

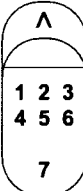
OCT 09 2014

TRAFFIC

EQ-10661297-8893

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SPECIAL CONDITIONS		INFORMATION REDACTED PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)		JUDICIAL DISTRICT		LOCAL REPORT NUMBER	
NUMBER		ANALYSIS		NJC		[REDACTED]	
DATE		ORANGE		BEAT		DAY OF WEEK	
0				D-1		S M T W T F S	
COLLISION OCCURRED ON		MO. DAY YEAR		TIME (2400)		TOW AWAY	
[REDACTED]		10-7-14		2131		YES ☒ NO ☐	
MILEPOST INFORMATION		GPS COORDINATES		NCIC #		OFFICER I.D.	
[REDACTED]		[REDACTED]		3001		[REDACTED]	
FEET/MILES OF		LATITUDE		LONGITUDE		PHOTOGRAPHS BY:	
[REDACTED]		[REDACTED]		[REDACTED]		NONE ☒	
AT INTERSECTION WITH		STATE HWY REL		YES ☐ NO ☒			
OR: FEET/MILES OF		[REDACTED]					
PARTY 1		DRIVER'S LICENSE NUMBER		STATE		CLASS	
1		[REDACTED]		CA		C	
DRIVER		NAME (FIRST, MIDDLE, LAST)		AIR BAG		SAFETY EQUIP.	
[REDACTED]		[REDACTED]		M		G	
PEDESTRIAN		STREET ADDRESS		VEH. YEAR		MAKE/MODEL/COLOR	
[REDACTED]		[REDACTED]		13		TOYOTA/COROLLA	
PARKED VEHICLE		CITY/STATE/ZIP		LICENSE NUMBER		STATE	
[REDACTED]		STANTON CA [REDACTED]		[REDACTED]		CA	
BICYCLIST		SEX		HAIR		EYES	
[REDACTED]		M		BLK		BRN	
OTHER		HOME PHONE		BUSINESS PHONE		HEIGHT	
[REDACTED]		[REDACTED]		[REDACTED]		6-0	
INSURANCE CARRIER		POLICY NUMBER		WEIGHT		Mo. BIRTHDATE	
AAA		[REDACTED]		180		Day Year	
DIR OF TRAVEL		ON STREET OR HIGHWAY		SPEED LIMIT		RACE	
N/B		[REDACTED]		35		[REDACTED]	
PARTY 2		DRIVER'S LICENSE NUMBER		STATE		CLASS	
2		[REDACTED]		CA		C	
DRIVER		NAME (FIRST, MIDDLE, LAST)		AIR BAG		SAFETY EQUIP.	
[REDACTED]		[REDACTED]		L		G	
PEDESTRIAN		STREET ADDRESS		VEH. YEAR		MAKE/MODEL/COLOR	
[REDACTED]		[REDACTED]		94		MAZDA/MIATA	
PARKED VEHICLE		CITY/STATE/ZIP		LICENSE NUMBER		STATE	
[REDACTED]		NEWPORT BEACH CA [REDACTED]		[REDACTED]		CA	
BICYCLIST		SEX		HAIR		EYES	
[REDACTED]		M		BLK		BRN	
OTHER		HOME PHONE		BUSINESS PHONE		HEIGHT	
[REDACTED]		[REDACTED]		[REDACTED]		5-7	
INSURANCE CARRIER		POLICY NUMBER		WEIGHT		Mo. BIRTHDATE	
ALLIANCE UNITED		[REDACTED]		155		Day Year	
DIR OF TRAVEL		ON STREET OR HIGHWAY		SPEED LIMIT		RACE	
S-E		[REDACTED]		35		[REDACTED]	
PARTY 3		DRIVER'S LICENSE NUMBER		STATE		CLASS	
3		[REDACTED]		CA		C	
DRIVER		NAME (FIRST, MIDDLE, LAST)		AIR BAG		SAFETY EQUIP.	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
PEDESTRIAN		STREET ADDRESS		VEH. YEAR		MAKE/MODEL/COLOR	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
PARKED VEHICLE		CITY/STATE/ZIP		LICENSE NUMBER		STATE	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
BICYCLIST		SEX		HAIR		EYES	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
OTHER		HOME PHONE		BUSINESS PHONE		HEIGHT	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
INSURANCE CARRIER		POLICY NUMBER		WEIGHT		Mo. BIRTHDATE	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
DIR OF TRAVEL		ON STREET OR HIGHWAY		SPEED LIMIT		RACE	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
PREPARER'S NAME		DISPATCH NOTIFIED		REVIEWER'S NAME		DATE REVIEWED	
J. ACCORNERO (A1252)		YES ☐ NO ☐ N/A ☒		R. ALEXANDER #0300		10/9/14	

