		Charter Township of Garfield Planning Department Report No. 2021-37	
Prepared:	March 23, 2021	Pages:	2
Meeting:	March 24, 2021 Planning Commission	Attachments:	<input checked="" type="checkbox"/>
Subject:	Burger King – Site Plan Review #2 Addendum		
Applicant:	Jim Riemersma, JSR Construction		
Owner:	Casciano Traverse City, Inc.		
File No.	SPR-2021-01		
Parcel No.	05-014-049-80		

BACKGROUND:

This report is intended as an addendum to Planning Department Report 2021-33 (Burger King – Site Plan Review #2). This report includes additional information brought to light after discussions with the Grand Traverse County Road Commission (GTCRC).

Correspondence from Ron Rohloff at GTCRC indicates that the access drive for Burger King onto South Airport Road was originally approved in the 1970s when South Airport was a two-lane road. Since then, the traffic volumes have greatly increased, and the road has been widened to five lanes. The access drive for Burger King is close to the intersection of South Airport Road and Garfield Avenue, another five-lane road, which has contributed to traffic conflicts.

According to the correspondence from GTCRC, the queue for turning left on northbound Garfield Avenue from eastbound South Airport Road will often backup past the Burger King access. This creates confusion and traffic conflicts between the drivers turning left into Burger King and drivers turning left onto Garfield Avenue, and between the drivers turning left into Burger King and oncoming westbound drivers on South Airport Road. This correspondence has an attachment of three (3) State of Michigan Traffic Crash Reports since 2013 which specifically mention Burger King and this access drive as a factor.

The applicant has shown on their site plan and in their most recent letter that they are willing to limit this access drive to right-in and right-out only turning movements. Considering the information from GTCRC, Staff also cites the site plan review standard from Section 424.F. (1) (g), Vehicle and Pedestrian Systems, which includes the following statement: “A proper relationship between existing and proposed roadways and parking areas shall be demonstrated, and the safety and convenience of pedestrian and vehicular traffic shall be assured.”

Requiring a right-in, right-out only access drive to South Airport Road will help improve pedestrian and vehicular safety by removing a turning movement which has contributed to traffic conflicts. Staff suggests adding language to the proposed motion in support of approval to add a condition requiring that this access drive to be right-in, right-out only, with design of the access drive subject to GTCRC approval.

RECOMMENDATION:

Considering this updated information, Staff offers the following revised motion in support of approval:

MOTION THAT application SPR-2021-01, submitted by Jim Riemersma, JSR Construction on behalf of the owner Casciano Traverse City, Inc., to redevelop a drive-through restaurant on parcel 05-014-049-80, BE APPROVED, subject to the following conditions:

1. The ingress-egress access drive to South Airport Road shall allow for only right-in and right-out turning movements and the design of this access drive shall be subject to the approval of the Grand Traverse County Road Commission.
2. A note shall be added to the site plan that all the lighting and illumination standards of Section 517 will be met.
3. The landscaping provided with the site plan attached to this report is determined to be adequate, and the request for a waiver from the additional landscaping requirements is granted.
4. Queuing of vehicles shall not interfere with the flow of traffic on any roadway, subject to enforcement per Section 730 of the Zoning Ordinance.
5. All agency reviews, including stormwater and utility review by the Township Engineer, shall be received, and deemed compliant prior to issuing a Land Use Permit or Building Permit.

Additional information deemed necessary by the Planning Commission should be added to the motion.

Attachments:

1. Correspondence from Ron Rohloff, Grand Traverse County Road Commission, dated March 23, 2021.
2. Three (3) State of Michigan Traffic Crash Report documents; received March 23, 2021.

Steve Hannon

From: Ron Rohloff <RRohloff@gtcrc.org>
Sent: Tuesday, March 23, 2021 2:21 PM
To: Steve Hannon
Subject: RE: S. Airport / Garfield - Traffic Safety near Burger King
Attachments: CCF_000350.pdf

Steve,

This drive was permitted and installed back in the mid 70's for, at that time, was a Bank. Airport Rd was a two lane road at that time and this access was not the safety issue it is now today. When looking at the UD-10 reports from 2013 to 2019, we have had a multitude of accidents in this general area with at least 3 calling out Burger King drive in the report. Many others have happened from people making a last minute move to access the drive only to cause a crash from a split decision. The crash reporting along here is very extensive but I have attached the sanitized reports that actually name Burger King in them. There are many more but in this area but they do not denote Burger King in them although on many it can be presumed due to the geometrics of the crashes.

