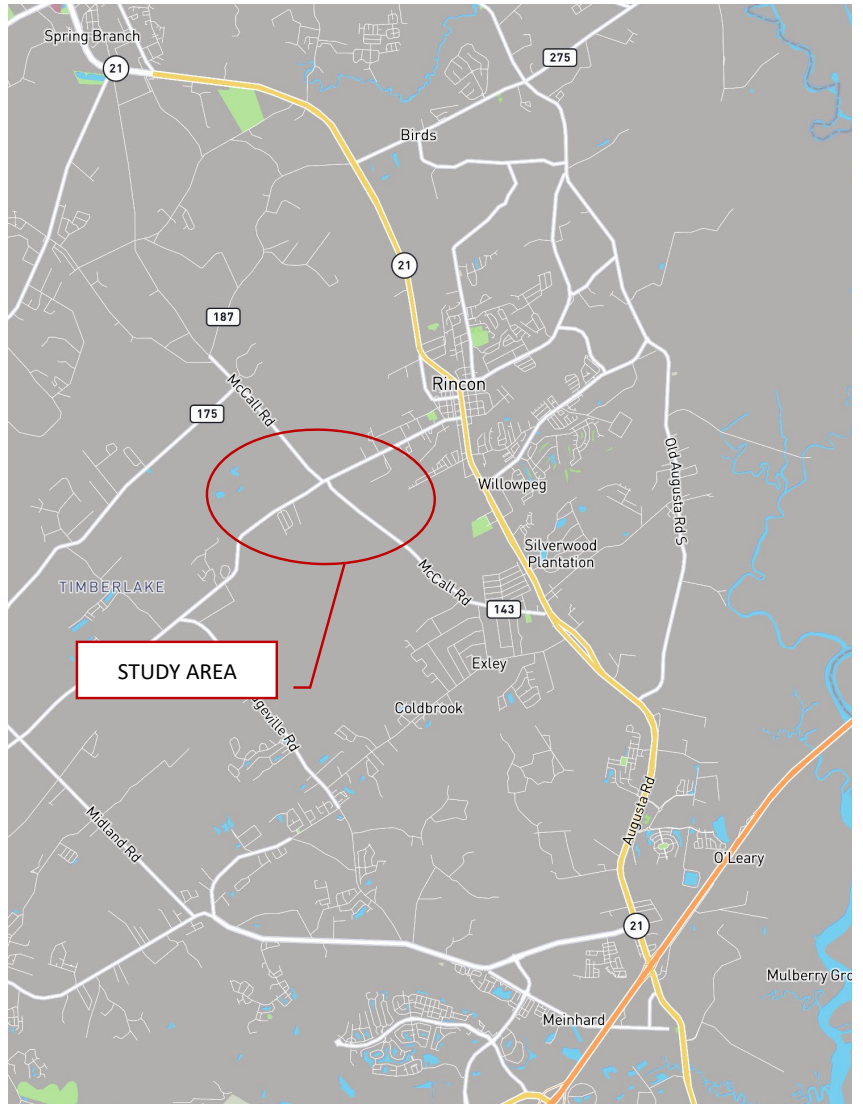


# Blue Jay Rd & McCall Rd

## Effingham County, GA

22 March 2022



Maldino and Wilburn, LLC  
Traffic Engineering Consultants

Blue Jay Rd and McCall Rd  
Effingham County, GA

Prepared For:

Mr. Timothy Callanan  
County Manager  
Effingham County  
tcallanan@effinghamcounty.org  
Mr. Eric Larson  
Asistant County Manager  
eLarson@effinghamcounty.org

Prepared By:

Vern Wilburn, PE, PTOE  
Maldino & Wilburn  
1864 Lower Fayetteville Rd  
Newnan, GA 30265  
770.362.6184  
vern@mwtraffic.com

Additional Investigation By:

Mallory Maldino, EIT



Maldino & Wilburn Project No.: 22-11

March 22, 2022

# Table of Contents



1. Introduction .....	1
Study Area.....	2
2. Existing Conditions.....	3
Travel Lanes and Traffic Control .....	3
Site Visit .....	5
Peak Hour Traffic Volumes.....	7
Automatic Traffic Recorder (ATR) Counts.....	8
Existing Operating Speeds.....	8
3. Capacity Analysis .....	9
Capacity Analysis Results, Side-Street Stop Control .....	9
Capacity Analysis Results, All-Way Stop Control.....	10
Capacity Analysis Results, Signal Control .....	10
4. Traffic Signal Warrant Analysis .....	11
Hourly Turning Movement Volumes.....	13
Traffic Signal Warrant Analysis Results .....	13
5. Summary of Findings .....	14
6. Recommendations .....	15
Appendices .....	17
A. Potential Intersection Improvement, NB Right Turn Lane	
B. Turning Movement Count Data	
C. ATR Count Data	
D. Capacity Analysis Reports, Existing Conditions	
E. Capacity Analysis Reports, All-Way Stop Control	
F. Capacity Analysis Reports, Signal Control	
G. Accident Reports	
H. Signal Warrant Analysis Report	

# List of Figures



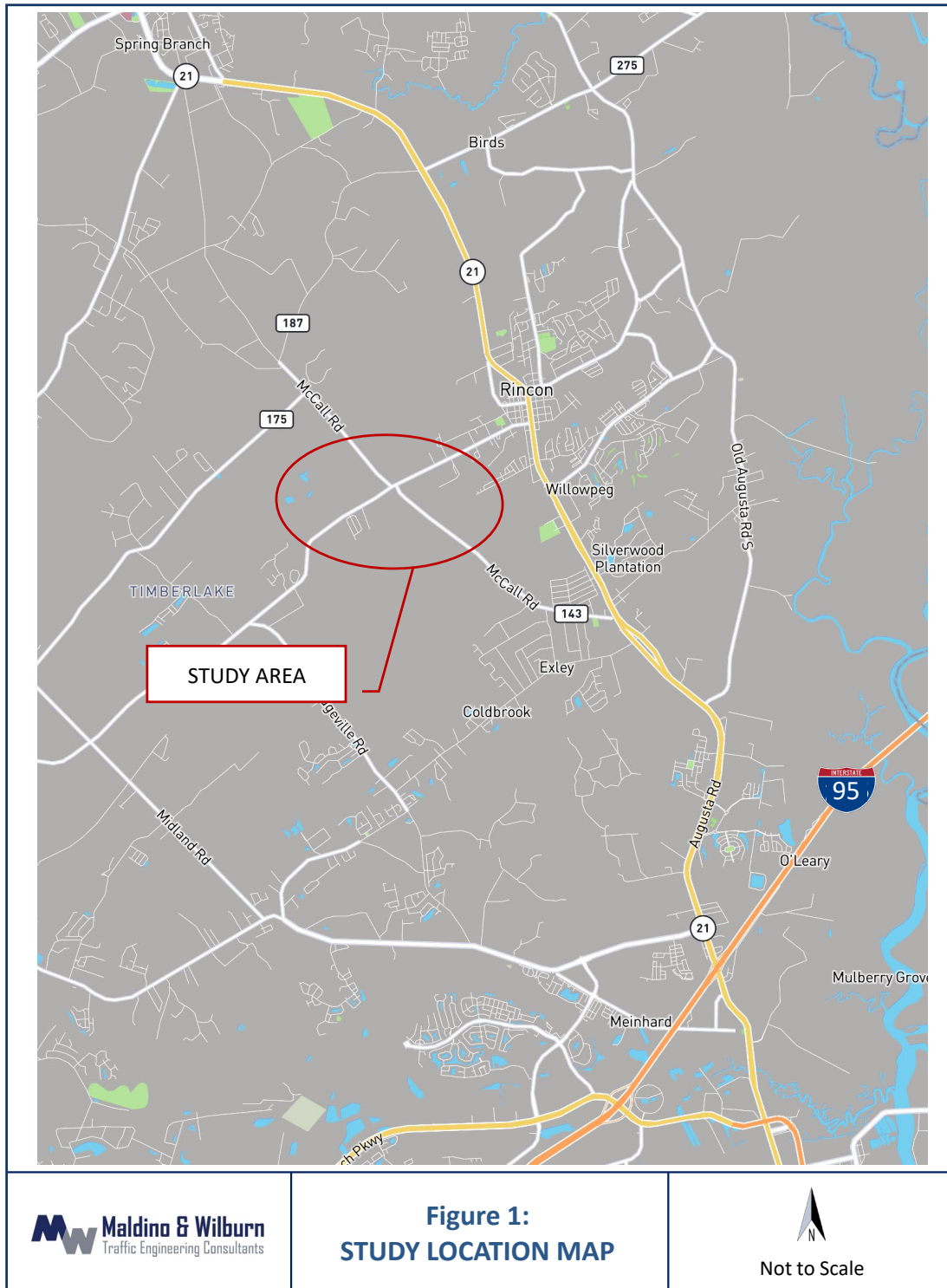
Figure 1: Study Location Map .....	1
Figure 2: Study Area .....	2
Figure 3: Intersection Configuration .....	3
Figure 4: Existing Traffic Control .....	4
Figure 5: Photos Taken From Stop Line .....	5
Figure 6: Existing Peak Traffic Volumes .....	7
Figure 7: Collision Diagram .....	12
Figure 8: Recommended Changes in Traffic Control .....	16

# List of Tables



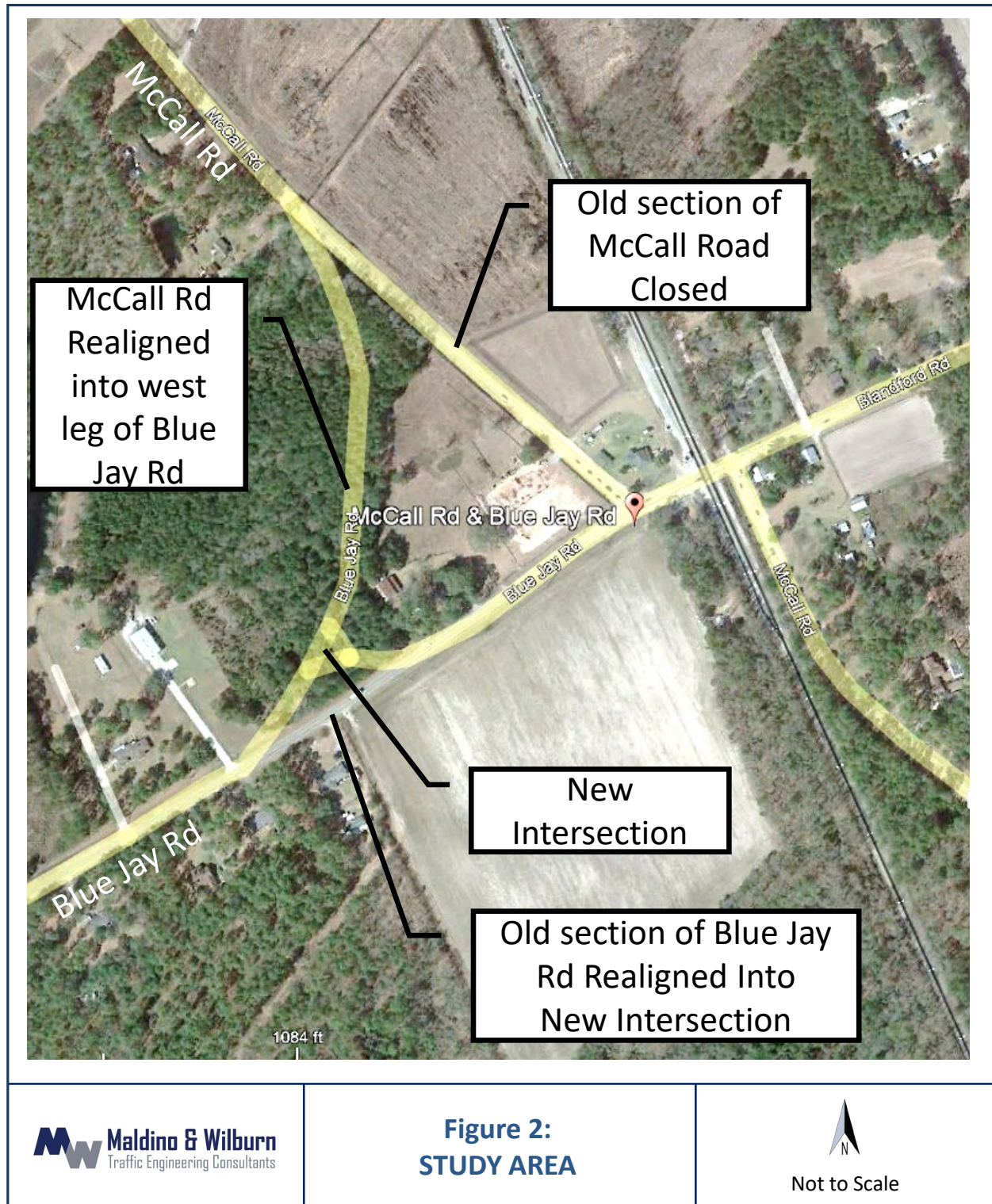
Table 1: Existing Hourly Volumes .....	8
Table 2: Observed Operating Speeds .....	8
Table 3: HCM Level of Service Scales .....	9
Table 4: Capacity Analysis Results, Existing Conditions .....	9
Table 5: Capacity Analysis Results, All-Way Stop Control .....	10
Table 6: Capacity Analysis Results, Signal Control .....	10
Table 7: Existing Hourly Turning Volumes .....	12
Table 8: Warrant Analysis Results .....	12

This study was conducted to evaluate the traffic operations of the intersection of Blue Jay Road and McCall Road. The intersection has recently been reconfigured and crash experience has been greater than expected. This study includes an evaluation of the intersection to identify measures to improve traffic safety and operations. The general location of the intersection is shown in Figure 1.



## Study Area

Figure 2 illustrates how the existing roadways were reconfigured to form the new intersection that is the focus of this study. The construction was completed on January 10, 2022.



## 2. Existing Conditions



This chapter provides a description of the existing roadway geometrics, traffic control, and traffic volumes at the study intersection.

### Travel Lanes and Traffic Control

Figure 3 illustrates the intersection configuration resulting from the recent construction project. Since the intersection does not directly align along any cardinal direction, Figure 3 includes assumed directions that will be used in this report.

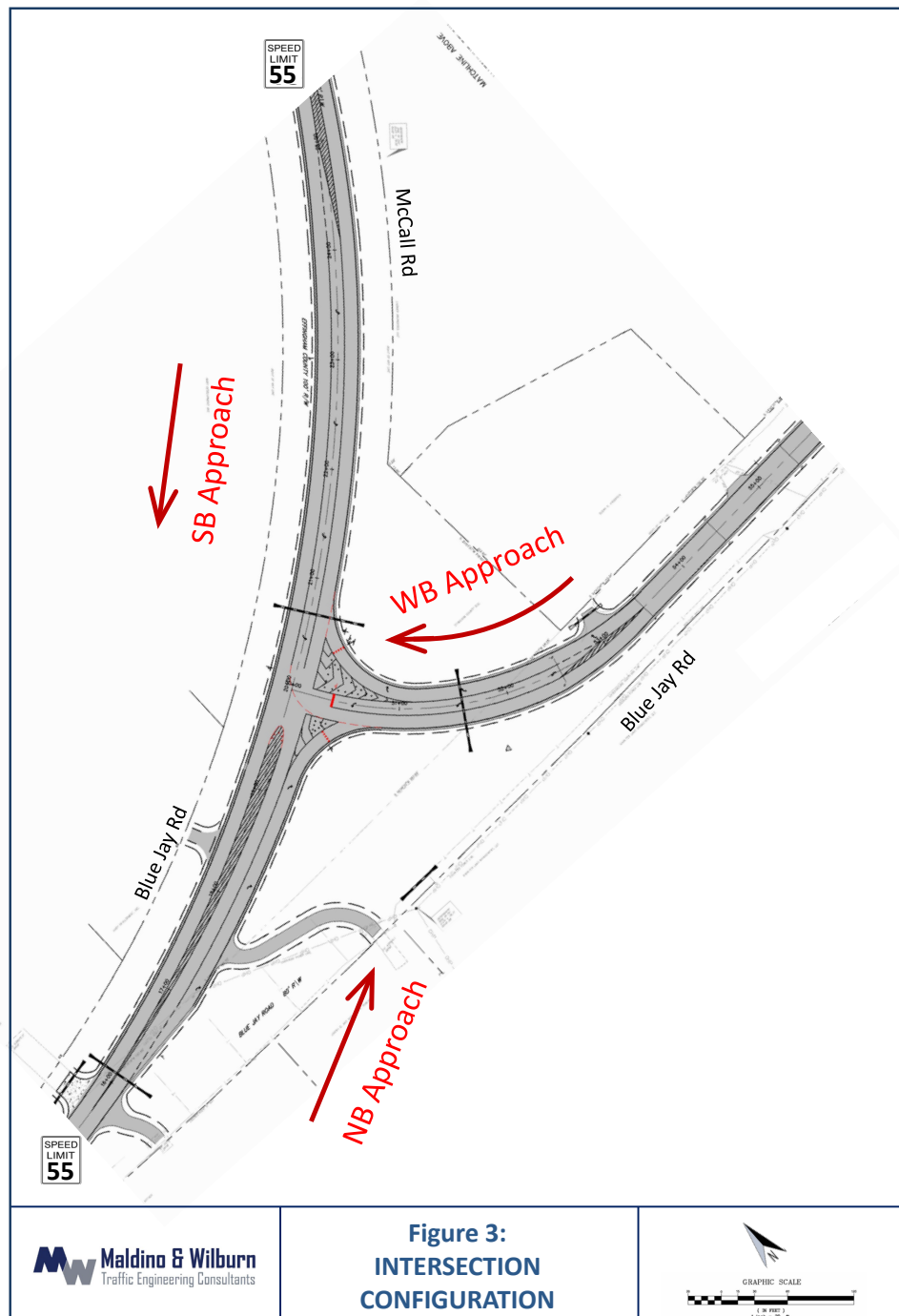
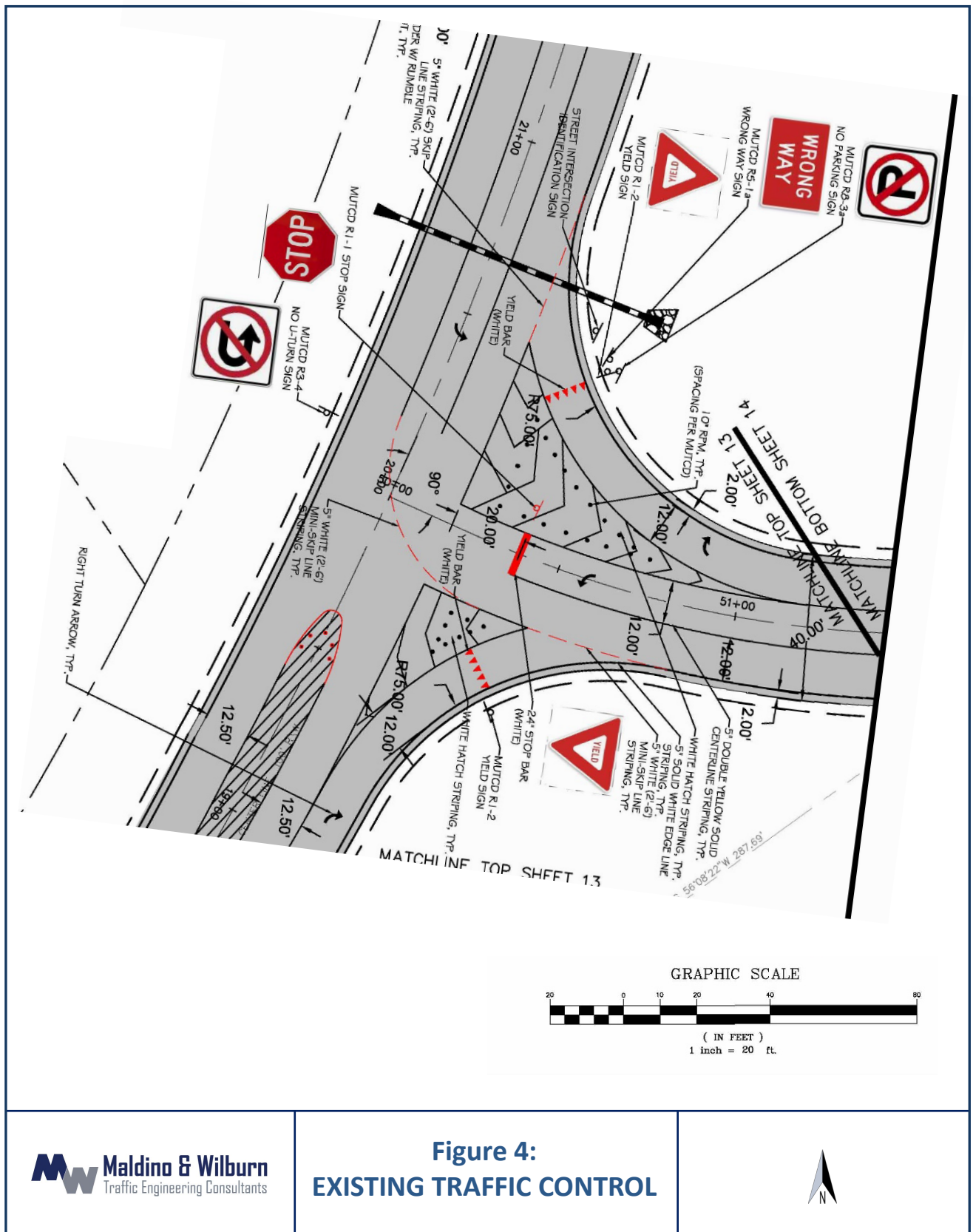


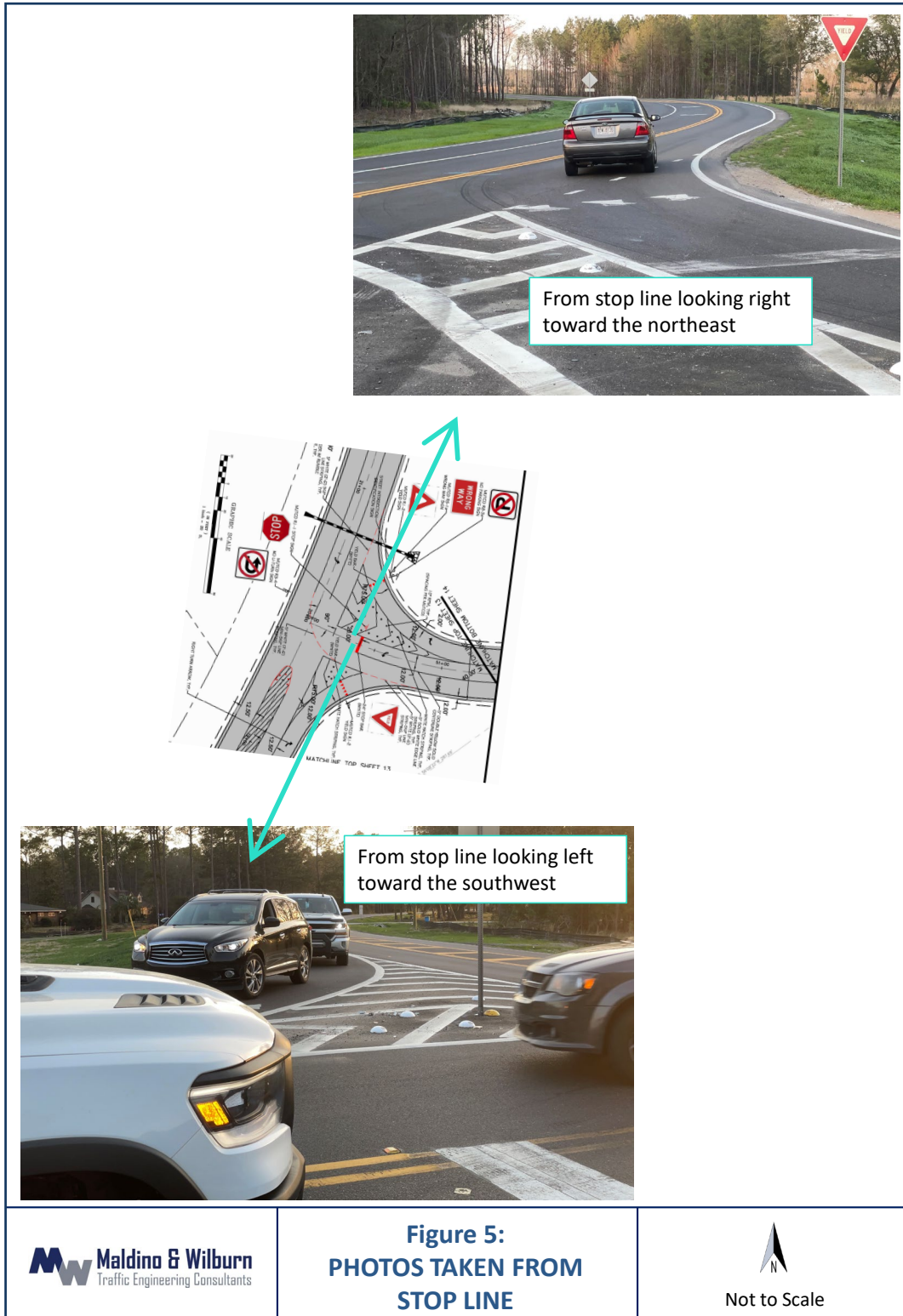
Figure 4 is an excerpt from the signing and marking plan that shows the traffic control that is currently in effect at the intersection.





## Site Visit

An on-site intersection visit was conducted on March 7, 2022. The traffic engineer was on-site from 2:30 PM until 6:00 PM. This section provides the information gathered. Figure 5 includes photos taken from the driver's perspective while stopped at the stop line.



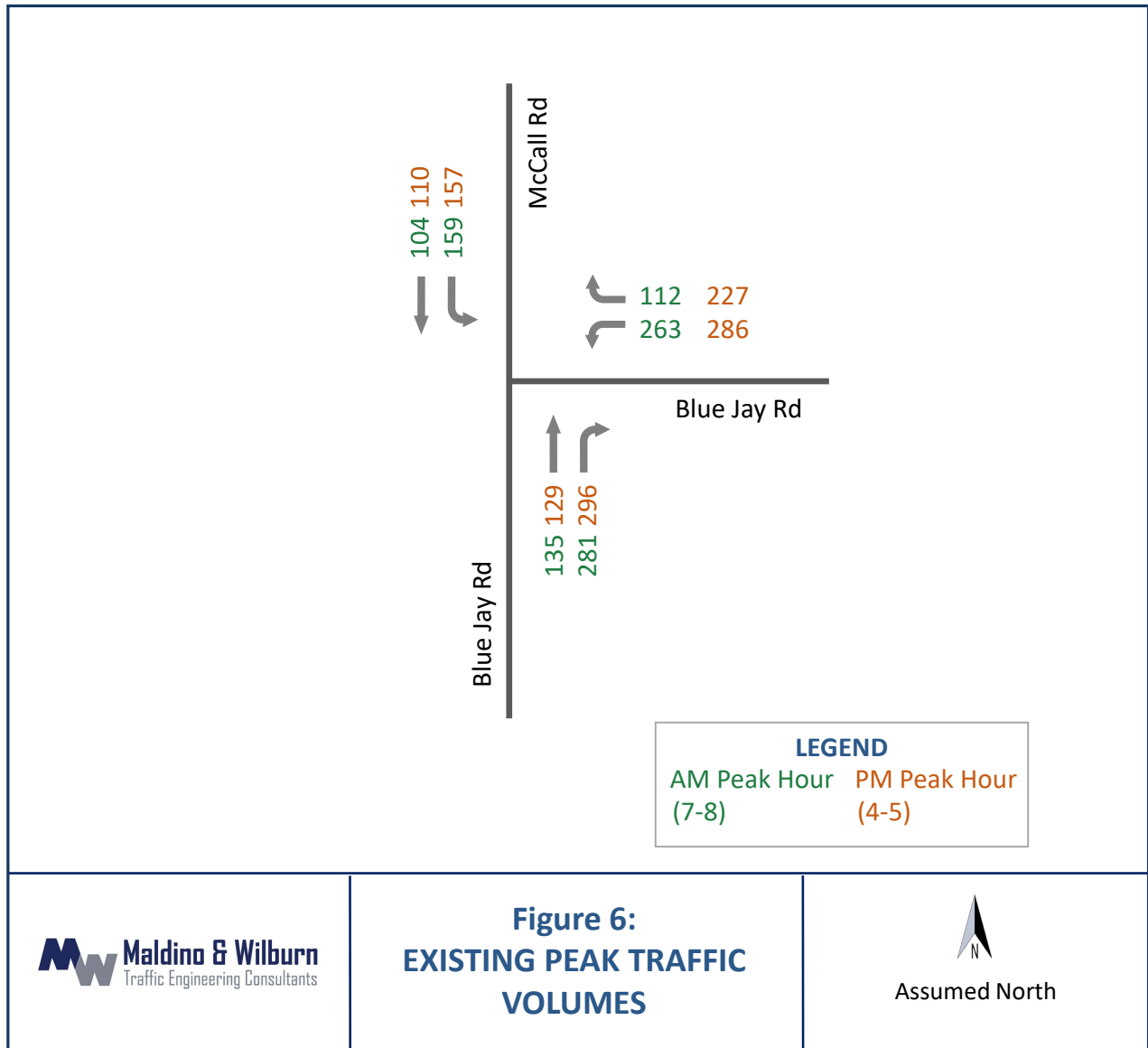
As can be seen from the photos in Figure 5, right-turning vehicles can create sight obstructions for drivers who are stopped, waiting for gaps in the mainline. This is a common issue that exists at many intersections.

The intersection configuration requires slow turning speeds for vehicles turning onto the east leg of Blue Jay Road. Each leg is in a horizontal curve and the mainline is also superelevated. An immediate measure that could be made to improve operations would be to widen the southeast corner. Appendix A contains a drawing that illustrates how the intersection could be widened to separate the right turn on the south leg from the through lane. This would eliminate the sight distance obstruction caused by right turning vehicles blocking the view of oncoming traffic for vehicles stopped at the stop line.

This improvement would eliminate the confusion that drivers currently have regarding which vehicle has the right of way when a southbound left turner and a northbound right turner arrive simultaneously. The improvement would also increase the receiving lane width for the southbound to eastbound left turn, thereby increasing capacity.

## Peak Hour Traffic Volumes

Turning movement counts (TMCs) were conducted at the study intersection on Wednesday, March 9, 2022. Figure 6 summarizes the peak hourly volumes at the study intersection. Data reports from the turning movement counts are provided in Appendix B.



## Automatic Traffic Recorder (ATR) Counts

Traffic counters were placed on each leg of the intersection to collect directional traffic data for each hour of the day on March 9, 2022. The ATRs measured volume and speed of each vehicle. Data reports from the ATR counts are provided in Appendix C. Table 1 summarizes the existing hourly volume on each approach.

**Table 1- EXISTING HOURLY VOLUMES**

TIME	NORTHBOUND BLUE JAY RD	SOUTHBOUND McCALL RD	WESTBOUND BLUE JAY RD	TOTAL
Midnight – 1 AM	22	19	21	62
1 – 2 AM	11	15	16	42
2 – 3 AM	8	9	12	29
3 – 4 AM	22	13	17	52
4 - 5 AM	113	16	19	148
5 – 6 AM	220	21	36	277
6 - 7 AM	332	135	175	642
7 – 8 AM	430	243	371	1044
8 – 9 AM	408	159	210	777
9 – 10 AM	335	147	202	684
10 – 11 AM	324	184	250	758
11 – 12 PM	283	165	259	707
12 – 1 PM	306	172	281	759
1 – 2 PM	282	201	370	853
2 – 3 PM	283	214	410	907
3 – 4 PM	306	260	399	965
4 – 5 PM	430	361	479	1270
5 – 6 PM	399	343	502	1244
6 – 7 PM	373	299	389	1061
7 – 8 PM	164	170	288	622
8 – 9 PM	102	132	232	466
9 – 10 PM	72	89	118	279
10 – 11 PM	43	59	96	198
11 - Midnight	21	32	39	92
TOTAL	5289	3458	5191	13,938

## Existing Operating Speeds

The observed operating speeds are summarized in Table 2.

**Table 2 – OBSERVED OPERATING SPEEDS**

MOVEMENT	85th PERCENTILE (MPH)	10 MPH PACE	% EXCEEDING 55 MPH
Northbound Approach on Blue Jay Rd	52	41-50	5.5
Southbound Approach on McCall Rd	54	46-55	13.7
Westbound Approach on Blue Jay Rd	39	31-40	0

### 3. Capacity Analysis



Capacity analysis was performed for the intersection using *Synchro 10* software by Trafficware. The results of intersection capacity analyses are reported in terms of level of service (LOS), which is a function of average delay per vehicle, in seconds. The LOS scales according to the *Highway Capacity Manual* (HCM) are shown in Table 3.

**Table 3 – HCM LEVEL OF SERVICE SCALES**

LEVEL OF SERVICE	AVERAGE DELAY PER VEHICLE (SECONDS)	
	WITH STOP CONTROL	WITH SIGNAL CONTROL
<b>A</b>	≤10.0	≤10.0
<b>B</b>	10.1 to 15.0	10.1 to 20.0
<b>C</b>	15.1 to 25.0	20.1 to 35.0
<b>D</b>	25.1 to 35.0	35.1 to 55.0
<b>E</b>	35.1 to 50.0	55.1 to 80.0
<b>F</b>	>50.0	>80.0

Level of Service E is generally considered to be the limit of acceptable operations. While the LOS scale is similar to the grading scales used in schools, it is different in that LOS D is generally considered as good operation.

#### Capacity Analysis Results, Side-Street Stop Control

The capacity analysis results for the intersection, which is currently operating under Side-Street Stop Control (SSSC), are summarized in Table 4. Capacity analysis reports from the Synchro Program for the existing conditions are included in Appendix D.

**Table 4 – CAPACITY ANALYSIS RESULTS, EXISTING CONDITIONS**

MOVEMENT	AM PEAK HOUR	PM PEAK HOUR
SB Left Turn from Main-Line (McCall Rd)	A (7.9)	A (7.9)
WB Left Turn from Side Rd (Blue Jay Rd)	F (74.7)	E (39.3)
WB Right Turn from Side Rd (Blue Jay Rd)	A (0.7)	B (10.4)

The results above indicate that the left turn movement from the east leg of Blue Jay Road to the south leg of Blue Jay Road operates with a poor level of service (LOS) F during the AM Peak Hour and LOS E during the PM Peak Hour.

## Capacity Analysis Results, All-Way Stop Control

Since the side street left turn operates poorly under SSSC and since the side street left turn volume is higher than the through movements along the mainline, capacity analysis was conducted to estimate how the intersection would operate if it was converted to All-Way Stop Control (AWSC). The results are summarized in Table 5. Capacity analysis reports from the Synchro Program for AWSC are included in Appendix E.

MOVEMENT	AM PEAK HOUR	PM PEAK HOUR
SB Left Approach from McCall R)	B (13.8)	B (13.5)
NB Approach from Blue Jay Rd	B (14.8)	B (14.8)
WB Approach from Blue Jay Rd	C (23.3)	C (16.9)
Overall Intersection	C (18)	C (15.4)

The results shown above indicate that the intersection would operate at LOS C or better with AWSC.

## Capacity Analysis Results, Signal Control

Capacity analysis was also used to estimate how the intersection would operate with signal control. The results are summarized in Table 6. Capacity analysis reports from the Synchro Program for the Signal Control Condition are included in Appendix F.

