Illinois Department of Transportation
Division of Traffic Safety

City Summary Crash Report

1/1/2015 to 12/31/2015

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

Blue Mound	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
WEATHER CONDITION											
Clear	6	1	2	3	7	1	3	2	0	1	5
Rain	1	0	1	0	1	0	1	0	0	1	0
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**
TYPE OF CRASH											
Fixed Object	7	1	3	3	8	1	4	2	0	2	5
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**

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Blue Mound	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	7	1	3	3	8	1	4	2	0	2	5
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**
ROAD SURFACE CONDITION											
Dry	5	1	2	2	6	1	3	2	0	1	4
Snow or Slush	1	0	0	1	1	0	0	0	0	0	1
Wet	1	0	1	0	1	0	1	0	0	1	0
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**

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Blue Mound	Total	Number of Crashes Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	Injury Severity A	B	C	O
CLASS OF TRAFFICWAY											
County & Local Roads Rural	2	0	0	2	2	0	0	0	0	0	2
State Numbered Rural	2	1	1	0	2	1	1	0	0	1	1
Unmarked Highway Rural	3	0	2	1	4	0	3	2	0	1	2
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**
DAY OF WEEK											
Monday	2	0	1	1	2	0	1	0	0	1	1
Tuesday	3	1	1	1	4	1	2	2	0	0	2
Thursday	1	0	0	1	1	0	0	0	0	0	1
Saturday	1	0	1	0	1	0	1	0	0	1	1
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**

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Blue Mound	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
TIME OF DAY											
Midnight	1	0	1	0	1	0	1	0	0	1	0
10 AM	1	0	0	1	1	0	0	0	0	0	1
11 AM	1	0	1	0	1	0	1	0	0	1	1
Noon	1	0	1	0	1	0	2	2	0	0	0
2 PM	1	0	0	1	2	0	0	0	0	0	2
7 PM	1	1	0	0	1	1	0	0	0	0	0
8 PM	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**

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Blue Mound	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
LIGHT CONDITION											
Darkness	2	0	1	1	2	0	1	0	0	1	1
Darkness, Lighted Road	1	1	0	0	1	1	0	0	0	0	0
Daylight	4	0	2	2	5	0	3	2	0	1	4
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**
ROAD DEFECTS											
No Defects	7	1	3	3	8	1	4	2	0	2	5
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**

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Blue Mound	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	3	1	2	0	3	1	3	2	0	1	1
No Controls	4	0	1	3	5	0	1	0	0	1	4
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**
ROADWAY FEATURE											
Bridge	2	1	1	0	2	1	1	0	0	1	1
Not Applicable	5	0	2	3	6	0	3	2	0	1	4
TOTALS	**7**	**1**	**3**	**3**	**8**	**1**	**4**	**2**	**0**	**2**	**5**

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City Summary Crash Report

1/1/2015 to 12/31/2015

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

Blue Mound	Number Of Persons							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
DRIVER CONDITION											
Drug Impaired	2	1	1	0	2	1	1	0	0	1	0
Normal	5	0	1	4	5	0	0	0	0	0	5
Removed By EMS	1	0	1	0	1	0	1	1	0	0	0
TOTALS	**8**	**1**	**3**	**4**	**8**	**1**	**2**	**1**	**0**	**1**	**5**

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Blue Mound		Number Of Persons							Injury Severity			
		Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
DRIVER AGE/GENDER												
18												
	Female	1	0	0	1	1	0	0	0	0	0	1
	Male	1	0	1	0	1	0	1	0	0	1	0
20												
	Male	1	0	1	0	1	0	0	0	0	0	1
25-29												
	Female	1	0	0	1	1	0	0	0	0	0	1
30-34												
	Female	1	0	0	1	1	0	0	0	0	0	1
	Male	1	0	1	0	1	0	1	1	0	0	0
35-39												
	Male	1	0	0	1	1	0	0	0	0	0	1
50-54												
	Male	1	1	0	0	1	1	0	0	0	0	0
TOTALS		**8**	**1**	**3**	**4**	**8**	**1**	**2**	**1**	**0**	**1**	**5**

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Blue Mound		Number Of Persons							Injury Severity			
		Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
PASSENGER AGE/GENDER												
19												
	Male	1	0	1	0	1	0	1	0	0	1	0
25-29												
	Male	1	0	1	0	1	0	1	1	0	0	0
TOTALS		**2**	**0**	**2**	**0**	**2**	**0**	**2**	**1**	**0**	**1**	**0**

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City : Blue Mound | *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											

Blue Mound	Number Of Vehicles							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
VEHICLE DEFECTS											
None	6	0	2	4	6	0	3	2	0	1	4
Unknown	2	1	1	0	2	1	1	0	0	1	1
TOTALS	**8**	**1**	**3**	**4**	**8**	**1**	**4**	**2**	**0**	**2**	**5**
VEHICLE TYPE											
Passenger	2	0	0	2	2	0	0	0	0	0	2
Pickup	2	1	0	1	2	1	0	0	0	0	1
SUV	1	0	1	0	1	0	1	0	0	1	0
Truck Single Unit	1	0	1	0	1	0	2	2	0	0	0
Van/Mini-Van	2	0	1	1	2	0	1	0	0	1	2
TOTALS	**8**	**1**	**3**	**4**	**8**	**1**	**4**	**2**	**0**	**2**	**5**

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