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			
Thomson	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
WEATHER CONDITION											
Clear	2	0	0	2	4	0	0	0	0	0	4
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
TYPE OF CRASH											
Sideswipe same direction	1	0	0	1	2	0	0	0	0	0	2
Angle	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
CLASS OF CITY											
0 TO 2,500	2	0	0	2	4	0	0	0	0	0	4
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
ROAD SURFACE CONDITION											
Dry	2	0	0	2	4	0	0	0	0	0	4
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
CLASS OF TRAFFICWAY											
State Numbered Rural	2	0	0	2	4	0	0	0	0	0	4
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
DAY OF WEEK											
Monday	1	0	0	1	2	0	0	0	0	0	2
Saturday	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
TIME OF DAY											
9 AM	1	0	0	1	2	0	0	0	0	0	2
10 AM	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
LIGHT CONDITION											
Daylight	2	0	0	2	4	0	0	0	0	0	4
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
ROAD DEFECTS											
No Defects	2	0	0	2	4	0	0	0	0	0	4
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**
TRAFFIC CONTROL											
Other Regualtory Sign	1	0	0	1	2	0	0	0	0	0	2
Stop Sign/Flasher	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**

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ROADWAY FEATURE											
Intersctn of 2 Mrked Rts OR Mrked Rt and 8# OR 2 8#'s	1	0	0	1	2	0	0	0	0	0	2
Not Applicable	1	0	0	1	2	0	0	0	0	0	2
TOTALS	**2**	**0**	**0**	**2**	**4**	**0**	**0**	**0**	**0**	**0**	**4**

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	NUMBER OF CRASHES							INJURY SEVERITY			
Thomson	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
Van/Mini-Van	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			
Thomson		TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	B	C	O
DRIVER CONDITION												
Alcohol Impaired		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												
22-24	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
70-74	Male	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**4**	**0**	**0**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**4**