IL DEPT OF TRANSPORTATION
DIVISION OF TRAFFIC SAFETY
ACCUMULATED TOTALS

City Summary

Selection Criteria: **1/1/2007 thru 12/31/2007**

	NUMBER OF CRASHES							INJURY SEVERITY			
Carbon Hill	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	4
Fog/Smoke/Haze	1	0	0	1	2	0	0	0	0	0	1
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
TYPE OF CRASH											
Fixed object	1	0	0	1	1	0	0	0	0	0	1
Parked motor vehicle	1	0	0	1	2	0	0	0	0	0	1
Angle	1	0	0	1	2	0	0	0	0	0	3
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
CLASS OF CITY											
0 TO 2,500	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
ROAD SURFACE CONDITION											
Dry	2	0	0	2	3	0	0	0	0	0	4
Wet	1	0	0	1	2	0	0	0	0	0	1
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
CLASS OF TRAFFICWAY											
County & Local Roads Rural	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
DAY OF WEEK											
Sunday	1	0	0	1	2	0	0	0	0	0	3
Wednesday	1	0	0	1	1	0	0	0	0	0	1
Saturday	1	0	0	1	2	0	0	0	0	0	1
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
TIME OF DAY											
1 AM	1	0	0	1	2	0	0	0	0	0	1
2 AM	1	0	0	1	1	0	0	0	0	0	1
10 AM	1	0	0	1	2	0	0	0	0	0	3
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
LIGHT CONDITION											
Darkness	2	0	0	2	3	0	0	0	0	0	2
Daylight	1	0	0	1	2	0	0	0	0	0	3
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
ROAD DEFECTS											
No Defects	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Carbon Hill	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
TRAFFIC CONTROL											
No Controls	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
ROADWAY FEATURE											
Not Applicable	3	0	0	3	5	0	0	0	0	0	5
TOTALS	**3**	**0**	**0**	**3**	**5**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

Selection Criteria: **1/1/2007 thru 12/31/2007**

	NUMBER OF CRASHES							INJURY SEVERITY			
Carbon Hill	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
Unknown	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**5**	**0**	**0**	**5**	**5**	**0**	**0**	**0**	**0**	**0**	**5**
VEHICLE TYPE											
Passenger	3	0	0	3	3	0	0	0	0	0	3
Van/Mini-Van	1	0	0	1	1	0	0	0	0	0	1
Unknown	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**5**	**0**	**0**	**5**	**5**	**0**	**0**	**0**	**0**	**0**	**5**

City Summary

Selection Criteria: **1/1/2007 thru 12/31/2007**

		NUMBER OF CRASHES							INJURY SEVERITY			
Carbon Hill		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Normal		2	0	0	2	2	0	0	0	0	0	2
Other/Unknown		2	0	0	2	2	0	0	0	0	0	2
TOTALS		**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
DRIVER AGE/GENDER												
19	Male	1	0	0	1	1	0	0	0	0	0	1
20	Female	1	0	0	1	1	0	0	0	0	0	1
25-29	Male	1	0	0	1	1	0	0	0	0	0	1
Unknown	Not Stated	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
PASSENGER AGE/GENDER												
5	Female	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**