FLORIDA TRAFFIC CRASH REPORT

I LONID	A INALLIC CRASH	KLFOKI					
LONG FORM X	SHORT FORM UPD	ATE		TOTAL # 0	OF VEHICLE SECT	ION(S)	
	IENT OF HIGHWAY SAFET			TOTAL # C	OF PERSON SECT	ION(S) = 2	
	SH RECORDS, NEIL KIRKM ALLAHASSEE, FL 32399-05		9	TOTAL # C	OF NARRATIVE S	ection(s)2_	
CRASH DATE	TIME OF CRASH DATE OF RE		PORTING AGENCY CASE N	NIIMBER	HSMV CRASH REPO	RT NI IMBER	
06/27/2021	6:35 PM 6/28		21-0			89506480	
CRASH IDENTIFIERS							
COUNTY CODE CITY CODE			CITY OF CRASH		CHECK IF WITHIN CITY LIMITS	TIME REPORTED TI	
O1 30 TIME ON SCENE TI	MIAMI-DADE		IARBOUR ovestigation NOT Comple	te)		6:40 PM Notified By	
6:40 PM	8:30 PM COMPLETED	X				2 Law Enfor	rcement 1
ROADWAY INFORM.	ATION (CHOOSE ONLY 1 OF	1 OPTIONS)		AT STREET ADDRESS #	AT LATITU	DE AND LONG	TUDF
	(SHOPS PARKING)			9700	2		
AT FEET MILES		ROM INTERSECTIO	N WITH STREET, ROAD, H			OR FROM	MILEPOST #
Road Syste			Type of Shoulder	,	pe of Intersection	5 Traffic Circle	
77 1 Interstate 2 U.S. 3 State	4 County 8 Private Roadway 5 Local 9 Parking Lot 77 Other, Explain Narrative	3	1 Paved 2 Unpaved 3 Curb		Not at Intersection Four-Way Intersection F-Intersection Y-Intersection	6 Roundabout 7 Five-Point, or M 77 Other, Explain	
CRASH INFORMATIO	ON (CHECK IF PICTURES TAKE	N)					
Light Condition 1 Daylight	I		Roadway Surface Con 5 Oil	dition School Bus		∕lanner of Collision/ ¬	Impact
	6 Dark-Unknown 5 Sleet Lighting 1 Freez	Smog, Smoke t/Hail/ ing Rain ving Sand, Soil,	6 Mud, Dirt, 9 7 Sand	Gravel 1 2 Yes	s, School Bus	4 Sideswipe, s 5 Sideswipe, 0	ame direction Opposite Directio
			Dry 8 Water (star moving) 77 Other, Exp in Narrative	nding/ 3 Yes Indir	ectly involved 1 F	L- D / Rear to Real	r
	Narrative 88 Unknown 1 Clear Dift 2 Cloudy 7 Sev 3 Rain Narra	her, Explain in 4	Ice/Frost in Narrative 88 Unknown	J.C.I.I.	2 Front 1 3 Angle	to Front 77 Other, Exp 88 Unknown	iani ni ivai anve
First Harmful Even	1 Overturn/Rollover 10 Pe 2 Fire/Explosion 11 Pe 3 Immersion 12 Ra 4 Jackkrife opgie	nimal	19 Impact Atter	Illision with Fixed Object nuator/Crash 30 Concr 31 Other or Support 33 Utility 33 Utility 34 Traffi 35 Traffi 36 Other	ete Traffic Barrier	First Harmful Ever Location 1 On Road 2 Off Road 3 Shoulde 4 Median 6 Gore	lway dway
within Interchange 1 No 2 Yes 88 Unknown	Motor Vehicle 16 W 7 Thrown or Falling Equip Object 17 St 8 Ran into Water/Canal Card	otor Vehicle in Tran Irked Motor Vehicle ork Zone/Maintena Ireck by Failling, Shi Ireck by Failling, Shi Ireck Non-Fixed Obje	26 Embankmer fting 27 Guardrail Fa 28 Guardrail En	nt 38 Mailb ice 39 Other	;	7 Separato 8 In Parkir	ng Lane or Zone Right-of-way de
1	Event Relation to		Contributing Circum:	stances: Road	urface Cont	ributing Circumsta	nces:
1 Non-Junction 2 Intersection 3 Intersection-Related 4 Driveway/Alley Access Related	Inction 5 Railway Grade Crossing 14 Entrance/Exit Ramp 15 Crossover - Related 16 Shared-Use Path or Trail 17 Acceleration/Deceleration Lane 18 Through Roadway 77 Other, Explain in Narrative 88 Unknown	1 None 4 Work Zone (maintenance) 6 Shoulders (n 7 Rut, Holes, B	iconstruction/ Intuitible into iconstruction/ Intuitible into iconstruction/ Intuitible into iconstruction/ Intuitible ico	Morn Travel-Polished St. Road Surface Condition I, snow, slush, etc.) Obstruction in Roadway Debris Traffic Control Device operative, Missing or Ob Non-Highway Work Other, Explain in Narrat Unknown	' 1	Environment 5 Anima 77 Othe bastruction(s) 88 Unkn	l(s) in Roadway r, Explain in e own
Work Zone Related		Ту	pe of Work Zone	Workers	in Work Zone	Law Enforcer	nent in
1 No 2 Yes 88 Unknown	1 Before the First W Warning Sign 2 Advance Warning 3 Transition Area 4 Activity Area 5 Termination Area	Area	1 Lane Closure 2 Lane Shift/Crossov 3 Work on Shoulder 4 Intermittent or Mc 77 Other, Explain in I	or Median oving Work Narrative	1 No 2 Yes 88 Unknown	1 No 2 Officer Pro 3 Law Enfor Only Presen	esent cement Vehicle
WITNESSES		ADDRESS		CITY & ST	ATE		ZIP CODE
						4	
WILSON CHERY NAME		ADDRESS	RDING AVE	CITY & ST	FSIDE, FL ATE	i	33154 ZIP CODE
SAM ST GEORGE			LLINS AVE 300		HARBOUR, FL		33154
NAME		ADDRESS		CITY & ST	ATE		ZIP CODE
NON VEHICLE PROPI	FRTY DAMAGE						
	OPERTY DAMAGE - OTHER THAN VEH	ICLE EST. AMOUN	OWNER'S NAME	(Check if Business)	ADDRESS	CITY & STATE	ZIP CODE
VEHICLE # PERSON # PR	OPERTY DAMAGE - OTHER THAN VEH	ICLE EST. AMOUN	IT OWNER'S NAME	(Check if Business)	ADDRESS	CITY & STATE	ZIP CODE

