400 Seventh Street, S.W.
Washington, D.C. 20590

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

Dear Crash Data Researchers/Users:

Thank you for choosing crash data from the National Highway Traffic Safety Administration (NHTSA) for your research or other use. The information contained in this motor vehicle crash report is collected, maintained and distributed in accordance with Public Law 89-564. In accordance with this Public Law, NHTSA is required not to release any case information until completion of quality control procedures. These procedures include a review of the case material to extract all names, licenses and registration numbers, non-coded interview material, non-research related researcher comments in the margins, non-factual data, and the production number portion of the vehicle identification number (VIN).

If you requested NHTSA to query its database files in order to identify a specific crash, then that query was made using non-personal descriptors you provided for use in our search. This motor vehicle crash may have been identified from a data search and matches the general, non-personal descriptors you provided, but we cannot confirm that this is the specific crash report you requested.

If you have any questions with regard to the above procedures, please contact the Field Operations Branch, Crash Investigation Division, National Center for Statistics and Analysis at 202-366-4820. Again, please be advised that we cannot confirm that this is the case that you have specifically requested nor can we certify the information to be correct.

*** *** ***

U.S. Department of Transportation
National Highway Traffic Safety Administration

CASE SUMMARY

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

PSU 08 CASE NO. 021A TYPE OF ACCIDENT Car and van lateral move head-on collition-fatal

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

(Provide a summary of the accident sequence as well as any particular event of the accident that is noteworthy. Injury mechanism and vehicle crashworthiness is the focus, not driver culpability. Do not include any personal identifiers.)

V1 was traveling SE in the left lane of a 3-lane undivided roadway, negociating a left to right curve in the road. V2 was traveling NW on the same roadway, approaching V1 from the opposite direction, and also negociating a curve. V1 crossed over the center yellow lines, and the front right portion of V1 impacted head-on with the front right portion of V2. V2 attempted to steer left in avoidance. V2 rotated sharply clockwise and came to rest facing NE across the left on-coming lane. V1 moved counterclockwise and impacted a barrier curb with the under-carriage of V1, before coming to rest, partially off the left roadedge.

B. VEHICLE PROFILE(S)

Vehicle No.	Class of Vehicle	Year/Make/Model	Most Severe Damage Based on Vehicle Inspection		Component Failure
			Damage Plane	Severity Description	
01	Full size	91/Cadillac/Coupe DeVille	Front	Moderate	None
02	Large cargo van	93/Dodge/Ram 150	Front	Moderate	None

DO NOT SANITIZE THIS FORM

C. PERSON PROFILE(S)

Vehicle No.	Person Role	Seat Position	Restraint Use	Most Severe Injury (TO BE COMPLETED BY ZONE CENTER)			
				Body Region	Injury Type	AIS	Injury Source
01	Driver	Front left	Air bag/without lap/shoulder				
02	Driver	Front LEFT	Lap/shoulder	FACE	LACERATION	1	

Body Region

Abdomen
Ankle—foot
Arm (upper)
Back-thoracolumbar spine
Chest
Elbow
Face
Forearm
Head—skull
Knee
Leg (lower)
Lower limbs(s) (whole or unknown part)
Neck—cervical spine
Pelvic—hip
Shoulder
Thigh
Upper limb(s) (whole or unknown part)
Whole body
Wrist—hand
Brain
Ears
Eye
Heart
Kidneys
Liver
Mouth
Noise
Pulmonary—lungs
Spleen
Thyroid, other endocrine gland
Vertebrae

Injury Type

Abrasion
Amputation
Avulsion
Burn
Concussion
Contusion
Crush
Detachment, separation
Dislocation
Fracture
Fracture and dislocation
Laceration
Other
Perforation, puncture
Rupture
Sprain
Strain
Total severance, transection
Unknown

Abbreviated Injury Scale

(1) Minor injury
(2) Moderate injury
(3) Serious injury
(4) Severe injury
(5) Critical injury
(6) Maximum (untreatable)
(7) Injured, unknown severity

DO NOT SANITIZE THIS FORM

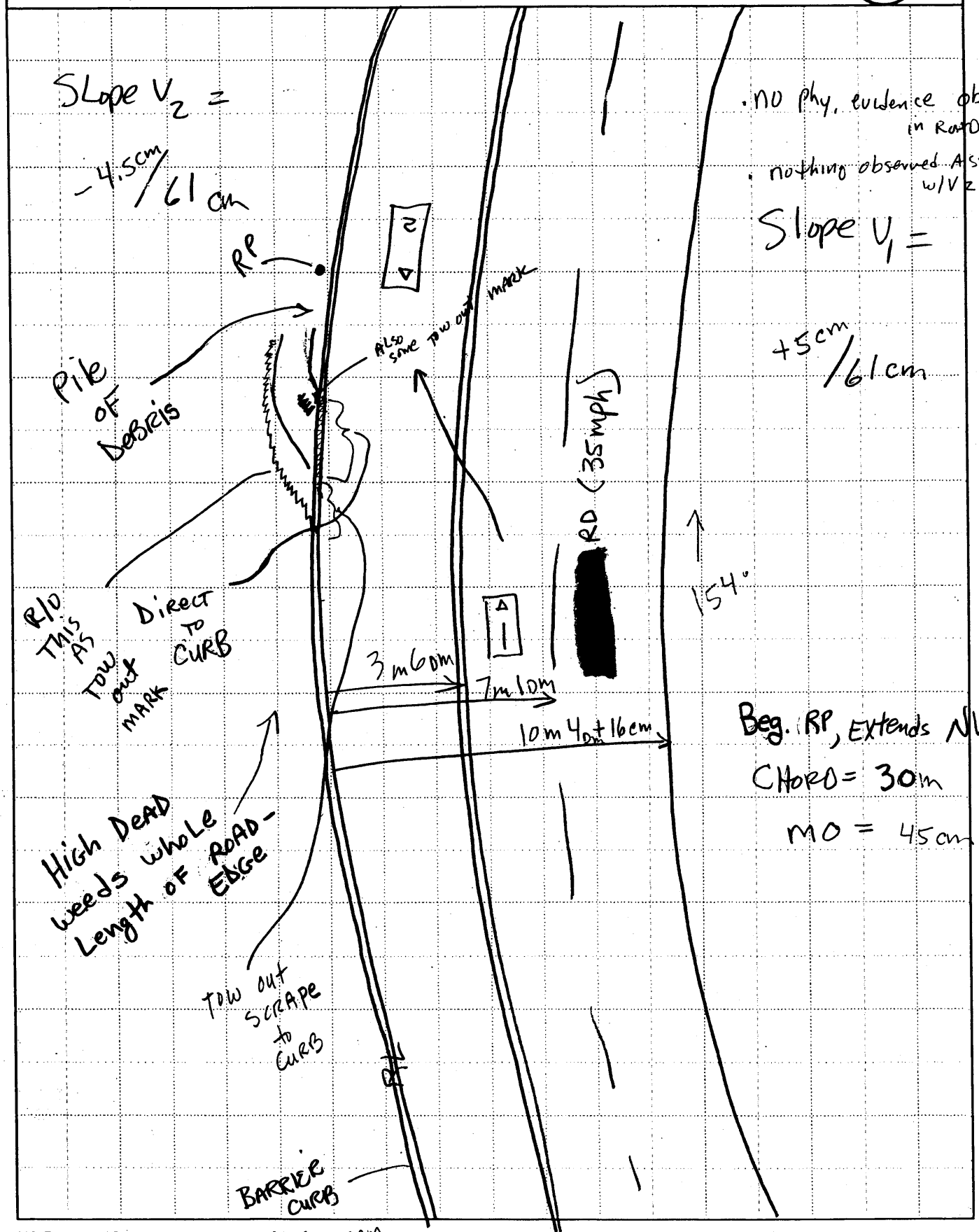
U.S. Department of Transportation
National Highway Traffic Safety Administration

ACCIDENT COLLISION DIAGRAM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

PSU No. 08 Case Number—Stratum 021A

Indicate North



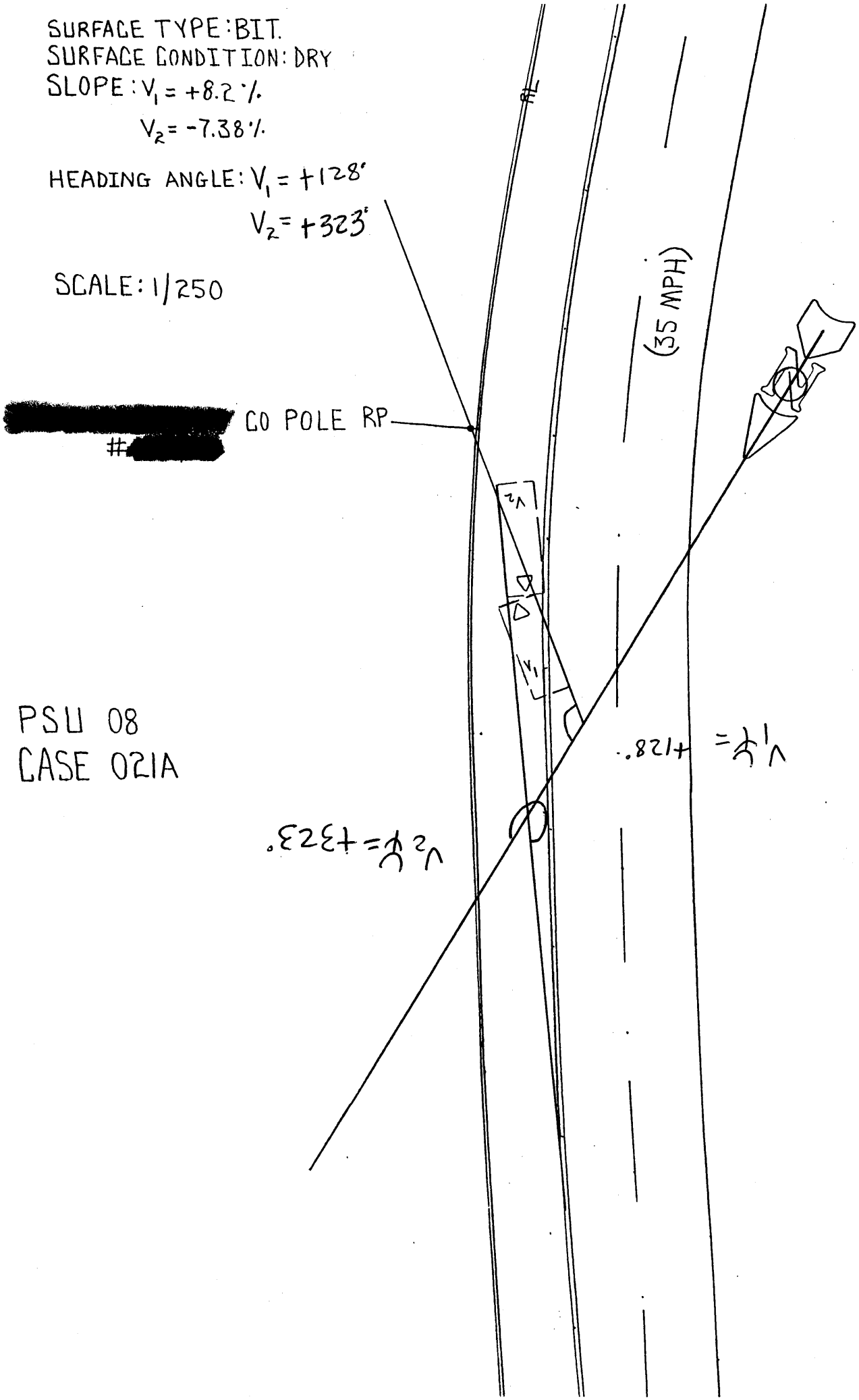
HS Form 431B (1/93)

Scale: 1 centimeter = 1 meter - (1/100)

SURFACE TYPE: BIT.
SURFACE CONDITION: DRY
SLOPE: V_1 = +8.2 %.
V_2 = -7.38 %.

HEADING ANGLE: V_1 = +128°
V_2 = +323°

SCALE: 1/250

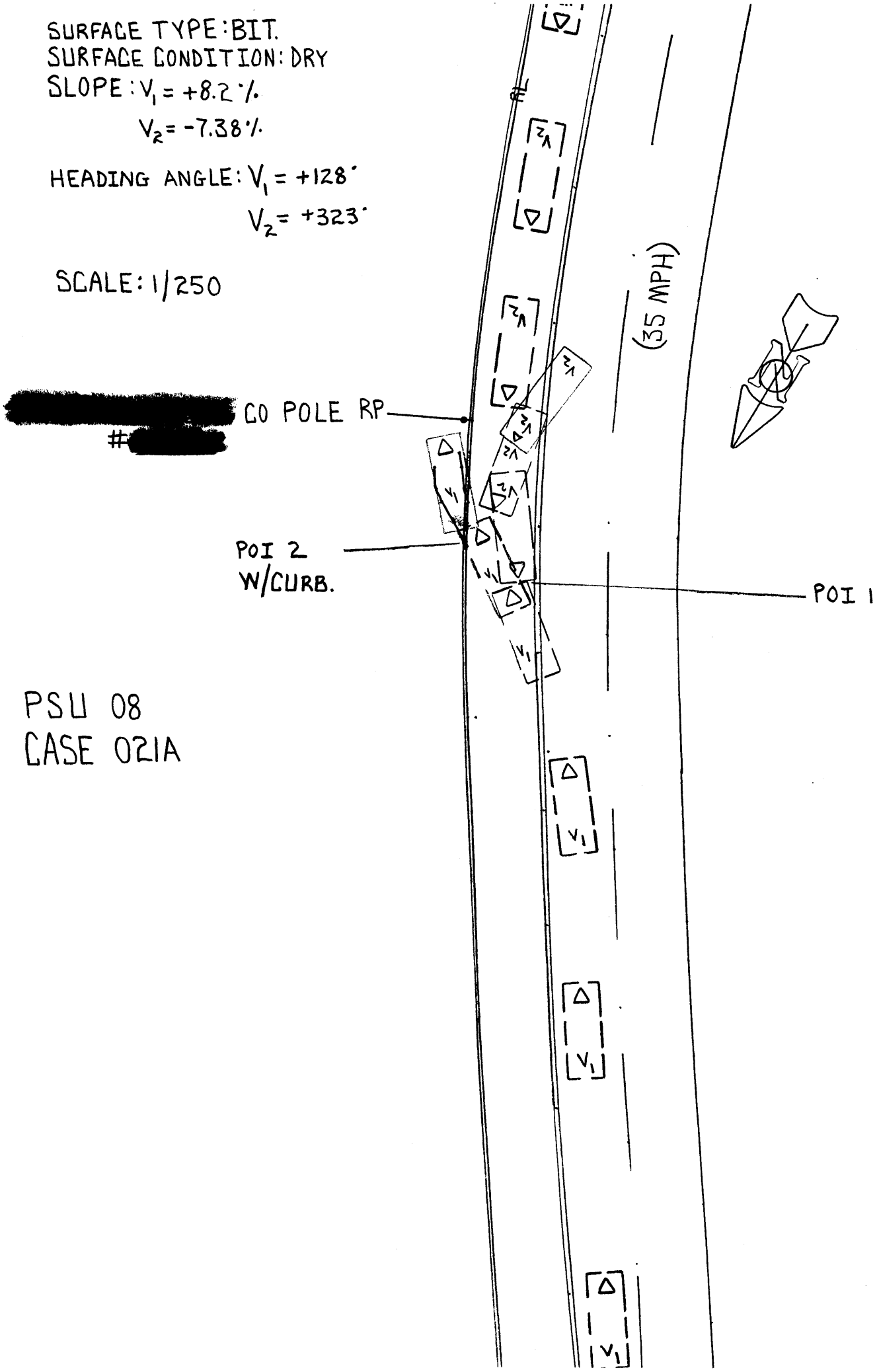


PSU 08
CASE 021A

SURFACE TYPE: BIT.
SURFACE CONDITION: DRY
SLOPE: V_1 = +8.2 %
V_2 = -7.38 %

HEADING ANGLE: V_1 = +128°
V_2 = +323°

SCALE: 1/250



PSU 08
CASE 021A

U.S. Department of Transportation
National Highway Traffic Safety Administration

ACCIDENT COLLISION MEASUREMENT TABLE

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Primary Sampling Unit Number Φ8

Case Number—Stratum Φ21A

ACCIDENT COLLISION DIAGRAM

LEVEL I
PHYSICAL EVIDENCE ABSENT

To be accomplished when there is no physical evidence present at the scene:

* approximate vehicle orientation at impact and final rest
* applicable road/roadway delineation (e.g., curbs/edge lines, lane markings, median markings, pavement markings, etc.)
* applicable traffic controls (e.g., speed limit)
* north arrow placed on diagram
* sketch required

LEVEL II
PHYSICAL EVIDENCE PRESENT

In addition to the level I tasks noted above, the following must be accomplished when

LEVEL II (Cont'd)
physical evidence is present:

* document reference point and reference line relative to physical features present at the scene
* scale documentation of all accident induced physical evidence
* scaled documentation of all roadside objects contacted
* roadway surface type and condition of applicable roadways
* grade measurements for all applicable roadways and at location of rollover initiation
* scaled representations of the vehicle(s) at pre-impact, impact, and final rest based upon either:
  a) physical evidence, or
  b) reconstructed accident dynamics

CRASH DATA

	VEH. #1	VEH. #2	VEH. #3
Heading Angle	+128°	+323	—
Surface Type	BIT	BIT	—
Surface Condition	DRY	DRY	—
Grade (v/h) Measurement (between impact and final rest)	+5cm/61cm	-4.5cm/61cm	—
Grade (v/h) Measurement (at location of rollover initiation)	—	—	—

Reference Point: [redacted] Pole # [redacted]

Reference line: NE ROAD EDGE OF [redacted] RD

Item	Distance and Direction from Reference Point	Distance and Direction from Reference Line
RP	AT	4 DM NE
V1 RF ends in mud	1 m 6 Dm NW	6 DM NE
D to curB ends	2 m 4 Dm	AT
IP RF V1	2 m 4 Dm	4 Dm
V1 LF ends in mud	2 m 4 Dm	1 m 8 Dm
V1 IP RF	3 m 4 Dm	34 cm
V1 IP LF	3 m 4 Dm	167 cm
V1 RF TIRE Hits CuRB	4 m 2 Dm	AT
IP V1 LF	4 m 2 Dm	1 m 4 Dm
CTR DIRT SCRAPE V1	5 m 2 Dm	8 Dm
D to CuRB Beg	6 m 4 Dm	AT
V1 LF tire hits CuRB	6 m 4 Dm	AT

. D = DIRECT CONTACT ; CTR = CENTER
. no PAR NOTED V2 RF RGHT. WAS visible AT insp. TIME

. EXTREME TRAFFIC

Item	Distance and Direction from Reference Point	Distance and Direction from Reference Line

U.S. Department of Transportation

National Highway Traffic Safety Administration

ACCIDENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number: 08
2. Case Number - Stratum: 021A

IDENTIFICATION

3. Number of General Vehicle Forms Submitted: 02
4. Date of Accident (Month,Day,Year): [redacted]/[redacted]/93
5. Time of Accident: 1715

Code reported military time of accident.

NOTE: Midnight = 2400
Unknown = 9999

SPECIAL STUDIES - INDICATORS

Check (✓) each special study (SS14-SS18 below) that has been completed; code 1 for the checked special studies and 0 for the special studies not checked.

6. ✓ SS14 Fatal AOPS: 1
7. ___ SS15 Administrative Use: 0
8. ___ SS16 _____: 0
9. ___ SS17 _____: 0
10. ___ SS18 _____: 0

NUMBER OF EVENTS

11. Number of Recorded Events in This Accident: 02

Code the number of events which occurred in this accident.

ACCIDENT EVENTS

For each event that occurred in the accident, code the lowest numbered vehicle in the left columns and the other involved vehicle or object on the right.

Accident Event Sequence Number	Vehicle Number	Class Of Vehicle	General Area of Damage	Vehicle Number or Object Contacted	Class Of Vehicle	General Area of Damage
12. 01	13. 01	14. 04	15. F	16. 02	17. 14	18. F
19. 02	20. 01	21. 04	22. 4	23. 63	24. 00	25. 0
26. 03	27.	28.	29.	30.	31.	32.
33. 04	34.	35.	36.	37.	38.	39.
40. 05	41.	42.	43.	44.	45.	46.

