

## Highway Factors Attachment – Texas Peace Officer's Crash Report at 0300 on February 11, 2021

Fort Worth, TX

**HWY21FH005** 

(5 pages)

La	w Enf	_	nent ai	nd TxDOT U	Jse ONLY HOOL BUS	RAILRO	OAD	мав 🔀 s	SUPPLEME	ENT [	ACTIVI SCHO(	≣ OL ZC	ONE C	otal lum. Jnits ∟	0   0	) 4	Tota Nur Prs	al n. <b>(</b> ns. ∟	0 0		xDOT crash II	D	
		vas rument aportation	M		•	Tex at of Transport uired on all a	rtation, Cra Refer to	Attached Co	Analysis, de Sheet f	P.O. Box or Numbe	149349 red Fie	), Aus Ids	tin, TX							-7457	Pa	age	1_of_4
	★Cra	ash Da 'DD/Y`	ite YYY) i	0 2 /	1 1 / 2	0 2 1	1 *Cras	sh Time 0	3 0	0 Ca		001	1408	}				Lo	ocal se				
NOI	*Coi	unty	ARRA						*C Nai	city me FOF								I					Outside City Limit
OCATIC	In yo \$1,00	ur op 00 dan	inion,	did this cra to any one p	ash result in person's pro	n at least X	Yes Latitu	ude imal degrees	3 2	2 8	6   9	6	8	Longi (decir		egree	s)	_	0   9	7,	3	1 6	4 2
7 %	<b>ROA</b> ★1 R Sys.	Rdwy.	<i>wніс</i> Н	*Hwy. Num.	occurred 35	2 Rdwy Part	/. [	Block Num. 7200	)	3 Street Prefix		<b>★</b> Str Nam		ORT					•			Street	FWY
IDENTIFICATION					rivate Drive	or Toll F	Road/ Spe				orkers esent	Ye	es Stre										
IDENT	INTE At			<i>ROAD, OR</i> Rdwy.	Hwy.	NOT AT INT	2 Rdwy.	DN, NEARES	ST INTERS	ECTING	ROAD Street			ENCE	MAR	RKER					4	Street	
l		nce from		s. LR	Num.	3 Dir. from	Part 3	Num Reference	n. 2900	Street	refix			me B			DOD		RRX		Si	uffix	BLVD
H	Unit	ef. Mar	5 l	800 Jnit	☐ MI ☐ Parked	or Ref. Ma	LP	Marker LP		Desc.							^		Num.				
l	Num.				Vehicle /eh.	Veh.	State TX	•			eh.		5 <sub>1</sub> N				7	Body			Pol., F Emerg	gency (	Explain in
l	Year 8 DL/ Type	ID	DL	./IDD	DL/ID	Make	HYUNDA	9 DL Class	· C	10 CDL	lodel E	11			RING	I	DOB	yle	· ·		Narrat	ive if c	hecked)
l	Addre	ess (S State,	treet,	ate 17 N	lum.			Class	; O	End. 90	<u> </u>	JRe	St. 30				(MM/D	ץ ץ /עוי	Y Y ) T	TX			ᆜ
PERSONS	Person Num.	12 Prsn. Type	Seat osition	_	Enter Drive	Name: L er or Primary	ast, First, N Person for		first line		14 Injury Severity	Age	15 Ethnicity	S Sex	7 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result 25 Drug Category
ళ	1	1		BROOK	INS	TASIA	Α	CH.	AZARE	TTA	C	_₹ 22		<u>9</u> 2	1	_ <u>≅</u> 2		⊠ <u>∓</u> 97	N N	96	₹ ₾		97 97
RIVER																							cohol and
VEHICLE, DRIVER,																					ver/Pri		ly reported Person for
VEH	X O		_	ner/Lessee		<u>_</u>	BROOKI	NS	TAS	IA											_		
l	Proof	ssee f of	Yes	ne & Addres	d 26 Fin.		Fin. Resp		25000				Fin. F							_			
	Fin. F	Resp.			Resp. Typ	pe 2	Name 27 Vel				DD-		Num.	ehicle	otina (	2						ehicle	Yes
	Phon Towe By	nd.		0) 776-4 Y'S TOW			Dama	Towed	5 <b>-</b> 348 CAF		BR-			age Ra							In	ventor	ied X No
r	Unit Num.		5 l	Jnit	Parked Vehicle	Hit and	LP State	LP Num.					I <sub>I</sub> G				,3,	S <sub>1</sub> 6	6 <sub>1</sub> 4	121			
l	Veh. Year	2		0 4 6 V	/eh. lor GLD	Veh.	CHEVRO				eh.	RAII	_BLAZ	ZER				Body yle	P4		Pol., F Emero Narrat	gency (	MS on Explain in hecked)
	8 DL/ Type	99	Sta		L/ID lum.			9 DI		10 CDL End. 9		11	DL est. 99				DOB (MM/D	D/YY	YY) ∟	/		_/	
S	City,	ess (S State,	ZIP)								> -				ند	<u>.</u>		I	I				_  _ >
VEHICLE, DRIVER, & PERSONS	Person Num.	12 Prsn. Type	13 Seat Position		Enter Drive	Name: L er or Primary	ast, First, N Person for		first line		14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result 25 Drug Category
R, & P	1		99								А		99	99	99	99		97	N	96			97 97
DRIVE																				Drug R	esults	are on	cohol and ly reported
HICLE,																				for Dri		mary I ch Unit	Person for
VĒ	NO.	wner essee	_	ner/Lessee ne & Addres	s	,	WALKER	₹	LAT	ISHA	<u> </u>	<u> </u>	LAS	HAV	۷N								
	Proof		Yes	Expired	d 26 Fin.	pe	Fin. Resp	).			I		Fin. F										
	Fin. F		•		1 . 7	-	27 Vel	hicle ge Rating 1	12 -		FD-	4	27 Ve		ating 2	2		-		-		ehicle ventor	Yes
	Towe	-d		OWING				Towed 68	31 OLE	RANI	OOL	MIL	 L, F1	r.WC	DRT	ΉΤ	X 76	3120			1		€3.10

