
EMS Transport	EMS Agency	Medical Facility			
No	NONE()	NONE			



Narrative

Scene Description:The location of this crash is on I-76 west at mile marker 343.8 in the City of Philadelphia in Philadelphia County. There are three lanes of travel for westbound traffic at this location. The speed limit under ideal conditions is 50 miles per hour. At the time of this crash the weather was clear and roadway conditions were dry. It was dark and the roadway was sufficiently lit by street lamps but use of vehicle headlights was required by statute. Traffic volume was moderate.
Synopsis:This crash occurred on I-76 Westbound, in the area of mile marker 343.8, in the City and County of Philadelphia. Unit 1 was traveling onto I-76 Westbound, from the Spring Garden on ramp. Unit 1 failed to merge with the flow of traffic and subsequently side swiped Unit 2. After side swiping Unit 2, Unit 1 lost control and crossed all lanes of travel and struck the left concrete barrier, coming to final rest blocking the left lane.
Physical Evidence:Upon my arrival to the scene of the crash, I made the following physical observations attributed to this crash: Unit 1 was still in contact with the left (center) concrete barrier facing Northbound, blocking the left and center lanes of travel. Unit 1 sustained disabling damage throughout the vehicle.
Interviews:On 08/15/21 at approximately 0220 I spoke with Operator 1 at the scene of the crash. Operator 1 related that he was merging from the Spring Garden on ramp, when a Tractor Trailer cut him off. On 08/15/21 at approximately 0225 I spoke with Operator 2 at the scene of the crash. Operator 2 related that he was in the right lane when he was side swiped.
Additional Information:Assisted on scene by Cpl HOLDEMAN and Tpr HOWELL. Public News Information Release form prepared and submitted. Notice of Crash Investigation form prepared and made available to both Operators. CLEAN/NCIC queries were conducted with negative results. Operator 1 was arrested for DUI. Cross Reference PA2021-1107473.

Incident No: PA 2021-1107473
 Reportable: Y

Commonwealth of Pennsylvania
Police Crash Report

Report Number: F0614980
 Case Closed: Y

Commercial Vehicle	Unit No.	Name/Address		USDOT#	PUC#	Telephone No.
	2	RIGGINS INC 3938 S MAIN RD VINELAND NJ 08360		00017279		(856) 552-6330
	Cargo Body	Vehicle Configuration		Type of Carrier		
	Van/enclosed box	Tractor/Semi-trailer(s)				
	Hazardous Material	Hazardous Material Class	Release Indicator	Special Sizing	Oversize Load ? No	
No	1					
	2					
	3					
	4					

Reportable: Y

Police Crash Report

Case Closed: N

Police Agency	Agency	Patrol Zone	Dispatch Time	Arrival Time
	Philadelphia City	3	1717	1719
	Investigator	Badge	Precinct	Investigation Date
		4007		03-22-2011
	Reviewer	Badge		Approval Date
	MICHELLE L MORTIMER			07-14-2011

Crash Data	County/Municipality		Crash Date		Crash Time		Day of Week	
	Philadelphia/Philadelphia City		03-22-2011		1712		TUESDAY	
	Crash Description		Units	People	Injured	Killed	School Bus	School Zone
	Angle		2	2	0	1	No	No
	Type of Intersection	Special Location	Intersection Related		Secondary Crash		PennDOT Property Damage	
	Four way intersection	Not applicable					No	
Illumination		Road Surface Conditions						
Daylight		Dry						
Relation to Roadway		Weather Conditions 1			Weather Conditions 2			
On roadway		Clear						

Work Zone	Work Zone	Works Injured/Killed	Speed Limit	Work Zone Characteristics
	No			
	Work Zone Type	Workers Present		
	Where in Work Zone	Officer Present		

Location	Principal Road				
	Route Signing	Route No.		Speed Limit	Travel Lanes
	State highway	2001		Unknown	02
	Street	Street Ending		Orientation	House #
	OREGON	Avenue		East	
	Intersecting Road				
	TENTH STREET				
	GPS Degrees Minutes:Seconds.Decimal				
	Latitude : 39 54:57.203 Longitude : - 75 09:52.267				
	Traffic Control Device		Traffic Control Functioning		
Traffic signal		Device functioning properly			
Lane Closed	Lane Closure Direction		Traffic Detoured	Estimated Time Closed	
Fully	North and South		Yes	1-3 hrs	
Accident Investigation Notification Issued?			Property Damage		