VFHI	CLE #	_		Check if C	`ommer	rial	REPORTING AGENCY CASE NUMBER						HSM	HSMV CRASH REPORT NUMBER							
VLIII	OLL "	1					DECICE	ATION EVEN	21-0			I 1/181		89506480							
2 Parked N 3 Working		1	CMH		/IBEK	STATE FL		ATION EXPIRE 5/2021	S Check Registr		maneni		ICES	СЗМО	031	656					
Hit and Ru 1 No 2 Yes 88 Unknov	2	YEAR	2021	MAKE GEN	IS	MODEL		STYLE			OLOR BLU	-	DAMA 1 Disa 2 Fun 3 Nor	abling 4 N actional 88	/linor Unkn	own 2	EST 5C	. amount O			
INSURANC	CE COMPANY	241	INCLID	ANCE		ANCE POLICY	NUMBER	Towed to Dan 1 No	nage:	1		ICLE REMOV		ic		1 Rotation 2 Owner R 3 Driver	eques	3			
	O GENER VEHICLE OWI				3700	44707	CURREI	NT ADDRESS	z res _			CIT	Y & STA	TE		77 Other,	Explair ZIP C	in Narrative ODE			
	R. GOL							OINCIA	NA IS	LD	DR	Sl	NNN	/ ISLES	S BI	EACH,	33	160			
TRAILER #	LICENSE NU	MBER	STATE	REGISTRATIO	ON EXPIRES	Check if Per Registration		/IN					YEAR	MAK	E	LEN	GTH	AXLES			
TRAILER #	LICENSE NU	MBER	STATE	REGISTRATIO	ON EXPIRES	Check if Per Registration		/IN					YEAR	MAK	E	LEN	GTH	AXLES			
VEHICLE	N S	E	W Off-Ro	oad Unknowi	า		ON STRE	EET, ROAD, HI	GHWAY					AT EST. SF	PEED	POSTED SPE	ED T	OTAL LANES			
TRAVELING			X			97	00 CC	DLLINS	4VE (SHC	OPS	PARKI	NG)	5				1			
HAZ. MAT 1 No 2 Yes 88 Unknov	. RELEASED	1 No		CARD H	AZ. MAT. NI	UMBER	HAZ. MAT	T. CLASS	A 2		f Initia	I Impact -	▼	ndercarriag	¬ ▼		-	ged Area			
	ARRIER NAME		JIKHOWH			US DOT N	IUMBER			15 (16	17 8	19	Overturn Windshield Trailer	19 20 21	1 (15(16	17 8			
MOTOR CA	ARRIER ADDR	ESS				CITY 8	& STATE		14	13	12 1	<u> </u>	P CODE	runer	_	PHONE NUI		1 10 9			
Vehic	le Body Tyj	ne				Trafi	icway					Commercia	I Motor	vehicle (Confi	iguration					
1 Passeng 2 Passeng 3 Pickup 7 Motor H	16 er Car	15 16 17 (4, 18	Low Speed (Sport) Utili Cargo Van (536 kg) or le Motor Coad Other Light 536 kg) or le Medium/He	Vehicle ty Vehicle 10,000 lbs ess) Trucks (10,0 ess) eavy Trucks (1 36 kg)) Vehicle	5 00 lbs	1 Two-Way 2 Two-Way Continuous 3 Two-Way (painted >4 4 Two-Way Barrier 5 One-Way	, Not Divide , Not Divide , Left Turn , Divided, , feet) Med , Divided, Trafficwa	ded ded, with a Lane Unprotected dian Positive Med	ian		1 Vehic for Haz 2 Single more tl 3 Single 4 Truck 5 Truck 6 Truck	cle 10,000 lb cardous Mat e-Unit Truck han 10,000 e-Unit Truck c Pulling Trai c Tractor (bo c Tractor/Se	s or less erials (2-axle lbs (4,53 (3 or m ller(s) bbtail) mi-Traile	Placarded and GVWR 6 kg) ore axles)	8 Tra 9 Tru kg), (10 Bi occu 11 Bi occu 77 O	actor/Triple uck more tha Cannot Class us/Large Var pants, includ us (seats for pants, includ ther, Explair nknown	in 10,0 ify n (seat: ding dr more ding dr n in Na	00 lbs (4,536 s for 9-15 iver) than 15 iver) rrative			
8 Bus 11 Motoro				Vehicle ain in Narrati	ve 1	88 Unknow		2 Tandem Se 3 Tank Traile	Trailer mi Trailer	8 Po 9 To	le Trail	er ehicle	uble Tra	Cargo B	ody Enclo	Type 13 sed Box Cor	Interm	odal Chassis			
