Commonwealth of Pennsylvania Police Crash Report

Reportable

Crast	n Involves	!																
	DUI		_ F	atality			Hit & Run	V	Com	nmercial Vehicle	Γ	State	Police Vehi	cle 🗀	Local Po	olice		
	N/A		_ v	ork Zone			ATV	Г	Sno	wmobile	Г	Comn	nonwealth V	ehicle	Local G	ov Vehicle		
	E POLIC	E - PITTSBU												Case Closed		Patrol Zone B0312	I	1/20/2023
Dispatch Time	e i	Arrival Time 13:40		Investigato CAMP	r BELL, CH	RISTOF	PHER							Badge Numb 10752	er			
Approval Date	9			Reviewer	,									Reviewer Bac	ige Num	ber		
02/16/2					R, THOM									12260				
01/20,	13:13	ash Day of Wee			Crash Descr	ription							ondary Cras	n				
ounty ALLEGHE	:NY									Municipality PITTSBUR	GH CI.	TY						
eather Condi	itions 1					W	eather Condit	ions 2		I			Relati	on to Roadway				
umination									-	Road Surface Co	onditions	3						
									1									
of Units	#	of People	#	of Injured	1	# Killed		School Bus Rei	lated			School Zo	ne Related			PennDOT Property	/ Dam	aged
pe of Interse	ction					_	tersection Rel	ated	Υ	LV	A		Speci	al Location		1		
				-4			N	7	_		٩.,	A.						
Vork Zone		Work Zone Type			7//	7				Where in Work	Zone	~/						
NO Vorkers Injur	ed or Killed			Worker 1 U	nit #	Υ.,		Worker 2 Unit	#			Worker 3	Unit #	-//	1	Worker 4 Unit #		
				4/								7						
Spd Limit V	Vorkers	Officer Present			Characteris		Closed/D	etour 🗆 W	ork o	n Shidr/Med	dlan [Inter	mittent/	Moving Wo	ork 🗀	Flagger Cntri	- o	ther
Route Signing	<u> </u>	_		1	-/	. No	alle.			Route Number		Segment N	_	Travel Lanes	t	Speed Limit		Orientation
INTERST louse Number		TURNPIKE)	<u> </u>	_	_/_	_ 8		فر		0376 Street Name	4	2			11	65 MPH		WEST St. Ending
louse Humb	υ ι								40	1376							Ì	HIGHWAY
Jsed in Inters		Route Signing		4		Route Nu 037 6		Segment Num	ber	Travel Lanes		Speed Lin		N.	-	Orientation EAST		
Crashes	5	Street Name			14		X _ T	3/3-19	19						Ш	St. Ending		
펀	Route N		-	_	Or Mil	le Post	Tent	ths	De	limiting Road Typ	е		72	Ramp Use Only	+		Fe	eet
rashes Landmark 1				<u> </u>			1	ير ال		<i>44</i> (6	13	<u>J.J.</u>			Щ		ļ	
block cra	Street N	vame					20		Str	eet Ending						Or Miles	ie	nths
Route	Number	Or Mile	Post	Te	enths		Delimiting R	oad Type		Rar	np Use (Only	Feet	. //				
Stree	t Name		-	\rightarrow	U	-	Street Ending	3		Or N	Miles		Tenths	·//		Scene to Landmark		tance from the Crash
.atitude:		grees 40	Minu 20		: s	econds 22	171	Decimal 320		Longitude:	De	egrees 80	М	inutes 00		Seconds 36	١.	Decimal 810
raffic Contro	I Device				7					Traffic Control F	unctioni	ng			<u> </u>			
ane Closed			<u> </u>	Lane Closu	re Direction	_				Traffic Detoured				Roadway Cle	ared			
							Environ	mental / Ro	oadwa	ay Potential	Facto	rs (E/R))					
antou 1						Factor 2								Factor 3				
actor 1						racioi 2								ractor 3				
		Fir	st Ha	mful Ev	ent in th	e Crasi	h						Most I	larmful Eve	nt In t	he Crash		
Jnit Number	<u>[</u> i	Harmful Event								Unit Number		Harmful E	vent					
ndicated Prin	ne Factor					Unit Num	nber	Prime Factor I	Oriver Ad	ction								
Prime Factor I	Enviroment	al/Roadway				Prime Fa	ctor Vehicle Fa	ailure						Prime Factor	Pedestri	an Action		
Road Surface	Туре		_							Special Jurisdic	tion							