Crash Events/Factors	First Harmful Event		Environmental/Roadway Potential Factor	
	Unit:	Event:	1	None
	1	Hit unit 02		
	Most Harmful Event		2	
	Unit:	Event:	3	
1	Hit unit 02			
Indicated Prime Factor Source		Unit No.	Prime Factor	
Driver		01	Unknown	

Reportable: Y

Police Crash Report

Case Closed: N

Driver/Pedestrian Information	Unit No. 1	Name/Address JAMES J SIMPSON	Date of Birth [REDACTED]		Telephone No.		
	Commercial N	[REDACTED]	Class CM	License Number [REDACTED]	License State Pennsylvania, US		
	Type Unit Motor vehicle in transport		Owner/Driver Private vehicle owned/leased by driver				
	Driver Presence Driver operated vehicle	Driver or Pedestrian Physical Condition Unknown		Drug Test Type Blood	Drug Test Result Other (Specify in narrative), 996=Other (Specify in narrative), 996=Other (Specify in narrative), 996=Other (Specify in narrative)		
	Alcohol/Drugs Suspected No		Alcohol Test Type Blood	Alcohol Test Results 0.00	Alcohol Interlock		
	Harmful Events		Side of Road	Most Harmful	Utility Pole #	Violations	Charged
	1	Hit unit 02		Yes		1	
	2					2	
	3					3	
	4					4	
Driver Action 1 Unknown		Driver Action 2 Affected by Physical Condition		Driver Action 3		Driver Action 4	
Distracted by Action Not Distracted			Distracted by Source Not Applicable				

Vehicle Information	Name/Address/Phone JAMES J SIMPSON [REDACTED]			Insurance Unknown	Insurance Co.	Policy Number
	Vehicle Type Motorcycle		Vehicle Automation	Reg. State Pennsylvania, US	Plate Number [REDACTED]	Special Usage Not applicable
	Model Year 2003	Vehicle Make HARLEY-DAVIDSON	Vehicle Model	Vehicle Color Silver	VIN 1HD1FRW443Y [REDACTED]	
	Trailer#	Trl Tag State	Type Trailing Unit	Tag Number	Tag Year	Trailer VIN
	Est. Speed 999	Towed Yes	Towed By	Vehicle Movement Going straight	Vehicle Position Right lane (Curb)	
	Travel Dir. East	Gradient Unknown	Road Alignment Straight	Initial Impact Point 12 O'clock	Damage Indicator Disabling (severe - not driveable)	
	Possible Vehicle Failure 1 None			Possible Vehicle Failure 2		

Motorcycle	Engine Size 99999	Saddle Bag/Trunk Yes		Trailer Unknown		Drivers Education Unknown	Passenger? No
	DRIVER Helmet Type No Helmet	Helmet Stay On	DOT/Snell Designation	Eye Protection Unknown	Long Sleeves Unknown	Long Pants Unknown	Over Ankle Boot Unknown
	PASSENGER Helmet Type	Helmet Stay On	DOT/Snell Designation	Eye Protection	Long Sleeves	Long Pants	Over Ankle Boot

Reportable: Y

Police Crash Report

Case Closed: N

Driver/Pedestrian Information	Unit No. 2	Name/Address NATHAN MOODY	Date of Birth [REDACTED]		Telephone No.	
	Commercial Y	[REDACTED] PHILADELPHIA PA 19111	Class B *	License Number [REDACTED]	License State Pennsylvania, US	
	Type Unit Motor vehicle in transport	Owner/Driver Private vehicle not owned/leased by driver				
	Driver Presence Driver operated vehicle	Driver or Pedestrian Physical Condition Apparently normal		Drug Test Type None	Drug Test Result Test Not Given	
	Alcohol/Drugs Suspected No	Alcohol Test Type Test not given		Alcohol Test Results Test not given	Alcohol Interlock	
	Harmful Events	Side of Road	Most Harmful	Utility Pole #	Violations	Charged
	1 Struck by unit 01		Yes		1	
	2				2	
	3				3	
	4				4	
Driver Action 1 No contributing action	Driver Action 2		Driver Action 3		Driver Action 4	
Distracted by Action Not Distracted	Distracted by Source Not Applicable					

