

INFORMATION Redacted PURSUANT TO THE FREEDOM OF



INFORMATION ACT (FOIA) 5 U.S.C. 552(B)(6)

DOT Auto Safety Hotline

FOR AGENCY USE ONLY 100148

U.S. Department of Transportation
National Highway Traffic Safety Administration

Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

Date Received
NOV 10 2011
19-OCT-2011

Repository
Reference No.
10430809

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City OKLAHOMA CITY State OK Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Evening Telephone Number [REDACTED]

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: **KMHWF35HX3A** [REDACTED]
Make: HYUNDAI Model: SONATA Model Year: 2003
Date Purchased: **9-2004** Dealer's Name and Telephone Number: **Automax Hyundai** Engine: No: Cylinders: **6** Fuel Type: **Regular**
Original Owner: Dealer's City: **Del City** State: **OK** Zip Code: **73115**
Transmission Type: **Automatic** Antilock Brakes Cruise Control Powertrain: Multiple Failure: Incident Date(s): **10-OCT-2011**

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 140000 AIR BAGS, 150000 SEAT BELTS Failure Mileage: 107000 Failure Speed: 30

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: **Firestone** Tire Model (Name or Number): Tire Size (Example P215/65R15):
DOT No. (Example: DOTM9ABC036) Original Equipment 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 Yes No Fire Yes No Number of Persons Injured: 1 Number of Deaths: Reported to Police: N

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 OWNS A 2003 HYUNDAI SONATA. THE CONTACT WAS DRIVING APPROXIMATELY 30 MPH WHEN HE CRASHED INTO ANOTHER VEHICLE. THE DRIVER SIDE AIR BAG FAILED TO DEPLOY AND THE SEAT BELT FAILED TO RESTRAIN THE CONTACT. THE CONTACT SUSTAINED INJURIES TO THE CHEST, RIB AND NECK. THE VEHICLE WAS TOWED TO THE INSURANCE TOW-YARD. THE FAILURE AND THE CURRENT MILEAGE WAS 107,000. THE VIN WAS NOT AVAILABLE.

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 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)

I was wearing my seat Belt at the time of the crash. My seat Belt did not lock and my drivers side air bag did not deploy, causing personal injury!

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. 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



OKLAHOMA CITY OK 731

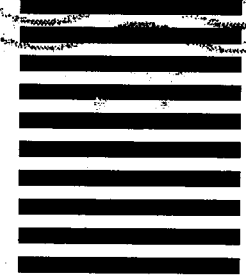
**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**

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**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration



Oklahoma City Investigation Completed

Revised

Investigation Made at Scene

Fatality

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

(1) Reporting Agency: Oklahoma City Police Department; Case Number: 1180902; Date: OCT 17 2011; Motor Vehicles Involved: 02; Number Injured: 01; Number Killed: 00

(2) Date of Collision: 10/10/2011; Time: 1652; County: 55 Oklahoma; Released: 170; Nearest City: Oklahoma City

(3) Distance from Nearest City or Town Limits; Control #; Int ID; Location; East Grid; North Grid; Administrative

(4) Street, Road or Highway: S. May; Distance from; (Nearest) Intersecting Street, Road or Highway: SW 85th

(5) Unit: 0102D; Occupants Type: Hit & Run; Last Name; First; Middle; Date of Birth; Sex: F

(6) Address: Oklahoma City; State: OK; Zip; Telephone

(7) Driver License Number; State: OK; Class: D; Endorsement(s): 0; Restriction(s): 0; Inj. Sev.: 01; Type of Injury; Drv./Ped. Cond.: 0104

(8) Ejected: 111; Extricated: 50; Test; (% BAC); Transported by; To Medical Facility; License Plate Number; State: OK; Month: 01; Year: 2012

(9) VIN: 1G2NES2E25M; Vehicle Year: 2005; Color: Whi; 2nd Color: D; Make: Pont; Model: Gran; Veh. Conf.: 02; Extent of Damage: 4

(10) Insurance Company Name: Pride National; Policy Number; Insurance Telephone: 4056049700

(11) Vehicle Removed by; Driver; Owner's Last Name; First; Middle Initial

(12) Owner's Address; City; State; Zip; Towed Veh. Type; Oversized Load: 0; Rollover: 0; Burned: 0; Phone present: 0; Phone in use: 0