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	Crash Involve	s:											
	☐ DUI		Fatality	Hit & Run	✓ Com	mercial Vehicle	State Police Vehice	cle Local Po	lice				
	□ N/A		Work Zone	☐ ATV	Snov	vmobile	Commonwealth V	ehicle Local Go	v Vehicle				
	t Number	Type Unit			Commercial Vehicle		Primary Violation			Charged			
Firs	st Name		MI	Last Name	1		Suffix	DOB	Telephone Number	1			
	WILLIAM eet Address		F	BOZEK				05/21/1951 State	(724)709-598 Zip Code	36			
	1920 14TH ST			BEAVER FALL	s			PA	15010				
	nder MALE	License Number 15819949		License State	Class M B	Expiration Date 05/22/2025	Owner/Driver						
	ver Presence		Physical Condition		Alcohol/Drugs Suspec		Alcohol Test Type		Alcohol Test Results				
Vio	lation 1		APPARENT	LY NORMAL	N O Charged	Violation 2	TEST NOT GIV	EN		Charged			
;	33091 DRIVIN	G ON ROADWAY	'S LANED FOR T	RAFFIC	UNDETERMIN								
Vio	lation 3				Charged	Violation 4				Charged			
	ıg Test Type		Drug Test Results	51			Drug Test Results 2						
	NONE Ig Test Results 3				NSY	Drug Test Results 4							
	_			N	14.5		\sqrt{N}						
Dri	ver Action			04/									
Ped	destrian Action		7//		Pedestrian Signals		Pedestrian Clothing	Pedestrian Location					
1st	Harmful Event		4/_	_/	Left or Right Side		Most Harmful	Utility Pole Number					
			7/				YES	, , , , , , , , , , , , , , , , , , , ,					
2nd	d Harmful Event			alte.	Left or Right Side		Most Harmful	Utility Pole Number					
3rd	I Harmful Event		 		Left or Right Side	1	Most Harmful	Utility Pole Number					
4th	Harmful Event	_	1 1		Left or Right Side		Most Harmful	Utility Pole Number					
						F-1							
Ow	ner First Name			Owner MI	Owner Last Name or E	A 10-10 T			Suffix				
	eet Address		11 1	City			T K	State	Zip Code				
	2569 DARLING	TON RD	₩—	BEAVER FALL	S Vehicle Automation		Special Usage	PA	15010 Government Equipme	ent Number			
	BUS		1/1	1 34			F /						
	del Year 2021	Vehicle Make		Vehicle Model		Vehicle Color YELLOW	/.4	VIN 1BAKGCSA3MI	378256				
	ense Plate		Reg. State	Est. Speed	Vehicle Towed	Towed By	1.0						
	SC86272 urance	Insurance Company	PA	143	Policy Number				Expiration Date				
	YES		TERSTATE INSUI	RANCE	CAD0850128	D	0 '//		05/22/2025				
Dire	ection of Travel	Vehicle Position			Vehicle Movement				Initial Impact Point				
Dai	mage Indicator	Gradient		Road Alignment		Possible Vehicle Failu	ures		1				
	# of Units		Type Unit 1		Tag Number		Tag Year		Tag State				
	Unit Make					Unit Owner							
lling Unit	Offic Wake					Onit Owner							
Tra	Type Unit 2			Tag Number			Tag Year		Tag State				
	Unit Make					Unit Owner							
L	Engine Size		Passenger?		Saddle Bag/Trunk?	,	Trailer?		Driver Education	?			
ė			. assenger :		Saudio Bag/ HullK:				2voi Educationi	• 			
Motorcycl	Driver Helmet Type	Helmet Stayed (On?	DOT/Snell Design	nation		Eye Protection?	Long Sleeves	Long Pants?	Over Ankle Boots?			
	Driver Helmet Type	r Helmet Type Helmet Stayed On?			nation		Eye Protection?	Long Sleeves	Long Pants?	Over Ankle Boots?			
L	Passenger?					Helmet?							
dalcycle													
Pa	Head Lights?					Rear Reflector?							