MOVEMENT	AM PEAK HOUR	PM PEAK HOUR
SB Left Approach from McCall R)	B (11.2)	B (10.6)
NB Approach from Blue Jay Rd	A (5.4)	A (5.1)
WB Approach from Blue Jay Rd	A (9.9)	A (7.7)
Overall Intersection	A (8.6)	A (7.4)

The results shown above indicate that the intersection would operate at LOS B or better with Signal Control. By comparing the results shown in Table 5 (All-Way Stop Control) to Table 6 (Signal Control), it is apparent that Traffic Signal Control will provide improved operation on every approach, especially westbound. The overall delay will decrease by 17.4 seconds per vehicle during the AM Peak Hour and 8 seconds per second per vehicle during the PM Peak Hour.

The previous chapter indicated that benefits would result from converting the intersection from Side-Street Stop-Control (SSSC) to All-Way Stop Control (AWSC). Furthermore, the intersection would operate even better with signal control. This chapter contains warrant analyses to determine the extent to which these alternative types of traffic control are warranted.

Warrant analyses were conducted in accordance with the requirements of the *Manual on Uniform Traffic Control Devices, 2009* (MUTCD) published by the Federal Highway Administration.

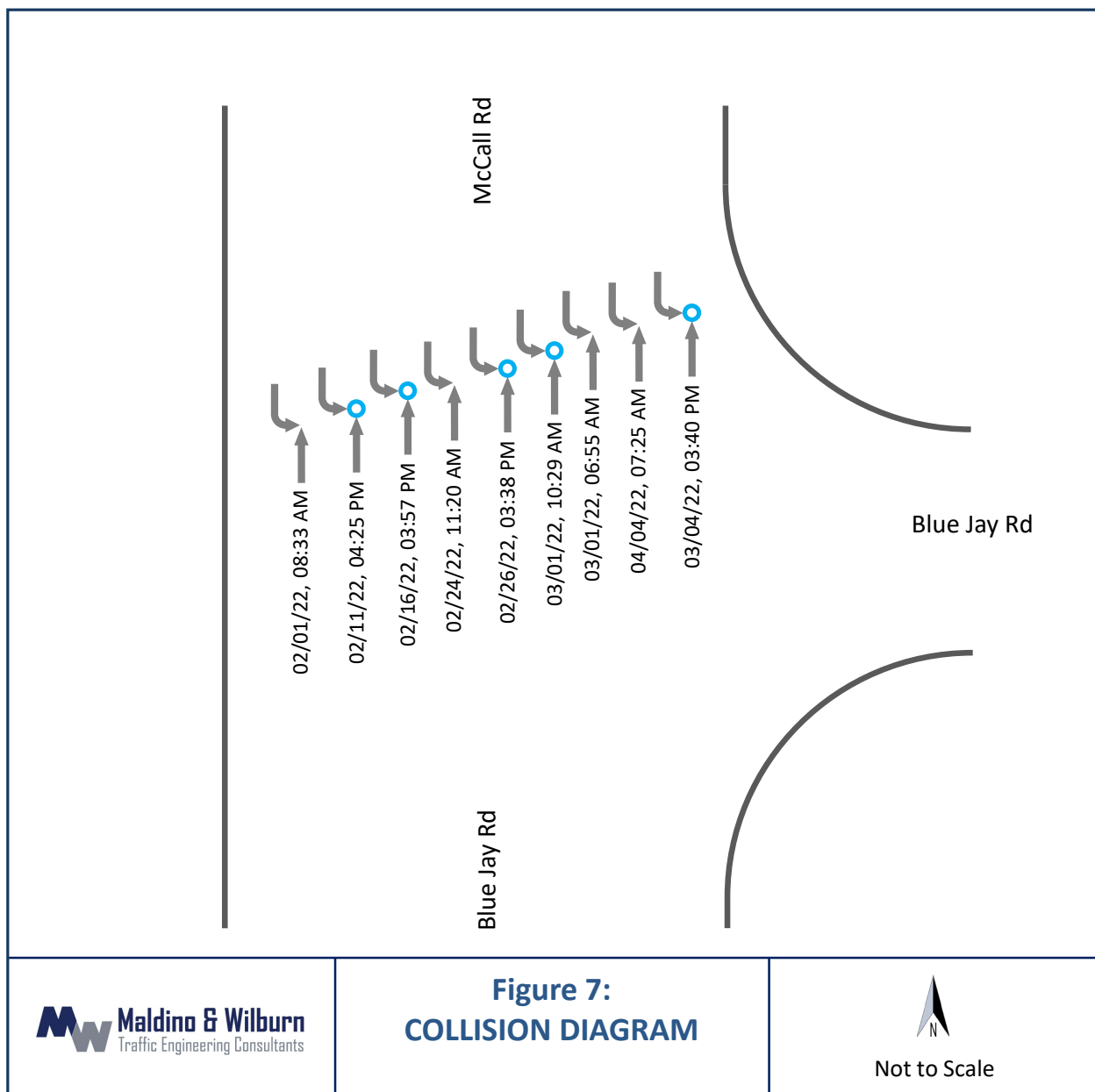
According to the MUTCD, the investigation of the need for traffic signal control shall include an analysis of the applicable factors contained in the following traffic signal warrants and other factors related to existing operation and safety at the study intersection:

- Warrant 1 – Eight-Hour Vehicular Volume
- Warrant 2 – Four-Hour Vehicular Volume
- Warrant 3 – Peak Hour
- Warrant 4 – Pedestrian Volume
- Warrant 5 – School Crossing
- Warrant 6 – Coordinated Signal System
- Warrant 7 – Crash Experience
- Warrant 8 – Roadway Network

Warrants 1 through 3 are relevant for the conditions in this study and possibly Warrant 7 (Crash Experience). The crash reports for the period between January 10, 2022 (When the new intersection was substantially complete) and March 4, 2022 were obtained. Copies of the accident reports are included in Appendix G.

## Crash Experience

Figure 7 is a collision diagram for all crashes reported after the new intersection was completed. There were nine (9) crashes, and all involved the left turn from the north leg of Blue Jay Road turning to the east leg of Blue Jay Road. These crashes may not be fully correctible with signalization unless the left turn is operated as 'Protected Only'. Several drivers indicated being distracted by the presence of other conflicting vehicles, so signalization may correct some of the crashes. Since the data is only for about a two (2) month period, it is felt that Warrant 7 is satisfied.





# Hourly Turning Movement Volumes

Turning movement counts were conducted for a 10-Hour period on March 9, 2022, for use in conducting the warrant analysis. Table 7 summarizes the 10-Hour TMC data.

**Table 7- EXISTING HOURLY TURNING VOLUMES**

TIME	NORTHBOUND BLUE JAY RD		SOUTHBOUND McCALL RD		WESTBOUND BLUE JAY RD	
	Thru	Right	Left	Thru	Left	Right
7 – 8 AM	135	281	159	104	263	112
8 – 9 AM	81	241	173	82	138	70
9 – 10 AM	74	198	136	61	130	82
10 – 11 AM	77	169	142	62	150	107
11 – 12 PM	57	161	124	62	158	106
12 – 1 PM	65	193	152	50	187	111
1 – 2 PM	62	160	104	54	233	141
2 – 3 PM	75	174	119	68	261	166
3 – 4 PM	97	202	133	83	246	171
4 – 5 PM	129	296	157	110	286	227

## Traffic Signal Warrant Analysis Results

The traffic signal warrant analysis was facilitated using a spreadsheet application developed by Spack Academy. The results of the warrant analysis using the existing traffic volumes are summarized in Table 8. The warrant analysis report is included in Appendix G.

**Table 8- WARRANT ANALYSIS RESULTS**

WARRANT	HOURS REQUIRED	HOURS MET	WARRANTED
1 – Eight Hour	8	8	Yes
2 – Four Hour	4	10	Yes
3 – Peak Hour	1	5	Yes
7 – Crash Experience	5	7	Yes
All-Way Stop	8	10	Yes

The results in the table above indicate that all warrants evaluated (1,2,3, and 7) are satisfied. The warranting condition for All-Way Stop Control is also met.

## 5. Summary of Findings



The following summarizes the findings of the traffic study:

1. During an on-site review of the intersection operation, it was observed that drivers had uncertainty about which vehicle had the right of way. This involved the southbound left turn movement and the northbound right turn movement.
2. The on-site review also indicated that intersection sight distance, for the drivers at the stop line, was obscured by right turning vehicles. This issue is typically at many intersections and in itself is not cause for concern.
3. Items No. 1 and 2 above could be rectified by improving the right turn lane geometrics as shown in Appendix A.
4. The intersection currently operates with Side-Street Stop Control (SSSC). The current operation provides LOS F during the AM Peak Hour and LOS E during the PM Peak Hour. These are the levels of service for the westbound left turn movement.
5. There have been nine (9) reported crashes at the intersection since it was substantially complete in a two-month period. All crashes involve southbound left turning vehicles being struck by northbound through vehicles.
6. With All-Way Stop Control (AWSC), the intersection would have LOS C or better for all approaches.
7. The intersection would operate at LOS B or better with Traffic Signal Control.
8. The 85<sup>th</sup> percentile speeds observed at the intersection were 52 MPH northbound, 54 MPH southbound, and 39 MPH westbound. These were measured approximately 1,000 feet in advance of the intersection.
9. Warrants for All-Way Stop Control and Signal Control were satisfied.

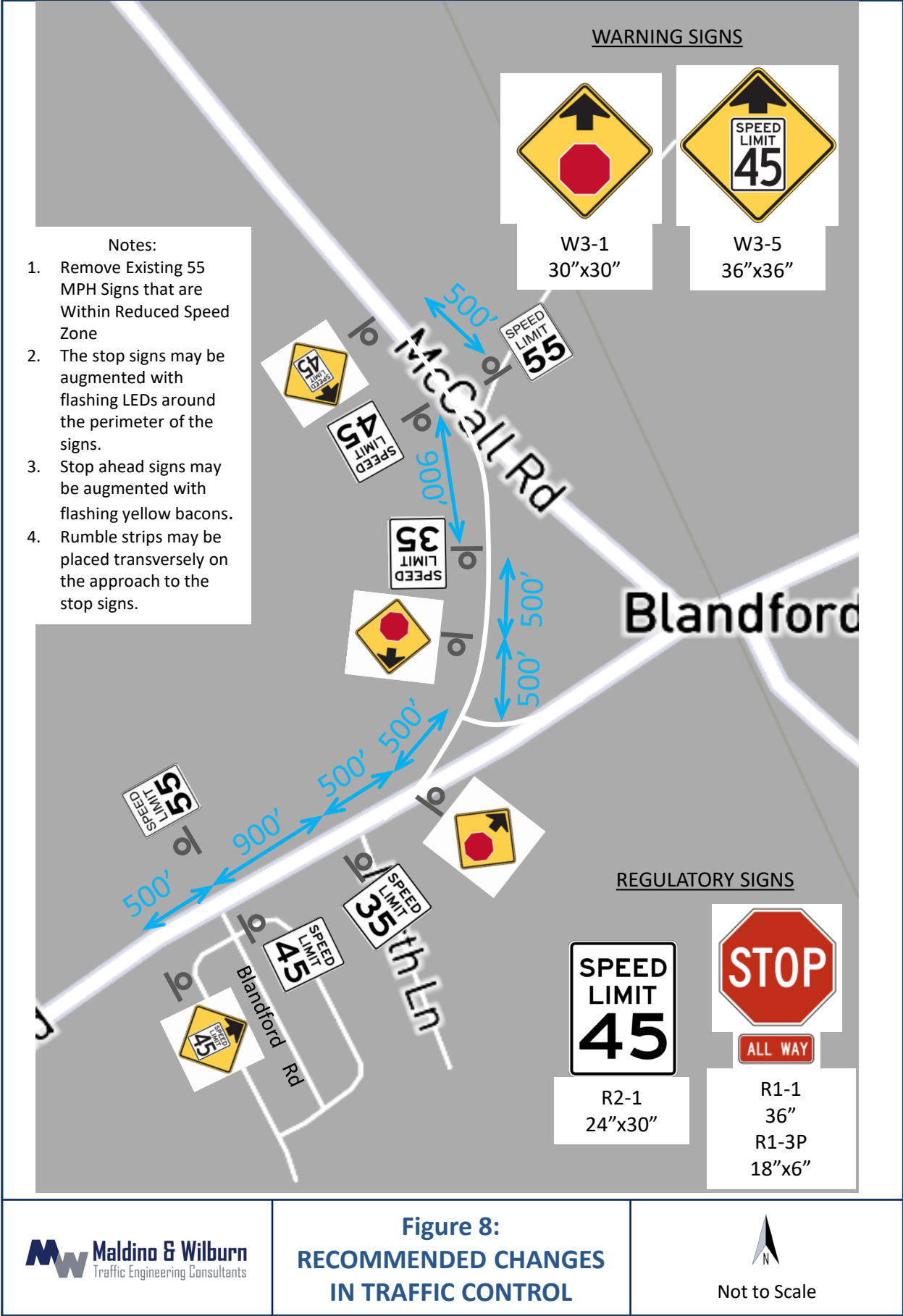
## 6. Recommendations

---



The following summarizes the recommendations of the traffic study engineer:

1. Install All-Way Stop Control as soon as possible. In conjunction with this change it is recommended that the speed limit be reduced incrementally to 45 MPH and 35 MPH on the northbound and southbound approaches to the intersection. The recommended changes are schematically illustrated in Figure 8 on the following page.
2. Traffic signal plans should be developed for the intersection as soon as possible.
3. Procurement of the traffic signal installation should be initiated while the intersection is being evaluated under All-Way Stop-Control.
4. During the observation period, a decision can be made concerning the need to improve the right turn lane along Blue Jay Road eastbound.
5. It has been suggested that the old section of McCall Road be reopened. This is not recommended. The only benefit of reopening this road would be that westbound traffic on Blue Jay Road that desires to go north could bypass the queues on Blue Jay Road. After the recommended changes, the queues are expected to be substantially reduced.



# Appendices

---



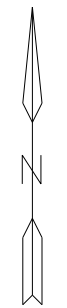
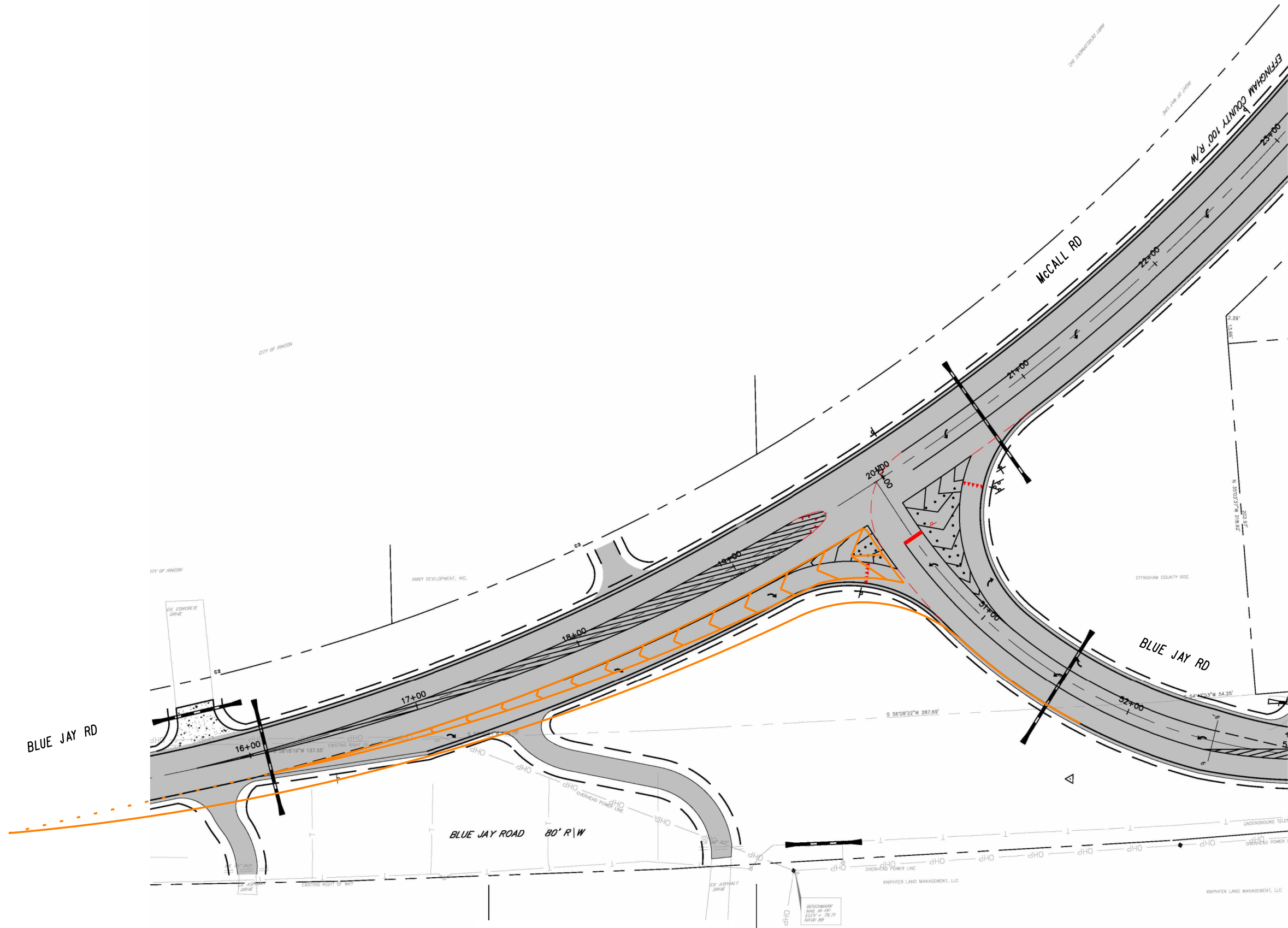
- A. Potential Intersection Improvement, NB Right Turn Lane
- B. Turning Movement Count Data
- C. ATR Count Data
- D. Capacity Analysis Reports, Existing Conditions
- E. Capacity Analysis Reports, All-Way Stop Control
- F. Capacity Analysis Reports, Signal Control
- G. Accident Reports
- H. Signal Warrant Analysis Report

# Appendix A



---

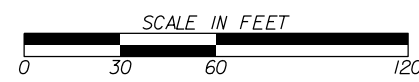
Potential Intersection Improvement,  
NB Right Turn Lane



LEGEND

— IMPROVED RIGHT TURN LANE

**MW** Maldino & Wilburn  
Traffic Engineering Consultants  
A Woman-Owned Business  
1864 Lower Fayetteville Rd, Newnan, GA 30265  
770.362.6184



REVISION DATES

NO.	DATE	DESCRIPTION

POTENTIAL IMPROVEMENTS  
BLUE JAY RD AND MCCALL RD

CHECKED:	DATE:	DRAWING No.
BACKCHECKED:	DATE:	
CORRECTED:	DATE:	
VERIFIED:	DATE: 2/11/22	

# Appendix B



---

## Turning Movement Count Data





ALL TRAFFIC DATA SERVICES

(303) 216-2439

www.alltrafficdata.net

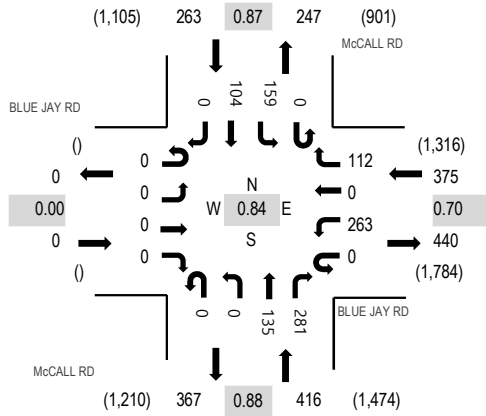
Location: 1 McCALL RD & BLUE JAY RD AM

Date: Wednesday, March 9, 2022

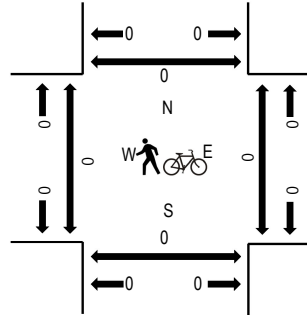
Peak Hour: 07:00 AM - 08:00 AM

Peak 15-Minutes: 07:15 AM - 07:30 AM

Peak Hour - Motorized Vehicles



Peak Hour - Pedestrians/Bicycles in Crosswalk



Note: Total study counts contained in parentheses.

Traffic Counts - Motorized Vehicles

Interval Start Time	BLUE JAY RD Eastbound				BLUE JAY RD Westbound				McCALL RD Northbound				McCALL RD Southbound				Total	Rolling Hour	Pedestrian Crossings			
	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right			West	East	South	North
7:00 AM	0	0	0	0	0	65	0	24	0	0	43	75	0	41	30	0	278	1,054	0	0	0	0
7:15 AM	0	0	0	0	0	93	0	40	0	0	32	73	0	50	26	0	314	968	0	0	0	0
7:30 AM	0	0	0	0	0	59	0	24	0	0	34	72	0	36	29	0	254	868	0	0	0	0
7:45 AM	0	0	0	0	0	46	0	24	0	0	26	61	0	32	19	0	208	821	0	0	0	0
8:00 AM	0	0	0	0	0	39	0	22	0	0	21	45	0	42	23	0	192	785	0	0	0	0
8:15 AM	0	0	0	0	0	32	0	13	0	0	28	71	0	44	26	0	214	756	0	0	0	0
8:30 AM	0	0	0	0	0	29	0	18	0	0	19	76	0	46	19	0	207	708	0	0	0	0
8:45 AM	0	0	0	0	0	38	0	17	0	0	13	49	0	41	14	0	172	679	0	0	0	0
9:00 AM	0	0	0	0	0	29	0	25	0	0	20	37	0	35	17	0	163	681	0	0	0	0
9:15 AM	0	0	0	0	0	34	0	20	0	0	14	45	0	33	20	0	166	678	0	0	0	0
9:30 AM	0	0	0	0	0	32	0	17	0	0	20	62	0	32	15	0	178	716	0	0	0	0
9:45 AM	0	0	0	0	0	35	0	20	0	0	20	54	0	36	9	0	174	714	0	0	0	0
10:00 AM	0	0	0	0	0	34	0	17	0	0	16	40	0	43	10	0	160	707	0	0	0	0
10:15 AM	0	0	0	0	0	32	0	25	0	0	33	55	0	37	22	0	204	719	0	0	0	0
10:30 AM	0	0	0	0	0	41	0	32	0	0	15	37	0	34	17	0	176	671	0	0	0	0
10:45 AM	0	0	0	0	0	43	0	33	0	0	13	37	0	28	13	0	167	664	0	0	0	0
11:00 AM	0	0	0	0	0	43	0	29	0	0	14	37	0	33	16	0	172	668	0	0	0	0
11:15 AM	0	0	0	0	0	27	0	16	0	0	21	47	0	36	9	0	156		0	0	0	0
11:30 AM	0	0	0	0	0	43	0	30	0	0	14	43	0	21	18	0	169		0	0	0	0
11:45 AM	0	0	0	0	0	45	0	31	0	0	8	34	0	34	19	0	171		0	0	0	0

Peak Rolling Hour Flow Rates

Vehicle Type	Eastbound				Westbound				Northbound				Southbound				Total
	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	
Articulated Trucks	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Lights	0	0	0	0	0	258	0	108	0	0	125	276	0	155	103	0	1,025
Mediums	0	0	0	0	0	5	0	4	0	0	10	4	0	4	1	0	28
Total	0	0	0	0	0	263	0	112	0	0	135	281	0	159	104	0	1,054



ALL TRAFFIC DATA SERVICES

(303) 216-2439

www.alltrafficdata.net

Location: 1 McCALL RD & BLUE JAY RD Noon

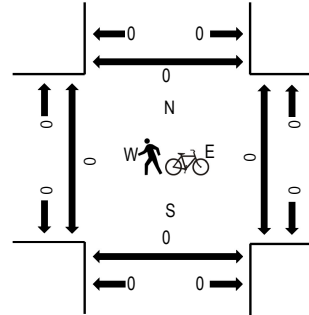
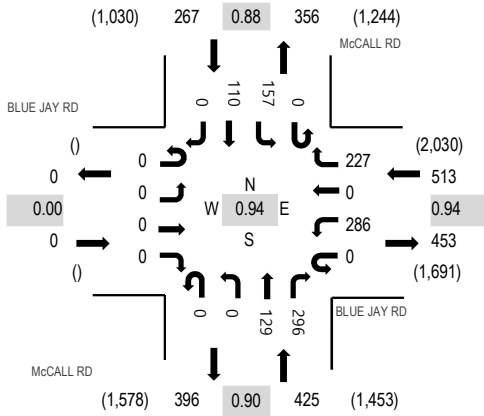
Date: Wednesday, March 9, 2022

Peak Hour: 04:00 PM - 05:00 PM

Peak 15-Minutes: 04:30 PM - 04:45 PM

**Peak Hour - Motorized Vehicles**

**Peak Hour - Pedestrians/Bicycles in Crosswalk**



Note: Total study counts contained in parentheses.

**Traffic Counts - Motorized Vehicles**

Interval Start Time	BLUE JAY RD Eastbound				BLUE JAY RD Westbound				McCALL RD Northbound				McCALL RD Southbound				Total	Rolling Hour	Pedestrian Crossings			
	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right			West	East	South	North
12:00 PM	0	0	0	0	0	50	0	32	0	0	14	50	0	31	10	0	187	758	0	0	0	0
12:15 PM	0	0	0	0	0	42	0	20	0	0	18	49	0	29	18	0	176	746	0	0	0	0
12:30 PM	0	0	0	0	0	49	0	30	0	0	17	55	0	36	8	0	195	779	0	0	0	0
12:45 PM	0	0	0	0	0	46	0	29	0	0	16	39	0	56	14	0	200	800	0	0	0	0
1:00 PM	0	0	0	0	0	56	0	28	0	0	17	35	0	31	8	0	175	755	0	0	0	0
1:15 PM	0	0	0	0	0	68	0	43	0	0	19	35	0	22	22	0	209	784	0	0	0	0
1:30 PM	0	0	0	0	1	62	0	41	0	0	15	57	0	28	12	0	216	780	0	0	0	0
1:45 PM	0	0	0	0	0	47	0	29	0	0	11	33	0	23	12	0	155	788	0	0	0	0
2:00 PM	0	0	0	0	0	50	0	35	0	0	23	53	0	30	13	0	204	863	0	0	0	0
2:15 PM	0	0	0	0	0	69	0	35	0	0	13	41	0	29	18	0	205	879	0	0	0	0
2:30 PM	0	0	0	0	0	72	0	42	0	0	20	38	0	33	19	0	224	902	0	0	0	0
2:45 PM	0	0	0	0	0	70	0	54	0	0	19	42	0	27	18	0	230	906	0	0	0	0
3:00 PM	0	0	0	0	0	61	0	46	0	0	19	55	0	23	16	0	220	932	0	0	0	0
3:15 PM	0	0	0	0	0	62	0	37	0	0	27	47	0	39	16	0	228	1,022	0	0	0	0
3:30 PM	0	0	0	0	0	72	0	39	0	0	23	52	0	27	15	0	228	1,079	0	0	0	0
3:45 PM	0	0	0	0	0	51	0	49	0	0	28	48	0	44	36	0	256	1,173	0	0	0	0
4:00 PM	0	0	0	0	0	67	0	70	0	0	24	76	0	32	41	0	310	1,205	0	0	0	0
4:15 PM	0	0	0	0	0	64	0	51	0	0	38	73	0	35	24	0	285		0	0	0	0
4:30 PM	0	0	0	0	0	78	0	57	0	0	41	77	0	48	21	0	322		0	0	0	0
4:45 PM	0	0	0	0	0	77	0	49	0	0	26	70	0	42	24	0	288		0	0	0	0

**Peak Rolling Hour Flow Rates**

Vehicle Type	Eastbound				Westbound				Northbound				Southbound				Total
	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	U-Turn	Left	Thru	Right	
Articulated Trucks	0	0	0	0	0	1	0	0	0	0	0	2	0	1	3	0	7
Lights	0	0	0	0	0	281	0	225	0	0	128	288	0	152	101	0	1,175
Mediums	0	0	0	0	0	4	0	2	0	0	1	6	0	4	6	0	23
Total	0	0	0	0	0	286	0	227	0	0	129	296	0	157	110	0	1,205

# Appendix C

---



## ATR Count Data

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 1  
Station ID: 1  
McCALL RD N.O BLUE JAY RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

NB

Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
03/09/22	0	0	0	0	0	0	2	0	0	1	2	0	0	0	5
00:15	0	0	0	0	0	0	1	2	2	0	0	0	0	0	5
00:30	0	0	0	0	0	0	0	3	0	0	0	0	0	0	3
00:45	0	0	0	0	0	1	2	2	1	0	0	0	0	0	6
01:00	0	0	0	0	0	1	5	7	3	1	2	0	0	0	19
01:15	0	0	0	0	0	0	3	0	0	0	0	0	0	0	3
01:30	0	0	0	0	0	1	1	3	2	0	0	0	0	0	7
01:45	0	0	0	0	0	0	0	1	1	0	0	0	0	0	2
02:00	0	0	0	0	0	1	4	4	4	2	0	0	0	0	15
02:15	0	0	0	0	0	2	1	0	0	0	0	0	0	0	3
02:30	0	0	0	0	1	0	0	0	1	0	1	0	0	0	3
02:45	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
03:00	0	0	0	0	1	2	2	1	2	0	1	0	0	0	9
03:15	0	0	0	0	0	0	2	1	1	0	0	0	0	0	4
03:30	0	0	0	0	0	0	0	2	1	0	0	0	0	0	3
03:45	0	0	0	0	0	0	0	1	1	0	0	0	0	0	2
04:00	0	0	0	0	1	0	1	1	0	1	0	0	0	0	4
04:15	0	0	0	0	0	0	3	5	3	1	0	0	0	0	13
04:30	1	0	0	0	0	0	1	1	1	0	0	0	0	0	3
04:45	1	0	0	0	0	0	1	2	1	0	0	0	0	0	5
05:00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
05:15	2	0	0	0	0	0	3	5	5	0	0	0	1	0	6
05:30	0	0	0	0	0	0	0	0	2	1	0	0	0	0	3
05:45	0	0	0	0	0	0	0	2	2	2	0	0	0	0	6
06:00	0	0	0	0	0	0	1	3	0	0	1	0	0	0	5
06:15	0	0	0	0	0	0	1	2	3	0	1	0	0	0	7
06:30	0	0	0	0	0	0	2	7	7	3	2	0	0	0	21
06:45	0	0	0	0	0	0	1	4	3	1	0	0	0	0	9
07:00	0	0	0	0	0	0	3	4	7	2	0	0	0	0	16
07:15	0	0	0	0	0	3	2	13	15	5	1	0	0	0	39
07:30	4	0	0	0	1	3	8	19	28	7	1	0	0	0	71
07:45	4	0	0	0	1	6	14	40	53	15	2	0	0	0	135
08:00	1	0	0	0	0	0	5	18	20	5	0	0	0	0	49
08:15	5	0	0	0	1	5	10	28	26	8	0	0	0	0	83
08:30	3	0	0	2	2	5	10	15	15	5	0	0	0	0	57
08:45	3	0	0	0	0	3	6	21	15	4	2	0	0	0	54
09:00	12	0	0	2	3	13	31	82	76	22	2	0	0	0	243
09:15	1	0	0	0	0	5	8	14	10	4	0	0	0	0	42
09:30	2	0	0	0	1	0	10	13	11	4	0	0	0	0	41
09:45	1	0	0	0	2	1	9	13	16	3	0	0	0	0	45
10:00	0	0	0	0	0	3	8	14	5	1	0	0	0	0	31
10:15	4	0	0	0	3	9	35	54	42	12	0	0	0	0	159
10:30	3	0	0	0	0	0	10	16	10	2	0	0	0	0	41
10:45	2	0	0	1	1	8	7	16	4	1	0	0	0	0	40
11:00	2	0	0	0	0	5	12	6	4	3	0	0	0	0	32
11:15	1	0	0	0	0	2	4	16	10	0	1	0	0	0	34
11:30	8	0	0	1	1	15	33	54	28	6	1	0	0	0	147
11:45	0	0	0	0	0	1	11	21	7	3	0	0	0	0	43
12:00	4	0	0	0	0	2	10	9	4	2	0	0	0	0	31
12:15	1	0	0	0	0	0	23	25	9	5	0	0	0	0	63
12:30	1	0	0	0	2	5	9	19	7	3	1	0	0	0	47
12:45	6	0	0	0	2	8	53	74	27	13	1	0	0	0	184
13:00	0	0	0	1	3	6	11	17	4	3	0	0	0	0	45
13:15	0	0	0	0	1	4	9	16	10	2	1	0	0	0	43
13:30	2	0	0	0	0	2	5	15	10	1	0	0	0	0	35
13:45	0	0	0	0	0	3	9	23	5	2	0	0	0	0	42
Total	2	0	0	1	4	15	34	71	29	8	1	0	0	0	165
Total	38	0	0	4	16	70	219	404	279	83	12	0	1	0	1126

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 1  
Station ID: 1  
McCALL RD N.O BLUE JAY RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

NB

Start Time	15	16:20	21:25	26:30	31:35	36:40	41:45	46:50	51:55	56:60	61:65	66:70	71:75	76:999	Total
12 PM	2	0	0	0	0	4	10	16	9	1	1	0	0	0	43
12:15	1	0	0	0	0	1	15	16	10	3	0	0	0	0	46
12:30	0	0	0	0	0	1	9	18	8	1	0	0	0	0	37
12:45	0	0	0	0	0	5	16	14	9	2	0	0	0	0	46
	3	0	0	0	0	11	50	64	36	7	1	0	0	0	172
13:00	0	0	0	1	0	9	15	12	8	0	0	0	0	0	45
13:15	0	0	0	0	0	6	13	13	12	4	0	0	0	0	48
13:30	2	0	0	0	0	7	16	16	13	2	1	0	0	0	57
13:45	0	0	0	0	0	4	22	12	8	5	0	0	0	0	51
	2	0	0	1	0	26	66	53	41	11	1	0	0	0	201
14:00	1	0	0	0	0	3	11	14	11	2	1	0	0	0	43
14:15	1	0	0	1	0	6	19	19	14	1	0	0	0	0	61
14:30	0	0	0	0	1	4	5	22	8	6	0	1	0	0	47
14:45	1	0	0	0	0	5	15	30	9	3	0	0	0	0	63
	3	0	0	1	1	18	50	85	42	12	1	1	0	0	214
15:00	1	0	0	0	0	3	16	30	16	3	0	0	0	0	69
15:15	4	0	0	0	0	2	10	34	13	2	0	0	0	0	65
15:30	0	0	0	0	0	5	19	21	17	2	0	0	0	0	64
15:45	3	0	0	1	5	8	8	22	12	3	0	0	0	0	62
	8	0	0	1	5	18	53	107	58	10	0	0	0	0	260
16:00	1	0	0	1	2	5	16	28	26	3	2	0	0	0	84
16:15	2	0	0	0	0	2	21	36	17	6	1	0	0	0	85
16:30	3	0	0	0	2	6	14	30	36	6	1	0	0	0	98
16:45	2	0	0	0	0	8	12	24	36	11	1	0	0	0	94
	8	0	0	1	4	21	63	118	115	26	5	0	0	0	361
17:00	2	0	0	0	0	2	18	26	22	2	1	0	0	0	73
17:15	3	0	0	0	0	4	15	40	34	10	0	0	0	0	106
17:30	2	0	0	0	0	5	16	44	24	1	0	0	0	0	92
17:45	1	0	0	0	0	1	12	29	24	5	0	0	0	0	72
	8	0	0	0	0	12	61	139	104	18	1	0	0	0	343
18:00	3	0	0	0	0	6	12	33	23	8	0	0	0	0	85
18:15	1	0	0	0	0	2	18	36	23	3	0	0	0	0	83
18:30	1	0	0	0	2	7	31	17	4	1	1	0	0	0	64
18:45	0	0	0	0	1	9	22	30	5	0	0	0	0	0	67
	5	0	0	0	3	24	83	116	55	12	1	0	0	0	299
19:00	0	0	0	0	1	6	14	19	9	1	0	0	0	0	50
19:15	0	0	0	0	0	0	12	20	8	4	2	0	0	0	46
19:30	2	0	0	0	0	1	6	16	10	2	0	0	0	0	37
19:45	1	0	0	0	0	2	6	16	9	3	0	0	0	0	37
	3	0	0	0	1	9	38	71	36	10	2	0	0	0	170
20:00	0	0	0	0	0	2	10	13	11	2	2	0	0	0	40
20:15	0	0	0	0	0	2	14	10	7	0	0	0	1	0	34
20:30	0	0	0	0	0	3	3	15	7	1	0	0	0	0	29
20:45	0	0	0	0	0	1	7	10	6	4	1	0	0	0	29
	0	0	0	0	0	8	34	48	31	7	3	0	1	0	132
21:00	0	0	0	0	0	1	6	11	3	1	0	0	0	0	22
21:15	0	0	0	0	0	2	8	8	6	3	0	0	0	0	27
21:30	0	0	0	0	0	2	6	8	6	0	0	0	0	0	22
21:45	0	0	0	0	0	1	4	7	4	2	0	0	0	0	18
	0	0	0	0	0	6	24	34	19	6	0	0	0	0	89
22:00	0	0	0	0	0	0	1	9	2	1	0	0	0	0	13
22:15	0	0	0	0	0	4	7	7	4	2	1	0	0	0	25
22:30	0	0	0	0	0	0	0	4	3	1	0	0	0	0	8
22:45	1	0	0	0	1	0	4	4	3	0	0	0	0	0	13
	1	0	0	0	1	4	12	24	12	4	1	0	0	0	59
23:00	0	0	0	0	0	0	3	3	1	0	3	0	0	0	10
23:15	0	0	0	0	0	0	4	4	4	1	0	0	0	0	13
23:30	0	0	0	0	0	0	2	3	1	0	0	0	0	0	6
23:45	0	0	0	0	0	0	0	2	1	0	0	0	0	0	3
	0	0	0	0	0	0	9	12	7	1	3	0	0	0	32
Total	41	0	0	4	15	157	543	871	556	124	19	1	1	0	2332
Grand Total	79	0	0	8	31	227	762	1275	835	207	31	1	2	0	3458