The traffic conflict we are concerned about most is the proximity of drive to the signal at Garfield/S. Airport. The E.B. Left turn lane cue often backs up past the burger King Entrance which then causes confusion to the motorist turning North on Garfield Rd as they have the green arrow and the protected right turn lane from Garfield going West on Airport has the clear to turn. When they turn, the motorist waiting to turn into Burger King is on hold for this traffic as the motorist behind him see a clear lane ahead of the turning vehicle and a Green Arrow. This condition causes significant back-ups during peak times. ASHTO and MDOT guidelines would not allow this access if it were proposed today due to its close proximity to the signal. Another negative impact here is the access drive is actually in the taper to the Right-turn lane into the Mall entrance which adds to motorist confusion and assumptions that the traffic is using it for it's intended purpose resulting in possible rear-end crashes.

By having a Right-In and Right Out only, this conflict is somewhat minimized and a better situation than as it stands. As traffic volumes increase and with two drive-thru's here, the likelihood of conflict becomes greater.

From: Steve Hannon <shannon@garfield-twp.com>
Sent: Tuesday, March 23, 2021 12:45 PM
To: Ron Rohloff <RRohloff@gtcrc.org>
Cc: Mike Green <Mgreen@garfield-twp.com>
Subject: S. Airport / Garfield - Traffic Safety near Burger King

Hello Ron,

Thanks for talking with me and Mike. Before I email Jim, please send me any data or information you have that indicates this drive is not safe and that a right-in / right-out drive will improve safety. This information may include crash information, increased traffic volume, changes in road width, or more. If Planning Commission is going to require a right-in / right-out drive, we need data to back that decision. We can have the condition defer to the Road Commission on the specific design of the drive.

Sincerely,

Stephen Hannon, AICP
Deputy Planning Director
Charter Township of Garfield

3848 Veterans Drive
Traverse City, MI 49684
shannon@garfield-twp.com

Authority: 1949 PA 300, Sec.257.622
Compliance: Required MSP UD-10E
Penalty: \$100 and/or 90 days (Rev 11/2006)

External # 0040650
Crash ID 9067172

Page 01 of 01
Incident # 18647-14 File Class 93001

STATE OF MICHIGAN TRAFFIC CRASH REPORT

Incident Disposition
Closed
Reviewer
Charlie Jetter

ORI: MI 2812800		Department Name Grand Traverse Co Sheriff's Office						
Crash Date 10/16/2014	Crash Time 12:30	No. of Units 02	Crash Type Angle	Special Circumstances <input type="radio"/> School Bus <input type="radio"/> None <input type="radio"/> Hit and Run <input type="radio"/> Deer <input type="radio"/> Fleeing Police	Special Checks <input type="radio"/> Fatal <input type="radio"/> Non-Traffic Area <input type="radio"/> ORV/Snowmobile			
County 28 - Grand Traverse	Traffic Control None	Relation to Roadway On Road	Special Study	Weather Cloudy	Area 08 - Intersection Driveway			
City/Twsp 05 - Garfield Twp	Construction Zone (if applicable) Type	Lane Closed	Activity	Light Daylight	Road Condition Dry	Total Lanes 05	Speed Limit 45	Posted Yes

Prefix	Road Name SOUTH.AIRPORT	Road Type RD	Suffix	Divided Roadway
Distance 150 Feet W	Traffic Way 01 - Not physically divided		Access Control 01 - No access control	
Prefix	Intersecting Road GARFIELD	Road Type RD	Suffix	Divided Roadway

Unit Number 01	Unit Known Yes	State MI	Driver License Number #####	Date of Birth (Age) ###/##/#### (81)	License Type <input checked="" type="radio"/> Operator <input type="radio"/> Chauffeur <input type="radio"/> Moped	Endorsements <input type="radio"/> Cycle <input type="radio"/> Farm <input type="radio"/> Recreation	Sex M	Total Occupants 02	Hazardous Action 09 - Improper turn
Unit Type MV	Driver Information ##### TRaverse CITY, MI 49684 (###) ###-####				Injury <input type="radio"/>	Position 01	Restraint 04	Hospital NONE	
Driver Condition <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 09				Interlock No	Ejected	Trapped	Airbag Deployed No	Ambulance NONE	
Alcohol <input type="radio"/> Yes <input checked="" type="radio"/> No Test Type <input type="radio"/> Field <input type="radio"/> PBT <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine				Test Results		Drugs <input type="radio"/> Yes <input checked="" type="radio"/> No Test Type <input type="radio"/> Blood <input type="radio"/> Urine		Citation Issued <input checked="" type="radio"/> Hazardous <input type="radio"/> Other	
Vehicle Registration #####	State MI	Insurance / Policy # #####		Towed To/By DRIVEN			Special Vehicles 0	Private Trailer Type	Vehicle Defect
VIN #####	Vehicle Description CHEVROLET	Make IMPALA	Model GLD	Color 2012	Year 2012	Vehicle Type Passenger Car			
Location of Greatest Damage 08	First Impact 08	Extent of Damage 2	Driveable Yes	Vehicle Direction N	Vehicle Use 01 - Private		Action Prior 02 - Turning left		
Sequence of Events ● 17 - Motor veh in transport				Second	Third	Fourth			

