Texas Department of Transportation

DEWITT C. GREER STATE HIGHWAY BLDG. • 125 E. 11TH STREET • AUSTIN, TEXAS 78701-2483 • (512) 463-8585

April 30, 2010

NOTIFICATION TO LAW ENFORCEMENT

First, I would like to thank all of you for your patience during the process of learning the new CR-3 form and would like to encourage you to use the CR-100 as a tool to help you in completing the form correctly. TxDOT will continue to send out notifications when trends in common errors become apparent during the processing of your CR-3 forms, which we hope in turn, will minimize the number of reports that have to be returned.

Below are several common errors that we have noticed since our last notification dated March 30, 2010.

A. Data Field: 5-Unit Desc. and Parked Vehicle Indicator (A1)

- Error: This error occurs when officers report the first unit in a crash as a "1-Motor Vehicle" in the unit description field (A) and mark the "Parked Vehicle" indicator (A-1).
- Fix: The first unit in each crash must have a Unit Description of "1-Motor Vehicle" with the "Parked Vehicle" indicator set to "No" (leave the □ Parked Vehicle box blank).
- Reference: CR-100, Section 3.3.2, page 29.

B. Parked Vehicle Indicator and Hit and Run Indicator

- Error: This error occurs when officers mark the "□ Parked Vehicle" indicator and the "□ Hit and Run" indicator for the same unit.
- Fix: Do not mark the "□ Parked Vehicle" indicator and the "□ Hit and Run" indicator for a unit. Only one of these indicators may be used.
- Reference: CR-100, Section 3.3.3 and 3.3.4, page 30.

C. Person Number (this is a numeric field)

- Error: The officer does not sequentially list the Person Num. for subsequent units. For example: Unit 1 has two persons in their unit and Unit 2 has two persons in their unit. The person numbers for Unit 1 are listed as 1 and 2. The person numbers for Unit 2 are listed as 3 and 4. This is incorrect.
- Fix: The person numbers for Unit 1 must be listed as 1 and 2. The person numbers for Unit 2 must be listed as 1 and 2. Person numbering for each unit must be sequential and begin with the number 1 and increase by 1 for each person in the unit.
- Reference: CR-100, Section 3.3.22, page 38.

D. Data Field: 12-PRSN. TYPE

12. Person Type – Code Sheet Values
1 = Driver
2 = Passenger/Occupant
3 = Pedalcyclist
4 = Pedestrian
5 = Driver of Motorcycle Type Vehicle
6 = Passenger/Occupant on Motorcycle Type Vehicle
98 = Other (Explain in Narrative)
99 = Unknown

- Error: Officers mark the "☐ Parked Vehicle" indicator (A1) and list the person sitting in the front left seat position as 1-Driver.
- Fix: A person in the front left seat position, but not driving (parked vehicle, previously wrecked, etc.), should be listed as 2-Passenger/Occupant.
- Reference: CR-100, Section 3.3.23, page 38.

E. Data Field: Name (Last, First, Middle)

- Error: This error occurs when officers use terminology other than "Unknown" in the Name portion of the form, or leave the name field blank.
- Fix: If, at the time of the crash, the driver of the vehicle is unknown, such as in a hit-and-run, the driver's name should show "Unknown".
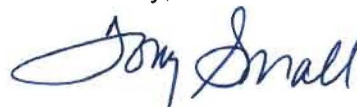- Reference: CR-100, Section 3.3.25, page 39.

F. Investigator's Narrative Opinion of What Happened

- Error: The officer states the vehicle is unoccupied but lists a person in the "Vehicle, Driver, & Persons" area of the form.
- Fix: When the vehicle is unoccupied, the officer must leave the "Vehicle, Driver, & Persons" area of the form blank.
- Reference: The CR-100 is being updated to include a clearer explanation of this condition along with examples.

I would like to request that you e-mail any questions related to the CR-3 form or notifications to TRF_crashrecords@dot.state.tx.us. TxDOT will be compiling all questions into a "Frequently Asked Questions" list that can be posted to our website for use by officers anytime of the day or night.

Again, I want to thank each of you for your hard work and patience as we all strive towards ensuring the most accurate crash data possible for the State of Texas.

