City Summary

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

	NUMBER OF CRASHES							INJURY SEVERITY			
Johnsonville	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	7
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
TYPE OF CRASH											
Animal	1	0	0	1	1	0	0	0	0	0	5
Sideswipe opposite direction	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
CLASS OF CITY											
0 TO 2,500	2	0	0	2	3	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
ROAD SURFACE CONDITION											
Dry	2	0	0	2	3	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
CLASS OF TRAFFICWAY											
County & Local Roads Rural	2	0	0	2	3	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
DAY OF WEEK											
Tuesday	1	0	0	1	1	0	0	0	0	0	5
Friday	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
TIME OF DAY											
5 PM	1	0	0	1	2	0	0	0	0	0	2
6 PM	1	0	0	1	1	0	0	0	0	0	5
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
LIGHT CONDITION											
Darkness	1	0	0	1	1	0	0	0	0	0	5
Daylight	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
ROAD DEFECTS											
No Defects	1	0	0	1	1	0	0	0	0	0	5
Unknown	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
TRAFFIC CONTROL											
No Controls	2	0	0	2	3	0	0	0	0	0	7
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Johnsonville	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	7
TOTALS	**2**	**0**	**0**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**7**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Johnsonville	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
VEHICLE DEFECTS											
No Defect	1	0	0	1	1	0	0	0	0	0	5
Unknown	2	0	0	2	2	0	0	0	0	0	2
TOTALS	**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**7**
VEHICLE TYPE											
Passenger	1	0	0	1	1	0	0	0	0	0	1
Pickup	1	0	0	1	1	0	0	0	0	0	1
Van/Mini-Van	1	0	0	1	1	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**7**

City Summary

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		NUMBER OF CRASHES							INJURY SEVERITY			
Johnsonville		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Normal		3	0	0	3	3	0	0	0	0	0	3
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**
DRIVER AGE/GENDER												
30-34	Female	1	0	0	1	1	0	0	0	0	0	1
50-54	Male	2	0	0	2	2	0	0	0	0	0	2
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**
PASSENGER AGE/GENDER												
2	Female	1	0	0	1	1	0	0	0	0	0	1
5	Male	2	0	0	2	2	0	0	0	0	0	2
10-14	Male	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**