



State of West Virginia Uniform Traffic Crash Report

COPY

DOH Form: 17-c
Revised: 02/2007

Crash Data

Crash Record Number Reporting Agency's Record Number: Page of

of Vehicles Involved: # of Non-Motorists Involved: # of Fatal Injuries: # of A B or C Injuries:

Date / Time of Crash: / Date / Time Crash Reported: / Time of Arrival:

County: Municipality or Place of Crash: GPS Coordinates:

Highway Class: Interstate US WV
 County/HARP City Street State Park / Forest Road
 Private Road Private Property/Off-Roadway Other

Supplemental Designation:
 Not Applicable Spur North East Truck Route Other
 Alternate Ramp South West Toll

Route: / Milepost: Ramp: Street:

Other Description of Location: Intersecting Street:

Relation to Junction / Junction Type:
 Non-Junction Junction, Non-Interchange Area
 Intersection Intersection-Related Interstate to Interstate
 Railroad Grade Crossing #:
 Median Crossover-Related Business or Residential Driveway/Alley Access
 Other Non-Interchange

Junction, Interchange Area
 Thru Roadway Merge/Diverge Area
 Intersection Intersection-Related
 Entrance / Exit Ramp Other Part of Interchange

Intersection Type:
 4-Way Intersection
 T Intersection
 Y Intersection
 Intersection as Part of Interchange
 Traffic Circle / Roundabout
 5-Point or More

Manner of Collision:
 Single Vehicle Crash
 Rear End Head-On
 Sideswipe, Same Direction
 Sideswipe, Opposite Direction
 Rear-to-Side
 Rear-to-Rear

Angle (Front to Side) Same Direction Right Angle
 Angle (Front to Side) Opp. Direction Angle - Direction Not Specified

Environmental Contributing Circumstances (Select Up to 3):
 None
 Weather Conditions
 Physical Obstruction(s)
 Glare
 Animal(s) in Roadway
Type:
 Other:

Weather (Select Up to 2):
 Clear Rain Blowing Snow Other
 Cloudy Sleet, Hail, or Freezing Rain Severe Crosswinds
 Fog, Smog, Smoke Snow Blowing Sand, Soil, Dirt

Lighting:
 Daylight Dawn
 Dark - Lighted Dusk
 Dark - Not Lighted Other

Roadway Surface Condition:
 Dry Slush Mud, Dirt, Gravel, Sand
 Wet Ice / Frost
 Snow Water (Standing / Moving)

Location of First Harmful Event:
 On Roadway Roadside In Parking Lane or Zone Outside of Right-of-Way
 Shoulder Gore Off Roadway, Location Unknown Unknown
 Median Separator

Roadway Surface Type: Asphalt Concrete Gravel Dirt Brick Other:

First Harmful Event:
 Overturn / Rollover
 Fire / Explosion
 Immersion
 Jackknife
 Cargo / Equipment Loss or Shift
 Fell / Jumped from Motor Veh
 Thrown or Falling Object
 Other Non-Collision

COLLISION WITH:
 Pedestrian
 Pedalcycle
 Railway Vehicle
 Animal
 Motor Vehicle in Transport
 Parked Motor Vehicle
 Work Zone / Maintenance Equip
 Other Non-Fixed Object
 Impact Attenuator / Crash Cushion

Bridge Overhead Structure
 Bridge Pier or Support
 Bridge Rail
 Culvert
 Curb
 Ditch
 Embankment
 Guardrail Face
 Guardrail End
 Cable Median Barrier

Concrete Traffic Barrier
 Other Traffic Barrier
 Tree (Standing)
 Utility Pole/Light Support
 Traffic Sign Support
 Traffic Signal Support
 Other Post, Pole, or Support
 Fence
 Mailbox
 Other Fixed Object

Crash Record Number

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Road - Contributing Circumstances: (Select Up to 3)

- None
- Road Surface Condition (Wet, Icy, etc.)
- Debris
- Ruts, Holes, Bumps
- Worn, Travel Polished Surface
- Obstruction in Roadway
- Pavement Markings Not Visible
- Shoulders
 - None
 - Low
 - Soft
 - High
- Problem w/ Traffic Control Device
 - Inoperative
 - Missing
 - Obscured
- Work Zone
 - Construction
 - Maintenance
 - Non-Highway Work
 - Other
- Utility

School Bus Related:

- No
- Yes, School Bus Directly Involved
- Yes, School Bus Indirectly Involved

School Zone Related:

