

TRAFFIC CRASH REPORT



10-91-0205 3

Over Street Front Side Under

Priority Severity Fatality Injury Property Other

Police Fire Sheriff Coroner Other

0HP91

STATE HIGHWAY 99

7:41

01

03302007

0725 FRI X

STREETS 8090

67

PLATE: 5280 (ONE NUMBER)	TYPE: WB	AXES: 3	TYPE: LTR	TYPE: FWD	TYPE: REAR	TYPE: OTHER
REG: 3A E	REG: MILEPOST 189	REG: CH	REG: CH	REG: CH	REG: CH	REG: CH

Make (Year, Make, Model): [REDACTED]

Color: [REDACTED]

Weight: [REDACTED]

Engine: [REDACTED]

Transmission: [REDACTED]

Drive: [REDACTED]

Occupant: [REDACTED]

Year: 1975

Make: FORD

Model: LTD

Color: GOLD

Weight: 4000

Engine: 302

Transmission: 4

Drive: FWD

Occupant: 1

Registration: SAME

Inspection: FEB 120

Grade: GOLD

License: LLOYD OR LOANER

Insured: INSURE STATE

Driver: [REDACTED]

Passenger: [REDACTED]

Other: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

Witness: [REDACTED]

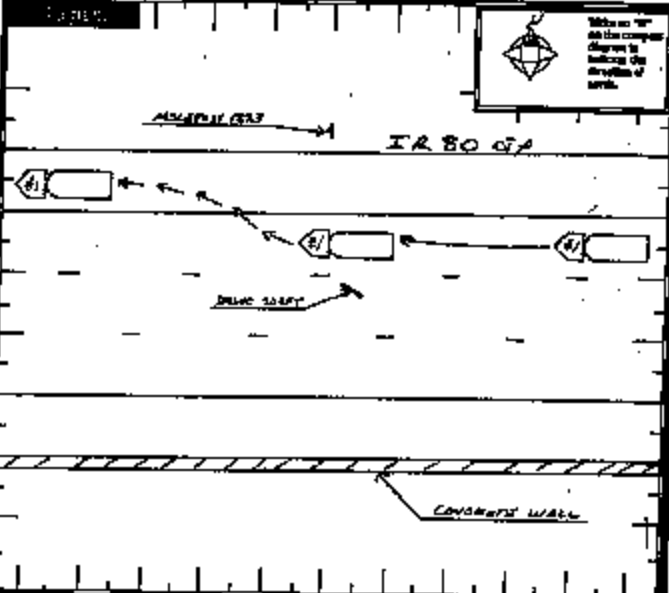
Witness: [REDACTED]

Measure of Vehicle

Occupant

UNIT 1 WAS WEST BOUND ON THE DIRT TURNPIKE THE DRIVE
 SHAFT BROKE OFF UNIT 1 CAUSING UNDERCARRIAGE DAMAGE UNIT 1
 PULLED TO THE SHOULDER AND THE DRIVE SHAFT CAME TO REST
 IN THE ROADWAY

- Platoon or Company or Detachment** **Address, City, State**
- 1** **1**
- 1 1st Cavalry Division
 - 2 1st Cavalry Division
 - 3 1st Cavalry Division
 - 4 1st Cavalry Division
 - 5 1st Cavalry Division
 - 6 1st Cavalry Division
 - 7 1st Cavalry Division
 - 8 1st Cavalry Division
 - 9 1st Cavalry Division
 - 10 1st Cavalry Division
 - 11 1st Cavalry Division
 - 12 1st Cavalry Division
 - 13 1st Cavalry Division
 - 14 1st Cavalry Division
 - 15 1st Cavalry Division
 - 16 1st Cavalry Division
 - 17 1st Cavalry Division
 - 18 1st Cavalry Division
 - 19 1st Cavalry Division
 - 20 1st Cavalry Division
 - 21 1st Cavalry Division
 - 22 1st Cavalry Division
 - 23 1st Cavalry Division
 - 24 1st Cavalry Division
 - 25 1st Cavalry Division
 - 26 1st Cavalry Division
 - 27 1st Cavalry Division
 - 28 1st Cavalry Division
 - 29 1st Cavalry Division
 - 30 1st Cavalry Division
 - 31 1st Cavalry Division
 - 32 1st Cavalry Division
 - 33 1st Cavalry Division
 - 34 1st Cavalry Division
 - 35 1st Cavalry Division
 - 36 1st Cavalry Division
 - 37 1st Cavalry Division
 - 38 1st Cavalry Division
 - 39 1st Cavalry Division
 - 40 1st Cavalry Division
 - 41 1st Cavalry Division
 - 42 1st Cavalry Division
 - 43 1st Cavalry Division
 - 44 1st Cavalry Division
 - 45 1st Cavalry Division
 - 46 1st Cavalry Division
 - 47 1st Cavalry Division
 - 48 1st Cavalry Division
 - 49 1st Cavalry Division
 - 50 1st Cavalry Division



