 U.S. Department of Transportation National Highway Traffic Safety Administration	DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline			FOR AGENCY USE ONLY 100148	
	Date Received JUL 16 2010 13-MAY-2010		Repository <input type="checkbox"/> Reference No. 10330294		
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	State	Zip Code			
PITTSBURGH	PA				
The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make	Model	Model Year	
<i>car was completely destroyed</i>		SUBARU	OUTBACK	2005	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
2006	Hamilton Motors 724-864-5100		No: Cylinders	regular	
Original Owner	Dealer's City	State	Zip Code		
<input type="checkbox"/>	Irwin	PA	15642	4	
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
	<input checked="" type="checkbox"/> Cruise Control		<i>brakes</i> <i>airbags</i>	23 SEP-2008	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 140000 AIR BAGS, 030000 SERVICE BRAKES, HYDRAULIC				Failure Mileage	Failure Speed
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make	Tire Model (Name or Number)		Tire Size (Example P215/65R15)		
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Failure Location:		
Tire Component Code	Tire Failure Type:				
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE					
Make:	Date Manufactured:	Model No./Name:			
Seat Type:	Installation System:				
Child Seat Component Code:	Failed Part:				
APPLICABLE INCIDENT INFORMATION					
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)					
Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	4	0	Y	
Narrative Description of Incident(s), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).					
TL*THE CONTACT OWNED A 2005 SUBARU OUTBACK. THE CONTACT STATED THAT THE BRAKES FAILED TO ENGAGE AND THE VEHICLE CRASHED INTO A TREE AND CAUGHT FIRE. THE AIR BAGS DID NOT DEPLOY. <u>THREE</u> PEOPLE WERE INJURED AND POLICE AND FIRE REPORTS WERE FILED. A MONTH PRIOR TO THE ACCIDENT, THE VEHICLE WAS INSPECTED AND NO FAILURES WERE FOUND. THE VEHICLE WAS INSPECTED AFTER THE CRASH AND IT WAS DISCOVERED THAT THE TUMBLER SYSTEM WAS DEFECTIVE. THE VIN WAS UNAVAILABLE AT THE TIME OF THE COMPLAINT. THE CURRENT AND FAILURE MILEAGES WERE UNKNOWN. <i>the emergency brake was inoperative. Three people were injured.</i>					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.			ATTACH ADDITIONAL SHEETS IF NECESSARY		
The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.					

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

At the time of the original inspection, it was determined that there was a problem with the tumbler. The contact asked at that time to have the brakes checked because they were squealing. The mechanic advised that there was dust on the brakes.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

National Highway Traffic Safety Administration

1200 New Jersey Avenue SE, Washington, D.C. 20077-9382

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382**



Think your vehicle has a safety defect?

If so:

Use the enclosed form to file a report

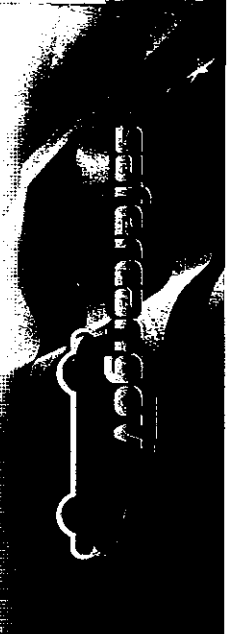
OR VISIT:

WWW.SAFERCAR.GOV

OR CALL:

VEHICLE SAFETY HOTLINE
888-327-4236

SAFERCARGOV



Commonwealth of Pennsylvania
Police Crash Report

Crash Involves:

- DUI Fatality Hit and Run Commercial Vehicle State Police Vehicle Local Police Vehicle
 N/A Work Zone ATV Snowmobile Commonwealth Vehicle Local Gov Vehicle

REPORTABLE CRASH

Police Agency Data	Agency Name PA STATE POLICE - KISKI VALLEY		Case Closed YES	Patrol Zone 02	Investigation Date 09/23/2008
	Dispatch Time 10:33 hrs.	Arrival Time 10:38 hrs.	Investigator RIZZO, ALBERT S 3D		Badge Number 06380
	Approval Date 10/14/2008		Reviewer STAPCHUCK, KENNETH M		Reviewer Badge Number 06202

