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			
Troy Grove	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
WEATHER CONDITION											
Clear	7	0	0	7	11	0	0	0	0	0	12
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
TYPE OF CRASH											
Train	1	0	0	1	1	0	0	0	0	0	1
Animal	2	0	0	2	2	0	0	0	0	0	2
Head on	1	0	0	1	2	0	0	0	0	0	3
Angle	2	0	0	2	4	0	0	0	0	0	4
Turning	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
CLASS OF CITY											
0 TO 2,500	7	0	0	7	11	0	0	0	0	0	12
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
ROAD SURFACE CONDITION											
Dry	6	0	0	6	9	0	0	0	0	0	9
Ice	1	0	0	1	2	0	0	0	0	0	3
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
CLASS OF TRAFFICWAY											
State Numbered Rural	3	0	0	3	5	0	0	0	0	0	5
County & Local Roads Rural	4	0	0	4	6	0	0	0	0	0	7
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
DAY OF WEEK											
Wednesday	2	0	0	2	3	0	0	0	0	0	4
Thursday	3	0	0	3	5	0	0	0	0	0	5
Friday	1	0	0	1	2	0	0	0	0	0	2
Saturday	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
TIME OF DAY											
10 AM	1	0	0	1	2	0	0	0	0	0	3
1 PM	1	0	0	1	2	0	0	0	0	0	2
4 PM	2	0	0	2	3	0	0	0	0	0	3
5 PM	1	0	0	1	2	0	0	0	0	0	2
9 PM	1	0	0	1	1	0	0	0	0	0	1
10 PM	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**

City Summary

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

	NUMBER OF CRASHES							INJURY SEVERITY			
Troy Grove	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
LIGHT CONDITION											
Darkness	2	0	0	2	2	0	0	0	0	0	2
Darkness, Lighted Road	1	0	0	1	1	0	0	0	0	0	1
Daylight	4	0	0	4	8	0	0	0	0	0	9
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
ROAD DEFECTS											
Debris on Roadway	1	0	0	1	2	0	0	0	0	0	2
No Defects	4	0	0	4	5	0	0	0	0	0	5
Unknown	2	0	0	2	4	0	0	0	0	0	5
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
TRAFFIC CONTROL											
Lane Use Marking	1	0	0	1	2	0	0	0	0	0	3
No Controls	5	0	0	5	8	0	0	0	0	0	8
Other RR Crossing	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
ROADWAY FEATURE											
Not Applicable	7	0	0	7	11	0	0	0	0	0	12
TOTALS	**7**	**0**	**0**	**7**	**11**	**0**	**0**	**0**	**0**	**0**	**12**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Troy Grove	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
VEHICLE DEFECTS											
No Defect	5	0	0	5	5	0	0	0	0	0	5
Unknown	6	0	0	6	6	0	0	0	0	0	7
TOTALS	**11**	**0**	**0**	**11**	**11**	**0**	**0**	**0**	**0**	**0**	**12**
VEHICLE TYPE											
Passenger	6	0	0	6	6	0	0	0	0	0	6
Pickup	4	0	0	4	4	0	0	0	0	0	5
Van/Mini-Van	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**11**	**0**	**0**	**11**	**11**	**0**	**0**	**0**	**0**	**0**	**12**

City Summary

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		NUMBER OF CRASHES							INJURY SEVERITY			
Troy Grove		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Normal		11	0	0	11	11	0	0	0	0	0	11
TOTALS		**11**	**0**	**0**	**11**	**11**	**0**	**0**	**0**	**0**	**0**	**11**
DRIVER AGE/GENDER												
19	Male	1	0	0	1	1	0	0	0	0	0	1
25-29	Female	1	0	0	1	1	0	0	0	0	0	1
	Male	1	0	0	1	1	0	0	0	0	0	1
30-34	Female	1	0	0	1	1	0	0	0	0	0	1
	Male	2	0	0	2	2	0	0	0	0	0	2
45-49	Male	1	0	0	1	1	0	0	0	0	0	1
55-59	Female	2	0	0	2	2	0	0	0	0	0	2
	Male	2	0	0	2	2	0	0	0	0	0	2
TOTALS		**11**	**0**	**0**	**11**	**11**	**0**	**0**	**0**	**0**	**0**	**11**
PASSENGER AGE/GENDER												
60-64	Male	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**