

MG NSRF/A

ACCIDENT STATISTICS



Incident URN

Incident URN input box

Other ref.

Other ref. input box

1.3 ACCIDENT REFERENCE grid

*FATAL / SERIOUS / SLIGHT

1.9 TIME HHMM

DAY* Su M T W Th F S

1.7 DATE DDMM20YY

1st Road Class & No. or (Unclassified - UC) (Not Known - NK)

1st Road Name

Outside House No. or Name or Marker Post No.

at junction with / or metres N S E W * of

2nd Road Class & No. or (Unclassified - UC) (Not Known - NK)

2nd Road Name

Town

Sector /Beat No.

County or Borough

Parish No. or Name

1.10 Local Auth No. (if known)

1.11 Grid Reference E -> N ^

REPORTING OFFICER Name BCU/Stn Number 1.2 Force Tel Number

1.5 Number of vehicles table

1.6 Number of casualties table

1.14 ROAD TYPE table with X

1.15 Speed Limit (Permanent) table

1.16 JUNCTION DETAIL table with X

JUNCTION ACCIDENTS ONLY

1.17 JUNCTION CONTROL table with X

1.20a PEDESTRIAN CROSSING - HUMAN CONTROL table with X

1.20b PEDESTRIAN CROSSING - PHYSICAL FACILITIES table with X

1.22 WEATHER table with X

1.23 ROAD SURFACE CONDITION table with X

1.21 LIGHT CONDITIONS table with X

1.24 SPECIAL CONDITIONS AT SITE table with X

1.25 CARRIAGEWAY HAZARDS table with X

1.26 Did a police officer attend the scene and obtain the details for this report? table with X

Subject to local directions, boxes with a grey background need not be completed if already recorded

* Circle as appropriate UNCLASSIFIED

2.26	VEHICLE REGISTRATION MARK								
Vehicle 001									
Vehicle 002									
Vehicle 003									
Vehicle 004									

2.28	FOREIGN REGISTERED VEHICLE X	VEHICLE			
		1	2	3	4
Not foreign registered vehicle	0				
Foreign registered vehicle LHD	1				
Foreign registered vehicle RHD	2				
Foreign reg' vehicle-two wheeler	3				

2.5	TYPE OF VEHICLE X				
Pedal cycle	01				
M/cycle 50cc and under	02				
M/cycle over 50cc and up to 125cc	03				
M/cycle over 125cc and up to 500cc	04				
Motorcycle over 500cc	05				
Taxi / Private hire car	08				
Car	09				
Minibus (8-16 passenger seats)	10				
Bus or coach (17 or more passenger seats)	11				
Other motor vehicle	14				
Other non-motor vehicle	15				
Ridden horse	16				
Agricultural vehicle (include diggers etc)	17				
Tram / Light rail	18				
Goods vehicle 3.5 tonnes mgw and under	19				
Goods vehicle over 3.5 tonnes mgw and under 7.5 tonnes mgw	20				
Goods vehicle 7.5 tonnes mgw and over	21				

2.6	TOWING AND ARTICULATION X				
No tow or articulation	0				
Articulated vehicle	1				
Double or multiple trailer	2				
Caravan	3				
Single trailer	4				
Other tow	5				

2.21	SEX OF DRIVER X				
Male	1				
Female	2				
Driver not traced	3				

2.22	AGE OF DRIVER (Estimate if necessary)				
Vehicle 001		Vehicle 002			
Vehicle 003		Vehicle 004			

2.27	DRIVER HOME POSTCODE or Code: 1- Unknown 2- Non UK Resident 3 - Parked & unattended ↓				
Vehicle 001					
Vehicle 002					
Vehicle 003					
Vehicle 004					

2.23	BREATH TEST X	VEHICLE			
		1	2	3	4
Not applicable	0				
Positive	1				
Negative	2				
Not requested	3				
Refused to provide	4				
Driver not contacted at time of acc'	5				
Not provided (medical reasons)	6				

2.24	HIT AND RUN X				
Not hit and run	0				
Hit and run	1				
Non-stop vehicle, not hit	2				

2.29	JOURNEY PURPOSE OF DRIVER/RIDER X				
Journey as part of work	1				
Commuting to / from work	2				
Taking school pupil to/from school	3				
Pupil riding to / from school	4				
Other/Not known	5				

