TRAFFIC ACCIDENT REPORT	INCIDENT NUMBER	REPORT NUMBER	REPORT TYPE
	16DEC19-39KH-00693-14BMA	190230100693 VERSION 1	INITIAL

PRIVACY ACT STATEMENT

AUTHORITY:5 U.S.C. 301; 10 U.S.C. 5031; 44 U.S.C. 3103 and EO 9397
PRINCIPAL PURPOSE: Used to record information and details of criminal activity which may require investigative action by commanding officers, supervisors, security police, NCIS special agents, etc. Used to provide information to the appropriate individuals within DoD organizations who ensure that proper legal and administrative action is taken.
ROUTINE USES: Information may be disclosed to local, county, state and federal law enforcement or investigatory authorities for investigation and possible criminal prosecution or civil court action. Information extracted from this form may be used in other related criminal and/or civil proceedings.
DISCLOSURE IS VOLUNTARY: SSN is used to positively identify the individual making the statement and as a conduit to check past criminal activity records.

ADMINISTRATIVE

Incident Subject : Collision with Pedcyclist (POV-Pedcyclist)

Date Received	Time Received	Incident Received	Start Date / Time of Incident	End Date / Time of Incident
16-DEC-2019	0616	By Radio	16-DEC-2019 0614	16-DEC-2019 0617

Type of Accident	Number Vehicles Involved	Severity		
Vehicle-Pedicycle	2	0 Number Killed	0 Number Injured	Property Damage

Weather : Rain
Lighting : Dawn

LOCATION

On/Off Base	Road or Street on Which Accident Occurred	City, State/Territory, Zip/Postal Code, Country
On	Mokapu road	MCBH Kaneohe, HI 96863 USA

At the InterSection of Cushman

Kind of Locality : Highway/Road/Alley (includes street)

VEHICLE(S)

Vehicle # 1	Year	Color	Model	Body Style	Make	Owner Name
	2019	Blue	SENTRA	Sedan (2DR/4DR)	NISSAN	(b) (6), (b) (7)(C)

License Plate	DOD Decal	Vehicle Identification Number (VIN)	Ownership Type
Hawaii / TVE391	T7841269	(b) (6), (b) (7)(C)	Private/Personal

Insurance Policy Number	Insurance Company	Insurance Expires On
(b) (6), (b) (7)(C)	USAA	21-MAY-2020

Other Identifying Marks :

Traffic Control/Road Conditions

Driving Lanes : Two Lane
Character : Level, Straight
Surface : Blacktop
Conditions : Wet
Road Defects : No Defects
Traffic Control : Stop Sign

Contributing Circumstances and Driver Actions

Direction Headed : S
Vehicle Defects : None Noted
Lawful Speed : 25
Estimated Speed at Impact :
Estimated Speed when Danger was First Noticed :
Distance Traveled after Impact :
Estimated Distance when Danger was First Noticed :

Vehicle Damage

Severity of Damage : Functional Damage
Areas Damaged : 10 - Left Front Door
Towed By : Released to Driver-1
Towed To : N/A

Vehicle # 2	Year	Color	Model	Body Style	Make	Owner Name
	2013	Black	CROSSTRAIL	Bicycle	SPECIALIZED	(b) (6), (b) (7)(C)

License Plate	DOD Decal	Vehicle Identification Number (VIN)	Ownership Type
/ TEMP_TAG 1430470		(b) (6), (b) (7)(C)	Private/Personal

Insurance Policy Number	Insurance Company	Insurance Expires On

Other Identifying Marks :

Traffic Control/Road Conditions

Driving Lanes : Three Lane	**Character** : Level, Straight
Surface : Blacktop	**Conditions** : Wet
Road Defects : No Defects	**Traffic Control** : No Traffic Signal