PASSENGERS	Passenger Information	Date of Birth (Age)	Sex	Position	Restraint	Hospital
		Injury	Airbag Deployed	Ejected	Trapped	Ambulance
	Passenger Information	Date of Birth (Age)	Sex	Position	Restraint	Hospital
		Injury	Airbag Deployed	Ejected	Trapped	Ambulance
	Passenger Information	Date of Birth (Age)	Sex	Position	Restraint	Hospital
		Injury	Airbag Deployed	Ejected	Trapped	Ambulance

Carrier Information		Carrier Source	GVWR	ICCMC	USDOT	MPSC
Driver's CDL Type		Endorsements <input type="radio"/> H <input type="radio"/> P <input type="radio"/> T <input type="radio"/> N <input type="radio"/> S <input type="radio"/> X		CDL Exempt <input type="radio"/> Farm <input type="radio"/> Other	CDL Restrictions <input type="radio"/> 28 <input type="radio"/> 29 <input type="radio"/> 30 <input type="radio"/> 35 <input type="radio"/> 36	
Interstate/Intrastate	Vehicle Type	Type & Axle Per Unit First Second Third Fourth	Cargo Body Type	Medical Card	Hazardous Material <input type="radio"/> Placard <input type="radio"/> Cargo Spill	ID # Class #

OWNER'S	Owner Information ##### ##### #####, ## #####-#### (###) ###-####	Owner Information
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Person Advised of Damaged Traffic Control Contact Name: Contact Date: Contact Time:	Damaged Property Owner & Phone	Public
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SANITIZED

Unit Number 02	Unit Known Yes	State MI	Driver License Number #####	Date of Birth (Age) ##### (58)	License Type <input checked="" type="radio"/> Operator <input type="radio"/> Chauffeur <input type="radio"/> Moped	Endorsements <input type="radio"/> Cycle <input type="radio"/> Farm <input type="radio"/> Recreation	Sex F	Total Occupants 02	Hazardous Action 00 - None	
Unit Type MV	Driver Information ##### GRAWN, MI 49637 (###) ###-####			Injury <input type="radio"/>	Position 01	Restraint 04	Hospital NONE			
Driver Condition <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 99				Interlock No	Ejected	Trapped	Airbag Deployed No	Ambulance NONE		
Alcohol <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Refused <input checked="" type="radio"/> Not offered Test Type <input type="radio"/> Field <input type="radio"/> PBT <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine				Test Results		Drugs <input type="radio"/> Yes <input checked="" type="radio"/> No Test Type <input type="radio"/> Blood <input type="radio"/> Urine		Citation Issued <input type="radio"/> Hazardous <input type="radio"/> Other		
Vehicle Registration #####		State MI	Insurance / Policy # #####		Towed To/By DRIVEN			Special Vehicles 0	Private Trailer Type	Vehicle Defect
VIN #####		Vehicle Description CHEVROLET		Make HHR	Model	Color GRY	Year 2007	Vehicle Type Passenger Car		
Location of Greatest Damage 03		First Impact 03	Extent of Damage 3	Driveable Yes	Vehicle Direction E	Vehicle Use 01 - Private		Action Prior 01 - Going Straight Ahead		
Sequence of Events ● 17 - Motor veh in transport (● indicates MOST harmful event)				First	Second	Third	Fourth			

PASSENGERS	Passenger Information	Date of Birth (Age)	Sex	Position	Restraint	Hospital
		Injury	Airbag Deployed	Ejected	Trapped	Ambulance
	Passenger Information	Date of Birth (Age)	Sex	Position	Restraint	Hospital
		Injury	Airbag Deployed	Ejected	Trapped	Ambulance
	Passenger Information	Date of Birth (Age)	Sex	Position	Restraint	Hospital
		Injury	Airbag Deployed	Ejected	Trapped	Ambulance

