

DO NOT WRITE IN THIS SPACE

Warning - State Law. Use of contents for commercial solicitation is unlawful

Incident Report

Investigation Completed

Investigation Made at Scene

Photographs

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OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

(1) Reporting Agency: NORMAN POLICE DEPARTMENT; Case Number (Agency Use): 2025-00013676; Motor Vehicles Involved: 02; Number Injured: 01; Number Killed: 00

(2) Date of Collision (mm/dd/yyyy): 02262025; Time: 1001; County Number and Name: 14 CLEVELAND; Nearest City or Town Number and Name: In 20, Near 20, NORMAN

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

(4) Street, Road or Highway: W LINDSEY ST; Distance from; (Nearest) Intersecting Street, Road or Highway: S LAHOMA AVE

(5) Unit: 01; Occupants: 01; Type: D; Last Name: [Redacted]; First: [Redacted]; Middle: [Redacted]; Suffix: [Redacted]; Date of Birth (mm/dd/yyyy): [Redacted]; Sex: [Redacted]

(6) Address: [Redacted]; City: [Redacted]; State: [Redacted]; Zip: [Redacted]; Telephone (Use Area Code): [Redacted]

(7) Driver License Number: [Redacted]; State: OK; Class: D; Endorsement(s): N; Restriction(s): [Redacted]; Inj. Sev.: 1; Type of Injury: 0; Div./Ped. Cond.: 01; OP Use: 04

(8) Ejected: 1; Extricated: 1; Test: 1; (% BAC): 0; Transported by: [Redacted]; To Medical Facility: [Redacted]; License Plate Number: CI19835; State: OK; Month: 12; Year: 2025

(9) VIN: [Redacted]; Vehicle Year: 2012; Color: WHI; 2nd Color: 0; Make: CHEV; Model: SILV; Veh. Conf.: 04; Extent of Damage: 2

(10) Insurance Company Name: [Redacted]; Policy Number: [Redacted]; Insurance Telephone (Use Area Code): [Redacted]

(11) Vehicle Removed by: Driver: [Redacted]; Owner's Last Name: CITY OF NORMAN; First: [Redacted]; Middle: [Redacted]; Suffix: [Redacted]

(12) Owner's Address: 1311 DA VINCI ST; City: NORMAN; State: OK; Zip: 73069; Towed Veh. Type: Oversized Load: 0; Rollover: 0; Burned: 0; Phone present: X; Phone in use: X

(13) Citation Number: [Redacted]; Statute/Ordinance Number: [Redacted]; Citation Number: [Redacted]; Statute/Ordinance Number: [Redacted]

(14) Unit: 02; Occupants: 01; Type: D; Last Name: JEMISON; First: CLIFFORD; Middle: [Redacted]; Suffix: [Redacted]; Date of Birth (mm/dd/yyyy): [Redacted]; Sex: [Redacted]

(15) Address: [Redacted]; City: [Redacted]; State: [Redacted]; Zip: [Redacted]; Telephone (Use Area Code): [Redacted]

(16) Driver License Number: [Redacted]; State: [Redacted]; Class: [Redacted]; Endorsement(s): [Redacted]; Restriction(s): [Redacted]; Inj. Sev.: 2; Type of Injury: 3; Div./Ped. Cond.: 01; OP Use: 04

(17) Ejected: 1; Extricated: 1; Test: 1; (% BAC): 0; Transported by: EMSSTAT; To Medical Facility: NRH - SH9; License Plate Number: [Redacted]; State: OK; Month: 07; Year: 2026

(18) VIN: [Redacted]; Vehicle Year: 2020; Color: WHI; 2nd Color: 0; Make: FORD; Model: FUSI; Veh. Conf.: 02; Extent of Damage: 2

(19) Insurance Company Name: [Redacted]; Policy Number: [Redacted]; Insurance Telephone (Use Area Code): [Redacted]

(20) Vehicle Removed by: Driver: [Redacted]; Owner's Last Name: FRIEND OR FAMILY; First: [Redacted]; Middle: [Redacted]; Suffix: [Redacted]

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

(22) Citation Number: [Redacted]; Statute/Ordinance Number: [Redacted]; Citation Number: [Redacted]; Statute/Ordinance Number: [Redacted]

