Illinois Department of Transportation
Division of Traffic Safety

City Summary Crash Report

1/1/2015 to 12/31/2015

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

Hindsboro	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
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**
TYPE OF CRASH											
Fixed Object	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**

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Hindsboro	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	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**
ROAD SURFACE CONDITION											
Dry	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**

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Hindsboro	Total	Number of Crashes Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	Injury Severity A	B	C	O
CLASS OF TRAFFICWAY											
State Numbered Rural	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**
DAY OF WEEK											
Sunday	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**

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Hindsboro	Number Of Crashes							Injury Severity			
	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
TIME OF DAY											
01 AM	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**

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	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
LIGHT CONDITION											
Darkness	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**
ROAD DEFECTS											
No Defects	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**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	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**
ROADWAY FEATURE											
Bridge	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**

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Hindsboro	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
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**

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		Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
DRIVER AGE/GENDER												
30-34												
	Male	1	0	0	1	1	0	0	0	0	0	1
TOTALS		**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**

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	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			
Hindsboro	Total	Fatal	Injury	Property Damage	Total Vehicles	Total Killed	Total Injured	A	B	C	O
VEHICLE DEFECTS											
None	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**
VEHICLE TYPE											
SUV	1	0	0	1	1	0	0	0	0	0	1
TOTALS	**1**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**1**

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