DATE OF COLLISION (MO. DAY YEAR) 10-7-14		TIME (2400) 2131	NCIC # 3001	OFFICER I.D. A1252	NUMBER [REDACTED]		
PROPERTY DAMAGE	OWNER'S NAME		OWNER'S ADDRESS		NOTIFIED ☐ YES ☐ NO		
	DESCRIPTION OF DAMAGE						
SEATING POSITION  1 - DRIVER 2 TO 6 - PASSENGERS 7 - STATION WAGON REAR 8 - REAR OCC. TRK. OR VAN 9 - POSITION UNKNOWN 0 - OTHER		SAFETY EQUIPMENT OCCUPANTS A - NONE IN VEHICLE B - UNKNOWN C - LAP BELT USED D - LAP BELT NOT USED E - SHOULDER HARNESS USED F - SHOULDER HARNESS NOT USED G - LAP/SHOULDER HARNESS USED H - LAP/SHOULDER HARNESS NOT USED J - PASSIVE RESTRAINT USED K - PASSIVE RESTRAINT NOT USED P - NOT REQUIRED CHILD RESTRAINT Q - IN VEHICLE USED R - IN VEHICLE NOT USED S - IN VEHICLE USE UNKNOWN T - IN VEHICLE IMPROPER USE U - NONE IN VEHICLE M/C BICYCLE HELMET DRIVER PASSENGER V - NO X - NO W - YES Y - YES		AIR BAG B - UNKNOWN L - AIR BAG DEPLOYED M - AIR BAG NOT DEPLOYED N - OTHER P - NOT REQUIRED EJECTED FROM VEHICLE 0 - NOT EJECTED 1 - FULLY EJECTED 2 - PARTIALLY EJECTED 3 - UNKNOWN		INATTENTION CODES A - CELLPHONE HANDHELD B - CELLPHONE HANDSFREE C - ELECTRONIC EQUIPMENT D - RADIO / CD E - SMOKING F - EATING G - CHILDREN H - ANIMALS I - PERSONAL HYGIENE J - READING K - OTHER	
ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (*) SHOULD BE EXPLAINED IN THE NARRATIVE.							
PRIMARY COLLISION FACTOR LIST NUMBER (#) OF PARTY AT FAULT		TRAFFIC CONTROL DEVICES		1 2 3	SPECIAL INFORMATION	1 2 3	MOVEMENT PRECEDING COLLISION
A VC SECTION VIOLATED 2 21801 (a)		X A CONTROLS FUNCTIONING			A HAZARDOUS MATERIAL		A STOPPED
B OTHER IMPROPER DRIVING*		B CONTROLS NOT FUNCTIONING*			B CELL PHONE HANDHELD IN USE	X	B PROCEEDING STRAIGHT
C OTHER THAN DRIVER*		C CONTROLS OBSCURED			C CELL PHONE HANDSFREE IN USE		C RAN OFF ROAD
D UNKNOWN*		D NO CONTROLS PRESENT / FACTOR*		XY	D CELL PHONE NOT IN USE		D MAKING RIGHT TURN
		TYPE OF COLLISION			E SCHOOL BUS RELATED	X	E MAKING LEFT TURN
		A HEAD - ON			F 75 FT MOTORTRUCK COMBO		F MAKING U TURN
		B SIDE SWIPE			G 32 FT TRAILER COMBO		G BACKING
		C REAR END			H		H SLOWING / STOPPING
WEATHER (MARK 1 TO 2 ITEMS)		X D BROADSIDE			I		I PASSING OTHER VEHICLE
X A CLEAR		E HIT OBJECT			J		J CHANGING LANES
B CLOUDY		F OVERTURNED			K		K PARKING MANEUVER
C RAINING		G VEHICLE / PEDESTRIAN			L		L ENTERING TRAFFIC
D SNOWING		H OTHER*:			M		M OTHER UNSAFE TURNING
E FOG / VISIBILITY FT.					N		N XING INTO OPPOSING LANE
F OTHER*:		MOTOR VEHICLE INVOLVED WITH			O		O PARKED
G WIND		A NON - COLLISION					P MERGING
LIGHTING		B PEDESTRIAN					Q TRAVELING WRONG WAY
A DAYLIGHT		X C OTHER MOTOR VEHICLE		1 2 3	OTHER ASSOCIATED FACTOR(S) (MARK 1 TO 2 ITEMS)		R OTHER*:
B DUSK - DAWN		D MOTOR VEHICLE ON OTHER ROADWAY			A VC SECTION VIOLATION CITED ☐ YES ☐ NO		
X C DARK - STREET LIGHTS		E PARKED MOTOR VEHICLE			B VC SECTION VIOLATION CITED ☐ YES ☐ NO		
D DARK - NO STREET LIGHTS		F TRAIN			C VC SECTION VIOLATION CITED ☐ YES ☐ NO		
E DARK - STREET LIGHTS NOT FUNCTIONING*		G BICYCLE					
		H ANIMAL:					
ROADWAY SURFACE		I FIXED OBJECT:					SOBRIETY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)
X A DRY		J OTHER OBJECT:			D	X X	A HAD NOT BEEN DRINKING
B WET					E VISION OBSCUREMENT:		B HBD - UNDER THE INFLUENCE
C SNOWY - ICY					F INATTENTION*:		C HBD - NOT UNDER INFLUENCE*
D SLIPPERY (MUDDY, OILY, ETC.)					G STOP & GO TRAFFIC		D HBD - IMPAIRMENT UNKNOWN*
ROADWAY CONDITIONS (MARK 1 TO 2 ITEMS)		PEDESTRIAN'S ACTIONS			H ENTERING / LEAVING RAMP		E UNDER DRUG INFLUENCE*
A HOLES, DEEP RUT*		X A NO PEDESTRIANS INVOLVED			I PREVIOUS COLLISION		F IMPAIRMENT - PHYSICAL*
B LOOSE MATERIAL ON ROADWAY*		B CROSSING IN CROSSWALK - AT INTERSECTION			J UNFAMILIAR WITH ROAD		G IMPAIRMENT NOT KNOWN
C OBSTRUCTION ON ROADWAY*		C CROSSING IN CROSSWALK - NOT AT INTERSECTION			K DEFECTIVE VEH. EQUIP.: CITED ☐ YES ☐ NO		H NOT APPLICABLE
D CONSTRUCTION - REPAIR ZONE		D CROSSING - NOT IN CROSSWALK			L UNINVOLVED VEHICLE		I SLEEPY / FATIGUED*
E REDUCED ROADWAY WIDTH		E IN ROAD - INCLUDES SHOULDER			M OTHER*:		
F FLOODED*		F NOT IN ROAD		XY	N NONE APPARENT		
X H NO UNUSUAL CONDITIONS		G APPROACHING / LEAVING SCHOOL BUS			O RUNAWAY VEHICLE		
SKETCH		 INDICATE NORTH		MISCELLANEOUS			