15th Percentile : 41 MPH  
50th Percentile : 47 MPH  
85th Percentile : 53 MPH  
95th Percentile : 56 MPH

Stats Mean Speed(Average) : 47 MPH  
10 MPH Pace Speed : 46-55 MPH  
Number in Pace : 2110

Percent in Pace :	61.0%
Number of Vehicles > 55 MPH :	241
Percent of Vehicles > 55 MPH :	7.0%

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 1  
Station ID: 1  
McCALL RD N.O BLUE JAY RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

SB

Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
03/09/22	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
00:15	0	0	0	0	1	1	0	1	0	0	0	0	0	0	3
00:30	0	0	0	0	1	1	2	1	1	0	0	0	0	0	6
00:45	0	0	0	0	0	0	1	1	1	0	0	0	0	0	3
01:00	0	0	0	0	2	2	3	4	2	0	0	0	0	0	13
01:15	0	0	0	0	0	0	0	1	1	0	0	0	0	0	2
01:30	0	0	0	0	0	1	1	1	1	0	0	0	0	0	4
01:45	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
02:00	0	0	0	0	0	2	2	2	2	0	0	0	0	0	8
02:15	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
02:30	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
02:45	0	0	0	0	0	0	0	1	2	1	0	0	0	0	4
03:00	0	0	0	0	0	0	0	1	6	1	0	0	0	0	8
03:15	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2
03:30	0	0	0	0	0	0	2	1	2	0	2	0	0	0	4
03:45	0	0	0	0	0	0	0	4	3	0	1	0	0	0	7
04:00	0	0	0	0	0	0	3	7	8	0	3	0	0	0	8
04:15	0	0	0	0	0	0	3	2	8	4	0	0	0	0	21
04:30	0	0	0	0	1	0	2	11	10	5	0	0	0	0	17
04:45	0	0	0	0	0	3	2	9	4	4	0	0	0	0	27
05:00	0	0	0	0	1	3	9	28	36	17	1	0	0	0	29
05:15	0	0	0	0	0	0	5	5	8	3	1	0	0	0	22
05:30	0	0	0	0	0	3	14	7	16	5	0	0	0	0	45
05:45	0	0	0	0	0	1	11	16	21	3	0	0	0	0	52
06:00	0	0	0	0	0	4	7	26	12	7	2	0	0	0	58
06:15	0	0	0	0	0	8	37	54	57	18	3	0	0	0	177
06:30	0	0	0	0	0	5	10	32	13	4	2	0	0	0	66
06:45	2	0	0	0	1	8	13	22	10	6	1	0	0	0	60
07:00	5	0	0	0	0	5	9	40	17	6	3	0	0	0	86
07:15	7	0	0	0	1	18	59	117	65	24	6	0	0	0	85
07:30	1	0	0	0	0	0	15	23	27	4	2	0	0	0	297
07:45	1	0	0	0	0	1	17	26	15	4	0	0	0	0	72
08:00	1	0	0	0	0	14	23	30	7	0	0	0	0	0	64
08:15	3	0	0	0	0	1	11	15	22	4	1	0	0	0	75
08:30	6	0	0	0	0	16	66	94	71	12	3	0	0	0	57
08:45	2	0	0	0	0	9	21	22	8	1	0	0	0	0	268
09:00	1	0	0	0	0	8	18	25	11	0	1	0	0	0	63
09:15	0	0	0	0	2	6	28	20	8	0	0	0	0	0	64
09:30	2	0	0	0	0	5	21	19	11	3	0	0	0	0	64
09:45	5	0	0	0	2	28	88	86	38	4	1	0	0	0	61
10:00	1	0	0	2	2	1	12	24	9	1	0	0	0	0	252
10:15	3	0	0	0	1	3	20	25	10	4	0	0	0	0	52
10:30	2	0	0	0	0	4	12	8	7	1	2	0	0	0	66
10:45	0	0	0	0	1	8	19	14	6	2	0	0	0	0	36
11:00	6	0	0	2	4	16	63	71	32	8	2	0	0	0	50
11:15	0	0	0	0	0	5	17	14	7	1	0	0	0	0	204
11:30	1	0	0	0	1	11	9	18	10	5	0	0	0	0	44
11:45	2	0	0	0	1	6	19	17	4	4	0	0	0	0	55
Total	2	0	0	0	0	6	21	14	4	0	0	0	0	0	53
	2	0	0	0	0	26	71	65	17	3	1	0	0	0	51
	5	0	0	0	2	28	61	64	31	12	0	0	0	0	203
	0	0	0	0	0	4	12	26	4	1	1	0	0	0	48
	0	0	0	0	0	8	18	14	3	0	0	0	0	0	43
	1	0	0	0	0	8	20	11	6	2	0	0	0	0	48
	1	0	0	0	0	6	21	14	4	0	0	0	0	0	46
	2	0	0	0	0	26	71	65	17	3	1	0	0	0	185
Total	31	0	0	2	12	147	462	593	365	99	20	0	0	0	1731

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 1  
Station ID: 1  
McCALL RD N.O BLUE JAY RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

SB

Start Time	15	16:20	21:25	26:30	31:35	36:40	41:45	46:50	51:55	56:60	61:65	66:70	71:75	76:999	Total
12 PM	2	0	0	0	4	3	15	14	4	3	0	0	0	0	45
12:15	0	0	0	0	1	4	16	22	3	0	0	0	0	0	46
12:30	0	0	0	0	0	5	10	23	7	0	0	0	0	0	45
12:45	1	0	0	0	0	9	27	11	5	2	1	0	0	0	56
13:00	3	0	0	0	5	21	68	70	19	5	1	0	0	0	192
13:15	0	0	0	0	0	5	21	15	8	3	0	0	0	0	52
13:30	2	0	0	0	1	4	13	11	8	1	2	0	0	0	42
13:45	1	0	0	0	0	4	16	14	11	2	0	0	0	0	48
14:00	0	0	0	0	0	3	9	10	7	2	0	0	0	0	31
14:15	3	0	0	0	1	16	59	50	34	8	2	0	0	0	173
14:30	0	0	0	0	0	9	15	10	8	1	1	0	0	0	44
14:45	2	0	0	1	1	8	15	13	3	2	0	0	0	0	45
15:00	5	0	0	0	1	4	6	22	12	4	1	0	0	0	55
15:15	3	0	0	0	0	5	14	16	8	2	0	0	0	0	48
15:30	10	0	0	1	2	26	50	61	31	9	2	0	0	0	192
15:45	1	0	0	0	0	5	20	10	3	0	0	0	0	0	39
16:00	5	0	0	0	3	3	13	13	2	2	0	0	0	0	41
16:15	0	0	0	0	0	3	17	20	8	1	0	0	0	0	49
16:30	2	0	1	0	0	8	17	12	9	1	0	0	0	0	50
16:45	8	0	1	0	3	19	67	55	22	4	0	0	0	0	179
17:00	2	0	0	0	0	25	27	20	9	0	0	0	0	0	83
17:15	0	0	0	0	0	4	13	35	8	1	0	0	0	0	61
17:30	1	0	0	0	0	12	31	15	7	4	0	0	0	0	70
17:45	1	0	0	0	0	6	24	20	7	2	1	0	0	0	61
18:00	4	0	0	0	0	47	95	90	31	7	1	0	0	0	275
18:15	1	0	0	0	0	10	17	28	15	2	0	0	0	0	73
18:30	3	0	0	0	1	2	12	21	15	2	2	0	0	0	58
18:45	5	0	0	0	2	7	15	20	8	0	1	0	0	0	58
19:00	0	0	0	0	0	2	15	34	13	0	0	0	0	0	64
19:15	9	0	0	0	3	21	59	103	51	4	3	0	0	0	253
19:30	1	0	0	0	2	7	13	13	10	1	0	0	0	0	47
19:45	0	0	0	0	1	5	22	13	3	0	0	0	0	0	44
20:00	0	0	0	0	3	13	12	23	6	3	1	0	0	0	61
20:15	0	0	0	0	0	4	9	17	9	0	1	0	0	0	40
20:30	1	0	0	0	6	29	56	66	28	4	2	0	0	0	192
20:45	1	0	0	0	3	6	9	5	5	2	0	0	0	0	31
21:00	0	0	0	0	2	3	8	7	12	0	0	0	0	0	32
21:15	1	0	0	0	0	1	6	9	2	2	0	0	0	0	21
21:30	0	0	0	0	0	0	8	4	4	3	0	0	0	0	19
21:45	2	0	0	0	5	10	31	25	23	7	0	0	0	0	103
22:00	0	0	0	0	1	4	7	10	5	1	0	0	0	0	28
22:15	0	0	0	1	0	1	5	6	4	1	0	0	0	0	18
22:30	0	0	0	0	0	0	2	8	3	2	1	0	0	0	16
22:45	0	0	0	0	0	1	10	11	4	1	0	0	0	0	27
23:00	0	0	0	1	1	6	24	35	16	5	1	0	0	0	89
23:15	0	0	0	0	0	0	2	2	4	2	0	0	0	0	10
23:30	0	0	0	0	0	0	4	6	4	1	0	0	0	0	15
23:45	0	0	0	0	0	1	8	0	1	1	1	0	0	0	12
24:00	0	0	0	0	0	3	3	1	3	1	0	0	0	0	11
24:15	0	0	0	0	0	4	17	9	12	5	1	0	0	0	48
24:30	0	0	0	0	0	2	4	5	1	0	0	0	0	0	12
24:45	0	0	0	0	0	2	2	4	2	0	0	0	0	0	10
25:00	0	0	0	0	0	0	0	2	2	0	0	0	0	0	4
25:15	0	0	0	0	0	0	2	0	2	1	0	0	0	0	5
25:30	0	0	0	0	0	4	8	11	7	1	0	0	0	0	31
25:45	0	0	1	0	0	2	1	0	0	0	0	0	0	0	4
26:00	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
26:15	0	0	0	0	0	1	0	1	1	0	0	0	0	0	3
26:30	0	0	0	0	0	1	1	0	0	0	0	0	0	0	2
26:45	0	0	1	0	0	4	2	2	1	0	0	0	0	0	10
Total	40	0	2	2	26	207	536	577	275	59	13	0	0	0	1737
Grand Total	71	0	2	4	38	354	998	1170	640	158	33	0	0	0	3468

15th Percentile : 40 MPH  
50th Percentile : 46 MPH  
85th Percentile : 52 MPH  
95th Percentile : 55 MPH

Stats Mean Speed(Average) : 46 MPH  
10 MPH Pace Speed : 41-50 MPH  
Number in Pace : 2168



Percent in Pace :	62.5%
Number of Vehicles > 55 MPH :	191
Percent of Vehicles > 55 MPH :	5.5%

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 2  
Station ID: 2  
BLUE JAY RD W.O McCALL RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

EB

Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
03/09/22	0	0	0	0	0	0	0	1	1	2	0	0	0	0	4
00:15	0	0	0	0	0	0	2	0	1	0	0	0	0	0	3
00:30	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
00:45	0	0	0	0	0	0	0	1	3	1	0	0	0	0	5
01:00	0	0	0	0	0	0	2	2	5	4	0	0	0	0	13
01:15	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
01:30	0	0	0	0	0	0	0	2	0	0	0	0	0	0	2
01:45	0	0	0	0	0	0	0	2	1	1	0	0	0	0	4
02:00	0	0	0	0	0	0	0	4	3	1	0	0	0	0	8
02:15	0	0	0	0	0	0	1	1	0	0	0	0	0	0	2
02:30	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
02:45	0	0	0	0	0	0	2	0	0	1	0	0	0	0	3
03:00	0	0	0	0	0	0	3	1	1	2	0	0	0	0	7
03:15	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
03:30	0	0	0	0	1	0	0	1	1	0	0	0	0	0	3
03:45	0	0	0	0	0	0	0	0	2	2	0	0	0	0	4
04:00	0	0	0	0	1	1	0	2	3	2	0	0	0	0	9
04:15	0	0	0	0	0	0	0	1	0	2	0	1	0	0	4
04:30	0	0	0	0	0	0	0	4	4	1	1	0	0	0	10
04:45	0	0	0	0	0	0	3	3	5	2	0	0	0	1	14
05:00	0	0	0	0	0	0	4	8	12	6	1	1	0	1	33
05:15	0	0	0	0	0	1	2	2	7	3	1	0	0	0	16
05:30	0	0	0	0	0	0	0	8	7	5	1	0	0	0	21
05:45	1	0	0	0	0	0	1	1	11	6	1	0	0	0	21
06:00	1	0	0	0	0	1	3	16	32	21	5	0	0	0	79
06:15	2	0	0	0	1	1	1	8	9	7	0	1	0	0	26
06:30	3	0	0	0	1	10	1	18	33	8	5	1	0	0	80
06:45	4	0	0	0	0	12	10	30	44	17	0	0	0	0	117
07:00	9	0	0	0	2	23	13	64	102	40	7	2	0	0	262
07:15	8	0	0	0	0	1	10	21	24	17	1	1	0	0	83
07:30	3	0	0	0	0	4	16	33	52	16	0	0	0	0	124
07:45	4	0	0	0	13	9	15	23	17	5	2	0	0	0	88
07:55	5	0	0	0	1	8	22	37	24	4	1	0	0	0	102
08:00	20	0	0	0	14	22	63	114	117	42	4	1	0	0	397
08:00	0	0	0	0	1	8	12	31	22	7	3	0	0	0	84
08:15	1	0	1	1	0	4	20	18	17	6	1	2	0	0	71
08:30	4	0	0	0	0	3	14	55	35	3	1	0	0	0	115
08:45	1	0	0	0	0	2	26	21	14	5	1	0	0	0	70
09:00	6	0	1	1	1	17	72	125	88	21	6	2	0	0	340
09:00	0	0	0	1	0	1	11	12	18	8	1	0	0	0	52
09:15	0	0	0	0	0	9	7	23	14	5	3	0	0	0	61
09:30	2	0	0	0	0	2	14	14	15	11	1	0	0	0	59
09:45	1	0	0	0	0	5	16	27	28	9	0	0	0	0	86
10:00	3	0	0	1	0	17	48	76	75	33	5	0	0	0	258
10:00	2	0	0	0	0	1	5	16	30	12	1	0	0	0	67
10:15	1	0	0	0	0	0	5	20	21	9	0	0	0	0	56
10:30	1	0	1	0	2	7	27	25	9	8	0	0	0	0	80
10:45	0	0	0	0	0	0	23	18	19	5	0	0	0	0	65
11:00	4	0	1	0	2	8	60	79	79	34	1	0	0	0	268
11:00	0	0	0	1	0	0	5	13	10	3	0	0	0	0	32
11:15	3	0	0	0	0	2	14	18	28	6	0	0	0	0	71
11:30	2	0	0	0	0	1	8	19	18	6	0	0	0	0	54
11:45	3	0	0	0	1	3	11	16	13	5	0	1	0	0	53
11:55	8	0	0	1	1	6	38	66	69	20	0	1	0	0	210
Total	51	0	2	3	21	95	306	557	586	226	29	7	0	1	1884

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 2  
Station ID: 2  
BLUE JAY RD W.O McCALL RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

EB

Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
12 PM	2	0	0	1	1	1	7	20	14	8	2	0	0	0	56
12:15	1	0	1	0	1	6	12	20	15	10	1	0	0	0	67
12:30	2	0	0	0	0	1	5	18	26	6	1	0	0	0	59
12:45	3	0	0	1	1	8	18	36	6	2	0	0	0	0	75
13:00	8	0	1	2	3	16	42	94	61	26	4	0	0	0	257
13:15	2	0	0	0	3	6	3	12	21	0	0	0	0	0	47
13:30	4	0	0	0	0	1	13	9	19	8	1	0	0	0	55
13:45	1	0	0	0	0	3	9	16	25	6	2	0	0	0	62
14:00	3	3	1	0	5	3	9	13	19	8	1	0	0	0	65
14:15	10	3	1	0	8	13	34	50	84	22	4	0	0	0	229
14:30	0	0	0	0	0	0	6	24	16	6	0	0	0	0	52
14:45	3	0	0	0	3	1	11	23	13	10	1	0	0	0	65
15:00	0	0	0	0	0	7	6	11	12	7	2	0	0	0	45
15:15	4	2	0	0	0	0	4	16	31	5	2	0	0	0	64
15:30	7	2	0	0	3	8	27	74	72	28	5	0	0	0	226
15:45	2	0	0	0	0	0	8	21	40	6	0	0	0	0	77
16:00	2	0	0	3	0	2	14	14	21	9	1	1	0	0	67
16:15	2	0	0	0	0	1	4	25	21	15	1	0	0	0	69
16:30	2	0	0	1	0	5	14	18	27	12	1	0	0	0	80
16:45	8	0	0	4	0	8	40	78	109	42	3	1	0	0	293
17:00	2	0	1	0	1	4	8	29	27	9	3	0	0	0	84
17:15	4	0	0	0	0	0	16	32	35	18	0	0	0	0	105
17:30	11	0	0	0	0	6	16	27	48	13	2	0	0	0	123
17:45	3	0	0	0	0	0	14	24	46	15	1	0	0	0	103
18:00	20	0	1	0	1	10	54	112	156	55	6	0	0	0	415
18:15	4	0	0	0	1	3	15	32	43	5	1	0	0	0	104
18:30	7	0	0	0	0	2	8	42	23	9	5	1	0	0	97
18:45	3	0	0	0	0	1	12	23	41	13	1	0	0	0	94
19:00	2	0	0	0	0	1	13	21	45	7	0	0	0	0	89
19:15	16	0	0	0	1	7	48	118	152	34	7	1	0	0	384
19:30	4	0	0	0	0	1	9	21	39	8	3	0	0	0	85
19:45	7	0	1	0	4	7	24	36	28	8	0	0	0	0	115
20:00	2	0	0	0	0	8	13	36	26	5	1	0	0	0	91
20:15	3	0	0	0	0	3	12	17	26	4	0	1	0	0	66
20:30	16	0	1	0	4	19	58	110	119	25	4	1	0	0	357
20:45	0	0	0	0	0	4	8	15	18	3	1	0	0	0	49
21:00	1	0	0	0	2	7	7	11	10	3	0	0	0	0	41
21:15	0	0	0	0	1	0	1	6	6	5	1	0	0	0	20
21:30	2	0	1	0	1	1	3	8	5	2	1	0	0	0	24
21:45	3	0	1	0	4	12	19	40	39	13	3	0	0	0	134
22:00	0	0	0	0	0	1	2	3	12	7	0	0	0	0	25
22:15	1	1	0	0	0	1	3	6	3	4	0	0	0	0	19
22:30	0	0	0	0	0	0	0	3	8	2	0	0	0	0	13
22:45	0	0	0	0	0	0	1	4	7	4	1	0	0	0	17
23:00	1	1	0	0	0	2	6	16	30	17	1	0	0	0	74
23:15	1	0	0	0	0	0	0	2	8	6	3	0	0	0	20
23:30	0	0	0	0	0	2	2	4	3	3	0	0	0	0	14
23:45	0	0	0	0	0	0	2	5	12	0	0	0	0	0	19
24:00	0	0	0	0	0	0	2	4	4	4	1	0	0	0	15
24:15	1	0	0	0	0	2	6	15	27	13	4	0	0	0	68
24:30	0	0	0	0	0	0	1	3	1	3	0	0	0	0	8
24:45	0	0	0	0	0	1	1	2	4	4	0	1	0	0	13
25:00	0	0	0	0	0	0	2	3	2	1	0	0	0	0	8
25:15	0	0	0	0	0	0	1	4	1	0	0	0	0	0	6
25:30	0	0	0	0	0	1	5	12	8	8	0	1	0	0	35
25:45	0	0	0	0	0	0	0	3	2	2	2	0	0	0	9
26:00	0	0	0	0	0	1	1	1	1	2	1	0	0	0	7
26:15	0	0	0	0	0	0	0	4	0	0	0	0	0	0	4
26:30	0	0	0	0	0	0	0	0	3	0	0	0	0	0	3
26:45	0	0	0	0	0	1	1	8	6	4	3	0	0	0	23
Total	90	6	5	6	24	99	340	727	863	287	44	4	0	0	2495
Grand Total	141	6	7	9	45	194	646	1284	1449	513	73	11	0	1	4379

15th Percentile : 41 MPH  
50th Percentile : 49 MPH  
85th Percentile : 54 MPH  
95th Percentile : 58 MPH

Stats Mean Speed(Average) : 48 MPH  
10 MPH Pace Speed : 46-55 MPH  
Number in Pace : 2733

Percent in Pace :	62.4%
Number of Vehicles > 55 MPH :	598
Percent of Vehicles > 55 MPH :	13.7%

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 2  
Station ID: 2  
BLUE JAY RD W.O McCALL RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

WB	Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
	03/09/22	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
	00:15	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
	00:30	0	0	0	0	0	0	0	1	0	1	0	0	0	0	2
	00:45	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
	01:00	0	0	0	0	0	0	1	1	3	1	0	0	0	0	6
	01:15	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
	01:30	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
	01:45	0	0	0	0	1	0	0	2	0	0	0	0	0	0	3
	02:00	0	0	0	0	1	1	0	2	2	2	0	0	0	0	8
	02:15	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
	02:30	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
	02:45	0	0	0	0	0	1	1	1	0	1	0	0	0	0	4
	03:00	0	0	0	0	0	1	1	1	3	2	0	0	0	0	8
	03:15	0	0	0	0	0	0	3	1	0	0	0	0	0	0	4
	03:30	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
	03:45	0	0	0	0	0	0	0	1	2	0	0	0	0	0	3
	04:00	0	0	0	0	0	1	3	5	2	0	0	0	0	0	11
	04:15	0	0	0	0	0	1	0	0	0	1	0	0	0	0	2
	04:30	0	0	0	0	0	0	0	2	0	0	1	0	0	0	3
	04:45	0	0	0	0	0	0	0	0	3	1	0	0	0	0	4
	05:00	0	0	0	0	0	0	0	1	5	7	1	0	0	0	15
	05:15	0	0	0	0	0	0	4	2	3	4	0	0	0	0	13
	05:30	0	0	0	0	0	0	3	3	4	2	0	0	0	0	12
	05:45	0	0	0	0	0	0	0	1	5	5	3	0	0	0	14
	06:00	0	0	0	0	0	0	1	2	3	6	1	0	0	0	13
	06:15	0	0	0	0	0	0	8	8	15	17	4	0	0	0	52
	06:30	2	0	0	0	0	0	3	3	4	8	4	0	0	0	22
	06:45	2	0	0	0	1	2	8	14	15	6	2	0	0	0	48
	07:00	3	0	0	1	0	0	1	2	14	21	16	3	0	0	84
	07:15	7	0	0	1	0	0	1	31	38	17	3	0	0	0	94
	07:30	3	0	0	1	1	3	26	69	82	47	12	0	0	0	248
	07:45	3	0	0	0	0	2	9	22	33	23	7	0	0	0	99
	08:00	2	0	0	0	0	3	12	38	23	16	2	1	0	0	97
	08:15	4	0	0	1	4	6	6	28	32	15	2	0	0	0	98
	08:30	2	0	0	0	0	1	6	24	32	8	4	0	0	0	77
	08:45	11	0	0	1	4	12	33	112	120	62	15	1	0	0	371
	09:00	1	0	0	0	0	7	16	20	15	9	0	0	0	0	68
	09:15	1	0	0	0	1	6	9	13	16	8	0	0	0	0	54
	09:30	1	0	0	0	0	6	11	16	16	2	0	0	0	0	52
	09:45	3	0	0	0	0	1	14	22	11	8	0	0	0	0	59
	10:00	6	0	0	0	1	20	50	71	58	27	0	0	0	0	233
	10:15	1	0	0	0	0	4	12	10	9	7	0	0	0	0	43
	10:30	1	0	0	0	3	3	9	13	19	3	2	0	0	0	53
	10:45	0	0	0	0	0	1	14	18	9	2	0	3	0	0	47
	11:00	3	0	1	0	0	2	10	15	8	3	1	0	0	0	43
	11:15	5	0	1	0	3	10	45	56	45	15	3	3	0	0	186
	11:30	4	0	0	0	0	2	8	20	11	2	0	0	0	0	47
	11:45	0	0	0	0	2	4	7	14	8	5	2	0	0	0	42
	12:00	3	0	0	0	1	3	11	29	9	3	1	0	0	0	60
	12:15	1	0	0	0	1	6	12	17	20	5	0	0	0	0	62
	12:30	8	0	0	0	4	15	38	80	48	15	3	0	0	0	211
	12:45	2	0	1	0	1	4	9	16	12	6	1	0	1	1	54
	13:00	3	0	1	1	0	3	12	15	13	2	0	0	0	0	50
	13:15	2	0	0	0	0	5	10	20	12	2	0	1	0	0	52
	13:30	3	0	0	0	1	4	14	27	11	2	0	0	0	0	62
	13:45	10	0	2	1	2	16	45	78	48	12	1	1	1	1	218
	Total	47	0	3	3	16	80	250	485	430	207	39	5	1	1	1567

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 2  
Station ID: 2  
BLUE JAY RD W.O McCALL RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

WB

Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
12 PM	0	0	0	0	3	1	8	27	11	7	0	0	0	0	57
12:15	3	0	0	0	0	4	17	22	15	5	0	0	0	0	66
12:30	1	0	0	0	3	4	17	24	9	2	1	0	0	0	61
12:45	1	0	0	0	0	5	15	15	14	3	0	0	0	0	53
	5	0	0	0	6	14	57	88	49	17	1	0	0	0	237
13:00	5	0	0	1	2	9	22	20	7	1	0	0	0	0	67
13:15	1	0	1	1	0	4	14	21	9	4	3	0	0	0	58
13:30	5	0	0	0	0	3	16	34	29	4	0	0	0	0	91
13:45	6	0	0	0	1	4	15	19	18	3	0	0	0	0	66
	17	0	1	2	3	20	67	94	63	12	3	0	0	0	282
14:00	10	0	0	0	0	6	12	21	8	0	0	0	0	0	57
14:15	5	0	0	0	0	9	15	22	13	3	1	0	0	0	68
14:30	26	0	0	0	1	10	14	23	12	11	0	0	0	0	97
14:45	28	0	0	0	0	2	31	25	7	4	0	0	0	0	97
	69	0	0	0	1	27	72	91	40	18	1	0	0	0	319
15:00	17	0	0	0	3	2	24	26	3	1	0	0	0	0	76
15:15	21	0	0	0	4	2	23	19	7	0	0	0	0	0	76
15:30	30	0	0	0	1	3	17	22	8	3	0	0	0	0	84
15:45	26	0	0	0	3	9	15	21	7	4	0	0	0	0	85
	94	0	0	0	11	16	79	88	25	8	0	0	0	0	321
16:00	18	0	0	0	0	5	25	31	17	7	0	0	0	0	103
16:15	12	0	0	0	0	2	15	41	22	5	0	0	0	0	97
16:30	12	0	0	0	1	4	12	32	21	4	2	0	0	0	88
16:45	6	0	0	0	0	3	10	48	17	2	0	0	0	0	86
	48	0	0	0	1	14	62	152	77	18	2	0	0	0	374
17:00	3	0	0	0	0	5	25	34	26	6	0	0	1	0	100
17:15	5	0	0	0	0	2	12	42	33	13	5	0	0	0	112
17:30	2	0	0	0	0	3	18	32	18	9	2	0	0	0	84
17:45	2	0	0	0	1	5	22	34	23	3	0	0	0	0	90
	12	0	0	0	1	15	77	142	100	31	7	0	1	0	386
18:00	2	0	0	0	2	7	14	18	17	7	0	0	0	0	67
18:15	2	0	0	0	0	6	10	26	16	5	0	0	0	0	65
18:30	2	0	0	1	2	6	17	26	4	5	0	0	0	0	63
18:45	2	0	0	0	0	7	21	20	15	4	1	0	0	0	70
	8	0	0	1	4	26	62	90	52	21	1	0	0	0	265
19:00	1	0	0	0	1	4	18	13	16	1	0	0	0	0	54
19:15	0	0	0	0	0	3	10	23	13	4	1	0	0	0	54
19:30	3	0	0	0	0	2	8	18	9	4	1	0	0	0	45
19:45	1	0	6	6	5	3	15	12	4	4	0	0	0	0	56
	5	0	6	6	6	12	51	66	42	13	2	0	0	0	209
20:00	0	0	0	0	0	1	12	13	15	3	1	0	0	0	45
20:15	1	0	0	0	1	5	12	17	10	2	0	0	0	0	48
20:30	0	0	0	0	0	2	7	12	11	5	3	0	0	0	40
20:45	0	0	0	0	0	0	6	14	6	3	1	0	0	0	30
	1	0	0	0	1	8	37	56	42	13	5	0	0	0	163
21:00	1	0	0	0	0	1	10	10	6	0	1	0	0	0	29
21:15	0	0	0	0	4	1	2	10	5	1	0	0	0	0	23
21:30	0	0	0	0	1	0	4	3	2	2	0	0	0	0	12
21:45	0	0	0	0	0	0	0	6	1	2	0	0	0	0	9
	1	0	0	0	5	2	16	29	14	5	1	0	0	0	73
22:00	0	0	0	0	1	2	3	7	7	0	0	0	0	0	20
22:15	0	0	0	0	0	1	6	3	4	1	0	1	0	0	16
22:30	0	0	0	0	1	0	6	5	0	0	0	0	0	0	12
22:45	0	0	0	0	1	0	4	4	3	1	0	0	0	0	13
	0	0	0	0	3	3	19	19	14	2	0	1	0	0	61
23:00	0	0	0	0	0	1	2	3	0	1	0	0	0	0	7
23:15	0	0	0	0	0	0	0	1	0	0	0	1	0	0	2
23:30	0	0	0	0	0	1	1	0	1	0	0	0	0	0	3
23:45	0	0	0	0	0	0	1	2	3	0	0	0	0	0	6
	0	0	0	0	0	2	4	6	4	1	0	1	0	0	18
Total	260	0	7	9	42	159	603	921	522	159	23	2	1	0	2708
Grand Total	307	0	10	12	58	239	853	1406	952	366	62	7	2	1	4275

15th Percentile : 40 MPH  
50th Percentile : 47 MPH  
85th Percentile : 53 MPH  
95th Percentile : 58 MPH

Stats Mean Speed(Average) : 45 MPH  
10 MPH Pace Speed : 46-55 MPH  
Number in Pace : 2358

Percent in Pace :	55.2%
Number of Vehicles > 55 MPH :	438
Percent of Vehicles > 55 MPH :	10.2%

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 3  
Station ID: 3  
BLUE JAY RD E.O McCALL RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

EB

Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
03/09/22	0	0	0	0	1	0	1	1	0	0	0	0	0	0	3
00:15	0	0	0	1	2	2	1	0	0	0	0	0	0	0	6
00:30	0	0	0	1	2	3	0	0	0	0	0	0	0	0	6
00:45	0	0	0	1	0	4	2	0	0	0	0	0	0	0	7
01:00	0	0	0	3	5	9	4	1	0	0	0	0	0	0	22
01:15	0	0	0	0	0	1	1	0	0	0	0	0	0	0	2
01:30	0	0	0	0	1	2	0	0	0	0	0	0	0	0	3
01:45	0	0	0	0	0	2	0	0	0	0	0	0	0	0	2
02:00	0	0	0	0	3	1	0	0	0	0	0	0	0	0	4
02:15	0	0	0	0	4	6	1	0	0	0	0	0	0	0	11
02:30	0	0	0	1	1	0	0	0	0	0	0	0	0	0	2
02:45	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
03:00	0	0	0	0	0	1	1	1	0	0	0	0	0	0	3
03:15	0	0	0	1	4	1	1	1	0	0	0	0	0	0	8
03:30	0	0	0	0	0	2	1	3	0	0	0	0	0	0	6
03:45	0	0	0	0	2	1	0	1	0	0	0	0	0	0	5
04:00	0	0	0	0	0	8	0	0	0	0	0	0	0	0	8
04:15	0	0	0	1	4	10	5	1	1	0	0	0	0	0	22
04:30	0	0	0	0	2	5	8	1	0	0	0	0	0	0	16
04:45	0	0	0	0	4	18	8	4	0	0	0	0	0	0	34
05:00	0	0	0	0	4	14	13	3	0	0	0	0	0	0	34
05:15	0	0	0	0	6	14	8	1	0	0	0	0	0	0	29
05:30	0	0	0	0	16	51	37	9	0	0	0	0	0	0	113
05:45	0	0	2	1	12	12	7	0	0	0	0	0	0	0	34
06:00	0	0	1	1	13	33	8	0	0	0	0	0	0	0	56
06:15	0	0	1	1	11	31	19	3	0	0	0	0	0	0	66
06:30	0	0	0	2	12	29	17	4	0	0	0	0	0	0	64
06:45	0	0	4	5	48	105	51	7	0	0	0	0	0	0	220
07:00	2	0	0	1	19	34	15	0	3	0	0	0	0	0	74
07:15	0	0	0	4	17	34	8	0	0	0	0	0	0	0	63
07:30	0	0	0	1	28	49	13	4	0	0	0	0	0	0	95
07:45	4	3	8	13	27	41	4	0	0	0	0	0	0	0	100
08:00	6	3	8	19	91	158	40	4	3	0	0	0	0	0	332
08:15	6	0	0	0	29	45	12	1	0	0	0	0	0	0	93
08:30	4	0	1	6	35	55	12	2	0	0	0	0	0	0	115
08:45	11	0	4	15	52	24	7	0	0	0	0	0	0	0	113
09:00	8	2	4	22	38	27	5	3	0	0	0	0	0	0	109
09:15	29	2	9	43	154	151	36	6	0	0	0	0	0	0	430
09:30	2	0	0	4	33	57	3	0	0	0	0	0	0	0	99
09:45	0	0	0	1	31	45	6	0	0	0	0	0	0	0	83
10:00	4	0	3	12	42	58	6	1	1	0	0	0	0	0	127
10:15	6	3	3	11	35	34	6	1	0	0	0	0	0	0	99
10:30	12	3	6	28	141	194	21	2	1	0	0	0	0	0	408
10:45	2	2	1	2	26	33	6	0	0	0	0	0	0	0	72
11:00	3	0	0	10	49	23	8	0	0	0	0	0	0	0	93
11:15	3	0	0	6	26	25	3	1	0	0	0	0	0	0	64
11:30	5	0	11	19	34	31	6	0	0	0	0	0	0	0	106
11:45	13	2	12	37	135	112	23	1	0	0	0	0	0	0	335
12:00	0	0	4	6	23	34	8	1	0	0	0	0	0	0	76
12:15	6	0	0	4	34	22	17	2	0	0	0	0	0	0	85
12:30	3	0	0	10	40	24	8	0	0	0	0	0	0	0	85
12:45	3	0	4	11	34	21	4	1	0	0	0	0	0	0	78
13:00	12	0	8	31	131	101	37	4	0	0	0	0	0	0	324
13:15	3	0	0	3	24	22	8	0	0	0	0	0	0	0	60
13:30	2	0	0	2	29	34	8	0	0	0	0	0	0	0	75
13:45	4	0	1	4	24	34	10	0	0	0	0	0	0	0	77
14:00	2	0	5	15	22	21	6	0	0	0	0	0	0	0	71
14:15	11	0	6	24	99	111	32	0	0	0	0	0	0	0	283
Total	83	10	53	192	832	1009	288	36	5	0	0	0	0	0	2508



# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 3  
Station ID: 3  
BLUE JAY RD E.O McCALL RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

EB

Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
12 PM	4	0	1	14	16	17	9	0	0	0	0	0	0	0	61
12:15	2	0	0	8	40	23	10	0	0	0	0	0	0	0	83
12:30	5	0	0	5	25	33	5	1	0	0	0	0	0	0	74
12:45	5	0	1	16	41	20	3	2	0	0	0	0	0	0	88
	16	0	2	43	122	93	27	3	0	0	0	0	0	0	306
13:00	3	0	0	8	18	27	16	0	0	0	0	0	0	0	72
13:15	3	0	1	7	20	23	3	1	0	0	0	0	0	0	58
13:30	3	0	0	9	24	34	5	2	0	0	0	0	0	0	77
13:45	7	0	6	18	16	21	7	0	0	0	0	0	0	0	75
	16	0	7	42	78	105	31	3	0	0	0	0	0	0	282
14:00	0	0	0	7	27	22	7	0	1	0	0	0	0	0	64
14:15	2	0	3	14	37	26	5	0	0	0	0	0	0	0	87
14:30	4	0	5	7	11	30	3	2	0	0	0	0	0	0	62
14:45	6	0	2	14	23	19	5	0	0	1	0	0	0	0	70
	12	0	10	42	98	97	20	2	1	1	0	0	0	0	283
15:00	5	0	0	1	26	37	10	0	0	0	0	0	0	0	79
15:15	3	0	0	0	23	30	12	1	0	0	0	0	0	0	69
15:30	6	0	1	6	28	27	9	2	0	0	0	0	0	0	79
15:45	16	4	7	9	20	18	4	1	0	0	0	0	0	0	79
	30	4	8	16	97	112	35	4	0	0	0	0	0	0	306
16:00	5	0	2	13	31	37	11	1	1	0	0	0	0	0	101
16:15	8	0	0	18	21	48	11	0	0	0	0	0	0	0	106
16:30	11	0	4	18	38	32	6	4	1	0	0	0	0	0	114
16:45	11	0	0	2	28	49	17	2	0	0	0	0	0	0	109
	35	0	6	51	118	166	45	7	2	0	0	0	0	0	430
17:00	10	0	2	8	37	44	24	1	0	0	0	0	0	0	126
17:15	13	0	0	3	18	35	14	4	0	0	0	0	0	0	87
17:30	5	0	0	6	29	42	14	3	0	0	0	0	0	0	99
17:45	6	0	0	5	20	42	14	0	0	0	0	0	0	0	87
	34	0	2	22	104	163	66	8	0	0	0	0	0	0	399
18:00	5	0	0	9	35	36	8	1	0	0	0	0	0	0	94
18:15	5	0	3	11	40	37	7	2	0	0	0	0	0	0	105
18:30	5	0	8	22	28	32	4	0	0	0	0	0	0	0	99
18:45	3	0	0	15	23	26	7	1	0	0	0	0	0	0	75
	18	0	11	57	126	131	26	4	0	0	0	0	0	0	373
19:00	3	0	0	4	18	27	4	2	0	0	0	0	0	0	58
19:15	3	0	0	9	10	19	5	0	0	0	0	0	0	0	46
19:30	1	0	0	2	4	19	6	0	0	0	0	0	0	0	32
19:45	2	0	0	2	9	9	5	1	0	0	0	0	0	0	28
	9	0	0	17	41	74	20	3	0	0	0	0	0	0	164
20:00	1	0	0	0	13	18	5	0	1	0	0	0	0	0	38
20:15	0	0	0	0	5	10	1	2	0	0	0	0	0	0	18
20:30	0	0	0	0	6	9	4	1	0	0	0	0	0	0	20
20:45	0	0	0	0	9	12	2	3	0	0	0	0	0	0	26
	1	0	0	0	33	49	12	6	1	0	0	0	0	0	102
21:00	0	0	0	1	3	12	5	0	0	0	0	0	0	0	21
21:15	1	0	0	0	5	7	3	0	0	0	0	0	0	0	16
21:30	0	0	0	0	7	8	4	1	0	0	0	0	0	0	20
21:45	0	0	0	0	4	7	4	0	0	0	0	0	0	0	15
	1	0	0	1	19	34	16	1	0	0	0	0	0	0	72
22:00	0	0	0	2	4	6	3	1	0	0	0	0	0	0	16
22:15	0	0	0	0	3	4	5	0	0	0	0	0	0	0	12
22:30	0	0	0	0	2	5	0	0	0	0	0	0	0	0	7
22:45	1	0	0	0	1	6	0	0	0	0	0	0	0	0	8
	1	0	0	2	10	21	8	1	0	0	0	0	0	0	43
23:00	0	0	0	2	2	2	2	0	0	0	0	0	0	0	8
23:15	0	0	0	0	3	3	1	0	0	0	0	0	0	0	7
23:30	0	0	0	1	1	1	1	0	0	0	0	0	0	0	4
23:45	0	0	0	0	2	0	0	0	0	0	0	0	0	0	2
	0	0	0	3	8	6	4	0	0	0	0	0	0	0	21
Total	173	4	46	296	854	1051	310	42	4	1	0	0	0	0	2781
Grand Total	256	14	99	488	1686	2060	598	78	9	1	0	0	0	0	5289

15th Percentile : 29 MPH  
50th Percentile : 35 MPH  
85th Percentile : 39 MPH  
95th Percentile : 43 MPH

Stats Mean Speed(Average) : 34 MPH  
10 MPH Pace Speed : 31-40 MPH  
Number in Pace : 3746

Percent in Pace :	70.8%
Number of Vehicles > 55 MPH :	1
Percent of Vehicles > 55 MPH :	0.0%

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 3  
Station ID: 3  
BLUE JAY RD E.O McCALL RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

WB

Start Time	15	20	25	30	35	40	45	50	55	60	65	70	75	999	Total
03/09/22	0	0	0	1	0	0	3	0	0	0	0	0	0	0	4
00:15	0	0	0	0	1	4	1	0	0	0	0	0	0	0	6
00:30	0	0	0	0	2	2	0	0	0	0	0	0	0	0	4
00:45	0	0	0	0	4	2	0	1	0	0	0	0	0	0	7
01:00	0	0	0	1	7	8	4	1	0	0	0	0	0	0	21
01:15	0	0	0	0	2	1	0	0	0	0	0	0	0	0	3
01:30	0	0	0	1	3	2	0	0	0	0	0	0	0	0	6
01:45	0	0	0	0	2	0	2	0	0	0	0	0	0	0	4
02:00	0	0	1	1	7	5	2	0	0	0	0	0	0	0	16
02:15	0	0	1	1	0	2	0	0	0	0	0	0	0	0	4
02:30	0	0	0	0	1	1	1	0	0	0	0	0	0	0	3
02:45	0	0	0	0	2	0	1	0	0	0	0	0	0	0	2
03:00	0	0	1	2	3	4	2	0	0	0	0	0	0	0	3
03:15	0	0	0	0	3	6	1	0	0	0	0	0	0	0	10
03:30	0	0	0	0	0	3	0	0	0	0	0	0	0	0	3
03:45	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
04:00	0	0	0	0	1	1	1	0	0	0	0	0	0	0	3
04:15	0	0	0	0	4	10	3	0	0	0	0	0	0	0	3
04:30	0	0	0	0	1	1	3	0	0	0	0	0	0	0	17
04:45	0	0	0	0	0	4	1	1	0	0	0	0	0	0	5
05:00	0	0	0	0	1	10	6	2	0	0	0	0	0	0	6
05:15	0	0	0	1	0	8	0	0	0	0	0	0	0	0	2
05:30	0	0	0	0	1	6	3	1	0	0	0	0	0	0	6
05:45	0	0	0	0	0	5	3	1	0	0	0	0	0	0	9
06:00	0	0	0	1	2	4	1	1	0	0	0	0	0	0	7
06:15	0	0	0	1	23	7	3	0	0	0	0	0	0	0	36
06:30	1	0	0	1	3	5	3	2	0	0	0	0	0	0	14
06:45	2	0	1	8	10	11	2	0	0	0	0	0	0	0	24
07:00	3	0	0	2	19	39	14	0	0	0	0	0	0	0	60
07:15	6	0	1	11	48	74	28	6	1	0	0	0	0	0	77
07:30	2	0	0	2	14	38	19	1	0	0	0	0	0	0	175
07:45	5	3	9	18	23	33	18	2	0	0	0	0	0	0	76
08:00	16	4	8	18	27	23	5	1	0	0	0	0	0	0	111
08:15	4	0	0	4	24	34	14	2	0	0	0	0	0	0	102
08:30	27	7	17	42	88	128	56	6	0	0	0	0	0	0	82
08:45	1	0	1	7	17	24	11	0	0	0	0	0	0	0	371
09:00	2	0	0	8	14	23	7	1	0	0	0	0	0	0	61
09:15	6	3	0	5	12	13	8	2	0	0	0	0	0	0	55
09:30	2	0	2	6	16	15	4	0	0	0	0	0	0	0	49
09:45	11	3	3	26	59	75	30	3	0	0	0	0	0	0	45
10:00	3	0	2	1	19	20	5	2	0	0	0	0	0	0	210
10:15	2	0	2	5	22	18	5	1	0	0	0	0	0	0	52
10:30	0	0	5	2	17	26	3	1	0	0	0	0	0	0	55
10:45	1	1	1	5	12	15	4	2	0	0	0	0	0	0	54
11:00	6	1	10	13	70	79	17	6	0	0	0	0	0	0	41
11:15	1	0	0	5	18	28	10	0	0	0	0	0	0	0	202
11:30	3	0	0	0	17	21	4	0	0	0	0	0	0	0	62
11:45	2	0	0	4	22	33	7	2	0	0	0	0	0	0	45
Total	3	0	1	27	112	95	17	3	0	1	0	0	0	0	70
Total	60	11	35	140	481	625	202	32	1	1	0	0	0	0	73
Total	7	0	1	16	80	114	30	2	0	0	0	0	0	0	250
Total	1	0	1	10	33	29	4	1	0	1	0	0	0	0	80
Total	0	0	0	13	21	14	3	1	0	0	0	0	0	0	52
Total	0	0	0	1	20	29	6	0	0	0	0	0	0	0	56
Total	2	0	0	3	38	23	4	1	0	0	0	0	0	0	71
Total	3	0	1	27	112	95	17	3	0	1	0	0	0	0	259

# All Traffic Data Services

[www.alltrafficdata.net](http://www.alltrafficdata.net)

Site Code: 3  
Station ID: 3  
BLUE JAY RD E.O McCALL RD

Latitude: 0' 0.0000 Undefined  
Longitude: 0' 0.0000 Undefined

WB	Start Time	15	16:20	21:25	26:30	31:35	36:40	41:45	46:50	51:55	56:60	61:65	66:70	71:75	76:999	Total
	12 PM	1	0	0	11	21	24	10	0	0	0	0	0	0	0	67
	12:15	3	0	0	5	26	39	7	1	0	0	0	0	0	0	81
	12:30	1	0	0	3	25	28	10	1	0	0	0	0	0	0	68
	12:45	4	0	0	3	29	22	7	0	0	0	0	0	0	0	65
		9	0	0	22	101	113	34	2	0	0	0	0	0	0	281
	13:00	4	0	0	6	42	29	1	0	0	0	0	0	0	0	82
	13:15	3	0	0	8	29	28	6	1	0	0	0	0	0	0	75
	13:30	2	0	3	10	43	54	12	0	0	0	0	0	0	0	124
	13:45	5	0	4	11	38	24	7	0	0	0	0	0	0	0	89
		14	0	7	35	152	135	26	1	0	0	0	0	0	0	370
	14:00	0	0	0	5	33	27	5	2	0	0	0	0	0	0	72
	14:15	2	0	0	18	41	31	6	1	0	0	0	0	0	0	99
	14:30	2	0	1	16	44	33	15	1	0	0	0	0	0	0	112
	14:45	4	0	3	25	49	38	7	1	0	0	0	0	0	0	127
		8	0	4	64	167	129	33	5	0	0	0	0	0	0	410
	15:00	6	0	0	7	34	48	8	3	0	0	0	0	0	0	106
	15:15	1	0	0	9	41	45	9	0	0	0	0	0	0	0	105
	15:30	2	0	1	2	43	40	9	2	0	0	0	0	0	0	99
	15:45	7	0	2	17	22	33	7	1	0	0	0	0	0	0	89
		16	0	3	35	140	166	33	6	0	0	0	0	0	0	399
	16:00	5	0	1	11	39	55	11	2	0	0	0	0	0	0	124
	16:15	2	0	0	8	32	58	19	0	0	0	0	0	0	0	119
	16:30	4	0	2	19	52	35	9	2	0	0	0	0	0	0	123
	16:45	5	0	0	4	37	45	21	1	0	0	0	0	0	0	113
		16	0	3	42	160	193	60	5	0	0	0	0	0	0	479
	17:00	4	0	1	14	45	40	9	2	0	0	0	0	0	0	115
	17:15	7	0	0	10	43	82	15	0	0	0	0	0	0	0	157
	17:30	0	0	1	2	47	66	13	0	0	0	0	0	0	0	129
	17:45	7	0	0	3	28	52	9	2	0	0	0	0	0	0	101
		18	0	2	29	163	240	46	4	0	0	0	0	0	0	502
	18:00	5	0	1	7	36	47	12	0	1	0	0	0	0	0	109
	18:15	6	0	0	3	30	47	7	3	0	0	0	0	0	0	96
	18:30	5	0	1	7	47	18	4	1	0	0	0	0	0	0	83
	18:45	1	0	1	26	38	28	7	0	0	0	0	0	0	0	101
		17	0	3	43	151	140	30	4	1	0	0	0	0	0	389
	19:00	3	0	0	2	23	42	7	0	0	0	0	0	0	0	77
	19:15	1	0	0	4	27	28	3	1	0	0	0	0	0	0	64
	19:30	1	0	0	4	25	36	4	1	0	0	0	0	0	0	71
	19:45	1	0	0	5	16	40	13	1	0	0	0	0	0	0	76
		6	0	0	15	91	146	27	3	0	0	0	0	0	0	288
	20:00	1	0	0	3	25	29	8	1	0	0	0	0	0	0	67
	20:15	0	0	0	6	21	34	4	0	0	0	0	0	0	0	65
	20:30	0	0	0	2	18	27	8	2	0	0	0	0	0	0	57
	20:45	0	0	0	1	14	19	7	2	0	0	0	0	0	0	43
		1	0	0	12	78	109	27	5	0	0	0	0	0	0	232
	21:00	0	0	0	3	10	23	5	0	0	0	0	0	0	0	41
	21:15	0	0	1	2	10	19	5	0	0	0	0	0	0	0	37
	21:30	1	0	0	0	8	14	2	0	0	0	0	0	0	0	25
	21:45	0	0	0	5	3	5	2	0	0	0	0	0	0	0	15
		1	0	1	10	31	61	14	0	0	0	0	0	0	0	118
	22:00	0	0	0	0	10	17	2	0	0	0	0	0	0	0	29
	22:15	0	0	0	1	15	11	2	1	0	0	0	0	0	0	30
	22:30	0	0	0	2	5	5	1	1	0	0	0	0	0	0	14
	22:45	1	0	0	4	7	7	4	0	0	0	0	0	0	0	23
		1	0	0	7	37	40	9	2	0	0	0	0	0	0	96
	23:00	0	0	0	3	5	4	1	1	0	0	0	0	0	0	14
	23:15	0	0	0	0	3	7	1	1	0	0	0	0	0	0	12
	23:30	0	0	0	0	2	2	2	0	0	0	0	0	0	0	6
	23:45	0	0	0	1	4	1	1	0	0	0	0	0	0	0	7
		0	0	0	4	14	14	5	2	0	0	0	0	0	0	39
	Total	107	0	23	318	1285	1486	344	39	1	0	0	0	0	0	3603
	Grand Total	167	11	58	458	1766	2111	546	71	2	1	0	0	0	0	5191

15th Percentile : 30 MPH  
50th Percentile : 35 MPH  
85th Percentile : 39 MPH  
95th Percentile : 43 MPH

Stats  
Mean Speed(Average) : 35 MPH  
10 MPH Pace Speed : 31-40 MPH  
Number in Pace : 3877

Percent in Pace :	74.7%
Number of Vehicles > 55 MPH :	1
Percent of Vehicles > 55 MPH :	0.0%

# Appendix D



---

## Capacity Analysis Reports, Existing Conditions

Intersection						
Int Delay, s/veh	23.7					
Movement	WBL	WBR	NBT	NBR	SBL	SBT
Lane Configurations	↘	↗	↑	↗	↘	↑
Traffic Vol, veh/h	263	112	135	281	159	104
Future Vol, veh/h	263	112	135	281	159	104
Conflicting Peds, #/hr	0	0	0	0	0	0
Sign Control	Stop	Stop	Free	Free	Free	Free
RT Channelized	-	Yield	-	Yield	-	None
Storage Length	170	0	-	200	250	-
Veh in Median Storage, #	0	-	0	-	-	0
Grade, %	0	-	0	-	-	0
Peak Hour Factor	70	70	88	88	87	87
Heavy Vehicles, %	2	4	7	2	3	1
Mvmt Flow	376	160	153	319	183	120

Major/Minor	Minor1	Major1	Major2			
Conflicting Flow All	639	153	0	0	153	0
Stage 1	153	-	-	-	-	-
Stage 2	486	-	-	-	-	-
Critical Hdwy	6.42	6.24	-	-	4.13	-
Critical Hdwy Stg 1	5.42	-	-	-	-	-
Critical Hdwy Stg 2	5.42	-	-	-	-	-
Follow-up Hdwy	3.518	3.336	-	-	2.227	-
Pot Cap-1 Maneuver	440	888	-	-	1421	-
Stage 1	875	-	-	-	-	-
Stage 2	618	-	-	-	-	-
Platoon blocked, %			-	-		-
Mov Cap-1 Maneuver	383	888	-	-	1421	-
Mov Cap-2 Maneuver	383	-	-	-	-	-
Stage 1	875	-	-	-	-	-
Stage 2	538	-	-	-	-	-

Approach	WB	NB	SB
HCM Control Delay, s	55.3	0	4.8
HCM LOS	F		

Minor Lane/Major Mvmt	NBT	NBR	WBLn1	WBLn2	SBL	SBT
Capacity (veh/h)	-	-	383	888	1421	-
HCM Lane V/C Ratio	-	-	0.981	0.18	0.129	-
HCM Control Delay (s)	-	-	74.7	9.9	7.9	-
HCM Lane LOS	-	-	F	A	A	-
HCM 95th %tile Q(veh)	-	-	11.4	0.7	0.4	-

Intersection						
Int Delay, s/veh	12					
Movement	WBL	WBR	NBT	NBR	SBL	SBT
Lane Configurations	↙	↗	↑	↗	↙	↑
Traffic Vol, veh/h	286	227	129	296	157	110
Future Vol, veh/h	286	227	129	296	157	110
Conflicting Peds, #/hr	0	0	0	0	0	0
Sign Control	Stop	Stop	Free	Free	Free	Free
RT Channelized	-	Yield	-	Yield	-	None
Storage Length	170	0	-	200	250	-
Veh in Median Storage, #	0	-	0	-	-	0
Grade, %	0	-	0	-	-	0
Peak Hour Factor	94	94	90	90	88	88
Heavy Vehicles, %	2	1	1	3	3	8
Mvmt Flow	304	241	143	329	178	125

Major/Minor	Minor1	Major1	Major2		
Conflicting Flow All	624	143	0	0	143
Stage 1	143	-	-	-	-
Stage 2	481	-	-	-	-
Critical Hdwy	6.42	6.21	-	-	4.13
Critical Hdwy Stg 1	5.42	-	-	-	-
Critical Hdwy Stg 2	5.42	-	-	-	-
Follow-up Hdwy	3.518	3.309	-	-	2.227
Pot Cap-1 Maneuver	449	907	-	-	1434
Stage 1	884	-	-	-	-
Stage 2	622	-	-	-	-
Platoon blocked, %			-	-	-
Mov Cap-1 Maneuver	393	907	-	-	1434
Mov Cap-2 Maneuver	393	-	-	-	-
Stage 1	884	-	-	-	-
Stage 2	545	-	-	-	-

Approach	WB	NB	SB
HCM Control Delay, s	26.5	0	4.6
HCM LOS	D		

Minor Lane/Major Mvmt	NBT	NBR	WBLn1	WBLn2	SBL	SBT
Capacity (veh/h)	-	-	393	907	1434	-
HCM Lane V/C Ratio	-	-	0.774	0.266	0.124	-
HCM Control Delay (s)	-	-	39.3	10.4	7.9	-
HCM Lane LOS	-	-	E	B	A	-
HCM 95th %tile Q(veh)	-	-	6.5	1.1	0.4	-



# Appendix E



---

## Capacity Analysis Reports, All-Way Stop Control

Intersection	
Intersection Delay, s/veh	18
Intersection LOS	C

Movement	WBL	WBR	NBT	NBR	SBL	SBT
Lane Configurations	↘	↗	↑	↗	↘	↑
Traffic Vol, veh/h	263	112	135	281	159	104
Future Vol, veh/h	263	112	135	281	159	104
Peak Hour Factor	0.70	0.70	0.88	0.88	0.87	0.87
Heavy Vehicles, %	2	4	7	2	3	1
Mvmt Flow	376	160	153	319	183	120
Number of Lanes	1	1	1	1	1	1

Approach	WB	NB	SB
Opposing Approach		SB	NB
Opposing Lanes	0	2	2
Conflicting Approach Left	NB		WB
Conflicting Lanes Left	2	0	2
Conflicting Approach Right	SB	WB	
Conflicting Lanes Right	2	2	0
HCM Control Delay	23.3	14.8	13.8
HCM LOS	C	B	B

Lane	NBLn1	NBLn2	WBLn1	WBLn2	SBLn1	SBLn2
Vol Left, %	0%	0%	100%	0%	100%	0%
Vol Thru, %	100%	0%	0%	0%	0%	100%
Vol Right, %	0%	100%	0%	100%	0%	0%
Sign Control	Stop	Stop	Stop	Stop	Stop	Stop
Traffic Vol by Lane	135	281	263	112	159	104
LT Vol	0	0	263	0	159	0
Through Vol	135	0	0	0	0	104
RT Vol	0	281	0	112	0	0
Lane Flow Rate	153	319	376	160	183	120
Geometry Grp	7	7	7	7	7	7
Degree of Util (X)	0.294	0.541	0.75	0.267	0.383	0.232
Departure Headway (Hd)	6.905	6.102	7.187	6.005	7.538	6.99
Convergence, Y/N	Yes	Yes	Yes	Yes	Yes	Yes
Cap	517	588	503	595	475	510
Service Time	4.687	3.884	4.953	3.77	5.327	4.779
HCM Lane V/C Ratio	0.296	0.543	0.748	0.269	0.385	0.235
HCM Control Delay	12.6	15.9	28.6	11	15	11.9
HCM Lane LOS	B	C	D	B	B	B
HCM 95th-tile Q	1.2	3.2	6.4	1.1	1.8	0.9

Intersection	
Intersection Delay, s/veh	15.4
Intersection LOS	C

Movement	WBL	WBR	NBT	NBR	SBL	SBT
Lane Configurations	↗	↗	↖	↖	↘	↘
Traffic Vol, veh/h	286	227	129	296	157	110
Future Vol, veh/h	286	227	129	296	157	110
Peak Hour Factor	0.94	0.94	0.90	0.90	0.88	0.88
Heavy Vehicles, %	2	1	1	3	3	8
Mvmt Flow	304	241	143	329	178	125
Number of Lanes	1	1	1	1	1	1

Approach	WB	NB	SB
Opposing Approach		SB	NB
Opposing Lanes	0	2	2
Conflicting Approach Left	NB		WB
Conflicting Lanes Left	2	0	2
Conflicting Approach Right	SB	WB	
Conflicting Lanes Right	2	2	0
HCM Control Delay	16.9	14.8	13.5
HCM LOS	C	B	B

Lane	NBLn1	NBLn2	WBLn1	WBLn2	SBLn1	SBLn2
Vol Left, %	0%	0%	100%	0%	100%	0%
Vol Thru, %	100%	0%	0%	0%	0%	100%
Vol Right, %	0%	100%	0%	100%	0%	0%
Sign Control	Stop	Stop	Stop	Stop	Stop	Stop
Traffic Vol by Lane	129	296	286	227	157	110
LT Vol	0	0	286	0	157	0
Through Vol	129	0	0	0	0	110
RT Vol	0	296	0	227	0	0
Lane Flow Rate	143	329	304	241	178	125
Geometry Grp	7	7	7	7	7	7
Degree of Util (X)	0.267	0.551	0.606	0.398	0.368	0.243
Departure Headway (Hd)	6.708	6.028	7.169	5.935	7.431	7.006
Convergence, Y/N	Yes	Yes	Yes	Yes	Yes	Yes
Cap	533	595	502	604	482	510
Service Time	4.479	3.798	4.932	3.698	5.21	4.784
HCM Lane V/C Ratio	0.268	0.553	0.606	0.399	0.369	0.245
HCM Control Delay	11.9	16	20.4	12.6	14.5	12
HCM Lane LOS	B	C	C	B	B	B
HCM 95th-tile Q	1.1	3.3	4	1.9	1.7	0.9

# Appendix F















---

Capacity Analysis Reports, Signal Control

Phasings  
3: Blue Jay Rd & McCall Rd

SIGNAL CONTROL  
AM Peak Hour

						
Lane Group	WBL	WBR	NBT	NBR	SBL	SBT
Lane Configurations						
Traffic Volume (vph)	263	112	135	281	159	104
Future Volume (vph)	263	112	135	281	159	104
Satd. Flow (prot)	1770	1553	1776	1583	1752	1881
Flt Permitted	0.950				0.660	
Satd. Flow (perm)	1770	1553	1776	1583	1217	1881
Satd. Flow (RTOR)		160		319		
Confl. Peds. (#/hr)						
Confl. Bikes (#/hr)						
Peak Hour Factor	0.70	0.70	0.88	0.88	0.87	0.87
Growth Factor	100%	100%	100%	100%	100%	100%
Heavy Vehicles (%)	2%	4%	7%	2%	3%	1%
Bus Blockages (#/hr)	0	0	0	0	0	0
Parking (#/hr)						
Mid-Block Traffic (%)	0%		0%			0%
Shared Lane Traffic (%)						
Lane Group Flow (vph)	376	160	153	319	183	120
Turn Type	Prot	Perm	NA	Perm	Perm	NA
Protected Phases	8		2			6
Permitted Phases		8		2	6	
Total Split (s)	22.5	22.5	22.5	22.5	22.5	22.5
Total Lost Time (s)	4.5	4.5	4.5	4.5	4.5	4.5
Act Effct Green (s)	11.9	11.9	11.5	11.5	11.5	11.5
Actuated g/C Ratio	0.36	0.36	0.35	0.35	0.35	0.35
v/c Ratio	0.58	0.24	0.25	0.42	0.43	0.18
Control Delay	12.8	3.0	9.6	3.5	12.7	9.0
Queue Delay	0.0	0.0	0.0	0.0	0.0	0.0
Total Delay	12.8	3.0	9.6	3.5	12.7	9.0
LOS	B	A	A	A	B	A
Approach Delay	9.9		5.4			11.2
Approach LOS	A		A			B
Queue Length 50th (ft)	43	0	17	0	22	13
Queue Length 95th (ft)	87	12	52	33	67	41
Internal Link Dist (ft)	598		673			610
Turn Bay Length (ft)	170			200	250	
Base Capacity (vph)	1011	955	1014	1040	695	1074
Starvation Cap Reductn	0	0	0	0	0	0
Spillback Cap Reductn	0	0	0	0	0	0
Storage Cap Reductn	0	0	0	0	0	0
Reduced v/c Ratio	0.37	0.17	0.15	0.31	0.26	0.11

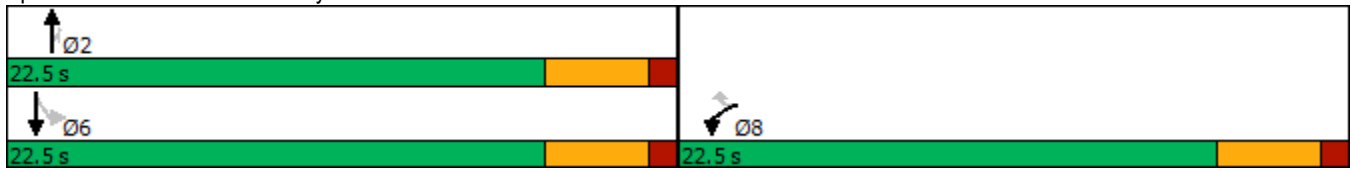
Intersection Summary

Cycle Length: 45	
Actuated Cycle Length: 32.7	
Control Type: Actuated-Uncoordinated	
Maximum v/c Ratio: 0.58	
Intersection Signal Delay: 8.6	Intersection LOS: A
Intersection Capacity Utilization 41.7%	ICU Level of Service A
Analysis Period (min) 15	

Phasings  
3: Blue Jay Rd & McCall Rd













SIGNAL CONTROL  
AM Peak Hour

Splits and Phases: 3: Blue Jay Rd & McCall Rd



Phasings  
3: Blue Jay Rd & McCall Rd

ALL-WAY STOP CONTROL  
PM Peak Hour

						
Lane Group	WBL	WBR	NBT	NBR	SBL	SBT
Lane Configurations						
Traffic Volume (vph)	286	227	129	296	157	110
Future Volume (vph)	286	227	129	296	157	110
Satd. Flow (prot)	1770	1599	1881	1568	1752	1759
Flt Permitted	0.950				0.666	
Satd. Flow (perm)	1770	1599	1881	1568	1229	1759
Satd. Flow (RTOR)		241		329		
Confl. Peds. (#/hr)						
Confl. Bikes (#/hr)						
Peak Hour Factor	0.94	0.94	0.90	0.90	0.88	0.88
Growth Factor	100%	100%	100%	100%	100%	100%
Heavy Vehicles (%)	2%	1%	1%	3%	3%	8%
Bus Blockages (#/hr)	0	0	0	0	0	0
Parking (#/hr)						
Mid-Block Traffic (%)	0%		0%			0%
Shared Lane Traffic (%)						
Lane Group Flow (vph)	304	241	143	329	178	125
Turn Type	Prot	Perm	NA	Perm	Perm	NA
Protected Phases	8		2			6
Permitted Phases		8		2	6	
Total Split (s)	22.5	22.5	22.5	22.5	22.5	22.5
Total Lost Time (s)	4.5	4.5	4.5	4.5	4.5	4.5
Act Effct Green (s)	10.7	10.7	11.0	11.0	11.0	11.0
Actuated g/C Ratio	0.34	0.34	0.35	0.35	0.35	0.35
v/c Ratio	0.50	0.34	0.21	0.43	0.41	0.20
Control Delay	11.4	3.1	8.9	3.4	11.9	8.8
Queue Delay	0.0	0.0	0.0	0.0	0.0	0.0
Total Delay	11.4	3.1	8.9	3.4	11.9	8.8
LOS	B	A	A	A	B	A
Approach Delay	7.7		5.1			10.6
Approach LOS	A		A			B
Queue Length 50th (ft)	32	0	14	0	19	12
Queue Length 95th (ft)	96	28	49	35	65	43
Internal Link Dist (ft)	598		673			610
Turn Bay Length (ft)	170			200	250	
Base Capacity (vph)	1062	1055	1128	1072	737	1055
Starvation Cap Reductn	0	0	0	0	0	0
Spillback Cap Reductn	0	0	0	0	0	0
Storage Cap Reductn	0	0	0	0	0	0
Reduced v/c Ratio	0.29	0.23	0.13	0.31	0.24	0.12

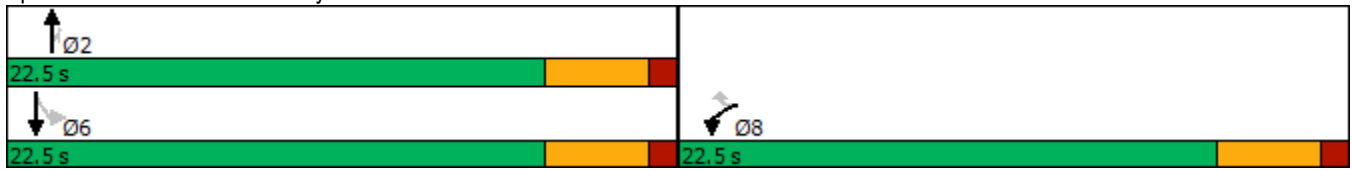
Intersection Summary

Cycle Length: 45	
Actuated Cycle Length: 31.1	
Control Type: Actuated-Uncoordinated	
Maximum v/c Ratio: 0.50	
Intersection Signal Delay: 7.4	Intersection LOS: A
Intersection Capacity Utilization 42.6%	ICU Level of Service A
Analysis Period (min) 15	