	Coi	mm/No Intersta Intrasta Not in C	n-Comme te Carrier te Carrier ommerce/G ommerce/O	overnment				4 Saddle Moi 5 Boat Traile 6 Utility Trail 7 House Trail	unt/Traile er er	r 77 0 Narr 88 U	ative nknow		1 No Car 2 Bus	8 Dum 9 Conc	o Lani ed p rete N	k 15 (ve	Not Ap hicle 1 536 kg	e Towing /ehicle oplicable 0,000 lbs or less not y NM placard Explain in			
Most Ha	rmful Even	1	Non-Collisio Overturn/Ro Fire/Explosio	llover		Comm GVWR/G	CWR	2 1 3 N 4 N	0,001-26, lore than lot Applic	000 lb 26,00 able	os (4,53 00 lbs (less 36-11,793 kg 11,793 kg)	1)	10 Aut 11 Gar 12 Log	bage/	veinge Nat	Other, rative Unkno				
-	ce of Events	3 4 5 6 7 8 8 9 1 4 4 40 br 41 42 43 43	Immersion Jackknife Cargo/Equip Fell/Jumped Thrown or F Ran into Wa Other Non-C 0-46 Sequer 0 Equipment ake failure, Separation P Ran Off Roo Ran Off Roo R Cross Medi	ment Loss or From Motor alling Object ter/Canal Collision nce of Events Failure (blov etc.) of Units adway, Right adway, Left an	only] vn tire,	13 Animal 14 Motor 15 Parked 16 Work Z Eguipmer 17 Struck Anything Vehicle 18 Other	rian ycle y Vehicle (Vehicle in Motor Ve one/Mair it by Falling Set in Mot Non-Fixed	(train, engine) Transport chicle tenance , Shifting Carg tion by Motor	19 li 20 E 21 E 22 E 23 C 24 C	mpact Bridge Bridge Culvert Curb Ditch Imban Guardr Guardr	Attent Overho Pier or Rail t kment rail Fact rail End	l	Cushior e	31 Other 1 32 Tree (s: 33 Utility I 34 Traffic 35 Traffic 36 Other F 37 Fence 38 Mailbo 39 Other F building, t	te Tra Fraffic tandir Pole/L Sign S Signal Post, F x ixed (unnel	affic Barrier : Barrier : Barrier : 19) ight Suppor : Support Support Support Pole, or Support Object (wall, etc.)	t v	mergency ehicle Use 1 No 2 Yes 38 Unknown			
Roadwa	1 Level 2 Hillcrest 3 Uphill 4 Downhill 5 Sag (botto	Ro m)		unaway	4	ehicle Mane B Straight Ahe B Turning Left Backing Turning RIgh C Turning RIgh C Changing Lai B Parked O Making U-T C Massing Cassing	ad 13 S 14 S t 15 N t 16 L nes 17 E turn Nari 88 L	topped in Tra lowing legotiating a (eaving Traffic intering Traffi Other, Explain rative Jnknown	5	No Co Schoo evice Traffi	ntrols ol Zone	8 Flas	shing Sig way Crose erson (in- nan, Offi d, etc.) arning S ther, Exp	nal	None Brake Tires Lights gnal,	es (head, tail)	12 Sus 13 Wh 14 Wir Winds 15 Mir 16 Tru	pension eels dows/ hield rors ck Coupling/ Hitch/ Chains er, Explain in			
	Special Fu of Motor V		2 Farm \ 2 Farm \ 3 Police 7 Taxi 8 Milita	Vehicle	10 Fire 1 11 Farm 12 Schoo	lance Fruck Labor Transp ol Bus sit/Commuter	1/	Intercity Bus Charter/Tou Shuttle Bus Farm Labor I Unknown	Bus 5 Bus 7	gnal Stop S Yield	Sign Sign	Narra 88 Ur	ner, Exp itive iknown	9	Steer Wipe Exhau D Bod 1 Pow			Hitch/ Chains ner, Explain ii ive known			
VIOLATI PERSON #		ı	NAME OF VI	OLATOR		FL	. STATUTE	NUMBER				CHAR				CITA	TION N	IUMBER			
1	MICHAEI	_ A. G	ATES			316.065	(1)			ash . Iver		_ TO REPO	ORT CF	RASH -		AEDONE	EE				
PERSON #		ſ	NAME OF VI	OLATOR		FL	. STATUTE	NUMBER				CHAR	GE			CITA	TION	IUMBER			
PERSON #		ı	NAME OF VI	OLATOR		FL	. STATUTE	NUMBER				CHAR	GE			CITA	TION	IUMBER			