Crash Data	Date of Crash 09/23/2008	Time of Crash 10:31 hrs.	Day of the Week TUESDAY	Crash Description ANGLE		
	County WESTMORELAND			Municipality SALEM TWP		
	Weather Conditions NO ADVERSE CONDITIONS			Relation to Roadway OUTSIDE TRAFFICWAY		
	Illumination DAYLIGHT			Road Surface Conditions DRY		
	# of Units 003	# of People 005	# of Injured 005	# Killed 000	EMS Agency MUTUAL AID AMBULANCE DELMONT PA	Medical Facility UPMC, PRESBY, WESTM'D JEANNETTE
	School Bus Related NO	School Zone Related NO	PennDOT Notified NO	Type of Intersection OTHER	Special Location DRIVEWAY / PARKING LOT	

Work Zone	Work Zone NO	Work Zone Type	Where in Work Zone		
	Speed Limit	Workers Present	Officer Present	Work Zone Characteristics	
<input type="checkbox"/> Lane Closure <input type="checkbox"/> Road Closed with Detour <input type="checkbox"/> Work on Shoulder or Median <input type="checkbox"/> Intermittent or Moving Work <input type="checkbox"/> Flagger Control <input type="checkbox"/> Other					

Principal Road	Route Signing LOCAL ROAD OR STREET	Route Number T710	Segment Number	Travel Lanes 02	Speed Limit 25 MPH	Orientation SOUTH
	House Number	Street Name CLOVERLEAF DRIVE			St. Ending ROAD	

Intersecting Rd.	Used in Intersection Crashes	Route Signing	Route Number	Segment Number	Travel Lanes	Speed Limit	Orientation
	Street Name		St. Ending				

Distance From Landmark Used for Mid-Block Crashes	Landmark 1	Route Number	Or Mile Post	Tenths	Or Segment Marker	Ramp Use Only	Feet 00873
		Street Name BOQUET ROAD			Street Ending ROAD		Or Miles

Distance From Landmark Used for Mid-Block Crashes	Landmark 2	Route Number	Or Mile Post	Tenths	Or Segment Marker	Ramp Use Only	The above entry is the distance from the Crash Scene to Landmark 1
		Street Name LINKS CT			Street Ending COURT		

GPS	Latitude:	Degrees 40	Minutes 23	Seconds 38	Decimal 128	Longitude:	Degrees 79	Minutes 35	Seconds 09	Decimal 508	
	Traffic Control Device NOT APPLICABLE					Traffic Control Functioning NO CONTROLS					
	Lane Closed NOT APPLICABLE		Lane Closure Direction			Traffic Detoured		Estimated Time Closed			

Event Information	Environmental / Roadway Potential Factors (E/R)										
	Factor 1 NONE			Factor 2			Factor 3				
	First Harmful Event in the Crash					Most Harmful Event in the Crash					
	Unit Number 001	Harmful Event HIT UNIT 2				Unit Number 001	Harmful Event HIT TREE OR SHRUBBERY				
	Indicated Prime Factor DRIVER ACTION			Unit Number 001	Prime Factor Driver Action CARELESS PARKING/UNPARKING			Prime Factor Pedestrian Action			
	Prime Factor Environmental/Roadway			Prime Factor Vehicle Failure			Prime Factor Pedestrian Action				
Road Surface Type					Special Jurisdiction						

Police Crash Report

REPORTABLE CRASH

Crash Involves:

- DUI
- Fatality
- Hit and Run
- Commercial Vehicle
- State Police Vehicle
- Local Police Vehicle
- N/A
- Work Zone
- ATV
- Snowmobile
- Commonwealth Vehicle
- Local Gov Vehicle