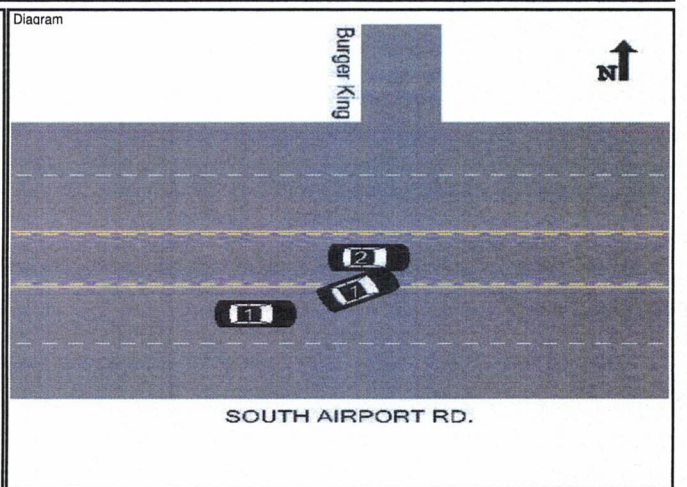
Carrier Information		Carrier Source	GVWR	ICCMC	USDOT	MPSC			
Driver's CDL Type		Endorsements <input type="radio"/> H <input type="radio"/> P <input type="radio"/> T <input type="radio"/> N <input type="radio"/> S <input type="radio"/> X		CDL Exempt <input type="radio"/> Farm <input type="radio"/> Other	CDL Restrictions <input type="radio"/> 28 <input type="radio"/> 29 <input type="radio"/> 30 <input type="radio"/> 35 <input type="radio"/> 36				
Interstate/Intrastate	Vehicle Type	Type & Axle Per Unit First Second Third Fourth			Cargo Body Type	Medical Card	Hazardous Material <input type="radio"/> Placard <input type="radio"/> Cargo Spill	ID #	Class #

OWNERS	Owner Information	Owner Information
	#####	
	#####, ## ####-#### (###) ###-####	

WITNESS	Witness Information	Witness Information

Investigated at Scene Yes	Reported Date (Time) 10/16/2014 (12:37)	1st Investigator Name (Badge) KYLE EGELSKI (947)	2nd Investigator Name (Badge)	Photos By N/A
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Narrative
 UNITS WERE TRAVELLING EBOUND ON S. AIRPORT RD. UNIT 2 WAS IN THE LEFT TURN LANE, AND UNIT 1 WAS ATTEMPTING TO MAKE A LEFT TURN INTO BURGER KING FROM THE EBOUND LANE, AND CRASHED INTO 2. DRIVER OF 2 WAS ISSUED CITATION G124971 (650)



Authority: 1949 PA 300, Sec.257.622
Compliance: Required MSP UD-10E
Penalty: \$100 and/or 90 days (Rev 11/2006)

External # 0040646
Crash ID 9053318

Page 01 of 01
Incident # 17899-14 File Class 93001

STATE OF MICHIGAN TRAFFIC CRASH REPORT

Incident Disposition
Closed

Reviewer
Tom Flitton

ORI: MI 2812800	Department Name Grand Traverse Co Sheriff's Office								
Crash Date 10/02/2014	Crash Time 12:00	No. of Units 02	Crash Type Angle	Special Circumstances <input type="radio"/> School Bus <input type="radio"/> None <input type="radio"/> Hit and Run <input type="radio"/> Deer <input type="radio"/> Fleeing Police <input type="radio"/> ORV/Snowmobile		Special Checks <input type="radio"/> Fatal <input type="radio"/> Non-Traffic Area <input type="radio"/> ORV/Snowmobile			
County 28 - Grand Traverse	Traffic Control None	Relation to Roadway On Road		Special Study	Weather Rain	Area 09 - Intersection related-othr			
City/Twp 05 - Garfield Twp	Construction Zone (if applicable) Type Lane Closed Activity			Light Daylight	Road Condition Wet	Total Lanes 05	Speed Limit 45	Posted Yes	

Prefix	Road Name SOUTH.AIRPORT	Road Type RD	Suffix	Divided Roadway
Distance 150 Feet W	Traffic Way 01 - Not physically divided		Access Control 01 - No access control	
Prefix	Intersecting Road GARFIELD	Road Type RD	Suffix	Divided Roadway