Vehicle Information	Name/Address/Phone SEPTA SOUTHEASTERN PENNSYLVANIA TRAN 1234 MARKET ST,14TH FLO PHILADELPHIA PA 19107			Insurance Yes	Insurance Co.	Policy Number
	Vehicle Type Bus	Vehicle Automation		Reg. State Pennsylvania, US	Plate Number NT43276	Special Usage Comm. passenger carrier(Expired 1-1-2019)
	Model Year 2010	Vehicle Make OTHER	Vehicle Model	Vehicle Color White	VIN 5FYH5FV19AB037630	
	Trailer#	Trl Tag State	Type Trailing Unit	Tag Number	Tag Year	Trailer VIN
	Est. Speed 999	Towed No	Towed By	Vehicle Movement Turning left	Vehicle Position Left turn lane	
	Travel Dir. West	Gradient Unknown	Road Alignment Straight	Initial Impact Point 3 O'clock	Damage Indicator Minor (driveable)	
	Possible Vehicle Failure 1 None			Possible Vehicle Failure 2		

Reportable: Y

Police Crash Report

Case Closed: N

People Information	Unit No. 01	Name/Address JAMES SIMPSON	Date of Birth [REDACTED]	Telephone No.	WZ Worker No	
	Person No. 01	19148	Person Type Driver		Sex Male	
	Injury Severity Fatal Injury		Seat Position Driver - all vehicles	Safety Equipment 1 None Used / Not Applicable		
	Safety Equipment 2 None Used / Not Applicable		Airbags Deployed (for this person)			
	Ejection Not applicable	Ejection Path Not Ejected / Not Applicable		Extrication Not applicable		
	EMS Transport Yes	EMS Agency		Medical Facility		

People Information	Unit No. 02	Name/Address NATHAN MOODY	Date of Birth [REDACTED]	Telephone No.	WZ Worker No	
	Person No. 01	19102	Person Type Driver		Sex Male	
	Injury Severity Not injured		Seat Position Driver - all vehicles	Safety Equipment 1 Unknown		
	Safety Equipment 2 Unknown		Airbags Deployed (for this person)			
	Ejection Not ejected	Ejection Path Not Ejected / Not Applicable		Extrication Not extricated		
	EMS Transport No	EMS Agency		Medical Facility		

Incident No: 11-03-018494/11-0509

Commonwealth of Pennsylvania

Report Number: P1362167

Reportable: Y

Police Crash Report

Case Closed: N

Commercial Vehicle	Unit No. 2	Name/Address SEPTA 1234 MARKET ST 14TH FL PHILADELPHIA PA 19107		USDOT#	PUC#	Telephone No. (999) 999-9999
	Cargo Body Bus	Vehicle Configuration Bus (seats more than 15 people including driver)(Expired)		Type of Carrier		
	Hazardous Material	Hazardous Material Class	Release Indicator	Special Sizing	Oversize Load ? No	
	No	1				
		2				
	3					
	4					

Reportable: Y

Police Crash Report

Case Closed: N

Fatal Data	Unit No. 1	Driver Restrictions Compliance No restrictions or not applicable	Driver Endorsement Compliance None required	Driver License Compliance Valid license for class
	Principal Impact Point 12 O'clock	Avoidance Maneuver Braking - skid marks evident	Under Ride Indicator No under ride or override	Road Surface Type Blacktop
	Emergency Use Not in emergency use		Special Jurisdiction No special jurisdiction	

Fatal Data	Unit No. 2	Driver Restrictions Compliance No restrictions or not applicable	Driver Endorsement Compliance None required	Driver License Compliance Valid license for class
	Principal Impact Point 3 O'clock	Avoidance Maneuver No avoidance maneuver	Under Ride Indicator No under ride or override	Road Surface Type Blacktop
	Emergency Use Not in emergency use		Special Jurisdiction No special jurisdiction	

Incident No: 090131641
Reportable: Y

Commonwealth of Pennsylvania
Police Crash Report

Report Number: P1610042
Case Closed: Y

Police Agency	Agency Philadelphia City	Patrol Zone	Dispatch Time 1336	Arrival Time 1337
	Investigator 6S8II	Badge 4019	Precinct IS4D1EA	Investigation Date 09-27-2009
	Reviewer DEBORAH L HOLT	Badge		Approval Date 10-29-2009

Crash Data	County/Municipality Philadelphia/Philadelphia City		Crash Date 09-27-2009		Crash Time 1336	Day of Week SUNDAY		
	Crash Description Angle		Units 2	People 6	Injured 2	Killed 0	School Bus No	School Zone No
	Type of Intersection T intersection	Special Location Not applicable	Intersection Related		Secondary Crash		PennDOT Property Damage No	
	Illumination Daylight		Road Surface Conditions Wet					
	Relation to Roadway On roadway		Weather Conditions 1 Rain			Weather Conditions 2		

Work Zone	Work Zone No	Works Injured/Killed	Speed Limit	Work Zone Characteristics
	Work Zone Type		Workers Present	
	Where in Work Zone		Officer Present	