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	☐ DUI		Fatality	Hit & Run	✓ Com	mercial Vehicle	State Police Vehic	ele Local Po	olice				
	□ N/A	Г	Work Zone	☐ ATV	☐ Snov	vmobile	Commonwealth Ve	ehicle Local Go	ov Vehicle				
	it Number 002	Type Unit			Commercial Vehicle		Primary Violation			Charged			
	st Name		MI	Last Name			Suffix	DOB	Telephone Number				
	ALEXANDRE		Р	MATEUS				01/12/1980					
	eet Address 881 MILLSTREA	AM DR		City REYNOLDSBU	RG			State O H	Zip Code 43068				
	nder	License Number		License State	Class	Expiration Date	Owner/Driver						
	MALE iver Presence	VH896544	Physical Condition	он	A Alcohol/Drugs Suspec	tod.	Alcohol Test Type		Alcohol Test Results				
	iver i resence		APPARENTI		NO	icu	TEST NOT GIVE	EN	Alcohol fest results				
Vic	olation 1				Charged	Violation 2	•			Charged			
Vic	olation 3				Charged	Violation 4				Charged			
	ug Test Type NONE		Drug Test Results	1			Drug Test Results 2						
	ug Test Results 3				Yara	Drug Test Results 4							
F .	ivor Action				Nai	- 44	A. 77						
Dri	iver Action			61									
Pe	destrian Action			4	Pedestrian Signals		Pedestrian Clothing	Pedestrian Location					
1 s	t Harmful Event		4/		Left or Right Side		Most Harmful	Utility Pole Number					
					aZZa		YES						
2n	d Harmful Event		//	/ .	Left or Right Side		Most Harmful	Utility Pole Number					
3rd	d Harmful Event				Left or Right Side	-	Most Harmful	Utility Pole Number					
44					Lea - Digha Cide	Day.	Marilla de la	Heller Data Name					
411	n Harmful Event				Left or Right Side		Most Harmful	Utility Pole Number					
Ow	vner First Name			Owner MI	Owner Last Name or E		232		Suffix				
	reet Address 9200 E 146TH S	ет		City NOBELSVILLE			1 1	State I N	Zip Code 46060				
_	hicle Type	<u>.</u>	 	NOBELOVILLE	Vehicle Automation		Special Usage	111	Government Equipme	ent Number			
	LARGE TRUCK	IVahiala Maka		Webiele Medel		Vehicle Color		D/INI	/				
	odel Year 2022	Vehicle Make		Vehicle Model		WHITE	5	VIN 3akjhpdv8ns	LH0882				
	ense Plate		Reg. State	Est. Speed	Vehicle Towed	Towed By	/6						
_	3058138 surance	Insurance Company	IN		Policy Number				Expiration Date				
	YES		AN INSURANCE		XSAH2555823	3	$\sim 1/2$						
Dir	rection of Travel	Vehicle Position			Vehicle Movement	P			Initial Impact Point				
Da	mage Indicator	Gradient		Road Alignment		Possible Vehicle Fai	ilures						
	# of Units		Type Unit 1		Tag Number		Tag Year		Tag State				
Trailing Units	Unit Make					Unit Owner							
Trailir	Type Unit 2			Tag Number			Tag Year		Tag State				
	Unit Make					Unit Owner							
	Onit make					onit owner							
	Engine Size		Passenger?		Saddle Bag/Trunk?		Trailer?		Driver Education	?			
orcycle	Driver Helmet Type	Helmet Stayed 0	n?	DOT/Snell Design	nation		Eye Protection?	Long Sleeves	Long Pants?	Over Ankle Boots?			
Mot	Debagail : =	11-2		PAT /A ···			F. F	Law (C)	1	0			
	Driver Helmet Type	Helmet Stayed O	Π?	DOT/Snell Design	nation		Eye Protection?	Long Sleeves	Long Pants?	Over Ankle Boots?			
ele Se	Passenger?					Helmet?							
Pedalcy	Head Lights?					Rear Reflector?							
							1.00.000.						

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	DUI		Fatality	Hit & Run	ľ	✓ Co	ommercial Vehicle	State I	Police Vehicle	Local Pol	ice	
	☐ N/A		Work Zone	ATV	ı	Sr	nowmobile	Comm	onwealth Vehicle	Local Gov	v Vehicle	
Uni	t #	Person No.	First Name		MI		Last Name		Suffix		DOB	
Str	eet Address		•		City		•		•		State	Zip Code
	one Number		EMS Transport		Person Type			Gender			Injury Severity	
EM EM	S Agency				Medical Facil NONE	lity						
Sea	at Position						Safety Equipment 1					
Saf	ety Equipment 2						Extrication					
	ction				Ejection Path							
Airt	oag											

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	Cras	sh Involves:										
		DUI		Fatality		Hit & Run	V	Commercial Vehicle		State Police Vehicle		Local Police
		N/A	Γ	Work Zone		ATV		Snowmobile		Commonwealth Vehicle	Γ	Local Gov Vehicle
Crash S Penns attem	nyop /Ivan	sis nia State Police invest to merge onto the Ft	Pitt B	I the report of a 2 tridge in order to I. Operator 1 and	2 vehicle non travel throuţ operator 2 v	-reportable gh the Ft Pit vere wearin	crash at the about tunnels. Unit 1 g their seat belts	ve time and location made an unsafe lan at the time of the c	n. This ci	rash occurred as unit 1 ge and clipped the P/S d did not report any inj	mirroi	nit 2 were both traveling on Interstate 376 WB r on unit 2. Both units came to final rest at the