Unit Number 001	Type Unit Motor Vehicle in Transport	Commercial Vehicle No			
First Name [REDACTED]	MI [REDACTED]	Last Name [REDACTED]	Suffix	DOB 08/15/1926	Telephone Number [REDACTED]
Street Address [REDACTED]		City PITTSBURGH		State PA	Zip Code [REDACTED]
Gender MALE	License Number [REDACTED]	License State PA	Class C	Expiration Date 08/16/2012	Owner/Driver PRIVATE VEHICLE OWNED/LEASED BY DRIVER
Driver Presence DRIVER OPERATED VEHICLE		Physical Condition APPARENTLY NORMAL		Primary Vehicle Code Violation VC3714	
Alcohol/Drugs Suspected NO		Alcohol Test Type TEST NOT GIVEN		Alcohol Test Results	
Driver Action CARELESS PARKING/UNPARKING					
Pedestrian Action		Pedestrian Signals		Pedestrian Clothing	Pedestrian Location
1st Harmful Event HIT UNIT 2		Left or Right Side	Most Harmful NO	Utility Pole Number	
2nd Harmful Event HIT DITCH		Left or Right Side OTHER	Most Harmful NO	Utility Pole Number	
3rd Harmful Event HIT UNIT 3		Left or Right Side	Most Harmful NO	Utility Pole Number	
4th Harmful Event HIT TREE OR SHRUBBERY		Left or Right Side RIGHT	Most Harmful YES	Utility Pole Number	

Owner First Name [REDACTED]	Owner MI [REDACTED]	Owner Last Name or Business Name [REDACTED]			Suffix		
Street Address [REDACTED]		City PITTSBURGH		State PA	Zip Code [REDACTED]		
Vehicle Type AUTOMOBILE			Special Usage NOT APPLICABLE		Government Equipment Number		
Model Year 2005	Vehicle Make SUBARU	Vehicle Model OUTBACK	Vehicle Color RED	VIN 4S4BP68C254 [REDACTED]			
License Plate [REDACTED]	Reg. State PA	Est. Speed 020	Vehicle Towed YES	Towed By BARRY KELLY'S AUTO			
Insurance YES	Insurance Company ERIE		Policy Number [REDACTED]		Expiration Date		
Direction of Travel WEST	Vehicle Position OTHER		Vehicle Movement ENTERING A PARKED POSITION		Initial Impact Point 11 O'CLOCK		
Damage Indicator FUNCTIONAL	Gradient LEVEL	Road Alignment STRAIGHT	Possible Vehicle Failures BRAKE SYSTEM				
Trailing Units	# of Units 0	Type Unit 1	Tag Number	Tag Year	Tag State		
	Unit Make		Unit Owner				
	Type Unit 2	Tag Number	Tag Year	Tag State			
	Unit Make		Unit Owner				
Motorcycle	Engine Size cc	Passenger?	Saddle Bag/Trunk?	Trailer?	Driver Education?		
	Driver Helmet Type	Helmet Stayed On?	DOT/Snell Designation?	Eye Protection?	Long Sleeves?	Long Pants?	Over Ankle Boots?
	Passenger Helmet Type	Helmet Stayed On?	DOT/Snell Designation?	Eye Protection?	Long Sleeves?	Long Pants?	Over Ankle Boots?
Pedalcycle	Passenger?			Helmet?			
	Head Lights?			Rear Reflectors?			

Commonwealth of Pennsylvania Police Crash Report

Crash Involves:

- DUI Fatality Hit and Run Commercial Vehicle State Police Vehicle Local Police Vehicle
 N/A Work Zone ATV Snowmobile Commonwealth Vehicle Local Gov Vehicle

REPORTABLE CRASH

Unit Number 002	Type Unit Legally Parked	Commercial Vehicle No			
First Name	MI	Last Name	Suffix	DOB	Telephone Number
Street Address			City	State	Zip Code
Gender	License Number	License State	Class	Expiration Date	Owner/Driver
Driver Presence NO DRIVER		Physical Condition	Primary Vehicle Code Violation		Person Charged
Alcohol/Drugs Suspected		Alcohol Test Type	Alcohol Test Results		
Driver Action NO CONTRIBUTING ACTION					
Pedestrian Action		Pedestrian Signals	Pedestrian Clothing	Pedestrian Location	
1st Harmful Event STRUCK BY UNIT 1		Left or Right Side	Most Harmful YES	Utility Pole Number	
2nd Harmful Event		Left or Right Side	Most Harmful	Utility Pole Number	
3rd Harmful Event		Left or Right Side	Most Harmful	Utility Pole Number	
4th Harmful Event		Left or Right Side	Most Harmful	Utility Pole Number	

