

# HOW TO READ YOUR NEW YORK STATE POLICE ACCIDENT REPORT

Page \_\_\_\_\_ of \_\_\_\_\_

Vehicle Codes

**NEW YORK STATE DEPARTMENT OF MOTOR VEHICLES**

**POLICE ACCIDENT REPORT**

**MVA-104.6 (7/07)**

☐ **AMENDED REPORT** **DMV COPY**

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|    |                                                                                                                                                                                                                                                                                                                                                                                                        |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    |    |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------------------------------|----|----|
| 1  | Accident Date<br>Month Day Year                                                                                                                                                                                                                                                                                                                                                                        | City or Town | County | No. of Vehicles | No. Injured                                                                                                                                                                                                                                                                                                                                                                                           | No. Killed | Not Investigated at Scene<br><input type="checkbox"/> Accident Reconstructed <input type="checkbox"/> | Left Scene<br><input type="checkbox"/> | Police Parties<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 20 |    |
| 2  | <b>VEHICLE 1 - Driver</b><br>License ID Number _____ State of Lic. _____<br>Driver Name - exactly as printed on license _____<br>Address (Include Number & Street) _____ Apt. No. _____<br>City or Town _____ State _____ Zip Code _____                                                                                                                                                               |              |        |                 | <input type="checkbox"/> <b>VEHICLE 2 - Driver</b><br>License ID Number _____ State of Lic. _____<br>Driver Name - exactly as printed on license _____<br>Address (Include Number & Street) _____ Apt. No. _____<br>City or Town _____ State _____ Zip Code _____                                                                                                                                     |            |                                                                                                       |                                        |                                                                            |    | 21 |
| 3  | Date of Birth _____ Sex _____ Unlicensed <input type="checkbox"/> No. of Occupants _____<br>Name - exactly as printed on registration _____<br>Address (Include Number & Street) _____ Apt. No. _____<br>City or Town _____ State _____ Zip Code _____                                                                                                                                                 |              |        |                 | Date of Birth _____ Sex _____ Unlicensed <input type="checkbox"/> No. of Occupants _____<br>Name - exactly as printed on registration _____<br>Address (Include Number & Street) _____ Apt. No. _____<br>City or Town _____ State _____ Zip Code _____                                                                                                                                                |            |                                                                                                       |                                        |                                                                            |    | 22 |
| 4  | Plate Number _____ State of Reg. _____ Vehicle Year & Make _____ Vehicle Type _____ Ins. Code _____                                                                                                                                                                                                                                                                                                    |              |        |                 | Plate Number _____ State of Reg. _____ Vehicle Year & Make _____ Vehicle Type _____ Ins. Code _____                                                                                                                                                                                                                                                                                                   |            |                                                                                                       |                                        |                                                                            |    | 23 |
| 5  | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 1 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes  |              |        |                 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 2 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |            |                                                                                                       |                                        |                                                                            |    | 24 |
| 6  | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 3 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes  |              |        |                 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 4 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |            |                                                                                                       |                                        |                                                                            |    | 25 |
| 7  | Reference Marker _____ Coordinates (if available)<br>Latitude/Longitude _____<br>Longitude/Easting _____                                                                                                                                                                                                                                                                                               |              |        |                 | Place Where Accident Occurred:<br>County _____ City _____ Village _____ Town _____<br>Road on which accident occurred _____<br>at 1) Intersecting street _____<br>or 2) _____<br>(If Region, Name of Intersecting Road Number or Street Name)                                                                                                                                                         |            |                                                                                                       |                                        |                                                                            |    | 26 |
| 8  | Accident Description/Officer's Notes                                                                                                                                                                                                                                                                                                                                                                   |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 27 |
| 9  | Cost of repairs to any one vehicle will be more than \$1000.<br><input type="checkbox"/> Unknown/Unable to Determine <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                          |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 28 |
| 10 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 5 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes  |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 29 |
| 11 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 6 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes  |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 30 |
| 12 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 7 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes  |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 31 |
| 13 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 8 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes  |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 32 |
| 14 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 9 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes  |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 33 |
| 15 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 10 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 34 |
| 16 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 11 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 35 |
| 17 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 12 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 36 |
| 18 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 13 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 37 |
| 19 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 14 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 38 |
| 20 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 15 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 39 |
| 21 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 16 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 40 |
| 22 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated with an overdimension permit.<br><b>VEHICLE 17 DAMAGE CODES</b><br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more Damage Codes |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    | 41 |
| 23 | (Check if involved vehicle is:<br><input type="checkbox"/> more than 30 inches wide,<br><input type="checkbox"/> more than 34 feet long,<br><input type="checkbox"/> operated with an overweight permit,<br><input type="checkbox"/> operated                                                                                                                                                          |              |        |                 |                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                                       |                                        |                                                                            |    |    |

