FLORIDA TRAFFIC CRASH REPORT

HIGHWAY SAFETY & MOTOR VEHICLES.

LC	NG FORM	SHO	RT FOR	RM	UPD	ATE X			NE	IL KI	RKMA	TRAFFI N BUILD					L 3239	9-0537	7		
			ctronic \	Version																	
Date of Crash 02/Jan/2023 09:09 AM Time of Crash 02/Jan/2023 0								Invest. Agen	Agency Report Number				HS	SMV Cr	ash Re	port N	umber				
CRASH IDENT																					
County Code 15 City Code County of Crash MANA					ANATE				or City of Crash UNINCORPORATED				Within City Limits No			Fime Reported Time Disparation Time Disparation 02/Jan/2023 02/Jan/2012 09:14 //			lan/2023		
Time on Scene						ason (if Investigation NOT Completed)									Notified By Law Enforcement			nent			
ROADWAY INI	│ FORMAT	ION																			
Crash Occured C	n Street, I		way VOOD R	IDGE F	ROAD					At Street Address#				At Lattitude 27.4403013003495				and Longitude 599 -82.5054571577367			
At Feet Or Miles Direction 9Fr					From	rom Intersection With Street, Road, Highway 57TH AVE E							Or From Milepost #								
Road System Ide	Ty	Type Of Shoulder Type 3 Curb								Of Intersection 2 Four-Way Intersection											
CRASH INFOR	MATION	l (Check i	f Pictur	res Tal	ken)	X										,					
light Condition 1 Daylight Weather Condition 1 Clear						Roadway Surface Condition School Bus I 1 Dry					lelated 1 I	No		M	Manner Of Collision 77 Other, Explain in Narrative						
First Harmful Eve	ent Type		First Har	mful Ev	ent 10							thin Intercl No	nange	Firs	t Harmf		nt Relation		unction		
Contributing Circ		s: Road None			C	Contributing Circumstances: Road						Contrib	outing (Circum	stances	: Road	i				
Contributing Circ		s: Environm None	ent		С	Contributing Circumstances: Environment							Contributing Circumstances: Environment								
Work Zone Relat 1 No		Type Of Work Zone						Workers In Work Zone Law Enforcement In Work Zone													
VEHICLE (Che	ck if Cor																				
Vehicle Motor V	ehicle Typ i cle in Tra		it and Ru 1 N e		Veh Lic	ense Number	ĺ	State FL		g. Exp	oires	Permane No		VIN							
Year Make 2012 CHRY	Model	Style	ev .	Color SI		xtent of Dam Disablin		Est. Dama	- 1	owed	Due To Yes	Damage	1		noved B	•		tation Rot	ation		
Insurance Compa	any			ı				Ins	urance P	olicy N	Number										
Name of Vehicle	Owner (Cl	heck Box If	Busines	s)		Current	Addres	s (Number a	nd Street	t)				ity and	State			Z	ip Code		
Trailer License One:	Number	State	Reg	j. Expire	es Pe	rmanent Reg	. VIN						Year		Make		Length	Ax	des		
Trailer License Number State Reg. Expires Two:				es Pe	rmanent Reg							Year Make			Length	Ax	des				
Vehicle Dire		LOCKWOOD RIDGE ROAD							A	At Est.	Speed 10	Post	ed Speed	d To	otal Lanes						
CMV Configuration	Cargo I	go Body Type						ea of Initial	Impact			Mos	t Damag	ed Area							
Comm GVWR/G	iler Typ	e (trailer one)	railer Type (t	pe (trailer two)					ndercarri		3 4	5 6 7	10. 0	ndercarriage							
Haz. Mat. Releas			<u> </u>	1 (15 (16 17 14 13 12 11 10					verturn /indshie railer	111	15 (16	17 8	20. V	Overturn Vindshield Trailer							
Motor Carrier Na	me					115	S DOT	Number			10	2 11 10 0				1 20 1 22	1				
		u Couriou As	dduaaa						Oitu	nd Ota					Zin	Oada		Nana N	li mala a u		
		or Carrier Ac							City a	na Sta	ite					Code			Number		
Comm/Non-Commercial Vehicle Body Type 1 Passenger Car						nicle Defects (1 N o	V	Vehicle Defects (two)				Emergency Vehicle 1 No				Speciual Function of MV 1 No Special Function					
Vehicle Maneuver Action 1 Straight Ahead 2 Trafficway 4 Two-Way, Divided, Positive Median Barrier					Roa r	Roadway Grade Road 1 Level			, ,			ost Harmful Event 2 Collision with Non-Fixe Object				Most Harmful Event Detail 10 Pedestrian					
Traffic Control Device For This Vehicle First (1) Sequence of 2 Collision with N											•					ourth (4	4) Seque	nce of	Events		
					Object Pedestr	ian															
PERSON REC	ORD										1										
Person# Descrip	tion 1 Drive	er	Vehic	le # 1	Name						Dat	e of Birth	Se 2	x ! Fema		one Nu	umber	Re	e-Exam No		
Address			C	City	;	SARASOTA		Sta	te		FL		-	Zip C	Code						
Driver License N	umber	St	tate F	-L	Ex	pires		DL Type 5 E/Ope	erator	'	. End. 3 No F	Req	Injury S	Severity 1 No			Ejection 1 N	lot Eje	cted		

