Laredo Urban Transportation Study

Metropolitan Planning Organization Policy Committee

Notice of Public Meeting

City of Laredo City Hall
City Council Chambers
1110 Houston Street
Laredo, Texas
November 16, 2015
12:00 noon

MEETING AGENDA

I. CHAIRPERSON TO CALL MEETING TO ORDER

II. CHAIRPERSON TO CALL ROLL

III. COMMITTEE AND DIRECTOR'S REPORTS (No action required)

IV. ITEMS REQUIRING POLICY COMMITTEE ACTION

A. Approval of the minutes for the meeting held on October 19, 2015.

B. Discussion with possible action regarding the roadway improvements to the Guadalupe Street Kansas City Southern (KCS) overpass.

C. Discussion with possible action to add amendments to the Highway MTP/TIP to program Loop 20/U.S. 59 from International Blvd. to U.S. 59 Business for Engineering, Right-of-Way acquisition, and Construction.

D. Discussion with possible action on Hachar Road.

E. Discussion with possible action on Mines Road.

1. Presentation by the Texas Transportation Institute (TTI) on the FM 1472 medium-range improvement strategies with Hachar and Vallecillo Roads and any possible action related thereto.

F. Supporting the City of Rio Bravo's non-urban Transportation Alternatives Program application entitled "Rio Bravo Safe Path and Safe Routes to School" as submitted to the TxDOT.

V. TECHNICAL COMMITTEE REPORT(S) (No action required)

A. Status report on the Regional Mobility Authority (RMA).

VI. ADJOURNMENT

THIS NOTICE WAS POSTED AT THE MUNICIPAL GOVERNMENT OFFICES, 1110 HOUSTON STREET, LAREDO, TEXAS, AT A PLACE CONVENIENT AND READILY ACCESSIBLE TO THE PUBLIC AT ALL TIMES. SAID NOTICE WAS POSTED BY NOVEMBER 13, 2015, BY 12:00 P.M.

Persons with disabilities who plan to attend this meeting and who may need auxiliary aid or services are requested to contact Ms. Vanessa Guerra, City Planning at (956) 794-1604 at least two working days prior to the meeting so that appropriate arrangements can be made. The accessible entrance and accessible parking spaces are located at City Hall and can be accessed through the Victoria Ave. entrance.

The Laredo Metropolitan Planning Organization Policy Committee is comprised of the following members:

CITY OF LAREDO REPRESENTATIVES:

Honorable Pete Saenz, Mayor and LUTS Chairperson
Honorable Roque Vela, Jr., City Councilmember, District V
Honorable Charlie San Miguel, City Councilmember, District VI

LAREDO MASS TRANSIT BOARD REPRESENTATIVE:

Honorable Roberto Balli, City Councilmember, District VIII

COUNTY OF WEBB REPRESENTATIVES:

Honorable Tano E. Tijerina, Webb County Judge
Honorable John Galo, Webb County Commissioner, Pct. 3
Honorable Jaime Canales, Webb County Commissioner, Pct. 4

STATE REPRESENTATIVES:

Mr. Pete Alvarez, P.E., District Engineer
Ms. Melisa Montemayor, District Administrator

***** EX-OFFICIO *****

Honorable Judith Zaffirini, State Senator, District 21
Honorable Richard Raymond, State Representative, District 42
Honorable Tracy O. King, State Representative, District 80

Nathan R. Bratton
MPO Director

Gustavo Guevara, Jr.
City Secretary

Laredo Urban Transportation Study

Metropolitan Planning Organization Policy Committee
City of Laredo Council Chambers
1110 Houston St. -Laredo, Texas

LAREDO, TEXAS
1755

MINUTES OF THE OCTOBER 19, 2015 MEETING

I. CHAIRPERSON TO CALL MEETING TO ORDER

Mayor Pete Saenz called the meeting to order at 12:03 p.m.

II. CHAIRPERSON TO CALL MEETING TO ORDER

Vanessa Guerra, MPO Coordinator, called roll and verified that a quorum did exist.

Regular members present:

Honorable Pete Saenz, Mayor and LUTS Chairperson
Honorable Roque Vela, Jr., City Councilmember, District V
Roberto Balli, City Councilmember, District VIII
Honorable John Galo, Webb County Commissioner, Pct. 3 (joined the meeting at 12:09 p.m.)
Honorable Jaime Canales, Webb County Commissioner, Pct. 4
Pete Alvarez, TxDOT
Melisa Montemayor, TxDOT

Regular members not present:

Honorable Tano E. Tijerina, Webb County Judge
Honorable Charlie San Miguel, City Councilmember, District VI

Ex-Officio Members Not Present:

Honorable Richard Raymond, State Representative, District 42
Honorable Judith Zaffirini, State Senator, District 21
Honorable Tracy O. King, State Representative, District 80

Staff (Of Participating LUTS Agencies) Present:

City: Nathan R. Bratton, City Planning/LUTS Staff
Vanessa Guerra, City Planning/LUTS Staff
Angie Quijano, City Planning/LUTS Staff
Roberto Murillo, Traffic Safety Department
Robert Peña, Traffic Safety Department

State: Ana Duncan, TxDOT

Albert Ramirez, TxDOT
Sara Garza, TxDOT

Others: Anthony Garza, Dannenbaum Engineering
Enrique Valdez, LNV, Inc.
Edward Kraus, Texas Transportation Institute (TTI)
Jing Li, TTI
Will Holik, TTI
Enrique Valdez, Leyendecker, Naiser & Viera (LNV, Inc.)
Richard Ridings, Howard, Needles, Tammen, & Bergendoff (HNTB, Inc.)
Riazul Mia, City of Laredo Utilities

III. COMMITTEE AND DIRECTOR'S REPORTS (No action required)

Nathan R. Bratton, MPO Director, informed the members present that the Texas Transportation Commission had issued a minute order regarding Economically Disadvantaged Counties (EDC) Program. He stated the minute order was issued based on the prevailing economic conditions in Webb County reported to TxDOT by the Comptroller. In the past, counties that are considered EDC, receive a certain percentage discount rate for the local government's participation in future TxDOT projects where federal funding is received. On a typical project, a twenty percent local match would be expected of the local government and, which, if qualifying as an EDC, a certain percentage of that 20 percent would be reduced. A county not qualifying for the EDC program would entail the local government being responsible for the entire 20 percent. The City and the County must now properly budget for those additional costs for future projects.

Cm. Galo joined the meeting at this point during the proceedings. (12:09 p.m.)

Melisa Montemayor, TxDOT, stated the EDC program pertains to Coordinated Border Infrastructure (CBI) funds that are eighty percent federally funded and twenty percent locally funded.

Cm. Vela asked how TxDOT gathered the information for the County to be removed from the EDC program list.

Ms. Montemayor stated an analysis was done based on the workforce of Laredo and the unemployment rate where a formula was applied based on the data gathered. The analysis is performed on a yearly basis. She also stated that if a project is on the State system, and to be funded with CBI funding, the twenty percent local match is the responsibility of the State. If a project is an off system project, and CBI funds are to be employed, the twenty percent local match is the responsibility of the local government.

IV. ITEMS REQUIRING POLICY COMMITTEE ACTION

A. Approval of the minutes for the meeting held on September 21, 2015.

Cm. Vela made a motion to **approve** the minutes for the meeting held on September 21, 2015.

Second: Cm. Canales
For: 7
Against: 0
Abstained: 0

Motion carried unanimously

B. Receive public testimony and approve Resolution No. MPO 2015-10 adopting the proposed revision(s) of the 2015-2018 Transportation Improvement Program (TIP), which include the following:

1. ***Addition* of project CSJ 0922-33-925, phase 1, intended to provide the preliminary engineering for the construction of a 5 lane rural roadway, from FM 1472 to 0.1 miles east of Beltway Parkway, estimated cost of schematic and environmental document is $1,016,063; and,**
2. ***Addition* of project CSJ 0922-33-925, phase 2, intended to provide for the construction of a 5 lane rural roadway from FM 1472 to 0.1 miles east of Beltway Parkway, estimated cost of construction is $20,890,841.**
3. ***Amendment* of the Grouped Statewide Projects definition chart by revising the Transit Improvements and Programs definition to include the following italicized language:**
   a. **Transit Improvement and Programs- Projects include the construction and improvement of small passenger shelters and information kiosks. Also includes the construction and improvement of rail storage/maintenance facilities bus transfer facilities where minor amounts of additional land are required and there is not a substantial increase in the number of users. *Also includes transit operating assistance, acquisition of third-party transit services, and transit marketing, and mobility management / coordination.***

Cm. Vela made a motion to **open** a public hearing.

Second: Cm. Galo
For: 7
Against: 0
Abstained: 0

Motion carried unanimously

Mr. Bratton gave a brief presentation on the proposed revision of the TIP.

Cm. Galo made a motion to **close** the public hearing and **approve** Resolution No. MPO 2015-10 adopting the proposed revision(s) of the 2015-2018 Transportation Improvement Program (TIP).

Second: Cm. Vela
For: 7

Against: 0
Abstained: 0
Motion carried unanimously

C. Receive public testimony and approve Resolution No. MPO 2015-11 adopting the proposed 2015-2040 Metropolitan Transportation Improvement Plan (MTP), which include:

1. **Amending Table 12-10, entitled Roadway and Bicycle/Pedestrian Project Summary and Table 12-11, entitled Roadway projects, and Figure 12-1, entitled Federally fund Roadway, Bicycle and Pedestrian Projects, by:**
   a. ***adding* project CSJ 0922-33-925, phase 1, intended to provide for the preliminary engineering of a 5 lane rural roadway, from FM 1472 to 0.1 miles east of Beltway Parkway, with an estimated cost for schematic and environmental document of $1,016,063; and,**
   b. ***adding* project CSJ 0922-33-925, phase 2, intended to provide for the construction of a 5 lane rural roadway, from FM 1472 to 0.1 miles east of Beltway Parkway, with an estimated cost of construction of $20,890,841; and,**
   c. ***adding* project CSJ 0922-33-950 intended to provide the construction of 5 lane rural roadway, from 0.1 miles east of Beltway Parkway to IH-35 with an with an estimated total project cost of $ 24,544,444 with an estimated 2025 year of expenditure cost of $25,193,851; and,**
2. **Amending Table 12-22, entitled Illustrative Projects by *revising* project No. 7, described as Green Ranch Parkway, intended to provide for the engineering and construction of a 2 lane that the project will now be identified as Hachar Parkway and will provide for the engineering and construction of a 10 lane freeway (mainlanes and ramps), from FM 1472 to IH-35, with an estimated 2036 year of expenditure cost of $90,673,786.**
3. **Amending Table 12-8, entitled Roadway and Bicycle/Pedestrian Operations and Maintenance Costs by revising the projected revenue and cost estimates per the latest projections.**

Cm. Galo made a motion to **open** a public hearing.

Second: Cm. Vela
For: 7
Against: 0
Abstained: 0

Motion carried unanimously

Mr. Bratton gave a brief presentation on the proposed revision for the MTP.

Cm. Galo made a motion to **close** the public hearing and **approve** Resolution No. MPO 2015-11 adopting the proposed revision(s) of the 2015-2040 Metropolitan Transportation Improvement Plan (MTP).

Second: Cm. Vela
For: 7
Against: 0
Abstained: 0

Motion carried unanimously

D. Receive public testimony and approve Resolution No. MPO 2015-12 adopting the proposed Transportation Alternatives Program (TAP) Project Selection Procedures.

Cm. Galo made a motion to **open** a public hearing.

Second: Cm. Vela
For: 7
Against: 0
Abstained: 0

Motion carried unanimously

Mr. Bratton stated the TAP provides funding for programs and projects defined as transportation alternatives.

Cm. Vela made a motion to **close** the public hearing and **adopt** Resolution No. MPO 2015-12 adopting the proposed TAP Project Selection Procedures subject to revising the maximum federal funding award per project to $1.25 million per project and pending review to determine whether all the local match requirements could be amended to 0-20 %.

E. Discussion with possible action on Hachar Road.

Anthony Garza, Dannenbaum Engineering, stated Dannenbaum Engineering is moving forward with the development of the environmental and schematic documents for the section of Hachar Road from FM 1472 to Beltway Parkway. He stated it may be 12 months to 18 months till the start construction.

F. Discussion with possible action on Mines Road.

1. Presentation by the Texas Transportation Institute (TTI) on the Mines Road Study and any possible action related thereto.

Edward Kraus and Jing Li, TTI, gave a brief presentation on the Mines Road Study.

Mr. Kraus stated TTI conducted a medium-range analysis on Mines Road. He stated that examples of medium-range strategies included:

- Add through, left or right turn lanes that require no new pavement
- Additional truck U-turns within the existing right-of-way

- Additional acceleration and deceleration lanes for right-turn movements
- Consolidate and/or redesign driveways

Mr. Kraus stated the analysis included simulation experiments to test and evaluate medium-range strategies, implement strategies on top of recommended short-term strategies, and focus on corridor mobility rather than performance of each individual intersection. Travel time monitoring for morning and afternoon peaks were performed and these stimulation scenarios were presented to the Policy Board.

Conclusions and recommendations were as follows:

- Add third northbound lane between Killam and Interamerica, taper after Muller
- Improve Killam intersection
- Add third southbound lane between Muller and Interamerica Blvd.
- Provide dual eastbound to southbound right turn lanes at Interamerica Blvd.
- Optimize signal timing and phasing at all intersections with changes
- Review left-turn bay lengths based on TxDOT Roadway Design Manual at the following locations:

- Trade Center, extend NB to WB left-turn bay to 975 ft (including storage, deceleration, and taper length)
- Pan America, extend NB to WB left-turn bay to 1133ft (including storage, deceleration, and taper length)

Cm. Vela left the meeting at 1:27 p.m.

Mr. Kraus stated upcoming efforts include the long-range strategies analysis. The anticipated completion of the remaining study work tasks is December 2015.

V. TECHNICAL COMMITTEE REPORT(S) (No action required)

A. Status report by City of Laredo's Traffic Safety Department on the signal timing improvements project.

Robert Murillo, Traffic Safety Department stated TxDOT is still working on the Advance Funding Agreement (AFA) for the project. Once the AFA is approved by the Federal Highway Administration (FHWA), the project will go through City Council for approval and start the procurement process to select a consultant to do the study for the intersections. Mr. Murillo stated the anticipated project completion date is August 2016.

Albert Ramirez, TxDOT, stated TxDOT is working with Mr. Murillo and will soon be meeting to discuss and identify the on verses off system roads for budget purposes in the AFA agreement.

B. Status report on the Regional Mobility Authority (RMA).

Ruben Soto, Chairman of the RMA, stated the RMA adopted a resolution for bank depository services. He also stated negotiations are nearing completion for the procurement of a financial

advisor. Mr. Soto stated the RMA finalized and approved a work authorization with HNTB, Inc., for the development of the Vallecillo Project, and also authorized HNTB, Inc. to draft a work authorization for the development of the Loop 20/I-69 project.

Mr. Richard Ridings, HNTB, Inc. stated HNTB, Inc. is moving forward with the Vallecillo Project. He stated his firm is honored to be contracted for the project and is eager to be working with everyone involved with the project.

VI. ADJOURNMENT

Cm. Galo made a motion to **adjourn** the meeting at 1:36 p.m.

Second:	Cm. Balli
For:	6
Against:	0
Abstained:	0

Motion carried unanimously

Prepared by: _____
Angie Quijano,
MPO Staff

Reviewed by: _____
Vanessa Guerra,
MPO Coordinator

Reviewed by: _____
Nathan R. Bratton,
MPO Director

_____
Melisa Montemayor,
District Administrator

_____
Pete Saenz,
Mayor and LUTS Chairperson

Discussion with possible action regarding the roadway improvements to the Guadalupe Street Kansas City Southern (KCS) overpass.

TABLE OF CONTENTS

1. ACCIDENT DATA FOR THE INTERSECTION OF CEDAR AVE. AND CHIHUAHUA ST. FROM 10/13 THRU 10/15.

LAREDO POLICE DEPARTMENT
CRIMINAL INTELLIGENCE ACQUISITION UNIT

4712 MAHER AVE.
LAREDO, TEXAS 78041
OFFICE 956-795-2813
FAX 956-753-3597

"INTELLIGENCE ACQUISITION FOR LAW ENFORCEMENT"

October 27, 2015

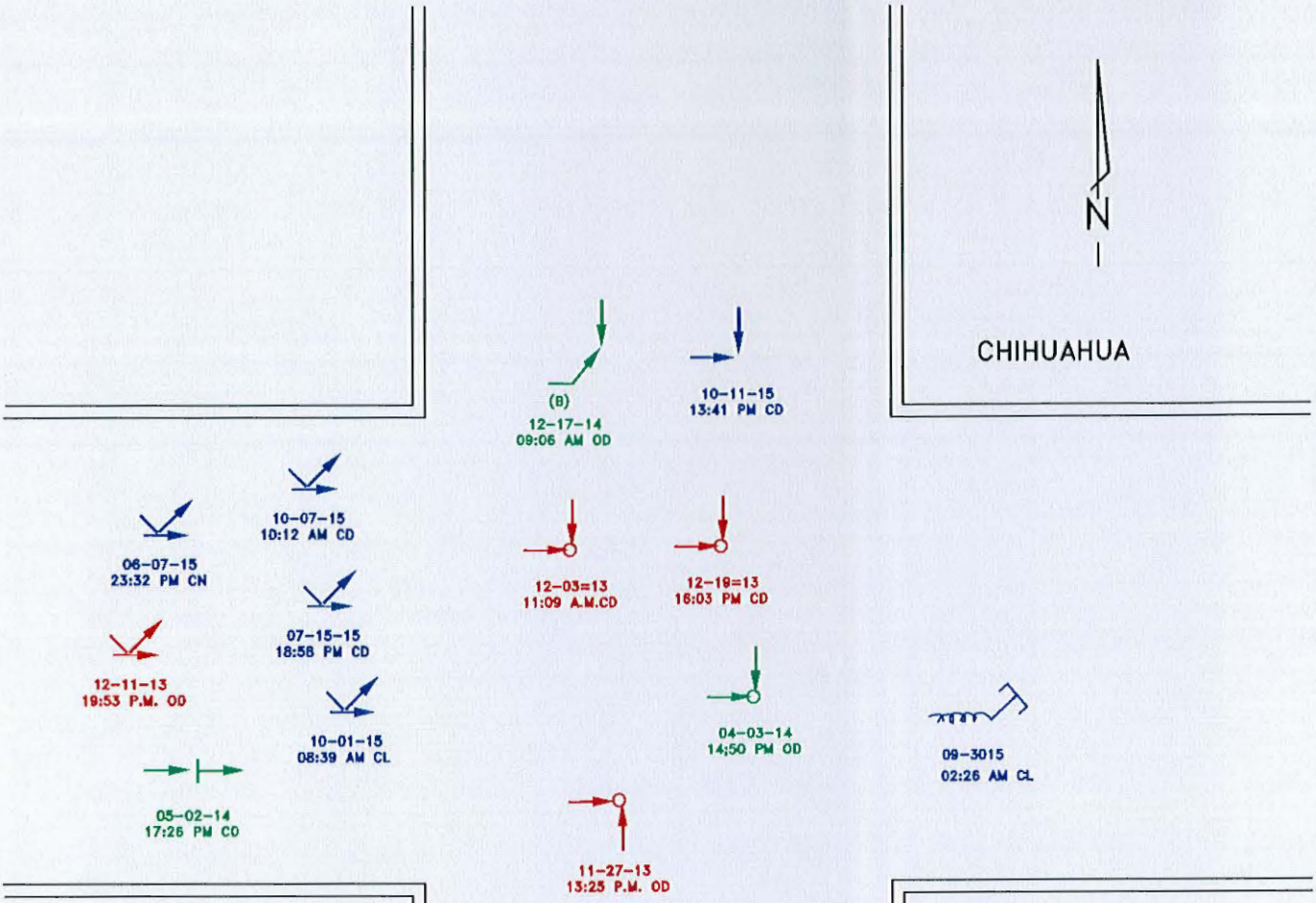
From Oct. 26, 2013 – Oct. 26, 2015 the below data depicts the total number of accidents reported for the intersection of interest **[Cedar Ave/Chihuahua St]**. Based on RMS, accidents were reported between the hours of **1300-2300.** In addition, most accidents were reported on **Wednesday and Thursday**.

	Acci Id	Date	Time	Day	Onhway	Fromhway	Contributing Factor
1	13037132	11/27/13	1325	WED	600 CHIHUAHUA ST	1000 CEDAR	disregarded the signal light
2	13037720	12/03/13	1109	TUE	600 CHIHUAHUA	1000 CEDAR AVE	failed to yield
3	13038681	12/11/13	1953	WED	600 W CHIHUAHUA ST	1100 CEDAR	failed to stay in single lane
4	13039590	12/19/13	1603	THU	600 CHIHUAHUA ST	1100 CEDAR	disregarded red light
5	14004811	02/17/14	0906	MON	1100 CEDAR ST	700 CHIHUAHUA	unsafe left turn
6	14009753	04/03/14	1450	THU	600 CHIHUAHUA ST	1100 CEDAR AVE	disregarded red light
7	14013022	05/02/14	1726	FRI	600 CHIHUAHUA ST	1100 CEDAR AVE	failed to control speed
8	15017012	06/07/15	2332	SUN	600 CHIHUAHUA ST	CEDAR	failed to control speed
9	15021110	07/15/15	1858	WED	600 CHIHUAHUA ST	CEDAR AVE	changed lanes when unsafe
10	15028923	09/30/15	0226	WED	600 CHIHUAHUA ST	1000 CEDAR	texting and driving
11	15029031	10/01/15	0839	THU	400 CHIHUAHUA ST	100 CEDAR	failed to drive in single lane
12	15029642	10/07/15	1012	WED	600 CHIHUAHUA ST	1100 CEDAR	changed lanes when unsafe
13	15030084	10/11/15	1341	SUN	1100 CEDAR ST	600 CHIHUAHUA	disregarded red light

COLLISION DIAGRAM

LOCATION: Chihuahua/ Cedar Ave.

TIME PERIOD: 1-01-13 TO PRESENT



ACCIDENT SUMMARY							
YEAR					2013	2014	2015
FATAL					0	0	0
INJURY					3	1	0
PDO					1	2	6
TOTAL					4	3	6

CEDAR AVE

ROAD SURFACE

- C DRY, CLEAR
- W WET
- S SNOWY, ICY
- O OTHER

LIGHTING

- D DAYLIGHT
- N DARK, NO LIGHTS
- L DARK WITH STREET LIGHT

City of Laredo
Traffic Safety Division

PREPARED BY: Oscar Canales

APPROVED BY: Roberto Murillo, P.T.O.E.

DATE: 11-09-15

Figure 4

- Automobile, Pick-Up
- (T) Truck
- (B) Bus
- (M) Motorcycle
- (O) Other

Texas Peace Officer's Crash Report – Code Sheet

Numbered Fields on the CR-3 Refer to the Numbered Lists on this Code Sheet. Each list includes the codes that may be entered on the form and the description of each code.

Law Enforcement and TxDOT Use ONLY.
Form CR-3CS 1/1/2010

IDENTIFICATION AND LOCATION

1. Roadway System
IH = Interstate
US = US Highway
SH = State Highway
FM = Farm to Market
RR = Ranch Road
RM = Ranch to Market
BI = Business Interstate
BU = Business US
BS = Business State
BF = Business FM
SL = State Loop
TL = Toll Road
AL = Alternate
SP = Spur
CR = County Road
PR = Park Road
PV = Private Road
RC = Recreational Road
LR = Local Road/Street (Street, Road, Ave., Blvd., Pl., Trl., Beach, Alley, Boat Ramp, etc.)

2. Roadway Part
1 = Main/Proper Lane
2 = Service/Frontage Road
3 = Entrance/On Ramp
4 = Exit/Off Ramp
5 = Connector/Flyover
98 = Other (Explain in Narrative)

3. Street Prefix, Direction from Int. or Ref. Marker
N = North
NE = Northeast
E = East
SE = Southeast
S = South
SW = Southwest
W = West
NW = Northwest

4. Street Suffix
RD = Road
ST = Street
DR = Drive
AVE = Avenue
BLVD = Boulevard
PKWY = Parkway
LN = Lane
FWY = Freeway
HWY = Highway
WAY = Way
TRL = Trail
LOOP = Loop
EXPY = Expressway
CT = Court
CIR = Circle
PL = Place
PARK = Park
CV = Cove

VEHICLE, DRIVER, AND PERSONS

5. Unit Description
1 = Motor Vehicle
2 = Train
3 = Pedalcyclist
4 = Pedestrian
5 = Motorized Conveyance
6 = Towed/Trailer
7 = Non-Contact
98 = Other (Explain in Narrative)

6. Vehicle Color
BGE = Beige
BLK = Black
BLU = Blue
BRZ = Bronze
BRO = Brown
CAM = Camouflage
CPR = Copper
GLD = Gold
GRY = Gray
GRN = Green
MAR = Maroon
MUL = Multicolored
ONG = Orange
PNK = Pink
PLE = Purple
RED = Red
SIL = Silver
TAN = Tan
TEA = Teal (green)
TRQ = Turquoise (blue)
WHI = White
YEL = Yellow
98 = Other (Explain in Narrative)
99 = Unknown

7. Body Style
P2 = Passenger Car, 2-Door
P4 = Passenger Car, 4-Door
PK = Pickup
AM = Ambulance
BU = Bus
SB = Yellow School Bus
FE = Farm Equipment
FT = Fire Truck
MC = Motorcycle
SV = Sport Utility Vehicle
PC = Police Car/Truck
PM = Police Motorcycle
TL = Trailer, Semi-Trailer, or Pole Trailer
TR = Truck
TT = Truck Tractor
VN = Van
98 = Other (Explain in Narrative)
99 = Unknown

8. Driver License/ID Type
1 = Driver License
2 = Commercial Driver Lic.
3 = Occupational
4 = ID Card
5 = Unlicensed
98 = Other
99 = Unknown

9. Driver License Class
A = Class A
AM = Class A and M
B = Class B
BM = Class B and M
C = Class C
CM = Class C and M
M = Class M
5 = Unlicensed
98 = Other/Out of State
99 = Unknown

10. Commercial Driver License Endorsements
H = Hazardous Materials
N = Tank Vehicles
P = Passengers
S = School Bus
T = Double/Triple Trailer
X = Tank Vehicle with HazMat
5 = Unlicensed
96 = None
98 = Other/Out of State
99 = Unknown

11. Driver License Restrictions
A = With Corrective Lenses
B = LOFS Age 21 or Over
C = Daytime Only
D = Not to Exceed 45 MPH
E = No Expressway Driving
F = Must Hold Valid Learner Lic. to MM/DD/YY
G = TRC 545.424 Applies until MM/DD/YY
H = Vehicle Not to Exceed 26,000 lbs GVWR
I = Motorcycle Not to Exceed 250 CC
J = Licensed Motorcycle Operator Age 21 or Over in Sight
K = Moped
L = Vehicle w/o Air Brakes – Applies to Vehicles Requiring CDL
M = CDL Intrastate Commerce Only
N = Ignition Interlock Required
O = Occ./Essent. Need DL-No CMV-See Court Order
P = Stated on License
Q = LOFS 21 or Over Vehicle Above Class B
R = LOFS 21 or Over Vehicle Above Class C
S = Outside Rear View Mirror or Hearing Aid
T = Automatic Transmission
U = Applicable Prosthetic Devices
V = Applicable Vehicle Devices
W = Power Steering
X = Vehicle Not to Exceed Class C
Y = Valid TX Vision or Limb Waiver Req'd.
Z = Valid Fed. Vision or Limb Waiver Req'd.
5 = Unlicensed
96 = None
98 = Other/Out of State
99 = Unknown

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

13. Seat Position
1 = Front Left
2 = Front Center
3 = Front Right
4 = Second Seat Left
5 = Second Seat Center
6 = Second Seat Right
7 = Third Seat Left
8 = Third Seat Center
9 = Third Seat Right
10 = Cargo Area
11 = Outside Vehicle
13 = Other in Vehicle
14 = Passenger in Bus
16 = Pedestrian, Pedalcyclist, or Motorized Conveyance
98 = Other (Explain in Narrative)
99 = Unknown

14. Injury Severity
A = Incapacitating Injury
B = Non-Incapacitating Injury
C = Possible Injury
K = Killed
N = Not Injured
99 = Unknown

15. Ethnicity
W = White
B = Black
H = Hispanic
A = Asian
I = Amer. Indian/Alaskan Native
98 = Other
99 = Unknown

16. Sex
1 = Male
2 = Female
99 = Unknown

17. Ejected
1 = No
2 = Yes
3 = Yes, Partial
97 = Not Applicable
99 = Unknown

18. Restraint Used
1 = Shoulder and Lap Belt
2 = Shoulder Belt Only
3 = Lap Belt Only
4 = Child Seat, Facing Forward
5 = Child Seat, Facing Rear
6 = Child Seat, Unknown
7 = Child Booster Seat
96 = None
97 = Not Applicable
98 = Other (Explain in Narrative)
99 = Unknown

19. Airbag
1 = Not Deployed
2 = Deployed, Front
3 = Deployed, Side
4 = Deployed, Rear
5 = Deployed, Multiple
97 = Not Applicable
99 = Unknown

20. Helmet Use
1 = Not Worn
2 = Worn, Damaged
3 = Worn, Not Damaged
4 = Worn, Unk. Damage
97 = Not Applicable
99 = Unknown if Worn

21. Solicitation
Y = Solicit
N = No Solicit

22. Alcohol Specimen Type
1 = Breath
2 = Blood
3 = Urine
4 = Refused
96 = None
98 = Other (Explain in Narrative)

23. Drug Specimen Type
2 = Blood
3 = Urine
4 = Refused
96 = None
98 = Other (Explain in Narrative)

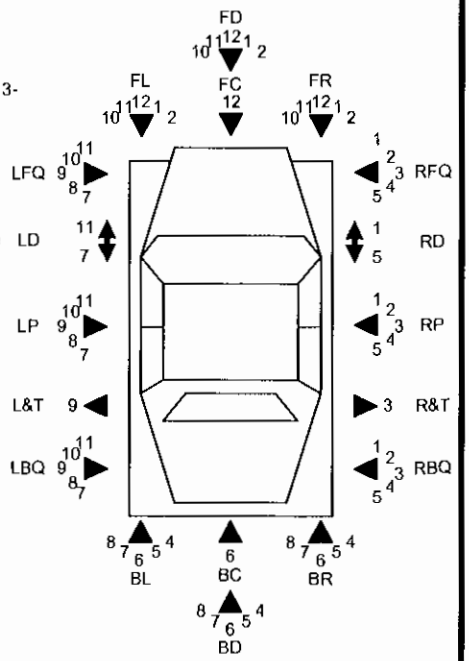
24. Drug Test Result
1 = Positive
2 = Negative
97 = Not Applicable
99 = Unknown

25. Drug Category
2 = CNS Depressants
3 = CNS Stimulants
4 = Hallucinogens
6 = Narcotic Analgesics
7 = Inhalants
8 = Cannabis
10 = Disassociative Anesthetics
11 = Multiple Drugs (Explain in Narrative)
97 = Not Applicable
98 = Other Drugs (Explain in Narrative)
99 = Unknown

26. Financial Responsibility Type
1 = Liability Insurance Policy
2 = Proof of Liability Insurance
3 = Insurance Binder
4 = Surety Bond
5 = Certificate of Deposit with Comptroller
6 = Certificate of Deposit with County Judge
7 = Certificate of Self-Insurance

27. Vehicle Damage Rating
In most cases, enter in the format XX-ABC-Y, where
XX is the Direction of Force (1-12),
ABC is the Damage Description 2- or 3-letter code),
and Y is the Damage Severity (0-7).

In special cases, use:
VB-1 = vehicle burned, NOT due to collision
VB-7 = vehicle catches fire due to the collision
TP-0 = top damage only
VX-0 = undercarriage damage only
MC-1 = motorcycle, moped, scooter, etc.
NA = Not Applicable (Farm Tractor, etc.)



Texas Peace Officer's Crash Report – Code Sheet

Numbered Fields on the CR-3 Refer to the Numbered Lists on this Code Sheet. Each list includes the codes that may be entered on the form and the description of each code.

