Illinois Department of Transportation

City Summary Crash Report

1/1/2021 to 12/31/2021

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

Mound City	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
WEATHER CONDITION											
Clear	4	0	2	2	5	0	3	0	2	1	3
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**
TYPE OF CRASH											
Fixed Object	2	0	1	1	2	0	2	0	2	0	1
Overturned	1	0	0	1	1	0	0	0	0	0	1
Parked Motor Vehicle	1	0	1	0	2	0	1	0	0	1	1
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**

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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
CLASS OF CITY											
0 TO 2,500	4	0	2	2	5	0	3	0	2	1	3
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**
ROAD SURFACE CONDITION											
Dry	3	0	1	2	3	0	2	0	2	0	2
Wet	1	0	1	0	2	0	1	0	0	1	1
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**

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Mound City	Total	Number of Crashes Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	Injury Severity A	B	C	O
CLASS OF TRAFFICWAY											
Rural Local Road or Street	2	0	1	1	3	0	1	0	0	1	2
Rural Minor Arterial	2	0	1	1	2	0	2	0	2	0	1
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**
DAY OF WEEK											
Tuesday	1	0	1	0	1	0	2	0	2	0	0
Friday	1	0	0	1	1	0	0	0	0	0	1
Saturday	2	0	1	1	3	0	1	0	0	1	2
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**

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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
TIME OF DAY											
Midnight	1	0	1	0	2	0	1	0	0	1	1
02 AM	1	0	0	1	1	0	0	0	0	0	1
10 AM	1	0	1	0	1	0	2	0	2	0	0
2 PM	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**

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

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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
TRAFFIC CONTROL											
No Controls	3	0	2	1	4	0	3	0	2	1	2
Stop Sign	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**
ROADWAY FEATURE											
Not Applicable	4	0	2	2	5	0	3	0	2	1	3
TOTALS	**4**	**0**	**2**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**

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1/1/2021 to 12/31/2021

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

Mound City	Number Of Persons							Injury Severity			
	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
Had Been Drinking	2	0	2	0	2	0	1	0	1	0	1
Other/Unknown	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**4**	**0**	**2**	**2**	**4**	**0**	**1**	**0**	**1**	**0**	**3**

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Mound City		Number Of Persons							Injury Severity			
		Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
DRIVER AGE/GENDER												
35-39												
	Female	1	0	1	0	1	0	0	0	0	0	1
40-44												
	Female	1	0	0	1	1	0	0	0	0	0	1
	Male	1	0	1	0	1	0	1	0	1	0	0
Unknown												
	Not Stated	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**4**	**0**	**2**	**2**	**4**	**0**	**1**	**0**	**1**	**0**	**3**

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Mound City		Number Of Persons							Injury Severity			
		Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
PASSENGER AGE/GENDER												
30-34												
	Female	1	0	1	0	1	0	1	0	0	1	0
35-39												
	Male	1	0	1	0	1	0	1	0	1	0	0
TOTALS		**2**	**0**	**2**	**0**	**2**	**0**	**2**	**0**	**1**	**1**	**0**

Mound City	Number Of Vehicles							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
VEHICLE DEFECTS											
None	1	0	1	0	1	0	2	0	2	0	0
Unknown	4	0	2	2	4	0	1	0	0	1	3
TOTALS	**5**	**0**	**3**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**
VEHICLE TYPE											
Passenger	5	0	3	2	5	0	3	0	2	1	3
TOTALS	**5**	**0**	**3**	**2**	**5**	**0**	**3**	**0**	**2**	**1**	**3**

Notes

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