# Anchorage Police Accident Report

**JR Anderson**

A red circular graphic with a gradient, appearing as a partial circle or a thick arc, located to the right of the name bar.

## **Anchorage Police Accident Report:**

Directory of Automated Criminal Justice Information Systems 1993 DIANE Publishing Company,1994-11 Provides information about management systems the level of automation among justice agencies Designed to facilitate the exchange of information the transfer or adaptation of exemplary systems Detailed system description records for hundreds of systems Indices by agency name total personnel computer equipment automated functions criminal justice software Five system indices Comprehensive      **Highway Accident Report** ,1970      **Highway Accident Report** United States. National Transportation Safety Board,1973      *God's Vampire and the Countess* Steven Ostrowski,2015-01-19 Chris a university student at Anchorage befriends an anemic young woman named Anna At first Chris is encouraged by Anna s conversion to Christianity but soon realizes everyone around him is killed under suspicious circumstances Chris is then confronted by the possibility that Anna is involved in the killings and that he must do whatever is necessary to stop her      **Daily Labor Report** ,2004-11      **Ice Blue Eyes** Ron Walden,2011-06-01 Tragedy met two Seattle bankers kayaking in Prince William Sound in Southcentral Alaska One of the men was killed by falling ice while the other video taped the event The banker was the one charged with managing the Alaska Account at SeaFirst Bank in Seattle Aliana Pedersen Assistant Director of Finance for the State of Alaska must now find a replacement Shortly after the change over a clerk in the bank discovered irregularities in the account Trooper Reuben Hayes had become acquainted with all the parties when the first banker was accidentally killed His investigation leads him to a personal affair with the Deputy Director of Finance and embroils him in a case of bank fraud Reminiscent of Alaska s Last Bridge to Nowhere politics the suspected perpetrators are the bank president the head of the Alaska Account at SeaFirst and even the Governor of the State of Alaska Many others become entangled in the case a local drug dealer a Mexican Mafia Don and the FBI An Alaska who done it that lasts through the final page      *Don't Go There!* Peter Greenberg,2008-11-11 Presents a selection of vacation destinations to avoid with advice to travelers on steering clear of places that are vulnerable to such vacation ruining elements as crime natural disasters and overpriced or overrated venues      **Alaska ... Having the Best Time I Ever Had** Larry S. Mikelsen,2012-11 As a boy I was lucky enough to be introduced an elderly gentleman by the name of Robert R Bob Huttie Mr Huttie to me I remember Mr Huttie as a man of many interesting stories and experiences Mr Huttie was a good friend of my father and for quite a number of years was sort of an informal member of our family being in attendance for Christmas Thanksgiving birthdays and any other family gatherings His little home along with its menagerie of exotic fowl in a little community called Annapolis Washington was always a most fun place to visit Throughout his life Bob was an avid photographer with a genuine interest in people who religiously recorded all that was going on around him in his more than interesting life The walls of his home were covered with pictures and memorabilia of that lifetime There were times when Bob would take out his old picture albums and show my brother and me pictures of his times up in the State of Alaska I always remember that these times seemed to be

events he treasured and each picture came with a story that would flow off his lips with obvious pleasure After coming to America serving in the U S Marine Corp Bob spent 1933 1934 living his dream on the Alaskan Kenai Peninsula near what was then called Birchwood Creek now Bear Creek on Tustumena Lake as a hunter and an amateur trapper as he referred to himself In January of 1937 Bob was hired as a patrolman with the Anchorage Police Department and 21 days later he had to give up his beat to come indoors as the Acting Police Chief replacing the then seriously ill Chief of Police Ernie Amundsen