COMMERCIAL MOTOR VEHICLE

28. Vehicle Operation
1 = Interstate Commerce
2 = Intrastate Commerce
3 = Not in Commerce
4 = Government
5 = Personal

29. Carrier ID Type
1 = US DOT
2 = TxDOT
3 = ICC/MC
96 = None
98 = Other (Explain in Narrative)

30. Roadway Access
1 = Full Access Control
2 = Partial Access Control
3 = No Access Control

31. Vehicle Type
1 = Passenger Car
2 = Light Truck
3 = Bus (9-15)
4 = Bus (>15)
5 = Single Unit Truck 2 Axles 6 Tires
6 = Single Unit Truck 3 or More Axles
7 = Truck Trailer
8 = Truck Tractor (Bobtail)
9 = Tractor/Semi Trailer
10 = Tractor/Double Trailer
11 = Tractor/Triple Trailer
98 = Other (Explain in Narrative)
99 = Unknown Heavy Truck

32. Hazardous Material Class Number
1 = Explosives
2 = Gases
3 = Flammable Liquids
4 = Flammable Solids
5 = Oxidizers and Organic Peroxides
6 = Toxic Materials and Infectious Substances
7 = Radioactive Materials
8 = Corrosive Materials
9 = Miscellaneous Dangerous Goods

33. Cargo Body Style
1 = Bus (9-15)
2 = Bus (>15)
3 = Van/Enclosed Box
4 = Cargo Tank
5 = Flatbed
6 = Dump
7 = Concrete Mixer
8 = Auto Transporter
9 = Garbage Refuse
10 = Grain Chips Gravel
11 = Pole
13 = Intermodal
14 = Logging
15 = Vehicle Towing Another Vehicle
97 = Not Applicable
98 = Other (Explain in Narrative)

34. Trailer Type
1 = Full Trailer
2 = Semi-Trailer
3 = Pole Trailer

35. Sequence of Events
1 = Non-Collision: Ran Off Road
2 = Non-Collision: Jackknife
3 = Non-Collision: Overturn Rollover
4 = Non-Collision: Downhill Runaway
5 = Non-Collision: Cargo Loss Or Shift
6 = Non-Collision: Explosion Or Fire
7 = Non-Collision: Separation of Units
8 = Non-Collision: Cross Median/Centerline
9 = Non-Collision: Equipment Failure
10 = Non-Collision: Other
11 = Non-Collision: Unknown
12 = Collision Involving Pedestrian
13 = Collision Involving Motor Vehicle in Transport
14 = Collision Involving Parked Motor Vehicle
15 = Collision Involving Train
16 = Collision Involving Pedalcycle
17 = Collision Involving Animal
18 = Collision Involving Fixed Object
19 = Collision With Work Zone Maintenance Equipment
20 = Collision With Other Movable Object
21 = Collision With Unknown Movable Object
98 = Other (Explain in Narrative)

FACTORS AND CONDITIONS

36. Factors and Conditions
1 = Animal on Road - Domestic
2 = Animal on Road - Wild
3 = Backed without Safety
4 = Changed Lane when Unsafe
14 = Disabled in Traffic Lane
15 = Disregard Stop and Go Signal
16 = Disregard Stop Sign or Light
17 = Disregard Turn Marks at Intersection
18 = Disregard Warning Sign at Construction
19 = Distraction in Vehicle
20 = Driver Inattention
21 = Drove Without Headlights
22 = Failed to Control Speed
23 = Failed to Drive in Single Lane
24 = Failed to Give Half of Roadway
25 = Failed to Heed Warning Sign
26 = Failed to Pass to Left Safely
27 = Failed to Pass to Right Safely
28 = Failed to Signal or Gave Wrong Signal
29 = Failed to Stop at Proper Place
30 = Failed to Stop for School Bus
31 = Failed to Stop for Train
32 = Failed to Yield ROW – Emergency Vehicle
33 = Failed to Yield ROW – Open Intersection
34 = Failed to Yield ROW – Private Drive
35 = Failed to Yield ROW – Stop Sign
36 = Failed to Yield ROW – To Pedestrian
37 = Failed to Yield ROW – Turning Left
38 = Failed to Yield ROW – Turn on Red
39 = Failed to Yield ROW – Yield Sign
40 = Fatigued or Asleep
41 = Faulty Evasive Action
42 = Fire in Vehicle
43 = Fleeing or Evading Police
44 = Followed Too Closely
45 = Had Been Drinking
46 = Handicapped Driver (Explain in Narrative)
47 = Ill (Explain in Narrative)
48 = Impaired Visibility (Explain in Narrative)
49 = Improper Start from Parked Position
50 = Load Not Secured
51 = Opened Door Into Traffic Lane
52 = Oversized Vehicle or Load
53 = Overtake and Pass Insufficient Clearance
54 = Parked and Failed to Set Brakes
55 = Parked in Traffic Lane
56 = Parked without Lights
57 = Passed in No Passing Lane
58 = Passed on Right Shoulder
59 = Pedestrian FTYROW to Vehicle
60 = Unsafe Speed
61 = Speeding – (Over Limit)
62 = Taking Medication (Explain in Narrative)
63 = Turned Improperly – Cut Corner on Left
64 = Turned Improperly – Wide Right
65 = Turned Improperly – Wrong Lane
66 = Turned when Unsafe
67 = Under Influence – Alcohol
68 = Under Influence – Drug
69 = Wrong Side – Approach or Intersection
70 = Wrong Side – Not Passing
71 = Wrong Way – One Way Road
72 = Cell/Mobile Phone Use
73 = Road Rage
98 = Other (Explain in Narrative)

37. Vehicle Defects
5 = Defective or No Headlamps
6 = Defective or No Stop Lamps
7 = Defective or No Tail Lamps
8 = Defective or No Turn Signal Lamps
9 = Defective or No Trailer Brakes
10 = Defective or No Vehicle Brakes
11 = Defective Steering Mechanism
12 = Defective or Slick Tires
13 = Defective Trailer Hitch
98 = Other (Explain in Narrative)

38. Weather Condition
1 = Clear
2 = Cloudy
3 = Rain
4 = Sleet/Hail
5 = Snow
6 = Fog
7 = Blowing Sand/Snow
8 = Severe Crosswinds
98 = Other (Explain in Narrative)
99 = Unknown

39. Light Condition
1 = Daylight
2 = Dark, Not Lighted
3 = Dark, Lighted
4 = Dark, Unknown Lighting
5 = Dawn
6 = Dusk
98 = Other (Explain in Narrative)
99 = Unknown

40. Entering Roads
2 = Three Entering Roads – T
3 = Three Entering Roads – Y
4 = Four Entering Roads
5 = Five Entering Roads
6 = Six Entering Roads
7 = Traffic Circle
8 = Cloverleaf
97 = Not Applicable
98 = Other (Explain in Narrative)

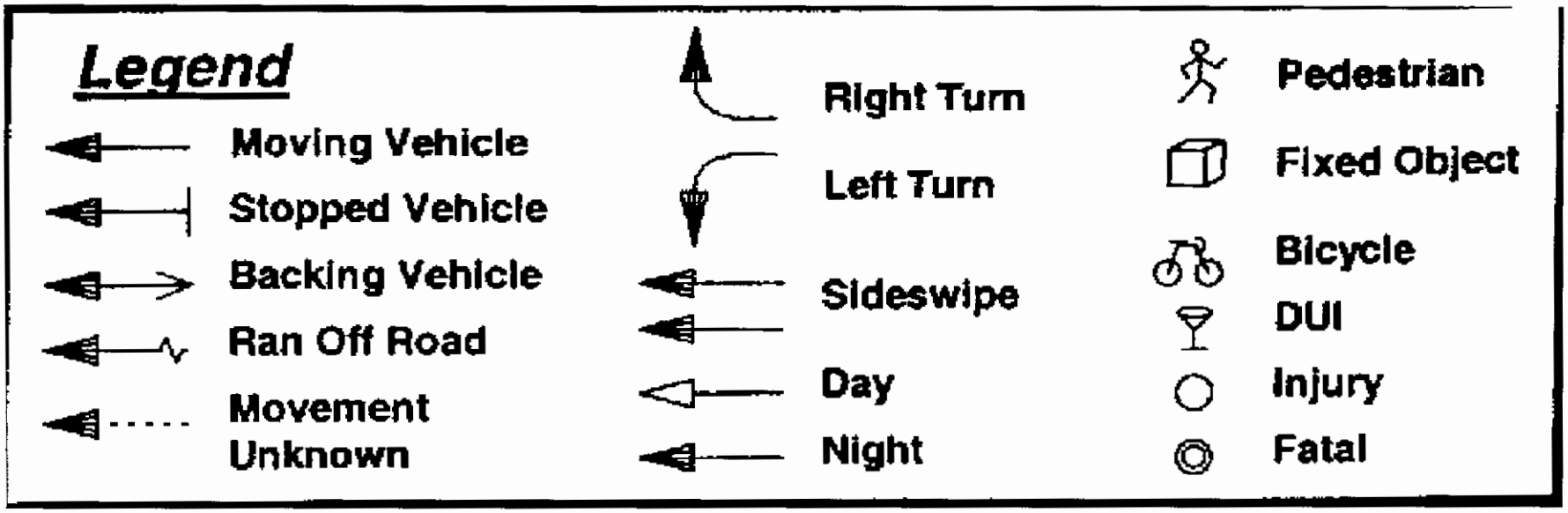
41. Roadway Type
1 = Two-Way, Not Divided
2 = Two-Way, Divided, Unprotected Median
3 = Two-Way, Divided, Protected Median
4 = One-Way
98 = Other (Explain in Narrative)

42. Roadway Alignment
1 = Straight, Level
2 = Straight, Grade
3 = Straight, Hillcrest
4 = Curve, Level
5 = Curve, Grade
6 = Curve, Hillcrest
98 = Other (Explain in Narrative)
99 = Unknown

43. Surface Condition
1 = Dry
2 = Wet
3 = Standing Water
4 = Snow
5 = Slush
6 = Ice
7 = Sand, Mud, Dirt
98 = Other (Explain in Narrative)
99 = Unknown

44. Traffic Control
2 = Inoperative (Explain in Narrative)
3 = Officer
4 = Flagman
5 = Signal Light
6 = Flashing Red Light
7 = Flashing Yellow Light
8 = Stop Sign
9 = Yield Sign
10 = Warning Sign
11 = Center Stripe/Divider
12 = No Passing Zone
13 = RR Gate/Signal
15 = Crosswalk
16 = Bike Lane
17 = Marked Lanes
18 = Signal Light With Red Light Running Camera
96 = None
98 = Other (Explain in Narrative)

SELECTED COLLISION DIAGRAM SYMBOLS



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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
002	006	

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

Page 1 of 2

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
11/27/2013	1325	13-037132	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	600		CHIHUAHUA	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☑ No | Workers Present ☐ Yes ☑ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☑ Yes ☐ No	LR		1	1000		CEDAR	

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

VEHICLE, DRIVER, & PERSONS

Unit Num. 1 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. BZ4D136 | VIN 2G1WT55N781258656

Veh. Year 2008 | 6 Veh. Color GRY | Veh. Make CHEVROLET | Veh. Model IMPALA | 7 Body Style P4 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 1 | DL/ID State TX | DL/ID Num. 29480861 | 9 DL Class A | 10 CDL End. 96 | 11 DL Rest. R | DOB (MM/DD/YYYY) 06/09/1992

Address (Street, City, State, ZIP) 4524 LA JOYA LN, LAREDO, TX 78046

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	QUIROZ, JUAN, PABLO	N	21	H	1	1	1	2	97	N	96		96	97	97
2	2	3	QUIROZ, YOLANDA	N	23	H	2	1	1	2	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				
3	2	6	LOPEZ, JESUS, EDUARDO	N	19	H	1	1	1	2	97	N					
4	2	4	LOPEZ, MIGUEL, ANGEL	N	12	H	1	1	1	2	97	N					

☑ Owner ☐ Lessee | Owner/Lessee Name & Address: QUIROZ, JUAN, PABLO 3416 MONCLOVA DR, LAREDO, TX 78046

Proof of Fin. Resp ☑ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 1 | Fin. Resp. Name: CEM INSURANCE | Fin. Resp. Num. C-PR621730202

Fin. Resp. Phone Num. (888) 224-7740 | 27 Vehicle Damage Rating 1: 12-FR-3 | 27 Vehicle Damage Rating 2: 9-L&T-1 | Vehicle Inventoried ☐ Yes ☑ No

Towed By: DRIVEN AWAY | Towed To: OWNER

Unit Num. 2 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. BR55710 | VIN 1GNCS13X84K100239

Veh. Year 2004 | 6 Veh. Color BLK | Veh. Make CHEVROLET | Veh. Model BLAZER | 7 Body Style SV | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 5 | DL/ID State | DL/ID Num. | 9 DL Class 5 | 10 CDL End. 5 | 11 DL Rest. 5 | DOB (MM/DD/YYYY) 01/11/1976

Address (Street, City, State, ZIP) 3314 CEDAR AVE, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	CANO, MARTA	B	37	H	2	1	1	1	97	N	96		96	97	97
2	2	3	PRUNEDA, KASANDRA, LIZZETTE	B	17	H	2	1	1	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

☑ Owner ☐ Lessee | Owner/Lessee Name & Address: DIAZ, ROSA, MARIA 2214 CASSATA LN, LAREDO, TX 78046

Proof of Fin. Resp ☑ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 1 | Fin. Resp. Name: DAIRYLAND COUNTY MUTUAL | Fin. Resp. Num. 435930545

Fin. Resp. Phone Num. (800) 334-0090 | 27 Vehicle Damage Rating 1: 11-LFQ-3 | 27 Vehicle Damage Rating 2: 11-FR-2 | Vehicle Inventoried ☐ Yes ☑ No

Towed By: OWNER | Towed To: TOWED AWAY BY OWNER

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-037132** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
2	1	LAREDO MEDICAL CENTER	RQ 9101		
2	2	LAREDO MEDICAL CENTER	RQ 9101		

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	DISREGARDED RED LIGHT (TRAFFIC SIGNAL)	2682598
2	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2682599

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
AEP LIGHT POLE	AMERICAN ELECTRIC POWER COMPANY	1519 W CALTON RD LAREDO, TX 78041
TRAFFIC SIGNAL POLE	CITY OF LAREDO	1102 BOB BULLOCK LOOP LAREDO, TX 78043

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	16			60													
2											2	1	4	1	3	1	5

NARRATIVE & DIAGRAM

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

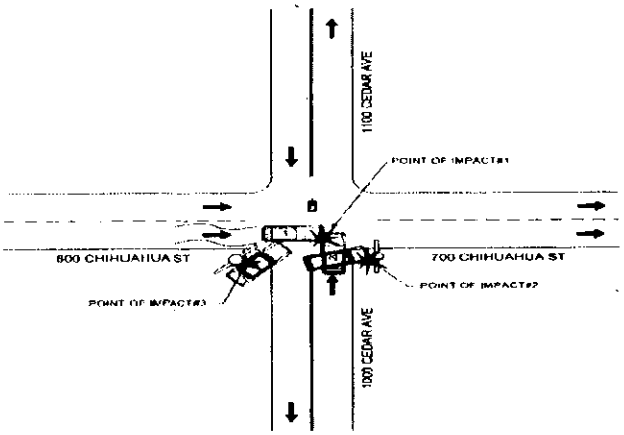
UNIT#1 WAS TRAVELING EASTBOUND ON THE 600 BLOCK OF CHIHUAHUA ST. UNIT#2 WAS TRAVELING NORTHBOUND ON THE 1000 BLOCK OF CEDAR AVE. UNIT#1 THEN DISREGARDED THE SIGNAL LIGHT AT THE INTERSECTION AND COLLIDED INTO UNIT#2 THEN CAUSING UNIT#2 TO COLLIDE INTO A LIGHTPOLE NEARBY. UNIT#1 THEN REVERSED AWAY AND COLLIDED INTO A TRAFFIC SIGNAL POLE. THE DRIVER OF UNIT#1 REPORTED A THIRD VEHICLE INVOLVED HAD CAUSED HIM TO COLLIDE BUT WAS UNABLE TO PROVIDE SUFFICIENT EVIDENCE.

Witness Information:
CHAVARRIA, YOLANDA
GEISSLER, RICHARD ROBERT JR

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1327 | How Notified MCT DISPATCH | Time Arrived (24HRMM) 1330 | Report Date (MM/DD/YYYY) 11/28/2013

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) DE HOYOS, FERNANDO D. | ID Num. 4152

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | District/Area 2

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

Total Num. Units 002	Total Num. Prsns. 003	TxDOT Crash ID

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
12/03/2013	1109	13-037720	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	600		CHIHUAHUA	

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/ Toll Lane | Speed Limit 30 | Const Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc. PAVED

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
■ Yes ☐ No	LR		1	1000		CEDAR	AVE

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

VEHICLE, DRIVER, & PERSONS

Unit Num. 1 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. 5JLJT | VIN 1GKEC13Z83R114927

Veh. Year 2003 | 6 Veh. Color BGE | Veh. Make GENERAL MOTORS CORP | Veh. Model YUKON | 7 Body Style SV | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 1 | DL/ID State TX | DL/ID Num. 33801940 | 9 DL Class C | 10 CDL End. 96 | 11 DL Rest. 96 | DOB (MM/DD/YYYY) 11/26/1980

Address (Street, City, State, ZIP) 301 LEON CTS, LAREDO, TX 78046

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	RENTERIA, SONIA, AMALIA	A	33	H	2	1	1	1	97	N	96		96	97	97
2	2	3	GARCIA, RICARDO, EDUARDO	B	39	H	1	1	1	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

■ Owner ☐ Lessee | Owner/Lessee Name & Address: GARCIA, RICARDO, EDUARDO 309 CASTRO URDIALES, LAREDO, TX 78046

Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 2 | Fin. Resp. Name CEM INSURANCE CO. | Fin. Resp. Num. C-PR7318642-00

Fin. Resp. Phone Num. (888) 224-7740 | 27 Vehicle Damage Rating 1 3-RBQ-2 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ■ No

Towed By GLORIA JASMIN RICO | Towed To DRIVEN AWAY

Unit Num. 2 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. MRFIX | VIN 1GTR2VE3X8Z286021

Veh. Year 2011 | 6 Veh. Color GRY | Veh. Make GENERAL MOTORS CORP | Veh. Model SIERRA Z-71 | 7 Body Style PK | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 1 | DL/ID State TX | DL/ID Num. 10686990 | 9 DL Class C | 10 CDL End. 96 | 11 DL Rest. 96 | DOB (MM/DD/YYYY) 01/23/1964

Address (Street, City, State, ZIP) 410 CANDLEWOOD DR, LAREDO, TX 78045

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	GONZALEZ, RODOLFO, G	N	49	H	1	1	1	1	97	N	96		96	97	97
													Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

■ Owner ☐ Lessee | Owner/Lessee Name & Address: GONZALEZ, RODOLFO, G 410 CANDLEWOOD DR, LAREDO, TX 78045

Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 2 | Fin. Resp. Name STATE FARM INSURANCE CO. | Fin. Resp. Num. 228 5088-B17-53A 001

Fin. Resp. Phone Num. (800) 252-7645 | 27 Vehicle Damage Rating 1 12-FR-3 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ■ No

Towed By DRIVER | Towed To DRIVEN AWAY

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-037720** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
1	1	LAREDO MEDICAL CENTER	RQ 9105		
1	2	LAREDO MEDICAL CENTER	RQ 9105		

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO YIELD ROW - RESULTING IN ACCIDENT	L-2685197

DAMAGE

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

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	16			98													
2											1	1	4	2	5	1	5

NARRATIVE & DIAGRAM

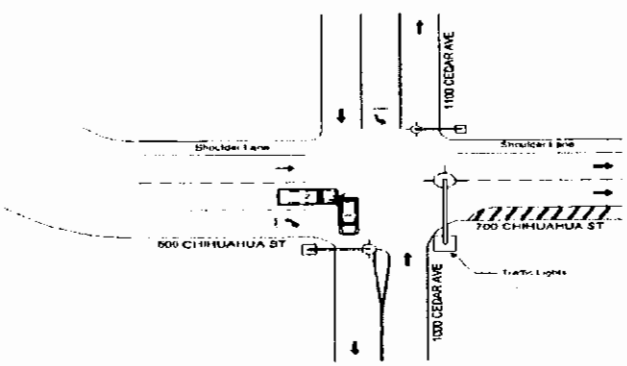
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

Unit #1, while traveling southbound from the 1100 block of Cedar Ave, failed to yield the right of way - red traffic light, thus colliding into Unit #2 which was traveling eastbound and on the southside lane from the 600 block of Chihuahua St. Operator of Unit #1 stated on scene that while she was operating her vehicle, she got blinded by the sun thus unable to see the red light.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1110 | How Notified **MCT DISPATCHED** | Time Arrived (24HRMM) 1113 | Report Date (MM/DD/YYYY) 12/03/2013

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) **CARDENAS, JUAN M.** | ID Num. **4284**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | District/Area I / IV

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
002	002	

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 12/11/2013
★Crash Time (24HRMM): 1953
Case ID: 13-038681
Local Use:
★County Name: WEBB
★City Name: LAREDO
☐ Outside City Limit
In your opinion, did this crash result in at least $1,000 damage to any one person's property? ☑ Yes ☐ No
Latitude (decimal degrees):
Longitude (decimal degrees):

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR
★Hwy. Num.:
2 Rdwy Part: 1
Block Num.: 600
3 Street Prefix: W
★Street Name: CHIHUAHUA
4 Street Suffix: ST
☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot
☐ Toll Road/Toll Lane
Speed Limit: 30
Const. Zone ☐ Yes ☑ No
Workers Present ☐ Yes ☑ No
Street Desc.:

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

At Int. ☐ Yes ☑ No
1 Rdwy. Sys.: LR
Hwy. Num.:
2 Rdwy Part: 1
Block Num.: 1100
3 Street Prefix:
Street Name: CEDAR
4 Street Suffix:
Distance from Int. or Ref. Marker: 150 ☑ FT ☐ MI
3 Dir. from Int. or Ref. Marker: W
Reference Marker:
Street Desc.:
RRX Num.:

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1
5 Unit Desc.: 1
☐ Parked Vehicle ☑ Hit and Run
LP State: TX
LP Num.: 9274AM
VIN: 1D7KU28D14J141374
Veh. Year: 2004
6 Veh. Color: BLK
Veh. Make: DODGE
Veh. Model: RAM 2500
7 Body Style: PK
☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
8 DL/ID Type: 99
DL/ID State:
DL/ID Num.:
9 DL Class: 99
10 CDL End: 99
11 DL Rest.: 99
DOB (MM/DD/YYYY):
Address (Street, City, State, ZIP):

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	UNKNOWN	99			99	99	99	99	99	N	96		96	97	97

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

☑ Owner ☐ Lessee
Owner/Lessee Name & Address: VILLARREAL, ERNESTO
2201 E TRAVIS ST 111, LAREDO, TX 78043
Proof of Fin. Resp ☐ Yes ☐ Expired ☑ No ☐ Exempt
26 Fin. Resp. Type:
Fin. Resp. Name:
Fin. Resp. Num.:
Fin. Resp. Phone Num.:
27 Vehicle Damage Rating 1:
27 Vehicle Damage Rating 2:
Vehicle Inventoned ☐ Yes ☑ No
Towed By:
Towed To:

VEHICLE, DRIVER, & PERSONS

Unit Num.: 2
5 Unit Desc.: 1
☐ Parked Vehicle ☐ Hit and Run
LP State: TX
LP Num: AS36401
VIN: 1FTYR10D02PA16663
Veh. Year: 2002
6 Veh. Color: GRY
Veh. Make: FORD
Veh. Model: RANGER
7 Body Style: PK
☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
8 DL/ID Type: 1
DL/ID State: TX
DL/ID Num.: 2366177
9 DL Class: C
10 CDL End: 96
11 DL Rest.: 96
DOB (MM/DD/YYYY): 10/29/1977
Address (Street, City, State, ZIP): 3318 CORTEZ BLVD, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	CANTU, HOMERO	N	36	H	1	1	1	97	97	N	96		96	97	97

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

☑ Owner ☐ Lessee
Owner/Lessee Name & Address: CANTU, HOMERO
3318 CORTEZ BLVD, LAREDO, TX 78043
Proof of Fin. Resp ☑ Yes ☐ Expired ☐ No ☐ Exempt
26 Fin. Resp. Type: 1
Fin. Resp. Name: BRISTOL W SPECIALTY INS
Fin. Resp. Num.: G0021881511
Fin. Resp. Phone Num.: (888) 888-0080
27 Vehicle Damage Rating 1: 03-RFQ-2
27 Vehicle Damage Rating 2: 03-RD-2
Vehicle Inventoried ☐ Yes ☑ No
Towed By:
Towed To:

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-038681** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		Environmental and Roadway Conditions 38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1																	
2											2	1	98	98	3	1	12

NARRATIVE & DIAGRAM

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

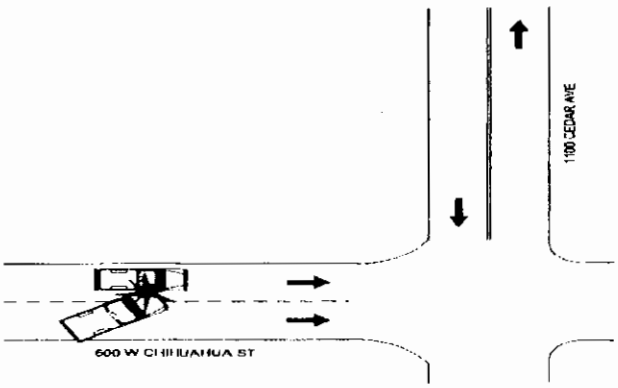
UNIT#1 WHILE TRAVELING EAST BOUND ON THE 500 BLOCK OF CHIHUAHUA ST/LEXINGTON AVE FAIL TO STAY IN SINGLE LANE AND COLLIEDED INTO VEHICLE #2 THAT WAS ALSO TRAVELING EAST BOUND ON CHIHUAHUA ST.

THE DRIVER OF SAID VEHICLE HAD COMMITTED THEFT OF MV. RELATED TO CASE#13-38681.THE LICENSE PLATES USED WHILE HIT N RUN (15L3087).

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1915 | How Notified **DISPATCH** | Time Arrived (24HRMM) 2002 | Report Date (MM/DD/YYYY) 12/11/2013

Invest. Comp ☑ Yes ☐ No | Investigator Name (Printed) **CASAS, ROBERTO** | ID Num. **5956**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | District/Area 13

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 002 | Total Num. Prsns. 005 | TxDOT Crash ID

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 12/19/2013 | ★Crash Time (24HRMM): 1603 | Case ID: 13-039590 | Local Use

★County Name: WEBB | ★City Name: LAREDO | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 600 | 3 Street Prefix | ★Street Name: CHIHUAHUA | 4 Street Suffix: ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit: 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc.

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

At Int. ■ Yes ☐ No | 1 Rdwy. Sys.: LR | Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 1100 | 3 Street Prefix | Street Name: CEDAR | 4 Street Suffix

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

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: DT1B515 | VIN: 1B3HB78B09D101669

Veh. Year: 2009 | 6 Veh. Color: MAR | Veh. Make: DODGE | Veh. Model: CALIBER | 7 Body Style: P4 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 5 | DL/ID State | DL/ID Num. | 9 DL Class: 5 | 10 CDL End.: 5 | 11 DL Rest.: 5 | DOB (MM/DD/YYYY): 08/11/1980

Address (Street, City, State, ZIP): 5006 CERROS DR, LAREDO, TX 78046

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	VILLARREAL, LAURA, SUSANA	C	33	H	2	1	1	1	1	N	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: VILLARREAL, LAURA, SUSANA, 5006 CERROS DR, LAREDO, TX 78046

Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 2 | Fin. Resp. Name: LYNDON SOUTHERN INS CO | Fin. Resp. Num.: L-PR7-852112-00

Fin. Resp. Phone Num.: (888) 224-7740 | 27 Vehicle Damage Rating 1: 9-LFQ-2 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ■ No

Towed By: BORDER TOWING | Towed To: 7312 SANTA MARIA AVE

Unit Num.: 2 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: BZ4D335 | VIN: 1FMEU17L13LA45186

Veh. Year: 2003 | 6 Veh. Color: WHI | Veh. Make: FORD | Veh. Model: EXPEDITION | 7 Body Style: SV | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 1 | DL/ID State: TX | DL/ID Num.: 36828469 | 9 DL Class: C | 10 CDL End.: 96 | 11 DL Rest.: 96 | DOB (MM/DD/YYYY): 09/27/1974

Address (Street, City, State, ZIP): 1608 REYNOLDS ST 2, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	AGUILERA, CLAUDIA, ROCIO	N	39	H	2	1	1	1	1	N	96		96	97	97
2	2	3	AGUILERA, JOANNA	N	24	H	2	1	1	1	1	N					
3	2	6	AGUILERA, LUIS, ANGEL	N	06	H	1	1	1	1	1	N					
4	2	4	AGUILERA, JENNIFER	N	08	H	2	1	1	1	1	N					

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: AGUILERA, CLAUDIA, ROCIO, 1608 REYNOLDS ST 2, LAREDO, TX 78043

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

Fin. Resp. Phone Num. | 27 Vehicle Damage Rating 1: 12-FR-2 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ■ Yes ☐ No

Towed By: BORDER TOWING | Towed To: 520 S ZAPATA HWY

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-039590** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
1	1	REFUSED TREATMENT		/ /	
				/ /	
				/ /	
				/ /	
				/ /	
				/ /	

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num
1	1	DISREGARDED RED LIGHT (TRAFFIC SIGNAL)	2698463
1	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2698463
2	1	FAILED TO MAINTAIN FINANCIAL RESPONSIBILITY/NO LIABILITY INS	2698461

DAMAGE

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

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			36 May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			37 May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	15																
2											1	1	4	4	1	1	5

NARRATIVE & DIAGRAM

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

Unit 1 was traveling east on 600 Chihuahua St.
Unit 2 was traveling south on 1100 Cedar Ave.
Unit 1 disregarded the red light and collided with Unit 2.

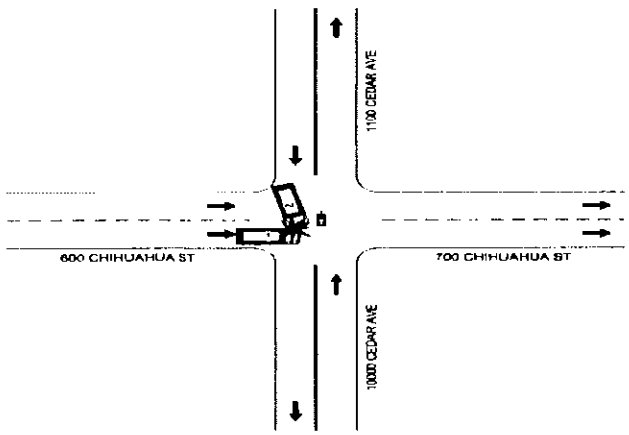
A.O.I. = 9 ft north and 7 ft east from the south west corner of Chihuahua St and Cedar Ave.

Witness Information:
HOLLOWAY, WILLIAM GUY III

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1604 | How Notified MCT DISPATCHED | Time Arrived (24HRMM) 1606 | Report Date (MM/DD/YYYY) 12/19/2013

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) GARCIA, RAIMUNDO D. | ID Num. 5004

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | District/Area

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
002	013	

Texas Peace Officer's Crash Report (Form CR-3 1/1/2010)

Mail to: Texas Department of Transportation, Crash Records, P.O. Box 149349, Austin, TX 78714. Questions? Call (512) 486-5780
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
02/17/2014	0906	14-004811	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	1100		CEDAR	AVE

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | Toll Road/ Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☒ Yes ☐ No	LR		1	700		CHIHUAHUA	

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

VEHICLE, DRIVER, & PERSONS

Unit Num. 1 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. 1116711 | VIN 15GGB271281178162

Veh. Year 2011 | 6 Veh. Color WHI | Veh. Make GILL MFG. CO. | Veh. Model BUS | 7 Body Style 98 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 1 | DL/ID State TX | DL/ID Num. 14506991 | 9 DL Class B | 10 CDL End. PS | 11 DL Rest. AM | DOB (MM/DD/YYYY) 05/05/1960

Address (Street, City, State, ZIP) 8621 PUERTO ESCONDIDO, LAREDO, TX 78045

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	TREVINO, MAIRA, ELVI	N	53	H	2	1	1	1	97	N	96		96	97	97
2	2	14	SANCHEZ, OLIVIA	N	78	H	2	97	97	97	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				
3	2	14	FLORES, MARIA	N	59	H	2	97	97	97	97	N					
4	2	14	ORTIZ, MARIA	N	53	H	2	97	97	97	97	N					

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: CITY OF LAREDO, 1301 FARRAGUT, LAREDO, TX 78043

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 2 | Fin. Resp. Name TML INTERGOVERNMENTAL | Fin. Resp. Num. 8245

Fin. Resp. Phone Num. (800) 537-6655 | 27 Vehicle Damage Rating 1 7-LP-1 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☒ No

Towed By DRIVER | Towed To DRIVEN AWAY

VEHICLE, DRIVER, & PERSONS

Unit Num. 2 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. CX6D573 | VIN 1G1JC524X171712

Veh. Year 2001 | 6 Veh. Color BLU | Veh. Make CHEVROLET | Veh. Model CAVALIER | 7 Body Style P4 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 5 | DL/ID State | DL/ID Num. | 9 DL Class 5 | 10 CDL End. 5 | 11 DL Rest. 5 | DOB (MM/DD/YYYY) 09/27/1988

Address (Street, City, State, ZIP) 2602 CLEVELAND ST, LAREDO, TX 78041

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	DIAZ, MARIA, DOLORES	N	25	H	2	1	1	1	97	N	96		96	97	97
													Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: ALEMAN, JESUS, ALEMAN, 2602 CLEVLAND 2, LAREDO, TX 78043

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 2 | Fin. Resp. Name DAIRYLAND AUTO | Fin. Resp. Num. 434704281

Fin. Resp. Phone Num. (800) 334-0090 | 27 Vehicle Damage Rating 1 11-LFQ-1 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☒ No

Towed By DRIVER | Towed To DRIVEN AWAY

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **14-004811** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	TURNED WHEN UNSAFE	2706081
2	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2706080

DAMAGE

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

CMV

Unit Num. 1 | ■ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ■ 9+ CAPACITY | 28 Veh. Oper. 2 | 29 Carrier ID Type 98 | Carrier ID Num.

Carrier's Corp. Name **CITYOFLAREDO** | Carrier's Primary Addr. **1300 FARRAGUT ST, LRDO TX 78043**

30 Rdwy. Access 1 | 31 Veh. Type 4 | ☐ RGVW ■ GVWR 66200 | HazMat Released ☐ Yes ■ No | 32 HazMat Class Num. | HazMat ID Num. | 32 HazMat Class Num. | HazMat ID Num.

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

Sequence Of Events | 35 Seq. 1 13 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4 | Total Num. Axles 1 | Total Num. Tires 6

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			36 May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			37 May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	66																
2											2	1	97	1	1	1	5

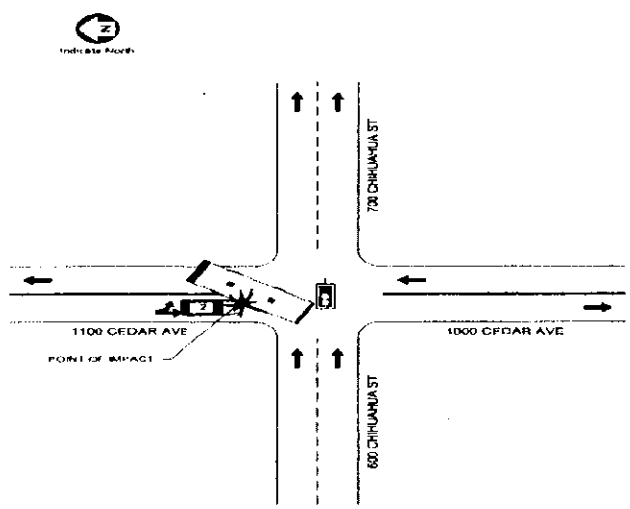
NARRATIVE & DIAGRAM

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

UNIT#1 WAS TRAVELING EAST BOUND ON THE 600 BLOCK OF CHIHUAHUA ST AND WAS TURNING NORTH BOUND ON THE 1100 BLOCK OF CEDAR AVE. UNIT#1 A METRO BUS DID AN UNSAFE LEFT TURN COLLIDING WITH UNIT#2. UNIT#2 WAS STOPPED AT A RED LIGHT FACING SOUTH BOUND ON THE 1100 BLOCK OF CEDAR AVE. UNIT#2 WHILE STOPPED AT THE LIGHT SAW THE BUS TURNING AND BACKED UP A LITTLE BUT UNIT#1 STILL COLLIDED WITH UNIT#2 CAUSING MINOR DAMAGES TO BOTH VEHICLES.
P.O.I NORTH EAST CORNER
13`4 W & 28.4` N
WIDTH OF CEDAR AVE 38`
WIDTH OF CHIHUAHUA ST 37 1/2`

* * E N D * *

Field Diagram - Not to Scale



INVESTIGATOR

Time Notified (24HRMM) 0906 | How Notified **SELF INITIATED** | Time Arrived (24HRMM) 0906 | Report Date (MM/DD/YYYY) 02/17/2014

Invest. Comp. ■ Yes ☐ No | Investigator Name (Printed) **MARTINEZ, RICARDO** | ID Num. **6716**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | District/Area 2

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **14-004811**

TxDOT Crash ID

*Crash Date (MM/DD/YYYY) 02/17/2014

*Crash Time (24HRMM) 0906

*County Name **WEBB**

*City Name **LAREDO**

*1 Rdwy. Sys. **LR**

*Hwy. Num.

