IL DEPT OF TRANSPORTATION
DIVISION OF TRAFFIC SAFETY
ACCUMULATED TOTALS

City Summary

Selection Criteria: **1/1/2006 thru 12/31/2006**

	NUMBER OF CRASHES							INJURY SEVERITY			
Fithian	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
WEATHER CONDITION											
Clear	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
TYPE OF CRASH											
Rear end	1	0	0	1	2	0	0	0	0	0	2
Angle	1	0	0	1	2	0	0	0	0	0	5
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
CLASS OF CITY											
0 TO 2,500	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
ROAD SURFACE CONDITION											
Dry	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
CLASS OF TRAFFICWAY											
County & Local Roads Rural	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
DAY OF WEEK											
Tuesday	1	0	0	1	2	0	0	0	0	0	5
Wednesday	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
TIME OF DAY											
8 AM	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
LIGHT CONDITION											
Daylight	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
ROAD DEFECTS											
No Defects	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
TRAFFIC CONTROL											
No Controls	1	0	0	1	2	0	0	0	0	0	2
Stop Sign/Flasher	1	0	0	1	2	0	0	0	0	0	5
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
ROADWAY FEATURE											
Not Applicable	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**7**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Fithian	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
VEHICLE DEFECTS											
No Defect	4	0	0	4	4	0	0	0	0	0	7
TOTALS	**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**7**
VEHICLE TYPE											
Passenger	3	0	0	3	3	0	0	0	0	0	6
Pickup	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**7**

City Summary

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		NUMBER OF CRASHES							INJURY SEVERITY			
Fithian		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Normal		4	0	0	4	4	0	0	0	0	0	4
TOTALS		**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
DRIVER AGE/GENDER												
17	Female	1	0	0	1	1	0	0	0	0	0	1
55-59	Male	1	0	0	1	1	0	0	0	0	0	1
60-64	Male	2	0	0	2	2	0	0	0	0	0	2
TOTALS		**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
PASSENGER AGE/GENDER												
15	Female	1	0	0	1	1	0	0	0	0	0	1
16	Female	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
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**