(13) Citation Number; Statute/Ordinance Number; Citation Number; Statute/Ordinance Number

(14) Unit: 0101D; Occupants Type: Hit & Run; Last Name; First; Middle; Date of Birth; Sex: M

(15) Address: Oklahoma City; State: OK; Zip; Telephone

(16) Driver License Number; State: OK; Class: D; Endorsement(s): 0; Restriction(s): 0; Inj. Sev.: 62; Type of Injury; Drv./Ped. Cond.: 90104

(17) Ejected: 211; Extricated: 50; Test; (% BAC); Transported by: EMSA; To Medical Facility: SouthWest Medical; License Plate Number; State: OK; Month: 09; Year: 2012

(18) VIN: KMHW35HX3A; Vehicle Year: 2003; Color: Blu; 2nd Color: D; Make: Hyun; Model: Song; Veh. Conf.: 02; Extent of Damage: 4

(19) Insurance Company Name: Allstate; Policy Number; Insurance Telephone: 4053415338

(20) Vehicle Removed by; Driver; Owner's Last Name; First; Middle Initial

(21) Owner's Address; City; State; Zip; Towed Veh. Type; Oversized Load: 0; Rollover: 0; Burned: 0; Phone present: 0; Phone in use: 0

(22) Citation Number; Statute/Ordinance Number; Citation Number; Statute/Ordinance Number

(23) Investigating Officer: Cabello; Badge Number: 1658; Troop/Div.: SF2B; Reviewed by: Wht; Reviewer Badge Number: 0600; Date of Report: 10/10/2011

Table with columns: Unit Type, Injury Severity, Type of Injury, Driver/Pedestrian Condition, Occupant Protection (OP) In Use, Air Bag Deployed, Ejected, Extricated, Chemical Test, Extent of Damage, Insurance Verification, Oversized Load, Towed Vehicle Type

WARNING - STATE LAW Use of contents for commercial solicitation is unlawful

(24) Unit Injured Witness Passenger Prop. Owner Pos in Veh. 42 Last Name [Redacted] First [Redacted] Middle Initial [Redacted] Date of Birth (mm/dd/yyyy) [Redacted] Sex M

(25) Address Same as Driver City [Redacted] State [Redacted] Zip [Redacted] Telephone (Use Area Code) [Redacted]

(26) Injury Severity / Type 1 OP Use 008111 Air Bag Ejected 11 Extricated 11 Transported by [Redacted] To Medical Facility [Redacted] Property Type [Redacted]

(27) Unit Injured Witness Passenger Prop. Owner Pos in Veh. [Redacted] Last Name [Redacted] First [Redacted] Middle Initial [Redacted] Date of Birth (mm/dd/yyyy) [Redacted] Sex [Redacted]

(28) Address Same as Driver City [Redacted] State [Redacted] Zip [Redacted] Telephone (Use Area Code) [Redacted]

(29) Injury Severity / Type [Redacted] OP Use [Redacted] Air Bag Ejected [Redacted] Extricated [Redacted] Transported by [Redacted] To Medical Facility [Redacted] Property Type [Redacted]

(30) Unit Injured Witness Passenger Prop. Owner Pos in Veh. [Redacted] Last Name [Redacted] First [Redacted] Middle Initial [Redacted] Date of Birth (mm/dd/yyyy) [Redacted] Sex [Redacted]

(31) Address Same as Driver City [Redacted] State [Redacted] Zip [Redacted] Telephone (Use Area Code) [Redacted]

(32) Injury Severity / Type [Redacted] OP Use [Redacted] Air Bag Ejected [Redacted] Extricated [Redacted] Transported by [Redacted] To Medical Facility [Redacted] Property Type [Redacted]

(33) Unit Injured Witness Passenger Prop. Owner Pos in Veh. [Redacted] Last Name [Redacted] First [Redacted] Middle Initial [Redacted] Date of Birth (mm/dd/yyyy) [Redacted] Sex [Redacted]

(34) Address Same as Driver City [Redacted] State [Redacted] Zip [Redacted] Telephone (Use Area Code) [Redacted]

(35) Injury Severity / Type [Redacted] OP Use [Redacted] Air Bag Ejected [Redacted] Extricated [Redacted] Transported by [Redacted] To Medical Facility [Redacted] Property Type [Redacted]