*Street Name **CEDAR**

ORI Num. TX2401010

*Agency **LAREDO POLICE DEPARTMENT**

District/ Area 2

ADDITIONAL PERSONS

Unit Num	Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.
1	5	2	14	HERNANDEZ, AMALIA	N	68	H	2	97	97	97	97	N
1	6	2	14	GONZALEZ, RAMONA	N	51	H	2	97	97	97	97	N
1	7	2	14	TRUJILLO, JOSE, FRANCISCO	N	57	H	1	97	97	97	97	N
1	8	2	14	MEDINA, ISABEL	N	27	H	2	97	97	97	97	N
1	9	2	14	MEDINA, ELIZABETH	N	27	H	2	97	97	97	97	N
1	10	2	14	BUENO, ALFONZO	N	29	H	1	97	97	97	97	N
1	11	2	14	AGUIRRE, TOMAS, Z	N	47	H	1	97	97	97	97	N
1	12	2	14	QUINTANA, ROBERTO, MARTIN	N	44	H	1	97	97	97	97	N

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 3	0 0 2	

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

Texas Department of Transportation

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
04/03/2014	1450	14-009753	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	600		CHIHUAHUA	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☒ Yes ☐ No	LR		1	1100		CEDAR	AVE

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	Parked Vehicle	Hit and Run	LP State	LP Num.	VIN
1	1	☐	☐	TX	1E67554	1XPXD49X78D739766

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2008	RED	PETERBILT MOTORS CO.	NA	TT	☐

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End	11 DL Rest.	DOB (MM/DD/YYYY)
2	TX	09155116	A	N	96	11/17/1961

Address (Street, City, State, ZIP) 2518 CR 278, BALLINGER, TX 76821

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	SCHAEFER JR, ROY, AUGUST	N	52	H	1	1	1	1	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: C & C CATTLE CO, 1580 FM 3115, BRONTE, TX 76933

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
☒ Yes ☐ No ☐ Expired ☐ Exempt	2	PROGRESSIVE COUNTY MUTUAL	07926582-2

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 444-4487	1 - FL - 1		☐ Yes ☒ No

Towed By | Towed To

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	Parked Vehicle	Hit and Run	LP State	LP Num.	VIN
2	6	☐	☐	TX	005B007	1W1652A5D5542447

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2013	SIL	WILSON	NA	TL	☐

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

Address (Street, City, State, ZIP)

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

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: C & C CATTLE CO, 1580 FM 3115, BRONTE, TX 76933

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
☒ Yes ☐ No ☐ Expired ☐ Exempt	2	PROGRESSIVE COUNTY MUTUAL	07926582-2

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 444-4487			☐ Yes ☒ No

Towed By | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **14-009753** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
3	1	LAREDO MEDICAL CENTER	RQ 9104		

CHARGES

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

DAMAGE

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

CMV

Unit Num. 1 | ☒ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | 28 Veh. Oper. 3 | 29 Carrier ID Type 1 | Carrier ID Num. 2141413

Carrier's Corp. Name C & C CATTLE COMPANY | Carrier's Primary Addr. 1580 FM3115, BRONTE TX 96933

30 Rdwy. Access 1 | 31 Veh. Type 9 | ☐ RGVW ☒ GVWR 8,0,0,0,0 | HazMat Released ☐ Yes ☒ No | 32 HazMat Class Num. | HazMat ID Num. | 32 HazMat Class Num. | HazMat ID Num.

33 Cargo Body Style 3 | Trailer 1 | Unit Num. 2 | ☐ RGVW ☐ GVWR 0 | 34 Trlr. Type | Trailer 2 | Unit Num. | ☐ RGVW ☐ GVWR | 34 Trlr. Type

Sequence Of Events | 35 Seq. 1 98 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4 | Total Num. Axles 5 | Total Num. Tires 18

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1																	
2											2	1	4	4	2	1	5

NARRATIVE & DIAGRAM

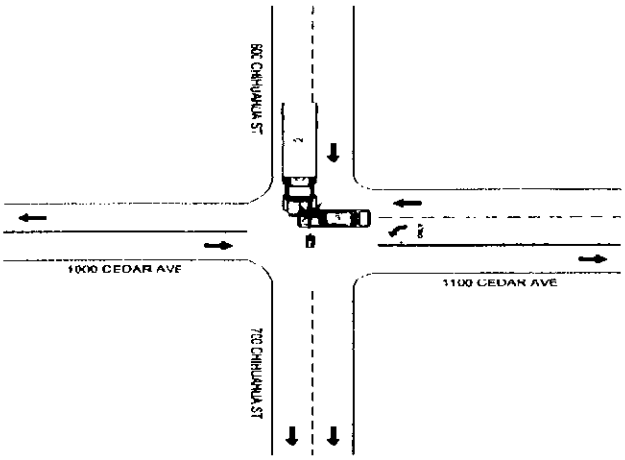
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

Unit 1 which towed Unit 2, traveled east on a grade (downhill) at the 600 block of Chihuahua St. Unit 3 traveled south on the 1100 block of Cedar Ave. Unit 1 stated that the light was yellow and due to the heavy cargo of livestock, would be unable to stop safely, so he continued through the intersection. Unit 3 claimed that Unit 1 disregarded the red light and collided with her. No independent witnesses were available and subsequently no citations were issued.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



INVESTIGATOR

Time Notified (24HRMM) 1,4,5,0 | How Notified MCT DISATCH | Time Arrived (24HRMM) 1,4,5,8 | Report Date (MM/DD/YYYY) 0,4/0,3/2,0,1,4

Invest. Comp. ☒ Yes ☐ No | Investigator Name (Printed) ROSALES, CHARLIE A. | ID Num. 5308

ORI Num. T,X,2,4,0,0,1,0,0 | *Agency LAREDO POLICE DEPARTMENT | District/Area 2

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
003	002	

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
04/03/2014	1450	14-009753	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	600		CHIHUAHUA	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☒ Yes ☐ No	LR		1	1100		CEDAR	AVE

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
3	1			TX	DW5C999	2T1BU4EE6BC612298

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2011	WHI	TOYOTA	COROLLA	P4	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	15552334	C	96	96	09/11/1972

Address (Street, City, State, ZIP): 1106 TILDEN, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	SALAZAR MARTINEZ, JACINTA	C	41	H	2	1	1	1	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: SALAZAR MARTINEZ, JACINTA 1106 TILDEN, LAREDO, TX 78040

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
☒ Yes ☐ Expired ☐ No ☐ Exempt	2	FRED LOYA	78360323324

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 880-0472	5 - RFQ - 2		☐ Yes ☒ No

Towed By | Towed To

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **14-009753** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
3											2	1	4	4	2	1	5

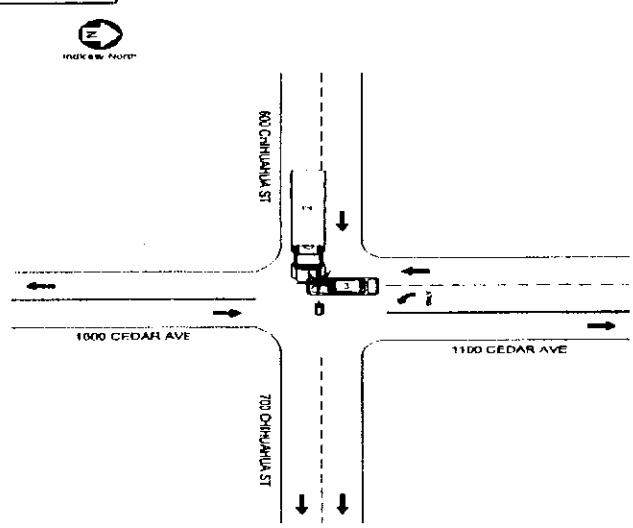
NARRATIVE & DIAGRAM

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

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1450 | How Notified **MCT DISATCH** | Time Arrived (24HRMM) 1458 | Report Date (MM/DD/YYYY) 04/03/2014

Invest. Comp. ☒ Yes ☐ No | Investigator Name (Printed) **ROSALES, CHARLIE A.** | ID Num. **5308**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | District/Area 2

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

Total Num. Units 002	Total Num. Prsns. 003	TxDOT Crash ID

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
05/02/2014	1726	14-013022	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

In your opinion, did this crash result in at least $1,000 damage to any one person's property? ☐ Yes ■ No | Latitude (decimal degrees) ___.____ | Longitude (decimal degrees) ___.____

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	600		CHIHUAHUA	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ■ No	LR		1	1100		CEDAR	AVE

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	CMV2942	1GNEC13Z74R102286

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2004	BLK	CHEVROLET	TAHOE	SV	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	36387490	C	96	96	03/25/1996

Address (Street, City, State, ZIP): 11146 SALADO DR, LAREDO, TX 78045

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	VILLARREAL, CASSANDRA, JESSICA	N	18	H	2	1	1	1	97	N	96		96	97	97
2	2	3	VILLARREAL JR, JAVIER	N	15	H	1	1	1	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

■ Owner ☐ Lessee | Owner/Lessee Name & Address: VILLARREAL, JAVIER, 11146 SALADO DR, LAREDO, TX 78045

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
■ Yes ☐ No ☐ Expired ☐ Exempt	2	CEM INSURANCE	CPR529992204

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(888) 224-7740	12-FD-1		☐ Yes ■ No

Towed By	Towed To
OWNER	DRIVEN AWAY

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
2	1			TX	CF8Y439	1G4GC5EG8AF215452

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2010	SIL	BUICK	LACROSS	P4	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	00126811	C	96	96	06/04/1966

Address (Street, City, State, ZIP): 2325 SAN JOSE APT 31, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	MOORE, MARY, JO	N	47	H	2	1	1	1	97	N	96		96	97	97
													Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

■ Owner ☐ Lessee | Owner/Lessee Name & Address: MOORE, MARY, JO, 2325 SAN JOSE APT 31, LAREDO, TX 78043

Proof of Fin. Resp	28 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
■ Yes ☐ No ☐ Expired ☐ Exempt	2	ALLSTATE	916846335

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 255-7828	6-BD-1		☐ Yes ■ No

Towed By	Towed To
DRIVER	DRIVEN AWAY

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **14-013022** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	2713457

DAMAGE

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

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22																
2											1	1	97	4	1	1	5

NARRATIVE & DIAGRAM

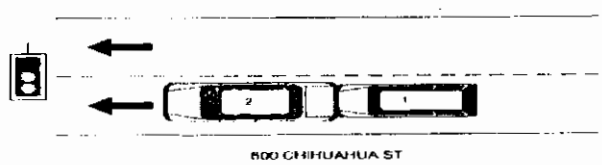
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

UNIT#2 WAS STOPPED DUE TO TRAFFIC LIGHT BY THE 600 BLOCK OF CHIHUAHUA ST. UNIT#1 FAILED TO CONTROL SPEED AND COLLIDED WITH UNIT#2 BY THE 600 BLOCK OF CHIHUAHUA ST. BOTH UNITS WERE TRAVELING EAST BOUND. P.O.I 28 FEET EAST OF NORTH WEST CORNER.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1727 | How Notified **MCT DISPATCHED** | Time Arrived (24HRMM) 1728 | Report Date (MM/DD/YYYY) 05/02/2014

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) **MARTINEZ, RICARDO** | ID Num. **6716**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | District/Area 2

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 2	0 0 2	

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★=These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
06/07/2015	2332	15-017012	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	600		CHIHUAHUA	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☑ No | Workers Present ☐ Yes ☑ No | Street Desc.

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

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

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

VEHICLE, DRIVER, & PERSONS

Unit Num. 1 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☑ Hit and Run | LP State TX | LP Num W83HWN | VIN 1GKDS13S732405333

Veh. Year 2003 | 6 Veh. Color PLE | Veh. Make GENERAL MOTORS CORP | Veh. Model ENVOY | 7 Body Style SV | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 99 | DL/ID State UN | DL/ID Num. | 9 DL Class 99 | 10 CDL End. 99 | 11 DL Rest. 99 | DOB (MM/DD/YYYY) __/__/____

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	UNKNOWN	N		W	1	1	99	1	97	N	96		96	97	97

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

☑ Owner ☐ Lessee | Owner/Lessee Name & Address: REAGAN, BILLY, RAY 12145 CR317, JEWETT, TX 77584

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

Fin. Resp. Phone Num. | 27 Vehicle Damage Rating 1 9__-LFQ-2 | 27 Vehicle Damage Rating 2 3__-RFQ-2 | Vehicle Inventoried ☑ Yes ☐ No

Towed By READY TOWING | Towed To 2920 ANNA AVE

Unit Num. 2 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. BV3M941 | VIN JTLKE50E981054488

Veh. Year 2008 | 6 Veh. Color PLE | Veh. Make TOYOTA | Veh. Model SCION | 7 Body Style P4 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 1 | DL/ID State TX | DL/ID Num. 00366121 | 9 DL Class C | 10 CDL End. 96 | 11 DL Rest. A | DOB (MM/DD/YYYY) 04/21/1987

Address (Street, City, State, ZIP) 321 WYEOAK ST, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	CEDILLO, ESTEPHANIE, BERNICE	N	28	H	2	1	1	1	97	N	96		96	97	97

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

☑ Owner ☐ Lessee | Owner/Lessee Name & Address: QUIROZ, RAYMUNDO, JAVIER 3414 EUCALYPTUS, LAREDO, TX 78043

Proof of Fin. Resp ☑ Yes ☐ Expired ☐ No ☐ Exempt | 26 Fin. Resp. Type 2 | Fin. Resp. Name CEM INSURANCE | Fin. Resp. Num. CPR9138582-01

Fin. Resp. Phone Num. (888) 224-7740 | 27 Vehicle Damage Rating 1 3__-RBQ-2 | 27 Vehicle Damage Rating 2 ___-___-___ | Vehicle Inventoried ☐ Yes ☑ No

Towed By DRIVER | Towed To DRIVEN AWAY

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-017012** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

Unit Num.	☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY	CMV Disabling Damage ☐ Yes ☐ No	28 Veh. Oper.	29 Carrier ID Type	Carrier ID Num.
Carrier's Corp. Name	Carrier's Primary Addr.				30 Veh. Type
31 Bus Type	☐ RGVW ☐ GVWR	HazMat Released ☐ Yes ☐ No	32 HazMat Class Num. / HazMat ID Num.	32 HazMat Class Num. / HazMat ID Num.	33 Cargo Body Style
Trailer 1 Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type	CMV Disabling Damage ☐ Yes ☐ No	Trailer 2 Unit Num	☐ RGVW ☐ GVWR
34 Trlr. Type	CMV Disabling Damage ☐ Yes ☐ No				
Sequence Of Events	35 Seq. 1	35 Seq. 2	35 Seq. 3	35 Seq. 4	

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)					Environmental and Roadway Conditions						
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1																	
2											1	2	97	4	1	1	96

NARRATIVE & DIAGRAM

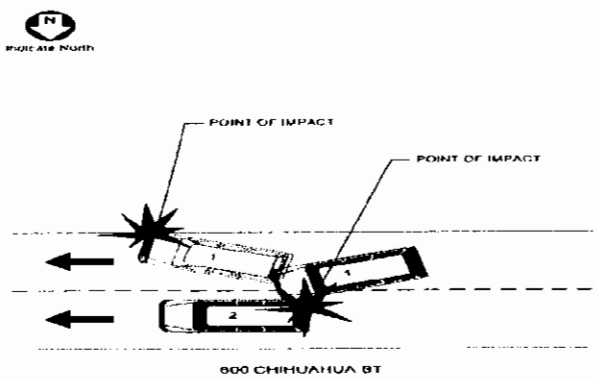
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

UNIT#1 WAS TRAVELING EAST BOUND ON THE 600 BLOCK OF CHIHUAHUA ST. UNIT#1 FAILED TO STAY IN A SINGLE LANE AND FAILED TO CONTROL SPEED AND COLLIDED WITH UNIT#2. UNIT#1 LOST CONTROL AND THEN COLLIDED AGAINST THE WALL. UNIT#1 LEFT THE SCENE OF THE ACCIDENT. UNIT#2 WAS ALSO TRAVELING EAST BOUND ON THE 600 BLOCK OF CHIHUAHUA ST. NO CITATIONS ISSUED. P.O.I 52 FEET WEST, 8 FEET SOUTH OF NORTH WEST CORNER.

* * E N D * *

Indicate North

Field Diagram - Not to Scale



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 2333	How Notified **MCT DISPATCHED**	Time Arrived (24HRMM) 2334	Report Date (MM/DD/YYYY) 06/08/2015	
Invest. Comp. ☑ Yes ☐ No	Investigator Name (Printed) **MARTINEZ, RICARDO**			ID Num. **6716**
ORI Num. TX240100	*Agency **LAREDO POLICE DEPARTMENT**			Service/ Region/DA 2

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 002 | Total Num. Prsns. 002 | TxDOT Crash ID

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★=These fields are required on all additional sheets submitted for this crash (ex. additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 07/15/2015 | ★Crash Time (24HRMM): 1858 | Case ID: 15-021110 | Local Use

★County Name: WEBB | ★City Name: LAREDO | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 600 | 3 Street Prefix | ★Street Name: CHIHUAHUA | 4 Street Suffix: ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/ Toll Lane | Speed Limit: 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

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

Distance from Int. or Ref. Marker: 100 | ☒ FT ☐ MI | 3 Dir. from Int. or Ref. Marker: W | Reference Marker | Street Desc. | RRX Num.

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: LA | LP Num.: C244757 | VIN: 1GC1KUEG0FF128076

Veh. Year: 2014 | 6 Veh. Color: WHI | Veh. Make: CHEVROLET | Veh. Model: SILVERADO | 7 Body Style: PK | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 1 | DL/ID State: TX | DL/ID Num.: 25728919 | 9 DL Class: C | 10 CDL End.: 96 | 11 DL Rest.: 96 | DOB (MM/DD/YYYY): 12/29/1987

Address (Street, City, State, ZIP): 2818 SOUTH MARTIN, LAREDO, TX 78046

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	ALARCON JR, MARTIN	N	27	H	1	1	1	1	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: SHAMAROCK 4800 LA-311, HOUMA, LA 70360

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 1 | Fin. Resp. Name: PRAETORIAN SPECIALTY INSURANCE | Fin. Resp. Num.: PICLA0003618

Fin. Resp. Phone Num.: (985) 868-0715 | 27 Vehicle Damage Rating 1: 5-RFQ-1 | 27 Vehicle Damage Rating 2: | Vehicle Inventoried ☐ Yes ☒ No

Towed By | Towed To: DRIVEN AWAY

Unit Num.: 2 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: CKR5287 | VIN: JM1BL1TF2D1735097

Veh. Year: 2013 | 6 Veh. Color: GRY | Veh. Make: MAZDA | Veh. Model: 3 | 7 Body Style: P4 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 5 | DL/ID State | DL/ID Num. | 9 DL Class: 5 | 10 CDL End.: 5 | 11 DL Rest.: 5 | DOB (MM/DD/YYYY): 12/21/1954

Address (Street, City, State, ZIP): 1014 MONACO BLVD BUILDING E 140, LAREDO, TX 78045

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	LOPEZ, JOSE, JORGE	N	60	H	1	1	1	1	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: LOPEZ, JOSE, JORGE 7607 KING ARTHUR CT 701, LAREDO, TX 78045

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 1 | Fin. Resp. Name: PRONTO GENERAL AGENCY | Fin. Resp. Num.: PR6664781-03

Fin. Resp. Phone Num.: (888) 224-7740 | 27 Vehicle Damage Rating 1: 10-LFQ-2 | 27 Vehicle Damage Rating 2: 3-RFQ-3 | Vehicle Inventoried ☐ Yes ☒ No

Towed By: EAGLE FORD TOWING | Towed To: 520 S HIGHWAY 83

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-021110** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	CHANGED LANE WHEN UNSAFE	2749810
2	1	EXPIRED DRIVER`S LICENSE	2749811

DAMAGE

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

CMV

Unit Num. | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	4																
2											1	1	97	4	3	1	11

NARRATIVE & DIAGRAM

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

UNIT#1 AND UNIT#2 WERE TRAVELING EAST BOUND IN THE 600 BLOCK OF CHIHUAHUA ST. UNIT#1 CHANGED LANES WHEN UNSAFE AND COLLIDED WITH UNIT#2.

Witness Information:
LUGO, WENDY

* * E N D * *

Field Diagram - Not to Scale

Indicate North

Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1908 | How Notified **RADIO DISPATCHED** | Time Arrived (24HRMM) 1914 | Report Date (MM/DD/YYYY) 07/15/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) **SOLIS, JULIO C.** | ID Num. **7554**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA 2

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 001 | Total Num. Prsns. 001 | TxDOT Crash ID

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 09/30/2015 | ★Crash Time (24HRMM): 0226 | Case ID: 15-028923 | Local Use

★County Name: WEBB | ★City Name: LAREDO | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 600 | 3 Street Prefix | ★Street Name: CHIHUAHUA | 4 Street Suffix: ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/ Toll Lane | Speed Limit: 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

At Int. ☒ Yes ☐ No | 1 Rdwy. Sys.: LR | Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 1000 | 3 Street Prefix | Street Name: CEDAR | 4 Street Suffix

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

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: GG32YR | VIN: 1HGCR2F50EA065340

Veh. Year: 2014 | 6 Veh. Color: MAR | Veh. Make: HONDA | Veh. Model: ACCORD | 7 Body Style: P4 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 1 | DL/ID State: TX | DL/ID Num.: 14039209 | 9 DL Class: C | 10 CDL End: 96 | 11 DL Rest.: 96 | DOB (MM/DD/YYYY): 03/08/1975

Address (Street, City, State, ZIP): 1118 CORTEZ ST, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	TIJERINA, GERARDO, RAMON	N	40	H	1	97	1	5	97	N	1	.08	96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: TIJERINA, MINERVA, 1118 CORTEZ ST, LAREDO, TX 78040

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 1 | Fin. Resp. Name: 21ST CENTURY NORTH AMERICA INS CO | Fin. Resp. Num.: 616-11-69

Fin. Resp. Phone Num.: (800) 241-1188 | 27 Vehicle Damage Rating 1: 12-FD-5 | 27 Vehicle Damage Rating 2: 01-RFQ-3 | Vehicle Inventoried ☐ Yes ☒ No

Towed By: SMU TOWING | Towed To: 520 S ZAPATA HWY

VEHICLE, DRIVER, & PERSONS

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-028923** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAILED TO DRIVE IN SINGLE LANE	2751806

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
AEP	AEP	1500 W CALTO RD LAREDO, TX 78040

CMV

Unit Num. | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 26 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		Environmental and Roadway Conditions 38 Weather Cond	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	23			75	67						1	3	4	1	1	1	17

NARRATIVE & DIAGRAM

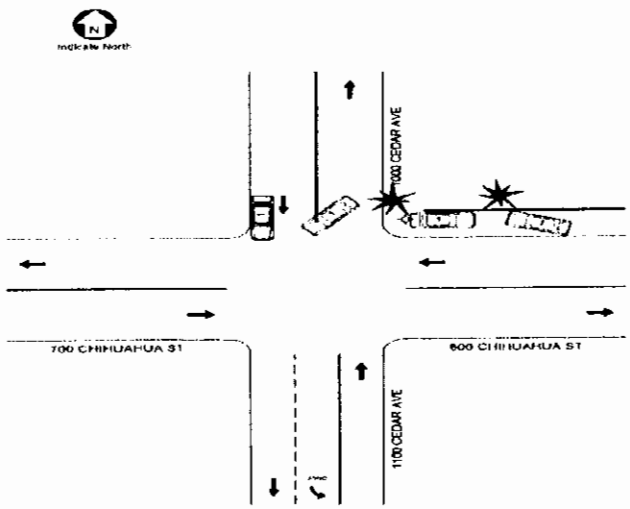
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

DRIVER OF UNIT 1 COLLIDED WITH A UNTILY POLE AND A FENCE. A WITNESS STATED THAT HE WITNESSED THE DRIVER OF UNIT 1 TEXTING WHILE OPERATING HIS VEHICLE.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



INVESTIGATOR

Time Notified (24HRMM) 0227 | How Notified VIA COMPUTER | Time Arrived (24HRMM) 0230 | Report Date (MM/DD/YYYY) 09/30/2015

Invest. Comp. ☒ Yes ☐ No | Investigator Name (Printed) RUIZ, RODRIGO | ID Num. 2603

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | Service/Region/DA

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

Total Num. Units 002	Total Num. Prsns. 002	TxDOT Crash ID

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
10/01/2015	0839	15-029031	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	400		CHIHUAHUA	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/ Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☑ No | Workers Present ☐ Yes ☑ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☑ No	LR		1	100		CEDAR	

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☑ Hit and Run	LP State	LP Num.	VIN
1	1					

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
				99	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End	11 DL Rest	DOB (MM/DD/YYYY)
99	UN		99	99	99	

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	UNKNOWN	99		W	1	99	99	99	99	N	96		96	97	97

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
	3-RP-2		☐ Yes ☑ No

Towed By	Towed To
DRIVER	DRIVEN AWAY

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
2	1			TX	CRY0222	2GCEC19T411116128

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2001	BLU	CHEVROLET	SILVERADO	PK	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	19046031	C	96	96	09/07/1969

Address (Street, City, State, ZIP) 4617 CAROLINE ST., LAREDO, TX 78046

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	GALLEGOS, DIANA, GUADALUPE	N	46	H	2	1	1	1	97	N	96		96	97	97

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

☑ Owner ☐ Lessee | Owner/Lessee Name & Address: GALLEGOS, DIANA, GUADALUPE 4617 CAROLINE ST., LAREDO, TX 78046

Proof of Fin. Resp	Fin. Resp. Name	Fin. Resp. Num.
☑ Yes ☐ Expired ☐ No ☐ Exempt	26 Fin. Resp. Type 2 — ALLSTATE	836081247

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 255-7828	1-RFQ-3	1-RP-2	☐ Yes ☑ No

Towed By	Towed To
DRIVER	4617 CAROLINE ST

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-029031** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

Unit Num. | ☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 | Unit Num. | ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 | Unit Num. | ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		Environmental and Roadway Conditions 38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	23																
2											1	3	97	4	1	1	96

NARRATIVE & DIAGRAM

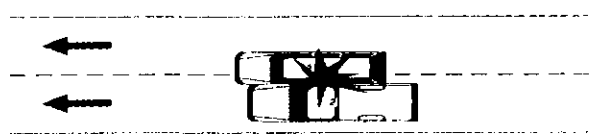
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

UNIT # 2 AND UNIT #1 WERE TRAVELING EAST ON THE 400 BLOCK OF CHIHUAHUA ST. UNIT #1 FAILED TO DRIVE IN A SINGLE LANE AND COLLIDED INTO UNIT#2. UNIT#1 FLED THE SCENE , THE ACCIDENT OCCURRED AT 0330AM AND WAS NOT INVESTIGATED UNITIL 08:39A.

* * E N D * *

Indicate North

Field Diagram - Not to Scale



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 0839 | How Notified **MCT DISPARCHED** | Time Arrived (24HRMM) 0842 | Report Date (MM/DD/YYYY) 10/01/2015

Invest Comp. ☑ Yes ☐ No | Investigator Name (Printed) **RODRIGUEZ, ALFREDO** | ID Num. **2527**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA 2

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 002 | Total Num. Prsns. 002 | TxDOT Crash ID

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ = These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 10/07/2015 | ★Crash Time (24HRMM): 1012 | Case ID: 15-029642 | Local Use

★County Name: WEBB | ★City Name: LAREDO | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 600 | 3 Street Prefix | ★Street Name: CHIHUAHUA | 4 Street Suffix: ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit: 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.: PAVED

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

At Int. ☐ Yes ☒ No | 1 Rdwy. Sys.: LR | Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 1100 | 3 Street Prefix | Street Name: CEDAR | 4 Street Suffix

Distance from Int. or Ref. Marker: 200 | ☒ FT ☐ MI | 3 Dir. from Int. or Ref. Marker: W | Reference Marker | Street Desc.: PAVED | RRX Num.

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: BT2X133 | VIN: JN8AZ18WX9W200536

Veh. Year: 2009 | 6 Veh. Color: WHI | Veh. Make: NISSAN | Veh. Model: MURANO | 7 Body Style: P4 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 99 | DL/ID State: UN | DL/ID Num. | 9 DL Class: 99 | 10 CDL End: 99 | 11 DL Rest.: 99 | DOB (MM/DD/YYYY): 09/01/1985

Address (Street, City, State, ZIP): 1818 BLAIR ST A, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	MORENO, ANA	N	30	H	2	1	1	1	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: IBARRA, LEOBARDO, 8924 LADY DI, LAREDO, TX 78045

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 2 | Fin. Resp. Name: CEM INSURANCE CO. | Fin. Resp. Num.: PR5156371-07

Fin. Resp. Phone Num.: (888) 224-7740 | 27 Vehicle Damage Rating 1: 10-FD-3 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☒ No

Towed By: DRIVER | Towed To: DRIVEN AWAY

Unit Num.: 2 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: T0401C | VIN: 1GDE5C12051F53273 1

Veh. Year: 2005 | 6 Veh. Color: WHI | Veh. Make: GENERAL MOTORS CORP | Veh. Model: TT | 7 Body Style: 98 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 1 | DL/ID State: TX | DL/ID Num.: 01870920 | 9 DL Class: C | 10 CDL End: 96 | 11 DL Rest.: 96 | DOB (MM/DD/YYYY): 06/23/1954

Address (Street, City, State, ZIP): 2216 CHACON ST, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	COBOS, JUAN, JULIAN	N	61	H	1	1	1	1	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: CABELLO ENTERPRISES LLP CESAR, 3151 P O BOX 3151, LAREDO, TX 78044

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 2 | Fin. Resp. Name: STATE NATURAL INS. CO. | Fin. Resp. Num.: XNDA-01527-00

Fin. Resp. Phone Num.: (800) 369-9010 | 27 Vehicle Damage Rating 1: 4-BR-1 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☒ No

Towed By: DRIVER | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-029642** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	CHANGED LANE WHEN UNSAFE	2525459
1	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2525459

DAMAGE

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

CMV

Unit Num. | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1																	
2											1	1	4	4	1	1	17

NARRATIVE & DIAGRAM

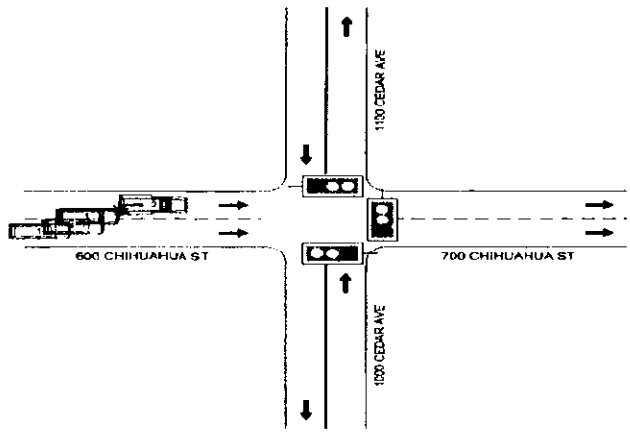
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

Unit 1 was traveling eastbound on the 600 block of Chihuahua St. and changed lanes when unsafe thus colliding into Unit 2.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale.

INVESTIGATOR

Time Notified (24HRMM) 1027 | How Notified MCT | Time Arrived (24HRMM) 1028 | Report Date (MM/DD/YYYY) 10/07/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) GUERRA, LIZBETH | ID Num. 7890

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | Service/Region/DA 2

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 2	0 0 7	

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
10/11/2015	1341	15-030084	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	1100		CEDAR	AVE

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☒ Yes ☐ No	LR		1	600		CHIHUAHUA	

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

VEHICLE, DRIVER, & PERSONS

Unit Num. 1 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. GBB6077 | VIN 1J4GA391471L230796

Veh. Year 2007 | 6 Veh. Color MAR | Veh. Make JEEP | Veh. Model WRANGLER | 7 Body Style P2 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 5 | DL/ID State | DL/ID Num. | 9 DL Class 5 | 10 CDL End. 5 | 11 DL Rest. 5 | DOB (MM/DD/YYYY) 10/14/1995

Address (Street, City, State, ZIP) 1701 GREEN ST, LAREDO, TX 78046

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	GAONA, KASSANDRA	N	19	H	2	1	1	1	97	N	96		96	97	97
2	2	3	SANCHEZ, AUDREY	N	21	H	2	1	1	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: RIVERO, JORGE, 1311 SALINAS AVE, LAREDO, TX 78040

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 1 | Fin. Resp. Name PR9958011-00 | Fin. Resp. Num. LYNDON SOUTHERN

Fin. Resp. Phone Num. (956) 724-2110 | 27 Vehicle Damage Rating 1 12-FD-1 | 27 Vehicle Damage Rating 2 ___-___-___ | Vehicle Inventoried ☐ Yes ☒ No

Towed By DRIVER | Towed To

Unit Num. 2 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. 57LLY9 | VIN 1FTRX172120NA58754

Veh. Year 2002 | 6 Veh. Color GRY | Veh. Make FORD | Veh. Model F150 | 7 Body Style PK | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 1 | DL/ID State TX | DL/ID Num. 07602668 | 9 DL Class A | 10 CDL End. 96 | 11 DL Rest. A | DOB (MM/DD/YYYY) 09/20/1951

Address (Street, City, State, ZIP) 617 E OLIVE, LAREDO, TX 78041

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	MAGANA, RUBEN	N	64	H	1	1	1	1	97	N	96		96	97	97
2	2	3	ZUNIGA LAZARO, BLANCA, ESTELA	N	47	H	2	1	1	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				
3	2	6	PAZ GARCIA, MARIA, ANTONIA	N	36	H	2	1	1	1	97	N					
4	2	4	PAZ GARCIA, ESCARLIN	N	12	H	2	1	1	1	97	N					

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: MARTINEZ, BELINDA, ANN, 1011 MERRIMACK LOOP, LAREDO, TX 78046

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

Fin. Resp. Phone Num. | 27 Vehicle Damage Rating 1 5-RD-2 | 27 Vehicle Damage Rating 2 ___-___-___ | Vehicle Inventoried ☐ Yes ☒ No

Towed By JAM TOWING | Towed To 4410 E SAUNDERS

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-030084** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num
1	1	DISREGARDED RED LIGHT (TRAFFIC SIGNAL)	2741017
1	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2741017
2	1	FAILED TO MAINTAIN FINANCIAL RESPONSIBILITY/NO LIABILITY INS	2741018

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
CHAIN LINK FENCE	JUAN A HERNANDEZ VILLANUEVA	702 CHIHUAHUA ST LAREDO, TX 78040

CMV

Unit Num. | ☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		Environmental and Roadway Conditions 38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	16																
2											1	1	4	2	1	1	5

NARRATIVE & DIAGRAM

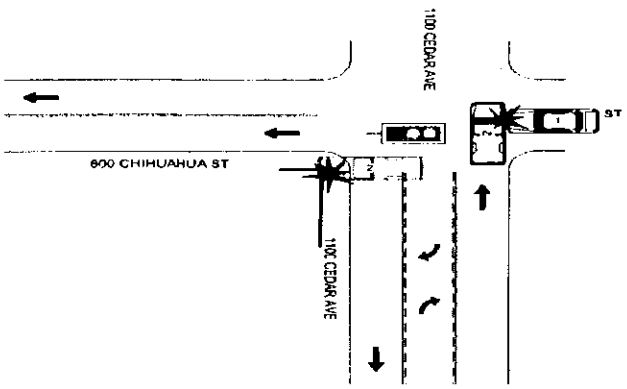
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

UNIT # 1 WAS TRAVELING EAST BOUND ON THE 600 BLOCK OF CHIHUAHUA ST.
UNIT # 2 WAS TRAVELING SOUTH BOUND ON THE 1100 BLOCK OF CEDAR AVE.
UNIT # 1 DISREGARDED THE RED LIGHT THATS LOCATED BY THE INTERSECTION OF THE 600 BLOCK OF CHIHUAHUA ST AND 1100 BLOCK OF CEDAR AVE AND COLLIDED INTO UNIT # 2 WHICH CAUSED UNIT # 2 TO LOSE CONTROL OF THE VEHICLE AND COLLIDE WITH THE CHAIN LINK FENCE THATS LOCATED AT 702 CHIHUAHUA ST.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1357 | How Notified DISPATCH | Time Arrived (24HRMM) 1357 | Report Date (MM/DD/YYYY) 10/16/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) PRADO, REYNALDO M. | ID Num. 7143

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | Service/Region/DA 2

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID 15-030084

TxDOT Crash ID

*Crash Date (MM/DD/YYYY) 10/11/2015

*Crash Time (24HRMM) 1341

*County Name WEBB

*City Name LAREDO

*1 Rdwy. Sys. LR

*Hwy. Num.