IF GREATER THAN FIVE EVENTS, CONTINUE CODING ON THE ACCIDENT EVENT SUPPLEMENT

CODES FOR CLASS OF VEHICLE

(00) Not a motor vehicle
(01) Subcompact/mini (wheelbase < 254 cm)
(02) Compact (wheelbase ≥ 254 but < 265 cm)
(03) Intermediate (wheelbase ≥ 265 but < 278 cm)
(04) Full size (wheelbase ≥ 278 but < 291 cm)
(05) Largest (wheelbase ≥ 291 cm)
(09) Unknown passenger car size
(11) Compact utility vehicle
(12) Large utility vehicle (≤ 4,500 kgs GVWR)
(13) Passenger van (≤ 4,500 kgs GVWR)
(14) Other van (≤ 4,500 kgs GVWR)
(15) Pickup truck (≤ 4,500 kgs GVWR)
(18) Other truck (≤ 4,500 kgs GVWR)
(19) Unknown light truck type
(20) School bus
(21) Other bus
(22) Truck (> 4,500 kgs GVWR)
(23) Tractor without trailer
(24) Tractor-trailer(s)
(25) Motored cycle
(28) Other vehicle
(99) Unknown

CODES FOR GENERAL AREA OF DAMAGE (GAD)

CDS APPLICABLE AND OTHER VEHICLES

(0) Not a motor vehicle
(N) Noncollision
(F) Front
(R) Right side
(L) Left side
(B) Back
(T) Top
(U) Undercarriage
(9) Unknown

TDC APPLICABLE VEHICLES

(0) Not a motor vehicle
(N) Noncollision
(F) Front
(R) Right side
(L) Left side
(B) Back of unit with cargo area (rear of trailer or straight truck)
(D) Back (rear of tractor)
(C) Rear of cab
(V) Front of cargo area
(T) Top
(U) Undercarriage
(9) Unknown

CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED

(01-30) — Vehicle Number

Noncollision
(31) Overturn — rollover
(32) Fire or explosion
(33) Jackknife
(34) Other intraunit damage (specify): _____
(35) Noncollision injury
(38) Other noncollision (specify): _____
(39) Noncollision — details unknown

Collision With Fixed Object
(41) Tree (≤ 10 cm in diameter)
(42) Tree (> 10 cm in diameter)
(43) Shrubbery or bush
(44) Embankment
(45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post
(50) Pole or post (≤ 10 cm in diameter)
(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)
(52) Pole or post (> 30 cm in diameter)
(53) Pole or post (diameter unknown)
(54) Concrete traffic barrier
(55) Impact attenuator
(56) Other traffic barrier (includes guardrail) (specify): _____
(57) Fence
(58) Wall
(59) Building
(60) Ditch or culvert
(61) Ground
(62) Fire hydrant
(63) Curb
(64) Bridge
(68) Other fixed object (specify): _____
(69) Unknown fixed object

Collision with Nonfixed Object
(71) Motor vehicle not in-transport
(72) Pedestrian
(73) Cyclist or cycle
(74) Other nonmotorist or conveyance _____
(75) Vehicle occupant
(76) Animal
(77) Train
(78) Trailer, disconnected in transport
(88) Other nonfixed object (specify): _____
(89) Unknown nonfixed object
(98) Other event (specify): _____
(99) Unknown event or object

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OCCUPANT RELATED

16. Driver Presence in Vehicle: 1
(0) Driver not present
(1) Driver present
(9) Unknown

17. Number of Occupants This Vehicle: 01
(00-96) Code actual number of occupants for this vehicle
(97) 97 or more
(99) Unknown

18. Number of Occupant Forms Submitted: 01

VEHICLE WEIGHT ITEMS

19. Vehicle Curb Weight: 1,610
1608 Code weight to nearest 10 kilograms.
(045) Less than 450 kilograms
(610) 6,100 kilograms or more
(999) Unknown

3,545 lbs X .4536 = 1,608 kgs

Source: [redacted]

20. Vehicle Cargo Weight: 0,000
____ Code weight to nearest 10 kilograms.
(000) Less than 5 kilograms
(450) 4,500 kilograms or more
(999) Unknown

__,___ lbs X .4536 = __,___ kgs

RECONSTRUCTION DATA

21. Towed Trailing Unit: 0
(0) No towed unit
(1) Yes—towed trailing unit
(9) Unknown

22. Documentation of Trajectory Data for This Vehicle: 1
(0) No
(1) Yes

23. Post Collision Condition of Tree or Pole (For Highest Delta V): 0
(0) Not collision (for highest delta V) with tree or pole
(1) Not damaged
(2) Cracked/sheared
(3) Tilted <45 degrees
(4) Tilted ≥45 degrees
(5) Uprooted tree
(6) Separated pole from base
(7) Pole replaced
(8) Other (specify):

(9) Unknown

24. Rollover: 0
(0) No rollover (no overturning)

Rollover (primarily about the longitudinal axis)
(1) Rollover, 1 quarter turn only
(2) Rollover, 2 quarter turns
(3) Rollover, 3 quarter turns
(4) Rollover, 4 or more quarter turns (specify):

(5) Rollover--end-over-end (i.e., primarily about the lateral axis)
(9) Rollover (overturn), details unknown

OVERRIDE/UNDERRIDE (THIS VEHICLE)

25. Front Override/Underride (this Vehicle): 1

26. Rear Override/Underride (this Vehicle): 0

(0) No override/underride, or not an end-to-end impact

Override (see specific CDC)
(1) 1st CDC
(2) 2nd CDC
(3) Other not automated CDC (specify):

Underride (see specific CDC)
(4) 1st CDC
(5) 2nd CDC
(6) Other not automated CDC (specify):

(7) Medium/heavy truck or bus override
(9) Unknown

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V

Values: (000)-(359) Code actual value
(997) Noncollision
(998) Impact with object
(999) Unknown

27. Heading Angle For This Vehicle: 128

28. Heading Angle For Other Vehicle: 323

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OTHER DATA

56. Driver's Zip Code [redacted]

(00000) Driver not present
(00001) Driver not a resident of U.S. or territories
_____ Code actual 5-digit zip code
(99999) Unknown

57. Driver's Race/Ethnic Origin 1
(0) Driver not present
(1) White (non-Hispanic) (AS PER, D1 WIFE)
(2) Black (non-Hispanic)
(3) White (Hispanic)
(4) Black (Hispanic)
(5) American Indian, Eskimo or Aleut
(6) Asian or Pacific Islander
(8) Other (specify): _____
(9) Unknown

58. Vehicle Special Use (This Trip) Φ
(0) No special use
(1) Taxi
(2) Vehicle used as school bus
(3) Vehicle used as other bus
(4) Military
(5) Police
(6) Ambulance
(7) Fire truck or car
(8) Other (specify): _____
(9) Unknown

ROLLOVER DATA

If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank.
If GV24 (Rollover) = 0, then GV59-GV63 must equal 0.
If GV24 = 9, then GV59-GV63 must equal 9.

59. Rollover Initiation Type Φ
(0) No rollover
(1) Trip-over
(2) Flip-over
(3) Turn-over
(4) Climb-over
(5) Fall-over
(6) Bounce-over
(7) Collision with another vehicle
(8) Other rollover initiation type specify): _____
(9) Unknown rollover initiation type

60. Location of Rollover Initiation Φ
(0) No rollover
(1) On roadway
(2) On shoulder—paved
(3) On shoulder—unpaved
(4) On roadside or divided trafficway median
(9) Unknown

61. Rollover Initiation Object Contacted ΦΦ

62. Location on Vehicle Where Initial Principal Tripping Force Is Applied Φ
(0) No rollover
(1) Wheels/tires
(2) Side plane
(3) End plane
(4) Undercarriage
(5) Other location on vehicle (specify): _____
(8) Non-contact rollover forces (specify): _____
(9) Unknown

63. Direction of Initial Roll Φ
(0) No rollover
(1) Roll right - primarily about the longitudinal axis
(2) Roll left - primarily about the longitudinal axis
(5) End-over-end (i.e., primarily about the lateral axis)
(9) Unknown roll direction

PRECRASH DATA

64. Pre-Event Movement (Prior to Recognition of Critical Event) 13
(01) Going straight
(02) Slowing or stopping in traffic lane
(03) Starting in traffic lane
(04) Stopped in traffic lane
(05) Passing or overtaking another vehicle
(06) Disabled or parked in travel lane
(07) Leaving a parking position
(08) Entering a parking position
(09) Turning right
(10) Turning left
(11) Making a U-turn
(12) Backing up (other than for parking position)
(13) Negotiating a curve
(14) Changing lanes
(15) Merging
(16) Successful avoidance maneuver to a previous critical event
(97) Other (specify): _____
(98) No driver present
(99) Unknown

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover
(01-30) — Vehicle Number

Noncollision
(31) Turn-over — fall-over
(33) Jackknife

Collision With Fixed Object
(41) Tree (≤ 10 cm in diameter)
(42) Tree (> 10 cm in diameter)
(43) Shrubbery or bush
(44) Embankment

(45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post
(50) Pole or post (≤ 10 cm in diameter)
(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)
(52) Pole or post (> 30 cm in diameter)
(53) Pole or post (diameter unknown)

(54) Concrete traffic barrier
(55) Impact attenuator
(56) Other traffic barrier (includes guardrail) (specify):_____

(57) Fence
(58) Wall
(59) Building
(60) Ditch or culvert
(61) Ground
(62) Fire hydrant
(63) Curb
(64) Bridge
(68) Other fixed object (specify):
_____
(69) Unknown fixed object

Collision with Nonfixed Object
(71) Motor vehicle not in-transport
(76) Animal
(77) Train
(78) Trailer, disconnected in transport
(88) Other nonfixed object (specify):
_____
(89) Unknown nonfixed object

(98) Other event (specify):
_____
(99) Unknown event or object

BEST AVAILABLE COPY

U.S. Department of Transportation
National Highway Traffic Safety Administration

EXTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number: 08
2. Case Number - Stratum: 021A
3. Vehicle Number: 01

VEHICLE IDENTIFICATION

VIN: 1G6CD13B1M4[redacted] Model Year: 91

Vehicle Make (specify): CADILLAC Vehicle Model (specify): Coupe DeVille 2DR

LOCATOR

Locate the end of the damage with respect to the vehicle longitudinal center line or bumper corner for end impacts or an undamaged axle for side impacts.

Specific Impact No.	Location of Direct Damage	Location of Field L
01 + 01A	Beg RF BC → (L); Beg 12cm (L) OF CTR (R)	ENTIRE FRONT BUMPER

(BC = BUMPER CORNER; CTR = CENTER; → = EXTENDS)

CRUSH PROFILE IN CENTIMETERS

NOTES: Identify the plane at which the C-measurements are taken (e.g., at bumper, above bumper, at sill, above sill, etc.) and label adjustments (e.g., free space). (FRONT B.L = 15cm AT CORNERS 16cm AT OTHERS)

Measure and document on the vehicle diagram the location of maximum crush.

Measure C1 to C6 from driver to passenger side in front or rear impacts and rear to front in side impacts.

AT C6

Free space value is defined as the distance between the baseline and the original body contour taken at the individual C locations. This may include the following: bumper lead, bumper taper, side protrusion, side taper, etc. Record the value for each C-measurement and maximum crush.

Use as many lines/columns as necessary to describe each damage profile.

Specific Impact Number	Plane of Impact C-Measurements	Direct Damage Width (CDC)	Direct Damage Max Crush	Field L	C_1	C_2	C_3	C_4	C_5	C_6	±D
01	Front Bumper	103	41.4	155	1.5	4.2	1	14.4	28	41.4	+39.5
	FS		13		13	10	0	6.5	10	13	
	RESULTANT		28.4		0	0	1	7.9	18	28.4	
01A	Above Bumper	103	48	155	18.35	20	34.75	44	37.6	42.6	+39.5
	FS + BL		24		28	26	16	22.5	26	28	
	RESULTANT		24		0	0	18.75	21.5	11.6	14.6	
			10.5cm PAST C4 → C5								
00	Ave. CRush	—	—	—	—	—	9.875	14.7	—	—	—

C3+4 ARE PLUMB TO FRONT EDGE OF CRUSH.

HS Form 435A (Rev. 1/93)

PSU 08-021A V1

VEHICLE DAMAGE SKETCH

TIRE–WHEEL DAMAGE

a. Rotation physically restricted

b. Tire deflated

	a.	b.
RF	1	2
LF	2	2
RR	2	2
LR	2	2

PLASTIC PROB. would LET wheel Roll.

(1) Yes (2) No (8) NA (9) Unk.

TYPE OF TRANSMISSION

☐ Manual ☑ Automatic

ORIGINAL SPECIFICATIONS

Wheelbase	281	cm
Overall Length	515	cm
Maximum Width	186	cm
Curb Weight	1608	kg
Average Track	153	cm
Front Overhang	109	cm
Rear Overhang	124	cm
Undeformed End Width	160	cm
Engine Size: cyl./displ.	V8 4.9	L

WHEEL STEER ANGLES
(For locked front wheels or displaced rear axles only)

RF ± 1 2 °
LF ± ___ ___ °
RR ± ___ ___ °
LR ± ___ ___ °

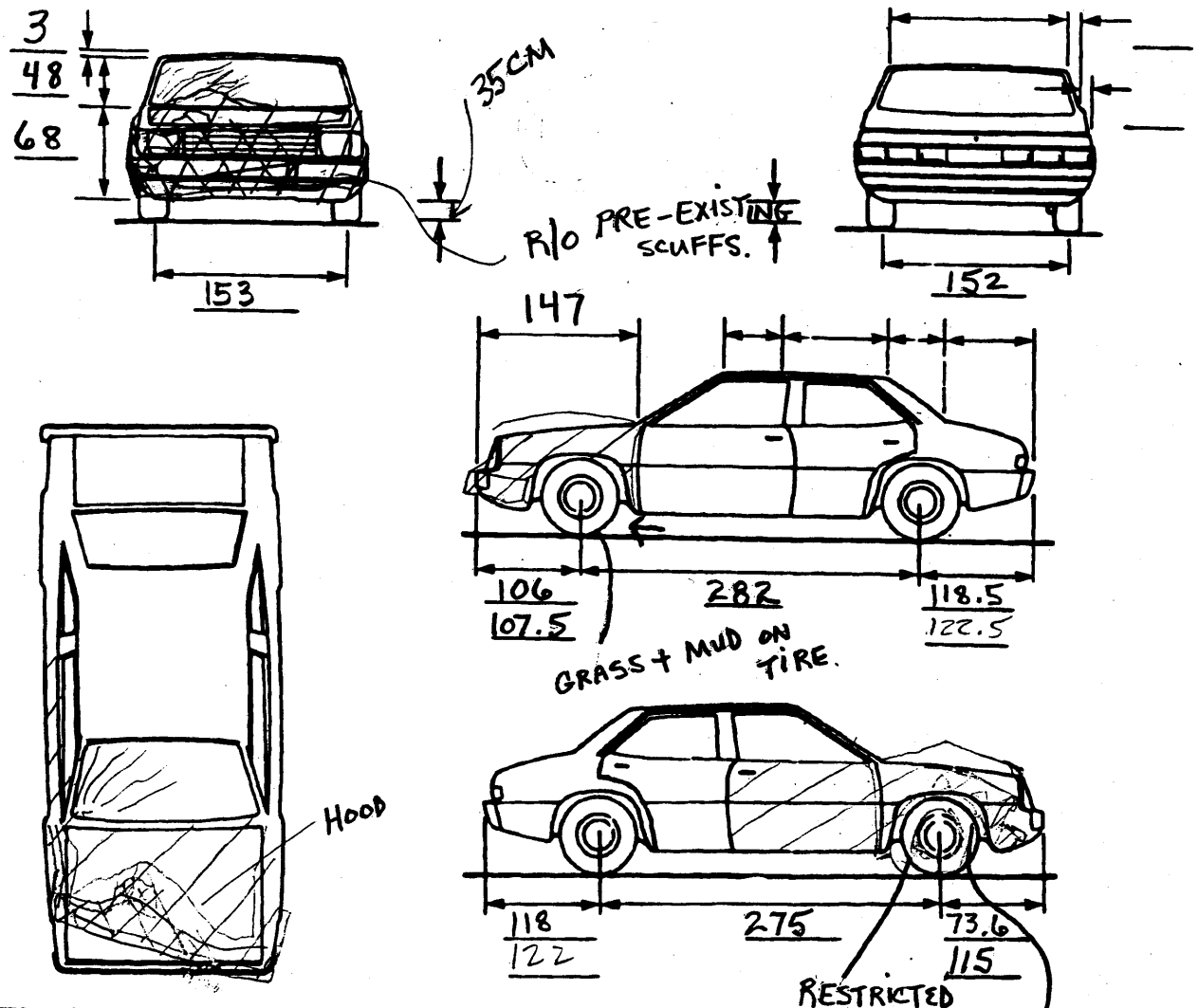
Within ± 5 degrees

DRIVE WHEELS

☑ FWD ☐ RWD ☐ 4WD

Approximate Cargo Weight ___ kg

MEASUREMENTS IN CENTIMETERS



NOTES: Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

PSU 08-021A V1

CDC WORKSHEET

CODES FOR OBJECT CONTACTED

(01-30) — Vehicle Number

Noncollision
- (31) Overturn — rollover
- (32) Fire or explosion
- (33) Jackknife
- (34) Other intraunit damage (specify): _____
- (35) Noncollision injury
- (38) Other noncollision (specify): _____
- (39) Noncollision — details unknown

Collision With Fixed Object
- (41) Tree (≤ 10 cm in diameter)
- (42) Tree (> 10 cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment
- (45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post
- (50) Pole or post (≤ 10 cm in diameter)
- (51) Pole or post (> 10 cm but ≤ 30 cm in diameter)
- (52) Pole or post (> 30 cm in diameter)
- (53) Pole or post (diameter unknown)
- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail) (specify): _____
- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify): _____
- (69) Unknown fixed object

Collision with Nonfixed Object
- (71) Motor vehicle not in-transport
- (72) Pedestrian
- (73) Cyclist or cycle
- (74) Other nonmotorist or conveyance
- (75) Vehicle occupant
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (88) Other nonfixed object (specify): _____
- (89) Unknown nonfixed object
- (98) Other event (specify): _____
- (99) Unknown event or object

DEFORMATION CLASSIFICATION BY EVENT NUMBER

	Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation Location	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
	01	02	10		F	Z	E	W	01
*	02	63			9(4)	9	9	9	99
	*	wheels weren't given CDC FOR CURB Because no damage							
		was detectable to the wheels.							

U.S. Department of Transportation
National Highway Traffic Safety Administration

INTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number: 08
2. Case Number - Stratum: 021A
3. Vehicle Number: 01

INTEGRITY

4. Passenger Compartment Integrity: 00
(00) No integrity loss

Yes, Integrity Was Lost Through
(01) Windshield
(02) Door (side)
(03) Door/hatch (back door)
(04) Roof
(05) Roof glass
(06) Side window
(07) Rear window (backlight)
(08) Roof and roof glass
(09) Windshield and door (side)
(10) Windshield and roof
(11) Side and rear window (side window and backlight)
(12) Windshield and side window
(13) Door and side window
(98) Other combination of above (specify): _____
(99) Unknown

Door, Tailgate or Hatch Opening — OPENED POST COLLISION, AND IS TIED SHUT SINCE DEFORMATION WOULDN'T PERMIT DOOR TO BE RE-CLOSED.

5. LF: 1 6. RF: 1 7. LR: 0 8. RR: 0 9. TG/H: 0

(0) No door/gate/hatch
(1) Door/gate/hatch remained closed and operational
(2) Door/gate/hatch came open during collision
(3) Door/gate/hatch jammed shut
(8) Other (specify): _____
(9) Unknown

Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code 0

10. LF: 0 11. RF: 0 12. LR: 0 13. RR: 0 14. TG/H: 0

(0) No door/gate/hatch or door not opened

Door, Tailgate or Hatch Came Open During Collision
(1) Door operational (no damage)
(2) Latch/striker failure due to damage
(3) Hinge failure due to damage
(4) Door structure failure due to damage
(5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage
(6) Latch/striker and hinge failure due to damage
(8) Other failure (specify): _____
(9) Unknown

GLAZING

Glazing Damage from Impact Forces

15. WS: 2 16. LF: 0 17. RF: 0 18. LR: 0 19. RR: 0
20. BL: 0 21. Roof: 8 22. Other: 8

(0) No glazing damage from impact forces
(2) Glazing in place and cracked from impact forces
(3) Glazing in place and holed from impact forces
(4) Glazing out-of-place (cracked or not) and not holed from impact forces
(5) Glazing out-of-place and holed from impact forces
(6) Glazing disintegrated from impact forces
(7) Glazing removed prior to accident
(8) No glazing
(9) Unknown if damaged

Glazing Damage from Occupant Contact

23. WS: 0 24. LF: 0 25. RF: 0 26. LR: 0 27. RR: 0
28. BL: 0 29. Roof: 0 30. Other: 0

(0) No occupant contact to glazing or no glazing
(1) Glazing contacted by occupant but no glazing damage
(2) Glazing in place and cracked by occupant contact
(3) Glazing in place and holed by occupant contact
(4) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact
(5) Glazing out-of-place by occupant contact and holed by occupant contact
(6) Glazing disintegrated by occupant contact
(9) Unknown if contacted by occupant

If No Glazing Damage *And* No Occupant Contact or No Glazing, Then Code IV31 Through IV46 As 0

Type of Window/Windshield Glazing

31. WS: 1 32. LF: 0 33. RF: 0 34. LR: 0 35. RR: 0
36. BL: 0 37. Roof: 0 38. Other: 0

(0) No glazing contact and no damage, or no glazing
(1) AS-1 — Laminated
(2) AS-2 — Tempered
(3) AS-3 — Tempered-tinted
(4) AS-14 — Glass/Plastic
(8) Other (specify): _____
(9) Unknown

Window Precrash Glazing Status

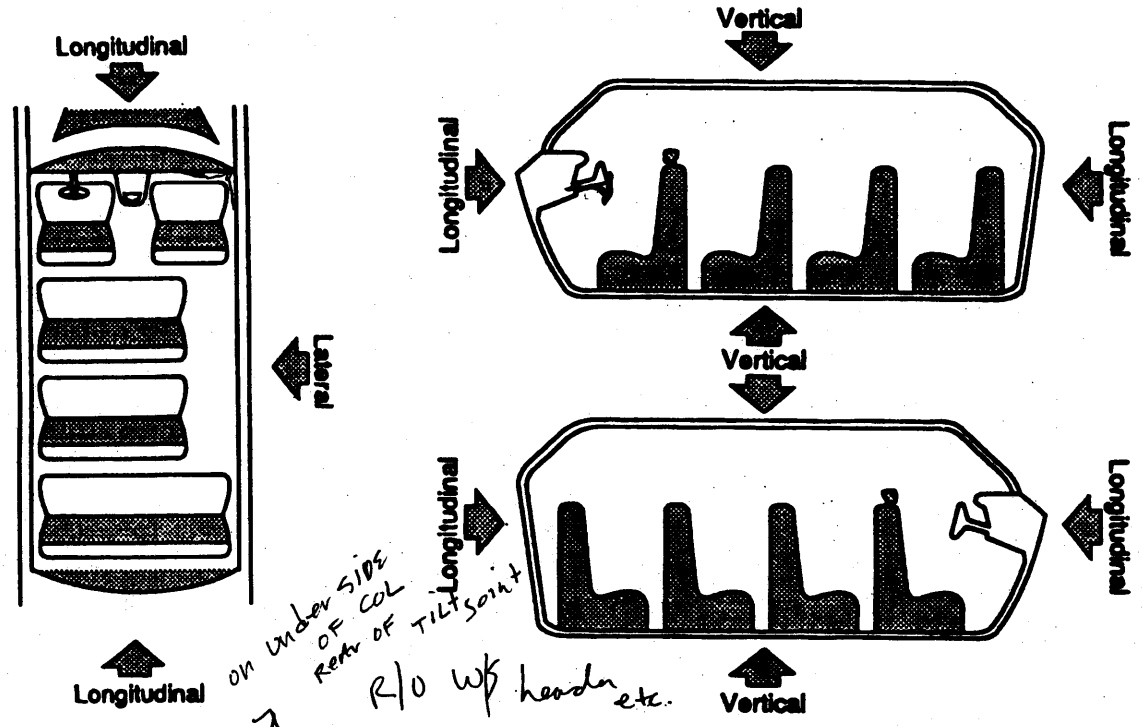
39. WS: 1 40. LF: 0 41. RF: 0 42. LR: 0 43. RR: 0
44. BL: 0 45. Roof: 0 46. Other: 0

(0) No glazing contact and no damage, or no glazing
(1) Fixed
(2) Closed
(3) Partially opened
(4) Fully opened
(9) Unknown

INTRUSION WORKSHEET

Note: Sketch intruded areas

Row Width (cm): 147



on underside of COL rear of tilt joint

R/O WS header etc.

