Illinois Department of Transportation
Division of Traffic Safety

City Summary Crash Report

1/1/2014 to 12/31/2014

City : Ludlow | *See Notes at End of Report.

Ludlow	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
WEATHER CONDITION											
Clear	3	0	1	2	5	0	1	0	1	0	6
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**
TYPE OF CRASH											
Angle	1	0	1	0	2	0	1	0	1	0	2
Fixed Object	1	0	0	1	1	0	0	0	0	0	1
Rear End	1	0	0	1	2	0	0	0	0	0	3
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**

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City : Ludlow | *See Notes at End of Report.

Ludlow	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
CLASS OF CITY											
0 TO 2,500	3	0	1	2	5	0	1	0	1	0	6
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**
ROAD SURFACE CONDITION											
Dry	2	0	1	1	4	0	1	0	1	0	5
Snow or Slush	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**

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Division of Traffic Safety

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1/1/2014 to 12/31/2014

City : Ludlow | *See Notes at End of Report.

Ludlow	Total	Number of Crashes Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	Injury Severity A	B	C	O
CLASS OF TRAFFICWAY											
Controlled Rural	1	0	0	1	1	0	0	0	0	0	1
Unmarked Highway Rural	2	0	1	1	4	0	1	0	1	0	5
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**
DAY OF WEEK											
Friday	2	0	1	1	4	0	1	0	1	0	5
Saturday	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**

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Ludlow	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
TIME OF DAY											
Noon	1	0	1	0	2	0	1	0	1	0	2
7 PM	1	0	0	1	2	0	0	0	0	0	3
11 PM	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**

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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
LIGHT CONDITION											
Darkness	2	0	0	2	3	0	0	0	0	0	4
Daylight	1	0	1	0	2	0	1	0	1	0	2
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**
ROAD DEFECTS											
No Defects	3	0	1	2	5	0	1	0	1	0	6
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**

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Ludlow	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
TRAFFIC CONTROL											
Lane Use Marking	2	0	0	2	3	0	0	0	0	0	4
Stop Sign/Flasher	1	0	1	0	2	0	1	0	1	0	2
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**
ROADWAY FEATURE											
Not Applicable	2	0	1	1	4	0	1	0	1	0	5
Underpass	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**3**	**0**	**1**	**2**	**5**	**0**	**1**	**0**	**1**	**0**	**6**

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1/1/2014 to 12/31/2014

City : Ludlow | *See Notes at End of Report.

Ludlow	Number Of Persons							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
DRIVER CONDITION											
Normal	5	0	2	3	5	0	1	0	1	0	4
TOTALS	**5**	**0**	**2**	**3**	**5**	**0**	**1**	**0**	**1**	**0**	**4**

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1/1/2014 to 12/31/2014

City : Ludlow | *See Notes at End of Report.

Ludlow		Number Of Persons							Injury Severity			
		Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
DRIVER AGE/GENDER												
21												
	Male	1	0	0	1	1	0	0	0	0	0	1
22-24												
	Male	1	0	0	1	1	0	0	0	0	0	1
30-34												
	Male	1	0	0	1	1	0	0	0	0	0	1
45-49												
	Female	1	0	1	0	1	0	0	0	0	0	1
60-64												
	Male	1	0	1	0	1	0	1	0	1	0	0
TOTALS		**5**	**0**	**2**	**3**	**5**	**0**	**1**	**0**	**1**	**0**	**4**

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Ludlow		Number Of Persons							Injury Severity			
		Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
PASSENGER AGE/GENDER												
25-29												
	Female	1	0	0	1	1	0	0	0	0	0	1
45-49												
	Male	1	0	1	0	1	0	0	0	0	0	1
TOTALS		**2**	**0**	**1**	**1**	**2**	**0**	**0**	**0**	**0**	**0**	**2**

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City : Ludlow | *See Notes at End of Report.

	Number Of Persons							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
PEDALCYCLIST AGE/GENDER											

	Number Of Vehicles							Injury Severity			
Ludlow	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
VEHICLE DEFECTS											
Brakes	1	0	1	0	1	0	1	0	1	0	0
None	4	0	1	3	4	0	0	0	0	0	6
TOTALS	**5**	**0**	**2**	**3**	**5**	**0**	**1**	**0**	**1**	**0**	**6**
VEHICLE TYPE											
Passenger	3	0	0	3	3	0	0	0	0	0	4
Pickup	1	0	1	0	1	0	0	0	0	0	2
Van/Mini-Van	1	0	1	0	1	0	1	0	1	0	0
TOTALS	**5**	**0**	**2**	**3**	**5**	**0**	**1**	**0**	**1**	**0**	**6**

Notes

Calendar data selections include data based on the date of the crash. Year selections include data based on the Statistical year in which the crash was processed