Unit Number 01	Unit Known Yes	State MI	Driver License Number #####	Date of Birth (Age) ##### (75)	License Type <input checked="" type="radio"/> Operator <input type="radio"/> Chauffeur <input type="radio"/> Moped	Endorsements <input type="radio"/> Cycle <input type="radio"/> Farm <input type="radio"/> Recreation	Sex M	Total Occupants 02	Hazardous Action 03 - Failed to yield	
Unit Type MV	Driver Information ##### TRAVERSE CITY, MI 49686 (###) ###-####				Injury O	Position 01	Restraint 04	Hospital NONE		
Driver Condition <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 99					Interlock No	Ejected	Trapped	Airbag Deployed No	Ambulance NONE	
Alcohol <input type="radio"/> Yes <input checked="" type="radio"/> No Test Type <input type="radio"/> Field <input type="radio"/> PBT				Test Results <input checked="" type="radio"/> Not offered <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine		Drugs <input type="radio"/> Yes <input checked="" type="radio"/> No Test Type <input type="radio"/> Blood <input type="radio"/> Urine		Citation Issued <input checked="" type="radio"/> Hazardous <input type="radio"/> Other		
Vehicle Registration #####	State MI	Insurance / Policy # #####			Towed To/By DRIVEN			Special Vehicles 0	Private Trailer Type	Vehicle Defect
VIN #####	Vehicle Description FORD	Make ECONOLINE	Model BLU	Color 1999	Year Passenger Car					
Location of Greatest Damage 04	First Impact 04	Extent of Damage 2	Driveable Yes	Vehicle Direction N	Vehicle Use 01 - Private		Action Prior 02 - Turning left			
Sequence of Events ● indicates MOST harmful event First ● 17 - Motor veh in transport Second Third Fourth										

PASSENGERS	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint	Hospital
	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint	Hospital
	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint	Hospital
	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint	Hospital
	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint	Hospital
	Passenger Information		Date of Birth (Age)	Sex	Position	Restraint	Hospital

Carrier Information			Carrier Source GVWR	ICCMC	USDOT	MPSC			
Interstate/Intrastate			Vehicle Type	Type & Axle Per Unit First Second Third Fourth	Cargo Body Type	Medical Card	Hazardous Material <input type="radio"/> Placard <input type="radio"/> Cargo Spill	ID #	Class #

Owner Information ##### ##### #####, ## ####-#### (###) ###-####	Owner Information
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Person Advised of Damaged Traffic Control Contact Name: Contact Date: Contact Time:	Damaged Property Owner & Phone	Public
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SANITIZED

Unit Number 02	Unit Known Yes	State MI	Driver License Number #####	Date of Birth (Age) ##/##/#### (23)	License Type <input checked="" type="radio"/> Operator <input type="radio"/> Chauffeur <input type="radio"/> Moped	Endorsements <input type="radio"/> Cycle <input type="radio"/> Farm <input type="radio"/> Recreation	Sex M	Total Occupants 01	Hazardous Action 00 - None
Unit Type MV	Driver Information ##### ##### RAPID CITY, MI 49676 (###) ###-####				Injury O	Position 01	Restraint 04	Hospital NONE	
Driver Condition ● 1 02 03 04 05 06 07 08 09 099			Interlock No	Ejected	Trapped	Airbag Deployed Yes	Ambulance NONE		
Alcohol <input type="radio"/> Yes <input checked="" type="radio"/> No Test Type <input type="radio"/> Field <input type="radio"/> Refused <input type="radio"/> PBT <input type="radio"/> Not offered <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine			Test Results		Drugs <input type="radio"/> Yes <input checked="" type="radio"/> No Test Type <input type="radio"/> Blood <input type="radio"/> Urine		Citation Issued <input type="radio"/> Hazardous <input type="radio"/> Other		
Vehicle Registration #####	State MI	Insurance / Policy # #####			Towed To/By BRICKYARD		Special Vehicles 0	Private Trailer Type	Vehicle Defect
VIN #####	Vehicle Description CHEVROLET	Make SONIC	Model WHI	Color 2013	Year 2013	Vehicle Type Passenger Car			
Location of Greatest Damage 02	First Impact 02	Extent of Damage 5	Driveable No	Vehicle Direction W	Vehicle Use 02 - Commercial(business)	Action Prior 01 - Going Straight Ahead			
Sequence of Events ● 17 - Motor veh in transport			First	Second	Third	Fourth			
(● indicates MOST harmful event)									