Contributing Circumstances and Driver Actions

Direction Headed : W	**Vehicle Defects** :	
Lawful Speed :	**Estimated Speed at Impact** :	**Estimated Speed when Danger was First Noticed** :
Distance Traveled after Impact :	**Estimated Distance when Danger was First Noticed** :	

Vehicle Damage

Severity of Damage :	**Areas Damaged** :
Towed By :	**Towed To** :

DRIVER(S)

DRIVER #1 — Vehicle 1

Name	ID Num	Rank
(b) (6), (b) (7)(C)		

Branch of Service	Personnel Type	Status	Date of Birth	Place of Birth
Marine Corps	CIVILIAN	RETIRED MILITARY	(b) (6), (b) (7)(C)	

Home Telephone	Work Telephone
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)

Address
(b) (6), (b) (7)(C)

Organization	UIC / RUC
RETIRED MILITARY	20361

Drivers License	Limitations on License	Driving Experience
(b) (6), (b) (7)(C) USA	None	17

Seat Belt Use	Seat Occupied	Chemical Test Given	Chemical Test Refused	BAC PCT
Both Used	1	No	No	

Injury Type(s):

Contributing Circumstances and Driver Actions

Citation Number	Driver Actions
	Stopped in Traffic Lane

OCCUPANTS(S)

PEDESTRIAN(S)

PEDESTRIAN #1

Name	ID Num	Rank
(b) (6), (b) (7)(C)		

Branch of Service	Personnel Type	Status	Date of Birth	Place of Birth
Marine Corps	CIVILIAN	RETIRED MILITARY	(b) (7)(C), (b) (6)	

Home Telephone	Work Telephone
(b) (6), (b) (7)(C)	

Pedestrian Was Going	Along/Across/Into
E	MOKAPU

From	To
EAST	WEST

Pedestrian Actions
Crossing, No Signal

COMPLAINANT(S)

OFFENSE(S)

PROPERTY

PROPERTY - NARCOTIC(S)

WITNESS(S)

VICTIMS(S)

SPONSOR(S)

SUSPECT(S) / ARRESTEE(S)

ADDITIONAL POLICE OFFICERS

POLICE OFFICER

Name	ID Num	Rank
(b) (6), (b) (7)(C)		

Branch of Service	Personnel Type	Status	Organization
Marine Corps	MILITARY	Regular (Active)	PMO

NARRATIVE

At 0616, on 16 December 2019, PMO was notified of a Collision with Pedacyclist at intersection of Mokapu road and Cushman Ave, MCBH Kaneohe Bay, HI 96863. This is located in the special maritime and territorial jurisdiction of the United States.

Statements:
(b) (6), (b) (7)(C) Driver-1, provided me with a verbal statement, essentially relating the following; I was driving and had stopped at the stop sign at Mokapu road and Cushman Ave. I didn't notice him (Pedcyclist-1) as I began to go through the intersection which caused me to pull out in front of him and cause him to hit my driver side mirror

(b) (6), (b) (7)(C) Pedcyclist-1, provided me with a verbal statement essentially relating the following; she was stopped at the intersection of Mokapu road and Cushman Ave so I assumed she saw me. I began to move across the intersection in the bike lane as she began moving through the intersection causing me to collide with her driver side mirror

Investigation:
Investigation revealed Driver-1 was traveling south on Cushman Street and failed to yield to Pedcyclist-1 who was travelling eastbound on Mokapu road in the bike lane. As a result Pedcyclist-1 front tire collided with Vehicle-1 left side mirror.

Injury:
Pedcyclist-1 sustained minor abrasions to his left hand and complained of chest pain. ALS arrived on scene, treated and released Pedcyclist-1.

Damage:
Vehicle-1 had damage consisting of, but not limited to, removal of left side mirror.
Pedcyclist-1 had damage consisting of, but not limited to, minor scratches and a bent front tire.

Citations:
Driver-1 was issued a DD- form 1408 (N19360806) for Failure to Yeild to a Pedestrian and (1) United States District Court Violation Notice (6793326) Accident involving bodily injury.