*Street Name CEDAR

ORI Num. TX2401000

*Agency LAREDO POLICE DEPARTMENT

Service/ Region/DA 2

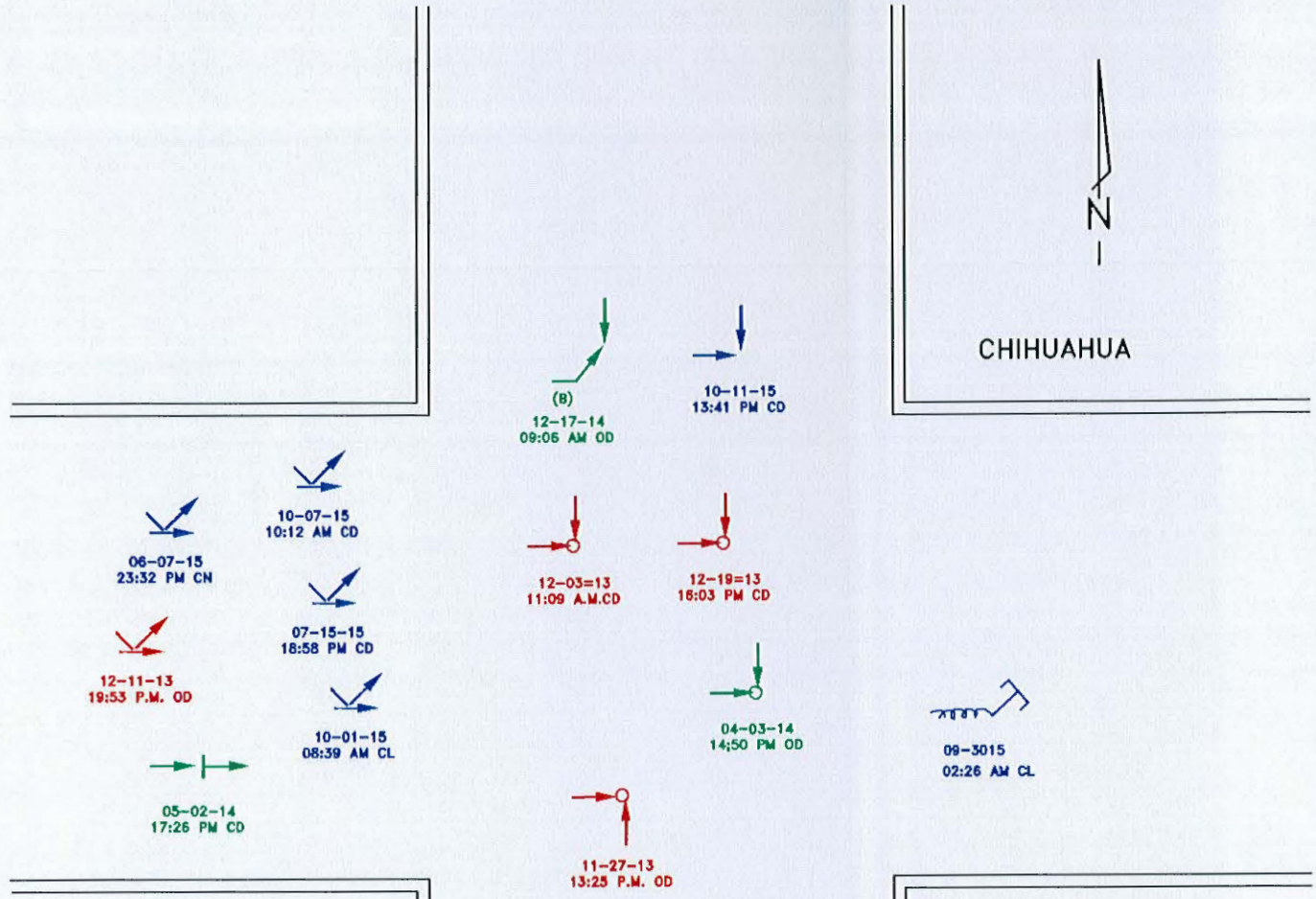
ADDITIONAL PERSONS

Unit Num	Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject	18 Restr.	19 Airbag	20 Helmet	21 Sol.
2	5	2	5	PAZ GARCIA, YOSTELIN	N	06	H	2	1	1	1	97	N

COLLISION DIAGRAM

LOCATION: Chihuahua/ Cedar Ave.

TIME PERIOD: 1-01-13 TO PRESENT



ACCIDENT SUMMARY							
YEAR					2013	2014	2015
FATAL					0	0	0
INJURY					3	1	0
PDO					1	2	6
TOTAL					4	3	6

ROAD SURFACE

- C DRY, CLEAR
- W WET
- S SNOWY, ICY
- O OTHER

LIGHTING

- D DAYLIGHT
- N DARK, NO LIGHTS
- L DARK WITH STREET LIGHT

City of Laredo
Traffic Safety Division

PREPARED BY: Oscar Canales

APPROVED BY: Roberto Murillo, P.T.O.E.

DATE: 11-09-15

Figure 4

- Automobile, Pick-Up
- (T) Truck
- (B) Bus
- (M) Motorcycle
- (O) Other

2. ACCIDENT DATA FOR HOUSTON ST. INTERSECTION WITH SAN LEONARDO AVE. FROM 08/13 THRU 10/15.

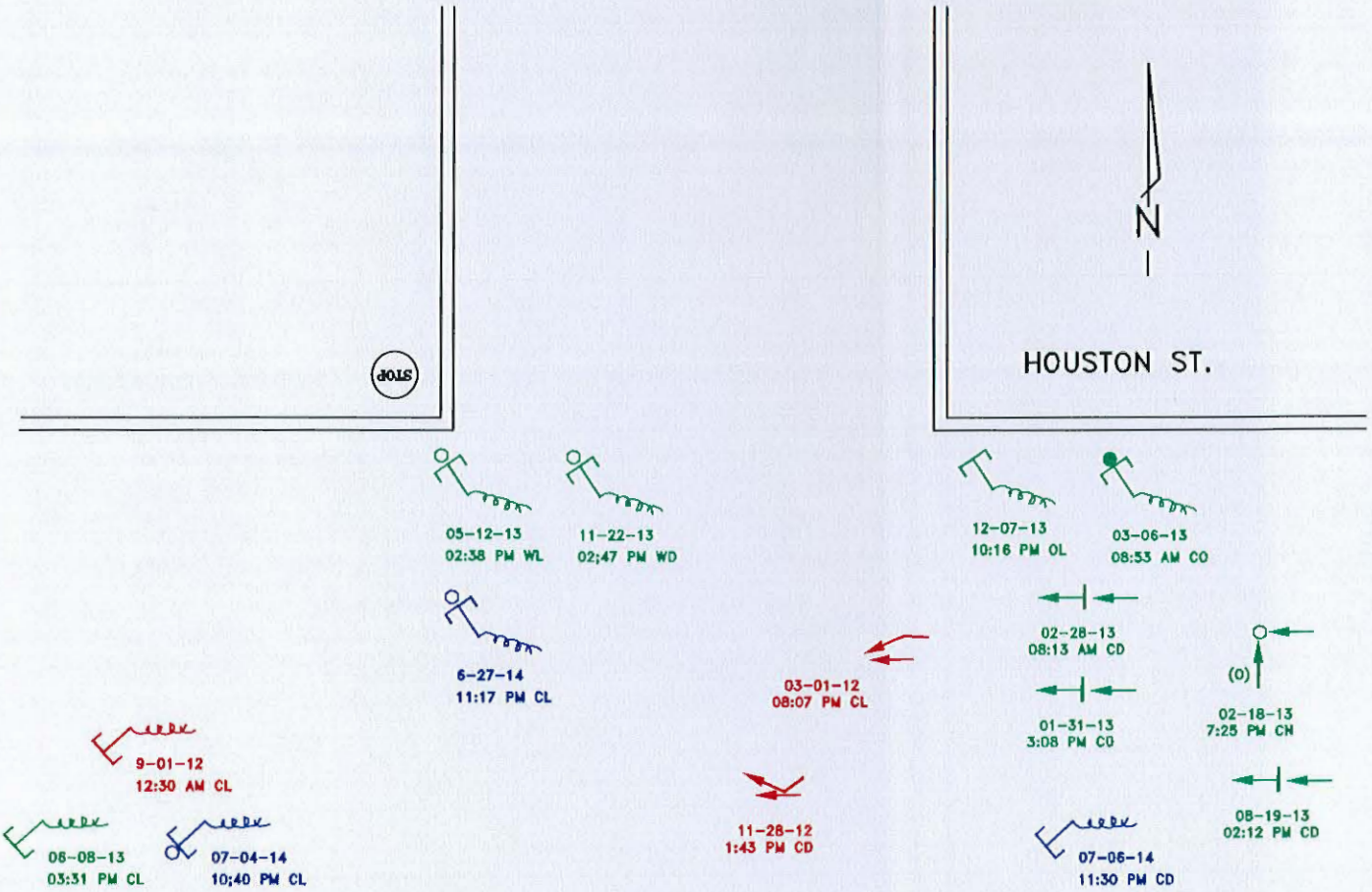
Accident Reports
Houston Street near San Leonardo
From 08/13 thru 10/15

No.	Accident ID	DATE	Time	Day	On Road	From Road	Contributing Factor
1	13025928	8/19/2013	2:12		Houston	San Leonardo	Unsafe Speed; Driver Inattention
2	13036691	11/22/2013	14:47		Houston	San Leonardo	Unsafe Speed;
3	13037246	11/29/2013	3:19		Houston	San Leonardo	Failed to control Speed
4	13038275	12/7/2013	22:16		Houston	San Leonardo	Failed to control Speed
5	14019325	6/27/2014	23:17		Houston	San Leonardo	Failed to control Speed
6	14020062	7/4/2014	22:40		Houston	San Leonardo	Unsafe Speed; Driver Inattention
7	14020228	7/6/2014	23:30		Houston	San Leonardo	Failed to control Speed
8	15000289	1/4/2015	1:54		Houston	San Leonardo	Failed to control Speed; Faulty Evasive Action
9	15004337	2/12/2015	3:26		Houston	San Leonardo	Faulty Evasive Action
10	15005087	2/19/2015	0:23		Houston	San Leonardo	Failed to control Speed
11	15005555	2/23/2015	2:46		Houston	San Leonardo	Failed to control Speed; Wet Weather
12	15005562	2/23/2015	7:21		Houston	San Leonardo	Failed to control Speed; Disregard Warning Sign at Construction
13	15011197	4/16/2015	7:43		Houston	San Leonardo	Failed to control Speed
14	15024609	8/18/2015	14:17		Houston	San Leonardo	Driver Inattention
15	15030129	10/11/2015	23:47		Houston	San Leonardo	Failed to control Speed
16	15031478	10/24/2015	6:48		Houston	San Leonardo	Failed to control speed

COLLISION DIAGRAM

LOCATION: Houston St. / San Leonardo Ave.

TIME PERIOD: 1-01-12 TO 12-31-14



ACCIDENT SUMMARY							
YEAR					2012	2013	2014
FATAL					0	1	0
INJURY					0	3	2
PDO					3	5	1
TOTAL					3	9	3

STOP

SAN LEONARDO AVE.

ROAD SURFACE

C	DRY, CLEAR
W	WET
S	SNOWY, ICY
O	OTHER

LIGHTING

D	DAYLIGHT
N	DARK, NO LIGHTS
L	DARK WITH STREET LIGHT

City of Laredo
Traffic Safety Division

PREPARED BY: Oscar Canales
APPROVED BY: Roberto Murillo, P.T.O.E.

DATE: 1-12-15 Figure 4

→	Automobile, Pick-Up
(T) →	Truck
(B) →	Bus
(M) →	Motorcycle
(O) →	Other

Texas Peace Officer's Crash Report – Code Sheet

Numbered Fields on the CR-3 Refer to the Numbered Lists on this Code Sheet. Each list includes the codes that may be entered on the form and the description of each code.

Law Enforcement and TxDOT Use ONLY.
Form CR-3CS 1/1/2010

IDENTIFICATION AND LOCATION

1. Roadway System

IH = Interstate
US = US Highway
SH = State Highway
FM = Farm to Market
RR = Ranch Road
RM = Ranch to Market
BI = Business Interstate
BU = Business US
BS = Business State
BF = Business FM
SL = State Loop
TL = Toll Road
AL = Alternate
SP = Spur
CR = County Road
PR = Park Road
PV = Private Road
RC = Recreational Road
LR = Local Road/Street (Street, Road, Ave., Blvd., Pl., Trl., Beach, Alley, Boat Ramp, etc.)

2. Roadway Part

1 = Main/Proper Lane
2 = Service/Frontage Road
3 = Entrance/On Ramp
4 = Exit/Off Ramp
5 = Connector/Flyover
98 = Other (Explain in Narrative)

3. Street Prefix, Direction from Int. or Ref. Marker

N = North
NE = Northeast
E = East
SE = Southeast
S = South
SW = Southwest
W = West
NW = Northwest

4. Street Suffix

RD = Road
ST = Street
DR = Drive
AVE = Avenue
BLVD = Boulevard
PKWY = Parkway
LN = Lane
FWY = Freeway
HWY = Highway
WAY = Way
TRL = Trail
LOOP = Loop
EXPY = Expressway
CT = Court
CIR = Circle
PL = Place
PARK = Park
CV = Cove

VEHICLE, DRIVER, AND PERSONS

5. Unit Description

1 = Motor Vehicle
2 = Train
3 = Pedalcyclist
4 = Pedestrian
5 = Motorized Conveyance
6 = Towed/Trailer
7 = Non-Contact
98 = Other (Explain in Narrative)

6. Vehicle Color

BGE = Beige
BLK = Black
BLU = Blue
BRZ = Bronze
BRO = Brown
CAM = Camouflage
CPR = Copper
GLD = Gold
GRY = Gray
GRN = Green
MAR = Maroon
MUL = Multicolored
ONG = Orange
PNK = Pink
PLE = Purple
RED = Red
SIL = Silver
TAN = Tan
TEA = Teal (green)
TRQ = Turquoise (blue)
WHI = White
YEL = Yellow
98 = Other (Explain in Narrative)
99 = Unknown

7. Body Style

P2 = Passenger Car, 2-Door
P4 = Passenger Car, 4-Door
PK = Pickup
AM = Ambulance
BU = Bus
SB = Yellow School Bus
FE = Farm Equipment
FT = Fire Truck
MC = Motorcycle
SV = Sport Utility Vehicle
PC = Police Car/Truck
PM = Police Motorcycle
TL = Trailer, Semi-Trailer, or Pole Trailer
TR = Truck
TT = Truck Tractor
VN = Van
98 = Other (Explain in Narrative)
99 = Unknown

8. Driver License/ID Type

1 = Driver License
2 = Commercial Driver Lic.
3 = Occupational
4 = ID Card
5 = Unlicensed
98 = Other
99 = Unknown

9. Driver License Class

A = Class A
AM = Class A and M
B = Class B
BM = Class B and M
C = Class C
CM = Class C and M
M = Class M
5 = Unlicensed
98 = Other/Out of State
99 = Unknown

10. Commercial Driver License Endorsements

H = Hazardous Materials
N = Tank Vehicles
P = Passengers
S = School Bus
T = Double/Triple Trailer
X = Tank Vehicle with HazMat
5 = Unlicensed
96 = None
98 = Other/Out of State
99 = Unknown

11. Driver License Restrictions

A = With Corrective Lenses
B = LOFS Age 21 or Over
C = Daytime Only
D = Not to Exceed 45 MPH
E = No Expressway Driving
F = Must Hold Valid Learner Lic. to MM/DD/YY
G = TRC 545.424 Applies until MM/DD/YY
H = Vehicle Not to Exceed 26,000 lbs GVWR
I = Motorcycle Not to Exceed 250 CC
J = Licensed Motorcycle Operator Age 21 or Over in Sight
K = Moped
L = Vehicle w/o Air Brakes – Applies to Vehicles Requiring CDL
M = CDL Intrastate Commerce Only
N = Ignition Interlock Required
O = Occ./Essent. Need DL-No CMV-See Court Order
P = Stated on License
Q = LOFS 21 or Over Vehicle Above Class B
R = LOFS 21 or Over Vehicle Above Class C
S = Outside Rear View Mirror or Hearing Aid
T = Automatic Transmission
U = Applicable Prosthetic Devices
V = Applicable Vehicle Devices
W = Power Steering
X = Vehicle Not to Exceed Class C
Y = Valid TX Vision or Limb Waiver Req'd.
Z = Valid Fed. Vision or Limb Waiver Req'd.
5 = Unlicensed
96 = None
98 = Other/Out of State
99 = Unknown

12. Person Type

1 = Driver
2 = Passenger/Occupant
3 = Pedalcyclist
4 = Pedestrian
5 = Driver of Motorcycle Type Vehicle
6 = Passenger/Occupant on Motorcycle Type Vehicle
98 = Other (Explain in Narrative)
99 = Unknown

13. Seat Position

1 = Front Left
2 = Front Center
3 = Front Right
4 = Second Seat Left
5 = Second Seat Center
6 = Second Seat Right
7 = Third Seat Left
8 = Third Seat Center
9 = Third Seat Right
10 = Cargo Area
11 = Outside Vehicle
13 = Other in Vehicle
14 = Passenger in Bus
16 = Pedestrian, Pedalcyclist, or Motorized Conveyance
98 = Other (Explain in Narrative)
99 = Unknown

14. Injury Severity

A = Incapacitating Injury
B = Non-Incapacitating Injury
C = Possible Injury
K = Killed
N = Not Injured
99 = Unknown

15. Ethnicity

W = White
B = Black
H = Hispanic
A = Asian
I = Amer. Indian/Alaskan Native
98 = Other
99 = Unknown

16. Sex

1 = Male
2 = Female
99 = Unknown

17. Ejected

1 = No
2 = Yes
3 = Yes, Partial
97 = Not Applicable
99 = Unknown

18. Restraint Used

1 = Shoulder and Lap Belt
2 = Shoulder Belt Only
3 = Lap Belt Only
4 = Child Seat, Facing Forward
5 = Child Seat, Facing Rear
6 = Child Seat, Unknown
7 = Child Booster Seat
96 = None
97 = Not Applicable
98 = Other (Explain in Narrative)
99 = Unknown

19. Airbag

1 = Not Deployed
2 = Deployed, Front
3 = Deployed, Side
4 = Deployed, Rear
5 = Deployed, Multiple
97 = Not Applicable
99 = Unknown

20. Helmet Use

1 = Not Worn
2 = Worn, Damaged
3 = Worn, Not Damaged
4 = Worn, Unk. Damage
97 = Not Applicable
99 = Unknown if Worn

21. Solicitation

Y = Solicit
N = No Solicit

22. Alcohol Specimen Type

1 = Breath
2 = Blood
3 = Urine
4 = Refused
96 = None
98 = Other (Explain in Narrative)

23. Drug Specimen Type

2 = Blood
3 = Urine
4 = Refused
96 = None
98 = Other (Explain in Narrative)

24. Drug Test Result

1 = Positive
2 = Negative
97 = Not Applicable
99 = Unknown

25. Drug Category

2 = CNS Depressants
3 = CNS Stimulants
4 = Hallucinogens
6 = Narcotic Analgesics
7 = Inhalants
8 = Cannabis
10 = Disassociative Anesthetics
11 = Multiple Drugs (Explain in Narrative)
97 = Not Applicable
98 = Other Drugs (Explain in Narrative)
99 = Unknown

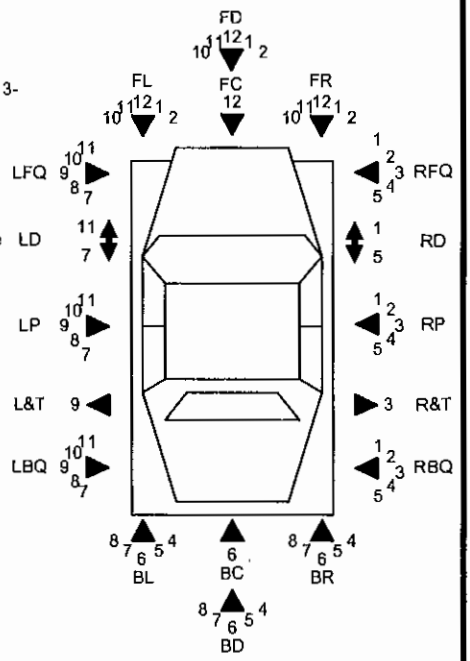
26. Financial Responsibility Type

1 = Liability Insurance Policy
2 = Proof of Liability Insurance
3 = Insurance Binder
4 = Surety Bond
5 = Certificate of Deposit with Comptroller
6 = Certificate of Deposit with County Judge
7 = Certificate of Self-Insurance

27. Vehicle Damage Rating

In most cases, enter in the format XX-ABC-Y, where
XX is the Direction of Force (1-12),
ABC is the Damage Description 2- or 3-letter code),
and Y is the Damage Severity (0-7).

In special cases, use:
VB-1 = vehicle burned, NOT due to collision
VB-7 = vehicle catches fire due to the collision
TP-0 = top damage only
VX-0 = undercarriage damage only
MC-1 = motorcycle, moped, scooter, etc.
NA = Not Applicable (Farm Tractor, etc.)



Numbered Fields on the CR-3 Refer to the Numbered Lists on this Code Sheet. Each list includes the codes that may be entered on the form and the description of each code.

COMMERCIAL MOTOR VEHICLE

28. Vehicle Operation
1 = Interstate Commerce
2 = Intrastate Commerce
3 = Not in Commerce
4 = Government
5 = Personal

29. Carrier ID Type
1 = US DOT
2 = TxDOT
3 = ICC/MC
96 = None
98 = Other (Explain in Narrative)

30. Roadway Access
1 = Full Access Control
2 = Partial Access Control
3 = No Access Control

31. Vehicle Type
1 = Passenger Car
2 = Light Truck
3 = Bus (9-15)
4 = Bus (>15)
5 = Single Unit Truck 2 Axles 6 Tires
6 = Single Unit Truck 3 or More Axles
7 = Truck Trailer
8 = Truck Tractor (Bobtail)
9 = Tractor/Semi Trailer
10 = Tractor/Double Trailer
11 = Tractor/Triple Trailer
98 = Other (Explain in Narrative)
99 = Unknown Heavy Truck

32. Hazardous Material Class Number
1 = Explosives
2 = Gases
3 = Flammable Liquids
4 = Flammable Solids
5 = Oxidizers and Organic Peroxides
6 = Toxic Materials and Infectious Substances
7 = Radioactive Materials
8 = Corrosive Materials
9 = Miscellaneous Dangerous Goods

33. Cargo Body Style
1 = Bus (9-15)
2 = Bus (>15)
3 = Van/Enclosed Box
4 = Cargo Tank
5 = Flatbed
6 = Dump
7 = Concrete Mixer
8 = Auto Transporter
9 = Garbage Refuse
10 = Grain Chips Gravel
11 = Pole
13 = Intermodal
14 = Logging
15 = Vehicle Towing Another Vehicle
97 = Not Applicable
98 = Other (Explain in Narrative)

34. Trailer Type
1 = Full Trailer
2 = Semi-Trailer
3 = Pole Trailer

FACTORS AND CONDITIONS

35. Sequence of Events
1 = Non-Collision: Ran Off Road
2 = Non-Collision: Jackknife
3 = Non-Collision: Overturn Rollover
4 = Non-Collision: Downhill Runaway
5 = Non-Collision: Cargo Loss Or Shift
6 = Non-Collision: Explosion Or Fire
7 = Non-Collision: Separation of Units
8 = Non-Collision: Cross Median/Centerline
9 = Non-Collision: Equipment Failure
10 = Non-Collision: Other
11 = Non-Collision: Unknown
12 = Collision Involving Pedestrian
13 = Collision Involving Motor Vehicle in Transport
14 = Collision Involving Parked Motor Vehicle
15 = Collision Involving Train
16 = Collision Involving Pedalcycle
17 = Collision Involving Animal
18 = Collision Involving Fixed Object
19 = Collision With Work Zone Maintenance Equipment
20 = Collision With Other Movable Object
21 = Collision With Unknown Movable Object
98 = Other (Explain in Narrative)

36. Factors and Conditions
1 = Animal on Road - Domestic
2 = Animal on Road - Wild
3 = Backed without Safety
4 = Changed Lane when Unsafe
14 = Disabled in Traffic Lane
15 = Disregard Stop and Go Signal
16 = Disregard Stop Sign or Light
17 = Oisregard Turn Marks at Intersection
18 = Disregard Warning Sign at Construction
19 = Distraction in Vehicle
20 = Driver Inattention
21 = Drove Without Headlights
22 = Failed to Control Speed
23 = Failed to Drive in Single Lane
24 = Failed to Give Half of Roadway
25 = Failed to Heed Warning Sign
26 = Failed to Pass to Left Safely
27 = Failed to Pass to Right Safely
28 = Failed to Signal or Gave Wrong Signal
29 = Failed to Stop at Proper Place
30 = Failed to Stop for School Bus
31 = Failed to Stop for Train
32 = Failed to Yield ROW – Emergency Vehicle
33 = Failed to Yield ROW – Open Intersection
34 = Failed to Yield ROW – Private Drive
35 = Failed to Yield ROW – Stop Sign
36 = Failed to Yield ROW – To Pedestrian
37 = Failed to Yield ROW – Turning Left
38 = Failed to Yield ROW – Turn on Red
39 = Failed to Yield ROW – Yield Sign
40 = Fatigued or Asleep
41 = Faulty Evasive Action
42 = Fire in Vehicle
43 = Fleeing or Evading Police
44 = Followed Too Closely
45 = Had Been Drinking
46 = Handicapped Driver (Explain in Narrative)
47 = Ill (Explain in Narrative)
48 = Impaired Visibility (Explain in Narrative)
49 = Improper Start from Parked Position
50 = Load Not Secured
51 = Opened Door Into Traffic Lane
52 = Oversized Vehicle or Load
53 = Overtake and Pass Insufficient Clearance
54 = Parked and Failed to Set Brakes
55 = Parked in Traffic Lane
56 = Parked without Lights
57 = Passed in No Passing Lane
58 = Passed on Right Shoulder
59 = Pedestrian FTYROW to Vehicle
60 = Unsafe Speed
61 = Speeding – (Over Limit)
62 = Taking Medication (Explain in Narrative)
63 = Turned Improperly – Cut Corner on Left
64 = Turned Improperly – Wide Right
65 = Turned Improperly – Wrong Lane
66 = Turned when Unsafe
67 = Under Influence – Alcohol
68 = Under Influence – Drug
69 = Wrong Side – Approach or Intersection
70 = Wrong Side – Not Passing
71 = Wrong Way – One Way Road
72 = Cell/Mobile Phone Use
73 = Road Rage
98 = Other (Explain in Narrative)

37. Vehicle Defects
5 = Defective or No Headlamps
6 = Defective or No Stop Lamps
7 = Defective or No Tail Lamps
8 = Defective or No Turn Signal Lamps
9 = Defective or No Trailer Brakes
10 = Defective or No Vehicle Brakes
11 = Defective Steering Mechanism
12 = Defective or Slick Tires
13 = Defective Trailer Hitch
98 = Other (Explain in Narrative)

38. Weather Condition
1 = Clear
2 = Cloudy
3 = Rain
4 = Sleet/Hail
5 = Snow
6 = Fog
7 = Blowing Sand/Snow
8 = Severe Crosswinds
98 = Other (Explain in Narrative)
99 = Unknown

39. Light Condition
1 = Daylight
2 = Dark, Not Lighted
3 = Dark, Lighted
4 = Dark, Unknown Lighting
5 = Dawn
6 = Dusk
98 = Other (Explain in Narrative)
99 = Unknown

40. Entering Roads
2 = Three Entering Roads – T
3 = Three Entering Roads – Y
4 = Four Entering Roads
5 = Five Entering Roads
6 = Six Entering Roads
7 = Traffic Circle
8 = Cloverleaf
97 = Not Applicable
98 = Other (Explain in Narrative)

41. Roadway Type
1 = Two-Way, Not Divided
2 = Two-Way, Divided, Unprotected Median
3 = Two-Way, Divided, Protected Median
4 = One-Way
98 = Other (Explain in Narrative)

42. Roadway Alignment
1 = Straight, Level
2 = Straight, Grade
3 = Straight, Hillcrest
4 = Curve, Level
5 = Curve, Grade
6 = Curve, Hillcrest
98 = Other (Explain in Narrative)
99 = Unknown

43. Surface Condition
1 = Dry
2 = Wet
3 = Standing Water
4 = Snow
5 = Slush
6 = Ice
7 = Sand, Mud, Dirt
98 = Other (Explain in Narrative)
99 = Unknown

44. Traffic Control
2 = Inoperative (Explain in Narrative)
3 = Officer
4 = Flagman
5 = Signal Light
6 = Flashing Red Light
7 = Flashing Yellow Light
8 = Stop Sign
9 = Yield Sign
10 = Warning Sign
11 = Center Stripe/Divider
12 = No Passing Zone
13 = RR Gate/Signal
15 = Crosswalk
16 = Bike Lane
17 = Marked Lanes
18 = Signal Light With Red Light Running Camera
96 = None
98 = Other (Explain in Narrative)

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 004 | Total Num. Prsns. 002 | TxDOT Crash ID

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 08/19/2013 | ★Crash Time (24HRMM): 0212 | Case ID: 13-025928 | Local Use:

★County Name: WEBB | ★City Name: LAREDO | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num.: | 2 Rdwy Part: 1 | Block Num.: 300 | 3 Street Prefix: | ★Street Name: HOUSTON | 4 Street Suffix: ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit: 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc.:

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

At Int. ☐ Yes ■ No | 1 Rdwy. Sys.: LR | Hwy. Num.: | 2 Rdwy Part: 1 | Block Num.: 800 | 3 Street Prefix: | Street Name: SAN LEONARDO | 4 Street Suffix:

Distance from Int. or Ref. Marker: 147 | ■ FT ☐ MI | 3 Dir. from Int. or Ref. Marker: E | Reference Marker: | Street Desc.: | RRX Num.:

VEHICLE, DRIVER, & PERSONS

Unit Num. 1 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: DY3N384 | VIN: 1ZVHT82HX652472 69

Veh. Year: 2006 | 6 Veh. Color: BLK | Veh. Make: FORD | Veh. Model: MUSTANG | 7 Body Style: P2 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 1 | DL/ID State: TX | DL/ID Num.: 29263530 | 9 DL Class: C | 10 CDL End.: 96 | 11 DL Rest.: 96 | DOB (MM/DD/YYYY): 02/11/1994

Address (Street, City, State, ZIP): 2504 N NEW YORK AVE, LAREDO, TX 78041

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	RENDON III, FERMIN	N	19	H	1	1	1	3	97	N	96		96	97	97
2	2	3	GARCIA, JASMINE	N	18	H	2	1	1	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

■ Owner ☐ Lessee | Owner/Lessee Name & Address: RENDON, MARIA, E 2504 N NEW YORK AVE, LAREDO, TX 78041

Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 1 | Fin. Resp. Name: AFFIRMATIVE INS | Fin. Resp. Num.: 8003250000

Fin. Resp. Phone Num.: (185) 582-59052 | 27 Vehicle Damage Rating 1: 12-FD-3 | 27 Vehicle Damage Rating 2: 09-LFQ-3 | Vehicle Inventoried ■ Yes ☐ No

Towed By: READY TOWING | Towed To: 2920 W, ANNA AVE

Unit Num. 2 | 5 Unit Desc. 1 | ■ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: DY3P306 | VIN: 2G2FS22KXV2209657

Veh. Year: 1997 | 6 Veh. Color: WHI | Veh. Make: PONTIAC | Veh. Model: SUNBIRD | 7 Body Style: P2 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

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

Address (Street, City, State, ZIP):

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
													Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

■ Owner ☐ Lessee | Owner/Lessee Name & Address: GOMEZ, STEPHANIE 311 HOUSTON ST, LAREDO, TX 78041

Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 1 | Fin. Resp. Name: LYNDON SOUTHERN | Fin. Resp. Num.: PR7358991-00

Fin. Resp. Phone Num.: (888) 224-7740 | 27 Vehicle Damage Rating 1: 06-BR-5 | 27 Vehicle Damage Rating 2: 03-RFQ-3 | Vehicle Inventoried ☐ Yes ■ No

Towed By: STAYED AT SCENE | Towed To:

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-025928** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

Unit Num.	☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY	28 Veh. Oper.	29 Carrier ID Type	Carrier ID Num.	
Carrier's Corp. Name		Carrier's Primary Addr.			
30 Rdwy. Access	31 Veh. Type	☐ RGVW ☐ GVWR	HazMat Released ☐ Yes ☐ No	32 HazMat Class Num.	HazMat ID Num.
32 HazMat Class Num.	HazMat ID Num.				
33 Cargo Body Style	Trailer 1	Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type	Trailer 2
Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type			
Sequence Of Events	35 Seq. 1	35 Seq. 2	35 Seq. 3	35 Seq. 4	Total Num. Axles
Total Num. Tires					

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		Environmental and Roadway Conditions 38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1				60	20												
2											1	3	2	4	1	1	96

NARRATIVE & DIAGRAM

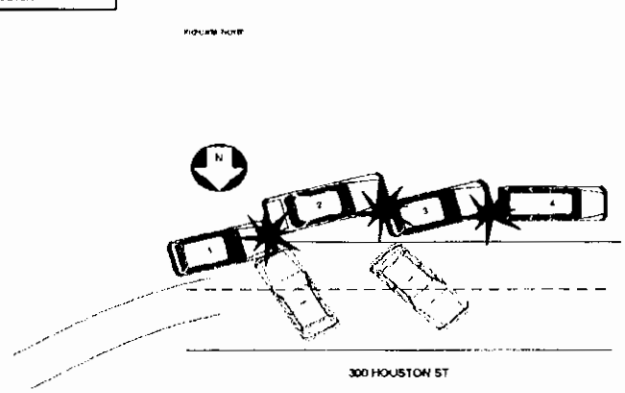
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

UNIT#1, WHILE TRAVELLING WESTBOUND ON THE RIGHT SIDE LANE AT THE 200 BLOCK OF HOUSTON ST,CLAIMED THAT A VEHICLE CUT IN FRONT OF HIM INTO HIS LANE AND TO AVOID HITTING THE VEHICLE, HE TRIED TO CHANGE TO THE LEFT LANE BUT HE LOST CONTROL OF HIS VEHICLE AND COLLIDED WITH UNIT#2 WHO IN TURN WAS PUSHED FORWARD AND CRASHED INTO UNIT#3, WHO AFTER THE IMPACT WAS ALSO PUSHED FORWARD AND CRASHED INTO UNIT#4. UNITS#2,3,4, WERE PROPERLY PARKED AT THE 300 BLOCK OF HOUSTON ST. AREA OF IMPACT-4FT NORTH AND 147FT WEST FROM THE SOUTHWEST CORNER. NO CITATION WAS ISSUED.