- No
- Yes

Type of School Zone Sign:

- When Present
- When Flashing
- Lists Specific Times
- None

School Zone Flashers:

- Present, Not Active
- Present, Active
- Not Present

School Zone Speed Limit:

Work Zone Related:

- No
- Yes

Workers Present:

- Yes
- No
- Unknown

Work Zone Speed Limit:

Location of Crash in Work Zone:

- Before 1st Warning Sign
- Advance Warning Area
- Transition (Merge) Area
- Activity Area
- Termination Area

Type of Work Zone:

- Lane Closure
- Lane Shift / Crossover
- Work on Shoulder or in Median
- Intermittent or Moving Work
- Other

NARRATIVE: Describe What Happened. Refer to Vehicles by Number Assigned on this Form.

VEHICLE #1 WAS TRAVELING NORTH ON CEMETERY ROAD AND FAILED TO NEGOTIATE A CURVE TO THE RIGHT. THE VEHICLE RAN OFF OF THE ROADWAY TO THE LEFT STRIKING A MAILBOX, SHRUB WITH A CONCRETE BLOCK WHICH CAUSED THE PASSENGER SIDE OF THE VEHICLE TO COME OFF THE GROUND. THE VEHICLE STRUCK THE GROUND ALONG WITH STRIKING THREE FENCE POST AND APPROXIMATELY 14 FEET OF VINYL FENCE. THE VEHICLE CAME TO REST ON THE DOWNSLOPE OF A HILL ON A RETAINING WALL. THE DRIVER REFUSED MEDICAL TREATMENT AND STATED THAT SHE STRUCK A DEER. NO EVIDENCE OF A STRIKE DEER WAS OBSERVED. DEP. HENDERSON MADE CONTACT WITH THE HOMEOWNER. SHE WAS PROVIDED WITH THE DRIVER'S INFORMATION AND CONFIRMED SHE WAS THE OWNER OF THE MAILBOX AND SHRUB. THE OWNER OF THE FENCE AND RETAINING WALL DID NOT ANSWER THE DOOR. INFORMATION WAS LEFT AT THE DOOR FOR THE PROPERTY OWNER.

Reported By: State Police Sheriff's Dept
 Municipal PD Other

Photos Taken: Yes No
 Video Taped: Yes No

By Whom: DEP. HENDERSON
 By Whom:

The information contained in this report reflects my best knowledge and judgment:

Investigating Officer's Name: WILLIAM HENDERSON Number: 155 Signature:
 Phone: 304-267-7000 ORI Number: WV0020000 Agency: BERKELEY CO SD

Assisting Officer's Name(s):

Reconstructed: Yes No By Whom: Date of Submission: 01/18/2023



State of West Virginia Uniform Traffic Crash Report
Diagram

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Reporting Agency's Record Number: 230106-001

CRASH DIAGRAM:

(Draw Crash Scene - Including Roadway Layout, Vehicles, Individuals or Objects Struck, Traffic Controls, etc.)

IMPORTANT: Number Vehicles According to the Numbers Assigned on this Form.

From RP to:	N/S	E/W





State of West Virginia Uniform Traffic Crash Report Vehicle Data

Crash Record Number: _____ Reporting Agency's Record Number: 230106-001 Page 4 of 8

Vehicle Type: Motor Veh in Transport Parked Motor Veh / Trailer Working Veh / Equipment
Driver Presence at Time of Crash: Driver Operated Vehicle Driverless Vehicle

Owner's Name(s): CARRIE R OR NATHAN A HARMON
Address: _____ City: _____ State: _____ Zip Code: _____ Home Phone: _____ Other Phone: _____

Make: LEXS Model: 800 Model Year: 2001 Body Type: SEDAN, 4-DOOR Color: SILVER
Ins. Co: NATIONWIDE
Policy No: _____ Exp Date: 03/22/2023
Registration Status: Properly Registered Improperly Registered No Registration Required
Proof of Liability Insurance: Yes No

Special Function of Motor Vehicle: None Police Ambulance Fire Truck Military Used as School Bus Used as Other Bus
Vehicle Used as a Bus: Public School Bus Private School Bus Scheduled Service Bus Commuter Bus Shuttle Bus Modified for Personal/Private Use Tour Bus Church Bus
Vehicle Impact Role: Striking Single Vehicle Struck Both