VFHI	CLE #	_	Ch	neck if Con	nmerci	REPORTING AGENCY CASE NUMBER					ER	HSMV CRASH REPORT NUMBER							
V LI III	OLL "	2								-09				8	950	648C)		
2 Parked N 3 Working		ك	95AEP		₹	STATE FL		RATION EXPIRE 21/2021		ck if Pe istratio	rmanen r		EVAF	1XMD0	3709	3			
Hit and Ru 1 No 2 Yes 88 Unknow	11	YEAR	2021	AUDI		MODEL		STYLE			COLOR WHI		DAM/ 1 Disa 2 Fun 3 Nor	AGE: abling 4 Mir ctional 88 Ur ne	nor nknown	2	1,C	AMOUNT 100	
INSURANC	E COMPANY		RWRITE	RS	INSURAI PA226	NCE POLICY 7285	NUMBER	Towed to Dar 1 No	nage:	1		ICLE REMO' EINBER	VED BY		1 R 2 O 3 D	otation Wner Re Priver	•	2 n Narrative	
NAME OF	VEHICLE OW	NER (C	heck if Busines					NT ADDRESS			-		Y & STA				ZIP CO	DE	
	D J. STE			CICTRATION	VDIDEC			AVOCAE	00 A	VE		M	I AMI			LIENC	331		
I KAILEK #	LICENSE NU	JIVIBER	STATE RE	EGISTRATION E		Check if Per Registration		VIIN					YEAR	MAKE		LENG	"	AXLES	
TRAILER #	LICENSE NU	IMBER	STATE RE	EGISTRATION E		Check if Per Registration	manent	VIN					YEAR	MAKE		LENG	TH	AXLES	
VEHICLE	N S	E	W Off-Road	I Unknown			ON STR	EET, ROAD, H	GHWA	Y				AT EST. SPE	ED POST	TED SPEE	D TC	TAL LANES	
TRAVELING						97	00 C	OLLINS.	AVE	(SH	OPS	PARKI	NG)						
HAZ. MAT. 1 No 2 Yes 88 Unknov	. RELEASED	1 N 2 Ye	Z. MAT. PLACAR o es Jnknown	RD HAZ. I	MAT. NUI	MBER	HAZ. MA	T. CLASS	٦.			Il Impact -	▼	ndercarriage	▼ _	Most D	_	ed Area	
	ARRIER NAM		STIKHOWIT E			US DOT N	IUMBER			14 13	16	17 8	19 20 21	Windshield	19 20 21	<u>1-7</u> 2	16	17 8	
MOTOR CA	ARRIER ADDF	RESS				CITY	& STATE			•	<u> </u>	Z	IP CODE	I	PHO	NE NUM			
Vehic	le Body Ty	pe 15	Low Spood Vol	hiclo		Traff	icway				1 Vohi	Commercia	al Motor	Vehicle Co	nfigura	ation			
	1	16 17	Low Speed Vel (Sport) Utility V Cargo Van (10, 536 kg) or less) Motor Coach Other Light Tru	Vehicle ,000 lbs	5	2 Two-Way Continuous	, Not Divi , Not Divi Left Turr	ided ided, with a n Lane , Unprotected edian , Positive Med			for Haz	zardous Ma e-Unit Truck	terials (2-axle	Vehicle Co Placarded 8 9 and GVWR k 6 kg) 1 ore axles) 0 er 7 iller 8	Truck m g), Cann	ore than ot Classif	10,00 V	0 lbs (4,536	
1 Passenge	er Car	(4, 18 19	536 kg) or less) Motor Coach Other Light Tru) ucks (10.000 lb	os	3 Two-Way (painted >4	, Divided feet) Me	, Unprotected edian Positive Med	ian L		more t 3 Singl 4 Trucl	nan 10,000 e-Unit Truck k Pulling Tra	lbs (4,53 ((3 or m iler(s)	6 kg) 1 ore axles) 0 1	0 Bus/La ccupants 1 Bus (se	irge Van s, includi eats for n	(seats ng driv	for 9-15 er) an 15	
2 Passenge 3 Pickup 7 Motor H	er van ome	(4, 20	536 kg) or less) Medium/Heav	y Trucks (more	e than	5 One-Way	Trafficwa	ау		_	5 Truck 6 Truck	k Tractor (be k Tractor/Se	obtàil) mi-Traile	o er 7	ccupants 7 Other,	s, includi Explain	ng driv n Narr	er) ative	
8 Bus 11 Motorc 12 Moped		21 77	536 kg) or less) Medium/Heav ,000 lbs (4,536 Farm Labor Ve Other, Explain	ehicle in Narrative	TR	88 Unknow AILER 1 TF		1 Single Sem 2 Tandem Se 3 Tank Traile		. 8 P	ole Trai	ler		Cargo Bo	dy Tyn				
13 All Terr	ain Vehicle (ATV) °°	on-Commerci		$\dashv \lceil$			4 Saddle Mo	unt/Tra	iler 9 T	owed V	ehicle ansport		3 Van/Er 4 Hoppe 5 Pole-Tr	iclosed E r railer	Box Cont	ainer (Chassis Towing	
	$\frac{1}{2}$	Intersta Intrasta	te Carrier te Carrier		-			5 Boat Traile 6 Utility Trail 7 House Trai		Nai	rrative Unknov	ın l	1 No Car 2 Bus	go 7 Flatbed	ank	Ano 15 N (veh	iner ve lot App icle 10	enicie dicable .000 lbs	