101 011		HEREFORD TX		TX 07 62601Z	
CLASSIFICATION 03	WEIGHT (KGS) 3	CLASS 1	CLASSIFICATION 1	CLASSIFICATION 1	CLASSIFICATION 1
TOUR AREA 01330210070727		TOUR AREA 07270743		TOUR AREA 10370	
TOUR AREA TPR L SPROCKET		TOUR AREA 10191		TOUR AREA SGT D HENRY	
TOUR AREA 10-91-0205		TOUR AREA 10-91-0205		TOUR AREA 10-91-0205	

LOCAL REPORT NUMBER 10-91-0205	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH NOV 3 10 50 1987
IN COUNTY OF PORTAGE	CRASH LOCATION OHIO TURNPIKE - WB - MP 159.3	

UNIT #1

DAMAGE - DRIVE SHAFT OF UNIT #1 BROKEN OFF
- UNDER OVERHANG DAMAGE

NO DAMAGE TO PROPERTY

DRIVE SHAFT FROM UNIT #1 WAS REMOVED FROM CENTER LANE
BY OHIO TURNPIKE MAINTENANCE. THE DRIVE SHAFT WAS NEXT
FOUND AT MILEPOST 159.3.

SEVERAL VEHICLES STRUCK THE DRIVE SHAFT BEFORE IT COULD
BE RECOVERED.

NO PHYSICAL EVIDENCE WAS LOCATED IN OR ON THE ROADWAY

TRAILER UNIT #1

1978 LITLBY TRAILER

R56 W3051 TX

OWNER: [REDACTED]

[REDACTED]
HEREFORD TX, [REDACTED]

OFFICER NUMBER

X

PAGE NUMBER

1019

10-91-0205

OHIO STATE HIGHWAY PATROL
MOTOR CARRIER ENFORCEMENT
DISTRICT 10 BEREA
TELEPHONE: (448) 234-2096 EXT 1286.
Return certification to agency listed below.

DRIVER/VEHICLE EXAMINATION REPORT
Report Number: OH0776003288
Inspection Date: 03/30/2007
Start Time: 11:33 AM End Time: 12:10 PM
Insp. Level: 2-Walk-Around, No HM Insp.

HEREFORD, TX
USDOT#: 06837970
MC/MIA#: 372184
State: [redacted]
Location: TURNPIKE
Highway: IR80
County: PORTAGE, OH

Phone#: [redacted]
Fax#: [redacted]

Driver: [redacted] State: TX
Licensed: [redacted]
Date of Birth: [redacted]
CoDriver: [redacted]
License#: [redacted] State: [redacted]
Date of Birth: [redacted]

Shipper: HOLLINGSWORTH & VOSE CO
Bill of Lading: 440885
Destination: CLEARFIELD, UT Cargo: GENERAL FREIGHT

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	License #	Company #	Vin #	FMVLR	CVSA #	OCSS
1	TT	PRHT	1995	TX	[redacted]	1	1FUYDXB48-[redacted]			
2	ST	LTLJL	1998	TX	[redacted]	1T	1UY92638W-[redacted]			

BRAKE ADJUSTMENTS: No Brake Measurements Required For Level 2.

VIOLATIONS

Section Code	Type	Unit	OCSS	Citation #	Verify	Crash	Violations Discussed
893.8(a)	F	1	N		N	N	Inoperable required lamp, AMBER LD.
893.8(a)(1)	F	1	N		N	Y	Inspection/repair and maint parts & accessories. DRIVESHAFT FELL FROM VEHICLE ONTO PAVEMENT.

Headset: No HM Transported
Special Checks: Post Check
Placard: No Cargo Tank:

State Information:

FMCSA Credentials Verified (Y/N): N; CDL Verified (Y/N): Y; FMCSA OIG Order Issued (Y/N): N; For-the-Carrier: Y; Reason Code: CRAB; Penalties (Y/N): N; Driver Address: 1319 E 4TH ST, Driver City: ODESSA, Driver State: TX; Driver Zip: 77801; Photos Taken (Y/N): N

All violations of the FMVLR and FMCSR or Title 49 of the Ohio Revised Code will be reviewed by the PUCO's Transportation Department to determine whether civil forfeitures should be assessed against any responsible parties in accordance with the penalty provisions of Title 49 of the Ohio Revised Code. If civil forfeitures are assessed, you will receive a separate notice by mail. These penalties may be assessed to motor carriers, shippers, and/or drivers.

ATTENTION DRIVER: This report must be sent to the motor carrier whose name appears at the top of this inspection report within 24 hours. If the inspection report cannot be delivered within 24 hours the driver must mail or fax the inspection report to the motor carrier.

ATTENTION MOTOR CARRIER: The motor carrier must examine this report and repair all the vehicle defects/violations noted above. AND The motor carrier must sign the Certification of Repairs below and return the signed form to: Public Utilities Commission of Ohio-TASD, 180 E. Broad St., Columbus, Oh; 43216-3789; Fax (614) 752-9274 within 15 days of the inspection. Failure to return this report with the required certification can result in penalties of up to \$500.