2.9	VEHICLE LOCATION AT TIME OF ACCIDENT RESTRICTED LANE/ AWAY FROM MAIN C'WAY X				
On main carriageway not in restricted lane	00				
Tram / Light rail track	01				
Bus lane	02				
Busway (inc. guided busway)	03				
Cycle lane (on main carriageway)	04				
Cycleway or shared use footway (not part of main carriageway)	05				
On lay-by / hard shoulder	06				
Entering lay-by/ hard shoulder	07				
Leaving lay-by / hard shoulder	08				
Footway (pavement)	09				

2.10	JUNCTION LOCATION OF VEHICLE X				
Not at or within 20m of junction	0				
Approaching junction or waiting /parked at junction approach	1				
Cleared junction or waiting/ parked at junction exit	2				
Leaving roundabout	3				
Entering roundabout	4				
Leaving main road	5				
Entering main road	6				
Entering from slip road	7				
Mid junction- on roundabout or on main road	8				

2.7	MANOEUVRES X				
Reversing	01				
Parked	02				
Waiting to go ahead but held up	03				
Slowing or stopping	04				
Moving off	05				
U turn	06				
Turning left	07				
Waiting to turn left	08				
Turning right	09				
Waiting to turn right	10				
Changing lane to left	11				
Changing lane to right	12				
O'taking moving veh on its offside	13				
O'taking stationary veh on its offside	14				
Overtaking on nearside	15				
Going ahead left hand bend	16				
Going ahead right hand bend	17				
Going ahead other	18				

2.11	SKIDDING AND OVERTURNING X	VEHICLE			
		1	2	3	4
No skidding, jack-knifing or overturning	0				
Skidded	1				
Skidded and overturned	2				
Jack-knifed	3				
Jack-knifed and overturned	4				
Overturned	5				

2.12	HIT OBJECT IN CARRIAGEWAY X				
None	00				
Previous accident	01				
Roadworks	02				
Parked vehicle	04				
Bridge-roof	05				
Bridge-side	06				
Bollard / Refuge	07				
Open door of vehicle	08				
Central island of roundabout	09				
Kerb	10				
Other object	11				
Any animal (except ridden horse)	12				

2.13	VEHICLE LEAVING CARRIAGEWAY X				
Did not leave carriageway	0				
Left carriageway nearside	1				
Left carriageway nearside and rebounded	2				
Left carriageway straight ahead at junction	3				
Left carriageway offside onto central reservation	4				
Left carriageway offside onto central reserve and rebounded	5				
Left carriageway offside and crossed central reservation	6				
Left carriageway offside	7				
Left carriageway offside and rebounded	8				

2.14	FIRST OBJECT HIT OFF CARRIAGEWAY X				
None	00				
Road sign / Traffic signal	01				
Lamp post	02				
Telegraph pole / Electricity pole	03				
Tree	04				
Bus stop / Bus shelter	05				
Central crash barrier	06				
Nearside or offside crash barrier	07				
Submerged in water (completely)	08				
Entered ditch	09				
Other permanent object	10				

2.16	FIRST POINT OF IMPACT X				
Did not impact	0				
Front	1				
Back	2				
Offside	3				
Nearside	4				

2.17	FIRST CONTACT BETWEEN EACH VEHICLE Example: In a 3 car collision vehicle 1 collides with the rear of vehicle 2 pushing it into vehicle 3.				
Example Code:					
Vehicle 001 first collides with vehicle 002		0	0	2	
Vehicle 002 first collides with vehicle 001		0	0	1	
Vehicle 003 first collides with vehicle 002		0	0	2	
Vehicle 001	0			Vehicle 002	0
Vehicle 003	0			Vehicle 004	0

Subject to local directions, boxes with a grey background need not be completed if already recorded

2.8 DIRECTION OF VEHICLE TRAVEL

1. Using the Example shown complete the FROM and TO boxes for the vehicles concerned, indicating direction of travel FROM and TO