ase 210011408	TxDOT Crash ID

	Uni Nun	t Prsn	i. 1.			Taken To					Ta	iken By				Date o (MM/DI	of Death D/YYYY)		Time o (24HF	f Death I:MM)
ļ.,	1	1	М	EDSTA	R 61				ME	DICAL	CIT	Y AL	LIANC	CE		/	/			
O NC	2	1	TA	KEN B	Y FRI	END			UNI	KNOW	/N					/	1			
<b>DISPOSITION OF</b>	ED/K															/	1			
DISP																/	/			
			$\perp$													/	/			
L																/	/			
	Unit Num.	Prsn. Num.							(	Charge								Citation	n/Reference N	lum.
SGES																				
CHARGES																				
ш		D	amageo	d Property Ot	her Than V	ehicles				C	wner's l	Name					Owne	er's Address		
DAMAGE																				
ď																				
	Unit Num.			),001+ 3S.		PORTING DOUS MATE	RIAL	9+ CAPACITY	CMV D Damag	isabling je?	☐ Yes ☐ No	28 Veh. Oper.		29 Ca ID Ty <sub>l</sub>			Carrier ID Num.			
	Carrier's Corp. Na	me					Carrier's Primary Ad	ldr.											30 Veh. Type	
	31 Bus Type		1-	RGVW GVWR				Yes 32 HazN No Class Nu		HazMat ID Num.	1 1	1 1	1 1	32 HazMa Class Nur		azMat Num.	1 1 1	1 1	33 Cargo Body Type	
	Unit Num.		- 1=	RGVW GVWR			34 Trlr. Type		/ Disabling nage?	Yes No	Unit Num.			RGVW GVWR	1 1 1		34 Trlr. Type		CMV Disabling Damage?	☐ Yes ☐ No
	Sequenc Of Event		eq. 1	•	35 Seq. 2	2	35 S	eq. 3		35 Seq. 4			Intermod Containe	al Shipping r Permit	Yes G No W	ctual ross /eight			Total Num. Axles:	
જ	2 Unit		tributin	g Factors (Inv		<del>'</del>	e Contrib.		icle Defec Contributii	ts (Investi		Opinion) Nay Have (	Contrib.	38	Envi	ronmental a	and Roadwa	y Conditions 42	43	44
FACTORS &	1	98	}											Weather Cond.	Light Cond.	Entering Roads	Roadway Type	Roadway Alignment	Surface	Traffic Control
FAC	5 2	98												4	3	97	1	1	6	96
								WALL ON WALL ON		_	Ť							'	•	
								ORTH BO		AT THE										
	7200 E THE A	SLOCI ACCID	( OF ENT	NORTH OCCURE	FREEW D WAS	AY (IH-:	35). THE I PART	LOCATION TO THE IC	ON IN Y	WHICH AD ON										
	DIVID	ING B	ARRI	<b>ER.UNIT</b>	1 STRI	JCK TH	E DIVID	TROL STE	RIER A	S IT W	AS									
	SPINN BUMP	NING ( PER.	CAUS	SING DAN	//AGE T	O UNIT	1'S REA	R PASSE	NGER	SIDE										
ļ	UNIT :	2 VEH	ICLE	HAD ALS	SO SPL	JN LOSI	NG CON	ITROL AN	ID REG	CIEVED				NOTDRAWN	TO SCALE		7200 BLOCK O RTH FREEWA			
GRAN	TRAF	FIC OI ONNE	N THI	E FAR RI	GHT SI	HOULDE NIT 2 DE	R. AN A	AS FACED AMBULAN ND ADVIS MMIDIAT	CE SFD O	FFICE	₹					<u>ر</u> ر				
ID DIA	NGUY ATTEI	'EN TI NTION	HEY I	HAD ALR A FRIENI	EADY I	EFT TO	SEEK CKED T	MMIDIATI HEM UP.	E MEC OFFIC	ICAL ER	`	_		10	73	` <del>`</del>				
				NABLE 1				HEM UP. ( ITH THE ( 2.	OWNE	R OF U	TINI		(		-					
%BA								WAS PAF				•			24	P			75 - 12	
	BY UN	NIT 4.	UNIT	4 SLIDE	ON TH	E ICY B	RIDGE S	IT 3 WAS STRIKING	UNIT											
Ш								R DAMAG		D I INIIT	. ,									
		JNIT 4		OOI I EE	WILLIAM I	KEI OIKI	W/10 C	OWN LLT		i Cortii										
OR	Time No		0 .	3 , 0 , (	O How Notifie	d DICD	ATCU				e Arriveo	d , 0	. 3 . (		Report Date	<sub>w</sub> 0	2 /	1 1 /	2 0	2 1
TIGAT	Invest. Comp.	Ye:	s Inv	vestigator ime (Printed)		<u>d DISP</u> √ENI	AICH		D				1 - 1 '	-   -   (1	IVIIVI/ DD/ T T 1	., •	ID Num. <b>4</b>	,		_ •
INVES	Time No (24HR:N Invest. Comp. ORI Num.			2 <sub>1</sub> 0 <sub>1</sub> 1			gency FO	RT WOI			DE D	EPA	RTMF	NT			Service/ Region/l	l <sub>N</sub> c	) R <sub>I</sub> T	Н