Owner First Name	Owner MI	Owner Last Name or Business Name		Suffix		
Street Address		City PITTSBURGH	State PA	Zip Code		
Vehicle Type AUTOMOBILE		Special Usage NOT APPLICABLE		Government Equipment Number		
Model Year 1999	Vehicle Make NISSAN	Vehicle Model ALTIMA	Vehicle Color BLACK	VIN 1N4DL01DOXC		
License Plate	Reg. State PA	Est. Speed 000	Vehicle Towed NO	Towed By		
Insurance NO	Insurance Company	Policy Number		Expiration Date		
Direction of Travel	Vehicle Position LEFT OF TRAFFICWAY		Vehicle Movement PARKED	Initial Impact Point 2 O'CLOCK		
Damage Indicator FUNCTIONAL	Gradient LEVEL	Road Alignment STRAIGHT	Possible Vehicle Failures NONE			
# of Units 0	Type Unit 1	Tag Number	Tag Year	Tag State		
Unit Make		Unit Owner				
Type Unit 2	Tag Number	Tag Year	Tag State			
Unit Make		Unit Owner				
Engine Size cc	Passenger?	Saddle Bag/Trunk?	Trailer?	Driver Education?		
Driver Helmet Type	Helmet Stayed On?	DOT/Snell Designation?	Eye Protection?	Long Sleeves?	Long Pants?	Over Ankle Boots?
Passenger Helmet Type	Helmet Stayed On?	DOT/Snell Designation?	Eye Protection?	Long Sleeves?	Long Pants?	Over Ankle Boots?
Passenger?		Helmet?				
Head Lights?		Rear Reflectors?				

Commonwealth of Pennsylvania Police Crash Report

Crash Involves:

- | | | | | | |
|--------------------------------------|---------------------------------|-----------------------------------|--|--|--|
| <input type="radio"/> DUI | <input type="radio"/> Fatality | <input type="radio"/> Hit and Run | <input type="radio"/> Commercial Vehicle | <input type="radio"/> State Police Vehicle | <input type="radio"/> Local Police Vehicle |
| <input checked="" type="radio"/> N/A | <input type="radio"/> Work Zone | <input type="radio"/> ATV | <input type="radio"/> Snowmobile | <input type="radio"/> Commonwealth Vehicle | <input type="radio"/> Local Gov Vehicle |

REPORTABLE CRASH

Driver/Pedestrian Information	Unit Number 003	Type Unit Legally Parked	Commercial Vehicle No			
	First Name	MI	Last Name	Suffix	DOB	Telephone Number
	Street Address			City		State Zip Code
	Gender	License Number	License State	Class	Expiration Date	Owner/Driver
	Driver Presence NO DRIVER		Physical Condition		Primary Vehicle Code Violation	
	Alcohol/Drugs Suspected		Alcohol Test Type		Alcohol Test Results	
	Driver Action NO CONTRIBUTING ACTION					
	Pedestrian Action		Pedestrian Signals		Pedestrian Clothing	Pedestrian Location
	1st Harmful Event STRUCK BY UNIT 1		Left or Right Side	Most Harmful YES	Utility Pole Number	
	2nd Harmful Event		Left or Right Side	Most Harmful	Utility Pole Number	
3rd Harmful Event		Left or Right Side	Most Harmful	Utility Pole Number		
4th Harmful Event		Left or Right Side	Most Harmful	Utility Pole Number		

Vehicle Information	Owner First Name		Owner MI	Owner Last Name or Business Name CLOVERLEAF GOLF CLUB			Suffix	
	Street Address BOX 55			City DELMONT		State PA	Zip Code 15626	
	Vehicle Type OTHER TYPE OF SPECIAL VEHICLE				Special Usage NOT APPLICABLE		Government Equipment Number	
	Model Year	Vehicle Make OTHER	Vehicle Model		Vehicle Color WHITE	VIN		
	License Plate	Reg. State	Est. Speed 000	Vehicle Towed NO	Towed By			
	Insurance NO	Insurance Company			Policy Number	Expiration Date		
	Direction of Travel SOUTH	Vehicle Position OTHER		Vehicle Movement PARKED			Initial Impact Point 9 O'CLOCK	
	Damage Indicator FUNCTIONAL	Gradient UPHILL	Road Alignment CURVED	Possible Vehicle Failures NONE				
	# of Units	Type Unit 1	Tag Number		Tag Year	Tag State		
	Trailing Units		Unit Make		Unit Owner			
			Type Unit 2	Tag Number		Tag Year	Tag State	
			Unit Make		Unit Owner			
	Motorcycle	Engine Size cc	Passenger?		Saddle Bag/Trunk?	Trailer?		Driver Education?
		Driver Helmet Type	Helmet Stayed On?	DOT/Snell Designation?		Eye Protection?	Long Sleeves?	Long Pants?
		Passenger Helmet Type	Helmet Stayed On?	DOT/Snell Designation?		Eye Protection?	Long Sleeves?	Long Pants?
Pedalcycle	Passenger?			Helmet?				
	Head Lights?			Rear Reflectors?				