* * E N D * *

Indicate North

Field Diagram - Not to Scale



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 0212	How Notified **MCT DISPATCHED**	Time Arrived (24HRMM) 0216	Report Date (MM/DD/YYYY) 08/19/2013
Invest. Comp. ☑ Yes ☐ No	Investigator Name (Printed) **REYES, ESTEBAN A.**		ID Num. **2476**
ORI Num. TX2401010	*Agency **LAREDO POLICE DEPARTMENT**		District/ Area 07

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 004 | Total Num. Prsns. 002 | TxDOT Crash ID

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY) 08/19/2013 | ★Crash Time (24HRMM) 0212 | Case ID 13-025928 | Local Use

★County Name **WEBB** | ★City Name **LAREDO** | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys. **LR** | ★Hwy. Num. | 2 Rdwy Part **1** | Block Num. **300** | 3 Street Prefix | ★Street Name **HOUSTON** | 4 Street Suffix **ST**

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/ Toll Lane | Speed Limit **30** | Const. Zone ☐ Yes ☑ No | Workers Present ☐ Yes ☑ No | Street Desc.

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

At Int. ☐ Yes ☑ No | 1 Rdwy. Sys. **LR** | Hwy. Num. | 2 Rdwy Part **1** | Block Num **800** | 3 Street Prefix | Street Name **SAN LEONARDO** | 4 Street Suffix

Distance from Int. or Ref. Marker **147** | ☑ FT ☐ MI | 3 Dir. from Int. or Ref. Marker **E** | Reference Marker | Street Desc. | RRX Num.

VEHICLE, DRIVER, & PERSONS

Unit Num. **3** | 5 Unit Desc. **1** | ☑ Parked Vehicle | ☐ Hit and Run | LP State **TX** | LP Num. **DB5LO15** | VIN **KMHJF35F3YU958776**

Veh. Year **2000** | 6 Veh. Color **GRY** | Veh. Make **HYUNDAI** | Veh. Model **ELANTRA** | 7 Body Style **P4** | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

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

Address (Street, City, State, ZIP)

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

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

☑ Owner ☐ Lessee | Owner/Lessee Name & Address **GOMEZ, STEPHANIE 311 HOUSTON ST, LAREDO, TX 78041**

Proof of Fin. Resp ☑ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type **1** | Fin. Resp. Name **LYNDON SOUTHERN** | Fin. Resp. Num. **PR7358991-00**

Fin. Resp. Phone Num. **(888) 224-7740** | 27 Vehicle Damage Rating 1 **06-BD-3** | 27 Vehicle Damage Rating 2 **03-FL-2** | Vehicle Inventoried ☐ Yes ☑ No

Towed By **STAYED AT SCENE** | Towed To

VEHICLE, DRIVER, & PERSONS

Unit Num. **4** | 5 Unit Desc. **1** | ☑ Parked Vehicle | ☐ Hit and Run | LP State **TX** | LP Num. **58PLX8** | VIN **1GNCS18W2WK255131**

Veh. Year **1998** | 6 Veh. Color **BLU** | Veh. Make **CHEVROLET** | Veh. Model **BLAZER** | 7 Body Style **SV** | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

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

Address (Street, City, State, ZIP)

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

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

☑ Owner ☐ Lessee | Owner/Lessee Name & Address **HERNANDEZ, EUSTORGIO, PULIDO 315 HOUSTON ST, LAREDO, TX 78041**

Proof of Fin Resp ☑ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type **1** | Fin. Resp. Name **ALLSTATE INS** | Fin. Resp. Num. **82905280J**

Fin. Resp. Phone Num. **(866) 416-4479** | 27 Vehicle Damage Rating 1 **06-BD-1** | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☑ No

Towed By **STAYED AT SCENE** | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-025928** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

Unit Num.	☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY	28 Veh. Oper.	29 Carrier ID Type	Carrier ID Num.
Carrier's Corp. Name		Carrier's Primary Addr.		

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
3																	
4											1	3	2	4	1	1	96

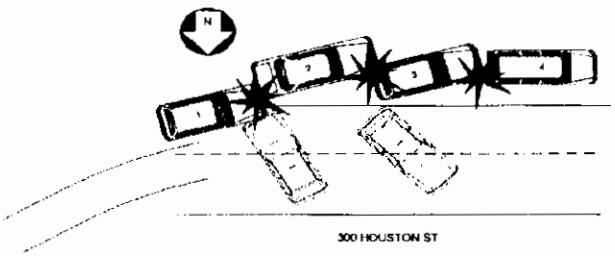
NARRATIVE & DIAGRAM

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

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM)	0212	How Notified	MCT DISPATCHED	Time Arrived (24HRMM)	0216	Report Date (MM/DD/YYYY)	08/19/2013
Invest. Comp.	☒ Yes ☐ No	Investigator Name (Printed)	REYES, ESTEBAN A.			ID Num.	2476
ORI Num.	TX240010 0	*Agency	LAREDO POLICE DEPARTMENT			District/ Area	07

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 1	0 0 1	

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
11/22/2013	1447	13-036691	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	200		HOUSTON	

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

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☒ No	LR		1	900		SAN LEONARDO	

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	DY3N892	1G1AT58H997222732

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2009	BLU	CHEVROLET	COBALT	P4	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	27871779	C	96	96	11/30/1992

Address (Street, City, State, ZIP): 2705 E SAN JOSE ST 80, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	BARRERA, ELAINE, ALEXANDRA	C	20	H	2	1	1	3	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: BARRERA, ELAINE, ALEXANDRA, 2705 E SAN JOSE ST 80, LAREDO, TX 78043

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
☒ Yes ☐ Expired ☐ No ☐ Exempt	2	PRONTO INSURANCE	L-PR7402892-00

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(888) 224-7740	9-LP-3		☐ Yes ☒ No

Towed By	Towed To
FAMILY	

VEHICLE, DRIVER, & PERSONS

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-036691** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
1	1	LAREDO MEDICAL CENTER	RQ 9103		

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	UNSAFE SPEED	2694431

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
WOODEN POLE	AEP	1300 W CALTON RD LAREDO, TX 78040

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	60										3	1	97	4	1	2	17

NARRATIVE & DIAGRAM

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

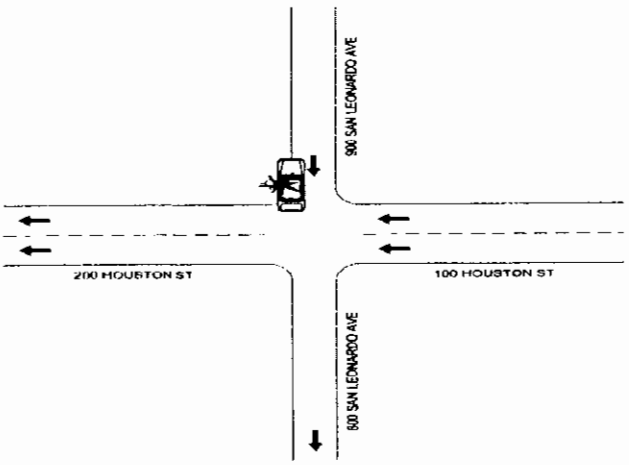
Unit 1 was traveling west bound on the 100 block of Houston St, lost control of her vehicle, and collided into the wooden pole.

A.O.I. - 5` N, 4` W FROM THE NW CORNER OF 200 HOUSTON ST

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1448 | How Notified MCT DISPATCH | Time Arrived (24HRMM) 1452 | Report Date (MM/DD/YYYY) 11/22/2013

Invest. Comp. ☐ Yes ☐ No | Investigator Name (Printed) TOVAR, JUAN M. | ID Num. 5252

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | District/Area 6

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 1	0 0 3	

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
11/29/2013	0319	13-037246	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	800		SAN LEONARDO	AVE

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☒ No	LR		1	200		HOUSTON	

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	Parked Vehicle	Hit and Run	LP State	LP Num.	VIN
1	1			TX	3XDSV	1FAHP3FN4AW184379

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2010	BLU	FORD	FOCUS	P4	☐

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	33670427	C	96	96	03/21/1995

Address (Street, City, State, ZIP) 1902 E STEWART ST, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	TOVAR, FELIPE, ANDRES	N	18	H	1	1	1	1	97	N	96		96	97	97
2	2	3	BARRIENTOS, MYLYNDA, NICOLE	N	18	H	2	1	1	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				
3	2	4	FUENTES III, HERIBERTO	N	16	H	1	1	1	97	97	N					

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: TOVAR, REBECA, 1020 BALTIMORE ST, LAREDO, TX 78040

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
☒ Yes ☐ No ☐ Expired ☐ Exempt	1	LIBERTY COUNTY	ABT29856938940

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 225-2467	2-RFQ-2		☐ Yes ☒ No

Towed By	Towed To
ALDAPE	1902 CONVENT AVE

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	Parked Vehicle	Hit and Run	LP State	LP Num.	VIN

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

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

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
													Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-037246** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	L2694319

DAMAGE

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

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			36 May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			37 May Have Contrib		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22										1	3	97	4	5	1	96

NARRATIVE & DIAGRAM

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

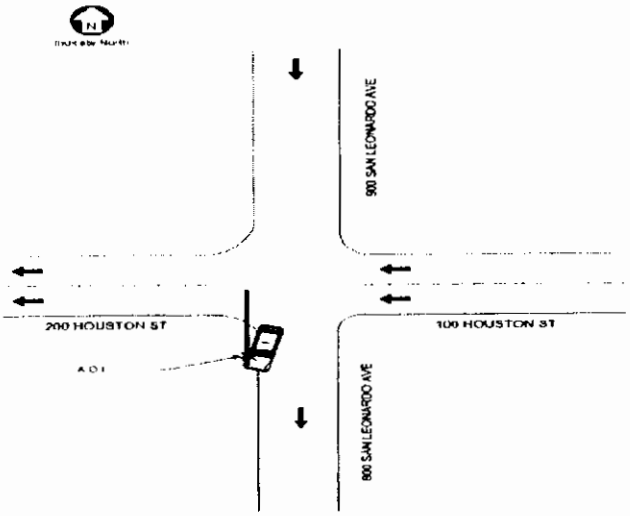
UNIT 1 WAS TRAVELING WESTBOUND, ON THE LEFT LANE OF 100 HOUSTON ST AND APPROACHING INTERSECTION OF SAN LEONARDO AVE.

UNIT 1 ATTEMPTED TO TURN SOUTHBOUND ONTO 800 SAN LEONARDO AVE., FAILED TO CONTROL SPEED AND COLLIDED WITH UTILITY POLE, ON THE SOUTHWEST CORNER OF SAID INTERSECTION.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



INVESTIGATOR

Time Notified (24HRMM) 0319 | How Notified **MCT DISPATCH** | Time Arrived (24HRMM) 0325 | Report Date (MM/DD/YYYY) 11/29/2013

Invest. Comp. ☒ Yes ☐ No | Investigator Name (Printed) **CUELLAR, MARCOS D.** | ID Num. **4813**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | District/Area 6

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 1	0 0 1	

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
12/07/2013	2216	13-038275	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	200		HOUSTON	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc.

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

At Int.	1 Rdwy Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ■ No	LR		1	900		SAN LEONARDO	

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	BST7841	1FAFP42X02F137632

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2002	GRY	FORD	MUSTANG	P2	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
2	TX	35221458	A	X	96	04/07/1991

Address (Street, City, State, ZIP): 514 ESPINO DR, LAREDO, TX 78046

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	ALVAREZ, JULIO, CESAR	N	22	H	1	1	1	97	97	N	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: ALVAREZ, MARIA, ISABEL, 514 ESPINO DR, LAREDO, TX 78046

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
■ Yes ☐ Expired ☐ No ☐ Exempt	1	FRED LOYA	66 306034478

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 554-0595	12-FD-3	3-RP-2	☐ Yes ■ No

Towed By	Towed To
DRIVER	514 ESPINO DR

VEHICLE, DRIVER, & PERSONS

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **13-038275** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	L2694320

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
CHAINLINK FENCE	TALLER MECANICO	208 HOUSTON ST LAREDO, TX 78040
UTILITY POLE	AEP	1500 W CALTON LAREDO, TX 78046

CMV

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

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

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

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

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

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)				
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.	
1	22									

Environmental and Roadway Conditions						
38 Weather Cond.	39 Light Cond	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
2	3	97	4	4	1	10

NARRATIVE & DIAGRAM

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

UNIT 1 WAS TRAVELING WESTBOUND ON 100 HOUSTON ST. AND APPROACHING INTERSECTION OF SAN LEONARDO AVE.

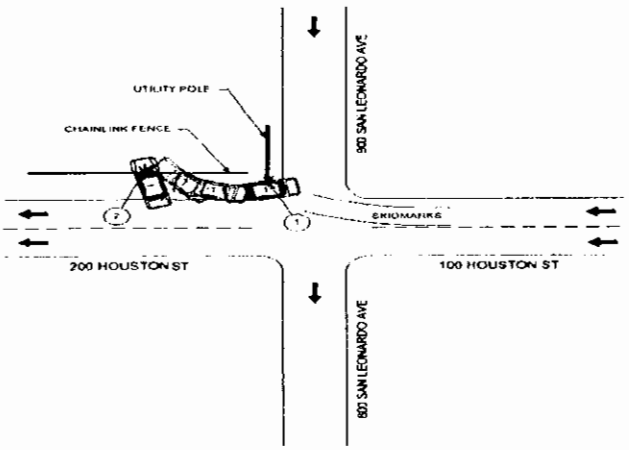
UNIT 1 LOST CONTROL OF VEHICLE, FAILED TO CONTROL SPEED AND COLLIDED WITH UTILITY POLE AT THE NORTHWEST CORNER OF SAN LEONARDO AVE. AND HOUSTON ST.

UNIT 1 CONTINUED TO TRAVEL AND COLLIDED WITH CHAINLINK FENCE BY HOUSTON ST.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



INVESTIGATOR

Time Notified (24HRMM)	How Notified	Time Arrived (24HRMM)	Report Date (MM/DD/YYYY)
2219	MCT DISPATCH	2221	12/07/2013

Invest. Comp.	Investigator Name (Printed)	ID Num.
☑ Yes ☐ No	CUELLAR, MARCOS D.	4813

ORI Num.	*Agency	District/ Area
TX2401000	LAREDO POLICE DEPARTMENT	6

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 1	0 0 1	

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
06/27/2014	2317	14-019325	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	100		HOUSTON	

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ■ No	LR		1	900		SAN LEONARDO	AVE

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	3CS297	JKBZXJC1X6A032654

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2006	MAR	KAWASAKI	NINJA	MC	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
4	TX	28718217	5	5	5	10/10/1991

Address (Street, City, State, ZIP): 604 SAN FRANCISCO AVE, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	5	1	MAGALLANES, ERNESTO, A	B	22	H	1	2	97	97	1	Y	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: MILLER, JAIKE, 4801 MIMS, LAREDO, TX 78043

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

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
	MC-1		☐ Yes ■ No

Towed By	Towed To
LAREDO WRECKER	2920 E ANNA

VEHICLE, DRIVER, & PERSONS

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **14-019325** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
1	1	LAREDO MEDICAL CENTER	RQ 9101		

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	L2712488
1	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	L2712488
1	1	FAILED TO MAINTAIN FINANCIAL RESPONSIBILITY/NO LIABILITY INS	L2712488

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
LIGHT POLE-CHIPPED	AEP	1500 W CALTON LAREDO, TX 78046
CHAIN LINK POST- BENT	JOSE FLORES	204 HOUSTON ST LAREDO, TX 78040

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing		May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing		May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22								1	3	4	4	1	1	11

NARRATIVE & DIAGRAM

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

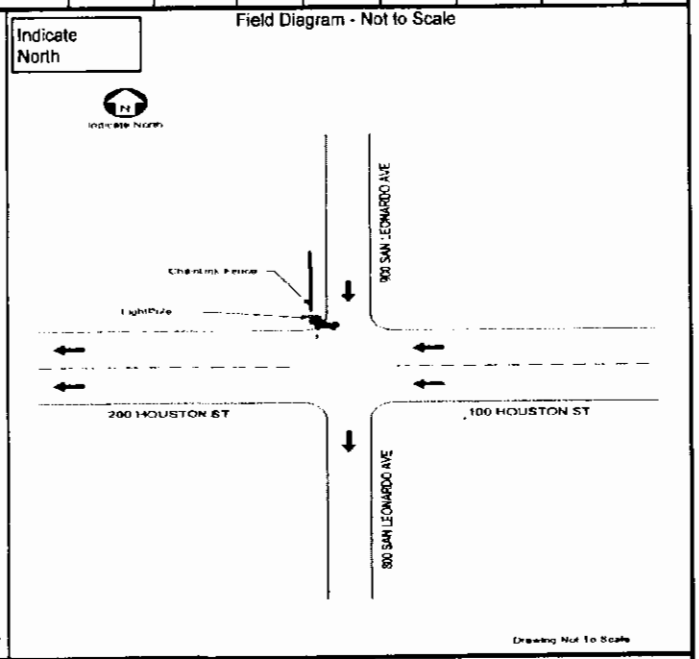
Additional Charge:
Unit#: 1, Person#: 1, Charge: OPERATE UNREGISTERED MOTOR VEHICLE

Unit #1 was traveling west at the 100 blk of Houston St. Unit #1 failed to control speed (navigate) curve on roadway and collided with a fixed object. The AEP Light Pole and the End Post of the ChainLink Fence.

diagram not to scale

* * E N D * *

Field Diagram - Not to Scale



INVESTIGATOR

Time Notified (24HRMM) 2321 | How Notified RADIO | Time Arrived (24HRMM) 2321 | Report Date (MM/DD/YYYY) 06/27/2014

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) BENAVIDES, JORGE A. | ID Num. 3016

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | District/Area 6

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 1	0 0 1	

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2010)
Mail to: Texas Department of Transportation, Crash Records, P.O. Box 149349, Austin, TX 78714. Questions? Call (512) 486-5760
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
07/04/2014	2240	14-020062	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	200		HOUSTON	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/ Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☒ No	LR		1	900		SAN LEONARDO	

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	4ZB899	JYARN23E4AA087188

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2010	WHI	YAMAHA	MC	MC	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	34611583	C	96	96	09/15/1990

Address (Street, City, State, ZIP): 1319 SAN FRANCISCO, LAREDO, TX 78041

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	5	1	GARCIA JR, ALFONSO, JAVIER	B	23	H	1	2	97	97	2	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: MATA, JESUS 452425 PO BOX, LAREDO, TX 78045

Proof of Fin. Resp	26 Fin Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
☐ Yes ☐ Expired ☒ No ☐ Exempt	1	DAIRY LAND	436800911

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(956) 729-1010	3 - MC - 3		☐ Yes ☒ No

Towed By	Towed To

VEHICLE, DRIVER, & PERSONS

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **14-020062** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
1	1	LAREDO MEDICAL CENTER	RQ 9101		

CHARGES

Unit Num	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	2704435
1	1	NO MOTOR CYCLE ENDORESEMENT	2704435
1	1	FAILED TO DISPLAY LIABILITY INS	2704435

DAMAGE

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

CMV

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

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

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

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

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

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing		May Have Contrib.	37 Vehicle Defects (Investigator's Opinion) Contributing		May Have Contrib.	Environmental and Roadway Conditions 38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22	60					1	3	97	1	4	1	96

NARRATIVE & DIAGRAM

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

Unit #1 was driving on the 200 Block of Houston, when he failed to control speed and collided with the curve/sidewalk. Unit #1 ended up stopping by the 300 block of Houston.

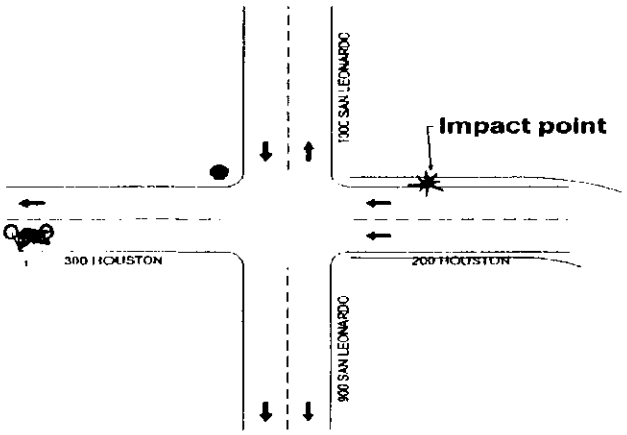
APOI from NE Corner of Houston and San Leonardo is 4 FT S by 16 FT East.

Bike resting location is about 100 FT West by 20 FT South.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 2041 | How Notified MCT/DISPATCH | Time Arrived (24HRMM) 2045 | Report Date (MM/DD/YYYY) 07/04/2014

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) PAZ, DAVID A. | ID Num. 7552

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | District/Area

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
002	001	

Texas Department of Transportation

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

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
07/06/2014	2330	14-020228	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	100		HOUSTON	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

At Int.	1 Rdwy. Sys	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☒ No	LR		1	800		SAN LEONARDO	

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

VEHICLE, DRIVER, & PERSONS

Unit 1

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☒ Hit and Run	LP State	LP Num.	VIN
1	1			TX	CS9L698	JM1BK32336154463

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2006	MAR	MAZDA	3	P4	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
99			99	99	99	

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	UNKNOWN	N		H	1	97	1	1	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: SALDIVAR, ELIZABETH, 2007 DORADO AVE, LAREDO, TX 78046

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
☒ Yes ☐ No ☐ Expired ☐ Exempt	1	LYNDON SOUTHER INSURANCE	PR8555392-01

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(888) 224-7740	12-FD-3	11-FL-3	☐ Yes ☒ No

Towed By	Towed To
DRIVER	DRIVEN AWAY

Unit 2

Unit Num.	5 Unit Desc.	☒ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
2	1			TX	81SRR1	2GTDC14H6D1522852

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
1983	BLU	GENERAL MOTORS CORP	1500	PK	

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

Address (Street, City, State, ZIP)

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

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: RODRIGUEZ DE GUERRERO, GLORIA, 813 SAN LEONARDO AVE, LAREDO, TX 78040

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

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
	4-RP-3		☐ Yes ☒ No

Towed By	Towed To
PARKED	PARKED AT HOME

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2010

Case ID **14-020228** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
FENCE	**GLORIA RODRIGUEZ DE GUERRERO**	**813 SAN LEONARDO AVE LAREDO, TX 78040**
VEHICLE	**GLORIA RODRIGUEZ DE GUERRERO**	**813 SAN LEONARDO AVE LAREDO, TX 78040**

CMV

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

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

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

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

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

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)					Environmental and Roadway Conditions						
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22																
2											1	1	2	4	1	1	17

NARRATIVE & DIAGRAM

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

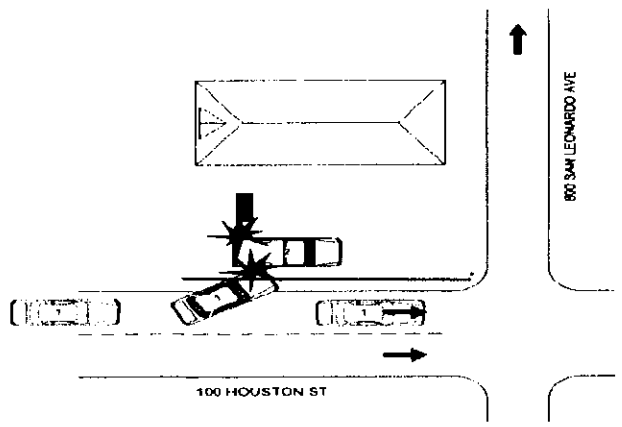
Additional Property:
Property: PLAY GROUND, Owner: GLORIA RODRIGUEZ DE GUERRERO

UNIT #2 WAS PARKED INSIDE 813 SAN LEONARDO AVE WHEN UNIT #1 TRAVELING WEST ON 100 HOUSTON ST FAILED TO CONTROL SPEED AND COLIDED WITH THE FENCE AT SAID LOCATION BEFORE COLIDING WITH UNIT #2 WHICH THEN CAUSED UNIT #2 TO STRIKE A WOODPLAYGROUND.
UNIT #1 FLED THE SCENE OF THE ACCIDENT AND LEFT BEHIND ITS FRONT TEXAS LICENSE PLATE CS9L698. THE PLATE WAS RECOVERED AND TAKEN TO LAREDO POLICE DEPARTMENT PROPERTY ROOM FOR EVIDENCE UNDER TAG 14-4204 LOCKER 5.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale.

INVESTIGATOR

Time Notified (24HRMM)	How Notified	Time Arrived (24HRMM)	Report Date (MM/DD/YYYY)
1145	DISPATCH MCT	1150	07/09/2014

Invest. Comp.	Investigator Name (Printed)	ID Num.
☒ Yes ☐ No	GRANADOS, ENRIQUE A.	7132

ORI Num.	*Agency	District/ Area
TX2400100	LAREDO POLICE DEPARTMENT	6

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 004 | Total Num. Prsns. 002 | TxDOT Crash ID

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
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Refer to Attached Code Sheet for Numbered Fields
★=These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 01/04/2015
★Crash Time (24HRMM): 0154
Case ID: 15-000289
Local Use:
★County Name: WEBB
★City Name: LAREDO
☐ Outside City Limit
In your opinion, did this crash result in at least $1,000 damage to any one person's property? ■ Yes ☐ No
Latitude (decimal degrees):
Longitude (decimal degrees):

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num.: | 2 Rdwy Part: 1 | Block Num.: 100 | 3 Street Prefix: | ★Street Name: HOUSTON | 4 Street Suffix:
☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/ Toll Lane | Speed Limit: 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc.:

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

At Int. ☐ Yes ■ No | 1 Rdwy. Sys.: LR | Hwy. Num.: | 2 Rdwy Part: 1 | Block Num.: 800 | 3 Street Prefix: | Street Name: SAN LEONARDO | 4 Street Suffix: AVE
Distance from Int. or Ref. Marker: 15 | ■ FT ☐ MI | 3 Dir. from Int. or Ref Marker: E | Reference Marker: | Street Desc.: | RRX Num.:

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: DX3L802 | VIN: 1G8AW15B87Z138677
Veh. Year: 2007 | 6 Veh. Color: BLU | Veh. Make: SATURN | Veh. Model: LS | 7 Body Style: P4 | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
8 DL/ID Type: 5 | DL/ID State: | DL/ID Num.: | 9 DL Class: 5 | 10 CDL End.: 5 | 11 DL Rest.: 5 | DOB (MM/DD/YYYY): 11/20/1998
Address (Street, City, State, ZIP): 3215 NAPOLEON ST, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	NARVAEZ, JUAN, CARLOS	N	16	H	1	1	1	1	97	N	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: ESPARZA, JUAN, J 3215 NAPOLEON ST, LAREDO, TX 78043
Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 1 | Fin. Resp. Name: LYNDON SOUTHERN INSURANCE | Fin. Resp. Num.: PR-6160751-10
Fin. Resp. Phone Num.: (800) 888-2738 | 27 Vehicle Damage Rating 1: 11-FR-3 | 27 Vehicle Damage Rating 2: 8-LBQ-2 | Vehicle Inventoried ☐ Yes ■ No
Towed By: TOWED AWAY | Towed To:

Unit Num.: 2 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: DBY5454 | VIN: 1FTRX12W64NA21602
Veh. Year: 2004 | 6 Veh. Color: GRY | Veh. Make: FORD | Veh. Model: F150 | 7 Body Style: PK | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
8 DL/ID Type: 4 | DL/ID State: TX | DL/ID Num.: 34562092 | 9 DL Class: 5 | 10 CDL End.: 5 | 11 DL Rest.: 5 | DOB (MM/DD/YYYY): 11/19/1993
Address (Street, City, State, ZIP): 4548 LA JOYA LN, LAREDO, TX 78041

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	VILLARREAL, WILLIAM, ANTHONY	N	21	H	1	1	1	2	97	Y	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: VILLARREAL, WILLIAM, ANTHONY 4548 LA JOYA LN, LAREDO, TX 78041
Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 1 | Fin. Resp. Name: CEM INSURANCE | Fin. Resp. Num.: PR7659101-02
Fin. Resp. Phone Num.: (888) 224-7740 | 27 Vehicle Damage Rating 1: 4-RFQ-2 | 27 Vehicle Damage Rating 2: 11-FD-3 | Vehicle Inventoried ☐ Yes ■ No
Towed By: READY TOWING | Towed To:

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-000289** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	2737088
1	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2737088
1	1	CURFEW	2737088

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
DAMAGED FENCE	JOSE A FLORES	208 HOUSTON ST LAREDO, TX 78040
DAMAGED RETAINING WALL/FENCE	MARGARITA FLORES	212 HOUSTON ST LAREDO, TX 78040

CMV

Unit Num. | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1: Unit Num. | ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2: Unit Num | ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22			41													
2											2	3	4	4	2	1	11

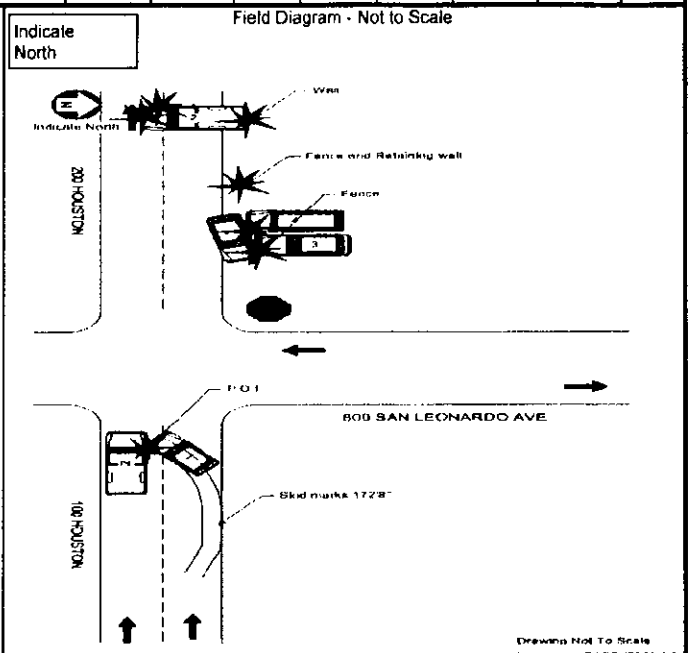
NARRATIVE & DIAGRAM

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

Driver of Unit #1 admitted that he was driving too fast, and lost control of vehicle as he travelled west on 100 Houston St in the outer lane on the north side of the street. Driver of Unit#1 stated after losing control of vehicle he hit the curb, and then ended up going into the inner lane on the south side of the street. Unit #1 then collided with Unit #2, and then ended up colliding into a property fence, and two parked vehicles on 208 Houston St. Unit #2 then collided with a retaining wall, and fence on 212 Houston St, and vehicle came to a rest hitting a wall on 218 Houston St.
P.O.I.
4`5" N, and 15 E from SE corner.