(All Measurements Are In Centimeters)

LOCATION OF INTRUSION	INTRUDED COMPONENT	COMPARISON VALUE	–	INTRUDED VALUE	=	INTRUSION	DOMINANT CRUSH DIRECTION
11	ST. COL.	48	–	46 to Floor	=	2	VERT
13	TOE PAN @ DMD	60	–	60.1 to ST TIC	=	-.1	LONG
13	(R) SIDE SURFACE	145	–	145.5 to (L) lower A-pill	=	-.5	LAT
13	A-PILLAR	149	–	149.5 " "	=	-.5	LAT
			–		=		
			–		=		
			–		=		
	* R/O ALL INTRUSIONS AS under 3 cm AND non-CODEABLE.		–		=		
			–		=		
			–		=		
			–		=		
			–		=		
			–		=		
			–		=		
			–		=		

*

Document no more than the 15 most severe intrusions

OCCUPANT AREA INTRUSION

Note: If no intrusions, leave variables IV47-IV86 blank.

	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47.___	48.___	49.___	50.___
2nd	51.___	52.___	53.___	54.___
3rd	55.___	56.___	57.___	58.___
4th	59.___	60.___	61.___	62.___
5th	63.___	64.___	65.___	66.___
6th	67.___	68.___	69.___	70.___
7th	71.___	72.___	73.___	74.___
8th	75.___	76.___	77.___	78.___
9th	79.___	80.___	81.___	82.___
10th	83.___	84.___	85.___	86.___

LOCATION OF INTRUSION

Front Seat
- (11) Left
- (12) Middle
- (13) Right

Second Seat
- (21) Left
- (22) Middle
- (23) Right

Third Seat
- (31) Left
- (32) Middle
- (33) Right

Fourth Seat
- (41) Left
- (42) Middle
- (43) Right

- (97) Catastrophic
- (98) Other enclosed area (specify) _____
- (99) Unknown

INTRUDING COMPONENT

Interior Components
- (01) Steering assembly
- (02) Instrument panel left
- (03) Instrument panel center
- (04) Instrument panel right
- (05) Toe pan
- (06) A (A1/A2)-pillar
- (07) B-pillar
- (08) C-pillar
- (09) D-pillar
- (10) Door panel (side)
- (12) Roof (or convertible top)
- (13) Roof side rail
- (14) Windshield
- (15) Windshield header
- (16) Window frame
- (17) Floor pan (includes sill)
- (18) Backlight header
- (19) Front seat back
- (20) Second seat back
- (21) Third seat back
- (22) Fourth seat back
- (23) Fifth seat back
- (24) Seat cushion
- (25) Back door/panel (e.g., tailgate)
- (26) Other interior component (specify): _____
- (27) Side panel - forward of the A (A2)-pillar
- (28) Side panel - rear of the A (A2)-pillar

Exterior Components
- (30) Hood
- (31) Outside surface of this vehicle (specify): _____
- (32) Other exterior object in the environment (specify): _____
- (33) Unknown exterior object
- (97) Catastrophic
- (98) Intrusion of unlisted component(s) (specify): _____
- (99) Unknown

MAGNITUDE OF INTRUSION
- (1) ≥ 3 centimeters but < 8 centimeters
- (2) ≥ 8 centimeters but < 15 centimeters
- (3) ≥ 15 centimeters but < 30 centimeters
- (4) ≥ 30 centimeters but < 46 centimeters
- (5) ≥ 46 centimeters but < 61 centimeters
- (6) ≥ 61 centimeters
- (7) Catastrophic
- (9) Unknown

DOMINANT CRUSH DIRECTION
- (1) Vertical
- (2) Longitudinal
- (3) Lateral
- (7) Catastrophic
- (9) Unknown

STEERING RIM SPOKE DEFORMATION

(All Measurements Are in Centimeters)

COMPARISON VALUE	–	DAMAGE VALUE	=	DEFORMATION
.6 Below HUB	–	3cm Below Hub TOP 1/2	=	2.4 cm
Ø AT HUB	–	2.5cm Below HUB Bottom 1/2	=	2.5 cm
	–		=	
	–		=	

STEERING COLUMN

87. Steering Column Type — 2
(1) Fixed column
(2) Tilt column
(3) Telescoping column
(4) Tilt and telescoping column
(8) Other column type (specify): _____
(9) Unknown
(FOUND IN NORMAL HT. POSITION AT INSP. TIME)

88. Blank — X X
(This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

89. Blank — X X X
(This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

90. Blank — X X X
(This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

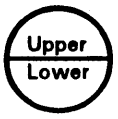
91. Blank — X X X
(This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

92. Steering Rim/Spoke Deformation — 03
2.5 Code actual measured deformation to the nearest centimeter
(00) No steering rim deformation
(01-14) Actual measured value in centimeters
(15) 15 centimeters or more
(98) Observed deformation cannot be measured
(99) Unknown

93. Location of Steering Rim/Spoke Deformation — 06
(00) No steering rim deformation

Quarter Sections
(01) Section A
(02) Section B
(03) Section C
(04) Section D

Half Sections
(05) Upper half of rim/spoke
(06) Lower half of rim/spoke
(07) Left half of rim/spoke
(08) Right half of rim/spoke



(09) Complete steering wheel collapse
(10) Undetermined location
(99) Unknown

INSTRUMENT PANEL

94. Odometer Reading — 999,000
_____kilometers—Code to the nearest 1,000 kilometers
(000) No odometer
(001) Less than 1,500 kilometers
(500) 499,500 kilometers or more
(999) Unknown

_____,_____ miles X 1.6093 = _____,_____ kilometers

Source: ELEC. INST. PANEL → BATTERY IS DISCONNECTED AND DAMAGED.

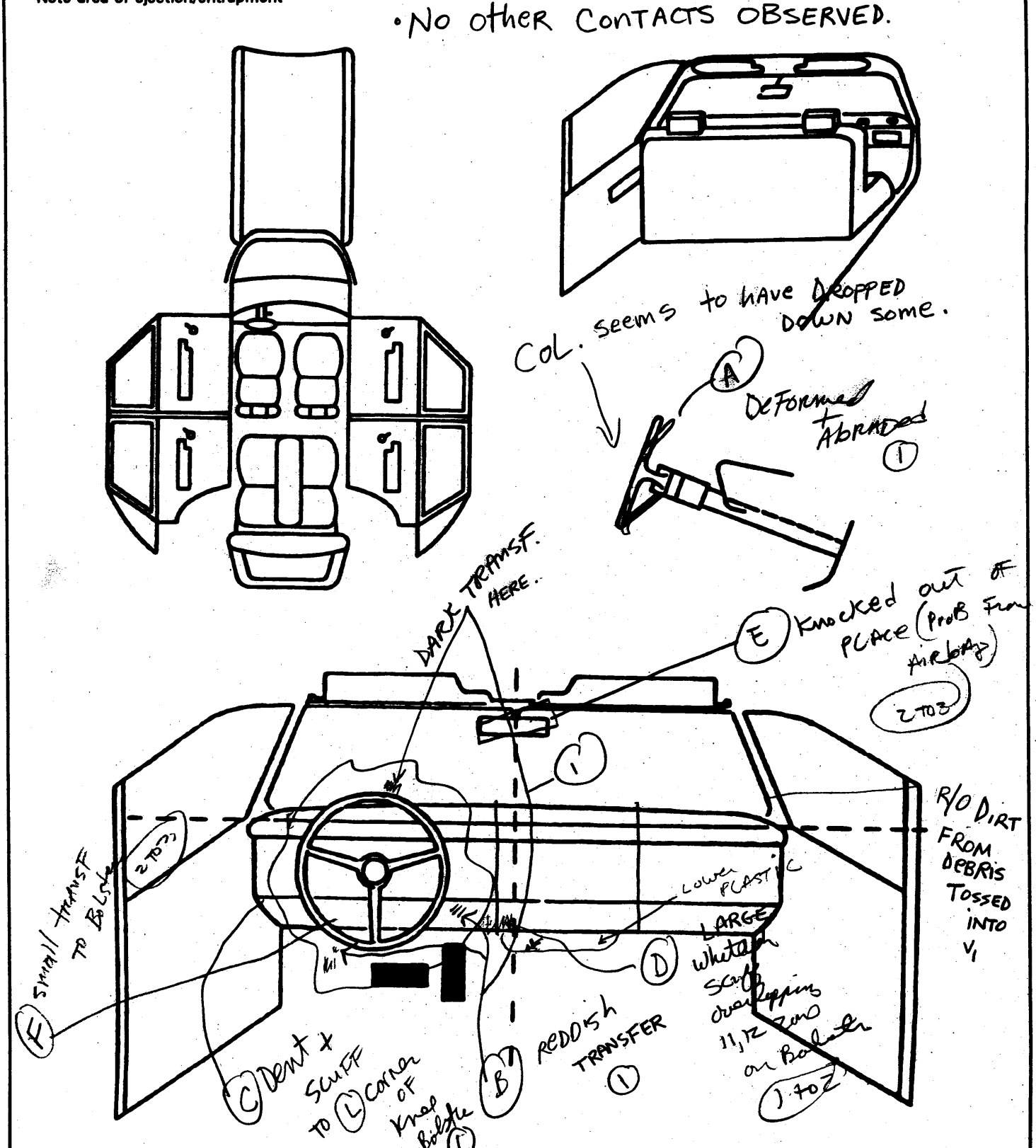
95. Instrument Panel Damage from Occupant Contact? — 1
(0) No
(1) Yes
(9) Unknown

96. Knee Bolsters Deformed from Occupant Contact? — 1
(0) No
(1) Yes
(8) Not present
(9) Unknown

97. Did Glove Compartment Door Open During Collision(s)? — 0
(0) No
(1) Yes
(8) Not present
(9) Unknown

VEHICLE INTERIOR SKETCHES

Note area of ejection/entrapment



Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure.
Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.
Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

POINTS OF OCCUPANT CONTACT

Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical Evidence	Confidence Level of Contact Point
A	06	01	CHEST, TORSO	RIM IS DEFORMED + ABRADED, COL. SEEMS TO HAVE DROPPED SOME	1
B	45	01	FACE, TORSO	REDDISH TRANSF. TO (R) + (L) LOWER BACK; DARK TRANSF TO UPPER BAG	1
C	13	01	(L) Knee	DENT + SCUFF TO (L) CORNER	1
D	13/10	01	(R) Knee	LARGE WHITISH SCUFF OVERLAPPING ZONE 11, 12 on LOWER (R) PORTION OF BOLSTER	1 TO 2
E	02	01	(R) ARM, FACE	MIRROR is knocked out of PLACE (POSS. FROM AIRBAG)	2 TO 3
F	13	01	SHIN	SMALL TRANSFER TO BOLSTER	2 TO 3
G					
H					
I					
J					
K					
L					
M					
N					

AND LOWER BLACK PLASTIC

CODES FOR INTERIOR COMPONENTS

FRONT
- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify):_____
- (19) Other front object (specify):

LEFT SIDE
- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify):
- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify):
- (28) Left side window sill

RIGHT SIDE
- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- (34) Other right pillar (specify):
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B pillar, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR
- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify):_____
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):
- (47) Interior loose objects
- (48) Child safety seat (specify):
- (49) Other interior object (specify):

ROOF
- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR
- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR
- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

CONFIDENCE LEVEL OF CONTACT POINT
- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

AIR BAGS

		Left	Right
FIRST	Availability/Function	1	ϕ
	Deployment	1	ϕ
	Failure	1	ϕ

Air Bag System Availability/Function
- (0) Not equipped/not available
- (1) Air bag

Non-functional
- (2) Air bag disconnected (specify): _____
- (3) Air bag not reinstalled
- (9) Unknown

Air Bag System Deployment
- (0) Not equipped/not available
- (1) Air bag deployed during accident (as a result of impact)
- (2) Air bag deployed inadvertently just prior to accident
- (3) Air bag deployed, accident sequence undetermined
- (4) Nondeployed
- (5) Unknown if deployed
- (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- (9) Unknown

Did Air Bag System Fail?
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): _____
- (9) Unknown

. SOME whitish dust RESIDUE ON ST. wheel.

AUTOMATIC BELTS

		Left	Right
FIRST	Availability/Function	ϕ	ϕ
	Use	ϕ	ϕ
	Type	ϕ	ϕ
	Proper Use	ϕ	ϕ
	Failure Modes	ϕ	ϕ

Automatic (Passive) Belt System Availability/Function
- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts - type unknown

Non-functional
- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

Automatic (Passive) Belt System Use
- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative)
- (3) Automatic belt use unknown
- (9) Unknown

Automatic (Passive) Belt System Type
- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

Proper Use of Automatic (Passive) Belt System
- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

Automatic Belt Used Improperly
- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): _____
- (8) Other improper use of automatic belt system (specify): _____
- (9) Unknown

Automatic (Passive) Belt Failure Modes During Accident
- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify): _____
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other automatic belt failure (specify): _____
- (9) Unknown

MANUAL RESTRAINTS

NOTES: Encode the applicable data **for each seat position** in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Ocupant Assessment Form.

If a Child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.

RIM DEFORM. would suggest none use.

SIGNIF. STRIKING → BUT

		Left	Center	Right
FIRST	Availability	4	3	4 *
	Use	ΦΦ (Φ4 1)	ΦΦ	ΦΦ
	Failure Modes	Φ	Φ	Φ
SECOND	Availability	4 *	3 *	4 *
	Use	ΦΦ	ΦΦ	ΦΦ
	Failure Modes	Φ	Φ	Φ
THIRD	Availability			
	Use			
	Failure Modes			
OTHER	Availability			
	Use			
	Failure Modes			

Manual (Active) Belt System Availability

(0) None available
(1) Belt removed/destroyed
(2) Shoulder belt
(3) Lap belt
(4) Lap and shoulder belt
(5) Belt available - type unknown

* PAST USE - NOT IN THIS COLLISION.

Integral Belt Partially Destroyed

(6) Shoulder belt (lap belt destroyed/removed)
(7) Lap belt (shoulder belt destroyed/removed)

(8) Other belt (specify): _____
(9) Unknown

Manual (Active) Belt System Use

(00) None used, not available, or belt removed/destroyed
(01) Inoperable (specify): _____
(02) Shoulder belt
(03) Lap belt
(04) Lap and shoulder belt
(05) Belt used - type unknown
(08) Other belt used (specify): _____
(12) Shoulder belt used with child safety seat
(13) Lap belt used with child safety seat
(14) Lap and shoulder belt used with child safety seat
(15) Belt used with child safety seat - type unknown
(18) Other belt used with child safety seat (specify): _____
(99) Unknown if belt used

Manual (Active) Belt Failure Modes During Accident

(0) No manual belt used or not available
(1) No manual belt failure(s)
(2) Torn webbing (stretched webbing not included)
(3) Broken buckle or latchplate
(4) Upper anchorage separated
(5) Other anchorage separated (specify): _____
(6) Broken retractor
(7) Combination of above (specify): _____
(8) Other manual belt failure (specify): _____
(9) Unknown

CHILD SAFETY SEAT FIELD ASSESSMENT

When a child safety seat is present enter the occupant's number in the first row and complete the column below the occupant's number using the codes listed below. Complete a column for each child safety seat present.

Occupant Number						
1. Type of Child Safety Seat						
2. Child Safety Seat Orientation						
3. Child Safety Seat Harness Usage						
4. Child Safety Seat Shield Uasge						
5. Child Safety Seat Tether Usage						
6. Child Safety Seat Make/Model	Specify Below for Each Child Safety Seat					

1. Type of Child Safety Seat

   (0) No child safety seat
   (1) Infant seat
   (2) Toddler seat
   (3) Convertible seat
   (4) Booster seat
   (7) Other type child safety seat (specify):

   _____

   (8) Unknown child safety seat type
   (9) Unknown if child safety seat used

2. Child Safety Seat Orientation

   (00) No child safety seat

   Designed for Rear Facing for This Age/Weight
   (01) Rear facing
   (02) Forward facing
   (08) Other orientation (specify):

   _____

   (09) Unknown orientation

   Designed for Forward Facing for This Age/Weight
   (11) Rear facing
   (12) Forward facing
   (18) Other orientation (specify):

   _____

   (19) Unknown orientation

   Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight
   (21) Rear facing
   (22) Forward facing
   (28) Other orientation (specify):

   _____

   (29) Unknown orientation

   (99) Unknown if child safety seat used

3. Child Safety Seat Harness Usage

4. Child Safety Seat Shield Usage

5. Child Safety Seat Tether Usage
   Note: Options Below Are Used for Variables 3-5.

   (00) No child safety seat

   Not Designed with Harness/Shield/Tether
   (01) After market harness/shield/tether added, not used
   (02) After market harness/shield/tether used
   (03) Child safety seat used, but no after market harness/shield/tether added
   (09) Unknown if harness/shield/tether added or used

   Designed With Harness/Shield/Tether
   (11) Harness/shield/tether not used
   (12) Harness/shield/tether used
   (19) Unknown if harness/shield/tether used

   Unknown If Designed With Harness/Shield/Tether
   (21) Harness/shield/tether not used
   (22) Harness/shield/tether used
   (29) Unknown if harness/shield/tether used

   (99) Unknown if child safety seat used

6. Child Safety Seat Make/Model
   (Specify make/model and occupant number)

   _____

   _____

   _____

   _____

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for **each seat position** in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
FIRST	Head Restraint Type/Damage	3	0	3
	Seat Type	07	07	07
	Seat Performance	1	1	1
	Seat Orientation	1	1	1
SECOND	Head Restraint Type/Damage	(+) 0	(+) 0	(+) 0
	Seat Type	03	03	03
	Seat Performance	1	1	1
	Seat Orientation (HIGH BACKED)	1	1	1
THIRD	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
OTHER	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			

Head Restraint Type/Damage by Occupant at This Occupant Position

(0) No head restraints
(1) Integral — no damage
(2) Integral — damaged during accident
(3) Adjustable — no damage
(4) Adjustable — damaged during accident
(5) Add-on — no damage
(6) Add-on — damaged during accident
(8) Other Specify): _____
(9) Unknown

Seat Type (this Occupant Position)

(00) Occupant not seated or no seat
(01) Bucket
(02) Bucket with folding back
(03) Bench
(04) Bench with separate back cushions
(05) Bench with folding back(s)
(06) Split bench with separate back cushions
(07) Split bench with folding back(s)
(08) Pedestal (i.e., column supported)
(09) Other seat type (specify): _____
(10) Box mounted seat (i.e., van type)
(99) Unknown

Seat Performance (this Occupant Position)

(0) Occupant not seated or no seat
(1) No seat performance failure(s)
(2) Seat adjusters failed
(3) Seat back folding locks or "seat back" failed specify: _____
(4) Seat tracks/anchors failed
(5) Deformed by impact of occupant
(6) Deformed by passenger compartment intrusion (specify): _____
(7) Combination of above (specify): _____
(8) Other (specify): _____
(9) Unknown

Seat Orientation (this Occupant Position)

(0) Occupant not seated or no seat
(1) Forward facing seat
(2) Rear facing seat
(3) Side facing seat (inward)
(4) Side facing seat (outward)
(8) Other (specify): _____
(9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT CONTACT PATTERN)

EJECTION/ENTRAPMENT DATA

Complete the following if the researcher has any indication that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occpant Assessment Form.