Sincerely,

Tony Small

Tony Small, Director
Crash Records Section
Traffic Operations Division

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID

Texas Peace Officer's Crash Report (Form CR-3 1/1/2010)
Mail to: Texas Department of Transportation, Crash Records, P.O. Box 149349, Austin, TX 78714. Questions? Call 512/486-5780
Refer to Attached Code Sheet for Numbered Fields
*=These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.).

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IDENTIFICATION & LOCATION

*Crash Date (MM/DD/YYYY)	*Crash Time (24HRMM)	Case ID	Local Use

*County Name	*City Name	☐ Outside City Limit

In your opinion, did this crash result in an least $1,000 damage to any one person's property? ☐ Yes ☐ No   Latitude - (decimal degrees)   Longitude - (decimal degrees)

ROAD ON WHICH CRASH OCCURRED

*1 Rdwy. Sys.	*Hwy. Num.	2 Rdwy. Part	Block Num.	3 Street Prefix	* Street Name	4 Street Suffix

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot   ☐ Toll Road/ Toll Lane   Speed Limit   Const. Zone ☐ Yes ☐ No   Workers Present ☐ Yes ☐ No   Street Desc.

INTERSECTING ROAD, OR IF CRASH NOT AT INTERSECTION, NEAREST INTERSECTING ROAD OR REFERENCE MARKER

At Int. ☐ Yes ☐ No | 1 Rdwy. Sys. | Hwy. Num. | 2. Rdwy. Part | Block Num. | 3 Street Prefix | Street Name | 4 Street Suffix |

Distance from Int. or Ref. Marker	☐ FT ☐ MI	3 Dir. from Int. or Ref. Marker	Reference Marker	Street Desc.	RRX Num.

VEHICLE, DRIVER, & PERSONS

A | Unit Num. | **5 Unit Desc.** | ☐ **Parked Vehicle** | ☐ **Hit and Run** | LP State | LP Num. | VIN |

A-1 | Veh. Year | **6. Veh. Color** | Veh. Make | Veh. Model | 7 Body Style | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked) |

| 8 DL/ID Type | DL/ID State | DL/ID Num. | 9 DL Class | 10 CDL End. | 11 DL Rest. | DOB (MM/DD/YYYY) |

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle — Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
C 1														**E**			
2																	
3																	
4																	

Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.

D ☐ Owner ☐ Lessee   Owner/Lessee Name & Address

Proof of Fin. Resp. ☐ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type | Fin. Resp. Name | Fin. Resp. Num. |

Fin. Resp. Phone Num. | 27 Vehicle Damage Rating 1 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☐ No |

Towed By	Towed To

A | Unit Num. | **5 Unit Desc.** | ☐ **Parked Vehicle** | ☐ **Hit and Run** | LP State | LP Num. | VIN |

A-1 | Veh. Year | **6. Veh. Color** | Veh. Make | Veh. Model | 7 Body Style | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked) |

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Towed By	Towed To

Case ID		TxDOT Crash ID	

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HR:MM)

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address

CMV

Unit Num.	☐ 10,001+ LBS.	☐ TRANSPORTING HAZARDOUS MATERIAL	☐ 9+ CAPACITY	28 Veh. Oper.	29 Carrier ID Type	Carrier ID Num.

Carrier's Corp. Name   Carrier's Primary Addr.

30 Rdwy. Access	31 Veh. Type	☐ RGVW ☐ GVWR	HazMat Released ☐ Yes ☐ No	32 HazMat Class Num.	HazMat ID Num.	32 HazMat Class Num.	HazMat ID Num.

33 Cargo Body Style	Trailer 1	Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type	Trailer 2	Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type

Sequence Of Events	35 Seq. 1	35 Seq. 2	35 Seq. 3	35 Seq. 4	Total Num. Axles	Total Num. Tires

FACTORS & CONDITIONS

	36 Contributing Factors (Investigator's Opinion)		37 Vehicle Defects (Investigator's Opinion)		Environmental and Roadway Conditions						
Unit #	Contributing	May Have Contrib.	Contributing	May Have Contrib.	38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control

NARRATIVE AND DIAGRAM

Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets if Necessary)

Indicate North

Field Diagram - Not to Scale

F

INVESTIGATOR

Time Notified (24HR:MM)	How Notified	Time Arrived (24HRMM)	Report Date (MM/DD/YYYY)

Invest. Comp. ☐ Yes ☐ No	Investigator Name (Printed)	ID Num.

ORI Num.	*Agency	District/ Area