Commonwealth of Pennsylvania Police Crash Report

Crash Involves:

- DUI
 Fatality
 Hit and Run
 Commercial Vehicle
 State Police Vehicle
 Local Police Vehicle
 N/A
 Work Zone
 ATV
 Snowmobile
 Commonwealth Vehicle
 Local Gov Vehicle

REPORTABLE CRASH

People Information	Unit #	Person No.	First Name	MI	Last Name	Suffix	DOB
	001	001					08/15/1926
	Street Address			City		State	Zip Code
				PITTSBURGH		PA	
	Phone Number	EMS Transport	Person Type		Gender	Injury Severity	
		YES	DRIVER		MALE	MODERATE INJURY	
	Seat Position				Safety Equipment 1		
DRIVER - ALL VEHICLES				NONE USED / NOT APPLICABLE			
Safety Equipment 2				Extrication			
NONE USED / NOT APPLICABLE				FREED BY NON-MECHANICAL MEANS			
Ejection			Ejection Path				
NOT APPLICABLE			NOT EJECTED/NOT APPLICABLE				

People Information	Unit #	Person No.	First Name	MI	Last Name	Suffix	DOB
	001	002					05/21/1925
	Street Address			City		State	Zip Code
				PITTSBURGH		PA	
	Phone Number	EMS Transport	Person Type		Gender	Injury Severity	
		YES	PASSENGER		FEMALE	MODERATE INJURY	
	Seat Position				Safety Equipment 1		
SECOND ROW - MIDDLE POSITION				NONE USED / NOT APPLICABLE			
Safety Equipment 2				Extrication			
NONE USED / NOT APPLICABLE				FREED BY NON-MECHANICAL MEANS			
Ejection			Ejection Path				
NOT APPLICABLE			NOT EJECTED/NOT APPLICABLE				

People Information	Unit #	Person No.	First Name	MI	Last Name	Suffix	DOB
	001	003					01/03/1934
	Street Address			City		State	Zip Code
				PITTSBURGH		PA	
	Phone Number	EMS Transport	Person Type		Gender	Injury Severity	
		YES	PASSENGER		FEMALE	MODERATE INJURY	
	Seat Position				Safety Equipment 1		
SECOND ROW - RIGHT SIDE				NONE USED / NOT APPLICABLE			
Safety Equipment 2				Extrication			
NONE USED / NOT APPLICABLE				FREED BY NON-MECHANICAL MEANS			
Ejection			Ejection Path				
NOT APPLICABLE			NOT EJECTED/NOT APPLICABLE				

People Information	Unit #	Person No.	First Name	MI	Last Name	Suffix	DOB
	001	004					08/28/1928
	Street Address			City		State	Zip Code
				PITTSBURGH		PA	
	Phone Number	EMS Transport	Person Type		Gender	Injury Severity	
		YES	PASSENGER		MALE	MAJOR INJURY	
	Seat Position				Safety Equipment 1		
FRONT SEAT RIGHT SIDE				NONE USED / NOT APPLICABLE			
Safety Equipment 2				Extrication			
NONE USED / NOT APPLICABLE				FREED BY NON-MECHANICAL MEANS			
Ejection			Ejection Path				
NOT APPLICABLE			NOT EJECTED/NOT APPLICABLE				

Incident Number: A04-1600370

Commonwealth of Pennsylvania
Police Crash Report

Crash involves:

- DUI Fatality Hit and Run Commercial Vehicle State Police Vehicle Local Police Vehicle
 N/A Work Zone ATV Snowmobile Commonwealth Vehicle Local Gov Vehicle