EJECTION No [✓] Yes [ ]

Describe indications of ejection and body parts involved in partial ejection(s):

Occupant Number						
Ejection						
(Note on Vehicle Interior Sketch) Ejection Area						
Ejection Medium						
Medium Status						

Ejection
(1) Complete ejection
(1) Partial ejection
(3) Ejection, Unknown degree
(9) Unknown

Ejection Area
(1) Windshield
(2) Left front
(3) Right front
(4) Left rear
(5) Right rear
(6) Rear
(7) Roof
(8) Other area (e.g., back of pickup, etc.) (specify): _____
(9) Unknown

Ejection Medium
(1) Door/hatch/tailgate
(2) Nonfixed roof structure
(3) Fixed glazing
(4) Nonfixed glazing (specify): _____
(5) Integral structure
(8) Other medium (specify): _____
(9) Unknown

Medium Status (Immediately Prior to Impact)
(1) Open
(2) Closed
(3) Integral structure
(9) Unknown

ENTRAPMENT No [✓] Yes [ ]

Describe entrapment mechanism: _____

Component(s): _____

(Note in vehicle interior diagram)

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HEAD RESTRAINT AND SEAT EVALUATION

25. Head Restraint Type/Damage by Occupant at This Occupant Position: 3
    - (0) No head restraints
    - (1) Integral—no damage
    - (2) Integral—damaged during accident
    - (3) Adjustable—no damage
    - (4) Adjustable—damaged during accident
    - (5) Add-on—no damage
    - (6) Add-on—damaged during accident
    - (8) Other (specify): _____
    - (9) Unknown

26. Seat Type (this Occupant Position): 01
    - (00) Occupant not seated or no seat
    - (01) Bucket
    - (02) Bucket with folding back
    - (03) Bench
    - (04) Bench with separate back cushions
    - (05) Bench with folding back(s)
    - (06) Split bench with separate back cushions
    - (07) Split bench with folding back(s)
    - (08) Pedestal (i.e., column supported)
    - (09) Other seat type (specify): _____
    - (10) Box mounted seat (i.e., van type)
    - (99) Unknown

27. Seat Performance (this Occupant Position): 1
    - (0) Occupant not seated or no seat
    - (1) No seat performance failure(s)
    - (2) Seat adjusters failed
    - (3) Seat back folding locks or "seat back" failed
    - (4) Seat track/anchors failed
    - (5) Deformed by impact of occupant
    - (6) Deformed by passenger compartment intrusion (specify): _____
    - (7) Combination of above (specify): _____
    - (8) Other (specify): _____
    - (9) Unknown

U.S. Department of Transportation
National Highway Traffic Safety Administration

UPDATE

OCCUPANT INJURY FORM

Form Approved
O.M.B. No. 2127-0021
NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number	08	3. Vehicle Number	01
2. Case Number - Stratum	021A	4. Occupant Number	01

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

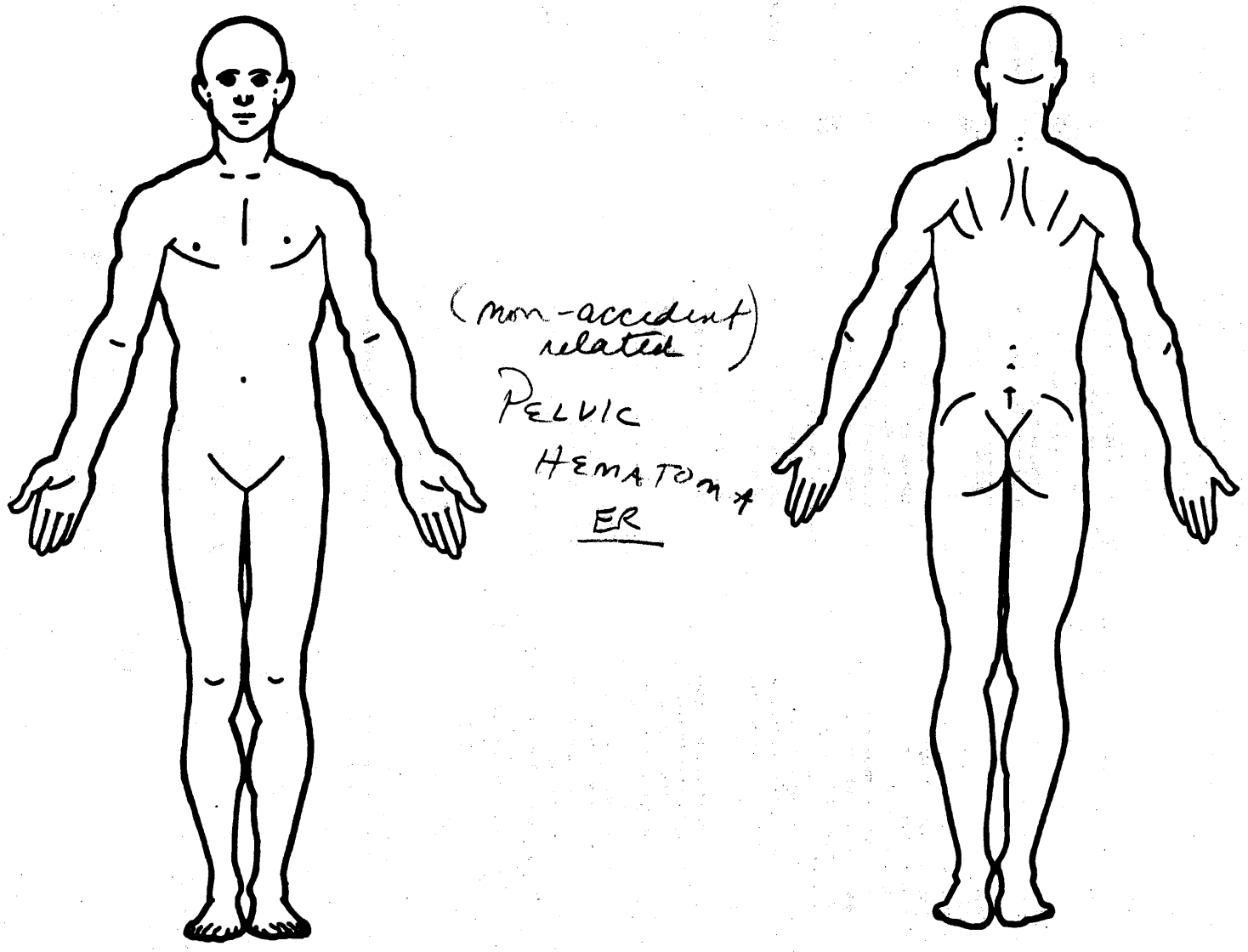
	Source of Injury Data	O.I.C.-A.I.S Body Region	O.I.C.-A.I.S Type of Anatomic Structure	O.I.C.-A.I.S Specific Anatomic Structure	O.I.C.-A.I.S Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
	no codable injuries										
1st	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.
2nd	16.	17.	18.	19.	20.	21.	22.	23.	24.	25.	26.
3rd	27.	28.	29.	30.	31.	32.	33.	34.	35.	36.	37.
4th	38.	39.	40.	41.	42.	43.	44.	45.	46.	47.	48.
5th	49.	50.	51.	52.	53.	54.	55.	56.	57.	58.	59.
6th	60.	61.	62.	63.	64.	65.	66.	67.	68.	69.	70.
7th	71.	72.	73.	74.	75.	76.	77.	78.	79.	80.	81.
8th	82.	83.	84.	85.	86.	87.	88.	89.	90.	91.	92.
9th	93.	94.	95.	96.	97.	98.	99.	100.	101.	102.	103.
10th	104.	105.	106.	107.	108.	109.	110.	111.	112.	113.	114.

OCCUPANT INJURY DATA

	Source of Injury Data	O.I.C.-A.I.S						Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
		Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect				
11th											
12th											
13th											
14th											
15th											
16th											
17th											
18th											
19th											
20th											
21st											
22nd											
23rd											
24th											
25th											

OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL
(1) Autopsy records with or without hospital/medical records
(2) Hospital/medical records other than emergency room (e.g., discharge summary)
(3) Emergency room records only (including associated X-rays or other lab reports)
(4) Private physician, walk-in or emergency clinic

UNOFFICIAL
(5) Lay coroner report
(6) E.M.S. personnel
(7) Interviewee
(8) Other source (specify):

(9) Police

INJURY SOURCE

FRONT
(01) Windshield
(02) Mirror
(03) Sunvisor
(04) Steering wheel rim
(05) Steering wheel hub/spoke
(06) Steering wheel (combination of codes 04 and 05)
(07) Steering column, transmission selector lever, other attachment
(08) Add on equipment (e.g., CB, tape deck, air conditioner)
(09) Left instrument panel and below
(10) Center instrument panel and below
(11) Right instrument panel and below
(12) Glove compartment door
(13) Knee bolster
(14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
(15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
(16) Driver side air bag compartment cover
(17) Passenger side air bag compartment cover
(18) Windshield reinforced by exterior object (specify):
(19) Other front object (specify):

LEFT SIDE
(20) Left side interior surface, excluding hardware or armrests
(21) Left side hardware or armrest
(22) Left A (A1/A2)-pillar
(23) Left B-pillar
(24) Other left pillar (specify):
(25) Left side window glass or frame
(26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
(27) Other left side object (specify):
(28) Left side window sill

RIGHT SIDE
(30) Right side interior surface, excluding hardware or armrests
(31) Right side hardware or armrest
(32) Right A (A1/A2)-pillar
(33) Right B-pillar
(34) Other right pillar (specify):
(35) Right side window glass or frame
(36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
(37) Other right side object (specify):
(38) Right side window sill

INTERIOR
(40) Seat, back support
(41) Belt restraint webbing/buckle
(42) Belt restraint B-pillar or door frame attachment point
(43) Other restraint system component (specify):
(44) Head restraint system
(45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
(46) Other occupants (specify):
(47) Interior loose objects
(48) Child safety seat (specify):
(49) Other interior object (specify):

ROOF
(50) Front header
(51) Rear header
(52) Roof left side rail
(53) Roof right side rail
(54) Roof or convertible top

FLOOR
(56) Floor (including toe pan)
(57) Floor or console mounted transmission lever, including console
(58) Parking brake handle
(59) Foot controls including parking brake

REAR
(60) Backlight (rear window)
(61) Backlight storage rack, door, etc.
(62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE
(65) Hood
(66) Outside hardware (e.g., outside mirror, antenna)
(67) Other exterior surface or tires (specify):
(68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE
(70) Front bumper
(71) Hood edge
(72) Other front of vehicle (specify):
(73) Hood
(74) Hood ornament
(75) Windshield, roof rail, A-pillar
(76) Side surface
(77) Side mirrors
(78) Other side protrusions (specify)
(79) Rear surface
(80) Undercarriage
(81) Tires and wheels
(82) Other exterior of other motor vehicle (specify):
(83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT
(84) Ground
(85) Other vehicle or object (specify)
(86) Unknown vehicle or object

NONCONTACT INJURY
(90) Fire in vehicle
(91) Flying glass
(92) Other noncontact injury source (specify):
(93) Air bag exhaust gases
(97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

(1) Certain
(2) Probable
(3) Possible
(9) Unknown

DIRECT/INDIRECT INJURY

(1) Direct contact injury
(2) Indirect contact injury
(3) Noncontact injury
(7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

(1) Head
(2) Face
(3) Neck
(4) Thorax
(5) Abdomen
(6) Spine
(7) Upper Extremity
(8) Lower Extremity
(9) Unspecified

Type of Anatomic Structure

(1) Whole Area
(2) Vessels
(3) Nerves
(4) Organs (includes muscles/ligaments)
(5) Skeletal (includes joints)
(6) Head - LOC
(9) Skin

Specific Anatomic Structure

Whole Area
(02) Skin - Abrasion
(04) Skin - Contusion
(06) Skin - Laceration
(08) Skin - Avulsion
(10) Amputation
(20) Burn
(30) Crush
(40) Degloving
(50) Injury - NFS
(90) Trauma, other than mechanical

Head - LOC
(02) Length of LOC
(04, 06, 08) Level of Consciousness
(10) Concussion

Spine
(02) Cervical
(04) Thoracic
(06) Lumbar

Vessels, Nerves, Organs, Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

(1) Minor injury
(2) Moderate injury
(3) Serious injury
(4) Severe injury
(5) Critical injury
(6) Maximum (untreatable)
(7) Injured, unknown severity

Aspect

(1) Right
(2) Left
(3) Bilateral
(4) Central
(5) Anterior
(6) Posterior
(7) Superior
(8) Inferior
(9) Unknown
(0) Whole region

OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

✓ No

___ Yes

Blood Alcohol Level (mg/dl)

BAL = 00

Glasgow Coma Scale Score

GCSS = /

not stated

Units of Blood Given

unknown

Units = ____

Arterial Blood Gases

pH = ./

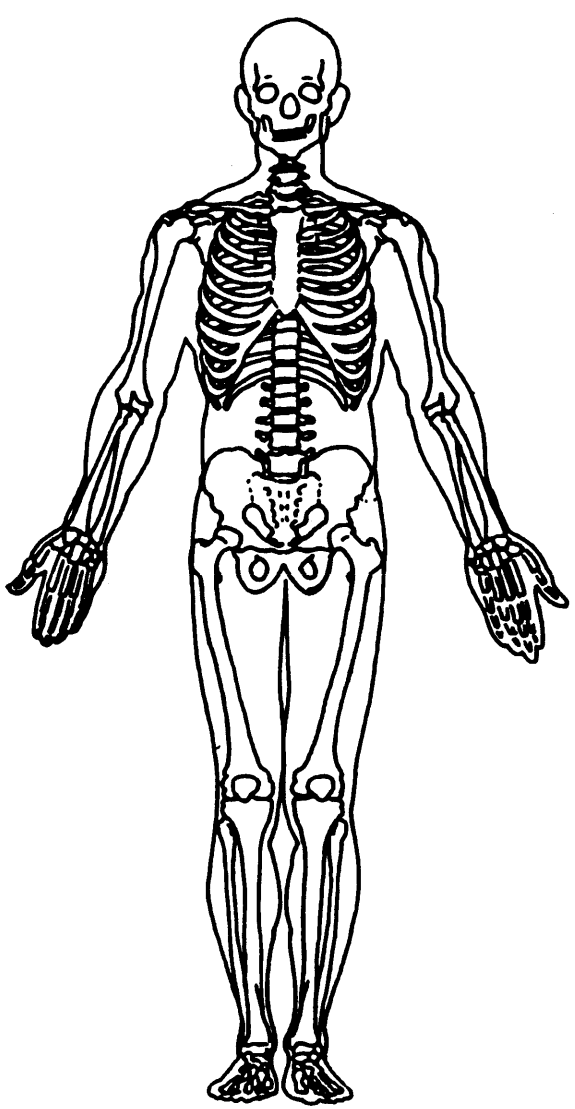
PO_2 = ____

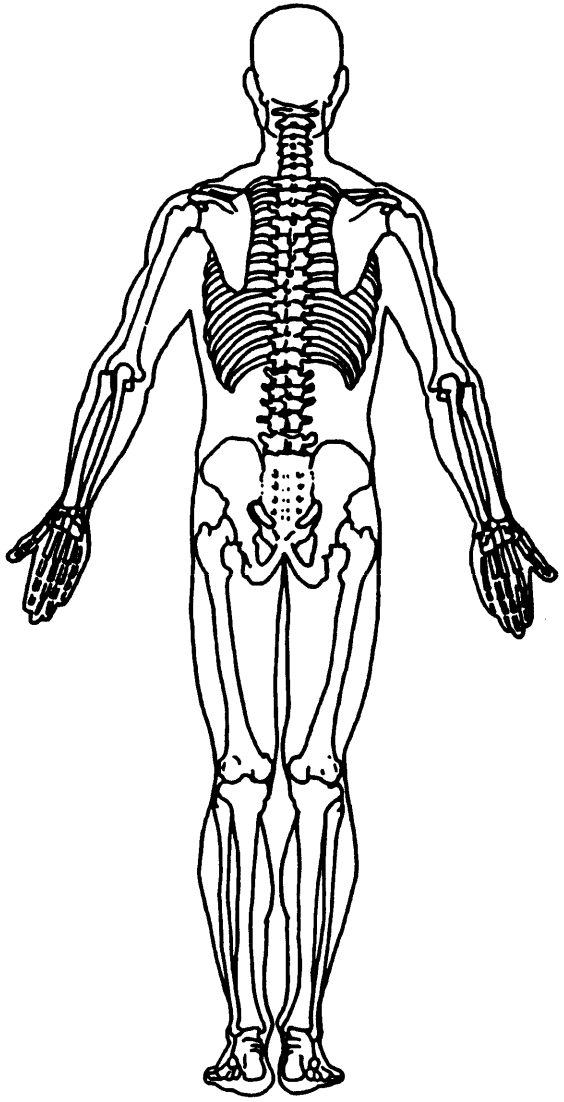
PCO_2 ____

HCO_3 ____

not stated

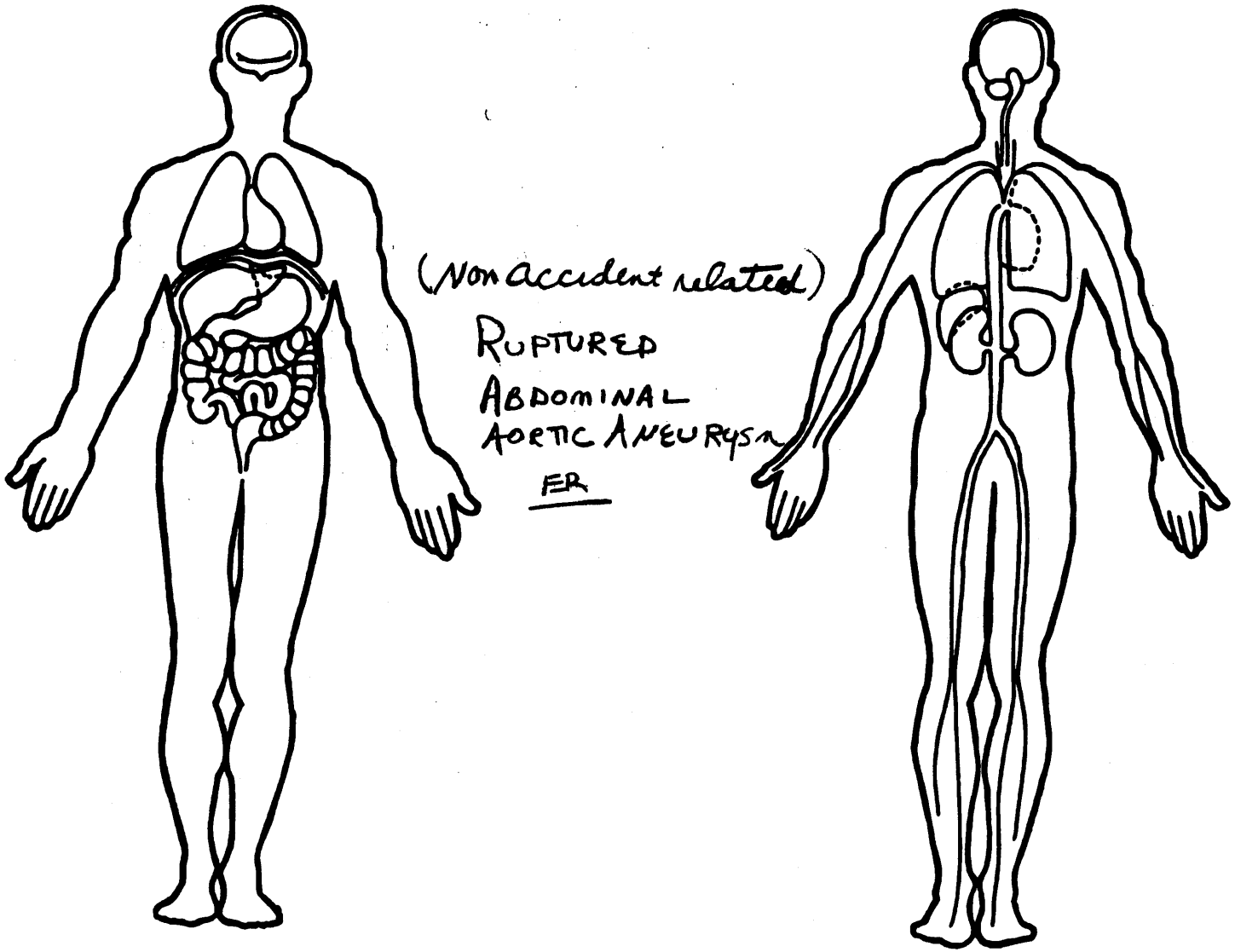
Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





OFFICIAL INJURY DATA — INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



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OCCUPANT RELATED

16. Driver Presence in Vehicle: 1
(0) Driver not present
(1) Driver present
(9) Unknown

17. Number of Occupants This Vehicle: 01
(00-96) Code actual number of occupants for this vehicle
(97) 97 or more
(99) Unknown