La	w Enf	_	nent ai	nd TxDOT Use ONLY	LROAD MAB 💢	SUPPLEMENT [	ACTIV	E OL ZC	To N NE U	otal um. 0	0   4	Tota Nun	al n. (	0 0	5 TxD Cras		
Á		vas rtment	М	ail to: Texas Department of Trans	Texas Peace Officer's C sportation, Crash Data and Refer to Attached Co	rash Report (Forn d Analysis, P.O. Bo ode Sheet for Numl	<b>n CR-3 1</b> ox 149349 bered Fie	/ <b>1/20</b> 1 ), Aus lds	1 <b>8)</b> tin, TX	78714. C	Questic	ons? C		4/274	-7457	Page∟	3 of 4
Ē	+Cro	och De	ate	0 2 / 1 1 / 2 0 2	+Crook Time	3 0 0	Case		1408	es, occup	arito, i	rijureu,	T	cal			
	*Coi	unty			(24HKWIVI)	<b>★</b> City							Jus				Outside City Limit
SATION	In yo	ur op	ARRA inion,	did this crash result in at least	Yes Latitude	Name F0				ongitude			_	0 9	9 7 3	3 1 6	
78 LOC		D ON		to any one person's property?	No (decimal degree	3 Street		★Str		decimal	degree	es)				4 Stree	
IDENTIFICATION	Sys.	<u> </u>	IH n Occi	Num. 35	t 1 Num. 720	0 Prefix	Workers	Nam	e NO	ORTH et						Suffix	FWY
NTIFIC		Road	/Priva		oll Lane Limit 55	Zone X No	Present	XNo	Des	C.	RKER	?					
ΙDΕ	At Int.	☐ Ye		Rdwy. Hwy. s. LR Num.	2 Rdwy. Blo Part 3 Nu	ck m. <b>2900</b>	3 Street Prefix		Stre	eet ne BAS	SW	OOD				4 Stree Suffix	t BLVD
l		nce fro			rom Int. Reference Marker N Marker			-IW/	Y M	AINLA	NE			RRX lum.			
Г	Unit Num.	.3		Jnit Parked Hit a	nnd LP LP State TX Num	1138863	,	/IN _4	l <sub>I</sub> S <sub>I</sub>	7 <sub> </sub> A <sub> </sub>	X <sub>1</sub> 2	ıP,	9 <sub>1</sub> 1	ıΒ	_C_O_	7 <sub>1</sub> 4 <sub>1</sub> I., Fire, E	
l	Veh. Year			1 2 Color WHI M	eh. <sup>ake</sup> AMERICAN LA FR		Veh. Model (	$\neg$				Sty	Body yle	FT	En Na	nergency rrative if	(Explain in checked)
l	8 DL/ Type Addre		Sta	./ID DL/ID Num.	9 DL Clas	B End.	96	11 Re	<sub>st.</sub> AP	21	- 1	DOB (MM/D	D/YY	YY) I	_ <b>/</b> _		۷
NS	City,	State,	ZIP)	Name	e: Last, First, Middle		ıry İ		ity	× ji	str.		ŧ		TX	. Br	gr
PERSONS	Person Num.	12 Prsn. Type	13 Se Positic		ary Person for this Unit or	n first line	14 Injury Severity	Age	15 Ethnicity	16 Sex 17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec. Alc.	Result 23 Drug Spec.	24 Drug Result 25 Drug Category