2. If PARKED enter '00'

Vehicle 001

FROM TO

Vehicle 003

FROM TO

Vehicle 002

FROM TO

Vehicle 004

FROM TO

EXAMPLE

FROM TO

CASUALTY RECORD

<p>3.4 VEHICLE REFERENCE NUMBER Enter VEH No. which CASUALTY occupied (for pedestrians, code vehicle that struck them) e.g. 001,002 etc.</p> <p>Casualty 001 <input type="text" value="0"/> <input type="text"/> <input type="text"/> Casualty 002 <input type="text" value="0"/> <input type="text"/> <input type="text"/></p> <p>Casualty 003 <input type="text" value="0"/> <input type="text"/> <input type="text"/> Casualty 004 <input type="text" value="0"/> <input type="text"/> <input type="text"/></p> <p>Casualty 005 <input type="text" value="0"/> <input type="text"/> <input type="text"/> Casualty 006 <input type="text" value="0"/> <input type="text"/> <input type="text"/></p> <p>3.18 CASUALTY HOME POSTCODE or Code: 1- Unknown 2- Non UK Resident </p> <p>Casualty 001 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Casualty 002 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Casualty 003 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Casualty 004 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Casualty 005 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Casualty 006 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>3.7 SEX OF CASUALTY <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th colspan="6">CASUALTY</th> </tr> <tr> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>Male</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Female</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p>3.8 AGE OF CASUALTY (Estimate if necessary) For children less than a year enter 00</p> <p>Casualty 001 <input type="text"/> <input type="text"/> Casualty 002 <input type="text"/> <input type="text"/></p> <p>Casualty 003 <input type="text"/> <input type="text"/> Casualty 004 <input type="text"/> <input type="text"/></p> <p>Casualty 005 <input type="text"/> <input type="text"/> Casualty 006 <input type="text"/> <input type="text"/></p> <p>3.6 CASUALTY CLASS <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>Driver/Rider</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Veh./pillion Passenger</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Pedestrian</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p>3.9 SEVERITY OF CASUALTY <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>Fatal</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Serious</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Slight</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table>		CASUALTY						1	2	3	4	5	6	Male	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Female	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		1	2	3	4	5	6	Driver/Rider	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Veh./pillion Passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Pedestrian	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		1	2	3	4	5	6	Fatal	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Serious	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Slight	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<p>3.13 SCHOOL PUPIL CASUALTY <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th colspan="6">CASUALTY</th> </tr> <tr> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>School pupil on journey to or from school</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Other</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p>3.15 CAR PASSENGER (not driver) <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>0</th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>Not a car passenger</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Front seat passenger</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Rear seat passenger</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p>3.16 BUS OR COACH PASSENGER <input checked="" type="checkbox"/> (17 passenger seats or more)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>0</th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>Not a bus or coach passenger</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Boarding</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Alighting</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Standing passenger</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Seated passenger</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table>		CASUALTY						1	2	3	4	5	6	School pupil on journey to or from school	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Other	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		0	1	2	3	4	5	6	Not a car passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Front seat passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Rear seat passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		0	1	2	3	4	5	6	Not a bus or coach passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Boarding	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Alighting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Standing passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Seated passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	CASUALTY																																																																																																																																																																																															
	1	2	3	4	5	6																																																																																																																																																																																										
Male	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
Female	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
	1	2	3	4	5	6																																																																																																																																																																																										
Driver/Rider	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
Veh./pillion Passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
Pedestrian	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
	1	2	3	4	5	6																																																																																																																																																																																										
Fatal	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
Serious	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
Slight	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
	CASUALTY																																																																																																																																																																																															
	1	2	3	4	5	6																																																																																																																																																																																										
School pupil on journey to or from school	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																										
	0	1	2	3	4	5	6																																																																																																																																																																																									
Not a car passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																									
Front seat passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																									
Rear seat passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																									
	0	1	2	3	4	5	6																																																																																																																																																																																									
Not a bus or coach passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																									
Boarding	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																									
Alighting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																									
Standing passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																									
Seated passenger	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																									