18. Number of Occupant Forms Submitted: 01

VEHICLE WEIGHT ITEMS

19. Vehicle Curb Weight: 1,780
1780 Code weight to nearest 10 kilograms.
(045) Less than 450 kilograms
(610) 6,100 kilograms or more
(999) Unknown
ADJUST. V6→V8 3825 + 100 = 3925
3,925 lbs X .4536 = 1,780 kgs
Source: 1992 [redacted]

20. Vehicle Cargo Weight: 000
____ Code weight to nearest 10 kilograms.
(000) Less than 5 kilograms
(450) 4,500 kilograms or more
(999) Unknown
(2.268 Kgs)
___,___ lbs X .4536 = ___,___ kgs

RECONSTRUCTION DATA

21. Towed Trailing Unit: 0
(0) No towed unit
(1) Yes—towed trailing unit
(9) Unknown

22. Documentation of Trajectory Data for This Vehicle: 0
(0) No
(1) Yes

23. Post Collision Condition of Tree or Pole (For Highest Delta V): 0
(0) Not collision (for highest delta V) with tree or pole
(1) Not damaged
(2) Cracked/sheared
(3) Tilted <45 degrees
(4) Tilted ≥45 degrees
(5) Uprooted tree
(6) Separated pole from base
(7) Pole replaced
(8) Other (specify):
(9) Unknown

24. Rollover: 0
(0) No rollover (no overturning)

Rollover (primarily about the longitudinal axis)
(1) Rollover, 1 quarter turn only
(2) Rollover, 2 quarter turns
(3) Rollover, 3 quarter turns
(4) Rollover, 4 or more quarter turns (specify):
(5) Rollover--end-over-end (i.e., primarily about the lateral axis)
(9) Rollover (overturn), details unknown

OVERRIDE/UNDERRIDE (THIS VEHICLE)

25. Front Override/Underride (this Vehicle): 4

26. Rear Override/Underride (this Vehicle): 0

(0) No override/underride, or not an end-to-end impact

Override (see specific CDC)
(1) 1st CDC
(2) 2nd CDC
(3) Other not automated CDC (specify):

Underride (see specific CDC)
(4) 1st CDC
(5) 2nd CDC
(6) Other not automated CDC (specify):

(7) Medium/heavy truck or bus override
(9) Unknown

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V

Values: (000)-(359) Code actual value
(997) Noncollision
(998) Impact with object
(999) Unknown

27. Heading Angle For This Vehicle: 323

28. Heading Angle For Other Vehicle: 128

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OTHER DATA

56. Driver's Zip Code [redacted]

(00000) Driver not present
(00001) Driver not a resident of U.S. or territories
_____ Code actual 5-digit zip code
(99999) Unknown

57. Driver's Race/Ethnic Origin 1
(0) Driver not present
(1) White (non-Hispanic)
(2) Black (non-Hispanic)
(3) White (Hispanic)
(4) Black (Hispanic)
(5) American Indian, Eskimo or Aleut
(6) Asian or Pacific Islander
(8) Other (specify): _____
(9) Unknown

58. Vehicle Special Use (This Trip) 0
(0) No special use
(1) Taxi
(2) Vehicle used as school bus
(3) Vehicle used as other bus
(4) Military
(5) Police
(6) Ambulance
(7) Fire truck or car
(8) Other (specify): _____
(9) Unknown

ROLLOVER DATA

If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank.
If GV24 (Rollover) = 0, then GV59-GV63 must equal 0.
If GV24 = 9, then GV59-GV63 must equal 9.

59. Rollover Initiation Type 0
(0) No rollover
(1) Trip-over
(2) Flip-over
(3) Turn-over
(4) Climb-over
(5) Fall-over
(6) Bounce-over
(7) Collision with another vehicle
(8) Other rollover initiation type specify): _____
(9) Unknown rollover initiation type

60. Location of Rollover Initiation 0
(0) No rollover
(1) On roadway
(2) On shoulder—paved
(3) On shoulder—unpaved
(4) On roadside or divided trafficway median
(9) Unknown

61. Rollover Initiation Object Contacted 00

62. Location on Vehicle Where Initial Principal Tripping Force Is Applied 0
(0) No rollover
(1) Wheels/tires
(2) Side plane
(3) End plane
(4) Undercarriage
(5) Other location on vehicle (specify): _____
(8) Non-contact rollover forces (specify): _____
(9) Unknown

63. Direction of Initial Roll 0
(0) No rollover
(1) Roll right - primarily about the longitudinal axis
(2) Roll left - primarily about the longitudinal axis
(5) End-over-end (i.e., primarily about the lateral axis)
(9) Unknown roll direction

PRECRASH DATA

64. Pre-Event Movement (Prior to Recognition of Critical Event) 13
(01) Going straight
(02) Slowing or stopping in traffic lane
(03) Starting in traffic lane
(04) Stopped in traffic lane
(05) Passing or overtaking another vehicle
(06) Disabled or parked in travel lane
(07) Leaving a parking position
(08) Entering a parking position
(09) Turning right
(10) Turning left
(11) Making a U-turn
(12) Backing up (other than for parking position)
(13) Negotiating a curve
(14) Changing lanes
(15) Merging
(16) Successful avoidance maneuver to a previous critical event
(97) Other (specify): _____
(98) No driver present
(99) Unknown

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover
(01-30) — Vehicle Number

Noncollision
(31) Turn-over — fall-over
(33) Jackknife

Collision With Fixed Object
(41) Tree (≤ 10 cm in diameter)
(42) Tree (> 10 cm in diameter)
(43) Shrubbery or bush
(44) Embankment

(45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post
(50) Pole or post (≤ 10 cm in diameter)
(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)
(52) Pole or post (> 30 cm in diameter)
(53) Pole or post (diameter unknown)

(54) Concrete traffic barrier
(55) Impact attenuator
(56) Other traffic barrier (includes guardrail) (specify):_____

(57) Fence
(58) Wall
(59) Building
(60) Ditch or culvert
(61) Ground
(62) Fire hydrant
(63) Curb
(64) Bridge
(68) Other fixed object (specify):
_____
(69) Unknown fixed object

Collision with Nonfixed Object
(71) Motor vehicle not in-transport
(76) Animal
(77) Train
(78) Trailer, disconnected in transport
(88) Other nonfixed object (specify):
_____
(89) Unknown nonfixed object

(98) Other event (specify):
_____
(99) Unknown event or object

U.S. Department of Transportation
National Highway Traffic Safety Administration

EXTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number: Φ8
2. Case Number - Stratum: Φ21A
3. Vehicle Number: Φ2

VEHICLE IDENTIFICATION

VIN 2B7GB1 1Y [redacted] Model Year 93

Vehicle Make (specify): DODGE Vehicle Model (specify): RAM VAN 150

LOCATOR

Locate the end of the damage with respect to the vehicle longitudinal center line or bumper corner for end impacts or an undamaged axle for side impacts.

Specific Impact No.	Location of Direct Damage	Location of Field L
Φ1 + Φ1A	Beg RF BC → (L); Beg 58.5cm (L) of arr → (R)	ENTIRE FRONT BUMPER
Φ2	Beg 21.5 cm Forw of LF Axle → Forw	Beg 7.5cm Forw. of LF Axle → Forw

(BC = BUMPER CORNER; CTR = CENTER; → = EXTENDS)

R/O

CRUSH PROFILE IN CENTIMETERS

NOTES: Identify the plane at which the C-measurements are taken (e.g., at bumper, above bumper, at sill, above sill, etc.) and label adjustments (e.g., free space).

Measure and document on the vehicle diagram the location of maximum crush.

Measure C1 to C6 from driver to passenger side in front or rear impacts and rear to front in side impacts.

FRONT BL. = 7.5cm AT CORNERS; 8CM FOR OTHER C's

Free space value is defined as the distance between the baseline and the original body contour taken at the individual C locations. This may include the following: bumper lead, bumper taper, side protrusion, side taper, etc. Record the value for each C-measurement and maximum crush.

Use as many lines/columns as necessary to describe each damage profile. AT C6

Specific Impact Number	Plane of Impact C-Measurements	Direct Damage Width (CDC)	Direct Damage Max Crush	Field L	C_1	C_2	C_3	C_4	C_5	C_6	±D
Φ1	FRONT BUMPER	155	33.5	192	5.5	4.4	8.5	14.8	21.5	33.5	+19cm
	FS		8.5		8.5	2.5	.5	.5	2.5	8.5	
	RESULTANT		25		Φ	1.9	8	14.3	19	25	
Φ1A	ABOVE BUMPER	155	69.75	192	15.6	13.2	23.35	35.35	69.75	70.75	+19cm
	FS + BL		10.5		16	10.5	8.5	8.5	10.5	16	
	RESULTANT		59.25		Φ	2.7	14.85	26.85	59.25	54.75	
			AT C5								
ΦΦ	FRONT AVE CRUSH								39.125	39.875	
Φ2	(L) SIDE	16.5	4 cm	48							+190.75 cm
R/O AS	POST COLLISION TOW DAMAGE										

RED CLAMP NOT USED AT 2ND Level

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VEHICLE DAMAGE SKETCH

TIRE—WHEEL DAMAGE

	a. Rotation physically restricted	b. Tire deflated
RF	1	1
LF	2	2
RR	2	2
LR	2	2

(1) Yes (2) No (8) NA (9) Unk.

TYPE OF TRANSMISSION

☐ Manual ☑ Automatic

ORIGINAL SPECIFICATIONS

Wheelbase	324	cm
Overall Length	505	cm
Maximum Width	202	cm
Curb Weight	1780	kg
Average Track	167	cm
Front Overhang	~ 76	cm
Rear Overhang	~ 105	cm
Undeformed End Width	196	cm
Engine Size: cyl./displ.	V8 5.2L	L

WHEEL STEER ANGLES

(For locked front wheels or displaced rear axles only)

RF ± 1 2 °
LF ± ___ ___ °
RR ± ___ ___ °
LR ± ___ ___ °

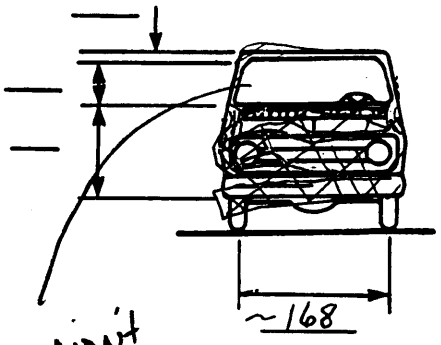
Within ± 5 degrees

DRIVE WHEELS

☐ FWD ☑ RWD ☐ 4WD

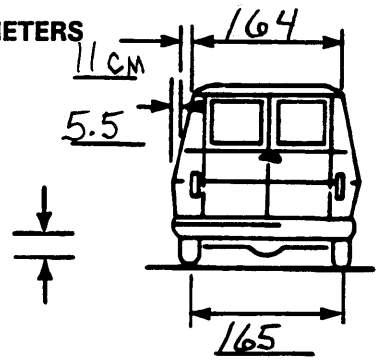
Approximate Cargo Weight 2,268 kg (5 LBS wicker items)

MEASUREMENTS IN CENTIMETERS

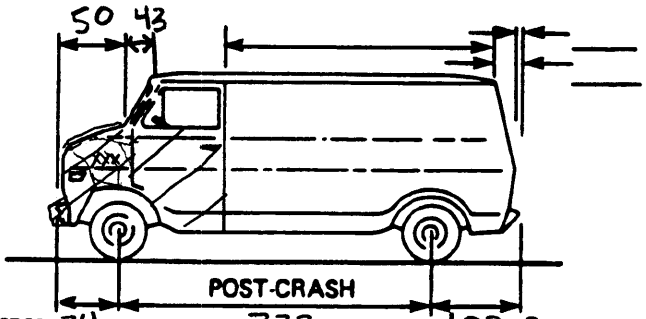


Original Bumper height

31CM

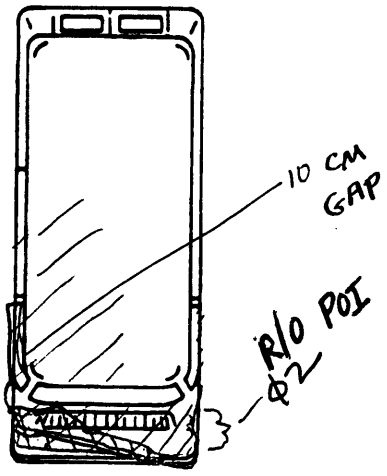


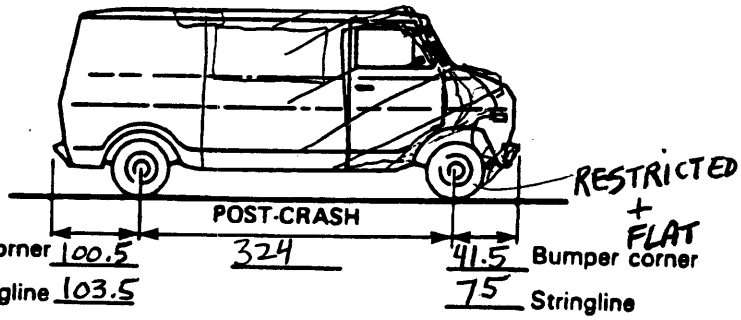
W.S. DIDN'T CRACK - it only SEPARATED FROM MOLDING ON (R) + LOWER EDGE.



Bumper corner 74 Stringline 79.5

102 Bumper corner 105 Stringline





Bumper corner 100.5 Stringline 103.5

41.5 Bumper corner 75 Stringline

NOTES: Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

PSU 08-021A v2

CDC WORKSHEET

CODES FOR OBJECT CONTACTED

(01-30) — Vehicle Number

Noncollision
- (31) Overturn — rollover
- (32) Fire or explosion
- (33) Jackknife
- (34) Other intraunit damage (specify): _____
- (35) Noncollision injury
- (38) Other noncollision (specify): _____
- (39) Noncollision — details unknown

Collision With Fixed Object
- (41) Tree (≤ 10 cm in diameter)
- (42) Tree (> 10 cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment
- (45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post
- (50) Pole or post (≤ 10 cm in diameter)
- (51) Pole or post (> 10 cm but ≤ 30 cm in diameter)
- (52) Pole or post (> 30 cm in diameter)
- (53) Pole or post (diameter unknown)
- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail) (specify): _____
- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify): _____
- (69) Unknown fixed object

Collision with Nonfixed Object
- (71) Motor vehicle not in-transport
- (72) Pedestrian
- (73) Cyclist or cycle
- (74) Other nonmotorist or conveyance _____
- (75) Vehicle occupant
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (88) Other nonfixed object (specify): _____
- (89) Unknown nonfixed object
- (98) Other event (specify): _____
- (99) Unknown event or object

DEFORMATION CLASSIFICATION BY EVENT NUMBER

Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation Location	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
01	01	-10°		F	D	E	W	06
02	99	-20°		L	F	M	S	01
RO	AS POST-COLLISION TOW DAMAGE — NOTHING IN SCENE ENVIRONMENT TO ASSOC. W/THIS DAMAGE.							

U.S. Department of Transportation

National Highway Traffic Safety Administration

INTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

BUT W.S. DID SEPARATE FROM THE MOLDING ON THE RIGHT AND BOTTOM EDGE.

1. Primary Sampling Unit Number: 08
2. Case Number - Stratum: 021A
3. Vehicle Number: 02

INTEGRITY

4. Passenger Compartment Integrity: 00

(00) No integrity loss

Yes, Integrity Was Lost Through
(01) Windshield
(02) Door (side)
(03) Door/hatch (back door)
(04) Roof
(05) Roof glass
(06) Side window
(07) Rear window (backlight)
(08) Roof and roof glass
(09) Windshield and door (side)
(10) Windshield and roof
(11) Side and rear window (side window and backlight)
(12) Windshield and side window
(13) Door and side window
(98) Other combination of above (specify): _____
(99) Unknown

Door, Tailgate or Hatch Opening

5. LF 1 6. RF 3 7. LR 0 8. RR 1 9. TG/H 1

(0) No door/gate/hatch
(1) Door/gate/hatch remained closed and operational
(2) Door/gate/hatch came open during collision
(3) Door/gate/hatch jammed shut
(8) Other (specify): _____
(9) Unknown

Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø

10. LF 0 11. RF 0 12. LR 0 13. RR 0 14. TG/H 0

(0) No door/gate/hatch or door not opened

Door, Tailgate or Hatch Came Open During Collision
(1) Door operational (no damage)
(2) Latch/striker failure due to damage
(3) Hinge failure due to damage
(4) Door structure failure due to damage
(5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage
(6) Latch/striker and hinge failure due to damage
(8) Other failure (specify): _____
(9) Unknown

GLAZING

Glazing Damage from Impact Forces

15. WS 0 16. LF 0 17. RF 0 18. LR 8 19. RR 0
20. BL 0 21. Roof 8 22. Other 0

(0) No glazing damage from impact forces
(2) Glazing in place and cracked from impact forces
(3) Glazing in place and holed from impact forces
(4) Glazing out-of-place (cracked or not) and not holed from impact forces
(5) Glazing out-of-place and holed from impact forces
(6) Glazing disintegrated from impact forces
(7) Glazing removed prior to accident
(8) No glazing
(9) Unknown if damaged

Glazing Damage from Occupant Contact

23. WS 0 24. LF 0 25. RF 0 26. LR 0 27. RR 0
28. BL 0 29. Roof 0 30. Other 0

(0) No occupant contact to glazing or no glazing
(1) Glazing contacted by occupant but no glazing damage
(2) Glazing in place and cracked by occupant contact
(3) Glazing in place and holed by occupant contact
(4) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact
(5) Glazing out-of-place by occupant contact and holed by occupant contact
(6) Glazing disintegrated by occupant contact
(9) Unknown if contacted by occupant

If No Glazing Damage *And* No Occupant Contact or No Glazing, Then Code IV31 Through IV46 As Ø

Type of Window/Windshield Glazing

31. WS 0 32. LF 0 33. RF 0 34. LR 0 35. RR 0
36. BL 0 37. Roof 0 38. Other 0

(0) No glazing contact and no damage, or no glazing
(1) AS-1 — Laminated
(2) AS-2 — Tempered
(3) AS-3 — Tempered-tinted
(4) AS-14 — Glass/Plastic
(8) Other (specify): _____
(9) Unknown

Window Precrash Glazing Status

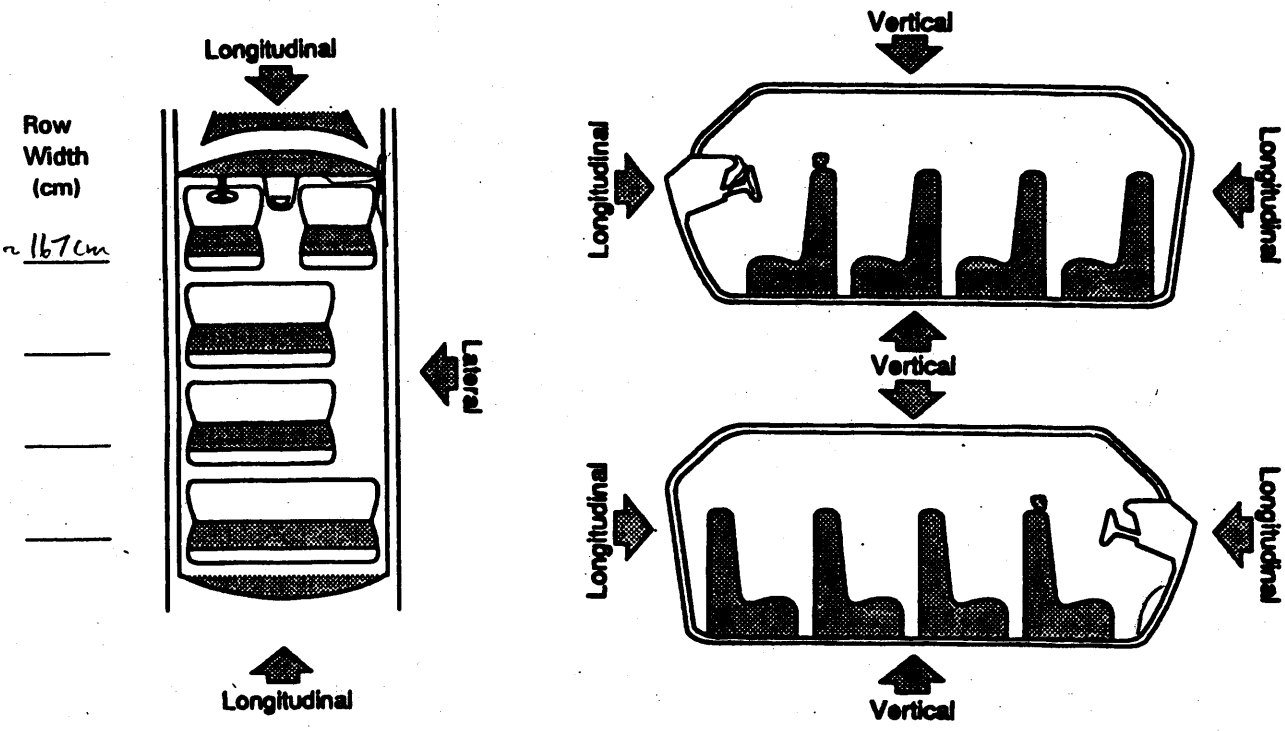
39. WS 0 40. LF 0 41. RF 0 42. LR 0 43. RR 0
44. BL 0 45. Roof 0 46. Other 0

(0) No glazing contact and no damage, or no glazing
(1) Fixed
(2) Closed
(3) Partially opened
(4) Fully opened
(9) Unknown

BEST AVAILABLE

INTRUSION WORKSHEET

Note: Sketch intruded areas



LOCATION OF INTRUSION	INTRUDED COMPONENT	(All Measurements Are In Centimeters) COMPARISON VALUE	–	INTRUDED VALUE	=	INTRUSION	DOMINANT CRUSH DIRECTION	
11	ST COL Hub	71	–	73 to Floor	=	2	vert	X
13	TOE PAN	75	–	49.5 to TK	=	25.5	Long	1✓
13	DOOR PANEL	38	–	32.5 to Lower Hinge	=	5.5	LAT	3✓
13	FLOOR on Top of Toe Hump	54	–	55 to Top of Hump	=	-1	vert	X
13	(R) SIDE SURF	38	–	33 to Lower Corner	=	5	LAT	4✓
13	(R) A-pill	41	–	38 " "	=	3	LAT	5✓
13	(R) SILL on	35.5	–	36 " "	=	-.5	LAT	X
13	(R) Inst. P	92.5	–	79.5 to BACK SURF OF B-pill	=	13	Long.	2✓
			–		=			
			–		=			
			–		=			
			–		=			
			–		=			
			–		=			
			–		=			

Document no more than the 15 most severe intrusions

OCCUPANT AREA INTRUSION

Note: If no intrusions, leave variables IV47-IV86 blank.

