

R. Work Zone Codes	S. Pedestrian/Non-Motorist Classification Codes																		
<p>Complete this section for accidents in Work Zones Enter code numbers in boxes R1 to R4 on front of Investigator's Accident Report</p>	<p>Complete this section for all injured Non-Motorists in the accident (Pedestrians & Bicyclists)</p>																		
<p>R1 Was the crash in or near a construction maintenance or utility work zone? (Enter one)</p> <ol style="list-style-type: none"> 1. No 2. Unknown 3. Yes (complete sub-fields R2, R3 and R4) 	<p>Enter code numbers in boxes S1 to S6-b on front of Investigator's Accident Report</p>																		
<p>R2 Location of the crash:</p> <ol style="list-style-type: none"> 1. Before the first work zone warning sign 2. Advance warning area (after the first warning sign, but before the work area) 3. Transition area (where lanes are shifted or tapered for lane closure) 4. Activity area (adjacent to actual work area, whether workers and equipment were present or not) 5. Termination area (after the activity area but before traffic resumes normal conditions) 	<p>S1 Non-Motorist location prior to impact (Enter one, in box S1)</p> <table border="0"> <tr> <td>01. Marked crosswalk at intersection</td> <td>10. Sidewalk</td> </tr> <tr> <td>02. At intersection but no crosswalk</td> <td>11. Within 10 feet of roadway (but not shoulder, median, sidewalk, or island)</td> </tr> <tr> <td>03. Non-intersection crosswalk</td> <td>12. Beyond 10 feet of roadway (within trafficway)</td> </tr> <tr> <td>04. Driveway access crosswalk</td> <td>13. Outside trafficway</td> </tr> <tr> <td>05. In roadway</td> <td>14. Shared-use path or trail</td> </tr> <tr> <td>06. Not in roadway</td> <td>15. Unknown</td> </tr> <tr> <td>07. Median (but not on shoulder)</td> <td></td> </tr> <tr> <td>08. Island</td> <td></td> </tr> <tr> <td>09. Shoulder</td> <td></td> </tr> </table>	01. Marked crosswalk at intersection	10. Sidewalk	02. At intersection but no crosswalk	11. Within 10 feet of roadway (but not shoulder, median, sidewalk, or island)	03. Non-intersection crosswalk	12. Beyond 10 feet of roadway (within trafficway)	04. Driveway access crosswalk	13. Outside trafficway	05. In roadway	14. Shared-use path or trail	06. Not in roadway	15. Unknown	07. Median (but not on shoulder)		08. Island		09. Shoulder	
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<p>R3 Type of Work Zone:</p> <ol style="list-style-type: none"> 1. Lane closure 2. Lane shift/crossover 3. Work on shoulder or median 4. Intermittent or moving work 5. Other 	<p>S2 Non-Motorist Action (Enter one, in box S2)</p> <table border="0"> <tr> <td>1. Entering or crossing specified location</td> <td>7. Standing</td> </tr> <tr> <td>2. Walking, running, jogging, playing, cycling</td> <td>8. Other*</td> </tr> <tr> <td>3. Working</td> <td>9. Unknown</td> </tr> <tr> <td>4. Pushing vehicle</td> <td></td> </tr> <tr> <td>5. Approaching or leaving vehicle</td> <td></td> </tr> <tr> <td>6. Playing or working on vehicle</td> <td></td> </tr> </table>	1. Entering or crossing specified location	7. Standing	2. Walking, running, jogging, playing, cycling	8. Other*	3. Working	9. Unknown	4. Pushing vehicle		5. Approaching or leaving vehicle		6. Playing or working on vehicle							
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<p>R4 Workers present?</p> <ol style="list-style-type: none"> 1. Yes 2. No 3. Unknown 	<p>S3 Non-Motorist Condition (Enter one, in box S3)</p> <table border="0"> <tr> <td>1. Apparently normal</td> <td>5. Fell asleep, fainted, fatigued, etc.</td> </tr> <tr> <td>2. Physical impairment</td> <td>6. Under influence of medications/drugs/alcohol</td> </tr> <tr> <td>3. Emotional (depressed, angry, disturbed, etc.)</td> <td>7. Other*</td> </tr> <tr> <td>4. Illness</td> <td>8. Unknown</td> </tr> </table>	1. Apparently normal	5. Fell asleep, fainted, fatigued, etc.	2. Physical impairment	6. Under influence of medications/drugs/alcohol	3. Emotional (depressed, angry, disturbed, etc.)	7. Other*	4. Illness	8. Unknown										
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<p>Work Zone Note: If work zone layout or configuration actually contributed to the cause of the accident, mark item #5 in Contributing Circumstances, Road (Box J on the front of Overlay #1).</p>	<p>S4 Alcohol / Drugs Suspected (Enter one, in box S4) Officer's assessment of whether alcohol or drugs were used.</p> <ol style="list-style-type: none"> 1. Neither alcohol nor drugs suspected 2. Yes - alcohol suspected 3. Yes - drugs suspected 4. Yes - alcohol and drugs suspected 5. Unknown 																		
	<p>S5 Contributing Circumstances, Non-Motorist (Enter up to two, in boxes S5-a and S5-b)</p> <table border="0"> <tr> <td>01. Improper crossing</td> <td>07. Failure to obey traffic signs, signal, officer</td> </tr> <tr> <td>02. Darting</td> <td>08. Wrong side of road</td> </tr> <tr> <td>03. Lying and/or illegally in roadway</td> <td>09. Other*</td> </tr> <tr> <td>04. Failure to yield right of way</td> <td>10. Unknown</td> </tr> <tr> <td>05. Not visible (dark clothing)</td> <td></td> </tr> <tr> <td>06. Inattentive (talking, eating, etc.)</td> <td></td> </tr> </table>	01. Improper crossing	07. Failure to obey traffic signs, signal, officer	02. Darting	08. Wrong side of road	03. Lying and/or illegally in roadway	09. Other*	04. Failure to yield right of way	10. Unknown	05. Not visible (dark clothing)		06. Inattentive (talking, eating, etc.)							
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	<p>S6 Non-Motorist Safety Equipment (Enter up to two, in boxes S6-a and S6-b)</p> <table border="0"> <tr> <td>1. None used</td> <td>5. Lighting</td> </tr> <tr> <td>2. Helmet used</td> <td>6. Not applicable</td> </tr> <tr> <td>3. Protective pads used (elbows, knees, shins, etc.)</td> <td>7. Other*</td> </tr> <tr> <td>4. Reflective clothing</td> <td>8. Unknown</td> </tr> </table>	1. None used	5. Lighting	2. Helmet used	6. Not applicable	3. Protective pads used (elbows, knees, shins, etc.)	7. Other*	4. Reflective clothing	8. Unknown										
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