ENCLOSURE(S)

ENCL #	DESCRIPTION
1	Photograph Log (3 Pages)
2	DD Form 1408 (N19360806) Driver-1
3	DD Form 1805 (6793326) Driver -1
4	Sketch Diagram

REPORTING/APPROVING OFFICIALS

Reporting Official	Date	Approving Official	Date
(b) (6), (b) (7)(C) Accident Investigator	14-JAN-2020	(b) (6), (b) (7)(C) Accident Investigations Chief	14-JAN-2020 FINAL APPROVED ON 14-JAN-2020

DISTRIBUTION

Referred To/Assumed By :

Distribution :

Photo-1: Front right profile of Vehicle-1.

Photo-2: Rear left profile of Vehicle-1.

Photo-3: Front right profile of Bike-1.

Photo-4: Rear left profile of Bike-1.

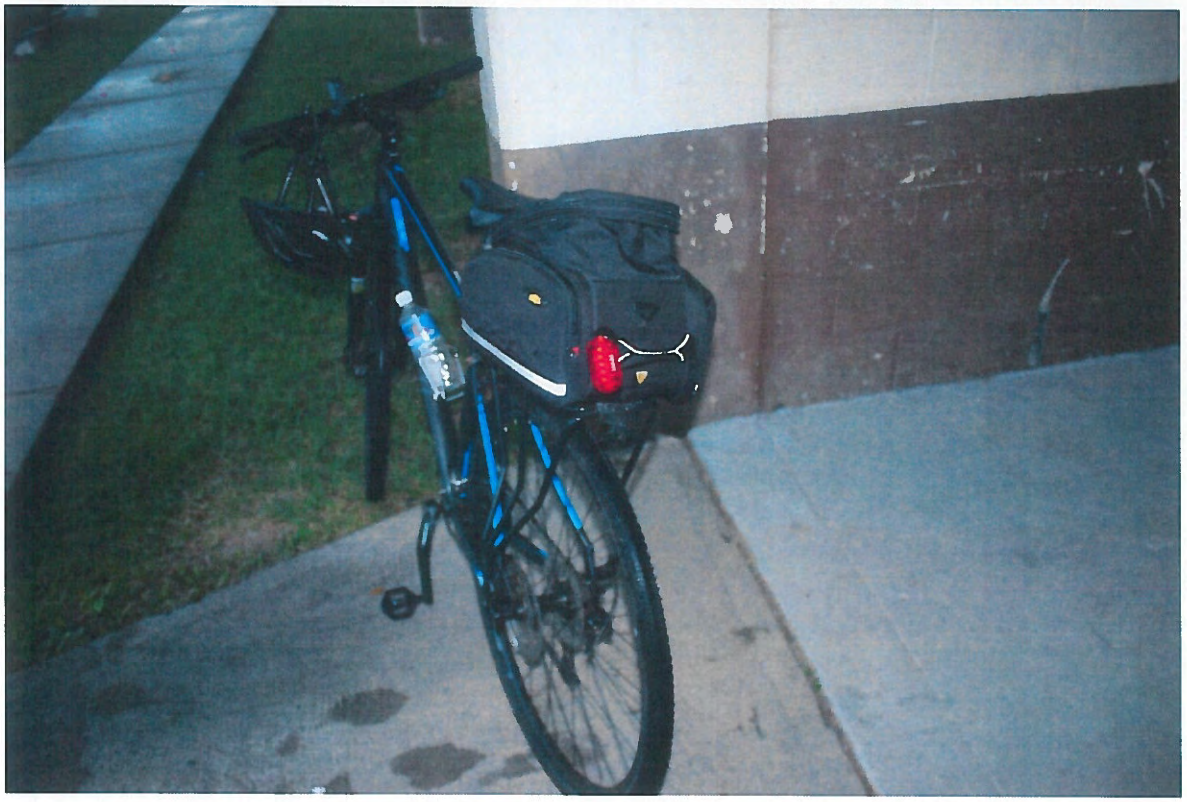


Photo-5: Close up of Vehicle-1, sustained damage consisting of, but not limited to, removal of left side mirror.