Phasings  
3: Blue Jay Rd & McCall Rd

ALL-WAY STOP CONTROL  
PM Peak Hour

Splits and Phases: 3: Blue Jay Rd & McCall Rd





# Appendix G

---



## Accident Reports

Agency Case Number		Agency NCIC Number		GEORGIA MOTOR VEHICLE CRASH REPORT				County			Date Rec. by DOT
2202-0063		GA0510000						EFFINGHAM			
Estimated Crash		Dispatch		Arrival		Total Number of		Inside City Of			
Date	Time	Date	Time	Date	Time	Vehicles	Injuries	Fatalities			
02/01/2022	08:33 AM	02/01/2022	08:35 AM	02/01/2022	08:39 AM	2	0	0			
Road of Occurrence <u>MCCALL RD</u>				At Its Intersection With <u>BLUE JAY RD</u>				<input type="checkbox"/> Corrected Report <input type="checkbox"/> Sup To Original <input type="checkbox"/> Hit and Run			
Not At Its Intersection Rpt _____				Of _____							
<input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West											
Latitude (Y) <u>32.2772866534203</u>				Longitude (X) <u>-81.2671136856079</u>							
(Format) 00.00000				(Format) -00.00000							
Unit #	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME	FIRST NAME	MIDDLE NAME	Unit #	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME	FIRST NAME	MIDDLE NAME		
1		HUMPHRIES	MICHAEL	A	2		EDENFIELD	TAYLOR	ANN		
Address <u>107 MOREKIS DR</u>					Address <u>137 SALT CREEK RD</u>						
<input type="checkbox"/> Susp At Fault					<input type="checkbox"/> Susp At Fault						
City	State	Zip	DOB		City	State	Zip	DOB			
SAVANNAH	GA	31406	01/26/1994		GARDEN CITY	GA	31405	06/06/2003			
Driver's License No.	Class	State	Country		Driver's License No.	Class	State	Country			
058904105	C	GA	US		061125088	D	GA	US			
Insurance Co.	Policy No.	Telephone No.		Insurance Co.	Policy No.	Telephone No.					
ROOT INSURANCE	TGQMZJ	8087584254		PROGRESSIVE	25140573	9124382689					
Year	Make	Model		Year	Make	Model					
2008	TOYOTA	SCION TC		2010	NISSAN	VERSA					
VIN	Vehicle Color			VIN	Vehicle Color						
JTKDE167780223492	BLUE			3N1BC1AP2AL383514	RED						
Tag #	State	County	Year	Tag #	State	County	Year				
RWB4681	GA	EFFINGHAM	2022	TAU4037	GA	CHATHAM	2022				
Trailer Tag #	State	County	Year	Trailer Tag #	State	County	Year				
<input type="checkbox"/> Same as Driver	Owner Last Name	First	Middle	<input checked="" type="checkbox"/> Same as Driver	Owner Last Name	First	Middle				
	NUNEZ NARANJO	MARIA	GUADALUPE		EDENFIELD	TAYLOR	ANN				
Address <u>11910 WHITE BLUFF RD APT N6</u>				Address <u>137 SALT CREEK RD</u>							
City	State	Zip		City	State	Zip					
SAVANNAH	GA	31419-153		GARDEN CITY	GA	31405					
Removed By: <u>SPRINGFIELD WRECKER</u>				Removed By: <u>SMITHY'S WRECKER SERVICE</u>							
<input type="checkbox"/> Request <input checked="" type="checkbox"/> List				<input type="checkbox"/> Request <input checked="" type="checkbox"/> List							
Alcohol Test:	Tvpe:	Results:	Drug Test:	Tvpe:	Results:	Alcohol Test:	Tvpe:	Results:	Drug Test:	Tvpe:	Results:
2			2			2			2		
First Harmful Event:	11	Most Harmful Event:	11	Operator/Ped Cond:	1	First Harmful Event:	11	Most Harmful Event:	11	Operator/Ped Cond:	1
Operator Contributing Factors: <u>4</u>				Operator Contributing Factors: <u>1</u>							
Vehicle Contributing Factors: <u>1</u>				Roadway Contributing Factors: <u>1</u>							
Vehicle Contributing Factors: <u>1</u>				Roadway Contributing Factors: <u>1</u>							
Direction of Travel:	3	Vehicle Maneuver:	1	Non-Motor Maneuver:		Direction of Travel:	1	Vehicle Maneuver:	10	Non-Motor Maneuver:	
Vehicle Class:	1	Vehicle Type:	1	Vision Obscured:	1	Vehicle Class:	1	Vehicle Type:	1	Vision Obscured:	1
Number of Occupants:	1	Area of Initial Contact:	11	Damage to Veh:	4	Number of Occupants:	4	Area of Initial Contact:	11	Damage to Veh:	4
Traffic-Way Flow:	1	Road Comp:	2	Road Character:	5	Traffic-Way Flow:	1	Road Comp:	2	Road Character:	5
Number of Lanes:	3	Posted Speed:	55	Work Zone:	0	Number of Lanes:	3	Posted Speed:	55	Work Zone:	0
Traffic Control:	7	Device Inoperative:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Traffic Control:	7	Device Inoperative:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Citation Information:				Citation Information:							
Citation #	414500420	O.C.G.A.	40-6-71	Citation #	414500421	O.C.G.A.	40-6-15				
<b>COMMERCIAL MOTOR VEHICLES ONLY</b>											
Carrier Name				Carrier Name							
Address				Address							
City State Zip				City State Zip							
U.S.D.O.T.#				U.S.D.O.T.#							
No. of Axles				No. of Axles							
G.V.W.R.				G.V.W.R.							
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No	Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No				
C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Released?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Released?	<input type="checkbox"/> Yes <input type="checkbox"/> No								
If YES, Name of 4 Digit Number from Diamond or Box: _____				If YES, Name of 4 Digit Number from Diamond or Box: _____							
One Digit Number from Bottom of Diamond: _____				One Digit Number from Bottom of Diamond: _____							
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units				<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units							

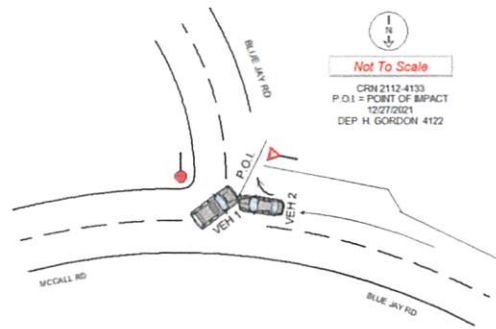
## COLLISION FIELDS

Manner of Collision: 1	Location at Area of Impact: 7	Weather: 2	Surface Condition: 1	Light Condition: 1
------------------------	-------------------------------	------------	----------------------	--------------------

## NARRATIVE

Vehicle 1 was east bound, attempting to turn left onto Blue Jay Road at new intersection of Blue Jay Rd and McCall Rd and struck vehicle 2 during turning maneuver. Vehicle 2 was travelling east on Blue Jay Rd, headed toward McCall Rd at the new intersection and was struck by vehicle 1 while vehicle 1 was attempting to turn left onto Blue Jay Rd.

## DIAGRAM



## PROPERTY DAMAGE INFORMATION

Damage Other Than Vehicle:

Owner:

## WITNESS INFORMATION

Name (Last, First)	Address	City	State	Zip Code	Telephone Number
GARDNER, LEONARD	112 BROOKFIELD DR	GUYTON	GA	31312	2067303902

## OCCUPANT INFORMATION

Name (Last, First):		Address			
1	BRAGG, SHEILA	28B HIDDEN CREEK DR GUYTON GA 31312-459			
Age:	56	Sex:	F	Unit #:	1
Position:	1	Safety Eq:	3	Ejected:	1
Extricated:	2	Air Bag:	2	Injury:	0
Taken for Treatment:	2				
Injured Taken To:		By:		EMS Notified Time (Fatality Only):	EMS Arrival Time (Fatality Only):
Hospital Arrival Time (Fatality Only):					
2	BOWERS, TIFFANY	1475 BENTON BLVD APT 324 SAVANNAH GA 31407-049			
Age:	26	Sex:	F	Unit #:	2
Position:	1	Safety Eq:	3	Ejected:	1
Extricated:	2	Air Bag:	2	Injury:	0
Taken for Treatment:	2				
Injured Taken To:		By:		EMS Notified Time (Fatality Only):	EMS Arrival Time (Fatality Only):
Hospital Arrival Time (Fatality Only):					
3					
Age:		Sex:		Unit #:	
Position:		Safety Eq:		Ejected:	
Extricated:		Air Bag:		Injury:	
Taken for Treatment:					
Injured Taken To:		By:		EMS Notified Time (Fatality Only):	EMS Arrival Time (Fatality Only):
Hospital Arrival Time (Fatality Only):					
4					
Age:		Sex:		Unit #:	
Position:		Safety Eq:		Ejected:	
Extricated:		Air Bag:		Injury:	
Taken for Treatment:					
Injured Taken To:		By:		EMS Notified Time (Fatality Only):	EMS Arrival Time (Fatality Only):
Hospital Arrival Time (Fatality Only):					

## ADMINISTRATIVE

Photos Taken: <input type="checkbox"/> Yes <input type="checkbox"/> No	By:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.	
Report By: GORDON, HUGH	Agency: EFFINGHAM COUNTY	Report Date: 12/27/2021	Checked By: BARBER, MAX
		Date Checked: 12/28/2021	

Agency Case Number <b>2202-1786</b>		Agency NCIC Number <b>GA0510000</b>		GEORGIA <b>MOTOR VEHICLE CRASH REPORT</b>		County <b>EFFINGHAM</b>		Date Rec. by DOT		
Estimated Crash Date <b>02/11/2022</b> Time <b>04:25 PM</b>		Dispatch Date <b>02/11/2022</b> Time <b>04:25 PM</b>		Arrival Date <b>02/11/2022</b> Time <b>04:25 PM</b>		Total Number of Vehicles <b>4</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of		
Road of Occurrence <b>BLUE JAY RD</b>						At Its Intersection With <b>MCCALL RD</b>			<input type="checkbox"/> Corrected Report	
Not At Its Intersection Rnt _____ <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West						Of _____			<input type="checkbox"/> Sup To Original	
Latitude (Y) <b>32.277665</b> (Format) <b>00.00000</b>						Longitude (X) <b>-81.266885</b> (Format) <b>-00.00000</b>			<input type="checkbox"/> Hit and Run	

Unit # <b>1</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>HUNTER</b>	FIRST NAME <b>JACQUELYN</b>	MIDDLE NAME <b>C</b>
<input checked="" type="checkbox"/> Susp At Fault				
Address <b>132 DAVIS ST</b>				
City <b>GUYTON</b>	State <b>GA</b>	Zip <b>31312-000</b>	DOB <b>11/17/1953</b>	
Driver's License No. <b>055958257</b>	Class <b>C</b>	State <b>GA</b>	Country <b>US</b>	
Insurance Co. <b>GEICO</b>	Policy No. <b>9100212173</b>	Telephone No. <b>9127723215</b>		
Year <b>2018</b>	Make <b>NISSAN</b>	Model <b>ALTIMA 4S</b>		
VIN <b>1N4AL3APXJC133122</b>		Vehicle Color <b>BLUE</b>		
Tag # <b>CMW4588</b>	State <b>GA</b>	County <b>COBB</b>	Year <b>2022</b>	
Trailer Tag #	State	County	Year	
<input type="checkbox"/> Same as Driver	Owner Last Name <b>HUNTER</b>	First <b>DANIEL</b>	Middle <b>DEMETRIUS</b>	
Address <b>3080 GUARDIAN WALK NW</b>				
City <b>KENNESAW</b>	State <b>GA</b>	Zip <b>30152-603</b>		
Removed By: <b>RAHNS WRECKER SERVICE</b>				
Alcohol Test: <b>2</b>	Tvpe:	Results:	Drug Test: <b>2</b>	Tvpe:
First Harmful Event: <b>11</b>	Most Harmful Event: <b>11</b>		Operator/Ped Cond: <b>1</b>	
Operator Contributing Factors: <b>4</b>				
Vehicle Contributing Factors: <b>11</b>		Roadway Contributing Factors: <b>1</b>		
Direction of Travel: <b>1</b>	Vehicle Maneuver: <b>1</b>	Non-Motor Maneuver:		
Vehicle Class: <b>1</b>	Vehicle Type: <b>1</b>	Vision Obscured: <b>1</b>		
Number of Occupants: <b>1</b>	Area of Initial Contact: <b>12</b>	Damage to Veh: <b>4</b>		
Traffic-Way Flow: <b>1</b>	Road Comp: <b>2</b>	Road Character: <b>4</b>		
Number of Lanes: <b>4</b>	Posted Speed: <b>55</b>	Work Zone: <b>0</b>		
Traffic Control: <b>5</b>	Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Citation Information: Citation # <b>411300550</b> O.C.G.A. <b>40-6-72B</b>				

Unit # <b>2</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>SMITH</b>	FIRST NAME <b>ZAYNE</b>	MIDDLE NAME <b>EDWARD</b>
<input type="checkbox"/> Susp At Fault				
Address <b>114 RUNS CROSSING DR</b>				
City <b>SPRINGFIELD</b>	State <b>GA</b>	Zip <b>31329-434</b>	DOB <b>04/17/2003</b>	
Driver's License No. <b>060965957</b>	Class <b>C</b>	State <b>GA</b>	Country <b>US</b>	
Insurance Co. <b>STATE FARM</b>	Policy No. <b>112C925977</b>	Telephone No. <b>9127049889</b>		
Year <b>1996</b>	Make <b>FORD</b>	Model <b>F250 TK</b>		
VIN <b>1FTHX26F5TEB33611</b>		Vehicle Color <b>BLUE</b>		
Tag # <b>TDY1626</b>	State <b>GA</b>	County <b>EFFINGHAM</b>	Year <b>2022</b>	
Trailer Tag #	State	County	Year	
<input type="checkbox"/> Same as Driver	Owner Last Name <b>SMITH</b>	First <b>ZAYNE</b>	Middle <b>EDWARD</b>	
Address <b>114 RUNS CROSSING DR</b>				
City <b>SPRINGFIELD</b>	State <b>GA</b>	Zip <b>31329-434</b>		
Removed By: <b>RAHNS WRECKER SERVICE</b>				
Alcohol Test: <b>2</b>	Tvpe:	Results:	Drug Test: <b>2</b>	Tvpe:
First Harmful Event: <b>11</b>	Most Harmful Event: <b>11</b>		Operator/Ped Cond: <b>1</b>	
Operator Contributing Factors: <b>1</b>				
Vehicle Contributing Factors: <b>1</b>		Roadway Contributing Factors: <b>1</b>		
Direction of Travel: <b>1</b>	Vehicle Maneuver: <b>10</b>	Non-Motor Maneuver:		
Vehicle Class: <b>1</b>	Vehicle Type: <b>21</b>	Vision Obscured: <b>1</b>		
Number of Occupants: <b>1</b>	Area of Initial Contact: <b>12</b>	Damage to Veh: <b>4</b>		
Traffic-Way Flow: <b>1</b>	Road Comp: <b>2</b>	Road Character: <b>4</b>		
Number of Lanes: <b>4</b>	Posted Speed: <b>55</b>	Work Zone: <b>0</b>		
Traffic Control: <b>7</b>	Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Citation Information:				

COMMERCIAL MOTOR VEHICLES ONLY				
Carrier Name				
Address		City	State	Zip
U.S.D.O.T.#	No. of Axles	G.V.W.R.		
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No	
C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If YES, Name of 4 Digit Number from Diamond or Box: _____				
One Digit Number from Bottom of Diamond: _____				
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units				

COMMERCIAL MOTOR VEHICLES ONLY				
Carrier Name				
Address		City	State	Zip
U.S.D.O.T.#	No. of Axles	G.V.W.R.		
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No	
C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If YES, Name of 4 Digit Number from Diamond or Box: _____				
One Digit Number from Bottom of Diamond: _____				
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units				

**COLLISION FIELDS**

Manner of Collision: <b>2</b>	Location at Area of Impact: <b>7</b>	Weather: <b>1</b>	Surface Condition: <b>1</b>	Light Condition: <b>1</b>
-------------------------------	--------------------------------------	-------------------	-----------------------------	---------------------------

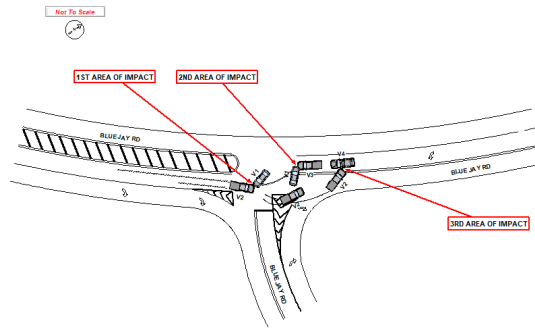
**NARRATIVE**

Vehicle 1 was traveling south in the left turn lane on Blue Jay Rd at it's intersection with Blue Jay Rd. Vehicle 2 was traveling north on Blue Jay Rd approaching the intersection with Blue Jay Rd. Vehicles 3 and 4 were traveling south in the left turn lane behind Vehicle 1 on Blue Jay Rd.

Vehicle 1 attempted a left turn and entered the lane of travel for Vehicle 2. The vehicles collided head on. The impact rotated Vehicle 1 180 degrees counter-clockwise, where it collided with the front of Vehicle 3. Vehicle 2 went into a counter-clockwise yaw and collided with the drivers door area of Vehicle 4.

Driver of Vehicle 1 was transported to Memorial Hospital. The driver of Vehicle 1 is cited for failure to yield while turning left.

**DIAGRAM**



**PROPERTY DAMAGE INFORMATION**

Damage Other Than Vehicle:	Owner:
----------------------------	--------

**WITNESS INFORMATION**

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

**OCCUPANT INFORMATION**

1	Name (Last, First): <b>HUNTER, JACQUELYN</b>				Address: <b>132 DAVIS ST GUYTON GA 31312-000</b>					
	Age: <b>68</b>	Sex: <b>F</b>	Unit #: <b>1</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>1</b>	Iniurv: <b>3</b>	Taken for Treatment: <b>1</b>
Iniured Taken To: <b>MEMORIAL HEALTH</b>			Bv: <b>EFFINGHAM EMS</b>		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
2	Name (Last, First): <b>SMITH, ZAYNE</b>				Address: <b>114 RUNS CROSSING DR SPRINGFIELD GA 31329-434</b>					
	Age: <b>18</b>	Sex: <b>M</b>	Unit #: <b>2</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>2</b>	Iniurv: <b>0</b>	Taken for Treatment: <b>2</b>
Iniured Taken To:			Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
3	Name (Last, First): <b>CARTER JR, DESSIE</b>				Address: <b>420 OAKWOOD DR HARDEEVILLE SC 29927</b>					
	Age: <b>39</b>	Sex: <b>M</b>	Unit #: <b>3</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>2</b>	Iniurv: <b>0</b>	Taken for Treatment: <b>2</b>
Iniured Taken To:			Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
4	Name (Last, First): <b>MAYVILLE, KATHERINE</b>				Address: <b>28 HERMITAGE DR RICHMOND HILL GA 31324</b>					
	Age: <b>24</b>	Sex: <b>F</b>	Unit #: <b>3</b>	Position: <b>3</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>2</b>	Iniurv: <b>0</b>	Taken for Treatment: <b>2</b>
Iniured Taken To:			Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	

**ADMINISTRATIVE**

Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.			
Report Bv: <b>FONDREN, JASON</b>	Agency: <b>EFFINGHAM COUNTY</b>	Report Date: <b>02/11/2022</b>	Checked Bv: <b>FONDREN, JASON</b>	Date Checked: <b>02/14/2022</b>	

Agency Case Number <b>2202-1786</b>		Agency NCIC Number <b>GA0510000</b>		<b>GEORGIA</b> MOTOR VEHICLE CRASH REPORT		County <b>EFFINGHAM</b>		Date Rec. by DOT			
Estimated Crash Date: <b>02/11/2022</b> Time: <b>04:25 PM</b>		Dispatch Date: <b>02/11/2022</b> Time: <b>04:25 PM</b>		Arrival Date: <b>02/11/2022</b> Time: <b>04:25 PM</b>		Total Number of Vehicles: <b>4</b> Injuries: <b>0</b> Fatalities: <b>0</b>		Inside City Of			
Road of Occurrence <b>BLUE JAY RD</b>						At Its Intersection With <b>MCCALL RD</b>		<input type="checkbox"/> Corrected Report <input type="checkbox"/> Sup To Original <input type="checkbox"/> Hit and Run			
Not At Its Intersection Rnt _____ <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West						Of _____					
Latitude (Y) <b>32.277665</b> (Format) <b>00.00000</b>				Longitude (X) <b>-81.266885</b> (Format) <b>-00.00000</b>							

Unit #	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME	FIRST NAME	MIDDLE NAME	Unit #	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME	FIRST NAME	MIDDLE NAME		
<b>3</b>		<b>CARTER JR</b>	<b>DESSIE</b>	<b>DEWITT</b>	<b>4</b>		<b>SNOOKS</b>	<b>AMBER</b>	<b>CASEY</b>		
<input type="checkbox"/> Susp At Fault					<input type="checkbox"/> Susp At Fault						
Address <b>420 OAKWOOD DR</b>					Address <b>103 KINGSLEY DR S</b>						
City		State		Zip		DOB					
<b>HARDEEVILLE</b>		<b>SC</b>		<b>29927</b>		<b>09/27/1982</b>					
Driver's License No.		Class		State		Country					
<b>102231748</b>		<b>D</b>		<b>SC</b>		<b>US</b>					
Insurance Co.		Policy No.		Telephone No.		Insurance Co.		Policy No.			
<b>CINCINNATI INSURANCE</b>		<b>ENP0601631</b>		<b>8436947555</b>		<b>COUNTRY MUTUAL</b>		<b>GA5629117</b>			
Year		Make		Model		Year		Make			
<b>2015</b>		<b>GMC</b>		<b>SIERRA</b>		<b>2017</b>		<b>TOYOTA</b>			
VIN		Vehicle Color		VIN		Vehicle Color					
<b>1GT12ZE86FF509646</b>		<b>WHITE</b>		<b>JTEZU5JR0H5155292</b>		<b>GRA</b>					
Tag #		State		County		Year					
<b>GTG818</b>		<b>SC</b>		<b>JASPER</b>		<b>2022</b>					
Trailer Tag #		State		County		Year					
<input checked="" type="checkbox"/> Same as Driver					<input type="checkbox"/> Same as Driver						
Owner Last Name		First		Middle		Owner Last Name		First			
<b>CARTER JR</b>		<b>DESSIE</b>		<b>DEWITT</b>		<b>SNOOKS</b>		<b>AMBER</b>			
Address <b>420 OAKWOOD DR</b>					Address <b>103 KINGSLEY DR S</b>						
City		State		Zip		City		State			
<b>HARDEEVILLE</b>		<b>SC</b>		<b>29927</b>		<b>GUYTON</b>		<b>GA</b>			
Removed By: <b>DRIVER</b>					Removed By: <b>SMITH'S WRECKER SERVICES</b>						
<input type="checkbox"/> Request <input type="checkbox"/> List					<input type="checkbox"/> Request <input checked="" type="checkbox"/> List						
Alcohol Test:		Tvpe:		Results:		Drug Test:		Tvpe:			
<b>2</b>						<b>2</b>					
First Harmful Event: <b>11</b>			Most Harmful Event: <b>11</b>			Operator/Ped Cond: <b>1</b>					
Operator Contributing Factors: <b>1</b>					Operator Contributing Factors: <b>1</b>						
Vehicle Contributing Factors: <b>1</b>					Roadway Contributing Factors: <b>1</b>						
Direction of Travel:		Vehicle Maneuver:		Non-Motor Maneuver:		Direction of Travel:		Vehicle Maneuver:			
<b>2</b>		<b>10</b>				<b>2</b>		<b>4</b>			
Vehicle Class:		Vehicle Type:		Vision Obscured:		Vehicle Class:		Vehicle Type:			
<b>1</b>		<b>2</b>		<b>1</b>		<b>1</b>		<b>11</b>			
Number of Occupants:		Area of Initial Contact:		Damage to Veh:		Number of Occupants:		Area of Initial Contact:			
<b>2</b>		<b>12</b>		<b>3</b>		<b>1</b>		<b>9</b>			
Traffic-Way Flow:		Road Comp:		Road Character:		Traffic-Way Flow:		Road Comp:			
<b>1</b>		<b>2</b>		<b>4</b>		<b>1</b>		<b>2</b>			
Number of Lanes:		Posted Speed:		Work Zone:		Number of Lanes:		Posted Speed:			
<b>4</b>		<b>55</b>		<b>0</b>		<b>4</b>		<b>55</b>			
Traffic Control: <b>7</b>					Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Citation Information:					Citation Information:						

<b>COMMERCIAL MOTOR VEHICLES ONLY</b>						<b>COMMERCIAL MOTOR VEHICLES ONLY</b>					
Carrier Name						Carrier Name					
Address		City		State		Zip		Address		City	
U.S.D.O.T.#		No. of Axles		G.V.W.R.		U.S.D.O.T.#		No. of Axles		G.V.W.R.	
Cargo Body Type		Vehicle Config.		<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate		Fed. Reportable		Cargo Body Type		Vehicle Config.	
						<input type="checkbox"/> Yes <input type="checkbox"/> No					
C.D.L.?		<input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended?		<input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vehicle Placarded?		<input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials?		<input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No						Released? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If YES, Name of 4 Digit Number from Diamond or Box: _____						If YES, Name of 4 Digit Number from Diamond or Box: _____					
One Digit Number from Bottom of Diamond: _____						One Digit Number from Bottom of Diamond: _____					
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units						<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units					

**COLLISION FIELDS**

Manner of Collision: <b>2</b>	Location at Area of Impact: <b>7</b>	Weather: <b>1</b>	Surface Condition: <b>1</b>	Light Condition: <b>1</b>
-------------------------------	--------------------------------------	-------------------	-----------------------------	---------------------------

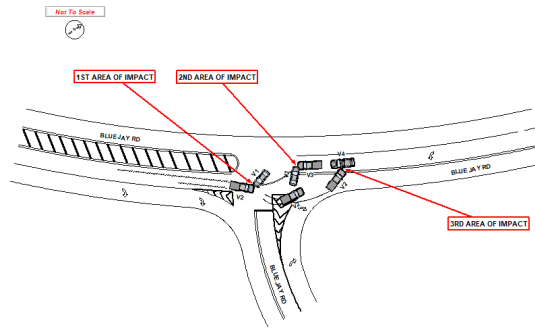
**NARRATIVE**

Vehicle 1 was traveling south in the left turn lane on Blue Jay Rd at it's intersection with Blue Jay Rd. Vehicle 2 was traveling north on Blue Jay Rd approaching the intersection with Blue Jay Rd. Vehicles 3 and 4 were traveling south in the left turn lane behind Vehicle 1 on Blue Jay Rd.

Vehicle 1 attempted a left turn and entered the lane of travel for Vehicle 2. The vehicles collided head on. The impact rotated Vehicle 1 180 degrees counter-clockwise, where it collided with the front of Vehicle 3. Vehicle 2 went into a counter-clockwise yaw and collided with the drivers door area of Vehicle 4.

Driver of Vehicle 1 was transported to Memorial Hospital. The driver of Vehicle 1 is cited for failure to yield while turning left.

**DIAGRAM**



**PROPERTY DAMAGE INFORMATION**

Damage Other Than Vehicle:	Owner:
----------------------------	--------

**WITNESS INFORMATION**

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

**OCCUPANT INFORMATION**

1	Name (Last, First): <b>HUNTER, JACQUELYN</b>				Address: <b>132 DAVIS ST GUYTON GA 31312-000</b>					
	Age: <b>68</b>	Sex: <b>F</b>	Unit #: <b>1</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>1</b>	Iniurv: <b>3</b>	Taken for Treatment: <b>1</b>
Iniured Taken To: <b>MEMORIAL HEALTH</b>			Bv: <b>EFFINGHAM EMS</b>		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
2	Name (Last, First): <b>SMITH, ZAYNE</b>				Address: <b>114 RUNS CROSSING DR SPRINGFIELD GA 31329-434</b>					
	Age: <b>18</b>	Sex: <b>M</b>	Unit #: <b>2</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>2</b>	Iniurv: <b>0</b>	Taken for Treatment: <b>2</b>
Iniured Taken To:			Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
3	Name (Last, First): <b>CARTER JR, DESSIE</b>				Address: <b>420 OAKWOOD DR HARDEEVILLE SC 29927</b>					
	Age: <b>39</b>	Sex: <b>M</b>	Unit #: <b>3</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>2</b>	Iniurv: <b>0</b>	Taken for Treatment: <b>2</b>
Iniured Taken To:			Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
4	Name (Last, First): <b>MAYVILLE, KATHERINE</b>				Address: <b>28 HERMITAGE DR RICHMOND HILL GA 31324</b>					
	Age: <b>24</b>	Sex: <b>F</b>	Unit #: <b>3</b>	Position: <b>3</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>2</b>	Iniurv: <b>0</b>	Taken for Treatment: <b>2</b>
Iniured Taken To:			Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	

**ADMINISTRATIVE**

Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.			
Report Bv: <b>FONDREN, JASON</b>	Agency: <b>EFFINGHAM COUNTY</b>	Report Date: <b>02/11/2022</b>	Checked Bv: <b>FONDREN, JASON</b>	Date Checked: <b>02/14/2022</b>	

Agency Case Number <b>2202-4328</b>		Agency NCIC Number <b>GA0510000</b>		GEORGIA <b>MOTOR VEHICLE CRASH REPORT</b>		County <b>EFFINGHAM</b>		Date Rec. by DOT	
Estimated Crash Date <b>02/26/2022</b> Time <b>03:38 PM</b>		Dispatch Date <b>02/26/2022</b> Time <b>03:42 PM</b>		Arrival Date <b>02/26/2022</b> Time <b>03:47 PM</b>		Total Number of Vehicles <b>4</b> Injuries <b>4</b> Fatalities <b>0</b>		Inside City Of	
Road of Occurrence <b>MCCALL RD</b>				At Its Intersection With <b>BLUE JAY RD</b>				<input type="checkbox"/> Corrected Report	
Not At Its Intersection Rpt <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West				Of _____				<input type="checkbox"/> Sup To Original	
Latitude (Y) <b>32.2771914084204</b> (Format) <b>00.00000</b>				Longitude (X) <b>-81.2694311141968</b> (Format) <b>-00.00000</b>				<input type="checkbox"/> Hit and Run	

Unit # <b>1</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>WAY</b>	FIRST NAME <b>OLIVIA</b>	MIDDLE NAME <b>MARY</b>
<input checked="" type="checkbox"/> Susp At Fault				
Address <b>203 MOULTRIE DR</b>				
City <b>RINCON</b>	State <b>GA</b>	Zip <b>31326-528</b>	DOB <b>05/26/1949</b>	
Driver's License No. <b>061007751</b>	Class <b>C</b>	State <b>GA</b>	Country <b>US</b>	
Insurance Co. <b>SAFECO INS CO OF</b>	Policy No. <b>F3673590</b>	Telephone No. <b>9122104244</b>		
Year <b>2018</b>	Make <b>KIA</b>	Model <b>SPORTAGE MP</b>		
VIN <b>KNDPN3AC1J7343726</b>		Vehicle Color <b>SIL</b>		
Tag # <b>RKU3378</b>	State <b>GA</b>	County <b>EFFINGHAM</b>	Year <b>2022</b>	
Trailer Tag #	State	County	Year	
<input checked="" type="checkbox"/> Same as Driver	Owner Last Name <b>WAY</b>	First <b>OLIVIA</b>	Middle <b>MARY</b>	
Address <b>203 MOULTRIE DR</b>				
City <b>RINCON</b>	State <b>GA</b>	Zip <b>31326-528</b>		
Removed By: <b>SMITH'S WRECKER</b>				
Alcohol Test: <b>2</b>	Tvpe:	Results:	Drug Test: <b>2</b>	Tvpe:
First Harmful Event: <b>11</b>	Most Harmful Event: <b>11</b>		Operator/Ped Cond: <b>1</b>	
Operator Contributing Factors: <b>4</b>				
Vehicle Contributing Factors: <b>1</b>		Roadway Contributing Factors: <b>1</b>		
Direction of Travel: <b>2</b>	Vehicle Maneuver: <b>1</b>	Non-Motor Maneuver:		
Vehicle Class: <b>1</b>	Vehicle Type: <b>11</b>	Vision Obscured: <b>1</b>		
Number of Occupants: <b>3</b>	Area of Initial Contact: <b>12</b>	Damage to Veh: <b>3</b>		
Traffic-Way Flow: <b>1</b>	Road Comp: <b>2</b>	Road Character: <b>4</b>		
Number of Lanes: <b>3</b>	Posted Speed: <b>55</b>	Work Zone: <b>0</b>		
Traffic Control: <b>7</b>	Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Citation Information:				

Unit # <b>2</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>SIPES</b>	FIRST NAME <b>JUSTIN</b>	MIDDLE NAME <b>TYLER</b>
<input type="checkbox"/> Susp At Fault				
Address <b>203 PALM BAY DR</b>				
City <b>RICHMOND HILL</b>	State <b>GA</b>	Zip <b>31324-605</b>	DOB <b>08/02/1995</b>	
Driver's License No. <b>058068285</b>	Class <b>C</b>	State <b>GA</b>	Country <b>US</b>	
Insurance Co. <b>PROGRESSIVE MOUNTAIN</b>	Policy No. <b>955257025</b>	Telephone No.		
Year <b>2016</b>	Make <b>KIA</b>	Model <b>SPORTAGE MP</b>		
VIN <b>KNDPC3AC6G7845856</b>		Vehicle Color <b>WHITE</b>		
Tag # <b>TDE1252</b>	State <b>GA</b>	County <b>BRYAN</b>	Year <b>2022</b>	
Trailer Tag #	State	County	Year	
<input checked="" type="checkbox"/> Same as Driver	Owner Last Name <b>SIPES</b>	First <b>JUSTIN</b>	Middle <b>TYLER</b>	
Address <b>203 PALM BAY DR</b>				
City <b>RICHMOND H</b>	State <b>GA</b>	Zip <b>31324-605</b>		
Removed By: <b>RAHN'S WRECKER</b>				
Alcohol Test: <b>2</b>	Tvpe:	Results:	Drug Test: <b>2</b>	Tvpe:
First Harmful Event: <b>11</b>	Most Harmful Event: <b>11</b>		Operator/Ped Cond: <b>1</b>	
Operator Contributing Factors: <b>1</b>				
Vehicle Contributing Factors: <b>1</b>		Roadway Contributing Factors: <b>1</b>		
Direction of Travel: <b>1</b>	Vehicle Maneuver: <b>5</b>	Non-Motor Maneuver:		
Vehicle Class: <b>1</b>	Vehicle Type: <b>11</b>	Vision Obscured: <b>1</b>		
Number of Occupants: <b>2</b>	Area of Initial Contact: <b>12</b>	Damage to Veh: <b>3</b>		
Traffic-Way Flow: <b>1</b>	Road Comp: <b>2</b>	Road Character: <b>4</b>		
Number of Lanes: <b>3</b>	Posted Speed: <b>55</b>	Work Zone: <b>0</b>		
Traffic Control: <b>7</b>	Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Citation Information:				

COMMERCIAL MOTOR VEHICLES ONLY				
Carrier Name				
Address		City	State	Zip
U.S.D.O.T.#	No. of Axles	G.V.W.R.		
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No	
C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If YES, Name of 4 Digit Number from Diamond or Box: _____				
One Digit Number from Bottom of Diamond: _____				
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units				

COMMERCIAL MOTOR VEHICLES ONLY				
Carrier Name				
Address		City	State	Zip
U.S.D.O.T.#	No. of Axles	G.V.W.R.		
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No	
C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If YES, Name of 4 Digit Number from Diamond or Box: _____				
One Digit Number from Bottom of Diamond: _____				
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units				



COLLISION FIELDS

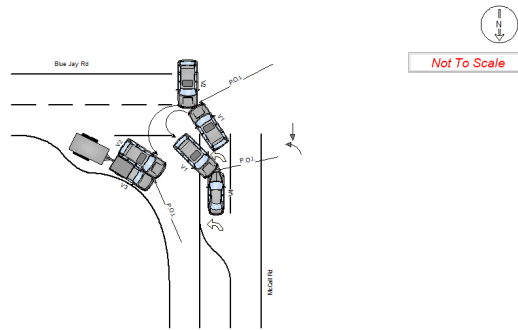
Manner of Collision: 2	Location at Area of Impact: 7	Weather: 1	Surface Condition: 1	Light Condition: 1
------------------------	-------------------------------	------------	----------------------	--------------------

NARRATIVE

On Saturday, February 26, 2022, I was dispatched to the above area for an accident. Upon arrival, I spoke to V1, "RKU3378/GA, driver, Olivia Way, and she stated she was in the southbound turn lane on McCall Rd to turn left onto Blue Jay Rd. V1 stated she watched the cars going onto Blue Jay at the yield sign and when the last car pulled up to it, she turned left and collided with V2 "TDE1252/GA", driver, Justin Sipes, who was traveling northbound on McCall Rd. V2 then collided with V3, "CDB2611/GA" "TT93Y22/GA", driver, Justin Stevens, which was sitting at the yield sign to go north bound on McCall Rd from Blue Jay Rd. V1 was in the center of the intersection and the car then rolled into V4, "CNV6277/GA", driver, Brittany Allen, which was sitting in the turn lane on McCall Rd to turn left onto Blue Jay Rd. V1 occupants went to Memorial for complaints of injuries. V2 driver had shoulder/neck pain and passenger had abdominal pain and refused EMS at the scene and stated they were going to go by themselves to the hospital. V3 driver complained of back and leg pain and passenger complained of arm pain and refused EMS at the scene and stated they were going to go by themselves to the hospital. V4 occupants had no complaint of injuries at the time.