Direction of Travel Before Crash: Northbound Eastbound Not on Road Southbound Westbound Unknown
Roadway Description: Two-Way, Not Divided Two-Way, Divided, with Median Barrier One-Way Roadway

Traffic Control Device Type: None Yield Sign School Zone Signs Warning Signs Flashing Overhead Signal Railroad Crossing Device Stop Sign
Applicable Speed Limit (MPH): 35
Horizontal Alignment: Straight Curve Right Level Uphill Sag (Bottom) Curve Left Hillcrest Downhill
Vertical Alignment: Underride or Override Underride, Compartment Intrusion Underride, No Compartment Intrusion Underride, Compartment Intrusion Unknown Override, Motor Vehicle in Transport Override, Other Motor Vehicle

Traffic Control Functioning Properly: Yes No
Extent of Damage: No Damage Minor Damage Functional Damage Disabling Damage
Veh Travel Speed (MPH): _____
Total Lanes in Roadway: _____
For Undivided Highways: _____
Count Total Lanes in Both Directions (Excluding Designated Turn Lanes): _____
For Divided Highways: _____
Count Only Lanes in Direction Vehicle was Traveling Prior to Crash: 2

Crash Avoidance Maneuver: None Evident or Reported Making U-Turn Braking - Skidmarks Evident Slowing Stopped in Traffic Leaving Traffic Lane Entering Traffic Lane Negotiating a Curve Other _____
Crash Avoidance Circumstances, Motor Vehicle (Select up to 2): None Tires Brakes Wipers Lights (Head, Signal, Tail, etc.) Steering Windows Power Train Truck Coupling/Trailer Hitch/Safety Chains Mirrors Suspension Other _____
Contributing Circumstances, Motor Vehicle (Select up to 2): None Tires Brakes Wipers Lights (Head, Signal, Tail, etc.) Steering Windows Power Train Truck Coupling/Trailer Hitch/Safety Chains Mirrors Suspension Other _____
Number of Axles: 02
Total / Max Occupants of Veh: 0 / 5

Vehicle is Primarily Used to Transport Goods, Property, or People for Commerce: No Yes
Manner, in which Vehicle was Removed from Scene: Driven Towed Due to Damage Towed Due to Driver Condition Left at Scene
Occurrence of Fire: No Fire Yes, Vehicle Caught Fire Modified Vehicle: No Yes
Displaying Hazardous Materials Placard: No Yes
Towed to: LESS LOT
Towed by: LESS TOWING



State of West Virginia Uniform Traffic Crash Report

DOH Form: 17-drv
Revised: 02/2007

Driver Data

Crash Record Number: Vehicle Number (from Vehicle Data Page) Page of

Reporting Agency's Record Number:

Driver's Name: HARMON CARRIE REBECCA
Last First Middle Suffix

Address: Same as Veh Owner _____
City State Zip Code

Home Phone: _____ Other Phone: _____

Driving License:

License Type:

Not Licensed GDL Level 1 CDL Instruction Permit CDL Class: A B C

Driving License GDL Level 2 Motorcycle Instruction Permit

Instruction Permit GDL Level 3 Motorcycle Only

Issuing State: WV

Lic. Number: F879035

Date of Birth: _____

License Restrictions: (Select All that Apply)

None Limited - Other

Corrective Lenses CDL Intrastate Only

Mechanical Devices Motor Vehicles w/o Air Brakes

Prosthetic Aid Military Vehicles Only

Automatic Transmission Except Class A Bus

Outside Mirror Except Class A and Class B Bus

Limit to Daylight Only Except Tractor - Trailer

Limit to Employment Farm Waiver

Must Be Accompanied by Adult Other _____

Endorsements: (Select Up to 5)

None

T - Double/Triple Trailers

P - Passenger Vehicle

S - School Bus

N - Tank Vehicle

H - Hazardous Materials

X - Combined Tank / Haz. Materials

F - Motorcycle (WV Only)

Other - Non-WV Licenses Only

Status:

Valid

Expired

Suspended

Revoked

Probation

Surrendered

Valid/Interlock

Fraudulent

Driver Condition at Time of Crash:

Apparently Normal

Emotional

Ill

Fell Asleep, Fainted, Fatigued

Under the Influence of Medication/Alcohol/Drugs

Other _____

Action(s) of Driver that Contributed to the Crash: (Select Up to 4)