* * E N D * *

Field Diagram - Not to Scale



INVESTIGATOR

Time Notified (24HRMM) 0155 | How Notified MCT DISPATCHED | Time Arrived (24HRMM) 0157 | Report Date (MM/DD/YYYY) 01/04/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) HERNANDEZ, JOSE | ID Num. 4057

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | Service/Region/DA 2

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 4	0 0 2	

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
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Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
01/04/2015	0154	15-000289	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	100		HOUSTON	

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ■ No	LR		1	800		SAN LEONARDO	AVE

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	■ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
3	1			TX	CDX2097	1N4AL3APXDN550443

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2013	BLK	NISSAN	ALTIMA	P4	

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

Address (Street, City, State, ZIP)

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

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: PAEZ, RODOLFO, 960 WITHERSPOON, LAREDO, TX 78046

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
■ Yes ☐ Expired ☐ No ☐ Exempt	1	ALLSTATE	000000829987827

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 255-7828	11-FL-1		☐ Yes ■ No

Towed By	Towed To
REMAINED AT SCENE	

Unit Num.	5 Unit Desc.	■ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
4	1			TX	CR3M535	1GNDT13W6Y2209314

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2000	WHI	CHEVROLET	BLAZER	SV	

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

Address (Street, City, State, ZIP)

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

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: GARRETT, JEFFREY, 6514 TURRETT LN, HOUSTON, TX 77064

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

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
	11-FL-1		☐ Yes ■ No

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-000289** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2737089

DAMAGE

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

CMV

Unit Num. | ☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)					37 Vehicle Defects (Investigator's Opinion)					Environmental and Roadway Conditions						
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
3																	
4											2	3	4	4	2	1	11

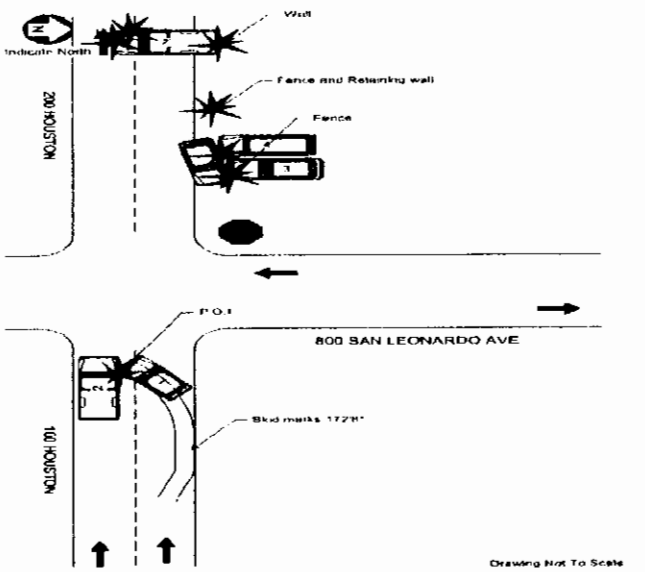
NARRATIVE & DIAGRAM

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

* * E N D * *

Field Diagram - Not to Scale

Indicate North



INVESTIGATOR

Time Notified (24HRMM)	How Notified	Time Arrived (24HRMM)	Report Date (MM/DD/YYYY)
0155	MCT DISPATCHED	0157	01/04/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) **HERNANDEZ, JOSE** | ID Num. **4057**

ORI Num. TX2401010 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA 2

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 3	0 0 3	

Texas Department of Transportation

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★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
02/12/2015	0326	15-004337	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	200		HOUSTON	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc. PAVED ROADWAY

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ■ No	LR		1	900		SAN LEONARDO	

Distance from Int. or Ref. Marker	■ FT ☐ MI	3 Dir. from Int. or Ref. Marker	Reference Marker	Street Desc.	RRX Num.
67		W		PAVED ROADWAY	

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	DM3X631	1HGEM22145L069674

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2005	SIL	HONDA	CIVIC	P4	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	27959715	C	96	96	01/31/1987

Address (Street, City, State, ZIP): 302 BOB BULLOCK LP APT 10208, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	HINOJOSA JR, DAVID	C	28	H	1	1	1	2	97	N	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: HINOJOSA JR, DAVID, 302 BOB BULLOCK LP APT 10208, LAREDO, TX 78043

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
■ Yes ☐ No ☐ Expired ☐ Exempt	1	LYNDON SOUTHERN	PR9290511-00

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(888) 224-7740	06-BL-4	12-FD-3	☐ Yes ■ No

Towed By	Towed To

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
2	7					

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

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

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	UNKNOWN	99			99	99	99	99	99	N	96		96	97	97

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-004337** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
1	1	REFUSED TREATMENT	NOT TRANSPORTED		

CHARGES

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

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
CHAIN LINK FENCE	JOSE A FLORES	208 HOUSTON ST LAREDO, TX 78040

CMV

Unit Num. | ☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 | Unit Num. | ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 | Unit Num. | ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		Environmental and Roadway Conditions 38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1				41													
2											1	3	97	4	2	1	96

NARRATIVE & DIAGRAM

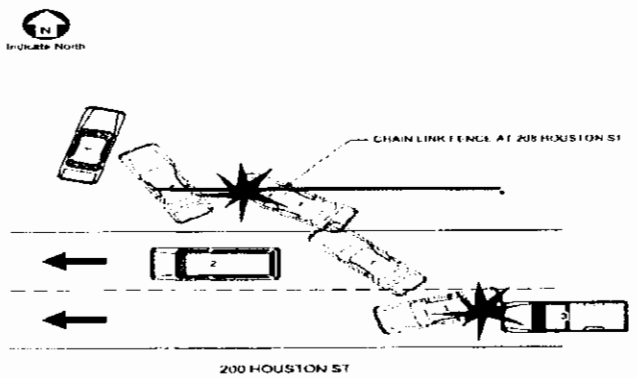
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

UNIT 1 WAS TRAVELING WEST ON 200 HOUSTON ST ON THE NORTHERN MOST LANE, WHEN A REPORTED NON CONTACT VEHICLE (UNIT 2) CHANGED LANES WHEN UNSAFE RESULTING IN UNIT 1 NEEDING TO TAKE EVASIVE ACTION TOWARDS THE SOUTHERN MOST LANE. WHEN UNIT 1 WENT INTO THE SOUTHERN MOST LANE TO AVOID A COLLISION, A NON IDENTIFIED UNIT 3 COLLIDED INTO THE REAR OF UNIT 1 WHICH THEN CAUSED UNIT 1 TO LOSE CONTROL AND COLLIDE WITH LISTED PROPERTY. UNIT 3 THEN FLED THE SCENE.

* * E N D * *

Indicate North

Field Diagram - Not to Scale



INVESTIGATOR

Time Notified (24HRMM)	How Notified	Time Arrived (24HRMM)	Report Date (MM/DD/YYYY)
0327	MCT DISPATCHED	0330	02/12/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) **LINK, ADAM J.** | ID Num. **5583**

ORI Num. TX240010 0 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA 6

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

Total Num Units 0 0 3	Total Num Prsns 0 0 3	TxDOT Crash ID

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
02/12/2015	0326	15-004337	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	200		HOUSTON	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc. PAVED ROADWAY

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☒ No	LR		1	900		SAN LEONARDO	

Distance from Int. or Ref. Marker	☒ FT ☐ MI	3 Dir. from Int. or Ref. Marker	Reference Marker	Street Desc.	RRX Num.
67		W		PAVED ROADWAY	

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☒ Hit and Run	LP State	LP Num.	VIN
3	1					

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

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
99			99	99	99	

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	UNKNOWN	99			99	99	99	99	99	N	96		96	97	97

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

VEHICLE, DRIVER, & PERSONS

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-004337** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

Unit Num | ☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)					Environmental and Roadway Conditions						
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.		38 Weather Cond	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
3	22										1	3	97	4	2	1	96

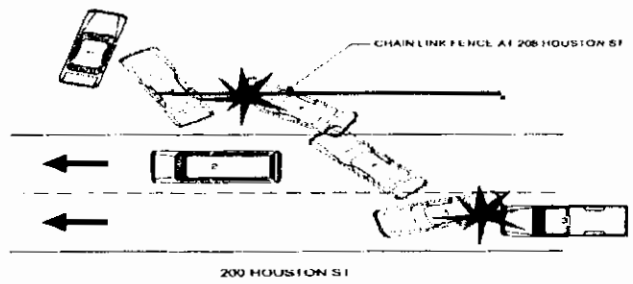
NARRATIVE & DIAGRAM

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

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM)	How Notified	Time Arrived (24HRMM)	Report Date (MM/DD/YYYY)
0327	MCT DISPATCHED	0330	02/12/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) **LINK, ADAM J.** | ID Num. **5583**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | Service/ Region/DA 6

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 2	0 0 1	

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)

Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457

Refer to Attached Code Sheet for Numbered Fields

★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
0 2 / 1 9 / 2 0 1 5	0 0 2 3	15-005087	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	200		HOUSTON	ST

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

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ■ No	LR		1	800		SAN LEONARDO	AVE

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	CV1L527	1 F A F P 4 0 4 4 2 F 1 6 8 7 2 9

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2 0 0 2	GRY	FORD	MUSTANG	P2	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	33716362	C	96	96	0 8 / 0 6 / 1 9 9 3

Address (Street, City, State, ZIP): 1713 DAVIS, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	HERNANDEZ, JAIME, IVAN	N	21	H	1	1	1	2	1	N	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: HERNANDEZ, JAIME, IVAN 1713 DAVIS, LAREDO, TX 78040

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
■ Yes ☐ Expired ☐ No ☐ Exempt	2	ALLSTATE	329887557

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 255-7828	1 2 - F L - 3	- -	☐ Yes ■ No

Towed By	Towed To
DRIVEN AWAY	

Unit Num.	5 Unit Desc.	■ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
2	1			TX	FJL5483	2 D 4 G P 4 4 L 3 6 R 7 2 1 1 6 2

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2 0 0 6	GRY	DODGE	CARAVAN	VN	

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

Address (Street, City, State, ZIP):

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

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: RIOS-JASSO, JUAN 2510 SEVERITA LANE, LAREDO, TX 78046

Proof of Fin. Resp	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.
■ Yes ☐ Expired ☐ No ☐ Exempt	2	NATIONAL LIABILITY & FIRE INSURANCE	BMCTX4561888

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(800) 455-6164	0 1 - R P - 3	1 1 - L D - 3	☐ Yes ■ No

Towed By	Towed To
PARKED VEHICLE	

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-005087** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	2717440

DAMAGE

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

CMV

Unit Num. | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22																
2											1	3	98	4	1	1	96

NARRATIVE & DIAGRAM

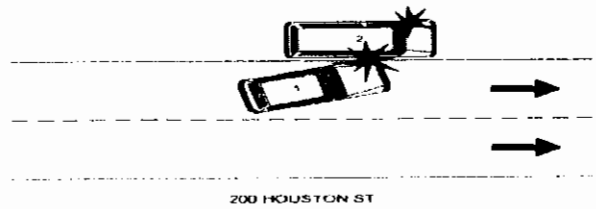
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

UNIT 1 WAS TRAVELING WESTBOUND ON 200 HOUSTON ST. UNIT 2 WAS PARKED AND UNATTENDED ON 200 HOUSTON ST. UNIT 1 FAILED TO CONTROL SPEED AND COLLIDED INTO UNIT 2. DUE TO THE IMPACT UNIT 2 WAS PUSHED AGAINST THE CURB AND SUSTAINED DAMAGE ON THE LEFT FRONT TIRE.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 0025 | How Notified **MCT DISPATCHED** | Time Arrived (24HRMM) 0029 | Report Date (MM/DD/YYYY) 02/19/2015

Invest. Comp. ☒ Yes ☐ No | Investigator Name (Printed) **ALCAZAR, JOSE A.** | ID Num. **5954**

ORI Num. TX2401000 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA 6

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 001 | Total Num. Prsns. 001 | TxDOT Crash ID

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 02/23/2015 | ★Crash Time (24HRMM): 0246 | Case ID: 15-005555 | Local Use

★County Name: WEBB | ★City Name: LAREDO | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 200 | 3 Street Prefix | ★Street Name: HOUSTON | 4 Street Suffix: ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit: 30 | Const. Zone ☐ Yes ■ No | Workers Present ☐ Yes ■ No | Street Desc.

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

At Int. ☐ Yes ■ No | 1 Rdwy. Sys.: LR | Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 900 | 3 Street Prefix | Street Name: SAN LEONARDO | 4 Street Suffix

Distance from Int. or Ref. Marker: 10 | ■ FT ☐ MI | 3 Dir. from Int. or Ref. Marker: W | Reference Marker | Street Desc. | RRX Num.

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: BMH9325 | VIN: 1FTSX21P96EB12125

Veh. Year: 2006 | 6 Veh. Color: GRY | Veh. Make: FORD | Veh. Model: F250 | 7 Body Style: PK | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 1 | DL/ID State: TX | DL/ID Num.: 33867918 | 9 DL Class: C | 10 CDL End: 96 | 11 DL Rest.: 96 | DOB (MM/DD/YYYY): 11/03/1993

Address (Street, City, State, ZIP): 3219 DIAZ ST, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	SALDANA JR, BENITO	N	21	H	1	1	1	1	97	N	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: SALDANA JR, BENITO, 3219 DIAZ ST, LAREDO, TX 78043

Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 1 | Fin. Resp. Name: ALPHASURE AFFORDABLE | Fin. Resp. Num.: 65ETX267798813872

Fin. Resp. Phone Num.: (800) 236-0398 | 27 Vehicle Damage Rating 1: 12-FC-4 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ■ No

Towed By | Towed To

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-005555** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
STOP SIGN	**CITY OF LAREDO**	**5512 THOMAS AVE LAREDO, TX 78040**
UTILITY POLE	**AEP**	**1500 W CALTON ST LAREDO, TX 78040**

CMV

Unit Num.	☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY	CMV Disabling Damage ☐ Yes ☐ No	28 Veh. Oper.	29 Carrier ID Type	Carrier ID Num.

Carrier's Corp. Name	Carrier's Primary Addr.	30 Veh. Type

31 Bus Type	☐ RGVW ☐ GVWR	HazMat Released ☐ Yes ☐ No	32 HazMat Class Num. / HazMat ID Num.	32 HazMat Class Num. / HazMat ID Num.	33 Cargo Body Style

Trailer 1	Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type	CMV Disabling Damage ☐ Yes ☐ No	Trailer 2	Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type	CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events	35 Seq. 1	35 Seq. 2	35 Seq. 3	35 Seq. 4

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)					Environmental and Roadway Conditions						
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1																	
											3	3	97	4	1	2	96

NARRATIVE & DIAGRAM

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

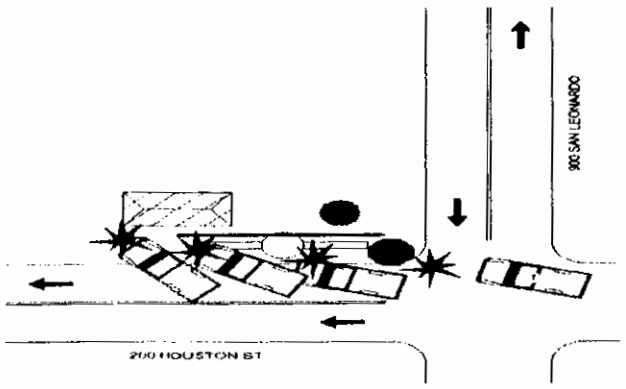
Additional Property:
Property: BILLBOARD, Owner: JOSE A FLORES
Property: CHAIN LINKED FENCE, Owner: JOSE A FLORES
Property: TREE, Owner: JOSE A FLORES

UNIT#1 WAS TRAVELING WEST ON 100 HOUSTON STREET. DUE TO WET PAVEMENT, UNIT#1 LOST CONTROL AND COLLIDED WITH A STOP SIGN, A UTILITY POLE, A CHAIN LINKED FENCE, A BILLBOARD AND A SMALL TREE ON THE NORTHWEST CORNER OF 200 HOUSTON ST. NO CITATION WAS ISSUED DUE TO THE WEATHER BEING A FACTOR IN THE SINGLE VEHICLE ACCIDENT.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM)	How Notified	Time Arrived (24HRMM)	Report Date (MM/DD/YYYY)
0246	DISPATCHED	0250	02/23/2015

Invest. Comp. ☐ Yes ☐ No	Investigator Name (Printed)	ID Num.
	BENAVIDES, CESAR	1131

ORI Num.	*Agency	Service/ Region/DA
TX2401010	LAREDO POLICE DEPARTMENT	

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☐ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 001 | Total Num. Prsns. 001 | TxDOT Crash ID

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 02/23/2015 | ★Crash Time (24HRMM): 0721 | Case ID: 15-005562 | Local Use:

★County Name: WEBB | ★City Name: LAREDO | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num.: | 2 Rdwy Part: 1 | Block Num.: 100 | 3 Street Prefix: | ★Street Name: HOUSTON | 4 Street Suffix: ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit: 30 | Const. Zone ■ Yes ☐ No | Workers Present ■ Yes ☐ No | Street Desc.:

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

At Int. ☐ Yes ■ No | 1 Rdwy. Sys.: LR | Hwy. Num.: | 2 Rdwy Part: 1 | Block Num.: 900 | 3 Street Prefix: | Street Name: SAN LEONARDO | 4 Street Suffix:

Distance from Int. or Ref. Marker: 50 | ■ FT ☐ MI | 3 Dir. from Int or Ref. Marker: W | Reference Marker: | Street Desc.: | RRX Num.:

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1 | 5 Unit Desc.: 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: CCL1602 | VIN: 1GCEK14V52Z316004

Veh. Year: 2002 | 6 Veh. Color: WHI | Veh. Make: CHEVROLET | Veh. Model: SILVERADO | 7 Body Style: PK | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type: 4 | DL/ID State: TX | DL/ID Num.: 37106873 | 9 DL Class: 5 | 10 CDL End.: 5 | 11 DL Rest.: 5 | DOB (MM/DD/YYYY): 04/25/1995

Address (Street, City, State, ZIP): 2203 GUAYMAS AVE, LAREDO, TX 78046

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	MARTINEZ GUERRA, JUAN, SEBASTIAN	N	19	H	1	1	1	1	1	N	96		96	97	97

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

■ Owner ☐ Lessee | Owner/Lessee Name & Address: MARTINEZ, ENCARNACION, A 2203 GUAYMAS AVE, LAREDO, TX 78046

Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 2 | Fin. Resp. Name: GEICO | Fin. Resp. Num.: 4274039819

Fin. Resp. Phone Num.: (800) 841-3000 | 27 Vehicle Damage Rating 1: 11-FD-1 | 27 Vehicle Damage Rating 2: | Vehicle Inventoried ☐ Yes ■ No

Towed By: DRIVER | Towed To: DRIVEN AWAY

VEHICLE, DRIVER, & PERSONS

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

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

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

Address (Street, City, State, ZIP):

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address:

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

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

Towed By: | Towed To:

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-005562** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	DISREGARDED WARNING SIGN AT CONSTRUCTION	2726920
1	1	FAIL TO CONTROL SPEED	2726920
1	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2726920

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
AN ORANGE SLOW SIGN	HUGO DAVID GARCIA	8408 CASA VERDE RD LAREDO, TX 78040

CMV

Unit Num. | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)					Environmental and Roadway Conditions						
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	18	22															
											2	1	97	4	1	1	98

NARRATIVE & DIAGRAM

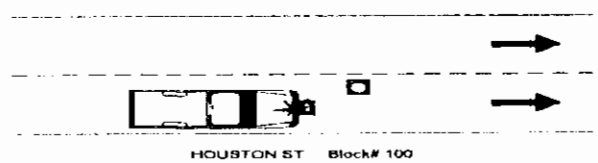
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

Unit 1 was heading west bound on the 100 block of Houston St and disregarded an official traffic control device, failed to control speed, and collided with the sign (SLOW).

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 0722 | How Notified **MCT DISPATCH** | Time Arrived (24HRMM) 0732 | Report Date (MM/DD/YYYY) 02/23/2015

Invest. Comp. ☐ Yes ☐ No | Investigator Name (Printed) **CAMARILLO, ADAN** | ID Num. **7148**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA 6

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 3	0 0 7	

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
04/16/2015	0743	15-011197	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	200		HOUSTON	ST

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

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☒ No	LR		1	800		SAN LEONARDO	

Distance from Int. or Ref. Marker	☒ FT ☐ MI	3 Dir. from Int. or Ref. Marker	Reference Marker	Street Desc.	RRX Num.
20		W		PAVED ROADWAY	

VEHICLE, DRIVER, & PERSONS

Unit Num. 1 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. CMB3433 | VIN 3GNFC16087G144553

Veh. Year 2007 | 6 Veh. Color GLD | Veh. Make CHEVROLET | Veh. Model SUBURBAN | 7 Body Style SV | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 1 | DL/ID State TX | DL/ID Num. 17309987 | 9 DL Class C | 10 CDL End. 96 | 11 DL Rest. 96 | DOB (MM/DD/YYYY) 01/11/1979

Address (Street, City, State, ZIP) 3310 CUATRO VIENTOS DR, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	VENEGAS, DIANA, HILDA	N	36	H	2	1	1	1	97	N	96		96	97	97
2	2	6	VENEGAS, MIGUEL, ANGEL	N	08	H	1	1	1	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: VENEGAS, DIANA, HILDA 3310 CUATRO VIENTOS DR, LAREDO, TX 78040

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 2 | Fin. Resp. Name ALLSTATE | Fin. Resp. Num. 816264358

Fin. Resp. Phone Num. (956) 722-0087 | 27 Vehicle Damage Rating 1 12-FD-1 | 27 Vehicle Damage Rating 2 - - | Vehicle Inventoried ☐ Yes ☒ No

Towed By | Towed To

Unit Num. 2 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. DFW2625 | VIN 1GNEC16ZX3J257343

Veh. Year 2003 | 6 Veh. Color MAR | Veh. Make CHEVROLET | Veh. Model SUBURBAN | 7 Body Style SV | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 1 | DL/ID State TX | DL/ID Num. 16138182 | 9 DL Class C | 10 CDL End. 96 | 11 DL Rest. 96 | DOB (MM/DD/YYYY) 10/11/1982

Address (Street, City, State, ZIP) 3411 CORPUS CHRISTI, LAREDO, TX 78040

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	BONDOC, SANDY	N	32	H	2	1	1	1	97	N	96		96	97	97
2	2	6	BONDOC, JADA	N	02	H	1	1	5	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				
3	2	5	BANDOC, JUAN	N	11	W	1	1	1	1	97	N					
4	2	3	BANDOC, JUSTIN	N	09	W	1	1	1	1	97	N					

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: BONDOC JR, JUAN, JOSE 3401 CORPUS CHRISIT, LAREDO, TX 78040

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 1 | Fin. Resp. Name LYNDON SOUTHERN INS CO | Fin. Resp. Num. L-PR9809S51-00

Fin. Resp. Phone Num. (888) 224-7740 | 27 Vehicle Damage Rating 1 12-FD-1 | 27 Vehicle Damage Rating 2 6-BD-2 | Vehicle Inventoried ☐ Yes ☒ No

Towed By | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-011197** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	2738986
3	1	NO DRIVER`S LICENSE (WHEN UNLICENSED)	2738987

DAMAGE

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

CMV

Unit Num. | ☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22																
2											2	1	97	1	1	1	17

NARRATIVE & DIAGRAM

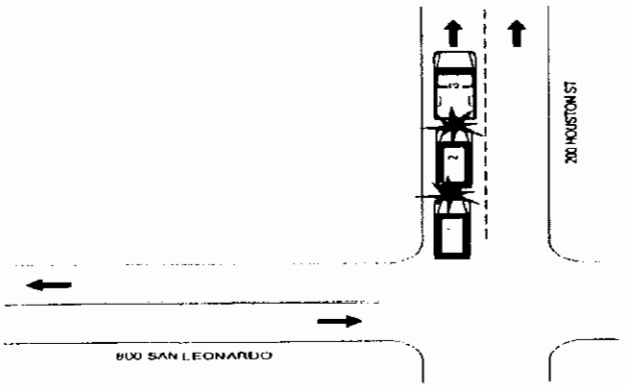
Investigator's Narrative Opinion of What Happened
(Attach Additional Sheets If Necessary)

Unit 1 was traveling west bound on 200 Houston when Unit 1 failed to control speed and collided with Unit 2 causing Unit 2 to collide with Unit 3.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 0743 | How Notified **MCT DISPATCH** | Time Arrived (24HRMM) 0808 | Report Date (MM/DD/YYYY) 04/21/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) **CANTU, JOSHUA I.** | ID Num. **8088**

ORI Num. TX2401010 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
0 0 3	0 0 7	

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★=These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
04/16/2015	0743	15-011197	

★County Name	★City Name	Outside City Limit
WEBB	LAREDO	☐

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	200		HOUSTON	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot ☐ Toll Road/Toll Lane | Speed Limit 35 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc. PAVED ROADWAY

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☒ No	LR		1	800		SAN LEONARDO	

Distance from Int. or Ref. Marker 20 ☒ FT ☐ MI | 3 Dir. from Int. or Ref. Marker W | Reference Marker | Street Desc. PAVED ROADWAY | RRX Num.

VEHICLE, DRIVER, & PERSONS

Unit Num. 3 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☐ Hit and Run | LP State TX | LP Num. BR55635 | VIN 2GCEC19J1812925 01

Veh. Year 2008 | 6 Veh. Color GLD | Veh. Make CHEVROLET | Veh. Model SILVERADO | 7 Body Style PK | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

8 DL/ID Type 5 | DL/ID State | DL/ID Num. | 9 DL Class 5 | 10 CDL End. 5 | 11 DL Rest. 5 | DOB (MM/DD/YYYY) 02/08/1952

Address (Street, City, State, ZIP) 2410 MINA, NUEVO LAREDO, TA

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	AGUILAR MATECON, ISABEL	N	63	H	2	1	1	1	97	N	96		96	97	97

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

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: RODARTE, SANDRA, IVETHE 1211 DAN DARIO 277, LAREDO, TX 78040

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type 1 | Fin. Resp. Name CEM INSURANCE CO | Fin. Resp. Num. PR6870841-06

Fin. Resp. Phone Num. (888) 344-4381 | 27 Vehicle Damage Rating 1 6-BD-1 | 27 Vehicle Damage Rating 2 ___-___-___ | Vehicle Inventoried ☐ Yes ☒ No

Towed By | Towed To

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-011197** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

Unit Num. | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num | HazMat ID Num. | 32 HazMat Class Num. | HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		Environmental and Roadway Conditions 38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
3																	
											2	1	97	1	1	1	17

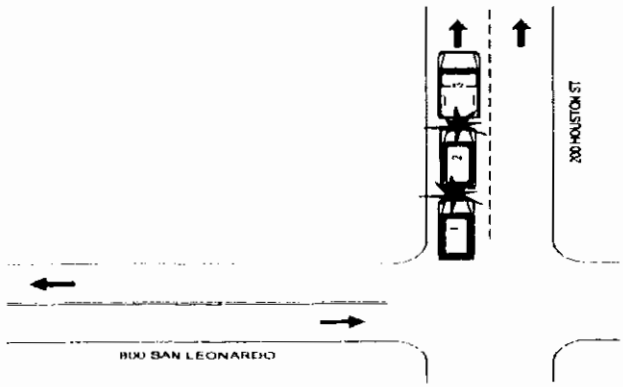
NARRATIVE & DIAGRAM

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

* * E N D * *

Field Diagram - Not to Scale

Indicate North



INVESTIGATOR

Time Notified (24HRMM) 0743 | How Notified **MCT DISPATCH** | Time Arrived (24HRMM) 0808 | Report Date (MM/DD/YYYY) 04/21/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) **CANTU, JOSHUA I.** | ID Num. **8088**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | Service/ Region/DA

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

Total Num. Units 0 0 3	Total Num. Prsns. 0 1 0	TxDOT Crash ID

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★ =These fields are required on all additional sheets submitted for this crash (ex. additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY)	★Crash Time (24HRMM)	Case ID	Local Use
08/18/2015	1417	15-024609	

★County Name	★City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.	★Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	★Street Name	4 Street Suffix
LR		1	100		HOUSTON	ST

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

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☒ No	LR		1	900		SAN LEONARDO	

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

VEHICLE, DRIVER, & PERSONS

Unit Num. 1 | 5 Unit Desc. 1 | ☐ Parked Vehicle | ☒ Hit and Run | LP State | LP Num. | VIN

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

8 DL/ID Type 99 | DL/ID State UN | DL/ID Num. | 9 DL Class 99 | 10 CDL End. 99 | 11 DL Rest. 99 | DOB (MM/DD/YYYY)

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	UNKNOWN	99		W	1	1	99	99	97	N	96		96	97	97

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

Fin. Resp. Phone Num. | 27 Vehicle Damage Rating 1 1 - RD - 0 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☒ No

Towed By | Towed To

Unit Num. 2 | 5 Unit Desc. 6 | ☐ Parked Vehicle | ☒ Hit and Run | LP State | LP Num. | VIN

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

Fin. Resp. Phone Num. | 27 Vehicle Damage Rating 1 1 - RD - 0 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☒ No

Towed By | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-024609** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

Unit Num. 1 | [■] 10,001+ LBS. | [ ] TRANSPORTING HAZARDOUS MATERIAL | [ ] 9+ CAPACITY | CMV Disabling Damage [ ] Yes [■] No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type 9

31 Bus Type 0 | [ ] RGVW [ ] GVWR 0 | HazMat Released [ ] Yes [■] No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style 3

Trailer 1 Unit Num. 2 | [ ] RGVW [ ] GVWR 0 | 34 Trlr. Type | CMV Disabling Damage [ ] Yes [■] No | Trailer 2 Unit Num. | [ ] RGVW [ ] GVWR | 34 Trlr Type | CMV Disabling Damage [ ] Yes [ ] No

Sequence Of Events | 35 Seq. 1 14 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)					Environmental and Roadway Conditions						
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	20																
2											1	1	97	4	1	1	96

NARRATIVE & DIAGRAM

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

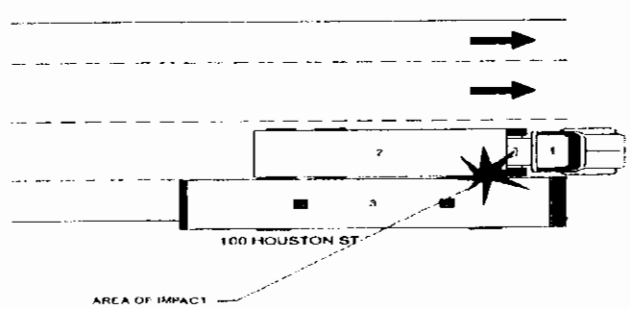
UNIT#1 WHILE TOWING UNIT#2 WAS TRAVELING WEST ON 100 HOUSTON ST WHEN IT COLLIDED WITH UNIT#3 LEFT SIDE MIRROR. UNIT#3 WAS STOPPED AT A BUS STOP WHEN THE COLLISION OCCURRED. UNIT#1 WHILE TOWING UNIT#2 LEFT THE SCENE. ALSO THE DRIVER OF UNIT#3 STATED THAT UNIT#2 COLLIDED WITH HIS MIRROR. ALSO UNIT#3 WAS ON THE SHOULDER OUT OF TRAFFIC, BUT THE LEFT SIDE MIRROR WAS STICKING OUT INTO THE OUTER TRAFFIC LANE WHEN THE COLLISION OCCURRED.

AOI WAS 7 FT SOUTH AND 6 FT EAST FROM THE SOUTH EAST CORNER OF 100 HOUSTON ST / 900 SAN LEONARDO AVE.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



INVESTIGATOR

Time Notified (24HRMM) 1418 | How Notified **MCT DISPATCHED** | Time Arrived (24HRMM) 1430 | Report Date (MM/DD/YYYY) 08/18/2015

Invest. Comp. [■] Yes [ ] No | Investigator Name (Printed) **HINOJOSA, DAVID** | ID Num. **1862**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA 6

Law Enforcement and TxDOT Use ONLY
☐ FATAL ☒ CMV ☐ SCHOOL BUS ☐ RAILROAD ☐ MAB ☐ SUPPLEMENT ☐ ACTIVE SCHOOL ZONE | Total Num. Units 003 | Total Num. Prsns. 010 | TxDOT Crash ID

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★=These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 08/18/2015 | ★Crash Time (24HRMM): 1417 | Case ID: 15-024609 | Local Use

★County Name: WEBB | ★City Name: LAREDO | ☐ Outside City Limit

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

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy. Sys.: LR | ★Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 100 | 3 Street Prefix | ★Street Name: HOUSTON | 4 Street Suffix: ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit: 30 | Const. Zone ☐ Yes ☒ No | Workers Present ☐ Yes ☒ No | Street Desc.

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

At Int. ☐ Yes ☒ No | 1 Rdwy. Sys.: LR | Hwy. Num. | 2 Rdwy Part: 1 | Block Num.: 900 | 3 Street Prefix | Street Name: SAN LEONARDO | 4 Street Suffix

Distance from Int. or Ref. Marker: 6 | ☒ FT ☐ MI | 3 Dir. from Int. or Ref. Marker: E | Reference Marker | Street Desc. | RRX Num.

VEHICLE, DRIVER, & PERSONS

Unit Num.: 3 | 5 Unit Desc.: 1 | ☒ Parked Vehicle | ☐ Hit and Run | LP State: TX | LP Num.: 1125105 | VIN: 4UZADEDU5BCBF5058

Veh. Year: 2011 | 6 Veh. Color: WHI | Veh. Make: FREIGHTLINER CORP. | Veh. Model | 7 Body Style: BU | ☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)

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

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	2	14	RODRIGUEZ CAMPOS, GRICELDA	N	44	W	2	1	96	1	97	N					
2	2	14	CHAVEZ, MONICA	N	02	H	2	1	96	1	97	N	Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				
3	2	14	MARTINEZ ALVARADO, CLARA	N	46	H	2	1	96	1	97	N					
4	2	14	PEREZ, ERIKA	N	26	H	2	1	96	1	97	N					

☒ Owner ☐ Lessee | Owner/Lessee Name & Address: CITY OF LAREDO 1110 HOUSTON, LAREDO, TX 78040

Proof of Fin. Resp ☒ Yes ☐ No ☐ Expired ☐ Exempt | 26 Fin. Resp. Type: 2 | Fin. Resp. Name: T.M.L. | Fin. Resp. Num.: 8235

Fin. Resp. Phone Num.: (800) 537-6655 | 27 Vehicle Damage Rating 1: 9-LFQ-1 | 27 Vehicle Damage Rating 2 | Vehicle Inventoried ☐ Yes ☒ No

Towed By | Towed To

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

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

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

Address (Street, City, State, ZIP)

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
													Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.				

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By | Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-024609** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

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

DAMAGE

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

CMV

Unit Num. 3 | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ■ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ■ No | 28 Veh. Oper. 4 | 29 Carrier ID Type 96 | Carrier ID Num.

Carrier's Corp. Name **EL METRO (CITY LAREDO BUS)** | Carrier's Primary Addr. **1110 HOUSTON ST, LAREDO TX 78040** | 30 Veh. Type 4

31 Bus Type 2 | ☐ RGVW ■ GVWR 3500 | HazMat Released ☐ Yes ■ No | 32 HazMat Class Num. | HazMat ID Num. | 32 HazMat Class Num. | HazMat ID Num. | 33 Cargo Body Style 2

Trailer 1 Unit Num. | ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. | ☐ RGVW ☐ GVWR | 34 Trlr. Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 **98** | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

36 Contributing Factors (Investigator's Opinion)						37 Vehicle Defects (Investigator's Opinion)					Environmental and Roadway Conditions						
Unit Num.	Contributing			May Have Contrib.		Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
3	98																
											1	1	97	4	1	1	96

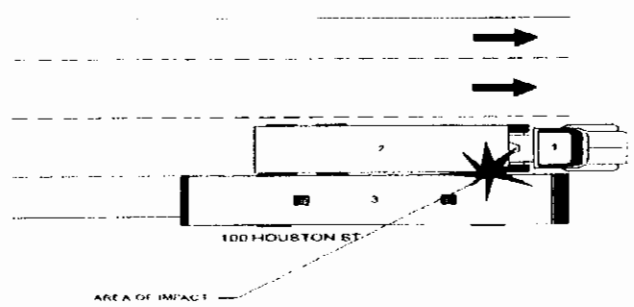
NARRATIVE & DIAGRAM

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

* * E N D * *

Field Diagram - Not to Scale

Indicate North



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 1418 | How Notified **MCT DISPATCHED** | Time Arrived (24HRMM) 1430 | Report Date (MM/DD/YYYY) 08/18/2015

Invest. Comp. ■ Yes ☐ No | Investigator Name (Printed) **HINOJOSA, DAVID** | ID Num. **1862**

ORI Num. TX2400100 | *Agency **LAREDO POLICE DEPARTMENT** | Service/Region/DA 6

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID 15-024609

TxDOT Crash ID

*Crash Date (MM/DD/YYYY) 08/18/2015

*Crash Time (24HRMM) 1417

*County Name WEBB

*City Name LAREDO

*1 Rdwy Sys. LR

*Hwy. Num.