REPORTABLE CRASH

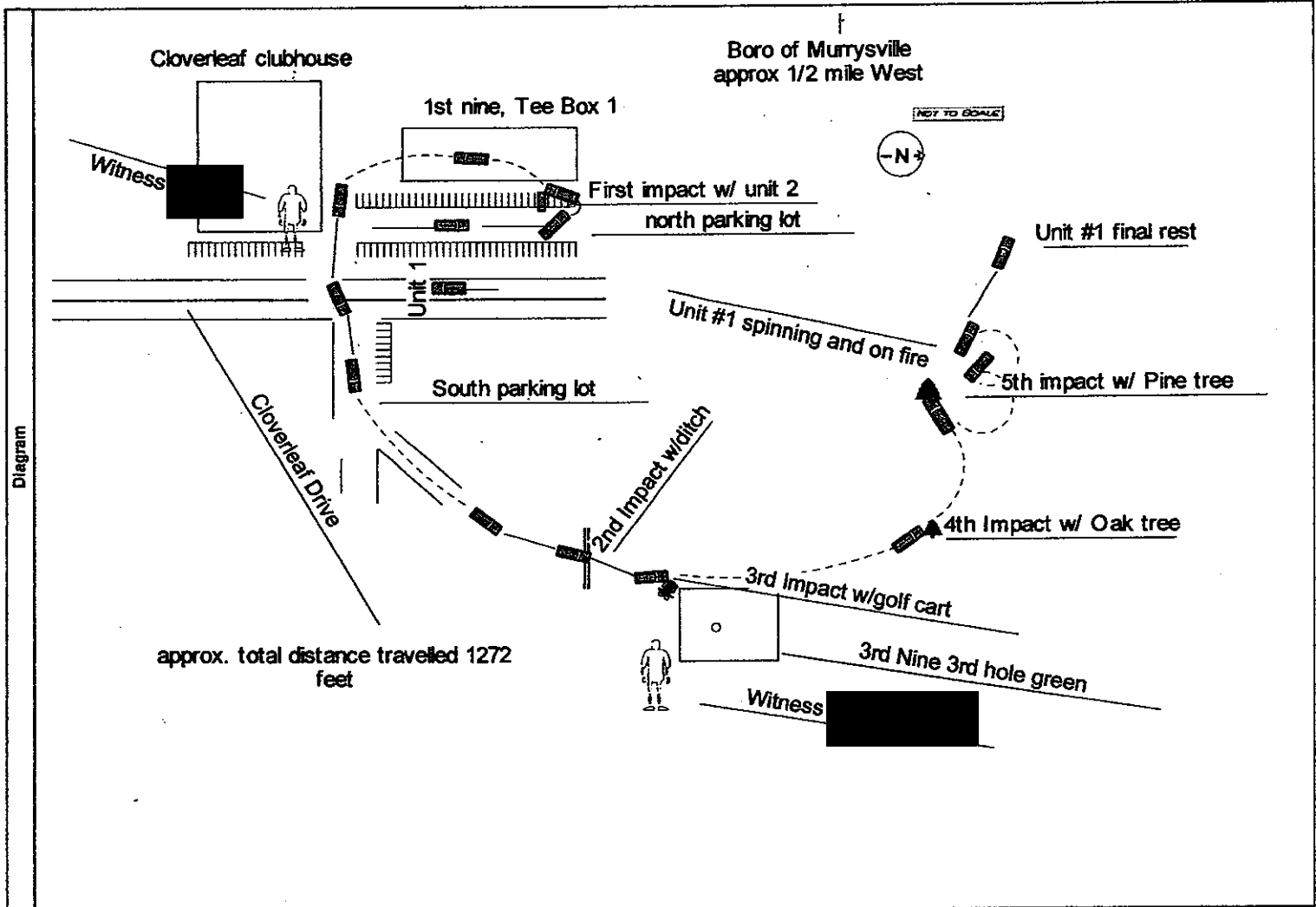
People Information	Unit #	Person No.	First Name	MI	Last Name	Suffix	DOB
	001	005					06/18/1936
	Street Address			City		State	Zip Code
				PITTSBURGH		PA	
	Phone Number	EMS Transport		Person Type		Gender	Injury Severity
		YES		PASSENGER		FEMALE	MODERATE INJURY
	Seat Position				Safety Equipment 1		
SECOND ROW - LEFT SIDE OR MOTORCYCLE PASSENGER				NONE USED / NOT APPLICABLE			
Safety Equipment 2				Extrication			
NONE USED / NOT APPLICABLE				FREED BY NON-MECHANICAL MEANS			
Ejection			Ejection Path				
NOT APPLICABLE			NOT EJECTED/NOT APPLICABLE				
Witness	First Name	MI	Last Name		Suffix	Phone Number	
Witness	Street Address			City		State	Zip Code
				GREENSBURG		PA	
Witness	First Name	MI	Last Name		Suffix	Phone Number	
Witness	Street Address			City		State	Zip Code
				MURRYSVILLE		PA	
Property Damage	Owners First Name		MI	Last Name		Suffix	Phone Number
				CLOVERLEAF GOLF CLUB			(724) 850-9308
	Street Address			City		State	Zip Code
BOX 55			DELMONT		PA	15626	
Property Description							
GOLF CART UNIT #3 AND GOLF COURSE GREENS							
Notified	Person/Business Notified			Phone Number		Date Notified	Time Notified
						09/23/2008	10:37 hrs.
Reason for Notification							
GROUNDS ON GOLF COURSE ARE TURFED AND BURNT							