	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47. 13	48. 05	49. 3	50. 2
2nd	51. 13	52. 04	53. 2	54. 2
3rd	55. 13	56. 10	57. 1	58. 3
4th	59. 13	60. 27	61. 1	62. 3
5th	63. 13	64. 06	65. 1	66. 3
6th	67. ___ ___	68. ___ ___	69. ___	70. ___
7th	71. ___ ___	72. ___ ___	73. ___	74. ___
8th	75. ___ ___	76. ___ ___	77. ___	78. ___
9th	79. ___ ___	80. ___ ___	81. ___	82. ___
10th	83. ___ ___	84. ___ ___	85. ___	86. ___

LOCATION OF INTRUSION

Front Seat
- (11) Left
- (12) Middle
- (13) Right

Second Seat
- (21) Left
- (22) Middle
- (23) Right

Third Seat
- (31) Left
- (32) Middle
- (33) Right

Fourth Seat
- (41) Left
- (42) Middle
- (43) Right

- (97) Catastrophic
- (98) Other enclosed area (specify) _____
- (99) Unknown

INTRUDING COMPONENT

Interior Components
- (01) Steering assembly
- (02) Instrument panel left
- (03) Instrument panel center
- (04) Instrument panel right
- (05) Toe pan
- (06) A (A1/A2)-pillar
- (07) B-pillar
- (08) C-pillar
- (09) D-pillar
- (10) Door panel (side)
- (12) Roof (or convertible top)
- (13) Roof side rail
- (14) Windshield
- (15) Windshield header
- (16) Window frame
- (17) Floor pan (includes sill)
- (18) Backlight header
- (19) Front seat back
- (20) Second seat back
- (21) Third seat back
- (22) Fourth seat back
- (23) Fifth seat back
- (24) Seat cushion
- (25) Back door/panel (e.g., tailgate)
- (26) Other interior component (specify): _____
- (27) Side panel - forward of the A (A2)-pillar
- (28) Side panel - rear of the A (A2)-pillar

Exterior Components
- (30) Hood
- (31) Outside surface of this vehicle (specify): _____
- (32) Other exterior object in the environment (specify): _____
- (33) Unknown exterior object
- (97) Catastrophic
- (98) Intrusion of unlisted component(s) (specify): _____
- (99) Unknown

MAGNITUDE OF INTRUSION
- (1) ≥ 3 centimeters but < 8 centimeters
- (2) ≥ 8 centimeters but < 15 centimeters
- (3) ≥ 15 centimeters but < 30 centimeters
- (4) ≥ 30 centimeters but < 46 centimeters
- (5) ≥ 46 centimeters but < 61 centimeters
- (6) ≥ 61 centimeters
- (7) Catastrophic
- (9) Unknown

DOMINANT CRUSH DIRECTION
- (1) Vertical
- (2) Longitudinal
- (3) Lateral
- (7) Catastrophic
- (9) Unknown

STEERING RIM SPOKE DEFORMATION

(All Measurements Are in Centimeters)

COMPARISON VALUE	—	DAMAGE VALUE	=	DEFORMATION
	—		=	
	—		=	
	—		=	
	—		=	

STEERING COLUMN

87. Steering Column Type — 1
(1) Fixed column
(2) Tilt column
(3) Telescoping column
(4) Tilt and telescoping column
(8) Other column type (specify): _____
(9) Unknown

88. Blank — X X
(This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

89. Blank — X X X
(This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

90. Blank — X X X
(This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

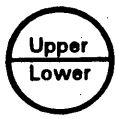
91. Blank — X X X
(This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.)

92. Steering Rim/Spoke Deformation — 00
____Code actual measured deformation to the nearest centimeter
(00) No steering rim deformation
(01-14) Actual measured value in centimeters
(15) 15 centimeters or more
(98) Observed deformation cannot be measured
(99) Unknown

93. Location of Steering Rim/Spoke Deformation — 00
(00) No steering rim deformation

Quarter Sections
(01) Section A
(02) Section B
(03) Section C
(04) Section D

Half Sections
(05) Upper half of rim/spoke
(06) Lower half of rim/spoke
(07) Left half of rim/spoke
(08) Right half of rim/spoke



(09) Complete steering wheel collapse
(10) Undetermined location
(99) Unknown

INSTRUMENT PANEL

94. Odometer Reading — 008,000
8,090 kilometers—Code to the nearest 1,000 kilometers
(000) No odometer
(001) Less than 1,500 kilometers
(500) 499,500 kilometers or more
(999) Unknown

5,027 miles X 1.6093 = 8,090 kilometers

Source: [redacted]

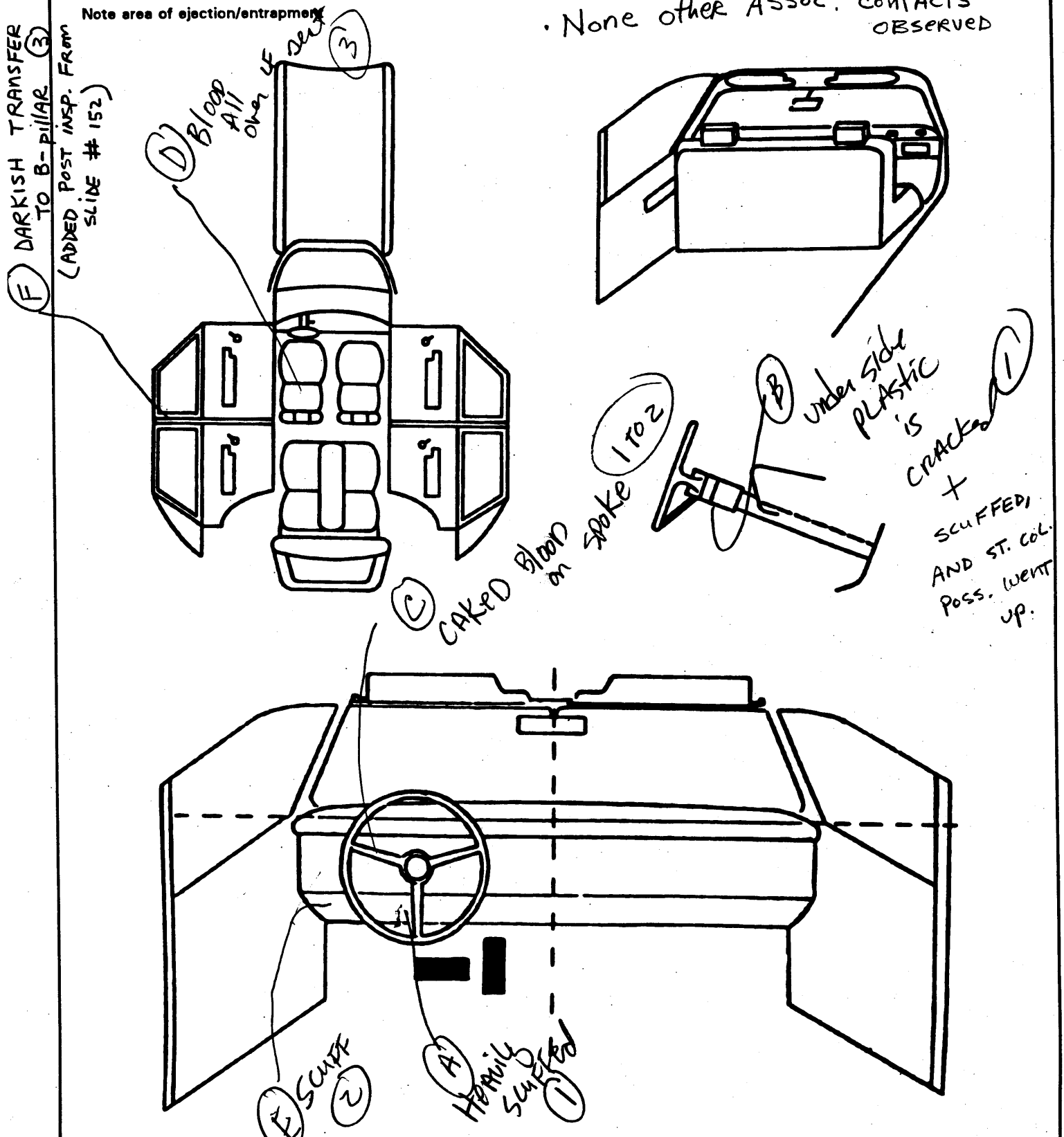
95. Instrument Panel Damage from Occupant Contact? — 1
(0) No
(1) Yes
(9) Unknown

96. Knee Bolsters Deformed from Occupant Contact? — 8
(0) No
(1) Yes
(8) Not present
(9) Unknown

97. Did Glove Compartment Door Open During Collision(s)? — 0
(0) No
(1) Yes
(8) Not present
(9) Unknown

VEHICLE INTERIOR SKETCHES

Note area of ejection/entrapment



Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure.
Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.
Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

ST. COL. Poss. went UP.

POINTS OF OCCUPANT CONTACT

Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical Evidence	Confidence Level of Contact Point
A	09	01	(R) KNEE	LOWER PORTION IS HEAVILY SCUFFED	1
B	07	01	(R) THIGH	UNDERSIDE OF COL. PLASTIC IS CRACKED + SCUFFED	1
C	05	01	FACE	CAKED BLOOD ON SPOKE	1 TO 2
D	40	01	UPPER BODY	BLOOD ALL OVER LF SEAT	3
E	09	01	(L) KNEE	SCUFF TO LOWER (L) PORTION	2
F	23	01	HEAD	DARK TRANSFER TO (L) B-PILLAR	3
G					
H					
I					
J					
K					
L					
M					
N					

CODES FOR INTERIOR COMPONENTS

FRONT
- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify):_____
- (19) Other front object (specify):_____

LEFT SIDE
- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify):_____
- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify):_____
- (28) Left side window sill

RIGHT SIDE
- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- (34) Other right pillar (specify):_____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B pillar, or roof side rail.
- (37) Other right side object (specify):_____
- (38) Right side window sill

INTERIOR
- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify):_____
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):_____
- (47) Interior loose objects
- (48) Child safety seat (specify):_____
- (49) Other interior object (specify):_____

ROOF
- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR
- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR
- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):_____

CONFIDENCE LEVEL OF CONTACT POINT
- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

AIR BAGS

		Left	Right
FIRST	Availability/Function		
	Deployment		
	Failure		

Air Bag System Availability/Function
- (0) Not equipped/not available
- (1) Air bag

Non-functional
- (2) Air bag disconnected (specify): _____
- (3) Air bag not reinstalled
- (9) Unknown

Air Bag System Deployment
- (0) Not equipped/not available
- (1) Air bag deployed during accident (as a result of impact)
- (2) Air bag deployed inadvertently just prior to accident
- (3) Air bag deployed, accident sequence undetermined
- (4) Nondeployed
- (5) Unknown if deployed
- (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- (9) Unknown

Did Air Bag System Fail?
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): _____
- (9) Unknown

AUTOMATIC BELTS

		Left	Right
FIRST	Availability/Function		
	Use		
	Type		
	Proper Use		
	Failure Modes		

Automatic (Passive) Belt System Availability/Function
- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts - type unknown

Non-functional
- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

Automatic (Passive) Belt System Use
- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative)
- (3) Automatic belt use unknown
- (9) Unknown

Automatic (Passive) Belt System Type
- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

Proper Use of Automatic (Passive) Belt System
- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

Automatic Belt Used Improperly
- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): _____
- (8) Other improper use of automatic belt system (specify): _____
- (9) Unknown

Automatic (Passive) Belt Failure Modes During Accident
- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify): _____
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other automatic belt failure (specify): _____
- (9) Unknown

MANUAL RESTRAINTS

NOTES: Encode the applicable data **for each seat position** in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Ocupant Assessment Form.

- But, veh. is 1993 MODEL YEAR, AND RELATIVELY MINOR CONTACT POINTS MAY SUPPORT BELT use in this previous COLLISION.

If a Child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the page.

Very Few SIGNS OF STRUKING

		Left	Center	Right
FIRST	Availability	4	0	4 *
	Use	00 | 04	00	00
	Failure Modes	0 | 1	0	0
SECOND	Availability			
	Use			
	Failure Modes			
THIRD	Availability			
	Use			
	Failure Modes			
OTHER	Availability			
	Use			
	Failure Modes			

Manual (Active) Belt System Availability

(0) None available
(1) Belt removed/destroyed
(2) Shoulder belt
(3) Lap belt
(4) Lap and shoulder belt
(5) Belt available - type unknown

* PAST USE - NOT in this COLLISION.

Integral Belt Partially Destroyed

(6) Shoulder belt (lap belt destroyed/removed)
(7) Lap belt (shoulder belt destroyed/removed)
(8) Other belt (specify): _____
(9) Unknown

Manual (Active) Belt System Use

(00) None used, not available, or belt removed/destroyed
(01) Inoperable (specify): _____
(02) Shoulder belt
(03) Lap belt
(04) Lap and shoulder belt
(05) Belt used - type unknown
(08) Other belt used (specify): _____
(12) Shoulder belt used with child safety seat
(13) Lap belt used with child safety seat
(14) Lap and shoulder belt used with child safety seat
(15) Belt used with child safety seat - type unknown
(18) Other belt used with child safety seat (specify): _____
(99) Unknown if belt used

Manual (Active) Belt Failure Modes During Accident

(0) No manual belt used or not available
(1) No manual belt failure(s)
(2) Torn webbing (stretched webbing not included)
(3) Broken buckle or latchplate
(4) Upper anchorage separated
(5) Other anchorage separated (specify): _____
(6) Broken retractor
(7) Combination of above (specify): _____
(8) Other manual belt failure (specify): _____
(9) Unknown

CHILD SAFETY SEAT FIELD ASSESSMENT

When a child safety seat is present enter the occupant's number in the first row and complete the column below the occupant's number using the codes listed below. Complete a column for each child safety seat present.

Occupant Number						
1. Type of Child Safety Seat						
2. Child Safety Seat Orientation						
3. Child Safety Seat Harness Usage						
4. Child Safety Seat Shield Uasge						
5. Child Safety Seat Tether Usage						
6. Child Safety Seat Make/Model	Specify Below for Each Child Safety Seat					

1. Type of Child Safety Seat

   (0) No child safety seat
   (1) Infant seat
   (2) Toddler seat
   (3) Convertible seat
   (4) Booster seat
   (7) Other type child safety seat (specify):

   _____

   (8) Unknown child safety seat type
   (9) Unknown if child safety seat used

2. Child Safety Seat Orientation

   (00) No child safety seat

   Designed for Rear Facing for This Age/Weight
   (01) Rear facing
   (02) Forward facing
   (08) Other orientation (specify):

   _____

   (09) Unknown orientation

   Designed for Forward Facing for This Age/Weight
   (11) Rear facing
   (12) Forward facing
   (18) Other orientation (specify):

   _____

   (19) Unknown orientation

   Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight
   (21) Rear facing
   (22) Forward facing
   (28) Other orientation (specify):

   _____

   (29) Unknown orientation

   (99) Unknown if child safety seat used

3. Child Safety Seat Harness Usage

4. Child Safety Seat Shield Usage

5. Child Safety Seat Tether Usage
   Note: Options Below Are Used for Variables 3-5.

   (00) No child safety seat

   Not Designed with Harness/Shield/Tether
   (01) After market harness/shield/tether added, not used
   (02) After market harness/shield/tether used
   (03) Child safety seat used, but no after market harness/shield/tether added
   (09) Unknown if harness/shield/tether added or used

   Designed With Harness/Shield/Tether
   (11) Harness/shield/tether not used
   (12) Harness/shield/tether used
   (19) Unknown if harness/shield/tether used

   Unknown If Designed With Harness/Shield/Tether
   (21) Harness/shield/tether not used
   (22) Harness/shield/tether used
   (29) Unknown if harness/shield/tether used

   (99) Unknown if child safety seat used

6. Child Safety Seat Make/Model
   (Specify make/model and occupant number)

   _____

   _____

   _____

   _____

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for **each seat position** in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
FIRST	Head Restraint Type/Damage	1	0	1
	Seat Type	10	00	10 → RF DOOR ISN'T TOUCHING SEAT.
	Seat Performance	1	0	1
	Seat Orientation	1	0	1
SECOND	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
THIRD	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			
OTHER	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			

Head Restraint Type/Damage by Occupant at This Occupant Position

(0) No head restraints
(1) Integral — no damage
(2) Integral — damaged during accident
(3) Adjustable — no damage
(4) Adjustable — damaged during accident
(5) Add-on — no damage
(6) Add-on — damaged during accident
(8) Other Specify): _____
(9) Unknown

Seat Type (this Occupant Position)

(00) Occupant not seated or no seat
(01) Bucket
(02) Bucket with folding back
(03) Bench
(04) Bench with separate back cushions
(05) Bench with folding back(s)
(06) Split bench with separate back cushions
(07) Split bench with folding back(s)
(08) Pedestal (i.e., column supported)
(09) Other seat type (specify): _____
(10) Box mounted seat (i.e., van type)
(99) Unknown

Seat Performance (this Occupant Position)

(0) Occupant not seated or no seat
(1) No seat performance failure(s)
(2) Seat adjusters failed
(3) Seat back folding locks or "seat back" failed specify: _____
(4) Seat tracks/anchors failed
(5) Deformed by impact of occupant
(6) Deformed by passenger compartment intrusion (specify): _____
(7) Combination of above (specify): _____
(8) Other (specify): _____
(9) Unknown

Seat Orientation (this Occupant Position)

(0) Occupant not seated or no seat
(1) Forward facing seat
(2) Rear facing seat
(3) Side facing seat (inward)
(4) Side facing seat (outward)
(8) Other (specify): _____
(9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT CONTACT PATTERN)

EJECTION/ENTRAPMENT DATA

Complete the following if the researcher has any indication that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occpant Assessment Form.