Photo-6: Close up of Bike-1, sustained damage consisting of, but not limited to, minor scratches and a bent front tire.

07 JAN 2010

ARMED FORCES TRAFFIC TICKET

☐ WARNING (See Remarks below)

NAME (Last, First, Middle Initial)

The person named below committed traffic violation set forth at the time and location, and on date shown, and was issued this traffic ticket.

1. NAME (Last, First, Middle Initial) (b) (6), (b) (7)(C)

2. RANK / GRADE | 3. DATE OF BIRTH | 4. SOCIAL SECURITY NO. (b) (6), (b) (7)(C)

5. ORGANIZATION OR ADDRESS (b) (6), (b) (7)(C)

6. DRIVER LICENSE NUMBER (b) (6), (b) (7)(C) | 7. ISSUING AUTHORITY (State or Military)

8. MAKE OR TYPE OF VEHICLE 4D NISSAN BLUE SENTRA | 9. STATE LICENSE OR REGIS NO. TVE 391 | 10. INSTL TAG NO. T7841269

11. DATE (Day-month-year) 16 DEC 19 | 12. TIME 0637 | 13. LOCATION MOKAPU/BASE CHAP

14. VIOLATION

X		X	X	X
	SPEED OVER LIMIT (mph in a mph zone)	5 - 10 MPH	11 - 15 MPH	OVER 15 MPH
	IMPROPER LEFT TURN →	NO SIGNAL	CUT CORNER	FROM WRONG LANE
	IMPROPER RIGHT TURN →	NO SIGNAL	INTO WRONG LANE	FROM WRONG LANE
	DISOBEYED TFC SIGNAL (When light turned red) →	PAST MIDDLE INTERSECTION	MIDDLE OF INTERSECTION	HAD NOT REACHED INTERSECTION
	DISOBEYED STOP SIGN →	STOPPED WRONG PLACE	FAILED TO STOP	ROLLED / SPED THROUGH
	IMPROPER PASSING AND LANE USAGE →	AT INTERSECTION	CUT IN	WRONG SIDE OF PAVEMENT
		BETWEEN TFC	ON RIGHT	ON HILL
		LANE STRADDLING	WRONG LANE	ON CURVE
	FOL. TOO CLOSELY	OTHER VIOLATIONS (Describe)		
	FAILURE TO YIELD			

PARKING

	OVERTIME
	PROHIBITED AREA
	DOUBLE PARKING
	OTHER (Describe in Remarks)

CONDITIONS THAT INCREASED SERIOUSNESS OF VIOLATION

		AREA	TRAFFIC ACCIDENT TYPE OF ACCIDENT:
SLIPPERY PAVEMENT	RAIN	BUSINESS	PD / PI
	SNOW	INDUSTRIAL	FATAL
	ICE	RURAL	PEDESTRIAN
DARKNESS	NIGHT	SCHOOL	VEHICLE
	FOG	RESIDENTIAL	HIT FIXED OBJ
	SNOW	HIGHWAY TYPE	RIGHT ANGLE
OTHER TRAFFIC PRESENT	CROSS	2 - LANE	SIDESWIPE
	ONCOMING	3 - LANE	REAR END
	PEDESTRIAN	4 - LANE	INTERSECTION
	SAME DIRECTION	4 - LANE DIVIDED	HEAD ON
CAUSED PERSON TO DODGE	PEDESTRIAN		RAN OFF ROAD
	DRIVER		
	JUST MISSED ACDT		

