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			
Waverly	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
WEATHER CONDITION											
Clear	3	0	0	3	4	0	0	0	0	0	4
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
TYPE OF CRASH											
Overturned	1	0	0	1	1	0	0	0	0	0	1
Fixed object	1	0	0	1	1	0	0	0	0	0	1
Angle	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
CLASS OF CITY											
0 TO 2,500	3	0	0	3	4	0	0	0	0	0	4
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
ROAD SURFACE CONDITION											
Dry	3	0	0	3	4	0	0	0	0	0	4
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
CLASS OF TRAFFICWAY											
State Numbered Rural	1	0	0	1	1	0	0	0	0	0	1
County & Local Roads Rural	2	0	0	2	3	0	0	0	0	0	3
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
DAY OF WEEK											
Monday	1	0	0	1	1	0	0	0	0	0	1
Friday	1	0	0	1	1	0	0	0	0	0	1
Saturday	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
TIME OF DAY											
10 AM	1	0	0	1	1	0	0	0	0	0	1
11 AM	1	0	0	1	2	0	0	0	0	0	2
11 PM	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
LIGHT CONDITION											
Darkness	1	0	0	1	1	0	0	0	0	0	1
Daylight	2	0	0	2	3	0	0	0	0	0	3
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
ROAD DEFECTS											
No Defects	3	0	0	3	4	0	0	0	0	0	4
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Waverly	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
TRAFFIC CONTROL											
No Controls	3	0	0	3	4	0	0	0	0	0	4
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
ROADWAY FEATURE											
Not Applicable	3	0	0	3	4	0	0	0	0	0	4
TOTALS	**3**	**0**	**0**	**3**	**4**	**0**	**0**	**0**	**0**	**0**	**4**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Waverly	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	4
TOTALS	**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
VEHICLE TYPE											
Pickup	3	0	0	3	3	0	0	0	0	0	3
SUV	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**

City Summary

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		NUMBER OF CRASHES							INJURY SEVERITY			
Waverly		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Illness		1	0	0	1	1	0	0	0	0	0	1
Normal		3	0	0	3	3	0	0	0	0	0	3
TOTALS		**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
DRIVER AGE/GENDER												
17	Male	1	0	0	1	1	0	0	0	0	0	1
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
55-59	Male	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**