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			
Lostant	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
WEATHER CONDITION											
Clear	1	0	0	1	2	0	0	0	0	0	2
Sleet/Hail	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
TYPE OF CRASH											
Parked motor vehicle	3	0	0	3	6	0	0	0	0	0	9
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
CLASS OF CITY											
0 TO 2,500	3	0	0	3	6	0	0	0	0	0	9
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
ROAD SURFACE CONDITION											
Ice	2	0	0	2	4	0	0	0	0	0	7
Snow or Slush	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
CLASS OF TRAFFICWAY											
County & Local Roads Rural	3	0	0	3	6	0	0	0	0	0	9
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
DAY OF WEEK											
Thursday	1	0	0	1	2	0	0	0	0	0	2
Saturday	2	0	0	2	4	0	0	0	0	0	7
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
TIME OF DAY											
6 AM	1	0	0	1	2	0	0	0	0	0	2
5 PM	1	0	0	1	2	0	0	0	0	0	6
6 PM	1	0	0	1	2	0	0	0	0	0	1
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
LIGHT CONDITION											
Darkness	1	0	0	1	2	0	0	0	0	0	1
Daylight	1	0	0	1	2	0	0	0	0	0	2
Dusk	1	0	0	1	2	0	0	0	0	0	6
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
ROAD DEFECTS											
No Defects	2	0	0	2	4	0	0	0	0	0	7
Unknown	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Lostant	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
TRAFFIC CONTROL											
No Controls	2	0	0	2	4	0	0	0	0	0	7
Stop Sign/Flasher	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
ROADWAY FEATURE											
Not Applicable	3	0	0	3	6	0	0	0	0	0	9
TOTALS	**3**	**0**	**0**	**3**	**6**	**0**	**0**	**0**	**0**	**0**	**9**

City Summary

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	NUMBER OF CRASHES							INJURY SEVERITY			
Lostant	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
VEHICLE DEFECTS											
Unknown	6	0	0	6	6	0	0	0	0	0	9
TOTALS	**6**	**0**	**0**	**6**	**6**	**0**	**0**	**0**	**0**	**0**	**9**
VEHICLE TYPE											
Passenger	4	0	0	4	4	0	0	0	0	0	8
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	0
TOTALS	**6**	**0**	**0**	**6**	**6**	**0**	**0**	**0**	**0**	**0**	**9**

City Summary

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		NUMBER OF CRASHES							INJURY SEVERITY			
Lostant		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Had Been Drinking		1	0	0	1	1	0	0	0	0	0	1
Normal		2	0	0	2	2	0	0	0	0	0	2
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**
DRIVER AGE/GENDER												
22-24	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
40-44	Male	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**3**	**0**	**0**	**3**	**3**	**0**	**0**	**0**	**0**	**0**	**3**
PASSENGER AGE/GENDER												
7	Female	1	0	0	1	1	0	0	0	0	0	1
9	Female	1	0	0	1	1	0	0	0	0	0	1
10-14	Male	1	0	0	1	1	0	0	0	0	0	1
17	Male	1	0	0	1	1	0	0	0	0	0	1
35-39	Female	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		**6**	**0**	**0**	**6**	**6**	**0**	**0**	**0**	**0**	**0**	**6**