TICKET NUMBER N19360806

15. REMARKS failure to yield

16. NAME OF PERSON ISSUING TRAFFIC TICKET (b) (6), (b) (7)(C)

17. ORGANIZATION AND INSTALLATION HQBN/PMO/AID | 18. RANK / GRADE (b) (6), (b) (7)(C)

DD Form 1408, DEC 87 — Previous edition is obsolete. — CO of violator or appropriate civil agency — 1

19D23D1D0693

ENCLOSURE (2)

Violation Notice

H30

Violation Number: 5793326 | Officer No. | [redacted]

5793326

YOU ARE CHARGED WITH THE FOLLOWING VIOLATION

Date and Time of Offense (mm/dd/yyyy) | Offense Code/Statute | MVR | Fine | State Code

[redacted]

Place of Offense: MOKAPU RD

Offense Description/Factual Basis for Charge: ACCIDENT INVOLVING BODILY HARM | HAZMAT

DEFENDANT INFORMATION | Phone: [redacted]

Last Name | First Name | MI

[redacted]

Street Address

[redacted]

City | State | Zip Code | Date of Birth (mm/dd/yyyy)

[redacted]

Driver's License No. | CDL | DL State | Social Security No.

[redacted]

Adult | Juvenile | Sex: Male | Female | Hair | Eyes | Height | Weight

VEHICLE | VIN: [redacted] | CMV

Tag No.	State	Year	Make/Model	PASS	Color
JVE391	HI	19	NISSAN		BLUE

A ☐ IF BOX A IS CHECKED, YOU MUST APPEAR IN COURT. see INSTRUCTIONS (on back of yellow copy)

B ☐ IF BOX B IS CHECKED, YOU MUST PAY AMOUNT INDICATED BELOW OR APPEAR IN COURT. see INSTRUCTIONS (on back of yellow copy)

$ Forfeiture Amount

+ $75 Processing Fee

PAY THIS AMOUNT → $ Total Collateral Due

YOUR COURT DATE

(If no court appearance date is shown, you will be notified of your appearance date by mail.)

Court Address: NOTIFIED BY MAIL

Date (mm/dd/yyyy)

Time (hh:mm)

My signature signifies that I have rec[redacted]ssion of guilt. I promise to appear for the hearing [redacted]al due.

[redacted]

X Defendant Signature

(Rev. 09/2015) Officer's Copy (Pink)

(For issuance of an arrest warrant or summons)

I state that on 16 DECEMBER, 2019 while exercising my duties as a law enforcement officer in the KAILUA District of HAWAII

I WAS CALLED TO A MOTOR VEHICLE ACCIDENT INVOLVING A PEDCYCLIST ON MOKAPU ROAD AS A RESULT THE PEDCYCLIST WAS INJURED. BECAUSE THE DRIVER FAILED TO YIELD RIGHT OF WAY

The foregoing statement is based upon:

- ☐ my personal observation
- ✓ my personal investigation
- ☐ information supplied to me from my fellow officer's observation
- ☐ other (explain above)

I declare under penalty of perjury that the information which I have set forth above and on the face of this violation notice is true and correct to the best of my knowledge.

Executed on: 12/16/2019 Date (mm/dd/yyyy) [redacted] Officer Signature ✓

Probable cause has been stated for the issuance of a warrant.