NARRATIVE CONTINUED ON SUPPLEMENT PAGE...

DIAGRAM



PROPERTY DAMAGE INFORMATION

Damage Other Than Vehicle:	Owner:
----------------------------	--------

WITNESS INFORMATION

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

OCCUPANT INFORMATION

1	Name (Last, First): WAY, OLIVIA					Address: 203 MOULTRIE DR RINCON GA 31326-528				
	Age: 72	Sex: F	Unit #: 1	Position: 1	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Bag: 5	Iniurv: 3	Taken for Treatment: 1
Iniured Taken To: MEMORIAL		Bv: EMS UNIT 3			EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
2	Name (Last, First): WAY, CARSON					Address: 203 MOULTRIE DR RINCON GA 31312				
	Age: 10	Sex: M	Unit #: 1	Position: 4	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Bag: 5	Iniurv: 3	Taken for Treatment: 1
Iniured Taken To: MEMORIAL		Bv: EMS UNIT 3			EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
3	Name (Last, First): WAY, CAROLINE					Address: 203 MOULTRIE DR RINCON GA 31326				
	Age: 8	Sex: F	Unit #: 1	Position: 6	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Bag: 5	Iniurv: 3	Taken for Treatment: 1
Iniured Taken To: MEMORIAL		Bv: EMS UNIT 3			EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
4	Name (Last, First): SIPES, JUSTIN					Address: 203 PALM BAY DR RICHMOND HILL GA 31324-605				
	Age: 26	Sex: M	Unit #: 2	Position: 1	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Bag: 5	Iniurv: 4	Taken for Treatment: 2
Iniured Taken To:		Bv:			EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	

ADMINISTRATIVE

Photos Taken: <input type="checkbox"/> Yes <input type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.			
Report By: BROOKS, ZACHARY	Agency: EFFINGHAM COUNTY	Report Date: 02/27/2022	Checked By: HANDSHUMAKER, DANIEL	Date Checked: 02/28/2022	

Agency Case Number <b>2202-4328</b>		Agency NCIC Number <b>GA0510000</b>		<b>GEORGIA</b> MOTOR VEHICLE CRASH REPORT		County <b>EFFINGHAM</b>		Date Rec. by DOT			
Estimated Crash Date <b>02/26/2022</b> Time <b>03:38 PM</b>		Dispatch Date <b>02/26/2022</b> Time <b>03:42 PM</b>		Arrival Date <b>02/26/2022</b> Time <b>03:47 PM</b>		Total Number of Vehicles <b>4</b> Injuries <b>4</b> Fatalities <b>0</b>		Inside City Of			
Road of Occurrence <b>MCCALL RD</b>				At Its Intersection With <b>BLUE JAY RD</b>				<input type="checkbox"/> Corrected Report			
Not At Its Intersection Rpt <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West				Of _____				<input type="checkbox"/> Sup To Original			
Latitude (Y) <b>32.2771914084204</b> (Format) <b>00.00000</b>				Longitude (X) <b>-81.2694311141968</b> (Format) <b>-00.00000</b>				<input type="checkbox"/> Hit and Run			
Unit # <b>3</b> <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME <b>STEVENS</b> FIRST NAME <b>JUSTIN</b> MIDDLE NAME <b>LEANDOR</b> Address <b>122 ROSE DR</b> <input type="checkbox"/> Susp At Fault					Unit # <b>4</b> <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME <b>ALLEN</b> FIRST NAME <b>BRITTANY</b> MIDDLE NAME Address <b>254 FISH RD</b> <input type="checkbox"/> Susp At Fault						
City <b>SPRINGFIELD</b> State <b>GA</b> Zip <b>31329-493</b> DOB <b>07/16/1981</b>		City <b>SYLVANIA</b> State <b>GA</b> Zip <b>30467-933</b> DOB <b>06/27/1992</b>		Driver's License No. <b>054497625</b> Class <b>A</b> State <b>GA</b> Country <b>US</b>		Driver's License No. <b>054689274</b> Class <b>C</b> State <b>GA</b> Country <b>US</b>		Insurance Co. <b>STATE FARM MUTUAL</b> Policy No. <b>STATE FARM MUTUAL</b> Telephone No. <b>9125473229</b>		Insurance Co. <b>STATE FARM MUTUAL</b> Policy No. <b>112C370944</b> Telephone No. <b>9127040135</b>	
Year <b>2014</b> Make <b>RAM</b> Model <b>TRUCK 1500 SLT TK</b>		Year <b>2018</b> Make <b>TOYOTA</b> Model <b>CAMRY SE 4S</b>		VIN <b>1C6RR6GT3ES377280</b> Vehicle Color <b>WHITE</b>		VIN <b>4T1B11HK5JU128323</b> Vehicle Color <b>WHITE</b>		Tag # <b>CDB2611</b> State <b>GA</b> County <b>EFFINGHAM</b> Year <b>2022</b>		Tag # <b>CNV6277</b> State <b>GA</b> County <b>SCREVEN</b> Year <b>2022</b>	
Trailer Tag # <b>TT93Y22</b> State <b>GA</b> County <b>EFFINGHAM</b> Year <b>2022</b>		Trailer Tag # _____ State _____ County _____ Year _____		<input checked="" type="checkbox"/> Same as Driver Owner Last Name <b>STEVENS</b> First <b>JUSTIN</b> Middle <b>LEANDOR</b> Address <b>122 ROSE DR</b> City <b>SPRINGFIELD</b> State <b>GA</b> Zip <b>31329-493</b> Removed By: _____ <input type="checkbox"/> Request <input type="checkbox"/> List		<input checked="" type="checkbox"/> Same as Driver Owner Last Name <b>ALLEN</b> First <b>BRITTANY</b> Middle Address <b>254 FISH RD</b> City <b>SYLVANIA</b> State <b>GA</b> Zip <b>30467-933</b> Removed By: _____ <input type="checkbox"/> Request <input type="checkbox"/> List					
Alcohol Test: <b>2</b> Tvpe: Results: Drug Test: <b>2</b> Tvpe: Results:		Alcohol Test: <b>2</b> Tvpe: Results: Drug Test: <b>2</b> Tvpe: Results:		First Harmful Event: <b>11</b> Most Harmful Event: <b>11</b> Operator/Ped Cond: <b>1</b>		First Harmful Event: <b>11</b> Most Harmful Event: <b>11</b> Operator/Ped Cond: <b>1</b>		Operator Contributing Factors: <b>1</b>		Operator Contributing Factors: <b>1</b>	
Vehicle Contributing Factors: <b>1</b> Roadway Contributing Factors: <b>1</b>		Vehicle Contributing Factors: <b>1</b> Roadway Contributing Factors: <b>1</b>		Direction of Travel: <b>1</b> Vehicle Maneuver: <b>4</b> Non-Motor Maneuver:		Direction of Travel: <b>2</b> Vehicle Maneuver: <b>1</b> Non-Motor Maneuver:		Vehicle Class: <b>1</b> Vehicle Type: <b>2</b> Vision Obscured: <b>1</b>		Vehicle Class: <b>1</b> Vehicle Type: <b>1</b> Vision Obscured: <b>1</b>	
Number of Occupants: <b>2</b> Area of Initial Contact: <b>9</b> Damage to Veh: <b>3</b>		Number of Occupants: <b>2</b> Area of Initial Contact: <b>12</b> Damage to Veh: <b>3</b>		Traffic-Way Flow: <b>1</b> Road Comp: <b>2</b> Road Character: <b>4</b>		Traffic-Way Flow: <b>1</b> Road Comp: <b>2</b> Road Character: <b>4</b>		Number of Lanes: <b>3</b> Posted Speed: <b>55</b> Work Zone: <b>0</b>		Number of Lanes: <b>3</b> Posted Speed: <b>55</b> Work Zone: <b>0</b>	
Traffic Control: <b>7</b> Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Traffic Control: <b>7</b> Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Citation Information:		Citation Information:					
<b>COMMERCIAL MOTOR VEHICLES ONLY</b>						<b>COMMERCIAL MOTOR VEHICLES ONLY</b>					
Carrier Name		Carrier Name		Address City State Zip		Address City State Zip		U.S.D.O.T.#		U.S.D.O.T.#	
U.S.D.O.T.#		No. of Axles		G.V.W.R.		U.S.D.O.T.#		No. of Axles		G.V.W.R.	
Cargo Body Type		Vehicle Config.		<input type="checkbox"/> Interstate <input type="checkbox"/> Fed. Reportable <input type="checkbox"/> Intrastate <input type="checkbox"/> Yes <input type="checkbox"/> No		Cargo Body Type		Vehicle Config.		<input type="checkbox"/> Interstate <input type="checkbox"/> Fed. Reportable <input type="checkbox"/> Intrastate <input type="checkbox"/> Yes <input type="checkbox"/> No	
C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No		Released? <input type="checkbox"/> Yes <input type="checkbox"/> No		If YES, Name of 4 Digit Number from Diamond or Box: _____		If YES, Name of 4 Digit Number from Diamond or Box: _____		One Digit Number from Bottom of Diamond: _____		One Digit Number from Bottom of Diamond: _____	
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units						<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units					

COLLISION FIELDS

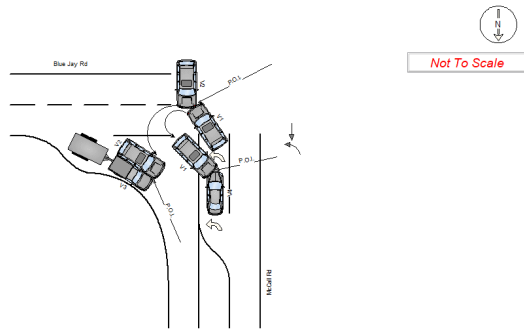
Manner of Collision: 2	Location at Area of Impact: 7	Weather: 1	Surface Condition: 1	Light Condition: 1
------------------------	-------------------------------	------------	----------------------	--------------------

NARRATIVE

On Saturday, February 26, 2022, I was dispatched to the above area for an accident. Upon arrival, I spoke to V1, "RKU3378/GA, driver, Olivia Way, and she stated she was in the southbound turn lane on McCall Rd to turn left onto Blue Jay Rd. V1 stated she watched the cars going onto Blue Jay at the yield sign and when the last car pulled up to it, she turned left and collided with V2 "TDE1252/GA", driver, Justin Sipes, who was traveling northbound on McCall Rd. V2 then collided with V3, "CDB2611/GA" "TT93Y22/GA", driver, Justin Stevens, which was sitting at the yield sign to go north bound on McCall Rd from Blue Jay Rd. V1 was in the center of the intersection and the car then rolled into V4, "CNV6277/GA", driver, Brittany Allen, which was sitting in the turn lane on McCall Rd to turn left onto Blue Jay Rd. V1 occupants went to Memorial for complaints of injuries. V2 driver had shoulder/neck pain and passenger had abdominal pain and refused EMS at the scene and stated they were going to go by themselves to the hospital. V3 driver complained of back and leg pain and passenger complained of arm pain and refused EMS at the scene and stated they were going to go by themselves to the hospital. V4 occupants had no complaint of injuries at the time.

NARRATIVE CONTINUED ON SUPPLEMENT PAGE...

DIAGRAM



PROPERTY DAMAGE INFORMATION

Damage Other Than Vehicle:	Owner:
----------------------------	--------

WITNESS INFORMATION

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

OCCUPANT INFORMATION

1	Name (Last, First): WAY, OLIVIA					Address: 203 MOULTRIE DR RINCON GA 31326-528				
	Age: 72	Sex: F	Unit #: 1	Position: 1	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Baa: 5	Iniurv: 3	Taken for Treatment: 1
Iniured Taken To: MEMORIAL		Bv: EMS UNIT 3			EMS Notified Time (Fatalitv Onlv):		EMS Arrival Time (Fatalitv Onlv):		Hospital Arrival Time (Fatalitv Onlv):	
2	Name (Last, First): WAY, CARSON					Address: 203 MOULTRIE DR RINCON GA 31312				
	Age: 10	Sex: M	Unit #: 1	Position: 4	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Baa: 5	Iniurv: 3	Taken for Treatment: 1
Iniured Taken To: MEMORIAL		Bv: EMS UNIT 3			EMS Notified Time (Fatalitv Onlv):		EMS Arrival Time (Fatalitv Onlv):		Hospital Arrival Time (Fatalitv Onlv):	
3	Name (Last, First): WAY, CAROLINE					Address: 203 MOULTRIE DR RINCON GA 31326				
	Age: 8	Sex: F	Unit #: 1	Position: 6	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Baa: 5	Iniurv: 3	Taken for Treatment: 1
Iniured Taken To: MEMORIAL		Bv: EMS UNIT 3			EMS Notified Time (Fatalitv Onlv):		EMS Arrival Time (Fatalitv Onlv):		Hospital Arrival Time (Fatalitv Onlv):	
4	Name (Last, First): SIPES, JUSTIN					Address: 203 PALM BAY DR RICHMOND HILL GA 31324-605				
	Age: 26	Sex: M	Unit #: 2	Position: 1	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Baa: 5	Iniurv: 4	Taken for Treatment: 2
Iniured Taken To:		Bv:			EMS Notified Time (Fatalitv Onlv):		EMS Arrival Time (Fatalitv Onlv):		Hospital Arrival Time (Fatalitv Onlv):	

ADMINISTRATIVE

Photos Taken: <input type="checkbox"/> Yes <input type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.			
Report Bv: BROOKS, ZACHARY	Agencv: EFFINGHAM COUNTY	Report Date: 02/27/2022	Checked Bv: HANDSHUMAKER, DANIEL	Date Checked: 02/28/2022	

Agency Case Number: 2202-4328

Estimated Crash Date: 02/26/2022

BROOKS.

BROOKS, ZACHARY

## NARRATIVE

On Saturday, February 26, 2022, I was dispatched to the above area for an accident. Upon arrival, I spoke to V1, "RKU3378/GA, driver, Olivia Way, and she stated she was in the southbound turn lane on McCall Rd to turn left onto Blue Jay Rd. V1 stated she watched the cars going onto Blue Jay at the yield sign and when the last car pulled up to it, she turned left and collided with V2 "TDE1252/GA", driver, Justin Sipes, who was traveling northbound on McCall Rd. V2 then collided with V3, "CDB2611/GA" "TT93Y22/GA", driver, Justin Stevens, which was sitting at the yield sign to go north bound on McCall Rd from Blue Jay Rd. V1 was in the center of the intersection and the car then rolled into V4, "CNV6277/GA", driver, Brittany Allen, which was sitting in the turn lane on McCall Rd to turn left onto Blue Jay Rd. V1 occupants went to Memorial for complaints of injuries. V2 driver had shoulder/neck pain and passenger had abdominal pain and refused EMS at the scene and stated they were going to go by themselves to the hospital. V3 driver complained of back and leg pain and passenger complained of arm pain and refused EMS at the scene and stated they were going to go by themselves to the hospital. V4 occupants had no complaint of injuries at the time.

## ADDITIONAL CITATION INFORMATION

Unit #:

## ADDITIONAL OCCUPANT INFORMATION

5	Name (Last, First): SIPES, HUNTER					Address: 203 PALM BAY DR				
	Age: 5	Sex: F	Unit #: 2	Position: 3	Safety Ea: 3	Ejected: 1	Extricated: 2	Air Bag: 4	Injury: 4	Taken for Treatment: 2
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
6	Name (Last, First): STEVENS, JUSTIN					Address: 122 ROSE DR				
	Age: 40	Sex: M	Unit #: 3	Position: 1	Safety Ea: 3	Ejected: 1	Extricated: 2	Air Bag: 2	Injury: 4	Taken for Treatment: 2
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
7	Name (Last, First): STEVENS, JADA					Address: 122 ROSE DR				
	Age: 16	Sex: F	Unit #: 3	Position: 3	Safety Ea: 3	Ejected: 1	Extricated: 2	Air Bag: 2	Injury: 4	Taken for Treatment: 2
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
8	Name (Last, First): ALLEN, BRITTANY					Address: 254 FISH RD				
	Age: 27	Sex: F	Unit #: 4	Position: 2	Safety Ea: 3	Ejected: 1	Extricated: 2	Air Bag: 2	Injury: 0	Taken for Treatment: 2
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
9	Name (Last, First): BISHOP, LISA					Address:				
	Age: 52	Sex: F	Unit #: 4	Position: 3	Safety Ea: 3	Ejected: 1	Extricated: 2	Air Bag: 2	Injury: 0	Taken for Treatment: 2
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	

## ADDITIONAL WITNESS INFORMATION

Agency Case Number <b>2203-0103</b>		Agency NCIC Number <b>GA0510000</b>		GEORGIA <b>MOTOR VEHICLE CRASH REPORT</b>		County <b>EFFINGHAM</b>		Date Rec. by DOT	
Estimated Crash Date <b>03/01/2022</b> Time <b>10:29 AM</b>		Dispatch Date <b>03/01/2022</b> Time <b>10:31 AM</b>		Arrival Date <b>03/01/2022</b> Time <b>10:32 AM</b>		Total Number of Vehicles <b>2</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of	
Road of Occurrence <b>MCCALL RD</b>				At Its Intersection With <b>BLUE JAY RD</b>				<input type="checkbox"/> Corrected Report	
Not At Its Intersection Rpt <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West				Of _____				<input type="checkbox"/> Sup To Original	
Latitude (Y) <b>32.27729</b> (Format) <b>00.00000</b>				Longitude (X) <b>-81.26710167</b> (Format) <b>-00.00000</b>				<input type="checkbox"/> Hit and Run	

Unit # <b>1</b> <input type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>CAMACHO VEGA</b>	FIRST NAME <b>CARLOS</b>	MIDDLE NAME <b>EDIEL</b>	Unit # <b>2</b> <input type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>CARTER</b>	FIRST NAME <b>RICKEY</b>	MIDDLE NAME <b>BRYANT</b>
Address <b>79 POPLAR ST</b>				Address <b>275 JABEZ JONES RD</b>			
City <b>GUYTON</b>	State <b>GA</b>	Zip <b>31312</b>	DOB <b>02/15/2003</b>	City <b>GUYTON</b>	State <b>GA</b>	Zip <b>31312</b>	DOB <b>02/14/2005</b>
Driver's License No. <b>061497237</b>	Class <b>C</b>	State <b>GA</b>	Country <b>US</b>	Driver's License No. <b>061817154</b>	Class <b>D</b>	State <b>GA</b>	Country <b>US</b>
Insurance Co. <b>USAA</b>	Policy No. <b>023178037 G 07101</b>	Telephone No.		Insurance Co. <b>PROGRESSIVE</b>	Policy No. <b>906534846</b>	Telephone No. <b>9126657216</b>	
Year <b>2006</b>	Make <b>HONDA</b>	Model <b>CR-V</b>		Year <b>1996</b>	Make <b>FORD</b>	Model <b>THUNDERBIRD LX 2S</b>	
VIN <b>SHSRD78916U408372</b>		Vehicle Color <b>BEIGE</b>		VIN <b>1FALP62W5TH123589</b>		Vehicle Color <b>GREY</b>	
Tag # <b>TBK9753</b>	State <b>GA</b>	County <b>EFFINGHAM</b>	Year <b>2022</b>	Tag # <b>TAJ7070</b>	State <b>GA</b>	County <b>EFFINGHAM</b>	Year <b>2023</b>
Trailer Tag #	State	County	Year	Trailer Tag #	State	County	Year
<input type="checkbox"/> Same as Driver	Owner Last Name <b>RODRIGUEZ</b>	First <b>JOSE</b>	Middle <b>LUIS</b>	<input type="checkbox"/> Same as Driver	Owner Last Name <b>CARTER</b>	First <b>TONY</b>	Middle <b>BRYANT</b>
Address <b>79 POPLAR ST</b>				Address <b>275 JABEZ JONES RD</b>			
City <b>GUYTON</b>				City <b>GUYTON</b>			
State <b>GA</b>				State <b>GA</b>			
Zip <b>31312</b>				Zip <b>31312</b>			
Removed By: <b>SPRINGFIELD WRECKER</b>				Removed By: <b>SMITHEY'S WRECKER</b>			
<input type="checkbox"/> Request <input checked="" type="checkbox"/> List				<input type="checkbox"/> Request <input checked="" type="checkbox"/> List			
Alcohol Test: <b>2</b>	Tvpe:	Results:	Drug Test: <b>2</b>	Tvpe:	Results:	Drug Test: <b>2</b>	Tvpe:
First Harmful Event: <b>11</b>	Most Harmful Event: <b>11</b>		Operator/Ped Cond: <b>1</b>		First Harmful Event: <b>11</b>	Most Harmful Event: <b>11</b>	
Operator Contributing Factors: <b>4</b>				Operator Contributing Factors: <b>1</b>			
Vehicle Contributing Factors: <b>1</b>		Roadway Contributing Factors: <b>1</b>		Vehicle Contributing Factors: <b>1</b>		Roadway Contributing Factors: <b>1</b>	
Direction of Travel: <b>3</b>	Vehicle Maneuver: <b>1</b>	Non-Motor Maneuver:		Direction of Travel: <b>1</b>	Vehicle Maneuver: <b>10</b>	Non-Motor Maneuver:	
Vehicle Class: <b>1</b>	Vehicle Type: <b>11</b>	Vision Obscured: <b>1</b>		Vehicle Class: <b>1</b>	Vehicle Type: <b>1</b>	Vision Obscured: <b>1</b>	
Number of Occupants: <b>1</b>	Area of Initial Contact: <b>12</b>	Damage to Veh: <b>4</b>		Number of Occupants: <b>1</b>	Area of Initial Contact: <b>12</b>	Damage to Veh: <b>4</b>	
Traffic-Way Flow: <b>1</b>	Road Comp: <b>2</b>	Road Character: <b>5</b>		Traffic-Way Flow: <b>1</b>	Road Comp: <b>2</b>	Road Character: <b>5</b>	
Number of Lanes: <b>3</b>	Posted Speed: <b>55</b>	Work Zone: <b>0</b>		Number of Lanes: <b>3</b>	Posted Speed: <b>55</b>	Work Zone: <b>0</b>	
Traffic Control: <b>7</b>				Traffic Control: <b>7</b>			
Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Citation Information: Citation # <b>414500429</b> O.C.G.A. <b>40-6-71</b>							

COMMERCIAL MOTOR VEHICLES ONLY				COMMERCIAL MOTOR VEHICLES ONLY			
Carrier Name				Carrier Name			
Address		City	State	Zip	Address		City
U.S.D.O.T.#		No. of Axles	G.V.W.R.		U.S.D.O.T.#		No. of Axles
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No		Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate
C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?
Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No				Released? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If YES, Name of 4 Digit Number from Diamond or Box: _____				If YES, Name of 4 Digit Number from Diamond or Box: _____			
One Digit Number from Bottom of Diamond: _____				One Digit Number from Bottom of Diamond: _____			
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units				<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units			

COLLISION FIELDS

Manner of Collision: 1	Location at Area of Impact: 7	Weather: 1	Surface Condition: 1	Light Condition: 1
------------------------	-------------------------------	------------	----------------------	--------------------

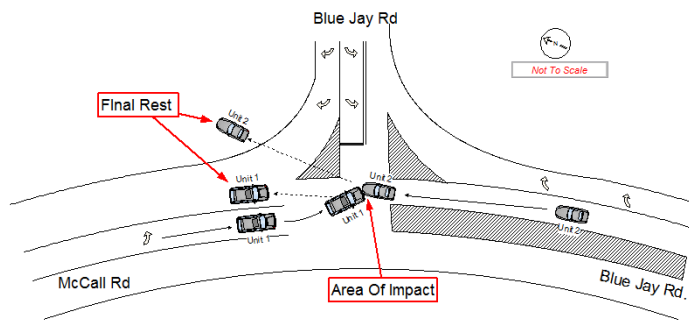
NARRATIVE

Vehicle 1 was executing a left turn to travel from McCall Rd. onto Blue Jay Rd. when it was struck by Vehicle 2 which was traveling east on Blue Jay Road at the intersection where Blue Jay Rd. transitions into McCall Rd. Vehicle 1 failed to yield to Vehicle 2 causing the crash. After impact, Vehicle 1 traveled North and came to rest facing South in the North/East Bound travel lane. Vehicle 2 continued through the intersection and came to final rest in a roadside ditch on the Northeast corner of the intersection. Both Vehicles received disabling damage to their front ends and had to be towed. Driver 1 complained of leg pain and was transported to received medical treatment. Driver 2 complained of hand pain and shoulder pain from airbag and seat belt deployments.

Driver 2 stated he was negotiating the curve at the intersection when he observed Vehicle 1 not yielding, he applied his brakes in an attempt to avoid the collision to no avail. Skid mark evidence at the scene supports this statement.

NARRATIVE CONTINUED ON SUPPLEMENT PAGE...

DIAGRAM



PROPERTY DAMAGE INFORMATION

Damage Other Than Vehicle:	Owner:
----------------------------	--------

WITNESS INFORMATION

Name (Last, First) OLSON, COLLIN	Address 418 PLANTATION WAY	City RINCON	State GA	Zip Code 31326	Telephone Number 9123984854
-------------------------------------	-------------------------------	----------------	-------------	-------------------	--------------------------------

OCCUPANT INFORMATION

1	Name (Last, First): CAMACHO VEGA, CARLOS					Address: 79 POPLAR ST GUYTON GA 31312				
	Aoe: 19	Sex: M	Unit #: 1	Position: 1	Safetv Ea: 5	Elected: 1	Extricated: 2	Air Baa: 5	Iniurv: 3	Taken for Treatment: 1
	Iniured Taken To: EFFINGHAM COUNTY		Bv: EFFINGHAM EMS		EMS Notified Time (Fatalitv Onlv):		EMS Arrival Time (Fatalitv Onlv):		Hospital Arrival Time (Fatalitv Onlv):	
2	Name (Last, First): CARTER, RICKEY					Address: 275 JABEZ JONES RD GUYTON GA 31312				
	Aoe: 17	Sex: M	Unit #: 2	Position: 1	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Baa: 1	Iniurv:	Taken for Treatment:
	Iniured Taken To:		Bv:		EMS Notified Time (Fatalitv Onlv):		EMS Arrival Time (Fatalitv Onlv):		Hospital Arrival Time (Fatalitv Onlv):	
3	Name (Last, First):					Address:				
	Aoe:	Sex:	Unit #:	Position:	Safetv Ea:	Elected:	Extricated:	Air Baa:	Iniurv:	Taken for Treatment:
	Iniured Taken To:		Bv:		EMS Notified Time (Fatalitv Onlv):		EMS Arrival Time (Fatalitv Onlv):		Hospital Arrival Time (Fatalitv Onlv):	
4	Name (Last, First):					Address:				
	Aoe:	Sex:	Unit #:	Position:	Safetv Ea:	Elected:	Extricated:	Air Baa:	Iniurv:	Taken for Treatment:
	Iniured Taken To:		Bv:		EMS Notified Time (Fatalitv Onlv):		EMS Arrival Time (Fatalitv Onlv):		Hospital Arrival Time (Fatalitv Onlv):	

ADMINISTRATIVE

Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.			
Report Bv: MCKIE, JAMES D	Agency: EFFINGHAM COUNTY	Report Date: 03/01/2022	Checked By: MUNDY, BRIAN	Date Checked: 03/07/2022	

Agency Case Number: 2203-0103

Estimated Crash Date: 03/01/2022

MCKIE, JAMES D

MCKIE, JAMES D

## NARRATIVE

Vehicle 1 was executing a left turn to travel from McCall Rd. onto Blue Jay Rd. when it was struck by Vehicle 2 which was traveling east on Blue Jay Road at the intersection where Blue Jay Rd. transitions into McCall Rd. Vehicle 1 failed to yield to Vehicle 2 causing the crash. After impact, Vehicle 1 traveled North and came to rest facing South in the North/East Bound travel lane. Vehicle 2 continued through the intersection and came to final rest in a roadside ditch on the Northeast corner of the intersection. Both Vehicles received disabling damage to their front ends and had to be towed. Driver 1 complained of leg pain and was transported to received medical treatment. Driver 2 complained of hand pain and shoulder pain from airbag and seat belt deployments.

Driver 2 stated he was negotiating the curve at the intersection when he observed Vehicle 1 not yielding, he applied his brakes in an attempt to avoid the collision to no avail. Skid mark evidence at the scene supports this statement.

Witness 1 was traveling directly behind Vehicle 1 and stated that Vehicle 1 entered the turn lane abruptly and immediately turned left, directly into the path of Vehicle 2.

Driver 1 was cited for failure to yield while turning left.

## ADDITIONAL CITATION INFORMATION

Unit #:

Citation # 414500429

O.C.G.A. 40-6-71

## ADDITIONAL OCCUPANT INFORMATION

## ADDITIONAL WITNESS INFORMATION

Agency Case Number <b>2203-0211</b>		Agency NCIC Number <b>GA0510000</b>		<b>GEORGIA</b> MOTOR VEHICLE CRASH REPORT		County <b>EFFINGHAM</b>		Date Rec. by DOT	
Estimated Crash Date <b>03/02/2022</b> Time <b>06:55 AM</b>		Dispatch Date <b>03/02/2022</b> Time <b>06:57 AM</b>		Arrival Date <b>03/02/2022</b> Time <b>07:04 AM</b>		Total Number of Vehicles <b>2</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of <b>SPRINGFIELD</b>	
Road of Occurrence <b>BLUEJAY RD</b>				At Its Intersection With <b>MCCALL RD</b>				<input type="checkbox"/> Corrected Report	
Not At Its Intersection Rpt <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West				Of _____				<input type="checkbox"/> Sup To Original	
Latitude (Y) <b>32.28459333</b> (Format) <b>00.00000</b>				Longitude (X) <b>-81.23327667</b> (Format) <b>-00.00000</b>				<input type="checkbox"/> Hit and Run	

Unit # <b>1</b> <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME <b>BROWN</b> FIRST NAME <b>RONNIE</b> MIDDLE NAME <b>KEN</b> Address <b>123 OAKWOOD CT</b> <input type="checkbox"/> Susp At Fault	Unit # <b>2</b> <input type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME <b>PHILPOT</b> FIRST NAME <b>CARTER</b> MIDDLE NAME Address <b>131 JOYCE CV</b> <input type="checkbox"/> Susp At Fault
City <b>SPRINGFIELD</b> State <b>GA</b> Zip <b>31329-461</b> DOB <b>09/12/2005</b> Driver's License No. <b>070162816</b> Class <b>GA</b> State <b>US</b> Country <b>US</b> Insurance Co. <b>PROGRESSIVE</b> Policy No. <b>925143328</b> Telephone No. <b>9128001494</b>	City <b>GUYTON</b> State <b>GA</b> Zip <b>31312-614</b> DOB <b>08/24/2005</b> Driver's License No. <b>062018763</b> Class <b>GA</b> State <b>US</b> Country <b>US</b> Insurance Co. <b>STATE FARM</b> Policy No. <b>1128471383</b> Telephone No. <b>4046973958</b>
Year <b>2015</b> Make <b>DODGE</b> Model <b>CHARGER</b> <b>4S</b> VIN <b>2C3CDXBG5FH771261</b> Vehicle Color <b>GRA</b> Tag # <b>CLQ4254</b> State <b>GA</b> County <b>EFFINGHAM</b> Year <b>2022</b> Trailer Tag # _____ State _____ County _____ Year _____	Year <b>2007</b> Make <b>HONDA</b> Model <b>ACCORD U.S. EX</b> <b>4S</b> VIN <b>1HGCM56857A126386</b> Vehicle Color <b>BLU</b> Tag # <b>RCJ3565</b> State <b>GA</b> County <b>EFFINGHAM</b> Year <b>2022</b> Trailer Tag # _____ State _____ County _____ Year _____
<input type="checkbox"/> Same as Driver Owner Last Name <b>GRIFFIN</b> First <b>KENDRIA</b> Middle <b>SAMONE</b> Address <b>192 QUAIL RUN CIR</b> City <b>SPRINGFIELD</b> State <b>GA</b> Zip <b>31329-610</b> Removed By: <b>SMITHS TOWING</b> <input checked="" type="checkbox"/> Request <input type="checkbox"/> List	<input type="checkbox"/> Same as Driver Owner Last Name <b>NORTON PHILPOT</b> First <b>JUSTIN</b> Middle <b>DANIEL</b> Address <b>131 JOYCE CV</b> City <b>GUYTON</b> State <b>GA</b> Zip <b>31312-614</b> Removed By: <b>SPRINGFIELD TOWING</b> <input type="checkbox"/> Request <input type="checkbox"/> List
Alcohol Test: <b>2</b> Tvpe: _____ Results: _____ Drug Test: <b>2</b> Tvpe: _____ Results: _____ First Harmful Event: <b>11</b> Most Harmful Event: <b>11</b> Operator/Ped Cond: <b>1</b> Operator Contributing Factors: <b>4</b> Vehicle Contributing Factors: <b>1</b> Roadway Contributing Factors: <b>1</b> Direction of Travel: <b>2</b> Vehicle Maneuver: <b>1</b> Non-Motor Maneuver: _____ Vehicle Class: <b>1</b> Vehicle Type: <b>1</b> Vision Obscured: <b>1</b> Number of Occupants: <b>1</b> Area of Initial Contact: <b>11</b> Damage to Veh: <b>3</b> Traffic-Way Flow: <b>1</b> Road Comp: <b>2</b> Road Character: <b>4</b> Number of Lanes: <b>2</b> Posted Speed: <b>45</b> Work Zone: <b>0</b> Traffic Control: <b>7</b> Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Alcohol Test: <b>2</b> Tvpe: _____ Results: _____ Drug Test: <b>2</b> Tvpe: _____ Results: _____ First Harmful Event: <b>11</b> Most Harmful Event: <b>11</b> Operator/Ped Cond: <b>1</b> Operator Contributing Factors: <b>1</b> Vehicle Contributing Factors: <b>1</b> Roadway Contributing Factors: <b>1</b> Direction of Travel: <b>1</b> Vehicle Maneuver: <b>5</b> Non-Motor Maneuver: _____ Vehicle Class: <b>1</b> Vehicle Type: <b>1</b> Vision Obscured: <b>1</b> Number of Occupants: <b>1</b> Area of Initial Contact: <b>9</b> Damage to Veh: <b>4</b> Traffic-Way Flow: <b>1</b> Road Comp: <b>2</b> Road Character: <b>4</b> Number of Lanes: <b>2</b> Posted Speed: <b>45</b> Work Zone: <b>0</b> Traffic Control: <b>7</b> Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Citation Information:	

<b>COMMERCIAL MOTOR VEHICLES ONLY</b>						<b>COMMERCIAL MOTOR VEHICLES ONLY</b>						
Carrier Name			City			State			Zip			
U.S.D.O.T.#			No. of Axles			G.V.W.R.			G.V.W.R.			
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable	<input type="checkbox"/> Yes <input type="checkbox"/> No				Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable	<input type="checkbox"/> Yes <input type="checkbox"/> No
C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No				C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No				Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Released?	<input type="checkbox"/> Yes <input type="checkbox"/> No							Released?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If YES, Name of 4 Digit Number from Diamond or Box: _____						If YES, Name of 4 Digit Number from Diamond or Box: _____						
One Digit Number from Bottom of Diamond: _____						One Digit Number from Bottom of Diamond: _____						
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units						<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units						



**COLLISION FIELDS**

Manner of Collision: <b>1</b>	Location at Area of Impact: <b>7</b>	Weather: <b>1</b>	Surface Condition: <b>1</b>	Light Condition: <b>1</b>
-------------------------------	--------------------------------------	-------------------	-----------------------------	---------------------------

**NARRATIVE**

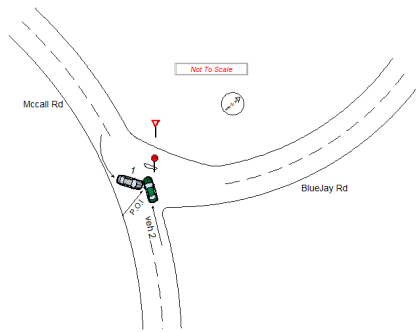
Driver #1 was attempting to make a left turn onto Bluejay Rd when it failed to yield to Driver #2 while turning left.