(23) Investigating Officer: BRAKHAGE; Badge Number: 110316; Trp/Div. Assigned: [Redacted]; Trp/Div. Location: [Redacted]; Reviewer (Init.): JG; Reviewer Badge Number: 111461; Date of Report (mm/dd/yyyy): 02262025

(24) Unit Injured Witness Passenger Prop. Owner Pos in Veh. 00 Last Name [Redacted] First [Redacted] Middle [Redacted] Suffix [Redacted] DOB(mm/dd/yyyy) [Redacted] Sex [Redacted]

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

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

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

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

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

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

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

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

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

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

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

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

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

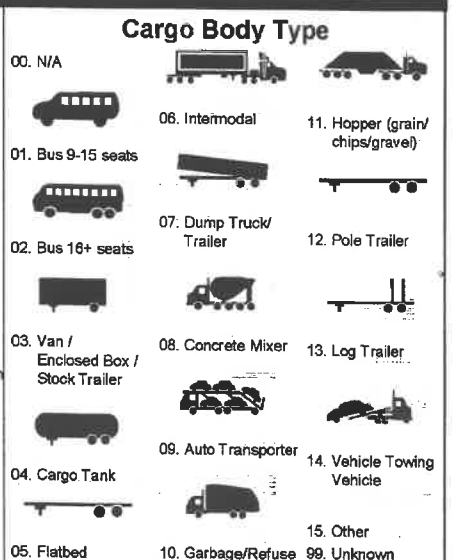
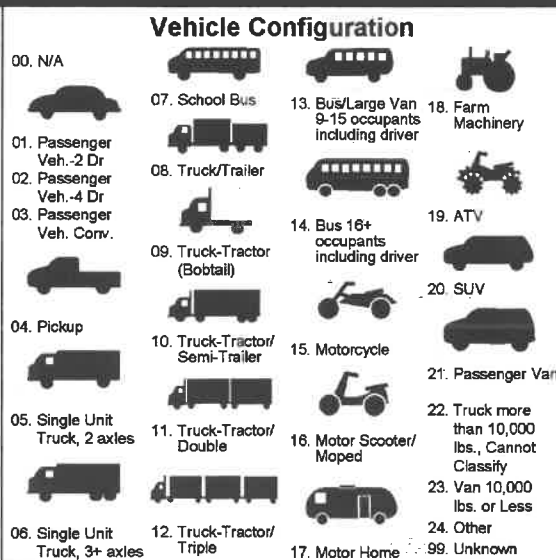
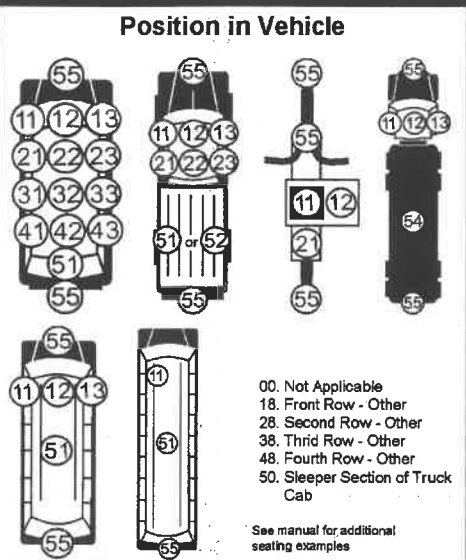
(37) City [Redacted] State [Redacted] Zip [Redacted] GVWR 0 - 10K lbs. 10,001 - 26K lbs. 26K+ lbs. Axle Qty. [Redacted] Cargo Body [Redacted] Vehicle Use Interstate Commerce Intrastate Commerce Other Non-Commercial Government

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

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

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

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



Unit	Total Lanes in Roadway	Legal Speed	Actions Prior to Collision	Location at Time of Collision	Safety Equip.	Unit Number of Vehicle Striking
01	02	25				
02	02	25				