DATE OF COLLISION (MO. DAY YEAR)				TIME (2400)	NCIC #	OFFICER I.D.						NUMBER							
10-7-14				2131	3001	A1252						[REDACTED]							
WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ("X" ONE)				INJURED WAS ("X" ONE)					PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED		
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER							
☐ #	☐	-	m	☐	☐	☐	☒	☒	☐	☐	☐	☐	1	1	m	G	O		
NAME / D. O. B. / ADDRESS																	TELEPHONE		
SAME AS [REDACTED]																			
(INJURED ONLY) TRANSPORTED BY:																	TAKEN TO:		
REFUSED																			
DESCRIBE INJURIES																			
COMPLAINT OF PAIN TO NECK, LT ARM PAIN																			
																	☐ VICTIM OF VIOLENT CRIME NOTIFIED		
☐ #	☐	-	m	☐	☐	☐	☒	☒	☐	☐	☐	☐	2	1	L	G	O		
NAME / D. O. B. / ADDRESS																	TELEPHONE		
SAME AS [REDACTED]																			
(INJURED ONLY) TRANSPORTED BY:																	TAKEN TO:		
REFUSED																			
DESCRIBE INJURIES																			
SEAT BELT ABRASION ON NECK, LT ARM PAIN																			
																	☐ VICTIM OF VIOLENT CRIME NOTIFIED		
☒ #	1	-	m	☐	☐	☐	☐	☐	☐	☐	☐	☐							
NAME / D. O. B. / ADDRESS																	TELEPHONE		
[REDACTED]																			
(INJURED ONLY) TRANSPORTED BY:																	TAKEN TO:		
																	ANAHEIM, CA [REDACTED]		
DESCRIBE INJURIES																			
																	☐ VICTIM OF VIOLENT CRIME NOTIFIED		
☒ #	2	-	F	☐	☐	☐	☐	☐	☐	☐	☐	☐							
NAME / D. O. B. / ADDRESS																	TELEPHONE		
[REDACTED]																			
(INJURED ONLY) TRANSPORTED BY:																	TAKEN TO:		
																	ANAHEIM, CA [REDACTED]		
DESCRIBE INJURIES																			
																	☐ VICTIM OF VIOLENT CRIME NOTIFIED		
☐ #	☐			☐	☐	☐	☐	☐	☐	☐	☐	☐							
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(INJURED ONLY) TRANSPORTED BY:																	TAKEN TO:		
DESCRIBE INJURIES																			
																	☐ VICTIM OF VIOLENT CRIME NOTIFIED		
☐ #	☐			☐	☐	☐	☐	☐	☐	☐	☐	☐							
NAME / D. O. B. / ADDRESS																	TELEPHONE		
(INJURED ONLY) TRANSPORTED BY:																	TAKEN TO:		
DESCRIBE INJURIES																			
																	☐ VICTIM OF VIOLENT CRIME NOTIFIED		
PREPARED BY				I.D. NUMBER				MO. DAY YEAR				REVIEWER'S NAME				MO. DAY YEAR			
J. ACCORNERO				A1252				10-7-14				R. ALEXANDER #0300				100914			