RELEASED BY RECORDS
Oklahoma City Police Department
Capt. D. Clark
City Supt. Of Central Records
OCT 17 2011
Released By

Complete information below if this vehicle is being used for COMMERCE/BUSINESS and has a GVWR/GCWR IN EXCESS OF 10,000 LBS, or has a HAZMAT PLACARD, or is a BUS WITH SEATING FOR NINE OR MORE INCLUDING THE DRIVER

(36) Unit Carrier Name [Redacted] Address [Redacted]

(37) City [Redacted] State [Redacted] Zip [Redacted] GVWR 0 - 10K lbs. 10,001 - 26K lbs. 26K+ lbs. Axle Qty. [Redacted] Cargo Body [Redacted] Vehicle Use Interstate Commerce Intrastate Commerce Other Non-Commercial Government

(38) U.S. DOT Number [Redacted] NASI Report Number OK Placard Number [Redacted] Haz. Mat. Class [Redacted] Haz. Mat. Involved Yes No Haz. Mat. Release Yes No

(39) Unit Carrier Name [Redacted] Address [Redacted]

(40) City [Redacted] State [Redacted] Zip [Redacted] GVWR 0 - 10K lbs. 10,001 - 26K lbs. 26K+ lbs. Axle Qty. [Redacted] Cargo Body [Redacted] Vehicle Use Interstate Commerce Intrastate Commerce Other Non-Commercial Government

(41) U.S. DOT Number [Redacted] NASI Report Number OK Placard Number [Redacted] Haz. Mat. Class [Redacted] Haz. Mat. Involved Yes No Haz. Mat. Release Yes No

Position in Vehicle	Vehicle Configuration	Cargo Body Type
<p>00. Not Applicable 18. Front Row - Other 28. Second Row - Other 38. Third Row - Other 48. Fourth Row - Other 50. Sleeper Section of Truck Cab</p> <p>See manual for additional seating examples</p>	<p>00. N/A</p> <p>01. Passenger Veh.-2 Dr</p> <p>02. Passenger Veh.-4 Dr</p> <p>03. Passenger Veh. Conv.</p> <p>04. Pickup</p> <p>05. Single Unit Truck, 2 axles</p> <p>06. Single Unit Truck, 3+ axles</p> <p>07. School Bus</p> <p>08. Truck/Trailer</p> <p>09. Truck-Tractor (Bobtail)</p> <p>10. Truck-Tractor/ Semi-Trailer</p> <p>11. Truck-Tractor/ Double</p> <p>12. Truck-Tractor/ Triple</p> <p>13. Bus/Large Van 9-15 occupants including driver</p> <p>14. Bus 16+ occupants including driver</p> <p>15. Motorcycle</p> <p>16. Motor Scooter/ Moped</p> <p>17. Motor Home</p> <p>18. Farm Machinery</p> <p>19. ATV</p> <p>20. SUV</p> <p>21. Passenger Van</p> <p>22. Truck more than 10,000 lbs., Cannot Classify</p> <p>23. Van 10,000 lbs. or Less</p> <p>24. Other</p> <p>99. Unknown</p>	<p>00. N/A</p> <p>01. Bus 9-15 seats</p> <p>02. Bus 16+ seats</p> <p>03. Van / Enclosed Box / Stock Trailer</p> <p>04. Cargo Tank</p> <p>05. Flatbed</p> <p>06. Intermodal</p> <p>07. Dump Truck/ Trailer</p> <p>08. Concrete Mixer</p> <p>09. Auto Transporter</p> <p>10. Garbage/Refuse</p> <p>11. Hopper (grain/ chips/gravel)</p> <p>12. Pole Trailer</p> <p>13. Log Trailer</p> <p>14. Vehicle Towing Vehicle</p> <p>15. Other</p> <p>99. Unknown</p>

Unit	Total Lanes in Roadway	Legal Speed	Pedestrian / Pedalcyclist Only			
			Actions Prior to Collision	Location at Time of Collision	Safety Equip.	Unit Number of Vehicle Striking
This unit will correspond to 'Unit 1'	01	04	40			
This unit will correspond to 'Unit 2'	02	04	40			

Was the collision in or near a construction, maintenance or utility work zone? (if yes, complete this section) Yes No