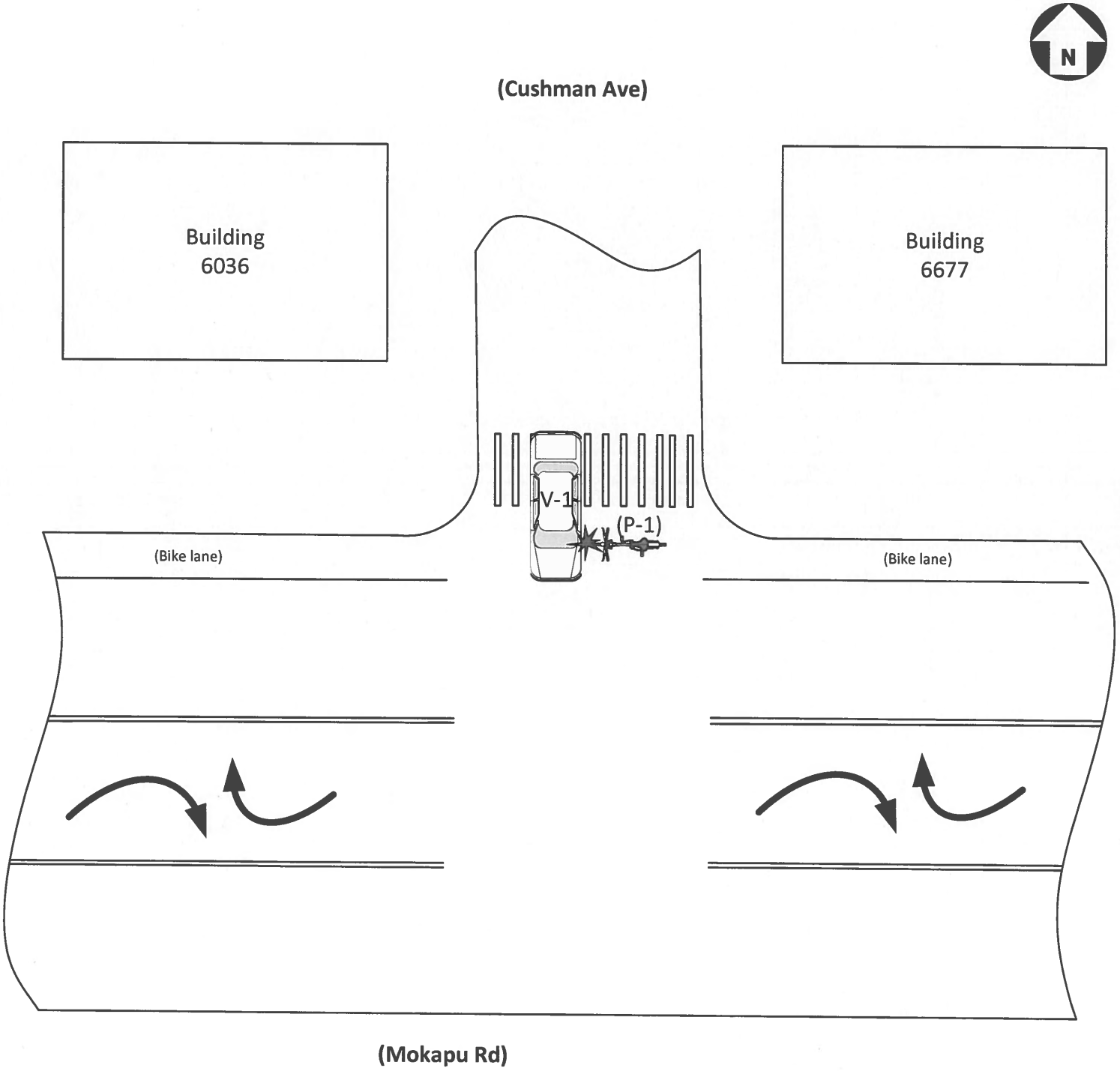
Executed on: _____ Date (mm/dd/yyyy) U.S. Magistrate Judge

HAZMAT = Hazardous material involved in incident; PASS = 9 or more passenger vehicle; CDL = Commercial drivers license; CMV = Commercial vehicle involved in incident

ENCLOSURE (3)

190230100593

PROVOST MARSHALS OFFICE
MCBH KANEOHE BAY, HAWAII 96863

SKETCH DIAGRAM

DATE OF INCIDENT	TIME	LOCATION	Investigator	CASE CONTROL NUMBER
12/16/2019	0616	Intersection of Mokapu Rd and Cushman Ave, MCBH	(b) (6), (b) (7)(C)	190230100693