

IL DEPT OF TRANSPORTATION  
 DIVISION OF TRAFFIC SAFETY  
 ACCUMULATED TOTALS

City Summary

Selection Criteria: 1/1/2008 thru 12/31/2008

	NUMBER OF CRASHES							INJURY SEVERITY			
	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
<b>Illiopolis</b>											
<b>WEATHER CONDITION</b>											
Clear	3	0	0	3	6	0	0	0	0	0	4
Rain	1	0	1	0	2	0	1	0	1	0	1
Unknown	1	0	0	1	2	0	0	0	0	0	1
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>TYPE OF CRASH</b>											
Parked motor vehicle	4	0	1	3	8	0	1	0	1	0	4
Turning	1	0	0	1	2	0	0	0	0	0	2
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>CLASS OF CITY</b>											
0 TO 2,500	5	0	1	4	10	0	1	0	1	0	6
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>ROAD SURFACE CONDITION</b>											
Dry	3	0	0	3	6	0	0	0	0	0	4
Snow or Slush	1	0	0	1	2	0	0	0	0	0	1
Wet	1	0	1	0	2	0	1	0	1	0	1
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>CLASS OF TRAFFICWAY</b>											
Unmarked Highway Rural	1	0	0	1	2	0	0	0	0	0	2
County & Local Roads Rural	4	0	1	3	8	0	1	0	1	0	4
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>DAY OF WEEK</b>											
Sunday	1	0	0	1	2	0	0	0	0	0	1
Friday	2	0	0	2	4	0	0	0	0	0	3
Saturday	2	0	1	1	4	0	1	0	1	0	2
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>TIME OF DAY</b>											
2 AM	1	0	0	1	2	0	0	0	0	0	1
7 AM	1	0	0	1	2	0	0	0	0	0	1
8 AM	1	0	0	1	2	0	0	0	0	0	2
9 AM	1	0	0	1	2	0	0	0	0	0	1
11 PM	1	0	1	0	2	0	1	0	1	0	1
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>

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<b>LIGHT CONDITION</b>											
Darkness	1	0	0	1	2	0	0	0	0	0	1
Darkness, Lighted Road	1	0	1	0	2	0	1	0	1	0	1
Daylight	3	0	0	3	6	0	0	0	0	0	4
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>ROAD DEFECTS</b>											
No Defects	5	0	1	4	10	0	1	0	1	0	6
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>TRAFFIC CONTROL</b>											
Lane Use Marking	1	0	0	1	2	0	0	0	0	0	1
No Controls	1	0	0	1	2	0	0	0	0	0	1
Other Regualtory Sign	1	0	1	0	2	0	1	0	1	0	1
Stop Sign/Flasher	2	0	0	2	4	0	0	0	0	0	3
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>ROADWAY FEATURE</b>											
Not Applicable	5	0	1	4	10	0	1	0	1	0	6
<b>TOTALS</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>

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10/16/2009

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	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
<b>Illiopolis</b>											
<b>VEHICLE DEFECTS</b>											
No Defect	6	0	1	5	6	0	1	0	1	0	4
Unknown	4	0	1	3	4	0	0	0	0	0	2
<b>TOTALS</b>	<b>10</b>	<b>0</b>	<b>2</b>	<b>8</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>
<b>VEHICLE TYPE</b>											
Passenger	7	0	1	6	7	0	1	0	1	0	4
Pickup	1	0	1	0	1	0	0	0	0	0	0
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
<b>TOTALS</b>	<b>10</b>	<b>0</b>	<b>2</b>	<b>8</b>	<b>10</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>

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<b>DRIVER CONDITION</b>											
Alcohol Impaired	1	0	1	0	1	0	1	0	1	0	0
Normal	2	0	0	2	2	0	0	0	0	0	2
Other/Unknown	3	0	0	3	3	0	0	0	0	0	3
<b>TOTALS</b>	<b>6</b>	<b>0</b>	<b>1</b>	<b>5</b>	<b>6</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>5</b>
<b>DRIVER AGE/GENDER</b>											
21	Female	1	0	1	0	1	0	1	0	1	0
25-29	Female	1	0	0	1	1	0	0	0	0	1
	Male	1	0	0	1	1	0	0	0	0	1
45-49	Male	1	0	0	1	1	0	0	0	0	1
Unknown	Not Stated	2	0	0	2	2	0	0	0	0	2
<b>TOTALS</b>		<b>6</b>	<b>0</b>	<b>1</b>	<b>5</b>	<b>6</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>5</b>
<b>PASSENGER AGE/GENDER</b>											
25-29	Male	1	0	1	0	1	0	0	0	0	1
<b>TOTALS</b>		<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>