			ommerce/Gove	er Truck		Comm				bs (4,5;	36kg) or	less 36-11,793 kg)		8 Dump 9 Concre 10 Auto	Transpor	. (4,50 rt 77.0	36 kg) (laying l	Chassis Towing Phicle Phicle Jood Ibs Or less not NM placard Explain in	
Most Ha	rmful Even	1	Non-Collision Overturn/Rollo Fire/Explosion	over		GVWR/G	CWR	3 1	lore the lot App	an 26,0 dicable	000 lbs (11,793 kg)	9)	11 Garba 12 Log	ige/Refu		ative nknow		
1	5	4.	Fire/Explosion Immersion Jackknife			Collision wi		ixed Object				Fixed Obje		29 Cable Bai 30 Concrete	rier Traffic F	Barrier		nergency	
Sequence	 ce of Event	s 7	Cargo/Equipme Fell/Jumped Fro Thrown or Falli Ran into Water	ent Loss or Snii om Motor Veh ing Object	nicle	11 Pedalc	ycle v Vehicle	(train, engine	2	0 Bridg 1 Bridg	e Overh e Pier o	ead Structu r Support	re	31 Other Tra	affic Barr	ier		hicle Use	
1st	2nd	9	Other Non-Coll	lision		14 Motor 15 Parked	Vehicle ir Motor V	n Transport ehicle	2 2	2 Bridg 3 Culve 4 Curb	e Raii ert	ead Structu r Support		32 Tree (star 33 Utility Po 34 Traffic Sid 35 Traffic Sid	ie/Light in Suppo inal Sup	Support ort port		1	
15		[4 40	0-46 Sequence Equipment Fa ake failure, etc	e of Events only illure (blown ti	y] re,	16 Work Z Equipmer 17 Struck	ione/Mai it by Falling	ntenance J, Shifting Caro tion by Motor	2 0 or 2	5 Ditch 6 Emba	inkment drail Fac drail Enc	t vo		36 Other Po 37 Fence 38 Mailbox	śt, Pole,	or Suppo	ין ב	No Yes	
3rd	4th	41	I Separation of 2 Ran Off Roady 3 Ran Off Roady 1 Cross Median	Units way, Right	_	Vehicle			2	8 Guard	drail End	Ĕ		39 Other Fix building, tur	ed Objed Inel, etc.	ct (wall,	86	Ünknown	
		4:	cross centerii	ine 🕕	Vel	18 Other	uver Ac			1	Fraffic	Control De	evice Fo	or Ve	hicle D	efects		7	
Roadwa		_	Downhill Runa Dadway Align		$\frac{13}{3}$	Straight Ahe Furning Left Backing	ad 13 :	Stopped in Tra Slowing					is Vehic	1 1	1				
	1 Level 2 Hillcrest 3 Uphill			- 11 '	8 5	Backing Furning Righ Changing Lai Parked	nes 17 i	Negotiating a Leaving Traffic Entering Traffi	Lane c Lane	L	1	9 Rai Devi	shing Sig Iway Cro ce	ssing L		1	2 Susp 3 Whe	ension els dows/	
	4 Downhill 5 Sag (botto	om] L	1 2 Curv 3 Curv	ight ve Right ve Left	10	Parked Making U-T Overtaking	urn Nar	Other, Explain rative Unknown	in	4 Scho	Controls ool Zone	10 Pe Sign/ Flagr	erson (in man, Offi d, etc.)	cluding 2 Br cer, 3 Ti	akes res	V	vinasn	IEIU	
	Special Fu	ınction	1 No Specia	al Function	Pa Ambula	ssing on the same of the same	00	4 Intercity Bus 5 Charter/Tou		Signal	e fic Cont	rol 13.W	arning S ther, Exp ative	ign sign Ilain in 6 St	ghts (hea al, tail) eering	au, 1 1 T	6 Trucl railer l	ors k Coupling/ Hitch/	
	of Motor V	ehicle	2 Farm Veh 3 Police 7 Taxi 8 Military	1	12 School	abor Transp	ort 1	5 Charter/10u 6 Shuttle Bus 7 Farm Labor 8 Unknown		6 Stop 7 Yield	d Sign d Sign	Narr 88 U	ative nknown	9 Ex 10 E	'ipers" thaust Sy Body, Do Power Tr	ors (\	afety C 7 Othe Iarrativ 8 Unkr	chains er, Explain ii ve nown	
VIOLATI			NAME OF VIOL	ATOP.		FI	CTATILIT	NIIINADED				CIIA	OCE.			CITAT	ייא ואסו	INADED	
PERSON #		ļ	NAME OF VIOL	AIUK		FL	SIAIUIL	E NUMBER				CHAF	NGE			UIAI	IVIN INC	JMBER	
PERSON #		ı	NAME OF VIOL	ATOR		FL	. STATUTE	NUMBER	+			CHAF	RGE		+	CITAT	ION NU	JMBER	
PERSON #		I	NAME OF VIOL	AIOR		FL	SIATUTE	ENUMBER				CHAF	RGE			CITAT	ION NU	JMBER	