ళ	1	1	1	BROWN MA	TTHEW HO	WARD	N	37	W	1	99	1	97	N	96	96	97 97
, DRIV	2	2	3	DUSEK PA	UL MI	CHAEL	N	54	W	1	99	99	97	N	Drug Resi	ılts are o	Alcohol and nly reported
VEHICLE, DRIVER,															1	each Un	Person for it.
×	X O	wner essee	1 -	ner/Lessee ne & Address	FORT 4100 COLUMBU	CITY S TR	•		OF	•		FO	RT	wo	RTH T.	x 76	133
l		f of Resp.		Expired 26 Fin. Resp. Type 7	Fin. Resp. Name CITY C	F FT.WORTI	Н		Fin. R Num.	esp.							
l	Fin. F Phon	Resp. ie Nun	n.	·	27 Vehicle Damage Rating 1	9-	LP-	1	27 Vel Dama	nicle ge Rating	2		-		-	Vehicle	Yes Pried <b>X</b> No
L	Towe By	<sup>ed</sup> DF		ABLE	1.0	RIVEABLE											
l	Unit Num.		De	esc. 1 Vehicle Run	nnd LP LP Num		Veh.	/IN <u>2</u>	2 <sub>1</sub> H <sub>1</sub>	G <sub>I</sub> E <sub>I</sub>	S <sub>1</sub> 1			(   5		I., Fire, E	_ MS on
l	Veh. Year 8 DL/			1 5 1	ake HONDA 9 DI	10 CDL	Model (	_	DL				Body yle	P4	L En	nergency rrative if	(Explain in checked)
l	Type Addre	1 ess (S	State	ate TX Num.	Clas	ss C End.	96	Re	st. 96			(MM/D	D/YY	YY) I	J L		
SNC		State,	_		e: Last, First, Middle		14 Injury Severity		15 Ethnicity	Sex Eject.	18 Restr.	ge	Jet	<u>-</u>	TX	ult rrug	24 Drug Result 25 Drug Category
PERS	Person Num.	12 Prsn. Type	13 S Posi	Enter Driver or Prim	ary Person for this Unit or	n first line	14 lr Seve	Age	15 Ethn	16 Sex 17 Ejec	18 R	19 Airbag	20 Heln	21 Sol.	22 Alc. Spec. Alc.	Resi 23 D Spec	24 D Resu 25 D Cate
VER, &	1	1	1	VARGAS MARTINEZ ED	UARDO		N	49	H ′	1	1	1	97	N	96	96	97 97
E, DRI															Drug Resi	ılts are o	Alcohol and nly reported Person for
VEHICLE, DRIVER, & PERSONS	5-2															each Un	it.
	Le	essee	Nan	ner/Lessee ne & Address	VARGAS MARTINE	z EDUARD(	ر 								T.	X	
	Fin. F	Resp.		Expired 26 Fin.  Exempt Resp. Type 1		O INSURANCE	COMF	)	Fin. R Num.								
		e Nun	n.		27 Vehicle Damage Rating 1	3-	FR-	2	27 Vel Dama	nicle ge Rating	2		-		-	Vehicle Invento	Yes Yes
	Towe Bv	DF	RIVE	ABLE	Towed To	RIVEABLE											

