

Accepted Date 7/20/2020 5:21 PM  
 Generated Date 7/20/2020 5:21 PM  
 Report Form Level 3



Master Record Number	102745288
Type Of Crash	Fatal
Approved By	330

## Tennessee Electronic Traffic Crash Report

### Incident Information

Date of Crash 7/20/2020		Day Of Crash Monday		Local Agency Number 0830100		Reporting Agency Name Gallatin Police Dept		Agency Tracking Number 20-02378	
Time of Crash 08:45		Time Notified 08:46		Time Arrived 08:48		County Sumner		City Gallatin	
Total Vehicles 1		Total Occupants 0		Total Non-Occupants 1		Total Killed 1		Total Injured 0	
Total Uninjured 0		Hit and Run No		Solved No		Police Pursuit No		School Bus Involved No	
Photos Taken Yes		By Police		Photographer Name TOLL					
Area Business				Interchange Related No		Intersection Type Not at Intersection			
Block Number		Roadway Number		Roadway Name S WATER AVE		Suffix		Mile Marker 0.00	
Estimated Distance 213.00		Distance Type Feet		Direction North		From Highway/Intersection LORRAINE DR		Intersect Number	
Roadway Local Id					Intersect Local Id				
Relation To Junction Non-Junction				Relation to Roadway Parking Lot or Private Property				Route Signing State Route	
Work Zone None				Construction Zone					
Construction Location				Workers Present					
First Harmful Event Occupant Struck By Own Vehicle				Traficway Type Parking Lot					
Weather Conditions Clear			Light conditions Daylight			Latitude 36.355650		Longitude -86.438960	
Rail Crossing Id									
Manner of Collision Not Collision with Motor Vehicle in Transport									
1st Collision Factor			2nd Collision Factor			3rd Collision Factor			

### Incident Management

Secondary Crash No		Secondary Crash Type				Blockage Occurred No	
Roadway / Lanes Blocked				Roadway Lanes/ Cleared			
Lanes Blocked							
Incident Started				Incident Cleared			

### Investigating Officer Details

Investigation Complete Yes		Rank MPO		First Name TY		Middle Initial	Last Name WILSON		Suffix
Badge Number 330		District/Zone 2		Car Number 4237		Report Date 07/20/2020			

Vehicle Number 1	Number of Occupants 0	Driver Presence Driverless Vehicle
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### Driver Information

First Name		Middle Initial	Last Name		Suffix	Date Of Birth	Age
Address Line 1			Address Line 2		City	State	Zip Code
Phone 1	Phone 2	Phone 3	Race		Ethnicity		Gender
Drivers License Number		Drivers License State		Expiration Date	Drivers License Class		Drivers License Status
Safety Equipment				Airbag		Seat Position	
Endorsement 1		Complied With	Endorsement 2		Complied With	Endorsement 3	
Restriction 1		Complied With	Restriction 2		Complied With	Restriction 3	
Ejected		Ejection Path			Trapped/Extricated		
Injury Code	Medical Transport	Ambulance/Hospital				EMS Run#	

### Driver Conditions and Actions

Hit and Run No Hit And Run		Driver/Vehicle Maneuver Other		Distraction	
Driver's 1st Condition		Driver's 2nd Condition		Driver's 3rd Condition	
Driver's 1st Action			Drivers 2nd Action		
Driver's 3rd Action			Driver's 4th Action		

### Alcohol and Drugs

Officer Suspect Alcohol Use		Determination Method		Alcohol Test Status	
1st Alcohol Test Type		1st Alcohol Test Result		2nd Alcohol Test Type	
				2nd Alcohol Test Result	
Officer Suspect Drug Use		Determination Method		Drug Test Status	
1st Drug Test Type		1st Drug Test Result		2nd Drug Test Type	
				2nd Drug Test Result	
				3rd Drug Test Type	
				3rd Drug Test Result	

### Driver Violations

1st Violation	1st Violation Category	1st Violation Description	1st Violation Statute
2nd Violation	2nd Violation Category	2nd Violation Description	2nd Violation Statute
3rd Violation	3rd Violation Category	3rd Violation Description	3rd Violation Statute
4th Violation	4th Violation Category	4th Violation Description	4th Violation Statute
5th Violation	5th Violation Category	5th Violation Description	5th Violation Statute