Location	Principal Road				
	Route Signing Local road or street		Route No.	Speed Limit 35 Mph	Travel Lanes 04
	Street OREGON		Street Ending Avenue	Orientation West	House #
	Intersecting Road 22ND STREET				
	GPS Degrees Minutes:Seconds.Decimal Latitude : Longitude : -				
	Traffic Control Device Stop sign			Traffic Control Functioning Device functioning properly	
	Lane Closed Not applicable	Lane Closure Direction		Traffic Detoured	Roadway Cleared
	Accident Investigation Notification Issued?			Property Damage	

Crash Events/Factors	First Harmful Event		Environmental/Roadway Potential Factor	
	Unit: 1	Event: Hit unit 02	1	None
	Most Harmful Event		2	
	Unit: 1	Event: Hit unit 02	3	
	Indicated Prime Factor Source Driver		Unit No. 02	Prime Factor Turning from wrong lane

Driver/Pedestrian Information	Unit No. 1	Name/Address NATHAN MOODY	Date of Birth [REDACTED]		Telephone No.		
	Commercial Y	[REDACTED] PHILADELPHIA PA 19111	Class B *	License Number [REDACTED]	License State Pennsylvania, US		
	Type Unit Motor vehicle in transport		Owner/Driver Other				
	Driver Presence Driver operated vehicle		Driver or Pedestrian Physical Condition Apparently normal		Drug Test Type	Drug Test Result	
	Alcohol/Drugs Suspected No		Alcohol Test Type Unknown if test given		Alcohol Test Results Test not given	Alcohol Interlock	
	Harmful Events		Side of Road	Most Harmful	Utility Pole #	Violations	Charged
	1	Hit unit 02		Yes		1	
	2					2	
	3					3	
	4					4	
Driver Action 1 Proceeding w/o clearance after stop		Driver Action 2		Driver Action 3		Driver Action 4	
Distracted by Action Not Distracted		Distracted by Source Not Applicable					

Vehicle Information	Name/Address/Phone SEPTA 1234AIUS4PLUGPGIY07 PHILADELPHIA PA 19107			Insurance Yes	Insurance Co. SIP	Policy Number	
	Vehicle Type Bus		Vehicle Automation		Reg. State Pennsylvania, US	Plate Number MT39318	Special Usage Comm. passenger carrier(Expired 1-1-2019)
	Model Year 2005	Vehicle Make OTHER	Vehicle Model		Vehicle Color White	VIN 5FYD4FV165B028813	
	Trailer#	Trl Tag State	Type Trailing Unit		Tag Number	Tag Year	Trailer VIN
	Est. Speed 999	Towed No	Towed By		Vehicle Movement Leaving a parked position(Expired)		Vehicle Position Right lane (Curb)
	Travel Dir. West	Gradient Level roadway	Road Alignment Straight		Initial Impact Point 11 O'clock		Damage Indicator Functional (mod. - may be undriveable)
	Possible Vehicle Failure 1 None				Possible Vehicle Failure 2		

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Driver/Pedestrian Information	Unit No. 2	Name/Address KENNETH M WRIGHT			Date of Birth [REDACTED]	Telephone No.	
	Commercial N	[REDACTED]			Class C	License Number [REDACTED]	License State Pennsylvania, US
	Type Unit Motor vehicle in transport	Owner/Driver Private vehicle owned/leased by driver					
	Driver Presence Driver operated vehicle	Driver or Pedestrian Physical Condition Apparently normal			Drug Test Type	Drug Test Result	
	Alcohol/Drugs Suspected No	Alcohol Test Type Test not given			Alcohol Test Results Test not given	Alcohol Interlock	
	Harmful Events	Side of Road	Most Harmful	Utility Pole #	Violations		Charged
	1 Struck by unit 01		Yes		1		
	2				2		
	3				3		
	4				4		
Driver Action 1 Turning from wrong lane	Driver Action 2		Driver Action 3		Driver Action 4		
Distracted by Action Not Distracted	Distracted by Source Not Applicable						

Vehicle Information	Name/Address/Phone KENNETH M WRIGHT [REDACTED]			Insurance Yes	Insurance Co. S6UFQM	Policy Number [REDACTED]
	Vehicle Type Automobile	Vehicle Automation		Reg. State Pennsylvania, US	Plate Number [REDACTED]	Special Usage Not applicable
	Model Year 1991	Vehicle Make TOYOTA	Vehicle Model CB6Q	Vehicle Color Red	VIN JT2ST87F3M0 [REDACTED]	
	Trailer#	Tri Tag State	Type Trailing Unit	Tag Number	Tag Year	Trailer VIN
	Est. Speed 999	Towed No	Towed By		Vehicle Movement Turning right	Vehicle Position Right of trafficway
	Travel Dir. West	Gradient Level roadway	Road Alignment Straight		Initial Impact Point Unknown	Damage Indicator Minor (driveable)
	Possible Vehicle Failure 1 None			Possible Vehicle Failure 2		