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Date of Crash 02/Jan/2023 09:09 AM					Date of Report 02/Jan/2023 09:09 AM					Invest. Agency Report Number					HSMV Crash Repo <u>rt Number</u>				
Restraint System 3 Shoulder and Lap Belt Used 2 Not E					loyed Helm Deployed		net Use		Eye Protect 3 Not Ap		Seating Location Sea 1 Left			Seatir	ng Locat 1 Fre	ion Row ont			
Drivers	Actions at T	ction	on		Drivers Actions at Tir		at Time of C	ime of Crash (second		nd)		iver Distr 1 Not	acted By			ostruction on Not Obscured			
Drivers Actions at Time of Crash (third)								Drivers Actions at Time of Crash (fourth)				Drivers Condition at Time					ne of Crash parently Normal		
Suspected Alcohol Use 1 No Alcohol Test 1 Test No Given							ype Alcohol Tes		Test Result	Result BAC		Suspected Drug Use 1 No		Drug Tested 1 Test Not Given		Drug Test Type		Drug Test Result	
Source	of Transpor 1 Not 1	t to Med Franspo			EMS Ag	ency N	lame or ID			EMS R	un Numbe	r Me			edical Facility Transported				
PERSON RECORD																			
Person#	Person# Description Nar 2 Non-Motorist				ime						Date of B	Sirth Se		l Male	Injury Severity 5 Fatal (withi days)			hone Number	
Address	Address City						BRADENTON			State		FL		Zip Code					
Non-Mo	torist Descr		etail edestrian			Non-Motorist Action Prior to 1 Crossir				way			Notorist Location at Time of 2 Intersection - Unma						
	torist Action				.) Non-Motorist A			Lactions/Circumstance (Seco			n-Motorist (Safety Equipm 1 None		ent (One) No		Ion-Motorist Safety E		Equipment (Two)	
Suspect	ted Alcohol 1 No	Use	• •			rest Ty	/pe	Alcohol 1	Test Result	BAC	Suspected Drug Use 1 No			rug Tested Test Not Giver		Drug Test Type		Drug Test Result	
	lical Facility Narrative	EMS Ag	EMS Agency Name or ID BRASOTA MORT SERV			RV	EMS R	Medic			ical Facility Transported To DIST. 12 ME C								
WITNESSES													T						
Name Address											City					State		Zip Code	
WITNE	SSES																		
Name Address						ess					City					State		Zip Code	
NARRA	NARRATIVE																		
0851	ID Number Rank Name Troop / Post Officer Agency Phone Number Date Created 0851 TPR B.B. EHRHART F FLORIDA HIGHWAY PATROL 941-751-8350 Jan 02, 2023																		
V01 was northbound on Lockwood Ridge Road in the left lane and was approaching the intersection of 57th Avenue E. Non Motorist 01 (NM01) was walking westbound on 57th Avenue E on the north side of the roadway, and was approaching the intersection of Lockwood Ridge Road. NM01 crossed the northbound lanes of Lockwood Ridge Road and walked into the direct path of V01. The right front of V01 then collided with NM01. NM01 was propelled onto the windshield of V01 after the initial impact. NM01 traveled over the top of V01 where NM01's head collided with the trunk of V01. NM01 slid off V01 and came to final rest in the northbound right lane of Lockwood Ridge Road, facing in a westerly direction in a supine position. No skid marks were found on the roadway, and a small amount of vehicle debris was located in the northbound left and right lanes of Lockwood Ridge Road.																			
morthbound leπ and right lanes of Lockwood Hidge Hoad. Manner of Collision: V01 collided with NM01.																			
Source of Transport to Medical Facility: NM01 was transported to the District 12 Medical Examiner's Office by Brasota Mortuary Services.																			
Name of Deceased: Date of Birth: Date of Death: 01/02/23 Time of Death: 9:19 am Pronounced by: Paramedic Brittan Williams from Manatee Co EMS																			
Pronounced by: Paramedic Brittan Williams from Manatee Co EMS Traffic Homicide Investigation by Corporal Christopher P. Slowick, ID #766 Traffic Homicide Case Number: FHP 723-15-002 Photographs taken by Corporal Christopher P. Slowick, ID #766 and Corporal Carlos Castillo, ID #1183																			
ID Number Rank Name Troop / Post Officer Agency Phone Number Date Created 0851 TPR B.B. EHRHART F FLORIDA HIGHWAY PATROL 941-751-8350 Jan 31, 2023																			
An independent witness to this crash was accidentally omitted from the original report, and another independent witness was discovered after the original report was submitted. Both of these subjects have been added to the report and this investigation is closed.																			
ID Number Rank Name Troop / Post Officer Agency Phone Number Date Created 0851 TPR B.B. EHRHART F FLORIDA HIGHWAY PATROL 941-751-8350 Feb 21, 2023																			
The phone number for one of the witnesses was incorrect. The corrected phone number has been updated.																			
REPORTING OFFICER																			
ID/Badg 0	je # F 851	Rank and	d Name		т	PR B.I	B. EHRI	HART				Departmer	nt	FHP	F		Type o	of Department FHP	