### Vehicle Information

Owner Same as Driver		Owner First Name GRANT		Owner Middle Name		Owner Last Name SOLOMON		Owner Suffix	
Address Line 1 <del>8808 MANNING LANE</del>			Address Line 2			City FRANKLING	State TN	Zip Code 37064	Phone 1 9999999999
Phone 2		Phone 3	Vehicle Year 2016	Vehicle Make TOYT		Vehicle Model TAC	Color White		
VIN 5TFJX4GN2FX047961		License Plate Number CJC885		State Tennessee		Plate Expiration 062021	Body Style Compact Pickup		
HAZMAT? No	FMCSA Reportable? No	Bus Use Not Used As School Bus				Unit Type Motor Vehicle In-Transport			
Gross Weight 10000 or Less-No Haz-8 Or Less					Vehicle Configuration				
Vehicle Operation Type Personally Owned/Used					Cargo Body Type				
1st Factor NONE			2nd Factor			3rd Factor			
Vehicle Special Use No Special Use					Emergency Use No		Override/Underride		
Towed Towed Due To Other Than Damage				Towed Location D&M TOWING					
1st Trailer		1st Trailer License Plate Information			2nd Trailer		2nd Trailer License Information		
Insurance 1 AP8374364	Insurance 1 Type Owner		Insurance 1 Carrier FARM BUREAU			Insurance 1 Start Date 6/4/2020	Insurance 1 End Date 12/4/2020		
Insurance 2	Insurance 2 Type		Insurance 2 Carrier			Insurance 2 Start Date	Insurance 2 End Date		
Insurance 3	Insurance 3 Type		Insurance 3 Carrier			Insurance 3 Start Date	Insurance 3 End Date		

### Vehicle Damage and Roadway Characteristics

Most Harmful Event Occupant Struck By Own Vehicle							Fire in Vehicle No	
Events 1 Occupant Struck By Own Vehicle		Events 2			Events 3			
Events 4		Events 5			Events 6			
Point of First Impact Rear End		Extent of Damage Functional Damage			Officer Damage Estimate Greater Than Threshold			
Areas of Vehicle Damage Rear End								
Travel Direction West		Traveling On PARKING LOT - 1357 HWY 109						
Trafficway Flow Other			Roadway Surface Type Asphalt		Number of Travel Lanes Other			
Trafficway Hazards None								
Traffic Control Devices No Control			Traffic Control Device Functioning No Controls			Roadway Route Signing State Route		
Roadway Surface Conditions Dry			Roadway Character Alignment Straight			Roadway Character Profile Uphill Grade		
Speed Limit 0		Access control No Control						

### Commercial Carrier Information

US DOT	Carrier Name				Carrier Type		ICC MC	TN DOS	
Address Line 1			Address Line 2			City	State	Zip Code	Phone
1st Hazardous Materials	HAZMAT Class	Placard	Placard #	Released	Hazardous Materials Released				
2nd Hazardous Materials	HAZMAT Class	Placard	Placard #	Released	Hazardous Materials Released				
3rd Hazardous Materials	HAZMAT Class	Placard	Placard #	Released	Hazardous Materials Released				



**Non-Motorist Information**

Person Type Pedestrian								
First Name GRANT		Middle Name		Last Name SOLOMON		Suffix	Date Of Birth 6/13/2002	Age 18
Address Line 1 <del>808 MANNING LANE</del>			Address Line 2			City FRANKLING	State TN	Zip Code 37064
Phone 1 8889933333	Phone 2	Phone 3	Gender M	Race Caucasian Mexican Puerto Rican Other White	Ethnicity Non-Hispanic	Seating Position		
Safety Equipment Not Applicable								
Injury Code Fatal		Medical Transport EMS-Ground		Ambulance/Hospital LANDING ZONE			EMS Run# 20-013936	