Driver #2 was traveling north when he stated driver #1 turned in front of him, causing the crash.

Neither driver was complaint of any injuries.

Based on the physical evidence and both statements, I determined Driver#1 to be at fault for failure to yield while turning left.

**DIAGRAM**



**PROPERTY DAMAGE INFORMATION**

Damage Other Than Vehicle:	Owner:
----------------------------	--------

**WITNESS INFORMATION**

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

**OCCUPANT INFORMATION**

1	Name (Last, First): <b>BROWN, RONNIE</b>					Address: <b>123 OAKWOOD CT SPRINGFIELD GA 31329-461</b>				
	Aoe: <b>16</b>	Sex: <b>M</b>	Unit #: <b>1</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Elected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>2</b>	Iniurv: <b>0</b>	Taken for Treatment: <b>2</b>
	Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
2	Name (Last, First): <b>PHILPOT, CARTER</b>					Address: <b>131 JOYCE CV GUYTON GA 31312-614</b>				
	Aoe: <b>16</b>	Sex: <b>M</b>	Unit #: <b>2</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Elected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>2</b>	Iniurv: <b>0</b>	Taken for Treatment: <b>2</b>
	Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
3	Name (Last, First):					Address:				
	Aoe:	Sex:	Unit #:	Position:	Safetv Ea:	Elected:	Extricated:	Air Baa:	Iniurv:	Taken for Treatment:
	Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
4	Name (Last, First):					Address:				
	Aoe:	Sex:	Unit #:	Position:	Safetv Ea:	Elected:	Extricated:	Air Baa:	Iniurv:	Taken for Treatment:
	Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	

**ADMINISTRATIVE**

Photos Taken: <input type="checkbox"/> Yes <input type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.			
Report By: <b>LANG, ADAM MICHAEL</b>	Agency: <b>EFFINGHAM COUNTY</b>	Report Date: <b>03/02/2022</b>	Checked By: <b>HANDSHUMAKER, DANIEL</b>	Date Checked: <b>03/08/2022</b>	

Agency Case Number <b>2203-0652</b>		Agency NCIC Number <b>GA0510000</b>		<b>GEORGIA</b> MOTOR VEHICLE CRASH REPORT		County <b>EFFINGHAM</b>		Date Rec. by DOT	
Estimated Crash Date <b>03/04/2022</b> Time <b>03:40 PM</b>		Dispatch Date <b>03/04/2022</b> Time <b>03:41 PM</b>		Arrival Date <b>03/04/2022</b> Time <b>03:47 PM</b>		Total Number of Vehicles <b>2</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of	
Road of Occurrence <b>MCCALL RD</b>				At Its Intersection With <b>BLUE JAY RD</b>				<input type="checkbox"/> Corrected Report	
Not At Its Intersection Rpt <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West				Of _____				<input type="checkbox"/> Sup To Original	
Latitude (Y) <b>32.27725333</b> (Format) <b>00.00000</b>				Longitude (X) <b>-81.26706833</b> (Format) <b>-00.00000</b>				<input type="checkbox"/> Hit and Run	

<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Unit # <b>1</b></td> <td><input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike</td> <td>LAST NAME <b>GREEN</b></td> <td>FIRST NAME <b>ETHAN</b></td> <td>MIDDLE NAME <b>DANIEL</b></td> </tr> <tr> <td colspan="5">Address <b>2 VERSAILLES CT</b></td> </tr> <tr> <td colspan="2">City <b>SAVANNAH</b></td> <td>State <b>GA</b></td> <td>Zip <b>31419</b></td> <td>DOB <b>01/14/2000</b></td> </tr> <tr> <td colspan="2">Driver's License No. <b>059411574</b></td> <td>Class <b>C</b></td> <td>State <b>GA</b></td> <td>Country <b>US</b></td> </tr> <tr> <td colspan="2">Insurance Co. <b>UTICA NATIONAL</b></td> <td>Policy No. <b>5495557</b></td> <td colspan="2">Telephone No. <b>9122336764</b></td> </tr> <tr> <td>Year <b>2015</b></td> <td>Make <b>FORD</b></td> <td colspan="3">Model <b>TRANSIT T-250</b></td> </tr> <tr> <td colspan="2">VIN <b>1FTNR1CM2FKA14270</b></td> <td colspan="3">Vehicle Color <b>WHITE</b></td> </tr> <tr> <td>Tag # <b>PWU5994</b></td> <td>State <b>GA</b></td> <td>County <b>CHATHAM</b></td> <td colspan="2">Year <b>2022</b></td> </tr> <tr> <td>Trailer Tag #</td> <td>State</td> <td>County</td> <td colspan="2">Year</td> </tr> <tr> <td colspan="5"><input type="checkbox"/> Susp At Fault</td> </tr> </table>	Unit # <b>1</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>GREEN</b>	FIRST NAME <b>ETHAN</b>	MIDDLE NAME <b>DANIEL</b>	Address <b>2 VERSAILLES CT</b>					City <b>SAVANNAH</b>		State <b>GA</b>	Zip <b>31419</b>	DOB <b>01/14/2000</b>	Driver's License No. <b>059411574</b>		Class <b>C</b>	State <b>GA</b>	Country <b>US</b>	Insurance Co. <b>UTICA NATIONAL</b>		Policy No. <b>5495557</b>	Telephone No. <b>9122336764</b>		Year <b>2015</b>	Make <b>FORD</b>	Model <b>TRANSIT T-250</b>			VIN <b>1FTNR1CM2FKA14270</b>		Vehicle Color <b>WHITE</b>			Tag # <b>PWU5994</b>	State <b>GA</b>	County <b>CHATHAM</b>	Year <b>2022</b>		Trailer Tag #	State	County	Year		<input type="checkbox"/> Susp At Fault					<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Unit # <b>2</b></td> <td><input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike</td> <td>LAST NAME <b>MALLORY</b></td> <td>FIRST NAME <b>BRIAN</b></td> <td>MIDDLE NAME <b>M</b></td> </tr> <tr> <td colspan="5">Address <b>916 NEASE RD</b></td> </tr> <tr> <td colspan="2">City <b>GUYTON</b></td> <td>State <b>GA</b></td> <td>Zip <b>31312</b></td> <td>DOB <b>07/05/1968</b></td> </tr> <tr> <td colspan="2">Driver's License No. <b>054530400</b></td> <td>Class <b>CM</b></td> <td>State <b>GA</b></td> <td>Country <b>US</b></td> </tr> <tr> <td colspan="2">Insurance Co. <b>USAA</b></td> <td>Policy No. <b>00495 98 07C 71051</b></td> <td colspan="2">Telephone No. <b>9126639405</b></td> </tr> <tr> <td>Year <b>2007</b></td> <td>Make <b>DODGE</b></td> <td colspan="3">Model <b>RAM TRUCK 2500</b></td> </tr> <tr> <td colspan="2">VIN <b>3D7KS29A47G795365</b></td> <td colspan="3">Vehicle Color <b>WHITE</b></td> </tr> <tr> <td>Tag # <b>PXK8623</b></td> <td>State <b>CT</b></td> <td>County <b>EFFINGHAM</b></td> <td colspan="2">Year <b>2022</b></td> </tr> <tr> <td>Trailer Tag #</td> <td>State</td> <td>County</td> <td colspan="2">Year</td> </tr> <tr> <td colspan="5"><input type="checkbox"/> Susp At Fault</td> </tr> </table>	Unit # <b>2</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>MALLORY</b>	FIRST NAME <b>BRIAN</b>	MIDDLE NAME <b>M</b>	Address <b>916 NEASE RD</b>					City <b>GUYTON</b>		State <b>GA</b>	Zip <b>31312</b>	DOB <b>07/05/1968</b>	Driver's License No. <b>054530400</b>		Class <b>CM</b>	State <b>GA</b>	Country <b>US</b>	Insurance Co. <b>USAA</b>		Policy No. <b>00495 98 07C 71051</b>	Telephone No. <b>9126639405</b>		Year <b>2007</b>	Make <b>DODGE</b>	Model <b>RAM TRUCK 2500</b>			VIN <b>3D7KS29A47G795365</b>		Vehicle Color <b>WHITE</b>			Tag # <b>PXK8623</b>	State <b>CT</b>	County <b>EFFINGHAM</b>	Year <b>2022</b>		Trailer Tag #	State	County	Year		<input type="checkbox"/> Susp At Fault				
Unit # <b>1</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>GREEN</b>	FIRST NAME <b>ETHAN</b>	MIDDLE NAME <b>DANIEL</b>																																																																																																	
Address <b>2 VERSAILLES CT</b>																																																																																																					
City <b>SAVANNAH</b>		State <b>GA</b>	Zip <b>31419</b>	DOB <b>01/14/2000</b>																																																																																																	
Driver's License No. <b>059411574</b>		Class <b>C</b>	State <b>GA</b>	Country <b>US</b>																																																																																																	
Insurance Co. <b>UTICA NATIONAL</b>		Policy No. <b>5495557</b>	Telephone No. <b>9122336764</b>																																																																																																		
Year <b>2015</b>	Make <b>FORD</b>	Model <b>TRANSIT T-250</b>																																																																																																			
VIN <b>1FTNR1CM2FKA14270</b>		Vehicle Color <b>WHITE</b>																																																																																																			
Tag # <b>PWU5994</b>	State <b>GA</b>	County <b>CHATHAM</b>	Year <b>2022</b>																																																																																																		
Trailer Tag #	State	County	Year																																																																																																		
<input type="checkbox"/> Susp At Fault																																																																																																					
Unit # <b>2</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>MALLORY</b>	FIRST NAME <b>BRIAN</b>	MIDDLE NAME <b>M</b>																																																																																																	
Address <b>916 NEASE RD</b>																																																																																																					
City <b>GUYTON</b>		State <b>GA</b>	Zip <b>31312</b>	DOB <b>07/05/1968</b>																																																																																																	
Driver's License No. <b>054530400</b>		Class <b>CM</b>	State <b>GA</b>	Country <b>US</b>																																																																																																	
Insurance Co. <b>USAA</b>		Policy No. <b>00495 98 07C 71051</b>	Telephone No. <b>9126639405</b>																																																																																																		
Year <b>2007</b>	Make <b>DODGE</b>	Model <b>RAM TRUCK 2500</b>																																																																																																			
VIN <b>3D7KS29A47G795365</b>		Vehicle Color <b>WHITE</b>																																																																																																			
Tag # <b>PXK8623</b>	State <b>CT</b>	County <b>EFFINGHAM</b>	Year <b>2022</b>																																																																																																		
Trailer Tag #	State	County	Year																																																																																																		
<input type="checkbox"/> Susp At Fault																																																																																																					
<input type="checkbox"/> Same as Driver Owner Last Name <b>INCORPORATED</b> First <b>SRB</b> Middle Address <b>4131 OGEECHEE RD STE 131</b> City <b>SAVANNAH</b> State <b>GA</b> Zip <b>31405</b> Removed By: <b>DRIVER</b> <input type="checkbox"/> Request <input type="checkbox"/> List					<input checked="" type="checkbox"/> Same as Driver Owner Last Name <b>MALLORY</b> First <b>BRIAN</b> Middle <b>M</b> Address <b>916 NEASE RD</b> City <b>GUYTON</b> State <b>GA</b> Zip <b>31312</b> Removed By: <b>SMITHEY'S WRECKER SERVICE</b> <input type="checkbox"/> Request <input checked="" type="checkbox"/> List																																																																																																
Alcohol Test: <b>2</b>		Tvpe:		Results:		Drug Test: <b>2</b>		Tvpe:		Results:																																																																																											
First Harmful Event: <b>11</b>		Most Harmful Event: <b>11</b>		Operator/Ped Cond: <b>1</b>		First Harmful Event: <b>11</b>		Most Harmful Event: <b>11</b>		Operator/Ped Cond: <b>1</b>																																																																																											
Operator Contributing Factors: <b>4</b>						Operator Contributing Factors: <b>1</b>																																																																																															
Vehicle Contributing Factors: <b>1</b>			Roadway Contributing Factors: <b>4</b>			Vehicle Contributing Factors: <b>1</b>			Roadway Contributing Factors: <b>1</b>																																																																																												
Direction of Travel: <b>3</b>		Vehicle Maneuver: <b>1</b>		Non-Motor Maneuver:		Direction of Travel: <b>1</b>		Vehicle Maneuver: <b>10</b>		Non-Motor Maneuver:																																																																																											
Vehicle Class: <b>1</b>		Vehicle Type: <b>10</b>		Vision Obscured: <b>1</b>		Vehicle Class: <b>1</b>		Vehicle Type: <b>2</b>		Vision Obscured: <b>1</b>																																																																																											
Number of Occupants: <b>1</b>		Area of Initial Contact: <b>11</b>		Damage to Veh: <b>3</b>		Number of Occupants: <b>1</b>		Area of Initial Contact: <b>11</b>		Damage to Veh: <b>4</b>																																																																																											
Traffic-Way Flow: <b>1</b>		Road Comp: <b>2</b>		Road Character: <b>5</b>		Traffic-Way Flow: <b>1</b>		Road Comp: <b>2</b>		Road Character: <b>5</b>																																																																																											
Number of Lanes: <b>3</b>		Posted Speed: <b>55</b>		Work Zone: <b>0</b>		Number of Lanes: <b>3</b>		Posted Speed: <b>55</b>		Work Zone: <b>0</b>																																																																																											
Traffic Control: <b>7</b> Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						Traffic Control: <b>7</b> Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																																																															
Citation Information: Citation # <b>414500441</b> O.C.G.A. <b>40-6-71</b>						Citation Information:																																																																																															

COMMERCIAL MOTOR VEHICLES ONLY						COMMERCIAL MOTOR VEHICLES ONLY											
Carrier Name						Carrier Name											
Address		City		State		Zip		Address		City		State		Zip			
U.S.D.O.T.#			No. of Axles			G.V.W.R.			U.S.D.O.T.#			No. of Axles			G.V.W.R.		
Cargo Body Type		Vehicle Config.		<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate		Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No		Cargo Body Type		Vehicle Config.		<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate		Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No			
C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No						Released? <input type="checkbox"/> Yes <input type="checkbox"/> No											
If YES, Name of 4 Digit Number from Diamond or Box: _____						If YES, Name of 4 Digit Number from Diamond or Box: _____											
One Digit Number from Bottom of Diamond: _____						One Digit Number from Bottom of Diamond: _____											
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units						<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units											

**COLLISION FIELDS**

Manner of Collision: 1	Location at Area of Impact: 7	Weather: 1	Surface Condition: 1	Light Condition: 1
------------------------	-------------------------------	------------	----------------------	--------------------

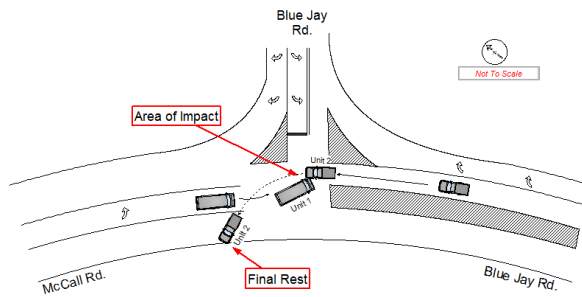
**NARRATIVE**

Vehicle 1 was executing a left turn to travel from McCall Rd. onto Blue Jay Rd. when it was struck by Vehicle 2 which was traveling east on Blue Jay Road at the intersection where Blue Jay Rd. transitions into McCall Rd. Vehicle 1 failed to yield to Vehicle 2 causing the crash. Vehicle 1 came to rest in the intersection while Vehicle 2 gyrated and came to rest in the south bound travel lane. Vehicle 1 received damage to the front end and was able to be driven away after dislocated plastic was removed from the bumper/under carriage areas. Vehicle 2 received disabling damage to the driver side front wheel and had to be towed.

Driver 1 reported no injuries. Driver 2 complained of neck, back, and leg pain and was transported for treatment.

Driver 1 was cited for failure to yield while turning left.

**DIAGRAM**



**PROPERTY DAMAGE INFORMATION**

Damage Other Than Vehicle:	Owner:
----------------------------	--------

**WITNESS INFORMATION**

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

**OCCUPANT INFORMATION**

Name (Last, First):		Address			
1	GREEN, ETHAN	2 VERSAILLES CT SAVANNAH GA 31419			
Age:	22	Sex:	M	Unit #:	1
Position:	1	Safetv Ea:	3	Eiected:	1
Extricated:	2	Air Baa:	2	Iniurv:	0
Taken for Treatment:	2				
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):	
				EMS Arrival Time (Fatality Only):	
				Hospital Arrival Time (Fatality Only):	
2	MALLORY, BRIAN	916 NEASE RD GUYTON GA 31312			
Age:	53	Sex:	M	Unit #:	2
Position:	1	Safetv Ea:	3	Eiected:	1
Extricated:	2	Air Baa:	2	Iniurv:	3
Taken for Treatment:	1				
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):	
EFFINGHAM COUNTY		EFFINGHAM EMS		EMS Arrival Time (Fatality Only):	
				Hospital Arrival Time (Fatality Only):	
3					
Age:		Sex:		Unit #:	
Position:		Safetv Ea:		Eiected:	
Extricated:		Air Baa:		Iniurv:	
Taken for Treatment:					
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):	
				EMS Arrival Time (Fatality Only):	
				Hospital Arrival Time (Fatality Only):	
4					
Age:		Sex:		Unit #:	
Position:		Safetv Ea:		Eiected:	
Extricated:		Air Baa:		Iniurv:	
Taken for Treatment:					
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):	
				EMS Arrival Time (Fatality Only):	
				Hospital Arrival Time (Fatality Only):	

**ADMINISTRATIVE**

Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.	
Report Bv: MCKIE, JAMES D	Agency: EFFINGHAM COUNTY	Report Date: 03/04/2022	Checked Bv: MUNDY, BRIAN
			Date Checked: 03/07/2022

Agency Case Number 2202-2635		Agency NCIC Number GA0510000		GEORGIA MOTOR VEHICLE CRASH REPORT				County EFFINGHAM			Date Rec. by DOT												
Estimated Crash Date 02/16/2022 Time 03:57 PM		Dispatch Date 02/16/2022 Time 03:58 PM		Arrival Date 02/16/2022 Time 04:04 PM		Total Number of Vehicles 2 Injuries 0 Fatalities 0			Inside City Of														
Road of Occurrence MCCALL ROAD NORTH				At Its Intersection With BLUE JAY ROAD				<input type="checkbox"/> Corrected Report															
Not At Its Intersection Rpt <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West				Of _____				<input type="checkbox"/> Sup To Original															
Latitude (Y) (Format) 32.27732667 00.00000				Longitude (X) (Format) -81.267075 -00.00000				<input type="checkbox"/> Hit and Run															
Unit # <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME FIRST NAME MIDDLE NAME 1 HARDING LARISA SHAYLYNN Address <input checked="" type="checkbox"/> Susp At Fault 42 LEISURE DR						Unit # <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME FIRST NAME MIDDLE NAME 2 VANCE BETH AMBER Address <input type="checkbox"/> Susp At Fault 102 FLETCHER LN																	
City GARDEN CIT			State GA		Zip 31408-272		DOB 12/01/1998		City CLYO			State GA		Zip 31303-290		DOB 02/28/1967							
Driver's License No. 061647248			Class GA		State US		Country US		Driver's License No. 051352223			Class C		State GA		Country US							
Insurance Co. MENDOTA INS CO			Policy No. GA0012197M			Telephone No. 5806471319			Insurance Co. STATE FARM			Policy No. 1122368552			Telephone No. 9126570660								
Year 2017		Make NISSAN		Model ALTIMA 4S		Year 2018		Make TOYOTA		Model COROLLA L LE X 4S		Year 2018		Make TOYOTA		Model COROLLA L LE X 4S							
VIN 1N4BL3AP0HC175877				Vehicle Color UNK				VIN 2T1BURHE0JC000668				Vehicle Color RED											
Tag # P305832		State GA		County CHATHAM		Year 2022		Tag # CHR3665		State GA		County EFFINGHAM		Year 2023									
Trailer Tag #		State		County		Year		Trailer Tag #		State		County		Year									
<input type="checkbox"/> Same as Driver Owner Last Name ALVAREZ				First HADI		Middle NICOLE		<input checked="" type="checkbox"/> Same as Driver Owner Last Name VANCE				First BETH		Middle AMBER									
Address 42 LEISURE DR				City SAVANNAH				State GA		Zip 31408-272		Address 102 FLETCHER LN				City CLYO		State GA		Zip 31303-290			
Removed By: RAHN'S				<input type="checkbox"/> Request <input checked="" type="checkbox"/> List				Removed By: SMITHEY'S				<input type="checkbox"/> Request <input checked="" type="checkbox"/> List											
Alcohol Test: 2		Tvpe:		Results:		Drug Test: 2		Tvpe:		Results:		Alcohol Test: 2		Tvpe:		Results:		Drug Test: 2		Tvpe:		Results:	
First Harmful Event: 11		Most Harmful Event: 11		Operator/Ped Cond: 1		First Harmful Event: 11		Most Harmful Event: 11		Operator/Ped Cond: 1													
Operator Contributing Factors: 4 13 17				Operator Contributing Factors: 1																			
Vehicle Contributing Factors: 1				Roadway Contributing Factors: 1				Vehicle Contributing Factors: 1				Roadway Contributing Factors: 1											
Direction of Travel: 2		Vehicle Maneuver: 1		Non-Motor Maneuver:		Direction of Travel: 1		Vehicle Maneuver: 5		Non-Motor Maneuver:													
Vehicle Class: 1		Vehicle Type: 1		Vision Obscured: 1		Vehicle Class: 1		Vehicle Type: 1		Vision Obscured: 1													
Number of Occupants: 1		Area of Initial Contact: 12		Damage to Veh: 4		Number of Occupants: 1		Area of Initial Contact: 12		Damage to Veh: 4													
Traffic-Way Flow: 1		Road Comp: 2		Road Character: 4		Traffic-Way Flow: 1		Road Comp: 2		Road Character: 4													
Number of Lanes: 3		Posted Speed: 55		Work Zone: 1		Number of Lanes: 3		Posted Speed: 55		Work Zone: 1													
Traffic Control: 7				Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Traffic Control: 7				Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
Citation Information: Citation # 415500569 O.C.G.A. 40-5-20 Citation # 415500570 O.C.G.A. 40-6-71				Citation Information: Citation # 415500569 O.C.G.A. 40-5-20 Citation # 415500570 O.C.G.A. 40-6-71																			
COMMERCIAL MOTOR VEHICLES ONLY												COMMERCIAL MOTOR VEHICLES ONLY											
Carrier Name						Carrier Name																	
Address		City		State		Zip		Address		City		State		Zip									
U.S.D.O.T.#			No. of Axles			G.V.W.R.			U.S.D.O.T.#			No. of Axles			G.V.W.R.								
Cargo Body Type		Vehicle Config.		<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate		Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No		Cargo Body Type		Vehicle Config.		<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate		Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No									
C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No		Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No		Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No				Released? <input type="checkbox"/> Yes <input type="checkbox"/> No																			
If YES, Name of 4 Digit Number from Diamond or Box: _____ One Digit Number from Bottom of Diamond: _____				If YES, Name of 4 Digit Number from Diamond or Box: _____ One Digit Number from Bottom of Diamond: _____																			
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units				<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units																			

COLLISION FIELDS

Manner of Collision: 1	Location at Area of Impact: 7	Weather: 1	Surface Condition: 1	Light Condition: 1
------------------------	-------------------------------	------------	----------------------	--------------------

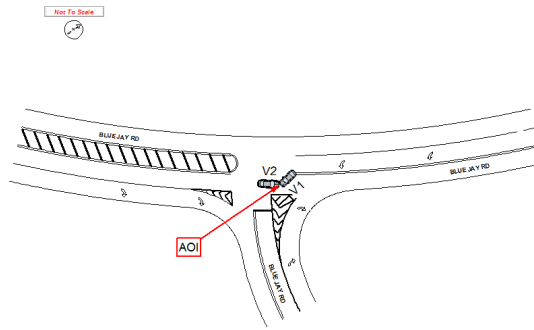
NARRATIVE

Vehicle 1 was in the left turn lane of McCall Road southbound to Blue Jay Road and turned in front of Vehicle 2, Northbound on McCall Road. Both vehicles struck in the intersection and came to an uncontrolled rest there.

Driver 1 told me she did not know what happened, the last thing she remembered was sitting in the turn lane. A check of her name and date of birth through GCIC showed she was denied a driver's license in Georgia. Driver 2 stated was just driving when the silver car turned in front of her and she did not have time to react.

Both driver's were transported to Effingham Hospital. Driver 1 left AMA immediately upon arrival. Driver 2 had injuries to her left wrist and chest as well as a seat belt abrasion to her left shoulder.

DIAGRAM



PROPERTY DAMAGE INFORMATION

Damage Other Than Vehicle:	Owner:
----------------------------	--------

WITNESS INFORMATION

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

OCCUPANT INFORMATION

1	Name (Last, First): <b>HARDING, LARISA</b>					Address: <b>42 LEISURE DR GARDEN CIT GA 31408-272</b>				
	Age: <b>23</b>	Sex: <b>F</b>	Unit #: <b>1</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>1</b>	Iniurv: <b>4</b>	Taken for Treatment: <b>1</b>
Iniured Taken To: <b>EFFINGHAM HOSPITAL</b>		Bv: <b>EMS UNIT 3</b>		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):		
2	Name (Last, First): <b>VANCE, BETH</b>					Address: <b>102 FLETCHER LN CLYO GA 31303-290</b>				
	Age: <b>54</b>	Sex: <b>F</b>	Unit #: <b>2</b>	Position: <b>1</b>	Safetv Ea: <b>3</b>	Eiected: <b>1</b>	Extricated: <b>2</b>	Air Baa: <b>5</b>	Iniurv: <b>3</b>	Taken for Treatment: <b>1</b>
Iniured Taken To: <b>EFFINGHAM HOSPITAL</b>		Bv: <b>EMS UNIT 3</b>		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):		
3	Name (Last, First):					Address:				
	Age:	Sex:	Unit #:	Position:	Safetv Ea:	Eiected:	Extricated:	Air Baa:	Iniurv:	Taken for Treatment:
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):		
4	Name (Last, First):					Address:				
	Age:	Sex:	Unit #:	Position:	Safetv Ea:	Eiected:	Extricated:	Air Baa:	Iniurv:	Taken for Treatment:
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):		

ADMINISTRATIVE

Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.			
Report Bv: <b>GROVENSTEIN, CALEB</b>	Agency: <b>EFFINGHAM COUNTY</b>	Report Date: <b>02/16/2022</b>	Checked Bv: <b>GROVENSTEIN, CALEB</b>	Date Checked: <b>02/19/2022</b>	

Agency Case Number <b>2202-3938</b>		Agency NCIC Number <b>GA0510000</b>		<b>GEORGIA</b> MOTOR VEHICLE CRASH REPORT		County <b>EFFINGHAM</b>		Date Rec. by DOT
Estimated Crash Date <b>02/24/2022</b> Time <b>11:20 AM</b>		Dispatch Date <b>02/24/2022</b> Time <b>11:20 AM</b>		Arrival Date <b>02/24/2022</b> Time <b>11:30 AM</b>		Total Number of Vehicles <b>1</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of
Road of Occurrence <b>BLUE JAY</b>				At Its Intersection With <b>MCCALL ROAD</b>				<input type="checkbox"/> Corrected Report
Not At Its Intersection Rnt _____ <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West				Of _____				<input type="checkbox"/> Sup To Original
Latitude (Y) <b>32.14321167</b> (Format) <b>00.00000</b>				Longitude (X) <b>-81.37803667</b> (Format) <b>-00.00000</b>				<input checked="" type="checkbox"/> Hit and Run

Unit # <b>1</b>	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME <b>SMITH</b>	FIRST NAME <b>MARTHA</b>	MIDDLE NAME <b>WILLIS</b>
<input type="checkbox"/> Susp At Fault				
Address <b>216 TIMBERGATE LN</b>				
City <b>RINCON</b>	State <b>GA</b>	Zip <b>31326-383</b>	DOB <b>02/09/1941</b>	
Driver's License No. <b>000049591772</b>	Class <b>C</b>	State <b>GA</b>	Country <b>US</b>	
Insurance Co. <b>STATE FARM</b>	Policy No. <b>1145430664</b>	Telephone No. <b>9127546164</b>		
Year <b>2007</b>	Make <b>HONDA</b>	Model <b>CR-V SW</b>		
VIN <b>JHLRE38317C005891</b>		Vehicle Color <b>WHI</b>		
Taq # <b>PTW5637</b>	State <b>GA</b>	County <b>EFFINGHAM</b>	Year <b>2023</b>	
Trailer Taq #	State	County	Year	
<input type="checkbox"/> Same as Driver	Owner Last Name <b>SMITH</b>	First <b>MARTHA</b>	Middle <b>WILLIS</b>	
Address <b>216 TIMBERGATE LN</b>				
City <b>RINCON</b>	State <b>GA</b>	Zip <b>31326-383</b>		
Removed By: _____ <input type="checkbox"/> Request <input type="checkbox"/> List				
Alcohol Test: <b>2</b>	Type:	Results:	Drug Test: <b>2</b>	Type: Results:
First Harmful Event: <b>11</b>	Most Harmful Event: <b>11</b>		Operator/Ped Cond: <b>1</b>	
Operator Contributing Factors: <b>4</b>				
Vehicle Contributing Factors: <b>1</b>		Roadway Contributing Factors: <b>1</b>		
Direction of Travel: <b>2</b>	Vehicle Maneuver: <b>1</b>	Non-Motor Maneuver:		
Vehicle Class: <b>1</b>	Vehicle Type: <b>11</b>	Vision Obscured: <b>1</b>		
Number of Occupants: <b>1</b>	Area of Initial Contact: <b>5</b>	Damage to Veh: <b>2</b>		
Traffic-Way Flow: <b>1</b>	Road Comp: <b>2</b>	Road Character: <b>1</b>		
Number of Lanes: <b>2</b>	Posted Speed: <b>45</b>	Work Zone: <b>0</b>		
Traffic Control: <b>7</b>	Device Inoperative <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Citation Information:				
<b>COMMERCIAL MOTOR VEHICLES ONLY</b>				
Carrier Name				
Address		City	State	Zip
U.S.D.O.T.#		No. of Axles	G.V.W.R.	
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No	
C.D.L.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L. Suspended?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vehicle Placarded?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If YES, Name of 4 Digit Number from Diamond or Box: _____				
One Digit Number from Bottom of Diamond: _____				
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units				

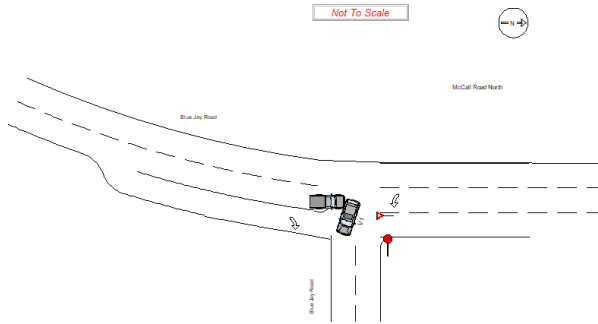
COLLISION FIELDS

Manner of Collision: 1	Location at Area of Impact: 7	Weather: 1	Surface Condition: 1	Light Condition: 1
------------------------	-------------------------------	------------	----------------------	--------------------

NARRATIVE

Driver of the Honda CRV stated she was making a left hand turn on to Blue Jay Road from McCall Road North when a silver Chevy truck struck the back right end of her vehicle. She advised she pulled to the shoulder while the Chevy truck came to a stop then turned around and left the scene. Driver did not have any complaints of injuries and denied EMS on scene.