MOTOR CARRIER CERTIFICATION OF COMPLETED REPAIRS: The undersigned certifies that all violations noted on this report have been corrected and action taken to ensure compliance with the Federal Motor Carrier Safety & Hazardous Materials Regulations insofar as they are applicable to motor carriers and drivers. A false certification of repairs is required to be prosecuted with penalties up to \$10,000.
Signature Of Motor Carrier X: _____ Title: _____ Date: _____

Report Prepared By:
BENETT, F.M. TROOPER

Badge #: 0775

Copy Received By:
X _____

Page 1 of 1



X *F.M. Bennett*

OH0776003288

10-91-0205



OHIO STATE HIGHWAY PATROL
MOTOR CARRIER ENFORCEMENT
DISTRICT 10 BEREA
TELEPHONE: (440) 234-2096 EXT 1226.
Return certification to agency listed below.

DRIVER/VEHICLE EXAMINATION REPORT
Report #: OH0775003288
Date: 03/30/2007
Start Time: 11:33 AM End Time: 12:10 PM
Insp. Level: 2-Walk-Around, No HM Insp.

[REDACTED]	Driver: [REDACTED]	State: TX
HEREFORD, TX	License#: [REDACTED]	
Phone#: [REDACTED]	Date of Birth: [REDACTED]	
USDOT#: 00537370	CoDriver:	
State:	License:	State:
	Date of Birth:	

Inspection Notes

CRASH #S 10-91-203 THRU & INCL 208. INVESTIGATED BY TPR. SPRCKET & TPR. SHAW. DRIVESHAFT FELL FROM UNIT 1 ONTO THE PAVEMENT. SEVERAL VEHICLES DROVE OVER DRIVESHAFT DAMAGING THEIR VEHICLES. NOTHING FOUND TO INDICATE A PRIOR PROBLEM WITH UNIT 1 THAT COULD HAVE PROVIDED A WARNING THAT DRIVESHAFT WAS GOING TO SEPARATE ITSELF. ALL SUSPENSION, BRAKING, TIRE COMPONENTS IN VERY GOOD WORKING CONDITION.

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-5 REV 1/82

LOCAL REPORTING AGENCY 10-91-0205	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH MO 3 10 30 AM '82
--	---	------------------------------------

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

_____ (PRINTED) _____ HEREBY MAKE THIS VOLUNTARY STATEMENT TO

T.P.R. L SPOCKETT
(OFFICER'S NAME)

AT SCENE

(LOCATION)

I WAS DRIVING DOWN THE ROAD AND I FELT A VIBRATION AND
HEAR A BEE NOISE. I THEN TRIED TO GET OVER TO THE
RIGHT.

Q WHAT LANE WERE YOU IN?

A I WAS IN THE RIGHT LANE I TRIED TO ~~GO~~ ^{SW} GO TO THE
MIDDLE LANE AND THAT IS WHEN I FELT THE VIBRATION AND
THE NOISE.

Q HOW FAST WERE YOU GOING?

A I JUST CAME WITH THE TRAFFIC

Q CAN YOU GUESS HOW FAST YOU WERE GOING?

A NO. 60-65 MPH

Q ARE YOU INJURED?

A NO.

Q WHAT TIME DID THE CRASH OCCUR?

A ABOUT 8:45 AM.

Q DID YOU STRIKE ANYTHING?

A NO.

Q WHERE ARE YOU ^{COMING} FROM?

A I'M COMING FROM MASS AND GOING TO SALT LAKE CITY UT.

Q WHAT ARE YOU HAVING?

A I DO NOT KNOW I THINK IT IS FOAM FOR AIR CONDITIONING

ADDRESS OF WITNESS OR RESIDENT OF WITNESS	02551 TX	OFFICER'S SIGNATURE S. J. [Signature]
---	----------	--

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER 10-91-0205	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH MAY 13 1987
-----------------------------------	--	------------------------------

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, [REDACTED] (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

J.P.R. L. SPROCKETT (OFFICER'S NAME) AT SCENE (LOCATION)

Q WHEN DID YOU HAVE YOUR TRUCK SERVICED LAST?

A 4000 MILES AGO

Q WHERE DID YOU HAVE IT SERVICED?

A 15 LANE IN OPRESSA TX.

Q HAVE THERE BEEN ANY MECHANICAL PROBLEMS WITH THE TRUCK?

A NO. I CHANGED THE U-JOINT ON THE DRIVE SHAFT 3 OR 4 MONTHS AGO, IN ARKANSAS.

Q WHY DID YOU CHANGE THE U-JOINT?

A I FELT A VIBRATION. I TOOK IT TO THE SHOP AND IT WAS TOO LOOSE.

Q DID YOU DO A PRE-TRIP INSPECTION?

A YES.

Q WHERE AND WHEN DID YOU DO YOUR PRE-TRIP?

A YOUNGSTOWN OH AROUND 5:30 A.M.

ADDRESS OF WITNESS
OPRESSA TX

PHONE

SIGNATURE OF WITNESS

OFFICER'S SIGNATURE
[Signature]