**Alcohol and Drugs**

Officer Suspect Alcohol Use No		Determination Method			Alcohol Test Status Test Not Given		
1st Alcohol Test Type		1st Alcohol Test Result		2nd Alcohol Test Type		2nd Alcohol Test Result	
Officer Suspect Drug Use No		Determination Method			Drug Test Status Test Not Given		
1st Drug Test Type	1st Drug Test Result	2nd Drug Test Type	2nd Drug Test Result	3rd Drug Test Type	3rd Drug Test Result		

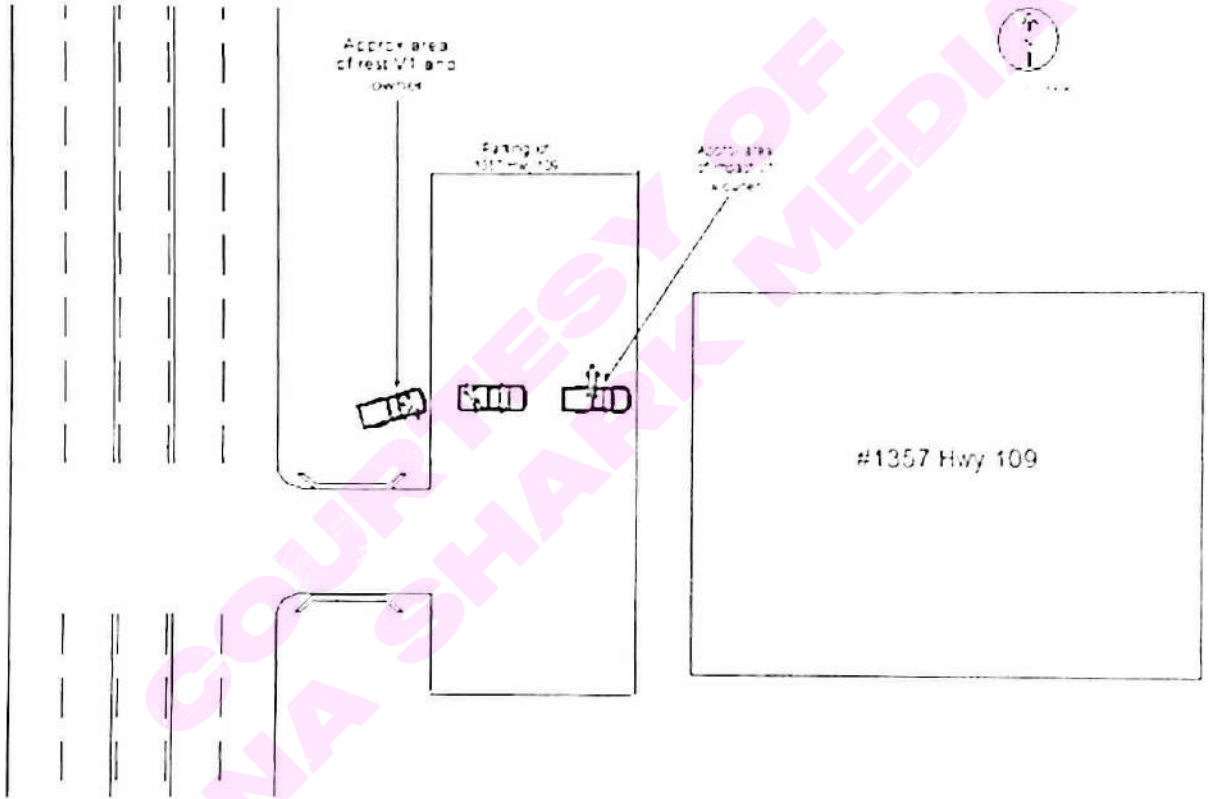
**Conditions and Actions**

Vehicle Striking Non-Motorist 1		Non-Motorist Location Not Intersection-Other Not On Roadway	
Condition 1 Unknown		Condition 2	
Condition 3			
Action 1 Other Action		Action 2	
Action 3		Action 4	

**Narrative**

Vehicle 1 was stopped in the parking lot 1357 Hwy 109 S. The owner of Vehicle 1 exited the truck and was subsequently struck by truck as it rolled down the parking lot. Vehicle 1 drug the owner into the drainage ditch where it came to rest. The owner was trapped underneath.

Hwy 109



LUNA SHARKEY MEDIA