	REP.	ORTING AGENCY CASE NUMBER	HSMV CRASH REF	PORT NUMBER
PERSON # 1	KEI	21-0917		89506480
1 Driver 2 Non-Motorist 1 VEHICLE # NAME	EL A 04750		PHONE NUMBE	Recommend
3 Passenger 1 MICHA CURRENT ADDRESS (Number	AEL A. GATES	CITY & STATE	(561) 789-	8867 Driver Re-exam ZIP CODE
308 POINCIANA ISLAND DE	•	SUNNY ISLES B	CH, FL	33160
DATE OF BIRTH SEX: DRIVER	R LICENSE NUMBER	STATE EXPIRES	INJURY SEVERITY (INJ) 1 None	4 Incapacitating
03/19/1949 2 Female 88 Unknown G32	0541490990	FL 03/19/202	8 2 Possible 3 Non-incapacitating	5 Fatal (within 30 days) 6 Non-Traffic Fatality
DL Type Required Endors	sements Drivers A	Actions at Time of Crash	dway 3rd	Condition At
1 A 2 B 3 C 4 D/Chauffeur 5 E/Operator 5 E/Operator 2 1 Yes 2 No 3 No Req. Endo	orsement 1st 1 No Contrib 2 Operated Negligent No. 2 Failed to N.	outing Action 26 Ran off Roa VV in Careless or anner 28 Disregarder 28 Disregarder	d other Traffic	Time of Crash
7 None	3 Failed to Vi	Backing Markings 29 Over-Corre		1 0 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2 Floatronia Communication 5 External	Distraction	too Closely Steering 30 Swerved or ight to Wind, Slipp Fast for Conditions Object, Non-M	Avoided: Due 4th ery Surface, MV otorist in	3 Asleep of ratigued 5 Ill (sick) or Fatigued 6 Seizure, Epilepsy, Blackout 7 Physically Impaired 8 Emotional (depression, angry, disturbed, etc.) 9 Under the Influence of Madications (Prus; Alrobol
	ne vehicle, explain e) 12 Drove too 13 Ran Stop 15 Improper	Sign Sastron Conditions Object, Non-M Roadway, etc.	oforist in	
3 other Electronic Device (navigation device, DVD player) 7 Inattentif	ve 17 Exceeded vn 21 Wrong Sig 25 Failed to	Object, Non-N Sign Roadway, etc. 31 Operated N Reckless or Ag 47 Other Cont	IV in Erratic, gressive Manner ributing Factor	77 Other, Explain in Narrative 88 Unknown
1 Vision Not Obscured 5 Load on Veh 2 Inclement Weather 6 Building/Fixe 3 Parked/Stopped Vehicle 7 Signs/Billboa	ed Object 10 Glare	DR	VER OR PASSENGER	
3 Parked/Stopped Vehicle 7 Signs/Billboa 4 Trees/Crops/Bushes 8 Fog DRIVER OR PASSENG	in Narrative	1 DOT-Compliant	otection (EP)	Restraint Systems (RS)
	ATION: SEAT ROW OTHER	Motorcycle Helmet 2 Other Helmet 3 No Helmet		
Seat Row Other \	´ 1 1 1	Air Bag Deployed (ABD)	5 Deployed-Other (knee, air belt, etc.) 3 Sho 4 Sho 5 Lan	t Applicable ne Used - Motor Vehicle Occupant oulder and Lap Belt Used oulder Belt Only Used o Belt Only Used straint Used - Type Unknown ld Restraint System - Forward Facing ld Restraint System - Rear Facing ster Seat
3 Right 3 Third 3 Other Enclose Cargo Ar 77 Other 4 Fourth 4 Unenclosed Cargo Ar	uck Cab Area ea Ejection (EJI 1 Not Ejected 2 Ejected - To	ECT) 1 Not Applicable	6 Deployed- Combination 6 Res 7 Deployed-Curtain 7 Chi	straint Used - Type Unknown Id Restraint System - Forward Facing
(explain in 77 Other Row 5 Trailing Unit narrative) 88 Unknown 6 Riding on Motor Veh 88 Unknown trailing unit)	icle Exterior (non- 3 Ejected - Pa 4 Not Applica		Unknown 10 Ch	nild Restraint - Type Unknown
88 Unknown	88 Unkṅówn NON-M	OTORIST		ther, Explain in Narrative
Non-Motorist Description 1 Pedestrian	Non-Motorist Location At 1 Intersection - Marked Crosswa	lk 8 Sidewalk	Action Pric	or to Crash 5 Walking/Cycling on Sidewalk
2 Other Pedestrian (wheelchair, person in a building, skater, pedestrian conveyance, etc. 3 Bicyclist	4 Midblock - Marked Crosswalk	10 Driveway Access 11 Shared-Use Path or Trail		5 Walking/Cycling on Sidewalk 6 In Roadway Other (working playing, etc.) 7 Adjacent to Roadway (e.g.,
4 Other Cyclist 5 Occupant of Motor Vehicle Not in Transpor (parked, etc.)	5 Travel Lane - Other Location 6 Bicycle Lane 7 Shoulder/Roadside	12 Non-Trafficway Area 77 Other, Explain in Narrative 88 Unknown	1 Crossing Roadway 2 Waiting to Cross Roadwa 3 Walking/Cycling Along Roadway with Traffic (in o	ay shoulder, median) 8 Going to or from School (K-12
6 Occupant of a Non-Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist	Non-Motorist Actions/Circ	umstances	adiacent to travei lane)	10 None
Safety Equipment	1st 2 Dart/Dash 3 Failure to Yield F 4 Failure to Obey Signals, or Officer	Right-of-Way	4 Walking/Cycling Along Roadway Against Traffic (i adjacent to travel lane)	n or 88 Unknown
1 None 5 Lighting 2 Helmet 6 Not Applicable 77 Other, Explain	— I I I SID ROADWAY IMD	roneriy istanding Vehicle	· 11	Improper Turn/Merge Improper Passing
(elbows, knees, shins, etc.) in Narrative 4 Reflective Clothing (jacket, 88 Unknown backpack, etc.)	2nd 1911g, Working, pla 6 Disabled Vehicle on, pushing, leavin	e Related (working - 9 Not Visible (d	ark clothing, no 177	! Wr'ong-Way Riding or Walking ' Other, Explain in Narrative ! Unknown
	ALCOHOL/ HOL TEST TYPE: ALCOHOL	DRUG/EMS BAC SUSPECTED DRUG	G TESTED: DRUG	G TEST TYPE: DRUG TEST RESULT:
ALCOHOL USE: 1 Test Not Given 1 Blod 2 Test Refused 1 2 Bred 2 Test Circus 1 Blod 2 Bred 2 Br	od TEST RESULT:	DRUG USE: 1 Tes 1 No 1 1 Tes	t Not Giver 1 Block Refused 1 3 Urir	od 1 Positive 2 Negative
88 Unknown 88 Unknown, if Tested 77 Ot Narra	ther, Explain in 88 Unknown	88 Unknown 88 U	nknown, if Tested Expla	in in Narrative 88 Unknown
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement		EMS RUN NUMBER	MEDICAL FACILITY TRA	NSPORTED TO
77 Other, Explain in Narrative 88 Unknown	NOT WARRANTED ADDITIONAL	PASSENGERS		
PERSON # VEHICLE # NAME				O EJECT HU EP ABD RS
2 1 DANA R. GOLDMA CURRENT ADDRESS (Numb		11/25/1961 CITY & STATE	1 2 3 1 1	1 1 3 3 2 3 ZIP CODE
308 POINCIANA ISLD DR APT	,	SUNNY ISLES B	EACH, FL	33160
SOURCE OF TRANSPORT TO MEDICAL FACILITY	EMS AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY TRA	
2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown PERSON # VEHICLE # NAME	NOT WARRANTED	DATE OF BIRTH	NJ SEX LOC: S R (
4 2 ALBRICIA YEPEZ			NJ SEX LOC: S R 0 1 2 77 88 1	0 EJECT HU EP ABD RS 1 1 3 3 2 1
CURRENT ADDRESS (Num	ber and Street)	CITY & STATE	1 2 77 00	ZIP CODE
3630 AVOCADO AVE		MIAMI, FL		33133
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other Explain in Narrative 88 Unknown	EMS AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY TRA	NSPORTED TO
1 77 Other Explain in Narrative 88 Unknown	NOT WARRANTED		I	