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

Type of Work Zone	Location of the Work Zone Collision
1 Lane Closure	1 Before the First Work Zone Warning Sign
2 Lane Shift/Crossover	2 Advance Warning Area
3 Work on Shoulder or Median	3 Transition Area
4 Intermittent or Moving Work	4 Activity Area
9 Unknown	5 Termination Area
	9 Unknown

Workers Present Yes No Unknown

Light	Unit 1	Unit 2
1 Daylight		
2 Dark-Not Lighted		
3 Dark-Lighted		
4 Dawn		
5 Dusk		
6 Dark-Unknown Lighting		
7 Other		
9 Unknown		

Weather	Unit 1	Unit 2
01 Clear		
02 Fog/Smog/Smoke		
03 Cloudy		
04 Rain		
05 Snow		
06 Sleet/Hail (Freezing Rain/Drizzle)		
07 Severe Crosswind		
08 Blowing Snow		
09 Blowing Sand, Soil, Dirt		
10 Other		
99 Unknown		

Locality	Unit 1	Unit 2
1 Residential		
2 Business		
3 Industrial		
4 School		
5 Not Built-up		
6 Mixed Use		
7 Other		
9 Unknown		

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

Incident Type	Unit 1	Unit 2
00 Not an Incident		
01 Private Property		
02 Deliberate Intent		
03 Medical Condition		
04 Legal Intervention		
05 Suicide		
06 Drowning		
07 Other		

Location of First Harmful Event	Unit 1	Unit 2
01 On Roadway		
02 Shoulder		
03 Median		
04 Roadside		
05 Gore		
06 Separator		
07 Parking Lane/Zone		
08 Off Roadway, Location Unknown		
09 Outside Right-of-Way		
10 Other		
99 Unknown		

Pedestrian / Pedalcyclist Only	Unit 1	Unit 2
0 Not Applicable		
1 No Underride or Override		
2 Underride, Compartment Intrusion		
3 Underride, No Compartment Intrusion		
4 Underride, Compartment Intrusion Unknown		
5 Override, Motor Vehicle in Transport		
6 Override, Other Motor Vehicle		
9 Unknown		

Underride/Override	Unit 1	Unit 2
0 Not Applicable		
1 No Underride or Override		
2 Underride, Compartment Intrusion		
3 Underride, No Compartment Intrusion		
4 Underride, Compartment Intrusion Unknown		
5 Override, Motor Vehicle in Transport		
6 Override, Other Motor Vehicle		
9 Unknown		

Traffic Control	Unit 1	Unit 2
00 No Control		
01 Stop Sign		
02 Traffic Signal		
03 Flashing Traffic Signal		
04 School Zone Signs		
05 Yield Sign		
06 Warning Sign		
07 Railroad Advance Warning Sign		
08 Railroad Cross Bucks		
09 Railroad Gates		
10 Railroad Signal		
11 No Passing Zone		
12 Person (including flagger, law enforcement, crossing guard, etc.)		
13 Abnormal Control		
14 Other		
99 Unknown		

Road Surface Conditions	Unit 1	Unit 2
01 Dry		
02 Wet		
03 Ice/Frost		
04 Snow		
05 Mud, Dirt, Gravel		
06 Slush		
07 Water (standing, moving)		
08 Sand		
09 Oil		
10 Other		
99 Unknown		

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

Road Surface Type	Unit 1	Unit 2
1 Concrete		
2 Asphalt		
3 Gravel		
4 Dirt		
5 Brick		
6 Other		
9 Unknown		

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

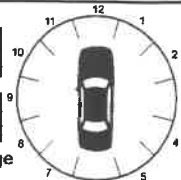
Vehicle Removal	Unit 1	Unit 2
0 Not Applicable		
1 Towed Due to Vehicle Damage		
2 Towed For Reasons Other Than Damage		
3 Remained at Scene		
4 Driven from Scene		
9 Unknown		

Vehicle Condition	Unit 1	Unit 2
00 Not Applicable		
01 Apparently Normal		
02 Brakes		
03 Headlights		
04 Steering		
05 Tail Lights		
06 Brake Lights		
07 Tires/Wheels		
08 Suspension		
09 Signal lights		
10 Windows		
11 Truck Coupling/Trailer Hitch/Safety Chains		
12 Mirrors		
13 Wipers		
14 Power Train		