PASSENGERS	Passenger Information			Date of Birth (Age)	Sex	Position	Restraint	Hospital
	Injury		Airbag Deployed	Ejected	Trapped	Ambulance		
	Passenger Information			Date of Birth (Age)	Sex	Position	Restraint	Hospital
	Injury		Airbag Deployed	Ejected	Trapped	Ambulance		
	Passenger Information			Date of Birth (Age)	Sex	Position	Restraint	Hospital
	Injury		Airbag Deployed	Ejected	Trapped	Ambulance		

Carrier Information			Carrier Source	GVWR	ICCMC	USDOT	MPSC
Driver's CDL Type			Endorsements <input type="radio"/> H <input type="radio"/> P <input type="radio"/> T <input type="radio"/> N <input type="radio"/> S <input type="radio"/> X	CDL Exempt <input type="radio"/> Farm <input type="radio"/> Other	CDL Restrictions <input type="radio"/> 28 <input type="radio"/> 29 <input type="radio"/> 30 <input type="radio"/> 35 <input type="radio"/> 36		
Interstate/Intrastate	Vehicle Type	Type & Axle Per Unit First Second Third Fourth	Cargo Body Type	Medical Card	Hazardous Material <input type="radio"/> Placard <input type="radio"/> Cargo Spill	ID #	Class #

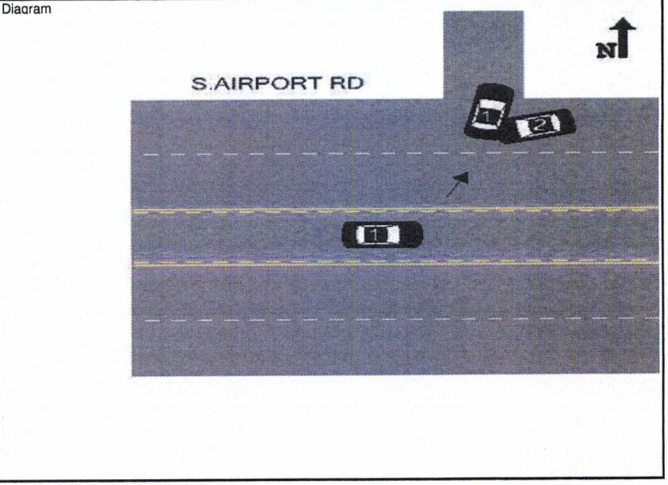
Owner Information ##### ##### #####, ## ####-#### (###) ###-####	Owner Information
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Witness Information	Witness Information
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Investigated at Scene Yes	Reported Date (Time) 10/02/2014 (12:06)	1st Investigator Name (Badge) KYLE EGELSKI (947)	2nd Investigator Name (Badge)	Photos By N/A
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Narrative

DRIVER OF UNIT 1 STATED HE WAS TURNING INTO BURGER KING AND DID NOT SEE UNIT 2 COMING WBOUND ON S. AIRPORT RD. DRIVER 1 ISSUED CITATION G124968 (649)



Unit Number 2 State MI

NCS

Unit Type: MV (checked), B, P, E (train)

City LEWISTON State MI Zip 49756
Driver Condition: 2, 3, 4, 5, 6, 7, 8, 9, 99
Interlock: Yes (checked), No, Refused, Not offered
Alcohol: Yes (checked), No, Test Type: Field, PBT, Breath, Blood, Urine

Drugs: Yes, No, Test Type: Blood, Urine

Vehicle Description: towed to/by N/A, Dodge Pickup 1500, Black, Year 2007

Location of Greatest Damage: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12
First Impact: 02, Extent of Damage: 2, Driveable: Yes (checked), No

Vehicle Type: PA, VA, PU, SY, CY, MO, GC, SM, OR, Other, Truck/Bus
Vehicle Direction: North, South, East, West (checked)

Special Vehicles: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11
Private Trailer Type: 1, 2, 3, 4, 5, 6, 7
Vehicle Defect: 1, 2, 3, 4, 5, 6