	R	EPORTING AGENCY CASE NUMBER	Н2МУ СВДС	REPORT NUMBER
PERSON # 3	, and the second	21-0917	TISWV CRASIT	89506480
	J. STEINBERG	ALTVA ATATE	(305) 61	9-6069 Recommend Driver Re-exam
CURRENT ADDRESS (Number 3630 AVOCADO AVE	r and Street)	CITY & STATE MIAMI, FL		ZIP CODE 33133
DATE OF BIRTH SEX: DRIVE	R LICENSE NUMBER	STATE EXPIRES	INJURY SEVERITY (INI)
10/21/1971 2 Female 88 Unknown S-3	51-170-71-381-0	FL 10/21/20	29 2 Possible	4 Incapacitating 5 Fatal (within 30 days) ng 6 Non-Traffic Fatality
1 2 Electronic Communication Devices (cell phone, etc.) 3 Other Electronic Device (navigation device, DVD player) 7 Inattent 88 Unkno	In the sements of the sements of the sement	s Actions at Time of Crash Tibuting Action Id MV in Careless or Manner O Yield Right-of-Way er Backing Turn ed too Closely Id Light too Fast for Conditions op Sign er Passing led Posted Speed Side of Wrong Way to Keep in Proper Lane	ded other Traffic ded Other Road recting/Over- or Avoided: Due opery Surface, MV c. Hotorist in ic. I MV in Erratic, Aggressive Manner ntributing Factor	Condition At Time of Crash 1 Apparently Normal 3 Asleep or Fatigued 5 Ill (sick) or Fatigued 6 Setzure, Epilepsy, Blackout 7 Physically Impaired 8 Emotional (depression, angry, disturbed, etc.) 9 Under the Influence of Medications/Drugs/Alcohol 77 Other, Explain in Narrative 88 Unknown
2 Inclement Weather 6 Building/Fix 3 Parked/Stopped Vehicle 7 Signs/Billbo 4 Trees/Crops/Bushes 8 Fog	ed Object 10 Glare ards 77 All Other, Explain in Narrative		Protection (EP)	Restraint Systems
DRIVER OR PASSEN Motor Vehicle Seating Position: LOO	GER CATION: SEAT ROW OTHER	Motorcycle Helmet 2 Other Helmet 3 No Helmet 3 No Helmet	2 No	1 (RS) Not Applicable
	ruck Cab Fjection (18	Air Bag Deployed (ABD) tted - Totally - Partially (Icable 1	5 Deployed-Other (knee, air belt, etc.) 5 Deployed- 6 Deployed- 6 Combination 7 Deployed-Curtain 18 8 Deployment et Unknown 11	Not Applicable None Used - Motor Vehicle Occupant Shoulder and Lap Belt Used Shoulder Belt Only Used Lap Belt Only Used Restraint Used - Type Unknown Child Restraint System - Forward Facing Child Restraint System - Rear Facing Booster Seat 0 Child Restraint - Type Unknown 7 Other, Explain in Narrative
Non-Motorist Description	Non-Motorist Location A	t Time of Crash	Action F	Prior to Crash
1 Pedestrian 2 Other Pedestrian (wheelchair, person in a building, skater, pedestrian conveyance, etc. 3 Bicyclist 4 Other Cyclist 5 Occupant of Motor Vehicle Not in Transpo (parked, etc.) 6 Occupant of a Non-Motor Vehicle Transportation Device 7 Unknown Type of Non-Motorist Safety Equipment 1 None 2 Helmet 3 Protective Pads Used 7 Other, Explain	4 Midblock - Market Crosswa 5 Travel Lane - Other Location 6 Bicycle Lane 7 Shoulder/Roadside Non-Motorist Actions/Ci 1 No Improper 2 Dart/Dash 3 Failure to Yie 4 Failure to Other 5 Graphs or Office	osswalk 9 Median/Crossing Island 10 Driveway Access Ik 11 Shared-Use Path or Trail 12 Non-Trafficway Area 77 Other, Explain in Narrativ 88 Unknown rcumstances Action Id Right-of-Way ey Traffic Signs,	3 Walking/Cycling Alon Roadway with Traffic (i	ic (in or 99 Unknown
(elbows, knees, shins, etc.) in Narrative 4 Reflective Clothing (jacket, 88 Unknown backpack, etc.)	2nd lying, working, 6 Disabled Vehi on, pushing, lea	icle Related (working 9 Not Visible	(talking, eating, etc.) (dark clothing, no	12 Wrong-Way Riding or Walking 77 Other, Explain in Narrative 88 Unknown
ALCOHOL USE: 1 No 2 Yes 88 Unknown 1 1 Stephen 2 Test Not Given 2 Test Refused 3 Test Given 8 Unknown, if Tested 7 Narr	OHOL TEST TYPE! ALCOHOL TEST RESULT: 1 Pendina	DRUG USE: 1 No 2 Yes 88 Unknown 88	Test Not Giver 1 1 3 7 1 1 3 7 1	RUG TEST TYPE: DRUG TEST RESULT: Blood Urine 1 Positive 2 Negative 3 Pending 88 Unknown
SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown	NOT WARRANTED	EMS RUN NUMBER	WEDICAL PACILITY	RANSPORTED TO
PERSON # VEHICLE # NAME	ADDITION	AL PASSENGERS DATE OF BIRTH	INJ SEX LOC: S R	O EJECT HU EP ABD RS
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SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other Explain in Nagrative 88 Unknown	EMS AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY	RANSPORTED TO