ANAHEIM POLICE DEPARTMENT
COLLISION NARRATIVE

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REPORT NUMBER

DATE 10-7-14	TIME 2131	NCIC # 3001	OFFICER # A1252	REPORT NUMBER [REDACTED]
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AREA OF IMPACT

How Established: ☐ Skids ☒ Damage ☒ Debris ☒ Statements ☐ Points of Rest
Measurement Taken With: ☒ Roll-A-Tape ☐ Tape Measure ☐ Paces ☐ Other

#1 12 Feet, West of the East CPL of Dale Ave & 44 Feet South of the North CPL of Ball Rd.

Statements:

D-1 [REDACTED] stated he turned right from the 7-11 parking lot at [REDACTED] and drove N/B on [REDACTED] in the #2 lane at no more than 30 mph. He saw a green light at [REDACTED] and continued into the intersection. He then felt a front impact. D-1 never saw V-2 prior to the collision. He identified [REDACTED] as D-2.

D-1 was identified by his CA driver's license.

D-2 [REDACTED] stated he was the first car stopped S/B on [REDACTED] in the left turn lane for a red light at [REDACTED]. He saw the signal change to green and he looked left toward a car turning right from N/B lanes. D-2 assumed the signal was also a green arrow and turned left without looking to oncoming traffic. When he turned in the intersection, he was struck by V-1. D-2 never saw V-1 prior to the collision.

D-2 was identified by his CA ID card. A computer check revealed he had a valid driver's license.

W-1 [REDACTED] stated he was stopped S/B on [REDACTED] in the left turn lane for a red light at [REDACTED] behind V-2. When the signal phased to green, V-2 accelerated forward. V-2 did not stop before it began turning left in the intersection. W-1 then saw V-1 hit V-2. He noticed V-1 was positioned N/B at the moment of impact. W-1 identified [REDACTED] as D-1 and [REDACTED] as D-2.

W-1 [REDACTED] left her information with dispatchers and I contacted her by phone about 2 hours after the collision. W-1 stated she was driving E/B on [REDACTED] approaching [REDACTED]. When she entered the left turn lane, she saw a red light ahead and V-1 traveling N/B into the intersection. She then heard an impact but initially did not know what V-1 had struck. She saw V-2 in the intersection after the collision and called the police.

Additional Information:

The intersection did not have protected left turn signals.

The statements were recorded and entered into the PUMA system.

Recommendations:

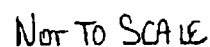
I recommend filing on D-2 for VC 21801(a) failure to yield.

PREPARED BY J. Accornero #PSR24 (A1252)	Date 10-8-14	TIME 2230	REVIEWED BY R. ALEXANDER #0300
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ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE -



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100914









COROLLA



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