Taken By  Date of Death (MM/DD/YYYY)  C4HR:MM
aged Property Other Than Vehicles Owner's Name Owner's Address
aged Property Other Than Vehicles Owner's Name Owner's Address
aged Property Other Than Vehicles Owner's Name Owner's Address
aged Property Other Than Vehicles Owner's Name Owner's Address
10,001+ TRANSPORTING Damage? No Oper. ID Type ID Num.
Carrier's 30 Veh.
Primary Addr.         Type           □ RGVW         HazMat □ Yes   32 HazMat
□ GVWR         □ I         Released         □ No         Class Num.         ID Num.         □ ID Num.
GVWR                   Type         Damage?         No         Num.         GVWR                             Type         Damage?         □           1         25 Sog 2         25 Sog 4         Intermodal Shipping         Yes         Actual Gross         Total Num.
1 35 Seq. 2 35 Seq. 3 35 Seq. 4 Intermodal Shipping Seq. 2 35 Seq. 3 35 Seq. 4 Intermodal Shipping No Weight No Weig
Contributing May Have Contrib. Contributing May Have Contrib. 38 39 40 41 42 43 Weather Light Entering Roadway Roadway Surface Tr
Cond. Cond. Roads Type Alignment Condition Co
4 3 97 1 1 6

Law Enforcement and TxDOT Use ONLY.

Prsn. Num.

(Rev. 1/1/2018)

Form CR-3

Unit Num.

Unit Num.

DAMAGE

Num. Carrier's Corp. Name

31 Bus Type

> Unit Num. Sequence

Prsn. Num.

36 Contributing Factors (Inv Contributing

35 Seq. 1

98 98

Time N (24HR:)
Invest. Comp.
ORI Num. Yes Investigator Name (Printed) NGUYEN 0 | 3 | 0 | 5 Report Date (MM/DD/YYYY) Time Notified (24HR:MM) Time Arrived (24HRMM) 0 2 / 1 1 / 2 0 2 1 Yes No D Num. 4303 Service/ Region/DA T | X | 2 | 2 | 0 | 1 | 2 | 0 | 0 | \*Agency FORT WORTH POLICE DEPARTMENT  $N_1O | R_1T | H$