PEDESTRIAN CASUALTIES ONLY

<p>3.10 PEDESTRIAN LOCATION <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2"></th> <th colspan="6">CASUALTY</th> </tr> <tr> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>In carriageway, crossing on pedestrian crossing facility</td> <td>01</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>In carriageway, crossing within zig-zag lines at crossing approach</td> <td>02</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>In carriageway, crossing within zig-zag lines at crossing exit</td> <td>03</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>In carriageway, crossing elsewhere within 50m of pedestrian crossing</td> <td>04</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>In carriageway, crossing elsewhere</td> <td>05</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>On footway or verge</td> <td>06</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>On refuge, central island or central reservation</td> <td>07</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>In centre of carriageway, not on refuge, island or central reservation</td> <td>08</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>In carriageway, not crossing</td> <td>09</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Unknown or other</td> <td>10</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table>			CASUALTY						1	2	3	4	5	6	In carriageway, crossing on pedestrian crossing facility	01	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	In carriageway, crossing within zig-zag lines at crossing approach	02	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	In carriageway, crossing within zig-zag lines at crossing exit	03	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	In carriageway, crossing elsewhere within 50m of pedestrian crossing	04	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	In carriageway, crossing elsewhere	05	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	On footway or verge	06	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	On refuge, central island or central reservation	07	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	In centre of carriageway, not on refuge, island or central reservation	08	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	In carriageway, not crossing	09	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Unknown or other	10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<p>3.11 PEDESTRIAN MOVEMENT <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2"></th> <th colspan="6">CASUALTY</th> </tr> <tr> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>Crossing from driver's nearside</td> <td>1</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Crossing from driver's nearside-masked by parked or stationary veh'</td> <td>2</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Crossing from driver's offside</td> <td>3</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Crossing from driver's offside-masked by parked or stationary veh'</td> <td>4</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>In carriageway, stationary - not crossing (standing or playing)</td> <td>5</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>In carriageway, stationary -not crossing (standing or playing), masked by parked or stationary veh'</td> <td>6</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Walking along in carriageway-facing traffic</td> <td>7</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Walking along in carriageway-back to traffic</td> <td>8</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Unknown or other</td> <td>9</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table>			CASUALTY						1	2	3	4	5	6	Crossing from driver's nearside	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Crossing from driver's nearside-masked by parked or stationary veh'	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Crossing from driver's offside	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Crossing from driver's offside-masked by parked or stationary veh'	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	In carriageway, stationary - not crossing (standing or playing)	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	In carriageway, stationary -not crossing (standing or playing), masked by parked or stationary veh'	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Walking along in carriageway-facing traffic	7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Walking along in carriageway-back to traffic	8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Unknown or other	9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<p>3.12 PEDESTRIAN DIRECTION <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2"></th> <th colspan="6">CASUALTY</th> </tr> <tr> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>Standing still</td> <td>0</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Northbound</td> <td>1</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Northeast bound</td> <td>2</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Eastbound</td> <td>3</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Southeast bound</td> <td>4</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Southbound</td> <td>5</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Southwest bound</td> <td>6</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Westbound</td> <td>7</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Northwest bound</td> <td>8</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Unknown</td> <td>9</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p>3.19 PEDESTRIAN INJURED IN THE COURSE OF 'On The Road' WORK Work actively carried out on public road (e.g. delivery services, road maintenance, postal delivery, traffic control etc.) <input checked="" type="checkbox"/></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>0</th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>No</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Yes</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>Not known</td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table>			CASUALTY						1	2	3	4	5	6	Standing still	0	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Northbound	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Northeast bound	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Eastbound	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Southeast bound	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Southbound	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Southwest bound	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Westbound	7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Northwest bound	8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Unknown	9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		0	1	2	3	4	5	6	No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Yes	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Not known	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
				CASUALTY																																																																																																																																																																																																																																																																																																																
	1	2		3	4	5	6																																																																																																																																																																																																																																																																																																													
In carriageway, crossing on pedestrian crossing facility	01	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
In carriageway, crossing within zig-zag lines at crossing approach	02	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
In carriageway, crossing within zig-zag lines at crossing exit	03	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
In carriageway, crossing elsewhere within 50m of pedestrian crossing	04	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
In carriageway, crossing elsewhere	05	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
On footway or verge	06	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
On refuge, central island or central reservation	07	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
In centre of carriageway, not on refuge, island or central reservation	08	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
In carriageway, not crossing	09	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Unknown or other	10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
		CASUALTY																																																																																																																																																																																																																																																																																																																		
		1	2	3	4	5	6																																																																																																																																																																																																																																																																																																													
Crossing from driver's nearside	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Crossing from driver's nearside-masked by parked or stationary veh'	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Crossing from driver's offside	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Crossing from driver's offside-masked by parked or stationary veh'	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
In carriageway, stationary - not crossing (standing or playing)	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
In carriageway, stationary -not crossing (standing or playing), masked by parked or stationary veh'	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Walking along in carriageway-facing traffic	7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Walking along in carriageway-back to traffic	8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Unknown or other	9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
		CASUALTY																																																																																																																																																																																																																																																																																																																		
		1	2	3	4	5	6																																																																																																																																																																																																																																																																																																													
Standing still	0	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Northbound	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Northeast bound	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Eastbound	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Southeast bound	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Southbound	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Southwest bound	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Westbound	7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Northwest bound	8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Unknown	9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
	0	1	2	3	4	5	6																																																																																																																																																																																																																																																																																																													
No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Yes	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													
Not known	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																																																																																																																																																																																																																																																																																																													

LOCAL STATISTICS

Subject to local directions, boxes with a grey background need not be completed if already recorded