EJECTION No [√] Yes [ ]

Describe indications of ejection and body parts involved in partial ejection(s):

Occupant Number						
Ejection						
(Note on Vehicle Interior Sketch) Ejection Area						
Ejection Medium						
Medium Status						

Ejection
(1) Complete ejection
(1) Partial ejection
(3) Ejection, Unknown degree
(9) Unknown

Ejection Area
(1) Windshield
(2) Left front
(3) Right front
(4) Left rear
(5) Right rear
(6) Rear
(7) Roof
(8) Other area (e.g., back of pickup, etc.) (specify): _____
(9) Unknown

Ejection Medium
(1) Door/hatch/tailgate
(2) Nonfixed roof structure
(3) Fixed glazing
(4) Nonfixed glazing (specify): _____
(5) Integral structure
(8) Other medium (specify): _____
(9) Unknown

Medium Status (Immediately Prior to Impact)
(1) Open
(2) Closed
(3) Integral structure
(9) Unknown

ENTRAPMENT No [√] Yes [ ]

Describe entrapment mechanism: _____

Component(s): _____

(Note in vehicle interior diagram)

PSU 08-021A V2

HEAD RESTRAINT AND SEAT EVALUATION

25. Head Restraint Type/Damage by Occupant at This Occupant Position 1
    (0) No head restraints
    (1) Integral—no damage
    (2) Integral—damaged during accident
    (3) Adjustable—no damage
    (4) Adjustable—damaged during accident
    (5) Add-on—no damage
    (6) Add-on—damaged during accident
    (8) Other (specify): _____
    (9) Unknown

26. Seat Type (this Occupant Position) 10
    (00) Occupant not seated or no seat
    (01) Bucket
    (02) Bucket with folding back
    (03) Bench
    (04) Bench with separate back cushions
    (05) Bench with folding back(s)
    (06) Split bench with separate back cushions
    (07) Split bench with folding back(s)
    (08) Pedestal (i.e., column supported)
    (09) Other seat type (specify): _____
    (10) Box mounted seat (i.e., van type)
    (99) Unknown

27. Seat Performance (this Occupant Position) 1
    (0) Occupant not seated or no seat
    (1) No seat performance failure(s)
    (2) Seat adjusters failed
    (3) Seat back folding locks or "seat back" failed
    (4) Seat track/anchors failed
    (5) Deformed by impact of occupant
    (6) Deformed by passenger compartment intrusion (specify): _____
    (7) Combination of above (specify): _____
    (8) Other (specify): _____
    (9) Unknown

U.S. Department of Transportation

National Highway Traffic Safety Administration

OCCUPANT INJURY FORM

Form Approved
O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number	0 8	3. Vehicle Number	0 2
2. Case Number - Stratum	0 2 1 A	4. Occupant Number	0 1

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

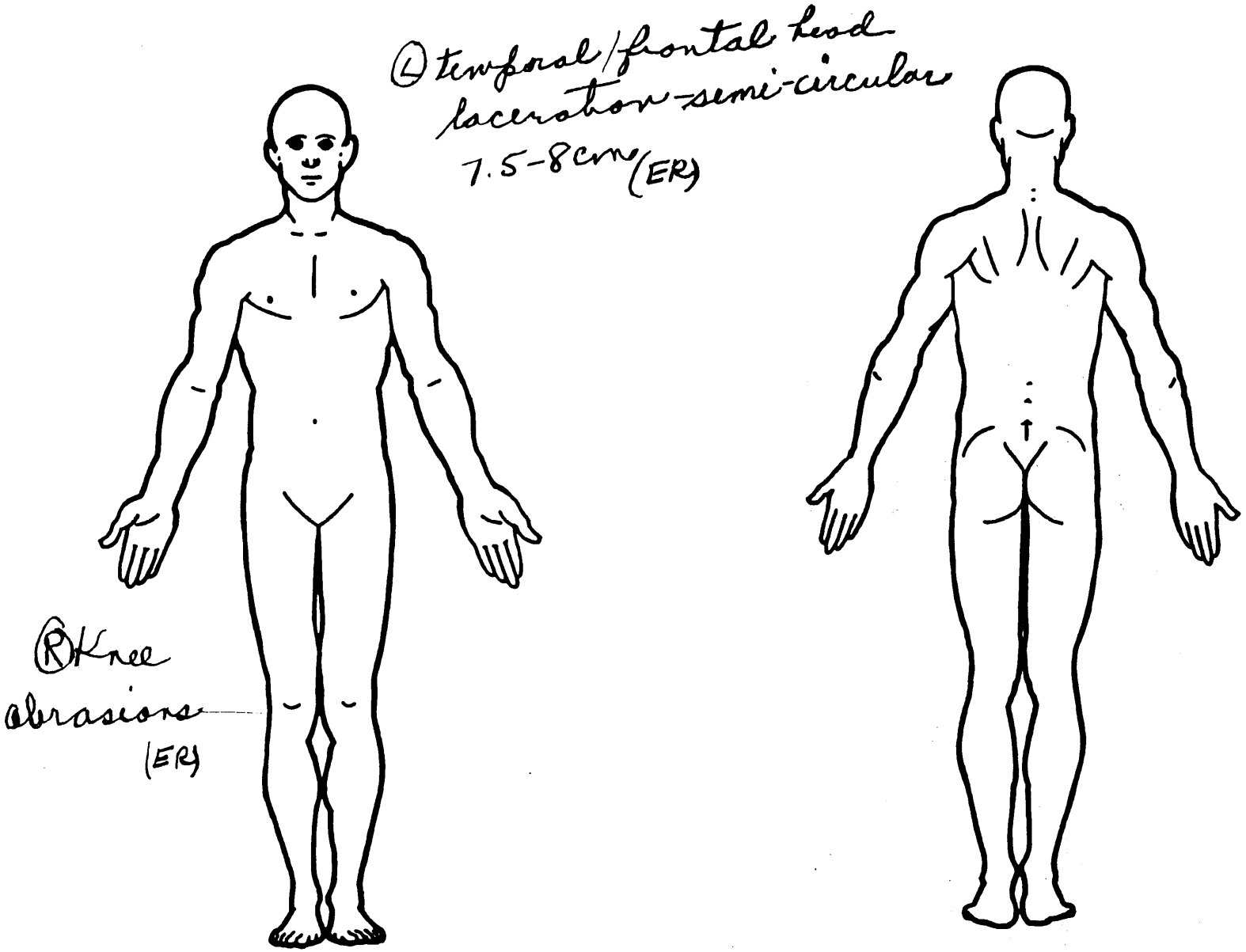
	Source of Injury Data	OIC-A.I.S Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
loc head (L)	1st 5. 3	6. 1	7. 9	8. 06	9. 02	10. 1	11. 2	12. 23	13. 2	14. 1	15. 00
R knee abr	2nd 16. 3	17. 8	18. 9	19. 02	20. 02	21. 1	22. 1	23. 09	24. 1	25. 1	26. 00
abr (L) forearm	3rd 27. 7	28. 7	29. 9	30. 02	31. 02	32. 1	33. 2	34. 20	35. 1	36. 1	37. 03
	4th 38.	39.	40.	41.	42.	43.	44.	45.	46.	47.	48.
	5th 49.	50.	51.	52.	53.	54.	55.	56.	57.	58.	59.
	6th 60.	61.	62.	63.	64.	65.	66.	67.	68.	69.	70.
	7th 71.	72.	73.	74.	75.	76.	77.	78.	79.	80.	81.
	8th 82.	83.	84.	85.	86.	87.	88.	89.	90.	91.	92.
	9th 93.	94.	95.	96.	97.	98.	99.	100.	101.	102.	103.
	10th 104.	105.	106.	107.	108.	109.	110.	111.	112.	113.	114.

OCCUPANT INJURY DATA

	Source of Injury Data	O.I.C.-A.I.S Body Region	O.I.C.-A.I.S Type of Anatomic Structure	O.I.C.-A.I.S Specific Anatomic Structure	O.I.C.-A.I.S Level of Injury	O.I.C.-A.I.S A.I.S. Severity	O.I.C.-A.I.S Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th											
12th											
13th											
14th											
15th											
16th											
17th											
18th											
19th											
20th											
21st											
22nd											
23rd											
24th											
25th											

OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL
(1) Autopsy records with or without hospital/medical records
(2) Hospital/medical records other than emergency room (e.g., discharge summary)
(3) Emergency room records only (including associated X-rays or other lab reports)
(4) Private physician, walk-in or emergency clinic

UNOFFICIAL
(5) Lay coroner report
(6) E.M.S. personnel
(7) Interviewee
(8) Other source (specify):

(9) Police

INJURY SOURCE

FRONT
(01) Windshield
(02) Mirror
(03) Sunvisor
(04) Steering wheel rim
(05) Steering wheel hub/spoke
(06) Steering wheel (combination of codes 04 and 05)
(07) Steering column, transmission selector lever, other attachment
(08) Add on equipment (e.g., CB, tape deck, air conditioner)
(09) Left instrument panel and below
(10) Center instrument panel and below
(11) Right instrument panel and below
(12) Glove compartment door
(13) Knee bolster
(14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
(15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
(16) Driver side air bag compartment cover
(17) Passenger side air bag compartment cover
(18) Windshield reinforced by exterior object (specify):
(19) Other front object (specify):

LEFT SIDE
(20) Left side interior surface, excluding hardware or armrests
(21) Left side hardware or armrest
(22) Left A (A1/A2)-pillar
(23) Left B-pillar
(24) Other left pillar (specify):
(25) Left side window glass or frame
(26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
(27) Other left side object (specify):
(28) Left side window sill

RIGHT SIDE
(30) Right side interior surface, excluding hardware or armrests
(31) Right side hardware or armrest
(32) Right A (A1/A2)-pillar
(33) Right B-pillar
(34) Other right pillar (specify):
(35) Right side window glass or frame
(36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
(37) Other right side object (specify):
(38) Right side window sill

INTERIOR
(40) Seat, back support
(41) Belt restraint webbing/buckle
(42) Belt restraint B-pillar or door frame attachment point
(43) Other restraint system component (specify):
(44) Head restraint system
(45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
(46) Other occupants (specify):
(47) Interior loose objects
(48) Child safety seat (specify):
(49) Other interior object (specify):

ROOF
(50) Front header
(51) Rear header
(52) Roof left side rail
(53) Roof right side rail
(54) Roof or convertible top

FLOOR
(56) Floor (including toe pan)
(57) Floor or console mounted transmission lever, including console
(58) Parking brake handle
(59) Foot controls including parking brake

REAR
(60) Backlight (rear window)
(61) Backlight storage rack, door, etc.
(62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE
(65) Hood
(66) Outside hardware (e.g., outside mirror, antenna)
(67) Other exterior surface or tires (specify):
(68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE
(70) Front bumper
(71) Hood edge
(72) Other front of vehicle (specify):
(73) Hood
(74) Hood ornament
(75) Windshield, roof rail, A-pillar
(76) Side surface
(77) Side mirrors
(78) Other side protrusions (specify)
(79) Rear surface
(80) Undercarriage
(81) Tires and wheels
(82) Other exterior of other motor vehicle (specify):
(83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT
(84) Ground
(85) Other vehicle or object (specify)
(86) Unknown vehicle or object

NONCONTACT INJURY
(90) Fire in vehicle
(91) Flying glass
(92) Other noncontact injury source (specify):
(93) Air bag exhaust gases
(97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

(1) Certain
(2) Probable
(3) Possible
(9) Unknown

DIRECT/INDIRECT INJURY

(1) Direct contact injury
(2) Indirect contact injury
(3) Noncontact injury
(7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

(1) Head
(2) Face
(3) Neck
(4) Thorax
(5) Abdomen
(6) Spine
(7) Upper Extremity
(8) Lower Extremity
(9) Unspecified

Type of Anatomic Structure

(1) Whole Area
(2) Vessels
(3) Nerves
(4) Organs (includes muscles/ligaments)
(5) Skeletal (includes joints)
(6) Head - LOC
(9) Skin

Specific Anatomic Structure

Whole Area
(02) Skin - Abrasion
(04) Skin - Contusion
(06) Skin - Laceration
(08) Skin - Avulsion
(10) Amputation
(20) Burn
(30) Crush
(40) Degloving
(50) Injury - NFS
(90) Trauma, other than mechanical

Head - LOC
(02) Length of LOC
(04, 06, 08) Level of Consciousness
(10) Concussion

Spine
(02) Cervical
(04) Thoracic
(06) Lumbar

Vessels, Nerves, Organs, Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

(1) Minor injury
(2) Moderate injury
(3) Serious injury
(4) Severe injury
(5) Critical injury
(6) Maximum (untreatable)
(7) Injured, unknown severity

Aspect

(1) Right
(2) Left
(3) Bilateral
(4) Central
(5) Anterior
(6) Posterior
(7) Superior
(8) Inferior
(9) Unknown
(0) Whole region

OFFICIAL INJURY DATA — SKELETAL INJURIES

Restrained?

__ No
unknown
__ Yes

Blood Alcohol Level (mg/dl)

BAL = not reported

Glasgow Coma Scale Score

GCSS = 15

Units of Blood Given

Units = 0

Arterial Blood Gases

pH = __.__

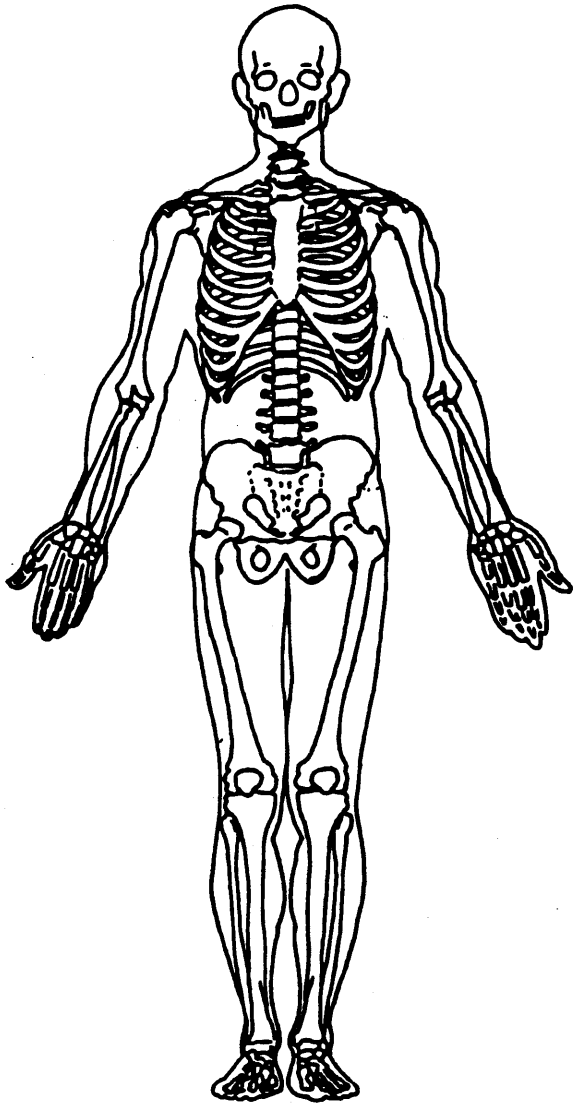
PO_2 = ____

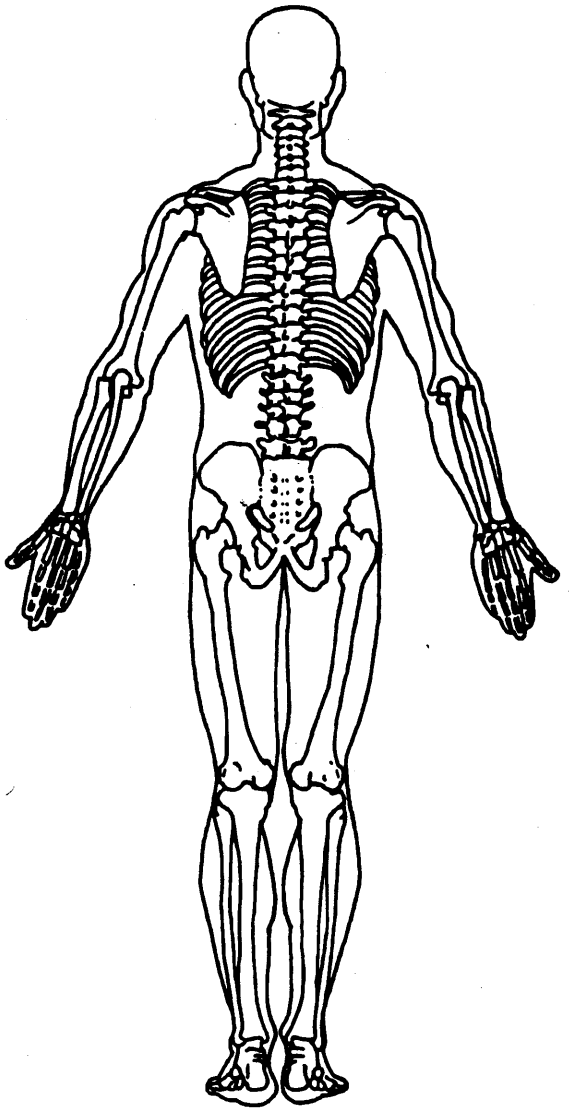
PCO_2 ____

HCO_3 ____

not reported

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

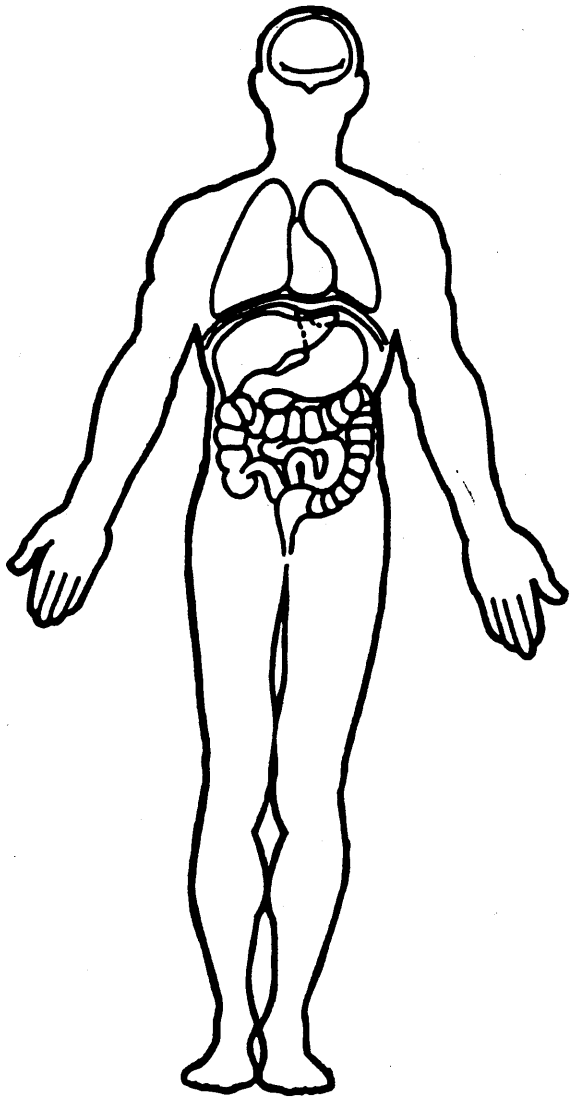


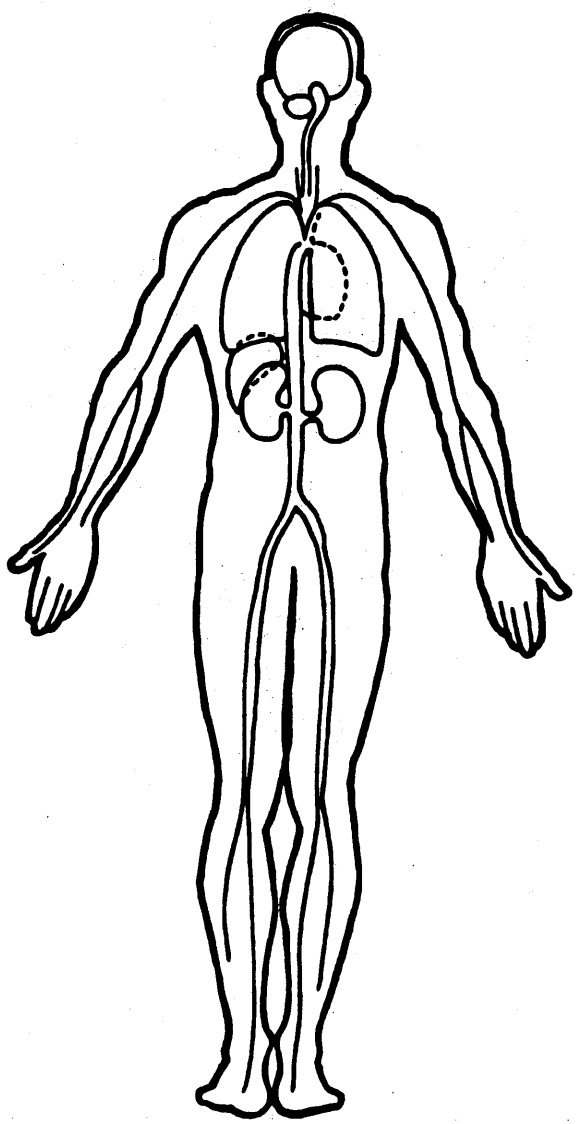


OFFICIAL INJURY DATA — INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

⊖LOC





U.S. Department of Transportation
National Highway Traffic Safety Administration

CRASHPC PROGRAM SUMMARY

(All Measurements In Metric)

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Identifying Title			
08	021A	01	[redacted] 93
Primary Sampling Unit	Case No.-Stratum	Accident Event Sequence No.	Date (Month, day, year) of Run

CRASHPC Vehicle Identification

	Year	Make	Model	NASS Veh. No.
Vehicle 1	1991	CADILLAC	Coupe DeVille	01
Vehicle 2	1993	DODGE	RAM VAN 150	02

GENERAL INFORMATION

	VEHICLE 1	VEHICLE 2
Size	4	7
Weight	1608 (Curb) + 74 (Occupant(s)) + 0 (Cargo) = 1682 kg	1780 (Curb) + 86 (Occupant(s)) + 0 (Cargo) = 1866 kg
CDC	12FZEW1	12FDEW6
PDOF (-180 to +180)	10°	-10°
Stiffness	9	7

SCENE INFORMATION

Rest and Impact Positions [ ] No, *Go To Damage Information* [ ] Yes

		VEHICLE 1	VEHICLE 2
Rest Position	X	___.___ m	___.___ m
	Y	___.___ m	___.___ m
	PSI	___ °	___ °
Impact Position	X	___.___ m	___.___ m
	Y	___.___ m	___.___ m
	PSI	___ °	___.___ °
Slip Angle(-180 to +180)		___ °	___ °

VEHICLE MOTION

Sustained Contact [ ] No [ ] Yes

		VEHICLE 1	VEHICLE 2
Skidding (Rotation)		[ ] No [ ] Yes	[ ] No [ ] Yes
Skidding Stop Before Rest		[ ] No [ ] Yes	[ ] No [ ] Yes
End of Rotation Position	X	___.___ m	___.___ m
	Y	___.___ m	___.___ m
	PSI	___ °	___ °
Curved Path		[ ] No [ ] Yes	[ ] No [ ] Yes
Point on Path	X	___.___ m	___.___ m
	Y	___.___ m	___.___ m
Rotation Direction		[ ] None [ ] CW [ ] CCW	[ ] None [ ] CW [ ] CCW
Rotation >360°		[ ] No [ ] Yes	[ ] No [ ] Yes

National Accident Sampling System-Crashworthiness Data System: CRASHPC Program Summary

FRICTION INFORMATION

Coefficient of Friction . ___ ___ ___

Rolling Resistance Option ___

Vehicle 1 Rolling Resistance

LF ___ . ___ ___ RF ___ . ___ ___

LR ___ . ___ ___ RR ___ . ___ ___

Vehicle 2 Rolling Resistance

LF ___ . ___ ___ RF ___ . ___ ___

LR ___ . ___ ___ RR ___ . ___ ___

TRAJECTORY INFORMATION

Trajectory Data [ ] No [ ] Yes

If No, Go To Damage Information

Vehicle 1 Steer Angles

LF ___ ___ ___ ° RF ___ ___ ___ °

LR ___ ___ ___ ° RR ___ ___ ___ °

Vehicle 2 Steer Angles

LF ___ ___ ___ ° RF ___ ___ ___ °

LR ___ ___ ___ ° RR ___ ___ ___ °

Terrain Boundary [ ] No [ ] Yes

First Point

X ___ ___ ___ . ___ m Y ___ ___ ___ . ___ m

Second Point

X ___ ___ ___ . ___ m Y ___ ___ ___ . ___ m

Secondary Coefficient of Friction . ___ ___ ___

DAMAGE INFORMATION

	VEHICLE 1	VEHICLE 2
Damage Length	L 160 cm	L 196 cm
Crush Depths	C_1 0 cm	C_1 0 cm
	C_2 0 cm	C_2 2 cm
	C_3 10 cm	C_3 8 cm
	C_4 15 cm	C_4 14 cm
	C_5 18 cm	C_5 39 cm
	C_6 28 cm	C_6 40 cm
Damage Offset	D ⊕ 40 cm	D ⊖ 19 cm

IF THIS COMMON IMPACT WAS WITH A MOTOR VEHICLE *NOT IN TRANSPORT,* FILL IN THE INFORMATION BELOW:

Model Year: _____

Make: _____

Model: _____

VIN: _____

The Weight, CDC, Scene Data and Damage Information for this vehicle should be recorded above.