Commonwealth of Pennsylvania Police Crash Report

Crash Involves:

- | | | | | | |
|--------------------------------------|---------------------------------|-----------------------------------|--|--|--|
| <input type="radio"/> DUI | <input type="radio"/> Fatality | <input type="radio"/> Hit and Run | <input type="radio"/> Commercial Vehicle | <input type="radio"/> State Police Vehicle | <input type="radio"/> Local Police Vehicle |
| <input checked="" type="radio"/> N/A | <input type="radio"/> Work Zone | <input type="radio"/> ATV | <input type="radio"/> Snowmobile | <input type="radio"/> Commonwealth Vehicle | <input type="radio"/> Local Gov Vehicle |

REPORTABLE CRASH



Crash Synopsis

This crash occurred when oper #1 had been driving into the North Parking lot at Cloverleaf Golf course. Oper #1 stated to his passengers as they drove North in the trafficway of the North parking lot, that he lost his brakes and could not stop. He drove North in the north parking lot to the end of the lot where there were 2 empty stalls. Oper #1 turned left into the stall and struck a parked car that had been parked in the 3rd stall. Unit #1 continued north after striking the right front of the Black Nissan Altima. Unit #1 drove across some large stones into the golf course. Oper #1 was attempting to stop the car but unable. Unit #1 continued to gain speed as it drove West across the First Hole First Nine Golf T box. Unit #1 was on a direct collision course with the Clubhouse and oper #1 was able to turn unit #1 to his left and drove down a golf cart path back into the North parking lot. Unit #1 crossed the parking lot and exited the main entrance/exit of the parking lot. Unit #1 then crossed Cloverleaf Drive and into the South parking lot of Cloverleaf Golf Course. Unit #1 was driven South completely threw the South parking lot and exited a small golf cart path onto the Golf Course. Unit #1 gained speed as it travelled. At this point, witness statements all confirm the speed to be in excess of 50 mph. Unit #1 was driven in a Northern direction to the point where it jumped a small ditch in the golf course, Unit #1 continued on and then the right front struck a parked golf cart at the Third Nine Golf Hole #3. Unit #1 then continued in a left turn through the golf course to the point where the right front hit an Oak Tree. Upon impact with the Oak tree,

Police Crash Report

REPORTABLE CRASH

Crash Involves:

- DUI Fatality Hit and Run Commercial Vehicle State Police Vehicle Local Police Vehicle
 N/A Work Zone ATV Snowmobile Commonwealth Vehicle Local Gov Vehicle

oper #1 completely lost control of unit #1 and it headed on a direct path to strike a large pine tree, which it did. Upon that impact, Unit #1 bounced off the tree and spun 360 degrees to the point where it stopped. Unit #1 was completely on fire in the engine compartment and Witness' Golfers ran to assist. All occupants of Unit #1 were removed by first responding Golfer's. Golfer's then pushed the burning car approx. 25 feet to the point where it finally came to rest facing North in the fairway.

