IL DEPT OF TRANSPORTATION
DIVISION OF TRAFFIC SAFETY
ACCUMULATED TOTALS

City Summary

Selection Criteria: **1/1/2004 thru 12/31/2004**

	NUMBER OF CRASHES							INJURY SEVERITY			
Willisville	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
WEATHER CONDITION											
Clear	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
TYPE OF CRASH											
Fixed object	1	0	0	1	1	0	0	0	0	0	1
Parked motor vehicle	2	0	0	2	4	0	0	0	0	0	4
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
CLASS OF CITY											
0 TO 2,500	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
ROAD SURFACE CONDITION											
Dry	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
CLASS OF TRAFFICWAY											
State Numbered Rural	1	0	0	1	2	0	0	0	0	0	1
County & Local Roads Rural	2	0	0	2	3	0	0	0	0	0	4
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
DAY OF WEEK											
Sunday	2	0	0	2	3	0	0	0	0	0	2
Wednesday	1	0	0	1	2	0	0	0	0	0	3
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
TIME OF DAY											
1 AM	1	0	0	1	1	0	0	0	0	0	1
2 PM	1	0	0	1	2	0	0	0	0	0	3
11 PM	1	0	0	1	2	0	0	0	0	0	1
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
LIGHT CONDITION											
Darkness, Lighted Road	2	0	0	2	3	0	0	0	0	0	2
Daylight	1	0	0	1	2	0	0	0	0	0	3
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
ROAD DEFECTS											
No Defects	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Willisville	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
TRAFFIC CONTROL											
Lane Use Marking	1	0	0	1	2	0	0	0	0	0	1
No Controls	1	0	0	1	1	0	0	0	0	0	1
Unknown	1	0	0	1	2	0	0	0	0	0	3
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
ROADWAY FEATURE											
Not Applicable	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Willisville	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
VEHICLE DEFECTS											
Engine/Motor	1	0	0	1	1	0	0	0	0	0	0
No Defect	3	0	0	3	3	0	0	0	0	0	4
Unknown	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**5**	**0**	**0**	**5**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
VEHICLE TYPE											
Passenger	1	0	0	1	1	0	0	0	0	0	0
Pickup	3	0	0	3	3	0	0	0	0	0	4
Unknown	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**5**	**0**	**0**	**5**	**5**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

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		NUMBER OF CRASHES							INJURY SEVERITY			
Willisville		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Alcohol Impaired		1	0	0	1	1	0	0	0	0	0	1
Had Been Drinking		1	0	0	1	1	0	0	0	0	0	1
Other/Unknown		1	0	0	1	1	0	0	0	0	0	1
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**
DRIVER AGE/GENDER												
35-39	Male	1	0	0	1	1	0	0	0	0	0	1
45-49	Male	1	0	0	1	1	0	0	0	0	0	1
Unknown	Not Stated	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**
PASSENGER AGE/GENDER												
40-44	Male	1	0	0	1	1	0	0	0	0	0	1
Unknown	Not Stated	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**2**	**0**	**0**	**2**	**2**	**0**	**0**	**0**	**0**	**0**	**2**