IL DEPT OF TRANSPORTATION
DIVISION OF TRAFFIC SAFETY
ACCUMULATED TOTALS

City Summary

Selection Criteria: **1/1/2005 thru 12/31/2005**

	NUMBER OF CRASHES							INJURY SEVERITY			
Junction	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
WEATHER CONDITION											
Clear	2	0	0	2	3	0	0	0	0	0	5
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
TYPE OF CRASH											
Animal	1	0	0	1	1	0	0	0	0	0	3
Sideswipe same direction	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
CLASS OF CITY											
0 TO 2,500	2	0	0	2	3	0	0	0	0	0	5
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
ROAD SURFACE CONDITION											
Dry	2	0	0	2	3	0	0	0	0	0	5
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
CLASS OF TRAFFICWAY											
State Numbered Rural	2	0	0	2	3	0	0	0	0	0	5
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
DAY OF WEEK											
Friday	1	0	0	1	2	0	0	0	0	0	2
Saturday	1	0	0	1	1	0	0	0	0	0	3
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
TIME OF DAY											
Noon	1	0	0	1	2	0	0	0	0	0	2
6 PM	1	0	0	1	1	0	0	0	0	0	3
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
LIGHT CONDITION											
Darkness	1	0	0	1	1	0	0	0	0	0	3
Daylight	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
ROAD DEFECTS											
No Defects	1	0	0	1	1	0	0	0	0	0	3
Unknown	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
TRAFFIC CONTROL											
Lane Use Marking	1	0	0	1	1	0	0	0	0	0	3
No Controls	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Junction	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
ROADWAY FEATURE											
Not Applicable	2	0	0	2	3	0	0	0	0	0	5
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Junction	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
VEHICLE DEFECTS											
Unknown	3	0	0	3	3	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**5**
VEHICLE TYPE											
Passenger	2	0	0	2	2	0	0	0	0	0	4
Van/Mini-Van	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

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		NUMBER OF CRASHES							INJURY SEVERITY			
Junction		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Normal		1	0	0	1	1	0	0	0	0	0	1
Other/Unknown		2	0	0	2	2	0	0	0	0	0	2
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**
DRIVER AGE/GENDER												
35-39	Female	3	0	0	3	3	0	0	0	0	0	3
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**
PASSENGER AGE/GENDER												
6	Female	1	0	0	1	1	0	0	0	0	0	1
70-74	Female	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**2**	**0**	**0**	**2**	**2**	**0**	**0**	**0**	**0**	**0**	**2**