Occupants were treated by Mutual Aid Ambulance. Fire department from Forbes Road put out the car fire. Which was a total loss.

Narrative

This crash occurred when oper #1 had been driving into the North Parking lot at Cloverleaf Golf course. Oper #1 stated to his passengers as they drove North in the trafficway of the North parking lot, that he lost his brakes and could not stop. He drove North in the north parking lot to the end of the lot where there were 2 empty stalls. Oper #1 turned left into the stall and struck a parked car that had been parked in the 3rd stall. Unit #1 continued north after striking the right front of the Black Nissan Altima. Unit #1 drove across some large stones into the golf course. Oper #1 was attempting to stop the car but unable. Unit #1 continued to gain speed as it drove West across the First Hole First Nine Golf T box. Unit #1 was on a direct collision course with the Clubhouse and oper #1 was able to turn unit #1 to his left and drove down a golf cart path back into the North parking lot. Unit #1 crossed the parking lot and exited the main entrance/exit of the parking lot. Unit #1 then crossed Cloverleaf Drive and into the South parking lot of Cloverleaf Golf Course. Unit #1 was driven South completely through the South parking lot and exited a small golf cart path onto the Golf Course. Unit #1 gained speed as it travelled. At this point, witness statements all confirm the speed to be in excess of 50 mph. Unit #1 was driven in a Northern direction to the point where it jumped a small ditch in the golf course, Unit #1 continued on and then the right front struck a parked golf cart at the Third Nine Golf Hole #3. Unit #1 then continued in a left turn through the golf course to the point where the right front hit an Oak Tree. Upon impact with the Oak tree, oper #1 completely lost control of unit #1 and it headed on a direct path to strike a large pine tree, which it did. Upon that impact, Unit #1 bounced off the tree and spun 360 degrees to the point where it stopped. Unit #1 was completely on fire in the engine compartment and Witness' Golfers ran to assist. All occupants of Unit #1 were removed by first responding Golfer's. Golfer's then pushed the burning car approx. 25 feet to the point where it finally came to rest facing North in the fairway. Occupants were treated by Mutual Aid Ambulance. Fire department from Forbes Road put out the car fire. Which was a total loss.

Physical evidence: This officer observed Unit #1 at final rest and tire marks that showed its path of travel. An estimated distance that Unit #1 travelled was 1/4 mile, from the point where it struck Unit #2 to the point where it came to final rest. Unit #1 was observed at final rest on fire upon my arrival. Unit #2 at final rest w/ damage to right front headlight assembly. Tire marks from first impact showing the path that unit #1 travelled. Ditch with tire marks, Unit #3, Golf cart with minor scratches on left rear, Oak tree with damage/ parts, Pine tree with Damage and parts.

This officer interviewed the operator of unit #1 at the scene on 09/23/08 at 1038 hrs, and he stated that they were pulling into the parking lot and when he went to stop he felt like he had no brakes. He told his passengers, "I can't stop." and then did his best to avoid as many people and obstacles as he could, until he had no more control and hit the big tree.

Witness, [REDACTED] was interviewed at the scene at 1042 hrs and stated, " He was

Police Crash Report

REPORTABLE CRASH

Crash Involves:

- DUI
- Fatality
- Hit and Run
- Commercial Vehicle
- State Police Vehicle
- Local Police Vehicle
- N/A
- Work Zone
- ATV
- Snowmobile
- Commonwealth Vehicle
- Local Gov Vehicle

flying, we could hear him coming. Sounded like he was in low gear but the engine was screaming. I would say about 50 to 65 mph when he hit our golf cart. Then he hit this tree (oak) then the big tree and we all ran over and helped get the people out and pushed the burning car away."

Witness [redacted] was interviewed at the scene on 09/23/08 at 1050 hrs and stated, "I was working the fist T and saw him hit the first car then drive all over the place. Then I saw the fire and came here.

Unknown seatbelt use.

This officer requested Barry Kelly's auto to check the brake system as best as possible as the entire car was burned. Barry Kelly on scene advised that brake pads were thin but appeared to be in operating condition. Not Definitive as too much fire damage.