DIAGRAM



PROPERTY DAMAGE INFORMATION

Damage Other Than Vehicle:	Owner:
----------------------------	--------

WITNESS INFORMATION

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

OCCUPANT INFORMATION

Name (Last, First):		Address																	
1	SMITH, MARTHA	216 TIMBERGATE LN RINCON GA 31326-383																	
Age:	81	Sex:	F	Unit #:	1	Position:	1	Safetv Ea:	3	Eiected:	1	Extricated:	2	Air Bag:	2	Iniurv:	0	Taken for Treatment:	2
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):				EMS Arrival Time (Fatality Only):				Hospital Arrival Time (Fatality Only):							
Name (Last, First):		Address																	
2																			
Age:		Sex:		Unit #:		Position:		Safetv Ea:		Eiected:		Extricated:		Air Bag:		Iniurv:		Taken for Treatment:	
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):				EMS Arrival Time (Fatality Only):				Hospital Arrival Time (Fatality Only):							
Name (Last, First):		Address																	
3																			
Age:		Sex:		Unit #:		Position:		Safetv Ea:		Eiected:		Extricated:		Air Bag:		Iniurv:		Taken for Treatment:	
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):				EMS Arrival Time (Fatality Only):				Hospital Arrival Time (Fatality Only):							
Name (Last, First):		Address																	
4																			
Age:		Sex:		Unit #:		Position:		Safetv Ea:		Eiected:		Extricated:		Air Bag:		Iniurv:		Taken for Treatment:	
Iniured Taken To:		Bv:		EMS Notified Time (Fatality Only):				EMS Arrival Time (Fatality Only):				Hospital Arrival Time (Fatality Only):							

ADMINISTRATIVE

Photos Taken: <input type="checkbox"/> Yes <input type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.	
Report Bv: HANTON, BRITTANY	Agency: EFFINGHAM COUNTY	Report Date: 03/01/2022	Checked By: SHEAROUSE, BRYAN
		Date Checked: 03/02/2022	

Agency Case Number <b>2203-0597</b>		Agency NCIC Number <b>GA0510000</b>		<b>GEORGIA</b> MOTOR VEHICLE CRASH REPORT		County <b>EFFINGHAM</b>		Date Rec. by DOT	
Estimated Crash Date <b>03/04/2022</b> Time <b>07:25 AM</b>		Dispatch Date <b>03/04/2022</b> Time <b>07:27 AM</b>		Arrival Date <b>03/04/2022</b> Time <b>07:32 AM</b>		Total Number of Vehicles <b>2</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of	
Road of Occurrence <b>MCCALL ROAD</b>				At Its Intersection With <b>BLUE JAY ROAD</b>				<input type="checkbox"/> Corrected Report	
Not At Its Intersection Rnt <input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West				Of _____				<input type="checkbox"/> Sup To Original	
Latitude (Y) <b>32.27763667</b> (Format) <b>00.00000</b>				Longitude (X) <b>-81.266995</b> (Format) <b>-00.00000</b>				<input type="checkbox"/> Hit and Run	

Unit # <b>1</b> <input type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME <b>WATERS</b> FIRST NAME <b>CLAY</b> MIDDLE NAME <b>BRANDON</b> Address <b>1281 LOW GROUND RD</b> City <b>GUYTON</b> State <b>GA</b> Zip <b>31312-513</b> DOB <b>04/03/1985</b> Driver's License No. <b>000054540314</b> Class <b>C</b> State <b>GA</b> Country <b>US</b> Insurance Co. <b>OWNERS</b> Policy No. <b>482956400</b> Telephone No. <b>9124296044</b> Year <b>2006</b> Make <b>FORD</b> Model <b>F150 TK</b> VIN <b>1FTPW12596KB84606</b> Vehicle Color <b>GRA</b> Tag # <b>RYC5866</b> State <b>GA</b> County <b>EFFINGHAM</b> Year <b>2022</b> Trailer Tag # _____ State _____ County _____ Year _____ <input type="checkbox"/> Same as Driver Owner Last Name <b>WATERS</b> First <b>CLAY</b> Middle <b>BRANDON</b> Address <b>1281 LOW GROUND RD</b> City <b>GUYTON</b> State <b>GA</b> Zip <b>31312-513</b> Removed By: <b>SMITH'S</b> <input type="checkbox"/> Request <input type="checkbox"/> List Alcohol Test: <b>2</b> Tvpe: _____ Results: _____ Drug Test: <b>2</b> Tvpe: _____ Results: _____ First Harmful Event: <b>11</b> Most Harmful Event: <b>11</b> Operator/Ped Cond: <b>1</b> Operator Contributing Factors: <b>4 13 1 1</b> Vehicle Contributing Factors: <b>1</b> Roadway Contributing Factors: <b>1</b> Direction of Travel: <b>2</b> Vehicle Maneuver: <b>1</b> Non-Motor Maneuver: _____ Vehicle Class: <b>1</b> Vehicle Type: <b>2</b> Vision Obscured: <b>1</b> Number of Occupants: <b>2</b> Area of Initial Contact: <b>1</b> Damage to Veh: <b>4</b> Traffic-Way Flow: <b>1</b> Road Comp: <b>2</b> Road Character: <b>4</b> Number of Lanes: <b>2</b> Posted Speed: <b>45</b> Work Zone: <b>0</b> Traffic Control: <b>7</b> Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Citation Information:	Unit # <b>2</b> <input type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME <b>BELL</b> FIRST NAME <b>JESSICA</b> MIDDLE NAME <b>WING</b> Address <b>180 JOSHUA CIR</b> City <b>ELLABELL</b> State <b>GA</b> Zip <b>31308-730</b> DOB <b>05/15/1978</b> Driver's License No. <b>000042055112</b> Class _____ State _____ Country _____ Insurance Co. <b>COUNTRY</b> Policy No. <b>JA5350239</b> Telephone No. <b>9125074910</b> Year <b>2020</b> Make <b>KIA</b> Model <b>SPORTAGE MP</b> VIN <b>KNDP63AC6L7822711</b> Vehicle Color <b>SIL</b> Tag # <b>CNG8663</b> State <b>GA</b> County <b>BRYAN</b> Year <b>2022</b> Trailer Tag # _____ State _____ County _____ Year _____ <input type="checkbox"/> Same as Driver Owner Last Name <b>BELL</b> First <b>JESSICA</b> Middle <b>WING</b> Address <b>180 JOSHUA CIR</b> City <b>ELLABELL</b> State <b>GA</b> Zip <b>31308-730</b> Removed By: <b>RAHN'S</b> <input type="checkbox"/> Request <input type="checkbox"/> List Alcohol Test: <b>2</b> Tvpe: _____ Results: _____ Drug Test: <b>2</b> Tvpe: _____ Results: _____ First Harmful Event: <b>11</b> Most Harmful Event: <b>11</b> Operator/Ped Cond: <b>1</b> Operator Contributing Factors: <b>1 1 1 1</b> Vehicle Contributing Factors: <b>1</b> Roadway Contributing Factors: <b>1</b> Direction of Travel: <b>4</b> Vehicle Maneuver: <b>5</b> Non-Motor Maneuver: _____ Vehicle Class: <b>1</b> Vehicle Type: <b>1</b> Vision Obscured: <b>1</b> Number of Occupants: <b>1</b> Area of Initial Contact: <b>12</b> Damage to Veh: <b>4</b> Traffic-Way Flow: <b>1</b> Road Comp: <b>2</b> Road Character: <b>4</b> Number of Lanes: <b>2</b> Posted Speed: <b>45</b> Work Zone: <b>0</b> Traffic Control: <b>7</b> Device Inoperative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Citation Information:
---	---

<b>COMMERCIAL MOTOR VEHICLES ONLY</b>	<b>COMMERCIAL MOTOR VEHICLES ONLY</b>
Carrier Name _____	Carrier Name _____
Address _____ City _____ State _____ Zip _____	Address _____ City _____ State _____ Zip _____
U.S.D.O.T.# _____ No. of Axles _____ G.V.W.R. _____	U.S.D.O.T.# _____ No. of Axles _____ G.V.W.R. _____
Cargo Body Type _____ Vehicle Config. _____ <input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate <input type="checkbox"/> Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No	Cargo Body Type _____ Vehicle Config. _____ <input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate <input type="checkbox"/> Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No
C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No	C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No
Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No	Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No
Released? <input type="checkbox"/> Yes <input type="checkbox"/> No	Released? <input type="checkbox"/> Yes <input type="checkbox"/> No
If YES, Name of 4 Digit Number from Diamond or Box: _____ One Digit Number from Bottom of Diamond: _____	If YES, Name of 4 Digit Number from Diamond or Box: _____ One Digit Number from Bottom of Diamond: _____
<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units	<input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units



**COLLISION FIELDS**

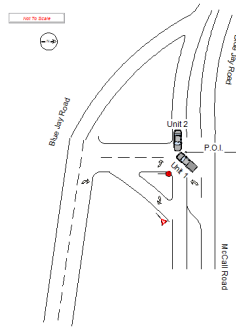
Manner of Collision: <b>1</b>	Location at Area of Impact: <b>7</b>	Weather: <b>1</b>	Surface Condition: <b>1</b>	Light Condition: <b>1</b>
-------------------------------	--------------------------------------	-------------------	-----------------------------	---------------------------

**NARRATIVE**

On March 4, 2022 I responded to the intersection of Blue Jay Road and McCall Road for a two vehicle collision. Upon arrival I spoke with driver 2, who complained of some wrist pain but declined medical attention. Driver two stated she was traveling east on Blue Jay Road and was continuing through the curve to travel north on to McCall Road and when vehicle one pulled out in front of her.

I then spoke with driver one who stated he was traveling south on McCall Road and was in the left turn lane to turn on to Blue Jay Road. Driver two stated he was watching the traffic on Blue Jay Road in the turn lane and did not see driver two was not turning and continued to travel north to travel on to McCall Road. Driver two stated he pulled out in front of driver two and caused the collision. Driver one stated his daughter was also in the vehicle and had no injuries. Driver one stated his wife had already picked up his daughter. Driver one complained of no injuries and declined medical attention. Both parties were given exchange of information sheets with their respective contact and insurance information. **NARRATIVE CONTINUED ON SUPPLEMENT PAGE...**

**DIAGRAM**



**PROPERTY DAMAGE INFORMATION**

Damage Other Than Vehicle:	Owner:
----------------------------	--------

**WITNESS INFORMATION**

Name (Last, First)	Address	City	State	Zip Code	Telephone Number

**OCCUPANT INFORMATION**

Name (Last, First):		Address								
1	WATERS, CLAY					1281 LOW GROUND RD GUYTON GA 31312-513				
	Age: 36	Sex: M	Unit #: 1	Position: 1	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Bac: 2	Injurv: 0	Taken for Treatment: 2
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
2	WATERS, SUTTON					1281 LOW GROUND RD GUTON GA 31312				
	Age: 5	Sex: F	Unit #: 1	Position: 4	Safetv Ea: 4	Elected: 1	Extricated: 2	Air Bac: 2	Injurv: 0	Taken for Treatment: 2
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
3	BELL, JESSICA					180 JOSHUA CIR ELLABELL GA 31308-730				
	Age: 43	Sex: F	Unit #: 2	Position: 3	Safetv Ea: 3	Elected: 1	Extricated: 2	Air Bac: 1	Injurv: 4	Taken for Treatment: 2
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	
4										
	Age:	Sex:	Unit #:	Position:	Safetv Ea:	Elected:	Extricated:	Air Bac:	Injurv:	Taken for Treatment:
	Injured Taken To:		Bv:		EMS Notified Time (Fatality Only):		EMS Arrival Time (Fatality Only):		Hospital Arrival Time (Fatality Only):	

**ADMINISTRATIVE**

Photos Taken: <input type="checkbox"/> Yes <input type="checkbox"/> No	Bv:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.			
Report By: WITHEM, KRISTOPHER	Agency: EFFINGHAM COUNTY	Report Date: 03/04/2022	Checked By: GARLAND, JASON	Date Checked: 03/06/2022	

Agency Case Number: 2203-0597

Estimated Crash Date: 03/04/2022

WITHEM. WITHEM, KRISTOPHER

NARRATIVE

On March 4, 2022 I responded to the intersection of Blue Jay Road and McCall Road for a two vehicle collision. Upon arrival I spoke with driver 2, who complained of some wrist pain but declined medical attention. Driver two stated she was traveling east on Blue Jay Road and was continuing through the curve to travel north on to McCall Road and when vehicle one pulled out in front of her.

I then spoke with driver one who stated he was traveling south on McCall Road and was in the left turn lane to turn on to Blue Jay Road. Driver two stated he was watching the traffic on Blue Jay Road in the turn lane and did not see driver two was not turning and continued to travel north to travel on to McCall Road. Driver two stated he pulled out in front of driver two and caused the collision. Driver one stated his daughter was also in the vehicle and had no injuries. Driver one stated his wife had already picked up his daughter. Driver one complained of no injuries and declined medical attention. Both parties were given exchange of information sheets with their respective contact and insurance information. Smith's towing arrived on scene to take possession of vehicle one and Rahn's towing arrived on scene to take possession of vehicle two.

ADDITIONAL CITATION INFORMATION

Unit #:

ADDITIONAL OCCUPANT INFORMATION

ADDITIONAL WITNESS INFORMATION

# Appendix H



---

## Signal Warrant Analysis Report

# Traffic Signal Warrant Analysis

<b>Project Name</b>	Blue Jay Rd and McCall Rd
<b>Project/File #</b>	22-11
<b>Scenario</b>	Existing Volumes

Intersection Information	
Major Street Name	Blue Jay Rd/McCall Rd
North/South or East/West	N/S
Speed Limit	45 mph or greater
# of Approach Lanes	2 or more
% of Right Turn Traffic to Include	100%
Minor Street Name	Blue Jay Rd WB
# of Approach Lanes	1
% of Right Turn Traffic to Include	100%
Isolated Community < 10,000 pop	Yes

What Additional Warrants to Consider?	
Warrant 3, Peak Hour (A - Vol. and Delay)	Yes
Warrant 4, Pedestrian Volume	No
Warrant 5, School Crossing	No
Warrant 6, Coordinated Signal System	No
Warrant 7, Crash Experience	No
Warrant 8, Roadway Network	No
Warrant 9, Intersection Near a Grade Crossing	No
All-Way Stop Warrant	Yes

Spack Academy is part of the Spack Enterprise family of companies



# Traffic Signal Warrant Analysis

## Blue Jay Rd/McCall Rd (Major Street) Volume

Northbound Volume by Hour				
Time	Left Turns	Through	Right Turns	Peds/Bikes
12 - 1 AM				
1 - 2 AM				
2 - 3 AM				
3 - 4 AM				
4 - 5 AM				
5 - 6 AM				
6 - 7 AM				
7 - 8 AM		135	281	
8 - 9 AM		81	241	
9 - 10 AM		74	198	
10 - 11 AM		77	169	
11 - 12 PM		57	161	
12 - 1 PM		65	193	
1 - 2 PM		62	160	
2 - 3 PM		75	174	
3 - 4 PM		97	202	
4 - 5 PM		129	296	
5 - 6 PM				
6 - 7 PM				
7 - 8 PM				
8 - 9 PM				
9 - 10 PM				
10 - 11 PM				
11 - 12 AM				
<b>Total Vehicles (unadjusted)</b>			<b>2,927</b>	<b>0</b>

Southbound Volume by Hour				
Time	Left Turns	Through	Right Turns	Peds/Bikes
12 - 1 AM				
1 - 2 AM				
2 - 3 AM				
3 - 4 AM				
4 - 5 AM				
5 - 6 AM				
6 - 7 AM				
7 - 8 AM	159	104		
8 - 9 AM	173	82		
9 - 10 AM	136	61		
10 - 11 AM	142	62		
11 - 12 PM	124	62		
12 - 1 PM	152	50		
1 - 2 PM	104	54		
2 - 3 PM	119	68		
3 - 4 PM	133	83		
4 - 5 PM	157	110		
5 - 6 PM				
6 - 7 PM				
7 - 8 PM				
8 - 9 PM				
9 - 10 PM				
10 - 11 PM				
11 - 12 AM				
<b>Total Vehicles (unadjusted)</b>			<b>2,135</b>	<b>0</b>

## Blue Jay Rd WB (Minor Street) Volume

Eastbound Volume by Hour				
Time	Left Turns	Through	Right Turns	Peds/Bikes
12 - 1 AM				
1 - 2 AM				
2 - 3 AM				
3 - 4 AM				
4 - 5 AM				
5 - 6 AM				
6 - 7 AM				
7 - 8 AM				
8 - 9 AM				
9 - 10 AM				
10 - 11 AM				
11 - 12 PM				
12 - 1 PM				
1 - 2 PM				
2 - 3 PM				
3 - 4 PM				
4 - 5 PM				
5 - 6 PM				
6 - 7 PM				
7 - 8 PM				
8 - 9 PM				
9 - 10 PM				
10 - 11 PM				
11 - 12 AM				
<b>Total Vehicles (unadjusted)</b>			<b>0</b>	<b>0</b>

Westbound Volume by Hour				
Time	Left Turns	Through	Right Turns	Peds/Bikes
12 - 1 AM				
1 - 2 AM				
2 - 3 AM				
3 - 4 AM				
4 - 5 AM				
5 - 6 AM				
6 - 7 AM				
7 - 8 AM	263		112	
8 - 9 AM	138		70	
9 - 10 AM	130		82	
10 - 11 AM	150		107	
11 - 12 PM	158		106	
12 - 1 PM	187		111	
1 - 2 PM	233		141	
2 - 3 PM	261		166	
3 - 4 PM	246		171	
4 - 5 PM	286		227	
5 - 6 PM				
6 - 7 PM				
7 - 8 PM				
8 - 9 PM				
9 - 10 PM				
10 - 11 PM				
11 - 12 AM				
<b>Total Vehicles (unadjusted)</b>			<b>3,345</b>	<b>0</b>

Spack Academy is part of the Spack Enterprise family of companies



# Traffic Signal Warrant Analysis

Additional Inputs for Warrants 3 to 9 and the Multi-Way Stop Warrants

Warrant 3: Peak Hour Delay Additional Information	
T-intersection or 4-legged?	T
Peak Hour Reviewed?	7-8 AM
Blue Jay Rd/McCall Rd (Major Street) Data	
Combined Approach Volume	679
Blue Jay Rd WB (Minor Street) Data	
High Volume Side Volume	375
High Volume Side Average Delay (Sec.)	55.3
High Volume Side # of Approach Lanes	2 or more
Low Volume Side Volume (leave blank if T)	

Warrant 6: Coordinated Signal System	
One-way or Two-way Street?	Two-Way
Adjacent traffic control signals do not provide the necessary degree of platooning, but will collectively provide a progressive operation with the proposed traffic control signal?	No
Resultant spacing of traffic control signals 1,000 feet or more?	Yes

Warrant 9: Intersection Near a Grade Crossing	
Tracks cross which Blue Jay Rd WB	Southbound
Consideration given to other alternatives/trial of alternative failed to alleviate the safety concerns?*	Yes
Distance between STOP or YIELD controlled approach and center of track nearest to the intersection within 140 feet?	Yes
Clear storage distance (Distance D) between the tracks and the intersection? (See Below)	70 feet
Number of approach lanes at the crossing?	2 or more
Rail traffic per day?	3-5
Percentage of high-occupancy buses? **	0%
Percentage of Tractor-Trailer Trucks?	7.6%-12.5%

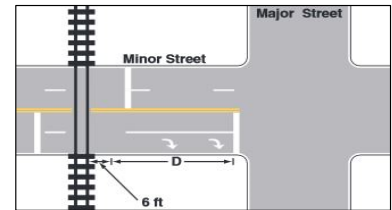
Warrant 4: Pedestrian Volume Additional Information	
Include Right Turn Reduction for Vehicular Volume?	Yes
300 feet or more to nearest traffic control signal or STOP sign controlling the street that pedestrians desire to cross?	Yes
If no, will a traffic control signal restrict the progressive movement of traffic?*	N/A
15th-percentile crossing speed of pedestrians less than 3.5 feet per second? **	No
If yes, then percent reduction to apply to crossing volume? (up to 50%)	N/A

Warrant 7: Crash Experience	
Number of reportable crashes ( <u>types susceptible to correction by a traffic control signal</u> ) within a 12-month period?*	4 or less
Adequate trial of alternatives with satisfactory observance and enforcement failed to reduce crash frequency? **	Yes
Include Right Turn Reduction for Vehicular Volume?	Yes

\* Alternatives to consider or try should include:

- Providing additional pavement that would enable vehicles to clear the track or provide space for an evasive maneuver.
- Reassigning the stop controls at the intersection to make the approach across the track non-stopping.

\*\* High-occupancy is defined as a bus occupied by at least 20 people.



\* Include supporting documentation of no progressive movement impact.  
\*\* Not common. Include supporting documentation of low crossing speed.

\* May need to include supporting documentation of crash details.  
\*\* May need to include supporting documentation of alternative trail(s) and results.

Warrant 5: School Crossing	
Schoolchildren (elementary through high school) crossing the major street (Blue Jay) Consideration given to other remedial measures (warning signs/flashers, school speed zones, school crossing guards, or a grade-separated crossing)?	Yes
300 feet or more to nearest traffic control signal or STOP sign controlling the street that pedestrians desire to cross?	Yes
If no, will a traffic control signal restrict the progressive movement of traffic?*	N/A
Minimum of 20 schoolchildren crossing during the highest crossing hour? engineering study completed showing the number of adequate gaps in the traffic stream during the period when schoolchildren are using the crossing is less than the number of minutes in the same period? **	No

Warrant 8: Roadway Network	
Common intersection of two major routes?*	Yes
Projected entering volume of at least 1,000 vehicles per hour during the peak hour of a typical weekday?	Yes
5-Year projected traffic volumes meet one or more of Warrants 1, 2, and 3 during an average weekday?	Yes
Total existing or immediately projected entering volume of at least 1,000 vehicles per hour for each of any 5 hours of a non-normal business day (Saturday or Sunday)?	No

Multi-Way Stop Warrant Additional Information	
Traffic control signal warranted & justified with existing traffic?	Yes
Number of <u>correctable</u> crashes* in 12-month period?	4
Peak Hour high volume approach average delay (Sec.)	55.3

\* Crashes include right-turn and left-turn collisions as well as right-angle collisions.

\* Include supporting documentation of no progressive movement impact.  
\*\* May need to include supporting documentation of inadequate gaps in traffic.

\* Major Route defined as:

- Part of the street or highway system that serves as the principal roadway network for through traffic flow.
- Rural or suburban highways outside, entering, or traversing a city.
- Appears as a major route on an official plan, such as a major street plan in an urban area traffic and transportation study.

Spack Academy is part of the Spack Enterprise family of companies



# Traffic Signal Warrant Analysis

## Warrants 1 - 3 (Volume Warrants)

<b>Project Name</b>	Blue Jay Rd and McCall Rd
<b>Project/File #</b>	22-11
<b>Scenario</b>	Existing Volumes

Intersection Information			
Major Street (N/S Road)	Blue Jay Rd/McCall Rd	Minor Street (E/W Road)	Blue Jay Rd WB
Analyzed with	2 or more approach lanes	Analyzed with	1 Approach Lane
Total Approach Volume	5062 vehicles	Total Approach Volume	3345 vehicles
Total Ped/Bike Volume	0 crossings	Total Ped/Bike Volume	0 crossings
Right turn reduction of	0 percent applied	Right turn reduction of	0 percent applied

Reduction applied to Volume Warrant thresholds due to isolated community.

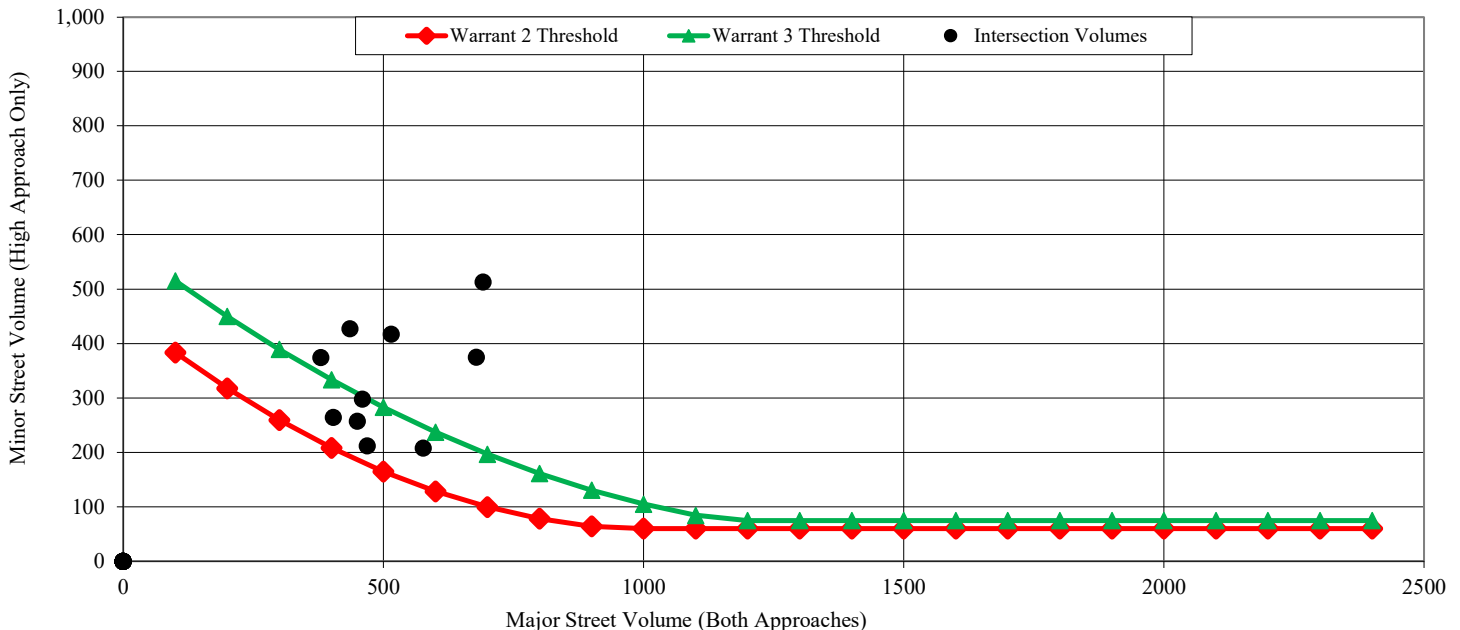
Warrant 1, Eight Hour Vehicular Volume			
	Condition A	Condition B	Condition A+B*
Condition Satisfied?	Satisfied	Not Satisfied	Not Satisfied
Required values reached for	8 hours	2 hours	10 (Cond. A) & 4 (Cond. B)
Criteria - Major Street (veh/hr)	420	630	336 (Cond. A) & 504 (Cond. B)
Criteria - Minor Street (veh/hr)	105	53	84 (Cond. A) & 42 (Cond. B)

\* Should be applied only after an adequate trial of other alternatives that could cause less delay and inconvenience to traffic has failed to solve the traffic problems.

Warrant 2, Four Hour Vehicular Volume	
Condition Satisfied?	Satisfied
Required values reached for	10 hours
Criteria	See Figure Below

Warrant 3, Peak Hour Vehicular Volume		
	Condition A	Condition B
Condition Satisfied?	Satisfied	Satisfied
Required values reached for	1054 total, 375 minor, 5.8 delay	5 hours
Criteria - Total Approach Volume (veh in one hour)	650	See Figure Below
Criteria - Minor Street High Side Volume (veh in one hour)	150	
Criteria - Minor Street High Side Delay (veh-hrs)	5	

Figure 4C-2 (Warrant 2 - 70% Factor) & Figure 4C-4 (Warrant 3 - 70% Factor)



Spack Academy is part of the Spack Enterprise family of companies

# Traffic Signal Warrant Analysis

## Warrants 4 to 6 (Pedestrian, School, Coordinated Systems)

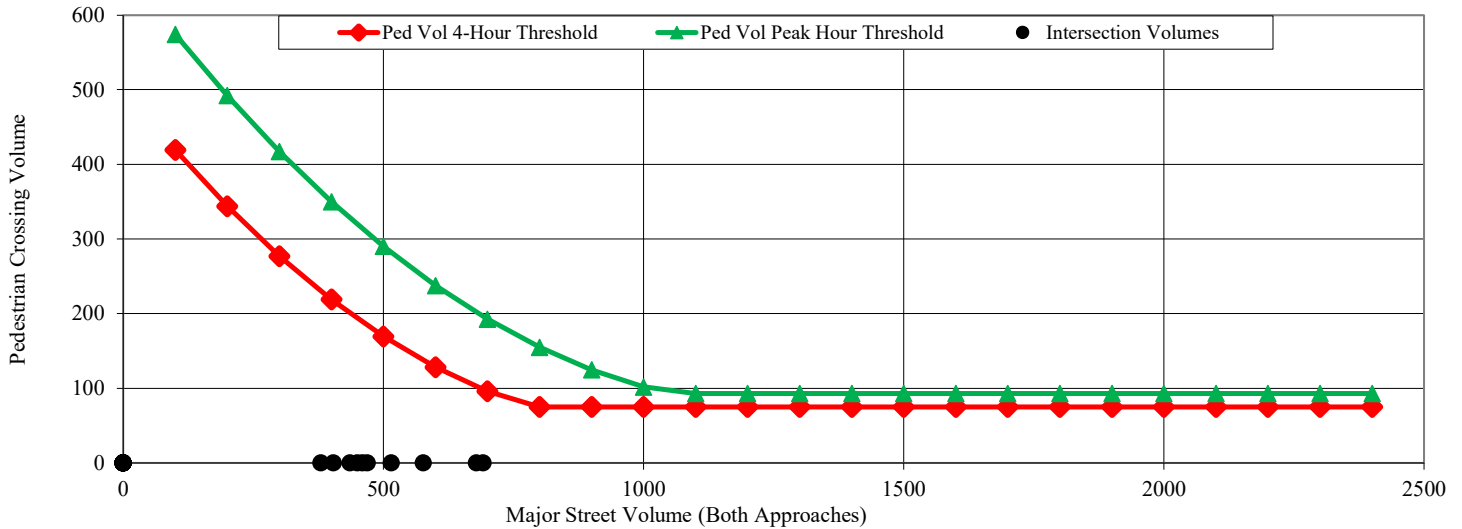
<b>Project Name</b>	Blue Jay Rd and McCall Rd
<b>Project/File #</b>	22-11
<b>Scenario</b>	Existing Volumes

Intersection Information			
Major Street (N/S Road)	Blue Jay Rd/McCall Rd	Minor Street (E/W Road)	Blue Jay Rd WB
Analyzed with	2 or more approach lanes	Analyzed with	1 Approach Lane
Total Approach Volume	5062 vehicles	Total Approach Volume	3345 vehicles
Total Ped/Bike Volume	0 crossings	Total Ped/Bike Volume	0 crossings
Right turn reduction of	0 percent applied	Right turn reduction of	0 percent applied

Reduction applied to Pedestrian Warrant thresholds due to high speeds on Blue Jay Rd/McCall Rd and isolated community.

Warrant 4, Pedestrian Volume		
Condition Satisfied?	Condition A - Four Hour Vol.	Condition B - Peak Hour Vol.
Required values reached for	Not Examined	Not Examined
Criteria - Min. Distance to Nearest Controlled Crossing		
Criteria - Major Street Volume and Crossing Volume		

Figure 4C-6 & Figure 4C-8 (Warrant 4 Four Hour & Peak Hour - 70% Factor)



Warrant 5, School Crossing	
Condition Satisfied?	Not Examined
Criteria - School Crossing Data	

Warrant 6, Coordinated Signal System	
Condition Satisfied?	Not Examined
Criteria - Coordinated Signal System	

Spack Academy is part of the Spack Enterprise family of companies



# Traffic Signal Warrant Analysis

## Warrants 7-9 (Crash, Network, Rail Crossing)

<b>Project Name</b>	Blue Jay Rd and McCall Rd
<b>Project/File #</b>	22-11
<b>Scenario</b>	Existing Volumes

Intersection Information			
Major Street (N/S Road)	Blue Jay Rd/McCall Rd	Minor Street (E/W Road)	Blue Jay Rd WB
Analyzed with	2 or more approach lanes	Analyzed with	1 Approach Lane
Total Approach Volume	5062 vehicles	Total Approach Volume	3345 vehicles
Total Ped/Bike Volume	0 crossings	Total Ped/Bike Volume	0 crossings
Right turn reduction of	0 percent applied	Right turn reduction of	0 percent applied

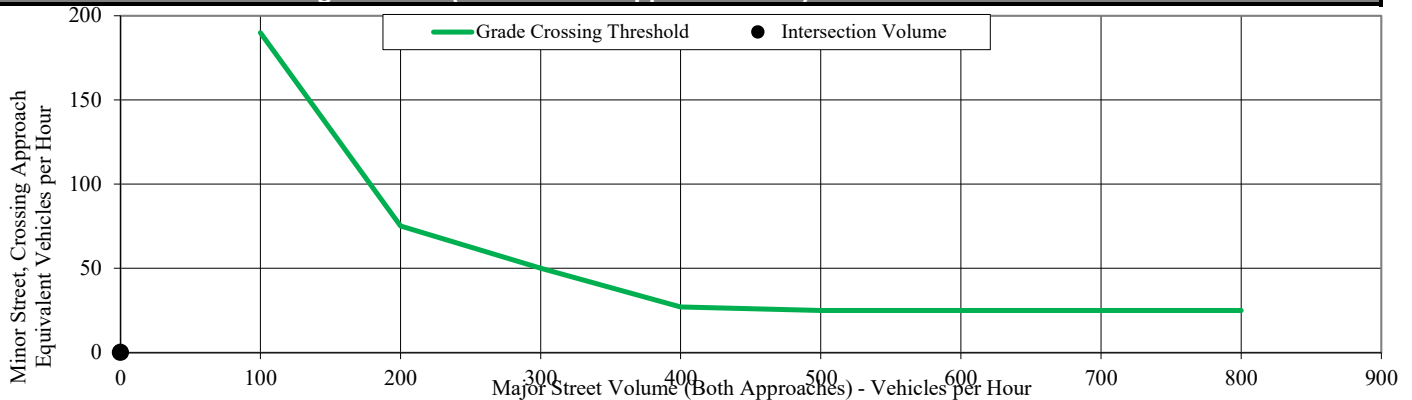
Reduction applied to the Crash and Roadway Network Warrant thresholds due to isolated community.

Warrant 7, Crash Experience	
Condition Satisfied?	<b>Not Examined</b>
Required values reached for	
Criteria - Alternatives	
Criteria - Reported Crashes (within 12-month period)	
Criteria - Major Street (veh/hr)	
Criteria - Minor Street (veh/hr)	
(Alternative Volume Requirement) Criteria - Pedestrian Volume	

Warrant 8, Roadway Network	
Condition Satisfied?	<b>Not Examined</b>
Required values reached for	
Criteria - Common Intersection of Two Major Routes	
Criteria - Existing or Immediately Projected Entering Volume	
Criteria - Warrants	
(Alternative Requirement) Criteria - Non-normal Business Day	

Warrant 9, Intersection Near a Grade Crossing	
Condition Satisfied?	<b>Not Examined</b>
Required values reached for	
Criteria - Alternatives	
Criteria - Max. Distance to Nearest Controlled Crossing	
Criteria - Major Street Volume and Crossing Volume	

Figure 4C-10 (Two or More Approach Lanes): Distance D = 70 feet



Spack Academy is part of the Spack Enterprise family of companies

# Traffic Signal Warrant Analysis

## Multi-Way Stop Warrants

Project Name	Blue Jay Rd and McCall Rd
Project/File #	22-11
Scenario	Existing Volumes

Intersection Information			
Major Street (N/S Road)	Blue Jay Rd/McCall Rd	Minor Street (E/W Road)	Blue Jay Rd WB
Analyzed with	2 or more approach lanes	Analyzed with	1 Approach Lane
Total Approach Volume	5062 vehicles	Total Approach Volume	3345 vehicles
Total Ped/Bike Volume	0 crossings	Total Ped/Bike Volume	0 crossings
Right turn reduction of	0 percent applied	Right turn reduction of	0 percent applied

Reduction applied to Multi-Way Stop Warrant thresholds due to high speeds on Blue Jay Rd/McCall Rd and isolated community.

Condition A - Traffic Signal Warrant	
Condition Satisfied?	<b>Satisfied</b>
Criteria*	Traffic Signal Warranted & Justified

\* Multi-way stop control may be used as an interim measure that can be installed quickly to control traffic while arrangements are being made for the installation of the traffic control signal.

Condition B - Crash Experience	
Condition Satisfied?	<b>Not satisfied</b>
Required values reached for	4 correctable crashes
Criteria - Crash Experience	5 or more correctable crashes in 12-month period

Condition C - Intersection Volume & Delay	
Condition Satisfied?	<b>Satisfied</b>
Required values reached for	10 hours & 55.3 sec. average delay/veh
Criteria - Major Street (veh/hr)	210 for any 8 hours of an average day
Criteria - Minor Street (total vol-veh, ped, & bikes/hr)	140 for the same 8 hours of an average day
Criteria - Delay (average sec/veh)	30 during the highest hour

Condition D - Combination Volume, Crash Experience, & Delay	
Condition Satisfied?	<b>Satisfied</b>
Required values reached for	10 hours, 4 crashes, & 55.3 sec. average delay/veh
Criteria - Major Street (veh/hr)	240 for any 8 hours of an average day
Criteria - Minor Street (total vol-veh, ped, & bikes/hr)	160 for the same 8 hours of an average day
Criteria - Crash Experience	4 or more correctable crashes in 12-month period
Criteria - Delay (average sec/veh)	24 during the highest hour

Spack Academy is part of the Spack Enterprise family of companies



**Maldino and Wilburn, LLC**

**1864 Lower Fayetteville Rd**

**Newnan, GA 30265**

**770.362.6184**