Vehicle Use: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11

Injury: K, A, B, C, D, Airbag Deployed: Yes (checked), No, Not Equipped

City, State, Zip

Injury: K, A, B, C, D, Airbag Deployed: Yes (checked), No, Not Equipped

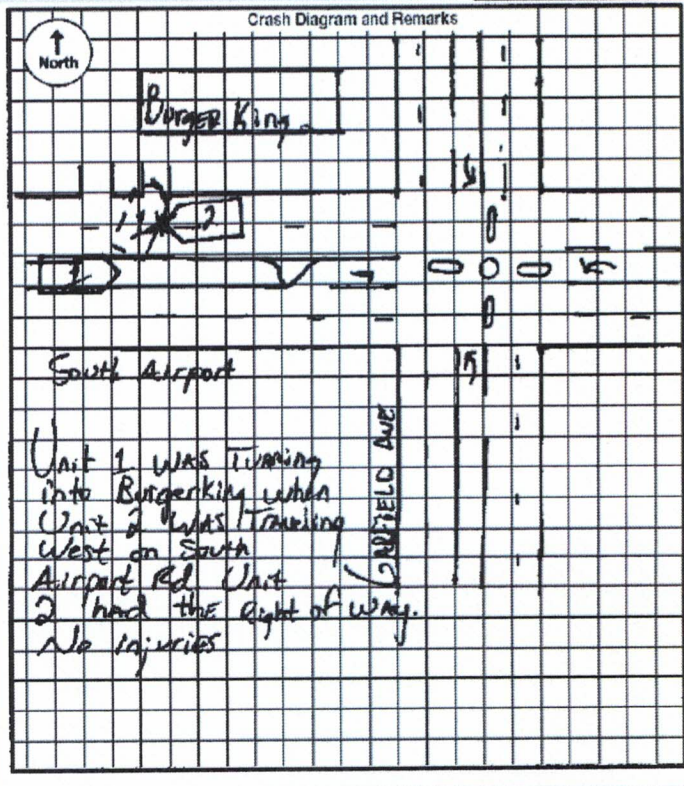
License type: O, C, M, CY, F, R, Sex: M (checked), F
Total Occup: 02, Hazard Action: 00
Injury: K, A, B, C, O, Position: 01, 04, Restraint: Yes (checked), No
Airbag Deployed: Yes (checked), No
Citation issued: Hazardous, Other

Forward Original To: Michigan State Police, Traffic Crash Reporting Section, 7150 Harris Drive, Lansing, MI 48913

Unit Reported on Front table with Action Prior, Sequence of Events, Most Harmful

Unit Reported Above table with Action Prior, Sequence of Events, Most Harmful

Truck/Bus Information section including Carrier Name, Address, City, State, Zip, GVWR/GCWR, Driver's CDL Type, CDL Exempt, Vehicle Type, Medical Card, Hazardous Material



0200027 Investigated at Scene: 12/21/13 15:07 Reported Date/Time: 12/21/13 15:07 Investigator Name(s) & Badge #: Deputy Holliday #934 Photos By: n/a

STATE OF MICHIGAN TRAFFIC CRASH REPORT

ORI: MI-2812800

Department Name Grand Traverse County Sheriff Department

Crash Date Month <u>12</u> Day <u>21</u> Year <u>2013</u>	Crash Time Military <u>1507</u>	No. of Units <u>02</u>	Crash Type <input type="radio"/> Single Motor Vehicle <input type="radio"/> Head On <input type="radio"/> Head On-Left Turn <input checked="" type="radio"/> Angle <input type="radio"/> Rear End <input type="radio"/> Rear End-Left Turn <input type="radio"/> Rear End-Right Turn <input type="radio"/> Sideswipe-Same <input type="radio"/> Sideswipe-Opposite <input type="radio"/> Other/Unknown	Special Circumstances <input type="radio"/> School Bus <input type="radio"/> Hit and Run <input type="radio"/> Fleeing Police <input type="radio"/> None <input type="radio"/> Deer <input type="radio"/> Fleeting Police	Special Checks <input type="radio"/> Fatal (Report All) <input type="radio"/> Corrected Copy <input type="radio"/> Replace (Entire Report) <input type="radio"/> Delete (Entire Report) <input type="radio"/> Non-Traffic Area <input type="radio"/> ORV/Snowmobile
County <u>28</u>	Traffic Control <input checked="" type="radio"/> None of These <input type="radio"/> Signal <input type="radio"/> Stop Sign <input type="radio"/> Yield Sign	Relation to Roadway (Location of First Impact) <input type="radio"/> Shoulder <input type="radio"/> Outside of Shoulder/Curb <input checked="" type="radio"/> On Road <input type="radio"/> Median <input type="radio"/> Goro <input type="radio"/> Other/Unknown	Weather (Mark Only One) <input checked="" type="radio"/> Clear <input type="radio"/> Cloudy <input type="radio"/> Fog/Smoke <input type="radio"/> Rain <input type="radio"/> Snow/Blowing Snow <input type="radio"/> Sleet/Hail <input type="radio"/> Other/Unknown	Light (Mark Only One) <input checked="" type="radio"/> Daylight <input type="radio"/> Dawn <input type="radio"/> Dusk <input type="radio"/> Dark-Lighted <input type="radio"/> Dark-Unlighted <input type="radio"/> Other/Unknown	Area <u>08</u> Total Lanes <u>5</u>
Construction Zone (if applicable) Type <input type="radio"/> Const/Maint. <input type="radio"/> Utility	Lane Closed <input type="radio"/> Yes <input type="radio"/> No	Activity <input type="radio"/> On Road <input type="radio"/> Off Road <input checked="" type="radio"/> None	Road Condition (Mark Only One) <input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Icy <input type="radio"/> Snowy <input type="radio"/> Muddy <input type="radio"/> Slushy <input type="radio"/> Debris <input type="radio"/> Other/Unknown	Speed Limit <u>45</u>	Posted <input type="radio"/> Yes <input type="radio"/> No