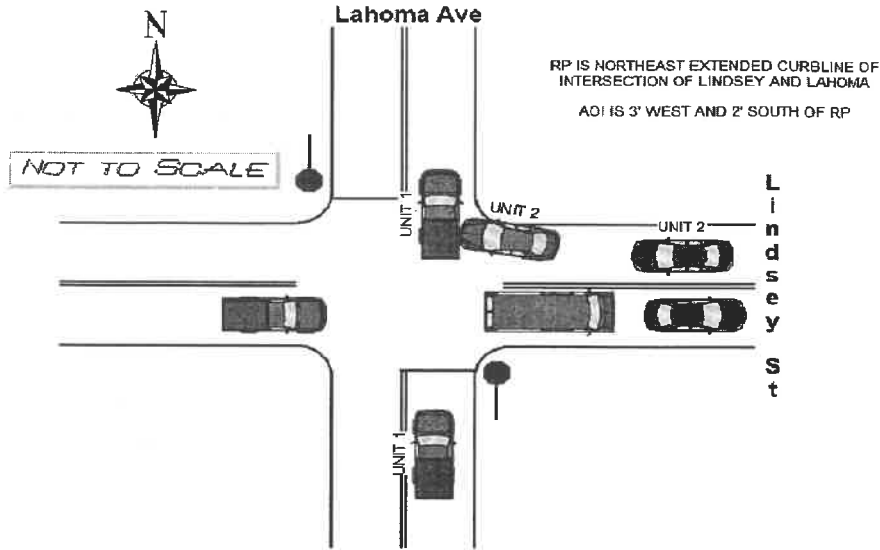
Special Function of Vehicle	Unit 1	Unit 2
00 Not Applicable		
01 School Bus		
02 Transit Bus		
03 Inter-city Bus		
04 Charter Bus		
05 Other Bus		
06 Military		
07 OHP		
08 Other Police		
09 Other Law Enforcement		
10 Ambulance		
11 Fire Truck		
12 Public Owned Vehicle		
13 Highway Equipment		
14 Special Mobilized Machine		
15 Other		

Emergency Vehicle Responding to an Emergency	Unit 1	Unit 2
0 N/A		
1 Yes		

Unsafe / Unlawful Contributing Factors	Unit 1	Unit 2
FAILED TO YIELD	01	98
01 From Stop Sign		
02 From Yield Sign		
03 Private Drive		
04 County Road at Through Highway		
05 From Signal Light		
06 From Alley		
07 To Pedestrian		
08 To Vehicle on Right		
09 To Vehicle in Intersection		
10 To Emergency Vehicles		
12 Other		
FOLLOWED TOO CLOSELY		
13 Human Element		
14 Traffic Condition		
15 Weather Condition		
UNSAFE SPEED		
16 Driver's Ability (Aged)		
17 Inexperienced Driver - Young		
18 Exceeding Legal Limit		
19 For Traffic Conditions		
20 For Type of Roadway (Gravel, Dirt, etc.)		
21 For Ice or Snow on Roadway		
22 Rain or Wet Roadway		
23 Wind		
24 Other Weather Conditions		
25 Vehicle Condition		
26 View Obstruction		
27 On Curve/Turn		
28 Impeding Traffic		
29 Other		
IMPROPER TURN		
30 From Wrong Lane		
31 From Direct Course		
32 Right		
33 Left		
34 Turn About/U-Turn		
35 To Enter Private Drive		
36 In Front of Oncoming Traffic		
37 Other		
38 CHANGED LANES UNSAFELY		
39 STOPPED IN TRAFFIC LANE		
40 For Stop Sign		
41 For Traffic Signal		
42 For School Bus		
43 For Railroad Gates/Signal		
44 For Officer/Flagman		
45 At Sidewalk/Stopline		
46 Other		
UNSAFE VEHICLE		
47 Brakes		
48 Steering		
49 Tires		
50 Suspension		
51 Headlights		
52 Tail Lights		
53 Stop Lights		
54 Wheel		
55 Exhaust System		
56 Windshield Wipers		
57 Other Mechanical Defects		
LEFT OF CENTER		
58 In Meeting		
59 No Passing Zone (Unmarked)		
60 Marked Zone		
61 Other		
IMPROPER OVERTAKING		
62 In Marked Zone		
63 On Hill/Curve		
64 At Intersection		
65 Without Sufficient Clearance		
66 Other		
IMPROPER PARKING		
67 On Roadway		
68 Where Prohibited		
69 Other		
INATTENTION		
70 Distracted by Passenger in Vehicle		
71 Other Distraction Inside Vehicle		
72 Distraction From Outside Vehicle		
73 Other		
WRONG WAY		
74 On One Way		
75 On Exit Ramp		
76 On Entrance Ramp		
77 Other		
IMPROPER START FROM		
78 Parked Position		
79 Other		
80 ALCOHOL-DUI/DWI		
81 DRUG-DUI		
OTHER IMPROPER ACT/ MOVEMENT		
82 Failed to Signal		
83 Disregarded Warning Signal		
84 Improper Use of Lane		
85 Improper Backing		
86 Apparently Sleepy		
87 Failed to Secure Load		
88 Other/Unknown		
UNKN./NO IMPROPER ACT		
89 Deer in Roadway		
90 Animal in Roadway		
91 Domestic Animal in Rdwy		
92 Avoiding Other Vehicle		
93 Avoiding Pedestrian		
94 Object/Debris in Roadway		
95 Defect in Roadway		
96 Abnormal Traffic Control		
97 Improper Bicyclist Action		
98 NO IMPROPER ACTION BY DRIVER		
99 PEDESTRIAN ACTION		