RELEASED BY RECORDS
Oklahoma City Police Department
Type of Work Zone: Lane Shift/Crossover
Location of the Work Zone: Before the First Work Zone

1 Lane Shift/Crossover
2 Lane Shift/Crossover
3 Work on Shoulder or Median
4 Interrupted or Moving Work
9 Unknown

1 Zone Warning Sign
2 Advance Warning Area
3 Transition Area
4 Activity Area
5 Termination Area
9 Unknown

Light	What Vehicle Was Going to Do		Underride/Override
	Unit 1	Unit 2	
1 Daylight	12	01	0 Not Applicable
2 Dark-Not Lighted			1 No Underride or Override
3 Dark-Lighted			2 Underride, Compartment Intrusion
4 Dawn			3 Underride, No Compartment Intrusion
5 Dusk			4 Underride, Compartment Intrusion Unknown
6 Dark-Unknown Lighting			5 Override, Motor Vehicle in Transport
7 Other			6 Override, Other Motor Vehicle
9 Unknown			9 Unknown

Released By Workers Present Yes No Unknown

Weather	What Vehicle Did		Traffic Control
	Unit 1	Unit 2	
01 Clear	05	01	00 No Control
02 Fog/Smog/Smoke			01 Stop Sign
03 Cloudy			02 Traffic Signal
04 Rain			03 Flashing Traffic Signal
05 Snow			04 School Zone Signs
06 Sleet/Hail (Freezing Rain/Drizzle)			05 Yield Sign
07 Severe Crosswind			06 Warning Sign
08 Blowing Snow			07 Railroad Advance Warning Sign
09 Blowing Sand, Soil, Dirt			08 Railroad Cross Bucks
10 Other			09 Railroad Gates
99 Unknown			10 Railroad Signal

Trafficway	Unsafe / Unlawful Contributing Factors	
	Unit 1	Unit 2
3	9	7

0 Not Applicable
1 One Way
2 Two-Way - Not Divided
3 Two-Way - Divided
4 Two-Way - Divided - Positive Median Barrier
5 Turn Lane
6 Ramp / Loop
7 Driveway
8 Alley / Parking Lot
9 Unknown

FAILED TO YIELD
01 From Stop Sign
02 From Yield Sign
03 Private Drive
04 County Road at Through Highway
05 From Signal Light
06 From Alley
07 To Pedestrian
08 To Vehicle on Right
09 To Vehicle in Intersection
10 To Emergency Vehicles
12 Other

FOLLOWED TOO CLOSELY
13 Human Element
14 Traffic Condition
15 Weather Condition

UNSAFE SPEED
16 Driver's Ability (Aged)
17 Inexperienced Driver - Young
18 Exceeding Legal Limit
19 For Traffic Conditions
20 For Type of Roadway (Gravel, Dirt, etc.)
21 For Ice or Snow on Roadway
22 Rain or Wet Roadway
23 Wind
24 Other Weather Conditions
25 Vehicle Condition
26 View Obstruction
27 On Curve/Turn
28 Impeding Traffic
29 Other

IMPROPER TURN
30 From Wrong Lane
31 From Direct Course
32 Right
33 Left
34 Turn About/U-Turn
35 To Enter Private Drive
36 In Front of Oncoming Traffic
37 Other

CHANGED LANES UNSAFELY
38 STOPPED IN TRAFFIC LANE
FAILED TO STOP
40 For Stop Sign
41 For Traffic Signal
42 For School Bus
43 For Railroad Gates/Signal
44 For Officer/Flagman
45 At Sidewalk/Stopline
46 Other

UNSAFE VEHICLE
47 Brakes
48 Steering

TIRES
49 Suspension
50 Headlights
51 Tail Lights
52 Stop Lights
53 Wheel
54 Exhaust System
55 Windshield Wipers
56 Other Mechanical Defects

LEFT OF CENTER
58 In Meeting
59 No Passing Zone (Unmarked)
60 Marked Zone
61 Other

IMPROPER OVERTAKING
62 In Marked Zone
63 On Hill/Curve
64 At Intersection
65 Without Sufficient Clearance
66 Other

IMPROPER PARKING
67 On Roadway
68 Where Prohibited
69 Other

INATTENTION
70 Distracted by Passenger in Vehicle
71 Other Distraction Inside Vehicle
72 Distraction From Outside Vehicle
73 Other