None

Ran Off Road

Failed to Yield Right of Way

Disregarded Traffic Signs

Ran Red Light

Disregarded Other Road Markings

Exceeded Posted Speed Limit

Drove Too Fast For Conditions

Improper Turn

Improper Backing

Improper Passing

Wrong Side or Wrong Way

Followed Too Closely

Failed to Keep in Proper Lane

Operated Veh in Erratic, Reckless, or Careless Manner

Operated Veh in Aggressive Manner

Swerved or Avoided

Over Correcting / Over Steering

Other Improper Action

Driver Use of Alcohol Suspected:

Alcohol Use Suspected:

No

Yes

Unknown

Alcohol Test Given:

Test Given

None Given

Test Refused

Type of Alcohol Test Given (Select Up to 2):

Blood Breath Urine

Serum Field Other: _____

PBT Results:

Pass

Fail

BAC Results:

Pending

Unknown

Driver Use of Drugs Suspected:

Drug Use Suspected:

No

Yes

Unknown

Drug Test Given:

Test Given

None Given

Test Refused

Unknown if Tested

Type of Drug Test Given:

Blood DRE

Serum

Urine

Other _____

Drug Test Results (Check All that Apply):

None Amphetamine Pending

Marijuana PCP

Cocaine Other Controlled Substance

Opiate Other Drug

Driver Distracted By:

Not Distracted

Electronic Communication Device

Other Electronic Device

Other Inside Vehicle

Other Outside Vehicle

Crash Record Number:

Vehicle Number (from Vehicle Data Page)

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Reporting Agency's Record Number:

Known or Suspected Violation(s) by Driver:

No Violations

Reckless/Careless/Hit and Run Type Offenses

- Negligent Homicide
- Reckless Driving; Driving to Endanger; Negligent Driving
- Inattentive, Careless, Improper Driving
- Fleeing or Eluding Law Enforcement
- Failure to Obey Law Enforcement, Fireman, Authorized Person Directing Traffic
- Hit and Run, Failure to Stop After Accident
- Serious Violation Resulting in Death

Impairment Offenses

- Driving While Intoxicated (Alcohol or Drugs) or BAC Above Limit
- Driving While Impaired
- Driving Under Influence of Controlled Substance
- Driving Under Influence of Non-Controlled Substance
- Drinking While Operating
- Illegal Possession of Alcohol or Drugs
- Driving with Detectable Alcohol (CDL or Under 21 Years of Age)
- Refusal to Submit to Chemical Test

Speed Related Offenses

- Failure to Maintain Control of Vehicle
- Racing
- Speeding (Above Speed Limit)
- Speed Greater than Reasonable and Prudent
- Exceeding Special Limit
- Driving too Slowly

Rules of the Road - Traffic Signs and Signals

- Failure to Stop for Red Signal
- Failure to Stop for Flashing Red Signal
- Violation of Turn on Red
- Failure to Obey Flashing Signal (Yellow or Red)
- Failure to Obey Signal, Generally
- Violation of RR Grade Crossing Device or Regulations
- Failure to Obey Stop Sign
- Failure to Obey Yield Sign
- Failure to Obey Traffic Control Device

Rules of the Road - Lane Usage

- Unsafe or Prohibited Lane Change
- Improper Use of Lane
- Certain Traffic to Use Right Lane
- Lane Violations, Generally

Rules of the Road - Wrong Side, Passing and Following

- Driving Wrong Way on One-Way Road
- Driving on Left, Wrong Side of Road, Generally
- Improper, Unsafe Passing
- Passing on Right (Drive Off of Pavement to Pass)
- Passed Stopped School Bus
- Failure to Give Way When Overtaken
- Following Too Closely
- Wrong Side, Passing, Following Violations, Generally

Rules of the Road - Turning, Yielding, Signaling

- Turn in Violation of Traffic Control
- Improper Method and Position of Turn
- Failure to Signal for Turn or Stop
- Failure to Yield to Emergency Vehicle
- Failure to Yield, Generally
- Enter Intersection when Space Insufficient

Non-Moving License and Registration Violations

- Driving While License Suspended or Revoked
- Other Driver License Restrictions
- Commercial Driver Violations
- Vehicle Registration Violations
- Failure to Carry Insurance Card
- Driving Uninsured Vehicle
- Non-Moving Violations, Generally

Equipment

- Lamp Violations
- Brake Violations
- Failure to Require Restraint Use
- Motorcycle Equipment Violations
- Violation of Hazardous Cargo Regulations
- Size, Weight, Load Violations
- Equipment Violations, Generally

