



City Summary Crash Report

1/1/2017 to 12/31/2017

City : Leaf River | *See Notes at End of Report.

Leaf River	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
WEATHER CONDITION											
Clear	1	0	0	1	1	0	0	0	0	0	1
Cloudy/Overcast	1	0	1	0	1	0	1	0	1	0	0
TOTALS	2	0	1	1	2	0	1	0	1	0	1
TYPE OF CRASH											
Fixed Object	2	0	1	1	2	0	1	0	1	0	1
TOTALS	2	0	1	1	2	0	1	0	1	0	1



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CLASS OF CITY												
0 TO 2,500	2	0	1	1	2	0	1	0	1	0	1	
TOTALS	2	0	1	1	2	0	1	0	1	0	1	
ROAD SURFACE CONDITION												
Dry	2	0	1	1	2	0	1	0	1	0	1	
TOTALS	2	0	1	1	2	0	1	0	1	0	1	



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		Fatal	Injury	Property Damage	Killed		Injured	A	B	C	O	
CLASS OF TRAFFICWAY												
County & Local Roads Rural		1	0	1	0	1	0	1	0	1	0	0
Unmarked Highway Rural		1	0	0	1	1	0	0	0	0	0	1
TOTALS		2	0	1	1	2	0	1	0	1	0	1
DAY OF WEEK												
Sunday		1	0	0	1	1	0	0	0	0	0	1
Wednesday		1	0	1	0	1	0	1	0	1	0	0
TOTALS		2	0	1	1	2	0	1	0	1	0	1



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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
TIME OF DAY											
06 AM	1	0	0	1	1	0	0	0	0	0	1
3 PM	1	0	1	0	1	0	1	0	1	0	0
TOTALS	2	0	1	1	2	0	1	0	1	0	1



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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
LIGHT CONDITION											
Dawn	1	0	0	1	1	0	0	0	0	0	1
Daylight	1	0	1	0	1	0	1	0	1	0	0
TOTALS	2	0	1	1	2	0	1	0	1	0	1
ROAD DEFECTS											
No Defects	1	0	0	1	1	0	0	0	0	0	1
Unknown	1	0	1	0	1	0	1	0	1	0	0
TOTALS	2	0	1	1	2	0	1	0	1	0	1



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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O	
TRAFFIC CONTROL												
No Controls	2	0	1	1	2	0	1	0	1	0	1	
TOTALS	2	0	1	1	2	0	1	0	1	0	1	
ROADWAY FEATURE												
Not Applicable	2	0	1	1	2	0	1	0	1	0	1	
TOTALS	2	0	1	1	2	0	1	0	1	0	1	



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Leaf River	Number Of Persons				Property Damage	Total Vehicles	Total Killed	Total Injured	Injury Severity			
	Total	Fatal	Injury						A	B	C	O
DRIVER CONDITION												
Fatigued	1	0	0		1	1	0	0	0	0	0	1
Normal	1	0	1		0	1	0	1	0	1	0	0
TOTALS	2	0	1		1	2	0	1	0	1	0	1



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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
DRIVER AGE/GENDER											
25-29											
Male	1	0	0	1	1	0	0	0	0	0	1
60-64											
Male	1	0	1	0	1	0	1	0	1	0	0
TOTALS	2	0	1	1	2	0	1	0	1	0	1



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

PEDALCYCLIST AGE/GENDER

Leaf River	Number Of Vehicles				Property Damage	Total Vehicles	Total Killed	Total Injured	Injury Severity			
	Total	Fatal	Injury						A	B	C	O
VEHICLE DEFECTS												
None	2	0	1	1	2	0	1	0	1	0	1	
TOTALS	2	0	1	1	2	0	1	0	1	0	1	
VEHICLE TYPE												
Passenger	1	0	1	0	1	0	1	0	1	0	0	
Pickup	1	0	0	1	1	0	0	0	0	0	1	
TOTALS	2	0	1	1	2	0	1	0	1	0	1	

Notes

DISCLAIMER: The motor vehicle crash data referenced herein was provided by the Illinois Department of Transportation. Any conclusions drawn from analysis of the aforementioned data are the sole responsibility of the data recipient(s). Additionally, for coding years 2015 to present, the Bureau of Data Collection uses the exact latitude/longitude supplied by the investigating law enforcement agency to locate crashes. Therefore, location data may vary in previous years since data prior to 2015 was physically located by bureau personnel.