WRONG WAY
74 On One Way
75 On Exit Ramp
76 On Entrance Ramp
77 Other

IMPROPER START FROM
78 Parked Position
79 Other

ALCOHOL-DUI/DWI
80 ALCOHOL-DUI/DWI
81 DRUG-DUI
OTHER IMPROPER ACT/ MOVEMENT
82 Failed to Signal
83 Disregarded Warning Signal
84 Improper Use of Lane
85 Improper Backing
86 Apparently Sleepy
87 Failed to Secure Load
88 Other/Unknown
UNKN/NO IMPROPER ACT
89 Deer in Roadway
90 Animal in Roadway
91 Domestic Animal in Rdwy
92 Avoiding Other Vehicle
93 Avoiding Pedestrian
94 Object/Debris in Roadway
95 Defect in Roadway
96 Abnormal Traffic Control
97 Improper Bicyclist Action
98 NO IMPROPER ACTION BY DRIVER
99 PEDESTRIAN ACTION

Locality	What Vehicle Did		Road Surface Conditions
	Unit 1	Unit 2	
1 Residential	05	01	01 Dry
2 Business			02 Wet
3 Industrial			03 Ice/Frost
4 School			04 Snow
5 Not Built-up			05 Mud, Dirt, Gravel
6 Mixed Use			06 Slush
7 Other			07 Water (standing, moving)
9 Unknown			08 Sand

Vehicle Removal	Vehicle Condition	
	Unit 1	Unit 2
1	01	01

0 Not Applicable
1 Towed Due to Vehicle Damage
2 Towed For Reasons Other Than Damage
3 Remained at Scene
4 Driven from Scene
9 Unknown

00 Not Applicable
01 Apparently Normal
02 Brakes
03 Headlights
04 Steering
05 Tail Lights
06 Brake Lights
07 Tires/Wheels
08 Suspension
09 Signal lights
10 Windows
11 Truck Coupling/Trailer Hitch/Safety Chains
12 Mirrors
13 Wipers
14 Power Train

Type of Intersection	Road Character	
	Unit 1	Unit 2
3	1	1

0 Not an Intersection
1 Y-Intersection
2 T-Intersection
3 Four-Way Intersection
4 Five-Point or More Intersection as Part of Interchange
5 Traffic Circle
6 Roundabout
9 Unknown

1 Level
2 Hillcrest
3 Uphill
4 Downhill
5 Sag (bottom)

Special Function of Vehicle	Road Alignment	
	Unit 1	Unit 2
00 Not Applicable	1	1

00 Not Applicable
01 School Bus
02 Transit Bus
03 Intercity Bus
04 Charter Bus
05 Other Bus
06 Military
07 OHP
08 Other Police
09 Other Law Enforcement
10 Ambulance
11 Fire Truck
12 Public Owned Vehicle
13 Highway Equipment
14 Special Mobilized Machine
15 Other

1 Straight
2 Curve - Left
3 Curve - Right

Incident Type	Road Surface Type	
	Unit 1	Unit 2
00 Not an Incident	1	1

00 Not an Incident
01 Private Property
02 Deliberate Intent
03 Medical Condition
04 Legal Intervention
05 Suicide
06 Drowning
07 Other

1 Concrete
2 Asphalt
3 Gravel
4 Dirt
5 Brick
6 Other
9 Unknown

Location of First Harmful Event	Driver Distracted by	
	Unit 1	Unit 2
01 On Roadway	0	0

01 On Roadway
02 Shoulder
03 Median
04 Roadside
05 Gore
06 Separator
07 Parking Lane/Zone
08 Off Roadway, Location Unknown
09 Outside Right-of-Way
10 Other
99 Unknown

0 Not Applicable/None
1 Electronic Communication Devices
2 Other Electronic-Device
3 Other Inside Vehicle
4 Other Outside Vehicle
9 Unknown

Emergency Vehicle Responding to an Emergency	Point of First Contact on Vehicle	
	Unit 1	Unit 2
2	6	12

0 N/A
1 Yes
2 No
9 Unknown

00 Not Applicable
13 Top
14 Undercarriage
99 Unknown

Most Damaged Area	Driver Distracted by	
	Unit 1	Unit 2
06	0	0

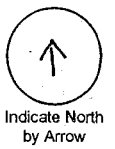
00 Not Applicable
13 Top
14 Undercarriage
99 Unknown