Complete and ATTACH the appropriate vehicle damage sketch and dimensions to the Form.

INPUT CALCULATE TRAJECTORY OUTPUT GRAPHICS EXIT

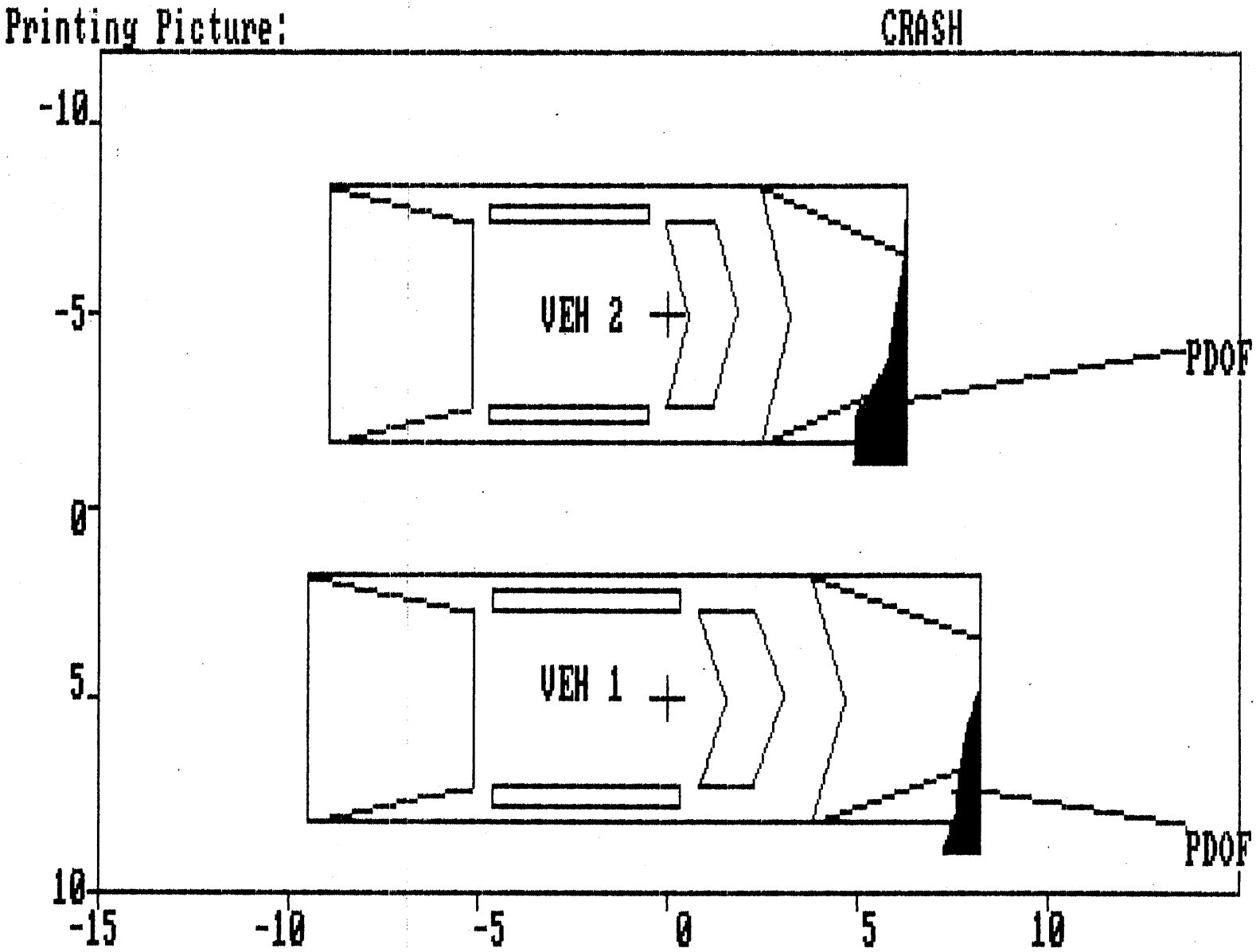
TITLE
08 021A 01 [redacted]93

GENERAL INFORMATION

VEHICLE #1	
SIZE	4
WEIGHT	1682.
CDC	12FZEW1
PDOF	10.00
STIFFNESS	9
CANCEL	ACCEPT

VEHICLE #2	
SIZE	7
WEIGHT	1866.
CDC	12FDEW6
PDOF	-10.00
STIFFNESS	7
CANCEL	ACCEPT

METRIC INPUT


Printing Picture:
CRASH
-10
-5
0
5
10
VEH 2
VEH 1
PDOF
PDOF
-15
-10
-5
0
5
10
DAMAGE DESCRIPTION

SUMMARY OF CRASHPC RESULTS USING DAMAGE

08 021A 01 [redacted]-93

	SPEED CHANGE (DAMAGE)
VEHICLE #1	
TOTAL	26 KPH (16 MPH)
LONGITUDINAL	-26 KPH (-16 MPH)
LATITUDINAL	-5 KPH (-3 MPH)
PDOF ANGLE	10 DEGREES
ENERGY DISSIPATED =	30165 JOULES (22246 FT-LB)
VEHICLE #2	
TOTAL	23 KPH (15 MPH)
LONGITUDINAL	-23 KPH (-14 MPH)
LATITUDINAL	4 KPH (3 MPH)
PDOF ANGLE	-10 DEGREES
ENERGY DISSIPATED =	71055 JOULES (52400 FT-LB)

DAMAGE DATA

	VEHICLE #1	VEHICLE #2
SIZE CATEGORY	4	7
STIFFNESS CATEGORY	9	7
VEHICLE WEIGHT	1682 KGS (3708 LBS)	1866 KGS (4114 LBS)
CDC	12FZEW1	12FDEW6
PDOF ANGLE	10 DEGREES	-10 DEGREES
CRUSH LENGTH	160 CM. (63 IN.)	196 CM. (77 IN.)
C1	0 CM. (0 IN.)	0 CM. (0 IN.)
C2	0 CM. (0 IN.)	2 CM. (1 IN.)
C3	10 CM. (4 IN.)	8 CM. (3 IN.)
C4	15 CM. (6 IN.)	14 CM. (6 IN.)
C5	18 CM. (7 IN.)	39 CM. (15 IN.)
C6	28 CM. (11 IN.)	40 CM. (16 IN.)
D	40 CM. (16 IN.)	19 CM. (7 IN.)
D'	74 CM. (29 IN.)	67 CM. (26 IN.)

(* INDICATES DEFAULT VALUE)

```
08021A0000001[redacted]936.0100000000000217150010002[redacted]93[redacted]93[redacted]93[redacted]93019005000
0049900000948 35
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08021A01000021       6.01 000000000911900302 1G6CD13B1M4[redacted]1048000056995010101 1
6100001001012832310 26-026-0050302111
08021A01000022       6.01 000000000001010101010101010 1[redacted]100000000131099
08021A01000031       6.01 000000000010212FZEW0102639999999991600000000100150180 28+
040                          012810001
08021A01000041       6.01 000000000001100000000020000088000000001000000010000000
08021A01000042       6.01 000000000
                2            0306999110
08021A01010051       6.01 000000000691173108111900000400001117307100000000000042 1
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019                          013240002
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08021A02000042       6.01 000000000130532130422131013132713130613
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08021A02010051       6.01 000000000551180086111000000404110000110100000000000024 1
0010000000000300000115101
08021A02010161       6.01 000000000319060212232100
08021A02010261       6.01 000000000389020211091100
08021A02010361       6.01 000000000779020212201103
08021A99999999900000000000000000000000000000000000010000000010000000000000000030000
0000000000002
```

OCCUPANT ASSESSMENT Vehicle: 1 Occupant: 1

11
INTRA ERRORS

0HH1281 2
******** THIS VEHICLE IS INICATED AS HAVING AN AIRBAG. ***** HH1282
****** CHECK YOUR DATA AND IF CORRECT, NOTIFY YOUR ZONE ******* HH1283
AIR BAG AVAILABILITY/FUNCTION 0A21 equals 1-3.

HH0961 2 If POLICE SEVERITY 0A34 equals 2-4, then RECORDED INJURIES 0A43
HH0962 should equal 01-97.

O
GENERAL VEHICLE Vehicle: 2

11
INTRA ERRORS

0GG2251 2 If ACCIDENT TYPE GV15 equal
s 20, 24, 28, 44, 45, 51, 65, 69, 71, GG2252 73, 77, 79, 81, 83 or 86-89
, then PRE-EVENT MOVEMENT GV64 should GG2253 equal 01.

O
EXTERIOR VEHICLE Vehicle: 2

11
INTRA ERRORS

0EE0851 2 ******** THIS CASE SHOWS A
NON-METALLIC FUEL TANK ******* ****** EE0852 CHECK YOUR DATA AND, IF CO
RRECT, NOTIFY YOUR ZONE ****** TYPE OF EE0853 TANK EV32 equals 2.

O
OCCUPANT ASSESSMENT Vehicle: 2 Occupant: 1

11
INTRA ERRORS

0HH1091 2 If TREATMEN
T 0A35 equals 0, 4 or 5, then WORKING DAYS LOST 0A38 HH1092 should equa
l 00, 01, 97 or 99.

01
INTER ERRORS

0AH0081 2 If CASE AC02(4) equals A or B, then at least one TREAT
MENT 0A35 AH0082 should equal 1.

GH0161 2 If TOTAL DELTA V GV30 is greater than or equal to 040, and less
GH0162 than 999, then RECORDED INJURIES 0A43 should not equal 00.
GH0163 GV=01 0A=01

PSU08 ERROR SUMMARY SCREEN [redacted]/93
CASE 021A
CURRENT VERSION: 6.01

FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT
Accident	0	0	0	Y
General Vehicle	0	0	1	Y
Vehicle Exterior	0	0	1	Y
Vehicle Interior	0	0	0	Y
Occupant Assesment	0	0	3	Y
Occupant Interior	0	0	0	Y
Total Inter Errors		0	2	
Total Case Errors	0	0	7	

U.S. Department of Transportation
National Highway Traffic Safety Administration

SLIDE INDEX

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Primary Sampling Unit Number 0 8 | Case Number—Stratum 0 2 1 A

Slide No.	Vehicle No.	Direction of Picture	Description of Slide Subject Matter
1-6	V1	SE	Direction of travel V1
7	V1	SE	Approx point of impact 1 with V2
8-9	V1	SE	Point of impact 2 with barrier curb as V1 exits roadedge
10-11	V1	NE	Lateral views of impacted curb
12-14	V1	SE	V1 moves to final resting place, final resting place V1
15	V1	NW	Lookback final resting place V1
16-17	V1	NW	Lookback point of impact 2
18	V1	NW	Lookback point of impact 1
19	V1	NW	Lookback direction of travel V1
20-25	V2	NW	Direction of travel V2
26	V2	NW	Approx point of impact with V1
27-29	V2	NW	V2 rotates clockwise to final resting place in on-coming lane, final resting place V2
30-31	V2	SE	Lookback final resting place V2
32	V2	SE	Lookback point of impact V2
33	V2	SE	Lookback direction of travel V2
34-65	V1		Exterior V1
66	V1		Closeup of V1 shattered grill sections
67-98	V1		Interior V1
99-100			Filler slides
101-131	V2		Exterior V2
132-133	V2		Closeups of V2 HDPE fuel tank
134-155	V2		Interior V2 (including closeup of cardboard box of light assorted items)

HS Form 434B (1/93)

Slide No.	Vehicle No.	Direction of Picture	Description of Slide Subject Matter

PSU 08-021A (1993) #1

PSU 08-021A (1993) #2

PSU 08-021A (1993) #3

PSU 08-021A (1993) #4

PSU 08-021A (1993) #5

PSU 08-021A (1993) #6

PSU 08-021A (1993) #7

PSU 08-021A (1993) #8

PSU 08-021A (1993) #9

PSU 08-021A (1993) #10

PSU 08-021A (1993) #11

PSU 08-021A (1993) #12

PSU 08-021A (1993) #13

PSU 08-021A (1993) #14

PSU 08-021A (1993) #15

PSU 08-021A (1993) #16

PSU 08-021A (1993) #17

PSU 08-021A (1993) #18

PSU 08-021A (1993) #19

PSU 08-021A (1993) #20

PSU 08-021A (1993) #21

PSU 08-021A (1993) #22

PSU 08-021A (1993) #23

PSU 08-021A (1993) #24

PSU 08-021A (1993) #25

PSU 08-021A (1993) #26

PSU 08-021A (1993) #27

PSU 08-021A (1993) #28

PSU 08-021A (1993) #29

PSU 08-021A (1993) #30

PSU 08-021A (1993) #31

PSU 08-021A (1993) #32

PSU 08-021A (1993) #33

PSU 08-021A (1993) #34

PSU 08-021A (1993) #35

PSU 08-021A (1993) #36

PSU 08-021A (1993) #37

PSU 08-021A (1993) #38

PSU 08-021A (1993) #39

PSU 08-021A (1993) #40

PSU 08-021A (1993) #41

PSU 08-021A (1993) #42

PSU 08-021A (1993) #43

PSU 08-021A (1993) #44

PSU 08-021A (1993) #45

PSU 08-021A (1993) #46

PSU 08-021A (1993) #47

PSU 08-021A (1993) #48

PSU 08-021A (1993) #49

PSU 08-021A (1993) #50

PSU 08-021A (1993) #51

PSU 08-021A (1993) #52

PSU 08-021A (1993) #53

PSU 08-021A (1993) #54

PSU 08-021A (1993) #55

PSU 08-021A (1993) #56

PSU 08-021A (1993) #57

PSU 08-021A (1993) #58

PSU 08-021A (1993) #59

PSU 08-021A (1993) #60

PSU 08-021A (1993) #61

PSU 08-021A (1993) #62

PSU 08-021A (1993) #63

PSU 08-021A (1993) #64

PSU 08-021A (1993) #65

PSU 08-021A (1993) #66

PSU 08-021A (1993) #67
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PSU 08-021A (1993) #68
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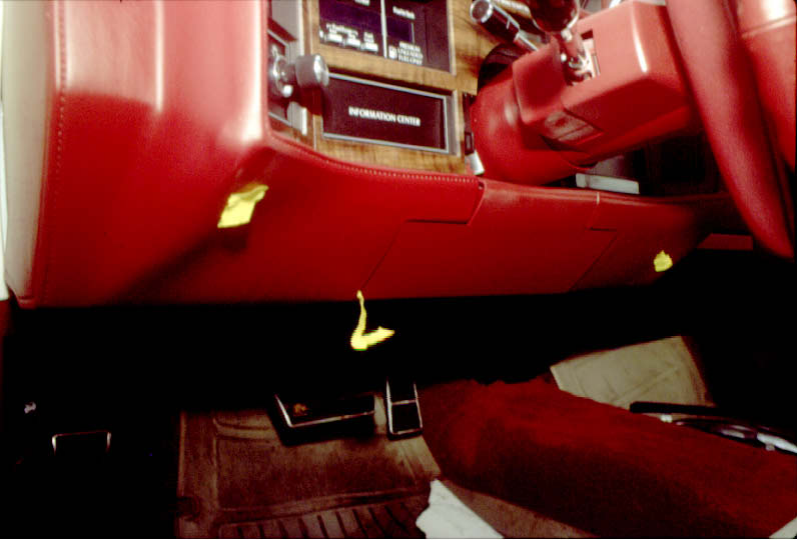
PSU 08-021A (1993) #69

PSU 08-021A (1993) #70
Best Available



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PSU 08-021A (1993) #106

PSU 08-021A (1993) #107

PSU 08-021A (1993) #108

PSU 08-021A (1993) #109

PSU 08-021A (1993) #110

PSU 08-021A (1993) #111

PSU 08-021A (1993) #112

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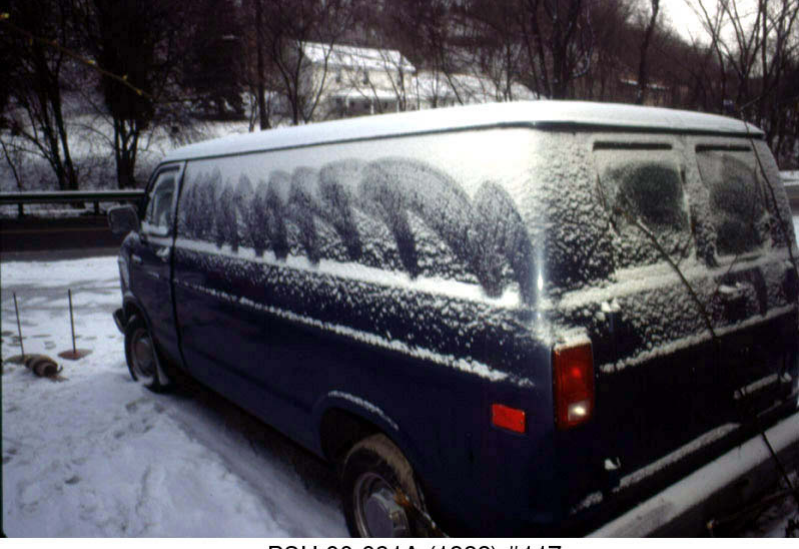
PSU 08-021A (1993) #115

PSU 08-021A (1993) #116



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PSU 08-021A (1993) #122

PSU 08-021A (1993) #123

PSU 08-021A (1993) #124

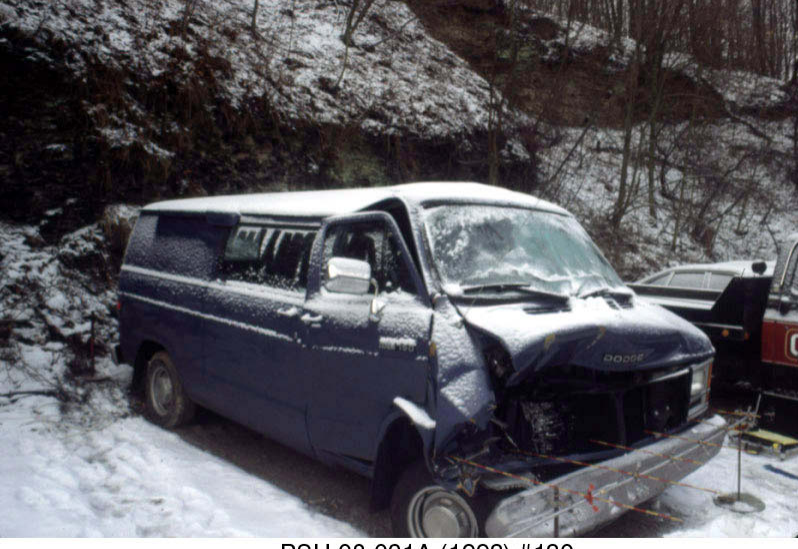
PSU 08-021A (1993) #125

PSU 08-021A (1993) #126

PSU 08-021A (1993) #127

PSU 08-021A (1993) #128

PSU 08-021A (1993) #129



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PSU 08-021A (1993) #131

PSU 08-021A (1993) #132
Best Available

PSU 08-021A (1993) #133
Best Available

PSU 08-021A (1993) #134

PSU 08-021A (1993) #135

PSU 08-021A (1993) #136

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PSU 08-021A (1993) #138
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PSU 08-021A (1993) #139

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PSU 08-021A (1993) #144

PSU 08-021A (1993) #145

PSU 08-021A (1993) #146

PSU 08-021A (1993) #147

PSU 08-021A (1993) #148

PSU 08-021A (1993) #149

PSU 08-021A (1993) #150

PSU 08-021A (1993) #151

PSU 08-021A (1993) #152

PSU 08-021A (1993) #153

PSU 08-021A (1993) #154

PSU 08-021A (1993) #155