Law Enforcement Report ,1993      *Government Employee Relations Report* ,2004      **Monthly Catalogue, United States Public Documents** ,1985      **Report of Performance** Alaska,1984      *Technical Reports of the National Highway Traffic Safety Administration* United States. National Highway Traffic Safety Administration. Office of Administrative Services,1973      Human Resources Report ,2004      *Monthly Catalog of United States Government Publications* ,1967

**Alaska Hunt** Shelter Somerset,2012-08-06 For Alaska Wildlife Trooper Zanebono Fusca it s just another summer in Anchorage until a slew of inexplicable fatal bear attacks sets the city reeling As far as Zane is concerned the timing couldn t be worse He s besieged with his own demons coping with personal loss and an identity crisis that clutches him worse than a grizzly s pickaxe sized fangs Ten years before he hoped Alaska would bring him a sense of his manhood Now the last frontier could put him in an early grave Zane s role to protect Alaska s teeming wildlife gets even more tangled when handsome twenty five year old Joshua Gaffner arrives seeking the details of his uncle s gruesome death But Alaskan officials have few answers Against his better judgment Zane takes Joshua deep into Anchorage s far flung backcountry populated with eccentric recluses and ego driven ecologists in search of the truth As the bizarre attacks increase Zane and Josh continue to push for clues to crack the mystery Finally Zane unravels a shocking discovery that makes the pieces fall into place The trouble is Josh stands in the perfect position to become the next victim      Directory of Automated Criminal Justice Information Systems ,1986      **Bulletin** U.S. Lake Survey,1963      **Great Lakes Pilot** ,1962      **Report to the Secretary of the Interior** Alaska. Governor,1955

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## **Table of Contents Anchorage Police Accident Report**

1. Understanding the eBook Anchorage Police Accident Report
  - The Rise of Digital Reading Anchorage Police Accident Report
  - Advantages of eBooks Over Traditional Books
2. Identifying Anchorage Police Accident Report
  - Exploring Different Genres
  - Considering Fiction vs. Non-Fiction
  - Determining Your Reading Goals
3. Choosing the Right eBook Platform
  - Popular eBook Platforms
  - Features to Look for in an Anchorage Police Accident Report
  - User-Friendly Interface
4. Exploring eBook Recommendations from Anchorage Police Accident Report
  - Personalized Recommendations
  - Anchorage Police Accident Report User Reviews and Ratings
  - Anchorage Police Accident Report and Bestseller Lists
5. Accessing Anchorage Police Accident Report Free and Paid eBooks
  - Anchorage Police Accident Report Public Domain eBooks
  - Anchorage Police Accident Report eBook Subscription Services
  - Anchorage Police Accident Report Budget-Friendly Options

6. Navigating Anchorage Police Accident Report eBook Formats
  - ePub, PDF, MOBI, and More
  - Anchorage Police Accident Report Compatibility with Devices
  - Anchorage Police Accident Report Enhanced eBook Features
7. Enhancing Your Reading Experience
  - Adjustable Fonts and Text Sizes of Anchorage Police Accident Report
  - Highlighting and Note-Taking Anchorage Police Accident Report
  - Interactive Elements Anchorage Police Accident Report
8. Staying Engaged with Anchorage Police Accident Report
  - Joining Online Reading Communities
  - Participating in Virtual Book Clubs
  - Following Authors and Publishers Anchorage Police Accident Report
9. Balancing eBooks and Physical Books Anchorage Police Accident Report
  - Benefits of a Digital Library
  - Creating a Diverse Reading Collection Anchorage Police Accident Report
10. Overcoming Reading Challenges
  - Dealing with Digital Eye Strain
  - Minimizing Distractions
  - Managing Screen Time
11. Cultivating a Reading Routine Anchorage Police Accident Report
  - Setting Reading Goals Anchorage Police Accident Report
  - Carving Out Dedicated Reading Time
12. Sourcing Reliable Information of Anchorage Police Accident Report
  - Fact-Checking eBook Content of Anchorage Police Accident Report
  - Distinguishing Credible Sources
13. Promoting Lifelong Learning
  - Utilizing eBooks for Skill Development
  - Exploring Educational eBooks
14. Embracing eBook Trends
  - Integration of Multimedia Elements

- Interactive and Gamified eBooks

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