Latitude Longitude Railroad Crossing Number Roadway Orientation Unit Number NE SW S Unit Number NE SW S

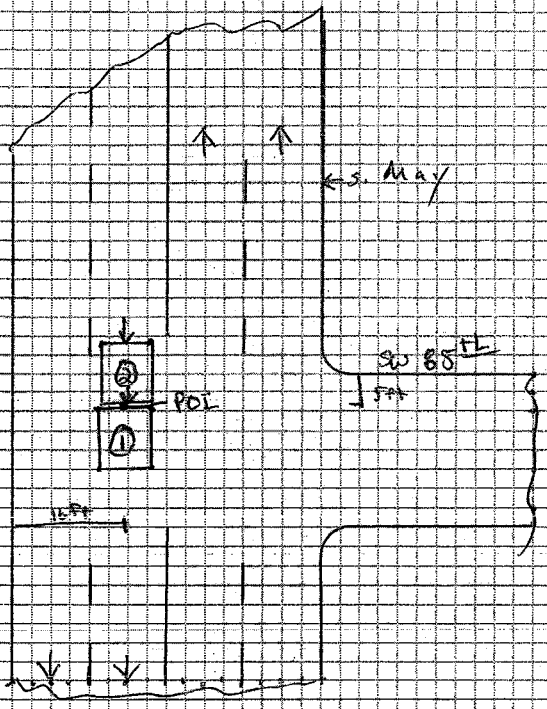
NOT FORSTED BY RECORDER
 Oklahoma City Police Department
 Suppl. CV Central Records
 OCT 17 2011

Released by

Diagram not up to scale



POI is 16 ft east of TL
 west curbline of S. May
 and 5 ft south of the
 north curbline of SW 85th



COLLISION EVENTS

Unit	First Event	Second Event	Third Event	Fourth Event	Most Harmful Event	First Harmful Event for the Entire Collision
01	34	00	00	00	34	34
02	34	00	00	00	34	34

- | | | | |
|--|---|-------------------------------------|-----------------------------------|
| 00 Not Applicable | 21 Fell/Jumped From Motor Vehicle | 37 Work Zone/Maintenance Equipment | 56 Pavement Drop-Off |
| 10 Overturn/Rollover | 22 Thrown Or Falling Object | 38 Other Non-Fixed Object | 57 Ditch |
| 11 Fire/Explosion | 23 Other Non-Collision | FIXED OBJECT: | 58 Embankment |
| 12 Immersion | PERSON, MOTOR VEHICLE, OR NON-FIXED OBJECT: | 40 Barrier (Cable) | 59 Tree (Standing) |
| 13 Jackknife | 30 Pedestrian | 41 Barrier (Concrete) | 60 Dividing Strip |
| 14 Cargo/Equipment Loss or Shift | 31 Pedal Cycle | 42 Barrier (Other) | 61 Retaining Wall |
| 15 Equipment Failure (Blown Tire, Brake Failure, etc.) | 32 Railway Vehicle (train, engine) | 43 Fence Pole | 62 Bridge Abutment |
| 16 Separation of Units | 33 Animal | 44 Fence | 63 Bridge Pier or Support |
| 17 Departed Road Right | 34 Motor Vehicle in Transport | 45 Traffic Signal Support | 64 Bridge Rail |
| 18 Departed Road Left | 35 Parked Motor Vehicle | 46 Traffic Sign Support | 65 Bridge Post |
| 19 Cross Median/Centerline | 36 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle | 47 Utility Pole/Light Support | 66 Bridge Curb |
| 20 Downhill Runaway | | 48 Other Post/Pole/Support | 67 Bridge Super Structure (Beams) |
| | | 49 Guardrail/Guardrail Face | 68 Bridge Overhead Structure |
| | | 50 Guardrail End | 69 Delineator |
| | | 51 Culvert | 70 Mailbox |
| | | 52 Curb | 71 Other Fixed Object |
| | | 53 Island | 72 Other Highway Structure |
| | | 54 Sand Barrels | 73 Ground |
| | | 55 Impact Attenuator/ Crash Cushion | 99 Unknown |

Remarks

V1 was stopped in the inside lane wanting to turn left (EB). V2 was behind V1 and rear-ended V1. V2 driver stated shortly distracted him.