APR 14 2000 4868

1 [redacted]

REPORT ID: Year/Month/Day 0/02/18 | Hour 05 40 | Agency 0799 | Officer's ID No. 04710

Agency Report Number: **2000-09988**

Total No. of Sheets 54

2 Total Units 3 | Total Injuries 2 | Total Fatalities 1 | Estimated Total Damage: ☒ Over Minimum ☐ Under Minimum | ☒ Fatal ☐ Hit/Run ☐ Disc. Prop. | District or Grid No. 1 3 0 0

3 LOC.

On Highway/Road/Street: U.S. 60 Eastbound | ☒ Inside ☐ Outside City: Tempe | County: Maricopa

Intersecting Street, Road / M.P. or R.P.: ☒ At ☐ From Milepost 175 | ☐ North ☐ South ☐ East ☐ West | ☐ Plus ☐ Minus | Distance | ☐ Miles ☐ Feet

4 TRAFFIC UNIT NO. 1

State AZ | Class D | End. | License or Social Security Number 600581676 | ☒ Driver ☐ Pedestrian ☐ Pedalcyclist | Name: ROBERT STRAVERS JR. | Sex M | Inj. 2

Restrictions | Date of Birth 11/06/77 | Address: 3636 E. Inverness Avenue #1002 | City: Mesa | State AZ | Zip Code 85206- | Telephone Number

Plate Number 622 ART | State AZ | Year 2000 | ☐ Same as Driver | Owner/Carrier Name: Mary Steene | Address: 2609 W. Southern Avenue | City: Tempe | State AZ | Zip Code 85282-

Body Style: 2 Door Sedan | ☐ Camper | Make: Honda | Color: Grey | Year 1997 | VIN JHMBB6141VC004609 | Safety Device Code 4

Removed to: D.P.S. Property | Removed by: Fast Towing | Orders of: D.P.S. | Posted Speed Limit 55 | Ofc Est Speed 75 | Ofc Est Area 0

Insurance Company: Continental Ins. Co. | Telephone Number | Policy Number U3601314823 | Eff Date / Exp Date 05/16/1999 05/16/2000

Trailer (Other Unit) Plate No. | State | Year | Description of Trailer or Other Unit

U.S. Government Permits (issuer and Number): U.S. DOT: | ICC MC: | * Vehicle Type | Number of Axles | G.V.W. (Registered)

HAZARDOUS MATERIALS PLACARD NUMBER: 1) 4-Digit Placard number: | 2) 1-Digit Placard number: | Was Hazardous Cargo from the placarded truck released? (Do not include fuel from the vehicle fuel tank.) Yes ☐ No ☐

4 TRAFFIC UNIT NO. 2

State AZ | Class D | End. | License or Social Security Number 527725243 | ☒ Driver ☐ Pedestrian ☐ Pedalcyclist | Name: FLOYD JAMES FINK JR. | Sex M | Inj. 5

Restrictions A | Date of Birth 10/06/46 | Address: 2810 So. 16th Street | City: Phoenix | State AZ | Zip Code 85034- | Telephone Number 602-223-2504

Plate Number G469CD | State AZ | Year | ☐ Same as Driver | Owner/Carrier Name: State of Arizona DPS | Address: 2810 So. 16th Street | City: Phoenix | State AZ | Zip Code 85034-

Body Style: 4 Door Sedan | ☐ Camper | Make: Ford | Color: White | Year 1999 | VIN 2FAFP71WXXX178041 | Safety Device Code 3

Removed to: D.P.S. Property | Removed by: D.P.S. | Orders of: D.P.S. | Posted Speed Limit 55 | Ofc Est Speed 0 | Ofc Est Area 0

Insurance Company: State of Arizona Risk Management | Telephone Number 602-223-2621 | Policy Number Risk Management | Eff Date / Exp Date

Trailer (Other Unit) Plate No. | State | Year | Description of Trailer or Other Unit

U.S. Government Permits (issuer and Number): U.S. DOT: | ICC MC: | * Vehicle Type | Number of Axles | G.V.W. (Registered)

HAZARDOUS MATERIALS PLACARD NUMBER: 1) 4-Digit Placard number: | 2) 1-Digit Placard number: | Was Hazardous Cargo from the placarded truck released? (Do not include fuel from the vehicle fuel tank.) Yes ☐ No ☐

5 PASSENGERS

Seating Position Diagram: 07 04 01 / 08 05 02 / 09 06 03

10 Not in Passenger Compart. 11 Motorcycle, Bus 12 Other 13 Unknown 14 Pedalcyclist

Safety Devices: 1 - None used 2 - Lap belt 3 - Lap & shoulder 4 - Airbag deployed 5 - Child restraint 6 - Protective helmet 7 - Passive belt 8 - Passive & lap 9 - Other 0 - Unknown

Injured Taken to / by: See Attached

Unit #	Seat Pos.	SD	Name	Address	City	State	Age	Sex	Inj.

6 Other Property Damage (Describe): | Owner's Name | Address | City | State | Telephone Number

7 WITNESSES

Name	Address	City	State	Telephone Number	Age
See Attached					

8 Photos Taken ☒ Yes ☐ No | Photographer's Name, ID Number, and Agency: Dick Parkins, #3077, Arizona D.P.S. | Invest. at Scene ☒ Yes ☐ No | Date Invest. 02/18/2000 | Time Invest. 05 40

Officer's Signature & ID Number: 4710 | Arizona Department of Public Safety | Date Completed 03/13/2000

1- FORM N | DPS 802-01026 1066