NARRATIVE	REPORTING AGENCY CASE NUMBER	HSMV CRASH REPORT NUMBER
NARRATIVE	21-0917	89506480

Vehicle 1 was seen by a anonymous witness and on security surveillance camera (see video) entering the valet parking lot (white c) of the Bal Harbour Shops. Vehicle 1 was seen attempting to back into a parking space when his rear bumper collided with a parked, unoccupied white vehicle (vehicle 2). Vehicle 1 then pulled forward, turned left and parked in a space a few rows over. Shops Valet witnessed the vehicle attempting to self park in the valet area, and advised the driver (Driver 1, Gates) that he was not allowed to self park in that specific lot. Vehicle 1 then left the area.

At this time the anonymous witness reported to valet that vehicle 1 had backed into vehicle 2. Valet inspected Vehicle 2 and saw there was damage to vehicle 2's rear driver wheel/fender area (see photos). Valet contacted BHPD to report the incident.

Vehicle 1 was located on the ground floor of the parking garage parked in a parking space, however the driver was not in the vehicle.

Upon inspecting vehicle 1, I witnessed damage to the rear passenger taillight and bumper with white paint transfer on the bumper (see photos).

While awaiting for the vehicle owners to arrive, I reviewed the Shops video surveillance footage with shops security officer Wilson. The video showed vehicle 1 back into vehicle 2 hard enough to rock vehicle 2 in its place. At no time on the video did driver 1 appear to inspect for the object he struck.

I waited with vehicle 2 until the owners of both vehicles arrived back to their vehicles. When vehicle1's owner returned with his wife (Goldman), I stated that he was witnessed backing into another vehicle in the valet parking area. I asked driver 1 if he had realized he was in an accident. Driver 1 stated that he noticed he had hit something but stated he believed it was a pole he had backed into. I asked if he had gotten out of his vehicle to inspect what he hit and he stated again the he believed he had stuck a pole so he did not. When I advised him that he needed to inspect for any damages after being in an accident, and that leaving the scene of an accident with damages was a crime, he became defensive, stating that his wife is the Commissioner or Sunny Isles and that he is not a

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NA DD A TIVE	REPORTING AGENCY CASE NUMBER	HSMV CRASH REPORT NUMBER
NARRATIVE	21-0917	89506480
criminal. I stated that I was not attempt	ing to insinuate that he	was a criminal, but
that leaving the scene of an accident with	damage is a misdemeanor	crime. I told driver 1

that leaving the scene of an accident with damage is a misdemeanor crime. I told driver 1 that whether it be a pole or a vehicle, any damage to property needed to be reported, and under his own statement, he knew he had struck an object with his vehicle and failed to inspect for damage.

Driver 1 continued to be very defensive and tell me that I was accusing him of being a criminal and that his wife is the Commissioner of Sunny Isles.

Driver 2 and his wife arrived on scene at approximately the same time as driver 1 and his wife. I attempted to allow both drivers come to a settlement on scene, however one was not mutually reached. Driver 2 requested a hit and run report be written and due to the circumstances, a hit and run report was warranted. Driver 2 was issued a BHPD case card and was allowed to leave the scene.

I contacted Sgt Destefano to respond to the scene and he arrived shortly after to speak with driver 1 (see supplemental report). While speaking with driver 1, driver 1 changed the object multiple times in his story of what he believed he had struck (1. a pole, 2. a curb, 3. a road cone).

Driver 1 was ultimately issued a criminal citation for leaving the scene without reporting and issued a case card.

Sgt Destefano, Officer Armstrong as well as Shops security were all on scene.

a later inspection of the area revealed no pole or traffic cones are in the immediate area of where the collision took place. A check with Shops security revealed no traffic cones are placed in the valet parking lot.

* * F N D * *

Photos and video to be attached

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PERSON # VEHICLE	# NAME		DATE OF BI		INJ	SEX	LOC: S	R	0	EJECT	HU	EP	ABD	RS		
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