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People Information	Unit No. 01	Name/Address 4SQWVGJ16I932SMLS F2597HQ2A	Date of Birth [REDACTED]	Telephone No.	WZ Worker No
	Person No. 01		Person Type Passenger	Sex Female	
	Injury Severity Injury, Unk Severity	Seat Position Bus passenger	Safety Equipment 1 None Used / Not Applicable		
	Safety Equipment 2 None Used / Not Applicable	Airbags Deployed (for this person)			
	Ejection Not applicable	Ejection Path Not Ejected / Not Applicable	Extrication Not applicable		
	EMS Transport Yes	EMS Agency	Medical Facility		

People Information	Unit No. 01	Name/Address 6IIMDGIHIB535W165F27MG3IM3242	Date of Birth [REDACTED]	Telephone No.	WZ Worker No
	Person No. 02		Person Type Passenger	Sex Female	
	Injury Severity Injury, Unk Severity	Seat Position Bus passenger	Safety Equipment 1 None Used / Not Applicable		
	Safety Equipment 2 None Used / Not Applicable	Airbags Deployed (for this person)			
	Ejection Not applicable	Ejection Path Not Ejected / Not Applicable	Extrication Not applicable		
	EMS Transport Yes	EMS Agency	Medical Facility		

People Information	Unit No. 01	Name/Address MOODY, NATHAN	Date of Birth [REDACTED]	Telephone No.	WZ Worker No
	Person No. 03	PHILADELPHIA PA 19111	Person Type Driver	Sex Unknown	
	Injury Severity Not injured	Seat Position Driver - all vehicles	Safety Equipment 1 None Used / Not Applicable		
	Safety Equipment 2 None Used / Not Applicable	Airbags Deployed (for this person)			
	Ejection Not applicable	Ejection Path Not Ejected / Not Applicable	Extrication Not applicable		
	EMS Transport	EMS Agency	Medical Facility		

People Information	Unit No.	Name/Address	Date of Birth	Telephone No.	WZ Worker
	02	WRIGHT, KENNETH M	[REDACTED]		No
	Person No.	[REDACTED]	Person Type	Sex	
	01	[REDACTED]	Driver	Male	
	Injury Severity	Seat Position	Safety Equipment 1		
	Not injured	Driver - all vehicles	Unknown		
Safety Equipment 2	Airbags Deployed (for this person)				
Unknown					
Ejection	Ejection Path	Extrication			
Not applicable	Not Ejected / Not Applicable	Not applicable			
EMS Transport	EMS Agency	Medical Facility			

People Information	Unit No.	Name/Address	Date of Birth	Telephone No.	WZ Worker
	02		9999-99-99		No
	Person No.		Person Type	Sex	
	02		Passenger	Unknown	
	Injury Severity	Seat Position	Safety Equipment 1		
	Not injured	Bus passenger	None Used / Not Applicable		
Safety Equipment 2	Airbags Deployed (for this person)				
None Used / Not Applicable					
Ejection	Ejection Path	Extrication			
Not applicable	Not Ejected / Not Applicable	Not applicable			
EMS Transport	EMS Agency	Medical Facility			

People Information	Unit No.	Name/Address	Date of Birth	Telephone No.	WZ Worker
	02		9999-99-99		No
	Person No.		Person Type	Sex	
	03		Passenger	Unknown	
	Injury Severity	Seat Position	Safety Equipment 1		
	Not injured	Bus passenger	None Used / Not Applicable		
Safety Equipment 2	Airbags Deployed (for this person)				
None Used / Not Applicable					
Ejection	Ejection Path	Extrication			
Not applicable	Not Ejected / Not Applicable	Not applicable			
EMS Transport	EMS Agency	Medical Facility			

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Commercial Vehicle	Unit No. 1	Name/Address SEPTA 1234 MAKET ST 14TH FL PHILADELPHIA PA 19107		USDOT#	PUC#	Telephone No. (999) 999-9999
	Cargo Body Bus	Vehicle Configuration Bus (seats more than 15 people including driver)(Expired)		Type of Carrier		
	Hazardous Material No	Hazardous Material Class	Release Indicator	Special Sizing	Oversize Load ? No	
		1				
	2					
	3					
	4					