Other Violations

- Parking
- Theft, Unauthorized Use of Motor Vehicle
- Driving Where Prohibited
- Other Moving Violation

Citation(s) Issued to Driver:

Charge	State Code / Municipal Ordinance	Citation Number	Warning
FAILURE TO DRIVE WITH DUE CARE	17C-6-1	978897	<input checked="" type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

STATEMENT OF DRIVER:

SEE ATTACHED

STATEMENT FORM

Name: Carrie Harman Date of Birth: _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Sex: _____ Race: _____ Height: _____ Weight: _____ Hair color: _____ Eye color: _____

was following my man home and got
hit by a deer on my right passenger side

Signature: *Carrie Harman*

Statement taken by: Henderson
Unit number: 155

01 10 0 173



State of West Virginia Uniform Traffic Crash Report Driver and Vehicle Passenger Data

Crash Record Number:

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Indiv #	Name			Veh #	Occupant Type	Social Security #	Birthdate	Age	Gender	Injury	Seating Position			Occupant Protection	
	Last	First	Middle Init. Suffix								Row	Seat	Other	Type Used	Proper Use
01	HARMON	CARRIE	R	01	01					O	1	1	02	01	

Occupant Type Codes:
 01 Driver
 02 Passenger
 03 Occupant of Motor Veh Not in Transport
 04 Unknown Vehicle Passenger

Injury Status Codes:
 A Incapacitating Injury
 B Non-Incapacitating Injury
 C Possible Injury

K Killed
O No Injury

Type of Occupant Protection System Used Codes:
 01 None Used
 02 Shoulder and Lap Belt Used
 03 Shoulder Belt Only Used
 04 Lap Belt Only Used
 05 Child Restraint System - Forward Facing
 06 Child Restraint System - Rear Facing

Type of Occupant Protection System Used Codes:
 07 Booster Seat
 08 Helmet Used
 09 Restraint Used - Type Unknown
 10 Other
 11 Unable to Determine - Due to Vehicle Damage

Gender:
 M Male
 F Female

Seating Position Codes:

ROW	SEAT	OTHER
1 Front	1 Left	1 Sleeper Section of Cab
2 Second	2 Middle	2 Other Enclosed Cargo Area
3 Third	3 Right	3 Unenclosed Cargo Area
4 Fourth	4 Other	4 Trailing Unit
5 Other Row	5 Unknown	5 Riding on Motor Vehicle Exterior
6 Unknown	6 Unknown	6 Unknown

Proper Use of Occupant Protection:
 01 Used Properly
 02 Used Improperly
 03 Unknown

DOT Approved Helmet:
 01 Yes
 02 No
 03 Unknown

Indiv #	from Above	Air-bag	Trapped	Extricated	Ejected	Medical Transport	Responding Agency	EMS Agency	Run Number	Receiving Facility Name	Notified Time	Scene Time	Hospital Time	Date of Death	Time of Death	Place of Death
01	05	01	01													

Airbag Deployed Codes:	Trapped / Extricated Codes:	Ejection Codes:	Place of Victim's Death:
01 Deployed (This Seat): 02 Side 03 Other 04 Multiple Directions (Front and Side) 10 Unable to Determine - Due to Vehicle Damage	01 Not Trapped 02 Trapped / Extricated 03 Unknown	01 Not Ejected 02 Ejected, Partially 03 Ejected, Totally 04 Unknown	01 At Scene 02 En Route 03 At Medical Facility 04 Home 05 Other 06 Unknown
05 Available, Didn't Deploy 06 Available, Turned Off 07 None Installed 08 Previously Deployed - Not Replaced 09 Disabled or Removed	01 Not Ejected 02 Ejected, Partially 03 Ejected, Totally 04 Unknown	01 Thru Side Door Opening 02 Thru Side Window 03 Thru Windshield 04 Thru Back Window	01 At Scene 02 En Route 03 At Medical Facility 04 Home 05 Other 06 Unknown
01 Not Deployed (This Seat): 02 Side 03 Other 04 Multiple Directions (Front and Side) 10 Unable to Determine - Due to Vehicle Damage	01 Not Trapped 02 Trapped / Extricated 03 Unknown	01 Thru Side Door Opening 02 Thru Side Window 03 Thru Windshield 04 Thru Back Window	01 At Scene 02 En Route 03 At Medical Facility 04 Home 05 Other 06 Unknown