1. Select up to six factors from the grid, relevant to the accident.
2. Factors may be shown in any order, but an indication must be given of whether each factor is **very likely (A)** or **possible (B)**.
3. Only include factors that you consider contributed to the accident. (i.e. do NOT include "Poor road surface" unless relevant).
4. More than one factor may, if appropriate, be related to the same road user.
5. The same factor may be related to more than one road user.
6. The participant should be identified by the relevant vehicle or casualty ref no. (e.g. 001, 002 etc.), preceded by "V" if the factor applies to a vehicle, driver/rider or the road environment (e.g. V002), or "C" if the factor relates to a pedestrian or passenger casualty (e.g. C001).
7. Enter U000 if the factor relates to an uninjured pedestrian.

Road Environment Contributed	101	102	103	104	105	106	107	108	109	
	Poor or defective road surface	Deposit on road (e.g. oil, mud, chippings)	Slippery road (due to weather)	Inadequate or masked signs or road markings	Defective traffic signals	Traffic calming (e.g. speed cushions, road humps, chicanes)	Temporary road layout (e.g. contraflow)	Road layout (e.g. bend, hill, narrow carriageway)	Animal or object in carriageway	
Vehicle Defects	201	202	203	204	205	206				
	Tyres illegal, defective or under-inflated	Defective lights or indicators	Defective brakes	Defective steering or suspension	Defective or missing mirrors	Overloaded or poorly loaded vehicle or trailer				
Injudicious Action	301	302	303	304	305	306	307	308	309	310
	Disobeyed automatic traffic signal	Disobeyed 'Give Way' or 'Stop' sign or markings	Disobeyed double white lines	Disobeyed pedestrian crossing facility	Illegal turn or direction of travel	Exceeding speed limit	Travelling too fast for conditions	Following too close	Vehicle travelling along pavement	Cyclist entering road from pavement
Driver/Rider Error or Reaction	401	402	403	404	405	406	407	408	409	410
	Junction overshoot	Junction restart (moving off at junction)	Poor turn or manoeuvre	Failed to signal or misleading signal	Failed to look properly	Failed to judge other person's path or speed	Passing too close to cyclist, horse rider or pedestrian	Sudden braking	Swerved	Loss of control
Impairment or Distraction	501	502	503	504	505	506	507	508	509	510
	Impaired by alcohol	Impaired by drugs (illicit or medicinal)	Fatigue	Uncorrected, defective eyesight	Illness or disability, mental or physical	Not displaying lights at night or in poor visibility	Cyclist wearing dark clothing at night	Driver using mobile phone	Distraction in vehicle	Distraction outside vehicle
Behaviour or Inexperience	601	602	603	604	605	606	607			
	Aggressive driving	Careless, reckless or in a hurry	Nervous, uncertain or panic	Driving too slow for conditions or slow vehicle (e.g. tractor)	Learner or inexperienced driver/rider	Inexperience of driving on the left	Unfamiliar with model of vehicle			
Vision Affected by	701	702	703	704	705	706	707	708	709	710
	Stationary or parked vehicle(s)	Vegetation	Road layout (e.g. bend, winding road, hill crest)	Buildings, road signs, street furniture	Dazzling headlights	Dazzling sun	Rain, sleet, snow or fog	Spray from other vehicles	Visor or windscreen dirty or scratched	Vehicle blind spot
Pedestrian Only (Casualty or Uninjured)	801	802	803	804	805	806	807	808	809	810
	Crossing road masked by stationary or parked vehicle	Failed to look properly	Failed to judge vehicle's path or speed	Wrong use of pedestrian crossing facility	Dangerous action in carriageway (e.g. playing)	Impaired by alcohol	Impaired by drugs (illicit or medicinal)	Careless, reckless or in a hurry	Pedestrian wearing dark clothing at night	Disability or illness, mental or physical
Special Codes	901	902	903	904						*999
	Stolen vehicle	Vehicle in course of crime	Emergency vehicle on a call	Vehicle door opened or closed negligently						Other - Please specify below

Driver/Rider Only (Includes Pedal Cycles and Horse Riders)

	1st	2nd	3rd	4th	5th	6th
Factor in the accident	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Which participant? (e.g. V001, C001, U000)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Very likely (A) or Possible (B)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* If 999 Other, give brief details
 (Note: Only use if another factor contributed to the accident **and include it in the text description of how the accident occurred**)

These factors reflect the reporting officer's opinion at the time of reporting and may not be the result of extensive investigation