*Street Name HOUSTON

ORI Num. TX2401010

*Agency LAREDO POLICE DEPARTMENT

Service/ Region/DA 6

ADDITIONAL PERSONS

Unit Num	Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.
3	5	2	14	LOZANO, BRANDON	N	04	H	1	1	96	1	97	N
3	6	2	14	LOZANO, BRIAN	N	07	H	1	1	96	1	97	N
3	7	2	14	SANCHEZ, JOE	N	16	H	1	1	96	1	97	N
3	8	2	14	MADRIGAL, EMILIO	N	11	H	1	1	96	1	97	N
3	9	2	14	MADRIGAL, GUSTAVO	N	14	H	1	1	96	1	97	N

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
001	002	

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
* =These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

*Crash Date (MM/DD/YYYY)	*Crash Time (24HRMM)	Case ID	Local Use
10/11/2015	2347	15-030129	

*County Name	*City Name	☐ Outside City Limit
WEBB	LAREDO	

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

ROAD ON WHICH CRASH OCCURRED

*1 Rdwy. Sys.	*Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	*Street Name	4 Street Suffix
LR		1	200		HOUSTON	ST

☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot | ☐ Toll Road/Toll Lane | Speed Limit 30 | Const. Zone ☐ Yes ☑ No | Workers Present ☐ Yes ☑ No | Street Desc.

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

At Int.	1 Rdwy. Sys.	Hwy. Num.	2 Rdwy Part	Block Num.	3 Street Prefix	Street Name	4 Street Suffix
☐ Yes ☑ No	LR		1	900		SAN LEONARDO	

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

VEHICLE, DRIVER, & PERSONS

Unit Num.	5 Unit Desc.	☐ Parked Vehicle	☐ Hit and Run	LP State	LP Num.	VIN
1	1			TX	91F0100	3N1BB51D01L118381

Veh. Year	6 Veh. Color	Veh. Make	Veh. Model	7 Body Style	☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
2001	SIL	NISSAN	SENTRA	P4	

8 DL/ID Type	DL/ID State	DL/ID Num.	9 DL Class	10 CDL End.	11 DL Rest.	DOB (MM/DD/YYYY)
1	TX	37180573	C	96	96	05/05/1995

Address (Street, City, State, ZIP): 2807 E ASH ST, LAREDO, TX 78043

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle (Enter Driver or Primary Person for this Unit on first line)	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	MORALES, CRISTIAN	C	20	H	1	1	1	2	97	N	96		96	97	97
2	2	3	ANTU NAJERA, MELISSA	C	20	H	2	1	1	2	97	N					

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

☑ Owner ☐ Lessee | Owner/Lessee Name & Address: MORALES, CRISTIAN 2807 E ASH ST, LAREDO, TX 78043

Proof of Fin Resp	26 Fin. Resp Type	Fin. Resp. Name	Fin. Resp. Num.
☑ Yes ☐ Expired ☐ No ☐ Exempt	1	CEM INSURANCE	CPRA117442-00

Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1	27 Vehicle Damage Rating 2	Vehicle Inventoried
(888) 224-7740	09-LP-6	03-RP-6	☐ Yes ☑ No

Towed By	Towed To

VEHICLE, DRIVER, & PERSONS

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

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

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

Address (Street, City, State, ZIP)

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

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

☐ Owner ☐ Lessee | Owner/Lessee Name & Address

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

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

Towed By	Towed To

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-030129** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)
1	1	LAREDO MEDICAL CENTER	RQ 9101		
1	2	LAREDO MEDICAL CENTER	RQ 9101		

CHARGES

Unit Num	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	2751738

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
CYCLONE FENCE	JOSE ANGEL FLORES III	208 HOUSTON ST LAREDO, TX 78041
CYCLONE FENCE & SHEET METAL WA	JOSE ANGEL FLORES III	208 HOUSTON ST LAREDO, TX 78041

CMV

Unit Num. | ☐ 10,001+ LBS. | ☐ TRANSPORTING HAZARDOUS MATERIAL | ☐ 9+ CAPACITY | CMV Disabling Damage ☐ Yes ☐ No | 28 Veh. Oper. | 29 Carrier ID Type | Carrier ID Num.

Carrier's Corp. Name | Carrier's Primary Addr. | 30 Veh. Type

31 Bus Type ☐ RGVW ☐ GVWR | HazMat Released ☐ Yes ☐ No | 32 HazMat Class Num. HazMat ID Num. | 32 HazMat Class Num. HazMat ID Num. | 33 Cargo Body Style

Trailer 1 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr Type | CMV Disabling Damage ☐ Yes ☐ No | Trailer 2 Unit Num. ☐ RGVW ☐ GVWR | 34 Trlr Type | CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events | 35 Seq. 1 | 35 Seq. 2 | 35 Seq. 3 | 35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			36 May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			37 May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22										1	3	97	4	1	1	17

NARRATIVE & DIAGRAM

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

Additional Property:
Property: CYCLONE FENCE/CEMENT WALL, Owner: MARGIE RODRIGUEZ

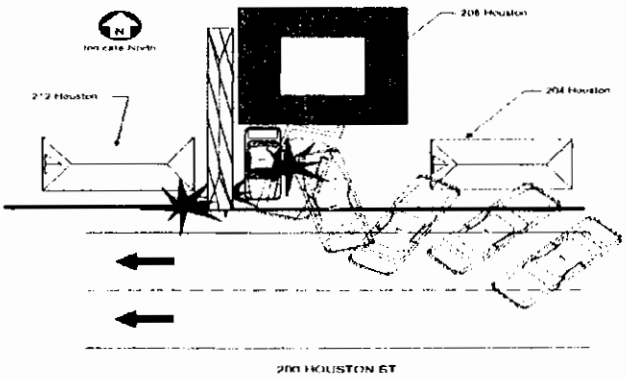
UNIT #1 WAS TRAVELING WESTBOUND ON THE 200 BLOCK OF HOUSTON WHEN DRIVER FAILED TO CONTROL SPEED THUS COLLIDING INTO 3 CYCLONE FENCES OF THREE PROPERTIES AND SHEET METAL WALL PLUS A CEMENT BARRIER WALL.

Damages to the following properties:
204 Houston St
208 Houston St
212 Houston St.

* * E N D * *

Indicate North

Field Diagram - Not to Scale



Drawing Not To Scale

INVESTIGATOR

Time Notified (24HRMM) 2347 | How Notified RADIO DISPATCHED | Time Arrived (24HRMM) 2349 | Report Date (MM/DD/YYYY) 10/12/2015

Invest. Comp. ☑ Yes ☐ No | Investigator Name (Printed) SIEGFRIED, MARGIE L. | ID Num. 5099

ORI Num. TX2400100 | *Agency LAREDO POLICE DEPARTMENT | Service/Region/DA 6

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

Total Num. Units	Total Num. Prsns.	TxDOT Crash ID
002	001	

Texas Department of Transportation

Texas Peace Officer's Crash Report (Form CR-3 1/1/2015)
Mail to: Texas Department of Transportation, Crash Data & Analysis, P.O. Box 149349, Austin, TX 78714. Questions? Call 844-274-7457
Refer to Attached Code Sheet for Numbered Fields
★=These fields are required on all additional sheets submitted for this crash (ex.: additional vehicles, occupants, injured, etc.)

IDENTIFICATION & LOCATION

★Crash Date (MM/DD/YYYY): 10/24/2015
★Crash Time (24HRMM): 0648
Case ID: 15-031478
Local Use:
★County Name: WEBB
★City Name: LAREDO
☐ Outside City Limit
In your opinion, did this crash result in at least $1,000 damage to any one person's property? ■ Yes ☐ No
Latitude (decimal degrees):
Longitude (decimal degrees):

ROAD ON WHICH CRASH OCCURRED

★1 Rdwy Sys.: LR
★Hwy. Num.:
2 Rdwy Part: 1
Block Num.: 200
3 Street Prefix:
★Street Name: HOUSTON
4 Street Suffix: ST
☐ Crash Occurred on a Private Drive or Road/Private Property/Parking Lot
☐ Toll Road/Toll Lane
Speed Limit: 30
Const. Zone ☐ Yes ■ No
Workers Present ☐ Yes ■ No
Street Desc.:

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

At Int. ☐ Yes ■ No
1 Rdwy. Sys.: LR
Hwy. Num.:
2 Rdwy Part: 1
Block Num.: 900
3 Street Prefix:
Street Name: SAN LEONARDO
4 Street Suffix:
Distance from Int. or Ref. Marker: 250 ■ FT ☐ MI
3 Dir. from Int. or Ref. Marker: W
Reference Marker:
Street Desc.:
RRX Num.:

VEHICLE, DRIVER, & PERSONS

Unit Num.: 1
5 Unit Desc.: 1
☐ Parked Vehicle ■ Hit and Run
LP State: TX
LP Num.: 36TTC9
VIN: 1FTRF17W7YNB75785
Veh. Year: 2000
6 Veh. Color: WHI
Veh. Make: FORD
Veh. Model: F150
7 Body Style: PK
☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
8 DL/ID Type: 1
DL/ID State: TX
DL/ID Num.: 38356241
9 DL Class: C
10 CDL End.:
11 DL Rest.: 96
DOB (MM/DD/YYYY): 05/19/1995
Address (Street, City, State, ZIP): 1803 BALTIMORE ST, LAREEO, TX 78041

Person Num.	12 Prsn. Type	13 Seat Position	Name: Last, First, Middle. Enter Driver or Primary Person for this Unit on first line	14 Injury Severity	Age	15 Ethnicity	16 Sex	17 Eject.	18 Restr.	19 Airbag	20 Helmet	21 Sol.	22 Alc. Spec.	Alc. Result	23 Drug Spec.	24 Drug Result	25 Drug Category
1	1	1	GALVAN, OSCAR, OMAR	N	20	H	1	1	1	1	97	N	1	0.094	96	97	97

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

■ Owner ☐ Lessee
Owner/Lessee Name & Address: ULLOA, GUADALUPE
4015 MANZANILLO, LAREDO, TX 78046
Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt
26 Fin. Resp. Type: 2
Fin. Resp. Name: PRONTOS INS
Fin. Resp. Num.: C-PR7228442-04
Fin. Resp. Phone Num.: (888) 224-7740
27 Vehicle Damage Rating 1: 12-FC-4
27 Vehicle Damage Rating 2: 3-R&T-5
Vehicle Inventoried ■ Yes ☐ No
Towed By: BORDER TOWING
Towed To:

VEHICLE, DRIVER, & PERSONS

Unit Num.: 2
5 Unit Desc.: 1
■ Parked Vehicle ☐ Hit and Run
LP State: TX
LP Num.: AK65083
VIN: 3D7MA48C03G842458
Veh. Year: 2003
6 Veh. Color: MAR
Veh. Make: DODGE
Veh. Model: 3500
7 Body Style: PK
☐ Pol., Fire, EMS on Emergency (Explain in Narrative if checked)
8 DL/ID Type:
DL/ID State:
DL/ID Num.:
9 DL Class:
10 CDL End.:
11 DL Rest.:
DOB (MM/DD/YYYY):
Address (Street, City, State, ZIP):

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

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

■ Owner ☐ Lessee
Owner/Lessee Name & Address: SOUTH TEXAS J & R ELECTRIC
1308 LEXINGTON AVE, LAREDO, TX 78040
Proof of Fin. Resp ■ Yes ☐ No ☐ Expired ☐ Exempt
26 Fin. Resp. Type: 2
Fin. Resp. Name: DAIRYLAND
Fin. Resp. Num.: 434673593
Fin. Resp. Phone Num.: (800) 334-0040
27 Vehicle Damage Rating 1: 6-BD-5
27 Vehicle Damage Rating 2:
Vehicle Inventoried ☐ Yes ■ No
Towed By: DRIVER
Towed To: 200 HOUSTON ST

Law Enforcement and TxDOT Use ONLY
Form CR-3 1/1/2015

Case ID **15-031478** | TxDOT Crash ID

DISPOSITION OF INJURED/KILLED

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

CHARGES

Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
1	1	FAIL TO CONTROL SPEED	2765160

DAMAGE

Damaged Property Other Than Vehicles	Owner's Name	Owner's Address
STEEL FENCE	DESERT SUN APARTMENTS	200 HOUSTON ST LAREDO, TX 78040

CMV

Unit Num.	☐ 10,001+ LBS. ☐ TRANSPORTING HAZARDOUS MATERIAL ☐ 9+ CAPACITY	CMV Disabling Damage ☐ Yes ☐ No	28 Veh. Oper.	29 Carrier ID Type	Carrier ID Num.

Carrier's Corp. Name	Carrier's Primary Addr.	30 Veh. Type

31 Bus Type	☐ RGVW ☐ GVWR	HazMat Released ☐ Yes ☐ No	32 HazMat Class Num. / HazMat ID Num.	32 HazMat Class Num. / HazMat ID Num.	33 Cargo Body Style

Trailer 1 Unit Num.	☐ RGVW ☐ GVWR	34 Trlr. Type	CMV Disabling Damage ☐ Yes ☐ No	Trailer 2 Unit Num.	☐ RGVW ☐ GVWR	34 Trlr Type	CMV Disabling Damage ☐ Yes ☐ No

Sequence Of Events	35 Seq. 1	35 Seq. 2	35 Seq. 3	35 Seq. 4

FACTORS & CONDITIONS

Unit Num.	36 Contributing Factors (Investigator's Opinion) Contributing			May Have Contrib.		37 Vehicle Defects (Investigator's Opinion) Contributing			May Have Contrib.		38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
1	22																
2											3	3	98	2	1	2	17

NARRATIVE & DIAGRAM

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

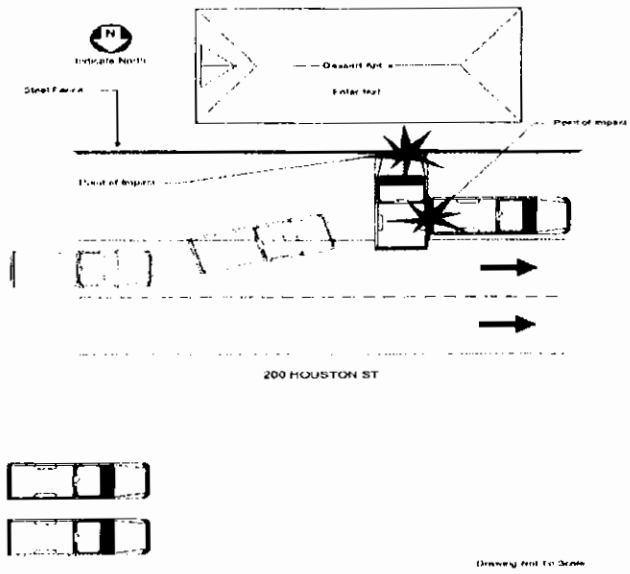
Unit #1 was traveling westbound on the south (left) lane on the 200 Blk. of Houston St. when it failed to control speed and collided into a steel fence and into Unit #2. in which was parked on the south (left) shoulder lane.

Driver from Unit #1 was arrested at 518 Washington St. and charged with DWI C/B and Accident Involving Damaged to Vehicle C/B.

* * E N D * *

Field Diagram - Not to Scale

Indicate North



INVESTIGATOR

Time Notified (24HRMM)	How Notified	Time Arrived (24HRMM)	Report Date (MM/DD/YYYY)
0649	DISPATCHED	0656	10/24/2015

Invest. Comp.	Investigator Name (Printed)	ID Num.
☑ Yes ☐ No	BECERRA, LUIS E.	7669

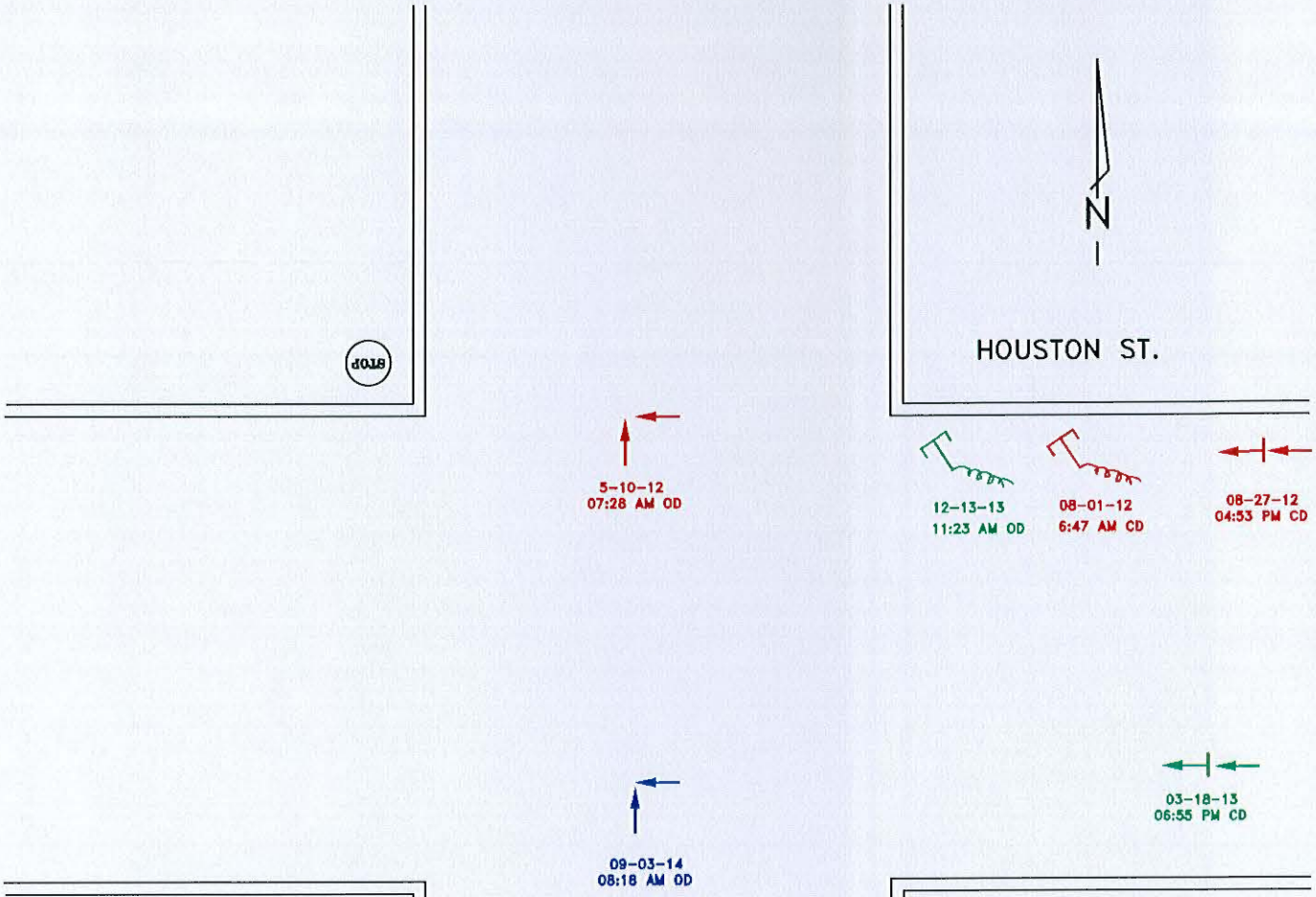
ORI Num.	*Agency	Service/ Region/DA
TX2400100	LAREDO POLICE DEPARTMENT	6

3. ACCIDENT DATA FOR HOUSTON ST. INTERSECTION WITH SAN ENRIQUE AVE. AND SAN JORGE AVE. FROM 01/12 THRU 12/14.

COLLISION DIAGRAM

LOCATION: Houston St. / San Enrique Ave.

TIME PERIOD: 1-01-12 TO 12-31-14



ACCIDENT SUMMARY							
YEAR					2012	2013	2014
FATAL					0	0	0
INJURY					0	0	0
PDO					3	2	1
TOTAL					3	2	1

ROAD SURFACE

- C DRY, CLEAR
- W WET
- S SNOWY, ICY
- O OTHER

LIGHTING

- D DAYLIGHT
- N DARK, NO LIGHTS
- L DARK WITH STREET LIGHT

- Automobile, Pick-Up
- (T) Truck
- (B) Bus
- (M) Motorcycle
- (O) Other

City of Laredo
Traffic Safety Division

PREPARED BY: Oscar Canales

APPROVED BY: Roberto Murillo, P.T.O.E.

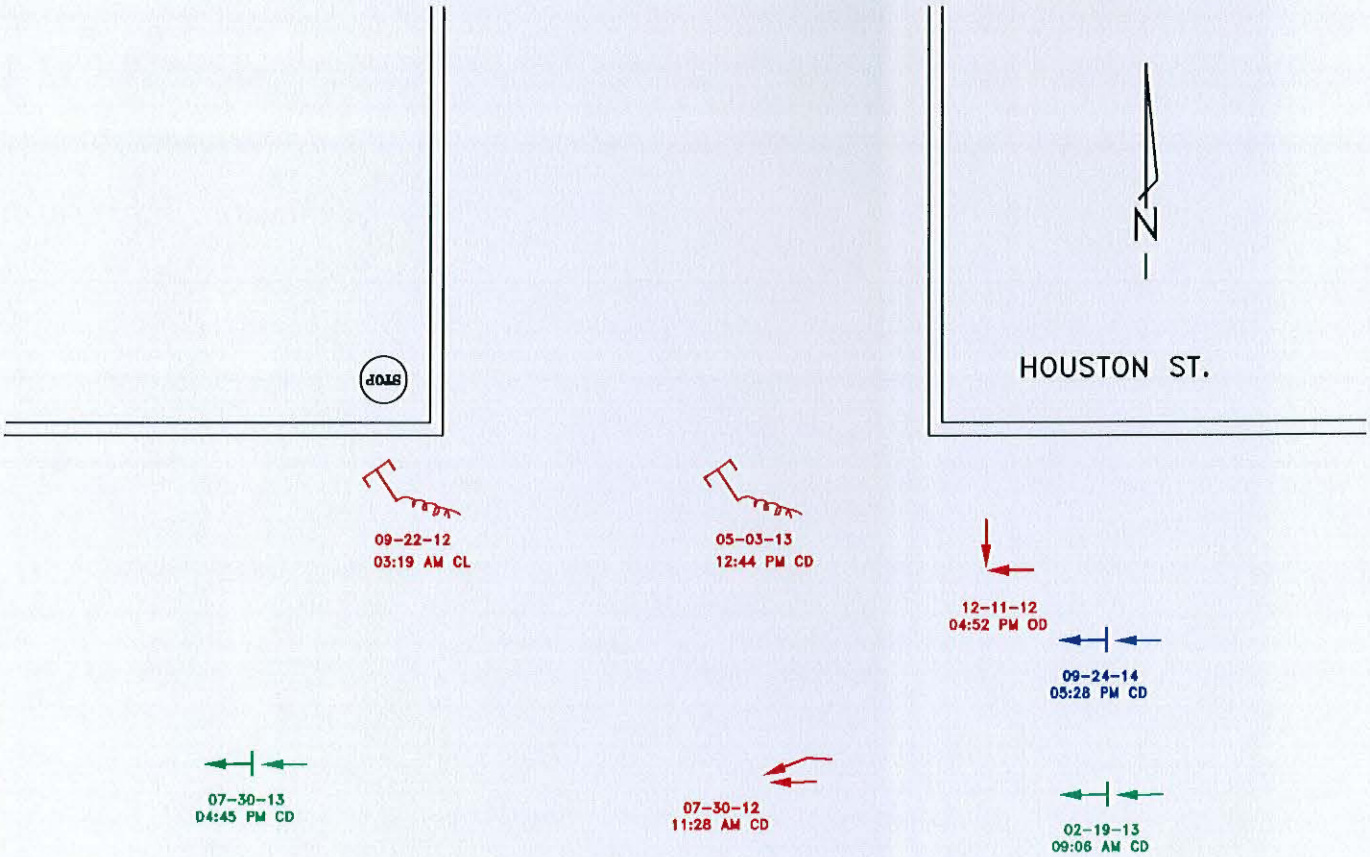
DATE: 1-12-15

Figure 4

COLLISION DIAGRAM

LOCATION: Houston St. / San Jorge Ave.

TIME PERIOD: 1-01-12 TO 12-31-14



ACCIDENT SUMMARY							
YEAR					2012	2013	2014
FATAL					0	0	0
INJURY					1	1	0
PDO					3	1	1
TOTAL					4	2	1

ROAD SURFACE

- C DRY, CLEAR
- W WET
- S SNOWY, ICY
- O OTHER

LIGHTING

- D DAYLIGHT
- N DARK, NO LIGHTS
- L DARK WITH STREET LIGHT

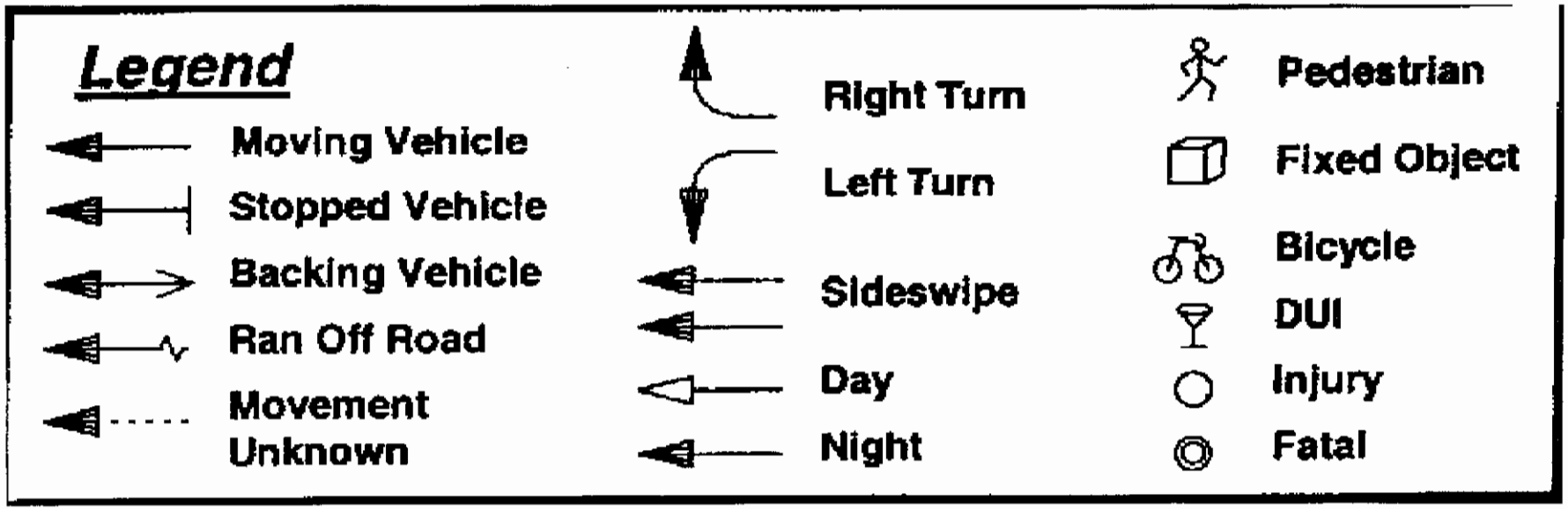
City of Laredo
Traffic Safety Division

PREPARED BY: Oscar Canales
APPROVED BY: Roberto Murillo, P.T.O.E.

DATE: 1-12-15 Figure 4

- Automobile, Pick-Up
- (T) Truck
- (B) Bus
- (M) Motorcycle
- (O) Other

SELECTED COLLISION DIAGRAM SYMBOLS



Discussion with possible action to add amendments to the Highway MTP/TIP to program Loop 20/U.S. 59 from International Blvd. to U.S. 59 Business for Engineering, Right-of-Way acquisition, and Construction.

Laredo Urban Transportation Study Metropolitan Transportation Organization 10 Year UTP Funding Projections

Fiscal Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Proposition 1 MPO Only*	$ 4,805,000.00	$ 4,730,000.00	$ 4,730,000.00	$ 4,730,000.00	$ 4,730,000.00	$ 4,730,000.00	$ 4,730,000.00	$ 4,730,000.00	$ 4,730,000.00	$ 4,730,000.00	$ 47,375,000.00
Proposition 7 MPO Only**			$ 9,260,000.00	$ 9,260,000.00	$ 10,834,200.00	$ 10,834,200.00	$ 12,134,304.00	$ 12,134,304.00	$ 13,590,420.48	$ 13,590,420.48	$ 91,637,848.96
Category 7 MPO	$ 3,850,000.00	$ 3,990,000.00	$ 4,050,000.00	$ 4,110,000.00	$ 4,180,000.00	$ 4,240,000.00	$ 4,300,000.00	$ 4,360,000.00	$ 4,420,000.00	$ 4,470,000.00	$ 41,970,000.00
CBI***	$ 18,225,055.82										$ 18,225,055.82
Subtotals	$ 26,880,055.82	$ 8,720,000.00	$ 18,040,000.00	$ 18,100,000.00	$ 19,744,200.00	$ 19,804,200.00	$ 21,164,304.00	$ 21,224,304.00	$ 22,740,420.48	$ 22,790,420.48	$ 199,207,904.78
TIP / STIP Years (2015-2018)											
UTP Years (2016-2025)											
Estimated Total Funding Available	**$ 26,880,055.82**	**$ 8,720,000.00**	**$ 18,040,000.00**	**$ 18,100,000.00**	**$ 19,744,200.00**	**$ 19,804,200.00**	**$ 21,164,304.00**	**$ 21,224,304.00**	**$ 22,740,420.48**	**$ 22,790,420.48**	**$ 199,207,904.78**

Obligated to Loop 20 @ I35 ($40 mil - current CC estimate)
Obligated to Loop 20 from International to I59 in current MTP in FY 2020
Obligated
Unobligated

Phase I Project Programming

Project	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
Loop 20 PS&E from International to I-35	$ 4,833,207.00										
Hachar Loop PS&E from FM 1472 to I-35 (interim section - 5 lane rural)	$ 1,500,000.00										
Airport Overpass and Roadway to US-59 ROW		$ 4,806,663.03									
LP 20 Airport Overpass and Rdwy to 59			$ 34,390,806.27								
University Overpass ROW				$ 3,606,471.79							
University Overpass Construction				$ 15,692,813.46							
Jacaman Overpass ROW					$ 8,807,487.54						
Jacaman Overpass Construction						$ 22,827,757.13					
Delmar Overpass ROW					$ 5,003,016.81						
Delmar Overpass Construction							$ 24,473,864.25				
Shiloh Overpass ROW								$ 13,288,291.63			
Shiloh Overpass Construction									$ 22,363,364.55		
Airport to Jacaman Rdwy ROW								$ 8,335,763.96			
Airport to Jacaman Rdwy Construction										$ 13,992,646.02	
Jacaman to University Roadway ROW										$ 5,274,323.21	
University to Delmar Road ROW										$ 1,763,924.83	
Unallocated Funds	$ 15,741,848.82	$ 19,655,185.79	$ 3,304,379.52	$ 2,105,094.27	$ 8,038,789.92	$ 5,015,232.79	$ 1,705,672.54	$ 1,305,920.94	$ 1,682,976.87	$ 3,442,503.30	

	ROW Phase
	Construction Phase

* Based on estimates, considered to be "reasonaby forseeable" for future I-69 corridor planning, ** Based on estimates, Remainder of the projects programmed in the outer years of the MTP totaling $130 Million + with escalation. All assumptions were based on current revenue estimates in the 2016 UTP and literature from TxDOT regarding Proposition 1 and 7 amounts. These amounts do not include Proposition 1 and/or 7 amounts that the TxDOT Laredo District may receive in addition to the disbursments to the LUTS MPO. This model is based on the assumption that Loop 20 will be a Non-Tolled corridor.*** includes a balance of $1,174,667.82 from the existing MPO allocation to the Loop 20 Project (CSJ: 0086-14-051).