Latitude Longitude Railroad Crossing Number Roadway Orientation Unit Number Unit Number



COLLISION EVENTS

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

- | | | |
|---|---|---|
| <ul style="list-style-type: none"> 00 Not Applicable 10 Overtum/Rollover 11 Fire/Explosion 12 Immersion 13 Jackknife 14 Cargo/Equipment Loss or Shift 15 Equipment Failure (Blown Tire, Brake Failure, etc.) 16 Separation of Units 17 Departed Road Right 18 Departed Road Left 19 Cross Median/Centerline 20 Downhill Runaway | <ul style="list-style-type: none"> 21 Fell/Jumped From Motor Vehicle 22 Thrown Or Falling Object 23 Other Non-Collision PERSON, MOTOR VEHICLE, OR NON-FIXED OBJECT: 30 Pedestrian 31 Pedal Cycle 32 Railway Vehicle (train, engine) 33 Animal 34 Motor Vehicle in Transport 35 Parked Motor Vehicle 36 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle | <ul style="list-style-type: none"> 37 Work Zone/Maintenance Equipment 38 Other Non-Fixed Object FIXED OBJECT: 40 Barrier (Cable) 41 Barrier (Concrete) 42 Barrier (Other) 43 Fence Pole 44 Fence 45 Traffic Signal Support 46 Traffic Sign Support 47 Utility Pole/Light Support 48 Other Post/Pole/Support 49 Guardrail/Guardrail Face 50 Guardrail End 51 Culvert 52 Curb 53 Island 54 Sand Barrels 55 Impact Attenuator/ Crash Cushion 56 Pavement Drop-Off 57 Ditch 58 Embankment 59 Tree (Standing) 60 Dividing Strip 61 Retaining Wall 62 Bridge Abutment 63 Bridge Pier or Support 64 Bridge Rail 65 Bridge Post 66 Bridge Curb 67 Bridge Super Structure (Beams) 68 Bridge Overhead Structure 69 Delineator 70 Mailbox 71 Other Fixed Object 72 Other Highway Structure 73 Ground 99 Unknown |
|---|---|---|

Remarks

UNIT 1 WAS NORTHBOUND ON LAHOMA. UNIT 2 WAS WESTBOUND ON LINDSEY. UNIT 1 STATED THAT THERE WAS A GAP IN THE CARS AND HE STARTED TO GO THROUGH THE INTERSECTION. UNIT 1 ENTERED THE INTERSECTION AS UNIT 2 ARRIVED AT THE INTERSECTION. THE FRONT LEFT OF UNIT 2 IMPACTED THE RIGHT REAR TIRE OF UNIT 1.