Prefix <u>W</u> Road Name <u>South Airport</u>	Divided Roadway <input type="radio"/> N <input type="radio"/> S <input type="radio"/> E <input type="radio"/> W	Road Type <u>Rd</u>	Suffix
Distance <u>120</u> <input type="radio"/> FT <input type="radio"/> MI	<input type="radio"/> North <input type="radio"/> East <input type="radio"/> Beginning of Ramp <input type="radio"/> South <input checked="" type="radio"/> West <input type="radio"/> End of Ramp	Trafficway <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	Access Control <input type="radio"/> 2 <input type="radio"/> 3
Prefix <u>S</u> Intersecting Road <u>GARFIELD</u>	Divided Roadway <input type="radio"/> N <input type="radio"/> S <input type="radio"/> E <input type="radio"/> W	Road Type <u>Ave</u>	Suffix

Unit Number <u>2</u> State <u>MI</u>	License Type <input type="radio"/> O <input type="radio"/> CY <input type="radio"/> M <input type="radio"/> C <input type="radio"/> F <input checked="" type="radio"/> F <input type="radio"/> M <input type="radio"/> R	Sex <input type="radio"/> M <input checked="" type="radio"/> F	Total Occup <u>01</u>	Hazard Action <u>03</u>
Unit Type <input checked="" type="radio"/> MV <input type="radio"/> B <input type="radio"/> P <input type="radio"/> E (train)	Injury <input type="radio"/> K <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> O	Position <u>01</u>	Restraint <u>04</u>	Hospital
Driver Condition <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 99	Interlock <input type="radio"/> Yes <input checked="" type="radio"/> No	Airbag Deployed <input checked="" type="radio"/> Yes <input type="radio"/> No	Citation Issued Hazardous <input checked="" type="radio"/> <u>FTYROW</u> Other <input type="radio"/> <u>*G0124304</u>	Ambulance
Alcohol <input type="radio"/> Yes <input checked="" type="radio"/> No	Test Type <input type="radio"/> Field <input type="radio"/> PBT <input type="radio"/> Breath <input type="radio"/> Blood <input type="radio"/> Urine	Test Results		

Towed To/By <u>WARD Eaton</u>	Vehicle Description <u>Subaru</u> Make <u>Subaru</u> Model <u>401A</u> Color <u>White</u> Year <u>2012</u>
Location of Greatest Damage <input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12	Vehicle Type <input type="radio"/> PA <input type="radio"/> VA <input type="radio"/> PU <input type="radio"/> ST <input type="radio"/> CY <input type="radio"/> MO <input type="radio"/> GC <input type="radio"/> SM <input type="radio"/> OR <input type="radio"/> Other <input type="radio"/> Truck/Bus
First Impact <u>03</u> Extent of Damage <u>4</u> Driveable <input type="radio"/> Yes <input checked="" type="radio"/> No	Vehicle Direction <input checked="" type="radio"/> North <input type="radio"/> South <input type="radio"/> East <input type="radio"/> West

Injury <input type="radio"/> K <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> O	Airbag Deployed <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Equipped	Sex <input type="radio"/> M <input type="radio"/> F	Position	Restraint	Hospital	Ambulance	Ejected <input type="radio"/> Yes <input type="radio"/> No	Trapped <input type="radio"/> Yes <input type="radio"/> No
City		State		Zip				
City		State		Zip				

Age	Pos.	Rest.
Age	Pos.	Rest.

Person Advised of Damaged Traffic Control Date Time Name	Damaged Property	Public <input type="radio"/> Y <input type="radio"/> N
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0200027

Series Override Number

Do Not Write or Mark In This Area