Laredo Urban Transportation Study Metropolitan Transportation Organization MTP Long Term Funding Projections

Fiscal Year	2026**	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	
MPO Funds *	$ 26,232,923.78	$ 26,757,582.25	$ 27,292,733.90	$ 27,838,588.58	$ 28,395,360.35	$ 28,963,267.56	$ 29,542,532.91	$ 30,133,383.56	$ 30,736,051.24	$ 31,350,772.26	$ 31,977,787.71	$ 32,617,343.46	$ 33,269,690.33	$ 33,935,084.14	$ 34,613,785.82	$ 453,656,887.83
Subtotals	$ 26,232,923.78	$ 26,757,582.25	$ 27,292,733.90	$ 27,838,588.58	$ 28,395,360.35	$ 28,963,267.56	$ 29,542,532.91	$ 30,133,383.56	$ 30,736,051.24	$ 31,350,772.26	$ 31,977,787.71	$ 32,617,343.46	$ 33,269,690.33	$ 33,935,084.14	$ 34,613,785.82	$ 453,656,887.83
MTP Years (2016-2040)																
Estimated Total Funding Available	**$ 26,232,923.78**	**$ 26,757,582.25**	**$ 27,292,733.90**	**$ 27,838,588.58**	**$ 28,395,360.35**	**$ 28,963,267.56**	**$ 29,542,532.91**	**$ 30,133,383.56**	**$ 30,736,051.24**	**$ 31,350,772.26**	**$ 31,977,787.71**	**$ 32,617,343.46**	**$ 33,269,690.33**	**$ 33,935,084.14**	**$ 34,613,785.82**	**$ 453,656,887.83**

Unobligated

Phase I Project Programming

Project	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	
University to Delmar Road Construction	$ 5,543,240.54															
Delmar Road to Shiloh Road ROW	$ 3,499,993.73															
Delmar Road to Shiloh Road Const		$ 5,709,537.75														
Shiloh Road to Havana ROW	$ 10,027,904.04															
Shiloh Road to Havana Road Construction			$ 38,558,625.71													
Unallocated Funds	$ 7,161,785.47	$ 28,209,829.97	$ 16,943,938.16	$ 44,782,526.74	$ 73,177,887.09	$ 102,141,154.64	$ 131,683,687.55	$ 161,817,071.11	$ 192,553,122.35	$ 223,903,894.61	$ 255,880,882.32	$ 134,758,498.10	$ 168,028,188.43	$ 201,963,272.57	$ 236,577,058.39	

ROW Phase
Construction Phase

*Due to the Loop 20 corridor having an I-69 designation the outer years of the MTP need only be reasonably foreseeable for programming. Estimates are based on MPO dollars from the 2015-2024 UTP years and assume funding remains at anticipated 2025 levels.** Includes FY 2025 carryover balance

Project		I-35 Interchange Facility @ Loop 20 (CSJ: 0086-14-065) Scheduled letting: August 2016				
	ORIGINAL ESTIMATE - 7/20/15 by TxDOT					
ROW	0.00%	$0.00				
Construction Engineering	4.69%	$1,976,456.00				
2016 Construction Cost - TxDOT		$42,141,921.00				
Contingency	2.99%	$1,260,043.00				
Indirect	5.74%	$2,418,946.00				
Total Project Cost		$47,797,366.00				
	CURRENT LUTSMPO TIP LISTING - 7/20/15					
Funding by Category	Phase	Total	Federal	State	Local	
CBI*	Construction	39,100,000.00	31,280,000.00	7,820,000.00	0.00	
11 - District Discretionary	Construction	2,141,921.00	1,713,537.00	428,384.00	0.00	
TOTAL PROGRAMMED FUNDS		**41,241,921.00**				
	LATEST ESTIMATE - 10/1/15 - DEC					
Reconciliation						
Letting Year		2016				
Preliminary Engineering						
ROW	0.00%	$0.00				
Construction Engineering	4.69%	$1,976,456.00				
2016 Construction Cost**		$28,996,533.00				
Contingency	2.99%	$1,260,043.00				
Indirect	5.74%	$2,418,946.00				
Total Project Cost		$34,651,978.00				
	PROPOSED PROGRAMMING - Q4 2016					
Funding by Category	Phase	Total	Federal	State	Local	
CBI	Construction	22,049,612.00	17,639,689.60	4,409,922.40	0.00	
Proposition 1	Construction	4,805,000.00	0.00	4,805,000.00	0.00	
11 - District Discretionary	Construction	2,141,921.00	1,713,537.00	428,384.00	0.00	
TOTAL PROGRAMMED FUNDS		28,996,533.00				
CBI FUNDS to Redistribute from I 35 project		**$17,050,388.00**				

Note: * based on the 9/18/15 LUTS MPO Meeting request to shift $300,000 for the Hachar Loop Phase II advanced planning costs to Webb County from CBI. ** Based on most recent project cost estimate by DEC and includes an additional $1.0 million to fund recent ramp changes

Project		Loop 20 PS&E from International to I-35 Scheduled letting: March 2016				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$64,413,840.57				
Construction Cost		$170,704,077.40				
Construction Engineering						
Contingency						
Indirect						
PS&E*	**2.83%**	**$4,833,207.00**				
Total Project Cost		$239,951,124.97				
YOE Cost		$4,833,207.00				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
CBI	PS&E	4,833,207.00	3,866,565.60	966,641.40	0.00	
TOTAL PROGRAMMED FUNDS		4,833,207.00				
CBI FUNDS to Redistribute		**$13,391,848.82**				

* based off of the latest estimate including the design of the Hike and Bike along Loop 20, requires negotiation and approval of fee by TxDOT.

Project		Hachar Loop PS&E from FM 1472 to I-35 (interim section - 5 lane rural) Scheduled letting: July 2016				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$13,538,062.00				
Construction Cost		$36,317,276.00				
Construction Engineering	4.50%	$1,634,277.42				
Contingency	6.50%	$2,360,622.94				
Indirect	6.20%	$2,251,671.11				
PS&E *	**4.13%**	**$1,500,000.00**				
Total Project Cost		$57,601,909.47				
YOE Cost						
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
CBI	PS&E	1,500,000.00	1,200,000.00	300,000.00		
TOTAL PROGRAMMED FUNDS		1,500,000.00				
CBI FUNDS to Redistribute		**$11,891,848.82**				

* based off of the latest construction estimate , requires negotiation and approval of fee by TxDOT. Assumes roadway may be taken on system.

Project		Airport Overpass and Roadway to US-59 ROW Scheduled letting: Jan 2017				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$4,806,663.03				
Construction Cost		$34,390,806.27				
Construction Engineering	4.50%	$1,547,586.28				
Contingency	6.50%	$2,235,402.41				
Indirect	6.20%	$2,132,229.99				
PS&E						
Total Project Cost*		$45,112,687.98				
YOE Cost		$4,806,663.03				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	ROW	4,730,000.00	0.00	4,730,000.00	0.00	
Category 7	ROW	76,663.03	61,330.42	15,332.61	0.00	
TOTAL PROGRAMMED FUNDS		4,806,663.03	61,330.42	4,745,332.61	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		LP 20 Airport Overpass and Rdwy to 59 Scheduled letting: May 2018				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$4,806,663.03				
Construction Cost		$34,390,806.27				
Construction Engineering	4.50%	$1,547,586.28				
Contingency	6.50%	$2,235,402.41				
Indirect	6.20%	$2,132,229.99				
PS&E						
Total Project Cost*		$45,112,687.98				
YOE Cost		$34,390,806.27				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	Construction	4,730,000.00	0.00	4,730,000.00	0.00	
Proposition 7	Construction	9,260,000.00	0.00	9,260,000.00	0.00	
Category 7	Construction	11,813,336.97	9,450,669.58	2,362,667.39	0.00	
CBI	Construction	8,587,469.30	6,869,975.44	1,717,493.86	0.00	
TOTAL PROGRAMMED FUNDS		34,390,806.27	16,320,645.02	18,070,161.25	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		University Overpass ROW Scheduled letting: September 2018 - FY 2019				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$3,606,471.79				
Construction Cost		$14,361,147.35				
Construction Engineering	4.50%	$646,251.63				
Contingency	6.50%	$933,474.58				
Indirect	6.20%	$890,391.14				
PS&E						
Total Project Cost*		$20,437,736.49				
YOE Cost		$3,606,471.79				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	ROW	3,606,471.79	0.00	3,606,471.79	0.00	
TOTAL PROGRAMMED FUNDS		3,606,471.79	0.00	3,606,471.79	7,212,943.58	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		University Overpass Construction Scheduled letting: August 2019				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$3,606,471.79				
Construction Cost		$14,361,147.35				
Construction Engineering	4.50%	$646,251.63				
Contingency	6.50%	$933,474.58				
Indirect	6.20%	$890,391.14				
PS&E						
Total Project Cost*		$20,437,736.49				
YOE Cost		$15,692,813.46				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	Construction	1,123,528.21	0.00	1,123,528.21	0.00	
Proposition 7	Construction	9,260,000.00	0.00	9,260,000.00	0.00	
CBI	Construciton	3,304,379.52	2,643,503.62	660,875.90	0.00	
Category 7	Construction	2,004,905.73	1,603,924.59	400,981.15	0.00	
TOTAL PROGRAMMED FUNDS		15,692,813.46	4,247,428.20	11,445,385.26	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Jacaman Overpass ROW Scheduled letting: September 2019 - FY 2020				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$8,807,487.54				
Construction Cost		$19,691,423.83				
Construction Engineering	4.50%	$886,114.07				
Contingency	6.50%	$1,279,942.55				
Indirect	6.20%	$1,220,868.28				
PS&E						
Total Project Cost*		$31,885,836.27				
YOE Cost		$8,807,487.54				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	Construction	$4,730,000.00	0.00	4,730,000.00	0.00	
Proposition 7	Construction	4,077,487.54	0.00	4,077,487.54	0.00	
TOTAL PROGRAMMED FUNDS		8,807,487.54	0.00	8,807,487.54	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Delmar Overpass ROW Scheduled letting: September 2019 - FY 2020				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$5,003,016.81				
Construction Cost		$20,496,476.01				
Construction Engineering	4.50%	$922,341.42				
Contingency	6.50%	$1,332,270.94				
Indirect	6.20%	$1,270,781.51				
PS&E						
Total Project Cost*		$29,024,886.69				
YOE Cost		$5,003,016.81				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 7	ROW	5,003,016.81	0.00	5,003,016.81	0.00	
TOTAL PROGRAMMED FUNDS		5,003,016.81	0.00	5,003,016.81	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Jacaman Overpass Construction Scheduled letting: September 2020 - FY 2021				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$8,807,487.54				
Construction Cost		$19,691,423.83				
Construction Engineering	4.50%	$886,114.07				
Contingency	6.50%	$1,279,942.55				
Indirect	6.20%	$1,220,868.28				
PS&E						
Total Project Cost*		$31,885,836.27				
YOE Cost		$22,827,757.13				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	Construction	4,730,000.00	0.00	4,730,000.00	0.00	
Proposition 7	Construction	12,587,895.65	0.00	12,587,895.65	0.00	
Category 7	Construction	5,509,861.48	4,407,889.19	1,101,972.30	0.00	
TOTAL PROGRAMMED FUNDS		22,827,757.13	4,407,889.19	18,419,867.95	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Delmar Overpass Construction Scheduled letting: September 2021 - FY 2022				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$5,003,016.81				
Construction Cost		$20,496,476.01				
Construction Engineering	4.50%	$922,341.42				
Contingency	6.50%	$1,332,270.94				
Indirect	6.20%	$1,270,781.51				
PS&E						
Total Project Cost*		$29,024,886.69				
YOE Cost		$24,473,864.25				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	Construction	4,730,000.00	0.00	4,730,000.00	0.00	
Proposition 7	Construction	12,134,304.00	0.00	12,134,304.00	0.00	
Category 7	Construction	7,609,560.25	6,087,648.20	1,521,912.05	0.00	
Local Funds	**Construction**		**0.00**	**0.00**	**0.00**	
TOTAL PROGRAMMED FUNDS		24,473,864.25	6,087,648.20	18,386,216.05	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Shiloh Overpass ROW Scheduled letting: September 2022 - FY 2023				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$13,288,291.63				
Construction Cost		$18,183,461.88				
Construction Engineering	4.50%	$818,255.78				
Contingency	6.50%	$1,181,925.02				
Indirect	6.20%	$1,127,374.64				
PS&E						
Total Project Cost*		$34,599,308.96				
YOE Cost		$13,288,291.63				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	Construction	4,730,000.00	0.00	4,730,000.00	0.00	
Proposition 7	Construction	8,558,291.63	0.00	8,558,291.63	0.00	
TOTAL PROGRAMMED FUNDS		13,288,291.63	0.00	13,288,291.63	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Airport to Jacaman Rdwy ROW Scheduled letting: September 2022 - FY 2023				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$8,335,763.96				
Construction Cost		$11,045,923.98				
Construction Engineering	4.50%	$497,066.58				
Contingency	6.50%	$717,985.06				
Indirect	6.20%	$684,847.29				
PS&E						
Total Project Cost*		$21,281,586.87				
YOE Cost		$8,335,763.96				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 7	Construction	3,576,012.37	0.00	3,576,012.37	0.00	
Category 7	Construction	4,759,751.59	3,807,801.27	951,950.32	0.00	
Local Funds	**Construction**		**0.00**	**0.00**	**0.00**	
TOTAL PROGRAMMED FUNDS		8,335,763.96	3,807,801.27	4,527,962.69	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Shiloh Overpass Construction Scheduled letting: September 2023 - FY 2024				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$13,288,291.63				
Construction Cost		$18,183,461.88				
Construction Engineering	4.50%	$818,255.78				
Contingency	6.50%	$1,181,925.02				
Indirect	6.20%	$1,127,374.64				
PS&E						
Total Project Cost*		$34,599,308.96				
YOE Cost		$22,363,364.55				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	Construction	4,730,000.00	0.00	4,730,000.00	0.00	
Proposition 7	Construction	13,590,420.48	0.00	13,590,420.48	0.00	
Category 7	Construction	4,042,944.07	3,234,355.26	808,588.81	0.00	
TOTAL PROGRAMMED FUNDS		22,363,364.55	3,234,355.26	19,129,009.29	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Airport to Jacaman Rdwy Construction Scheduled letting: September 2024 - FY 2025				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$8,335,763.96				
Construction Cost		$11,045,923.98				
Construction Engineering	4.50%	$497,066.58				
Contingency	6.50%	$717,985.06				
Indirect	6.20%	$684,847.29				
PS&E						
Total Project Cost*		$21,281,586.87				
YOE Cost		$13,992,646.02				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Proposition 1	Construction	402,225.54	0.00	402,225.54	0.00	
Proposition 7	Construction	13,590,420.48	0.00	13,590,420.48	0.00	
TOTAL PROGRAMMED FUNDS		13,992,646.02	0.00	13,992,646.02	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Jacaman to University Roadway ROW Scheduled letting: September 2024 - FY 2025				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$5,274,323.21				
Construction Cost		$12,745,296.90				
Construction Engineering	4.50%	$573,538.36				
Contingency	6.50%	$828,444.30				
Indirect	6.20%	$790,208.41				
PS&E						
Total Project Cost*		$20,211,811.17				
YOE Cost		$5,274,323.21				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Category 7	Construction	946,548.75	757,239.00	189,309.75	0.00	
Proposition 1	Construction	4,327,774.46	0.00	4,327,774.46	0.00	
TOTAL PROGRAMMED FUNDS		5,274,323.21	757,239.00	4,517,084.21	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		University to Delmar Road ROW Scheduled letting: September 2024 - FY 2025				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$1,763,924.83				
Construction Cost		$4,248,432.30				
Construction Engineering	4.50%	$191,179.45				
Contingency	6.50%	$276,148.10				
Indirect	6.20%	$263,402.80				
PS&E						
Total Project Cost*		$6,743,087.48				
YOE Cost		$1,763,924.83				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
Category 7	ROW	1,763,924.83	1,411,139.86	352,784.97	0.00	
TOTAL PROGRAMMED FUNDS		1,763,924.83	1,411,139.86	352,784.97	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		University to Delmar Road Construction Scheduled letting: FY 2026				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$1,763,924.83				
Construction Cost		$4,248,432.30				
Construction Engineering	4.50%	$191,179.45				
Contingency	6.50%	$276,148.10				
Indirect	6.20%	$263,402.80				
PS&E						
Total Project Cost*		$6,743,087.48				
YOE Cost		$5,543,240.54				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
State / Federal MPO Funds	ROW	5,543,240.54	TBD	TBD	TBD	
TOTAL PROGRAMMED FUNDS		5,543,240.54	0.00	0.00	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Delmar Road to Shiloh Road ROW Scheduled letting: FY 2026				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$3,499,993.73				
Construction Cost		$4,248,432.30				
Construction Engineering	4.50%	$191,179.45				
Contingency	6.50%	$276,148.10				
Indirect	6.20%	$263,402.80				
PS&E						
Total Project Cost*		$8,479,156.38				
YOE Cost		$3,499,993.73				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
State / Federal MPO Funds	ROW	3,499,993.73	TBD	TBD	TBD	
TOTAL PROGRAMMED FUNDS		3,499,993.73	0.00	0.00	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Shiloh Road to Havana ROW Scheduled letting: FY 2026				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$10,027,904.04				
Construction Cost		$27,044,244.28				
Construction Engineering	4.50%	$1,216,990.99				
Contingency	6.50%	$1,757,875.88				
Indirect	6.20%	$1,676,743.15				
PS&E						
Total Project Cost*		$41,723,758.34				
YOE Cost		$10,027,904.04				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
State / Federal MPO Funds	ROW	10,027,904.04	TBD	TBD	TBD	
TOTAL PROGRAMMED FUNDS		10,027,904.04	0.00	0.00	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Delmar Road to Shiloh Road Const Scheduled letting: FY 2027				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$1,763,924.83				
Construction Cost		$4,248,432.30				
Construction Engineering	4.50%	$191,179.45				
Contingency	6.50%	$276,148.10				
Indirect	6.20%	$263,402.80				
PS&E						
Total Project Cost*		$6,743,087.48				
YOE Cost		$5,709,537.75				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
State / Federal MPO Funds	ROW	5,709,537.75	TBD	TBD	TBD	
TOTAL PROGRAMMED FUNDS		5,709,537.75	0.00	0.00	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Project		Shiloh Road to Havana Road Construction Scheduled letting: FY 2028				
	LATEST ESTIMATE - 10/1/15 - DEC					
Preliminary Engineering						
ROW		$10,027,904.04				
Construction Cost		$27,044,244.28				
Construction Engineering	4.50%	$1,216,990.99				
Contingency	6.50%	$1,757,875.88				
Indirect	6.20%	$1,676,743.15				
PS&E						
Total Project Cost*		$41,723,758.34				
YOE Cost		$38,558,625.71				
	PROPOSED PROGRAMMING					
Funding by Category	Phase	Total	Federal	State	Local	
State / Federal MPO Funds	ROW	38,558,625.71	TBD	TBD	TBD	
TOTAL PROGRAMMED FUNDS		38,558,625.71	0.00	0.00	0.00	

*no escalation was used on lettings within the 2015-2018 TIP years or ROW costs, outside of FY 2018 3% escalation per year was used

Discussion with possible action on Hachar Road.

Discussion with possible action on Mines Road.

Presentation by the Texas Transportation Institute (TTI) on the FM 1472 medium-range improvement strategies with Hachar and Vallecillo Roads and any possible action related thereto.

F. Supporting the City of Rio Bravo's non-urban Transportation Alternatives Program application entitled "Rio Bravo Safe Path and Safe Routes to School" as submitted to the TxDOT.

TRANSPORTATION ALTERNATIVES PROGRAM
2015 NOMINATION FORM

Additional information can be found in TxDOT's Transportation Alternatives Program (TAP) Guide 2015
www.txdot.gov/inside-txdot/division/public-transportation/local-assistance.html

1. Project Sponsor Name

City of Rio Bravo

2. Project Sponsor (Type of Organization/Agency/Authority)

Local Government

3. Project Sponsor Contact Information (Authorized Representative)

Contact Person:	Francisco I. Pena, M.D.		
Title:	Mayor		
Mailing Address:	1701 Centeno Lane		
City:	Rio Bravo	State:	TX
Zip Code:	78046		
Daytime Telephone:	956-790-9500		
Email:	cityofriobravo@gmail.com		

4. Project Name

Rio Bravo Shared Paths & Safe Routes to Schools

5. Eligible Project Activity

(2) Construction of infrastructure-related projects and systems that will provide safer routes for non-drivers

6. Project Location Information

County: Webb TxDOT District: Laredo

If multiple locations, include primary location in text box below and provide a separate list of proposed project locations and limits. (Label attachment as 'Project Location Information - Attachment A')

Project Limits (lat/long) From: latitude (27° 21' 53. To: latitude (27° 21' 59.42° N); longitude

Project Length (feet/miles), if applicable: 9,340 ft

State of Texas/Legislature

House of Representatives

District #:	80	Name:	Rep. Tracy King
District #:		Name:	
District #:		Name:	

State Senate

District #:	21	Name:	Sen. Judith Zaffirini
District #:		Name:	
District #:		Name:	

Federal Congressional

House of Representatives

District #:	28	Name:	Rep. Henry Cuellar
District #:		Name:	
District #:		Name:	

7. Project Description

Provide a well-developed narrative of the project, describe the eligible activity as defined in TxDOT's TAP Program Rules and 2015 TAP Program Guide and illustrate the benefits the project will provide to the surface transportation system. Summarize the work activities to be performed.

(Limited to 3500 Characters with spaces)

The City of Rio Bravo, Texas was decreed a Home-Rule Charter City certified on November 11, 2014. As a community which has progressed from its origins as an unincorporated "colonia," the City of Rio Bravo proposes, as its first municipal project, a Transportation Alternatives Program infrastructure-related project which will provide safe routes for non-drivers and improve the ability of students to walk and bicycle to school. The proposed project, titled "Rio Bravo Safe Paths & Safe Routes to Schools" provides access to public facilities--the Rio Bravo City Hall and the Webb County Community Center and Recreation Area--as well as two schools, the Salvador Garcia Middle School and the Little Folks Webb County Head Start Center. The project will improve safety by providing safer accommodations through shared sidewalk/jogging pathways, improved crosswalks and ADA-compliant wheelchair ramps. The project supports implementation of active mobility through walking and bicycling while linking residential areas to schools and public facilities. Barriers are reduced by improving pedestrian and disabled crossings at street intersections. The 2010 Census population was 4,794 persons. Also, according to the American Community Survey (ACS) 2011-2013 Five-Year Estimates (Table S1401), the City of Rio Bravo has 235 children enrolled in kindergarten or nursery school/preschool programs, 13.9% of the population 3 years and over enrolled in school. The State of Texas, in comparison, has 6.4% of the population similarly enrolled. The Salvador Garcia Middle School of the United Independent School District has 470 students enrolled as of 2013-14, according to the Academic Performance Report of the Texas Education Agency. According to ACS (Table DP03), there are 1,160 households with a median income in 2013 of $27,174 and 84.9% of families with related children under 5 years have incomes below the poverty level. The proposed project envisions installation 9,370 feet of shared sidewalk and jogging trail pathways connecting the Salvador Garcia Middle School, the Little Folks Webb County Head Start Center, the Rio Bravo City Hall, and the Webb County Community Center along a main route of Centeno Lane and routes around the Webb County Water Plant. The project will entail a total of 37,360 square feel of concrete sidewalk 4 feet in width at 3,000 psi, 4 inches thick with fiber mesh and a 3 foot wide jogging trail (28,020 square feet) with a 1 1/2 inch thick pervious rubber top layer on a base of crushed rock 2 inches thick. Disabled (wheelchair) Type 1 access ramps will be installed per TXDOT specifications with additional signage and crosswalk markings. Residential 4 inch thick driveway access ramps will be included in the construction activities. Erection of retaining walls on the north side of the Webb County Water Plant along Paseo de Danubio Road (864 feet) and the east side of the plant along the City of Rio Bravo easement (402 feet) will also be required.

8. Project Details (A location map showing project limits is a minimum requirement)

Provide project plans, location map(s), images, diagrams, & photographs to describe the proposed project in more detail (Label attachment as 'Project Details - Attachment B')
(No more than 10 pieces)

9. Official Project Sponsor Funding Resolution

(Label attachment as 'Certification of Funding and Support - Attachment C')
(No more than 10 pieces)

10. MPO/COG Transportation Improvement Program (TIP) Letter (if applicable)

(Label attachment as 'MPO/COG Letter - Attachment D')
(No more than 10 pieces)

11. Evidence of Public Involvement and Support

a. Provide a summary of the public's involvement and support in the text box below. Include dates and information about public meetings and events held to discuss this project.

b. Attach letters and other documentary evidence of the Public's involvement and support. (Label attachments as 'Evidence of Public Involvement and Support - Attachment E') (No more than 10 pieces)

(Limited to 1,640 Characters with spaces)

A public hearing was held at the Rio Bravo City Hall, 1701 Centeno Lane, at 6 p.m. on April 17, 2015 to discuss the proposed project to the Transportation Alternatives Program. A visual presentation consisting of map displays and photo illustrations of shared sidewalk and jogging trail installations with a question and answer session was conducted. The presentation and Q&A sessions were conducted in English and Spanish to facilitate participation by attendees.

12. Project Priority Ranking by Project Sponsor (*Examples: 1 of 1, 2 of 4, 1 of 3*)

1 of 1

13. Property Ownership and Acquisition Information

All proposals must provide documentation of the project sponsor's property rights by title of ownership, lease, or easement for all property within the project limits. Answer the following questions:

a. Is the property needed for the project already acquired?

If No - How will property be acquired? Describe in the text box below. Include a commitment letter by current owner stating that the property's interest will be transferred to the project sponsor.)
If Yes - When was the property acquired and how? Describe in the text box below.

b. Was the property acquired in accordance with the Uniform Relocation Assistance and Real Property Acquisition Act?

(Label attachments as 'Property Ownership and Acquisition Information - Attachment F')
(No more than 10 pieces)

a. The property needed for the project is already acquired. Property rights are derived from City of Rio Bravo easements.(Attachment F: _____)
b. Uniform Relocation Assistance and Real Property Acquisition Act provisions are not applicable.

14. SHPO Certificate of Eligibility - National Register of Historic Places (*if applicable*) (Choose)

Projects proposing work on historic properties must include the required documentation from the State Historic Preservation Officer (SHPO) of the Texas Historical Commission.
(Label attachment as 'SHPO Certificate of Eligibility - Attachment G')

15. Scenic Easement/Historic Site Designation *(if applicable)* No

Projects proposing acquisition of scenic easements and scenic or historic sites must provide documentary evidence from the appropriate city, county, state or national entity indicating official designation. (Label attachment as 'Scenic Easement/Historic Site Designation - Attachment H')

16. Evaluation of Work Involving Environmental Mitigation *(if applicable)* No

Projects proposing environmental mitigation must provide documentary evidence from the Texas Commision on Environmental Quality or the Texas Parks and Wildlife Department indicating their technical evaluation of the project.
(Label attachment as 'Evaluation of Work Involving Environmental Mitigation - Attachment I')

17. Railroad Right of Entry Letter/Agreement *(if applicable)* No

Projects proposing to encroach or cross railroad right of way must include documentary evidence from the railroad granting a right of entry or an executed encroachment agreement.
(Label attachment as 'Railroad Right of Entry Letter/Agreement - Attachment J')

18. Local Bicycle Plan *(if applicable)* No

Projects proposing to build facilities for bicycles must include documentary evidence stating that the project has been included in the entity's bicycle plan or comprehensive plan, if applicable, or provide evidence of support for the project from the local jurisdiction if the project limits include property not owned by the project sponsor. (Label attachment as 'Local Bicycle Plan - Attachment K')

19. Safe Routes to School (SRTS) Plan *(If applicable)* Yes

Construction of infrastructure-related projects to improve the ability of students to walk and bicycle to school must include documentary evidence of coordination with schools.
(Label attachment as 'SRTS Plan - Attachment L')

20. Projected Time Estimate

Estimate the amount of time it will take to complete the project from start to finish. Approximate the time required for each activity. The activities can run concurrently causing the total time to be less than the total number of months designated for project activities. Consider time as outlined:

Months	
3	**Planning Activities** *(Executing AFA with TxDOT, hiring consultant, planning, schematic and design, utility relocation, etc.)*
2	**Environmental Clearance** *(Assessments, possible mitigation for hazardous materials, permits, review by THC, COE, etc.)*
1	**ROW Acquisition** *(Surveying, appraisals, title transfer, clearance, etc.)*
2	**Project Design and Plan Preparation of PS&E Package** *(Including PS&E Review by TxDOT District, Austin Divisions, TDLR, and other agencies as needed.)*
6	**Project Construction/Implementation** *(Advertising/hiring of construction contractor, possible demolition, construction, inspection, etc.)*
2	**Other** Public information, official ordinances (parking restrictions, school zone)

Projected Time in Months 14

21. Maintenance and Operations

Estimate maintenance and operations costs of the project. If applicable, determine the amount of any anticipated annual income that may be derived from the project.
Additional documentation may be included (Label attachment as 'Maintenance Plan - Attachment M')

Maintenance $ $14,010 Operations $ Income $

Identify all parties that will be responsible for project maintenance and operations after construction:

The City of Rio Bravo will be responsible for project maintenance and operations for 10 years after completion of the project.

TxDOT 2015 Transportation Alternatives Program

Supplemental Information - Nonurban Projects
(Population Areas 5,000 or less)

Supplemental Submission
Deadline October 26, 2015

22. Itemized Budget Section

Provide a detailed cost estimate of all costructions costs in the format provided below.

Itemized Construction Cost Estimate:

Work Activities	Quantity	Unit	Unit Price	Amount
Concrete sidewalks, 4" depth, 4 ft wide	4,147	SY	$46	$188,854
Jogging trail, 3.5" depth, 3 ft wide	3,110	SY	$46	$141,629
Removing concrete driveways, 35	383	SY	$14	$5,550
Driveway access ramps, 35	383	SY	$51	$19,424
Wheelchair access ramps, Type 10	16	EA	$1,611	$25,784
Signage	12	EA	$42	$509
Signage installation	12	EA	$29	$348
Pavement markings, 10 crossings	1,440	LF	$0	$358
ROW clearance	2	AC	$200	$400
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
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				$0
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				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
			Subtotal:	$382,856

Itemized Budget Section (continued)

Provide a detailed cost estimate of all costructions costs in the format provided below.

Itemized Construction Cost Estimate (continued):

Work Activities	Quantity	Unit	Unit Price	Amount
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
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				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
			Total:	$382,856

Itemized Budget Section (*continued*)

Provide a detailed cost estimate of all additional **construction-related costs** in the format provided below.

Additional Construction-Related Costs:

Work Activities	Quantity	Unit	Unit Price	Amount
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
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				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
			Total:	$0

23. In-Kind Contributions (proposed as a portion of the local match)

In-kind contribution(s) may only include actual and documented preconstruction or construction-related costs previously incurred by the project sponsor that are otherwise eligible for reimbursement under applicable statutes and regulations. In-kind contributions cannot be used to match the department's administrative costs. Provide documentation of In-Kind costs.
(Label attachments 'In-Kind Contributions - Attachment N')

Property Acquisition Costs:

Associated Property Costs:	Quantity	Unit	Unit Price	Value
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
			Total:	$0

Preliminary Engineering Costs:

Material:	Quantity	Unit	Unit Price	Value
Preliminary Engineering, Phase A	1		$6,100	$6,100
Surveying, Phase B	1		$7,500	$7,500
Final Design, Phase C	1		$28,900	$28,900
Final Documentation, Phase D	1		$3,000	$3,000
Testing Laboratory	1		$19,800	$19,800
ADA State Review Fees & Inspections	1		$5,700	$5,700
				$0
				$0
				$0
				$0
				$0
				$0
				$0
			Total:	$71,000

Material Costs:

Material:	Quantity	Unit	Unit Price	Value
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
				$0
			Total:	$0

24. Project Budget Summary

Itemized Construction Cost totals on pages 6 & 7 will automatically populate lines 1 & 2 below.

Itemized Construction Cost Estimate (pages 5-6):			1.	$382,856
Other Construction-Related Costs (page 7):			2.	$0
Total Construction Costs (Line 1 + Line 2):			3.	$382,856
TxDOT Administrative Expenses (15% of Line 3):			4.	$57,428
Total Project Cost (Line 3 + Line 4):			5.	**$440,284**
Federal Funds Requested (80% max.):	**80%**	**of Line 5**	**6.**	**$352,227**
Local Match (20% min.):	**20%**	**of Line 5**	**7.**	**$88,057**

Project Sponsors may increase the local match by adjusting the percentage amount above. The minimum amount of local match required is 20%, subject to any allowable adjustment for economiccally disadvantaged counties, as outlined below.

NOTE: Reductions for economically disadvantaged counties and In-kind contributions below may only be applied to 20% match for authorized construction and construction-related costs.

Economically Disadvantaged Counties Program (EDCP) - Based on Total Construction Cost (line 3)

EDCP Adjustment	Choose if Applicable	=	$0
Additional EDCP		=	$0
Total EDCP Adjustment		=	**$0**

Adjusted Cash Match Required (Line 7 - Total EDC Adjustment):	8.	$88,057

Approved In-kind contributions may reduce the amount of cash needed to meet the local match requirement. If applicable, itemized In-kind costs identified on page 8 will automatically populate boxes below. **Eligibility of in-kind costs will be verified as part of project evaluation.**

Property Acquisition Costs	$0
Preliminary Engineering Costs	$71,000
Material Costs	$0
Total In-Kind Contribution:	**$71,000**

State Participation for ECDP Adjustment (Eligibility Review)	9.	**$0**
Total Federal Funds Requested (Line 24 + Line 27 on Page 10)	10.	**$409,027**
Total Local Cash Match Required (Line 30 + Line 31 on Page 10)	11.	**$31,257**

26. Project Commitment ◉ No

By submitting an application, the project sponsor commits that if this project is selected for funding, the project will be brought to a successful bid award within three years from selection by the Texas Transportation Commision.

The construction plans for this project are currently: ☐ Complete ☑ Not Started ☐ % Complete

Signature

Print Name

Date *Telephone Number*

If changes to the budget information are proposed, section 26 must be completed by a representative from the local entity with signature authority.

Submission of supplemental information is due to TxDOT on or before 5:00 p.m., CDT, on Monday, October 26, 2015. (See page 3 of TxDOT's 2015 Program Guide for delivery instructions)

Breakdown of Local Match for Projects with EDCP Reduction and/or In-Kind Contributions (Based on Costs Identified on Page 9)

All project costs identified for Economically Disadvantaged Counties Program (EDCP) reduction and/or identified as In-kind contribution(s) must be reviewed for eligibility by TxDOT and/or FHWA.

Construction Cost Available for In-kind Consideration

Total Project Cost (Line 5 on page 9)	12.	**$440,284**
TxDOT Administrative Cost (15% of line 4 on Page 9)	13.	$57,428
Federal Construction Amount With EDCP Reduction (EDCP % identified on Page 9)	14.	$0
Eligible Construction Amount for In-kind Consideration (Line 12 - Line 13 - Line 14)	15.	$382,856

Approved In-kind contributions may reduce the amount of cash needed to meet the local match requirement. If applicable, itemized In-kind costs identified on page 8 will automatically populate In-kind boxes on page 9 and the "Total In-kind" amount identified on page 9 will be shown on Lines 17 and 21 below.
Eligibility of In-kind costs will be verified as part of project evaluation.

Project Value Eligible for In-kind Match Contribution (EDCP match portion not included)

Eligible Construction Amount for In-kind consideration (Line 15)	16.	$382,856
Eligible In-kind Contribution (In-kind Total from page 9 or a maximum 25% of line 15, whichever is less)	17.	$71,000
Total Value for Federal Consideration (line 16 + line 17)	18.	$453,856

Eligible Federal Match

Federal Construction Match (80% maximum of line 14 + Line 18)	19.	$363,085

Local Match Required

Local Match for Construction (20% minimum of line 18)	20.	$90,771
Eligible In-kind Contribution (Total In-kind Contribution on page 9 or a maximum 25% of line 15 whichever is less)	21.	$71,000
Local Cash Match Required (Line 20 - Line 21)	22.	$19,771

Cost Participation for EDCP and In-kind Contribution(s) Must be Approved by TxDOT and/or FHWA

Construction Cost Participation

State Participation for Eligible EDCP Match (Total EDCP Adjustment on Page 9)	23.	$0
Federal Participation (Line 19)	24.	$363,085
Local Cash Match for Construction (Line 22)	25.	$19,771
TOTAL CONSTRUCTION COST	**26.**	**$382,856**

TxDOT Administrative Cost Participation

Federal Participation for TxDOT Admin. Cost (80% max. of Line 4 on Page 9)	27.	$45,943
Local Cash Match for TxDOT Admin. Cost (20% min. of Line 4 on Page 9)	28.	$11,486
TOTAL TxDOT ADMINISTRATIVE COST	**29.**	**$57,428**

Local Cash Match Required

Local Cash Match for Construction (Line 22)	30.	$19,771
Local Cash Match for TxDOT Administrative Costs (20% min.of Line 4 on page 9)	31.	$11,486
TOTAL LOCAL CASH MATCH	**32.**	**$31,257**

Status report on the Regional Mobility Authority (RMA).