

**DEPARTMENT OF TRANSPORTATION  
STATE OF GEORGIA**

**OFFICE OF DESIGN POLICY & SUPPORT  
INTERDEPARTMENTAL CORRESPONDENCE**

**FILE** P.I. # 0007046 **OFFICE** Design Policy & Support  
CSBRG-0007-00(046)  
Monroe County  
GDOT District 3 - Thomaston **DATE** 4/23/2015  
SR 83 Bridge Replacement @ the  
Towaliga River

**FROM**  for Brent Story, State Design Policy Engineer

**TO** SEE DISTRIBUTION

**SUBJECT** APPROVED CONCEPT REPORT

Attached is the approved Concept Report for the above subject project.

Attachment

**DISTRIBUTION:**

Glenn Bowman, Director of Engineering  
Joe Carpenter, Director of P3/Program Delivery  
Genetha Rice-Singleton, Assistant Director of P3/Program Delivery  
Albert Shelby, State Program Delivery Engineer  
Bobby Hilliard, Program Control Administrator  
Cindy VanDyke, State Transportation Planning Administrator  
Hiral Patel, State Environmental Administrator  
Ben Rabun, State Bridge Engineer  
Andrew Heath, State Traffic Engineer  
Angela Robinson, Financial Management Administrator  
Lisa Myers, State Project Review Engineer  
Charles "Chuck" Hasty, State Materials Engineer  
Mike Bolden, State Utilities Engineer  
Richard Cobb, Statewide Location Bureau Chief  
Andy Casey, State Roadway Design Engineer  
Attn: Jason Mobley, District Design Engineer  
Michael Presley, District Engineer  
Dan Pass, District Preconstruction Engineer  
Kerry Gore, District Utilities Engineer  
Sue Anne Decker, Project Manager  
BOARD MEMBER - 8th Congressional District

**DEPARTMENT OF TRANSPORTATION  
STATE OF GEORGIA  
PROJECT CONCEPT REPORT**

Project Type: Bridge Replacement  
 GDOT District: 3  
 Federal Route Number: N/A

P.I. Number: 0007046  
 County: Monroe  
 State Route Number: 83

**SR 83 bridge replacement at Towaliga River 7 miles north of Forsyth.**

**Submitted for approval:**

C. B. Hawes 2/3/15  
 District Engineer Date

NA

Local Government Sponsor Date  
Albert Shelby 2/15/15

State Program Delivery Engineer Date  
Sue Anne Decker 2.9.15  
 VCESD  
 GDOT Project Manager Date

**Recommendation for approval:**

HIRAL PATEL\*/EKP 2/23/2015  
 State Environmental Administrator Date

ANDREW HEATH\*/EKP 2/20/2015  
 State Traffic Engineer Date

LISA MYERS\*/EKP 2/23/2015  
 Project Review Engineer Date

MUZONDA PRIDE-FOSTER\*/EKP 2/23/2015  
 State Utilities Engineer Date

BEN ROBUN\*/EKP 2/26/2015  
 State Bridge Engineer Date

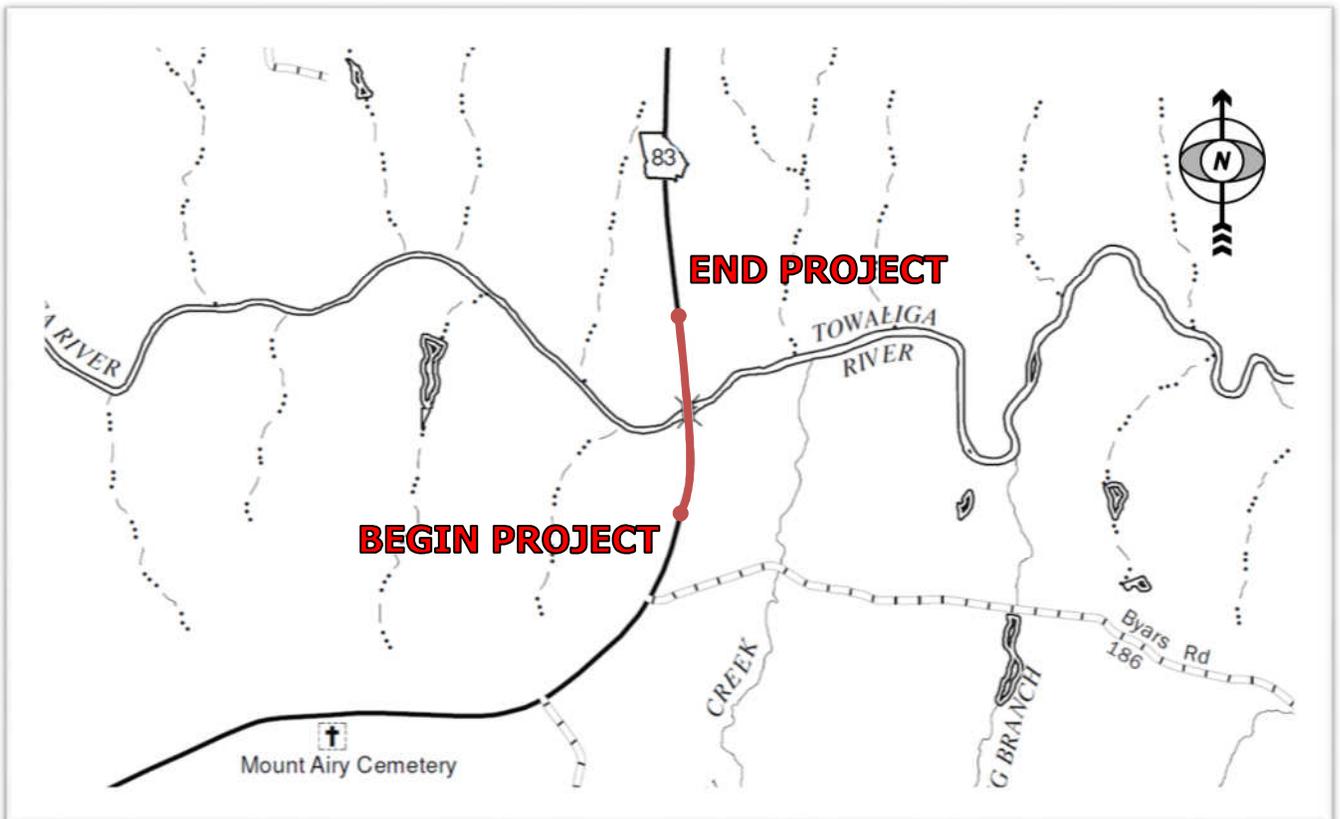
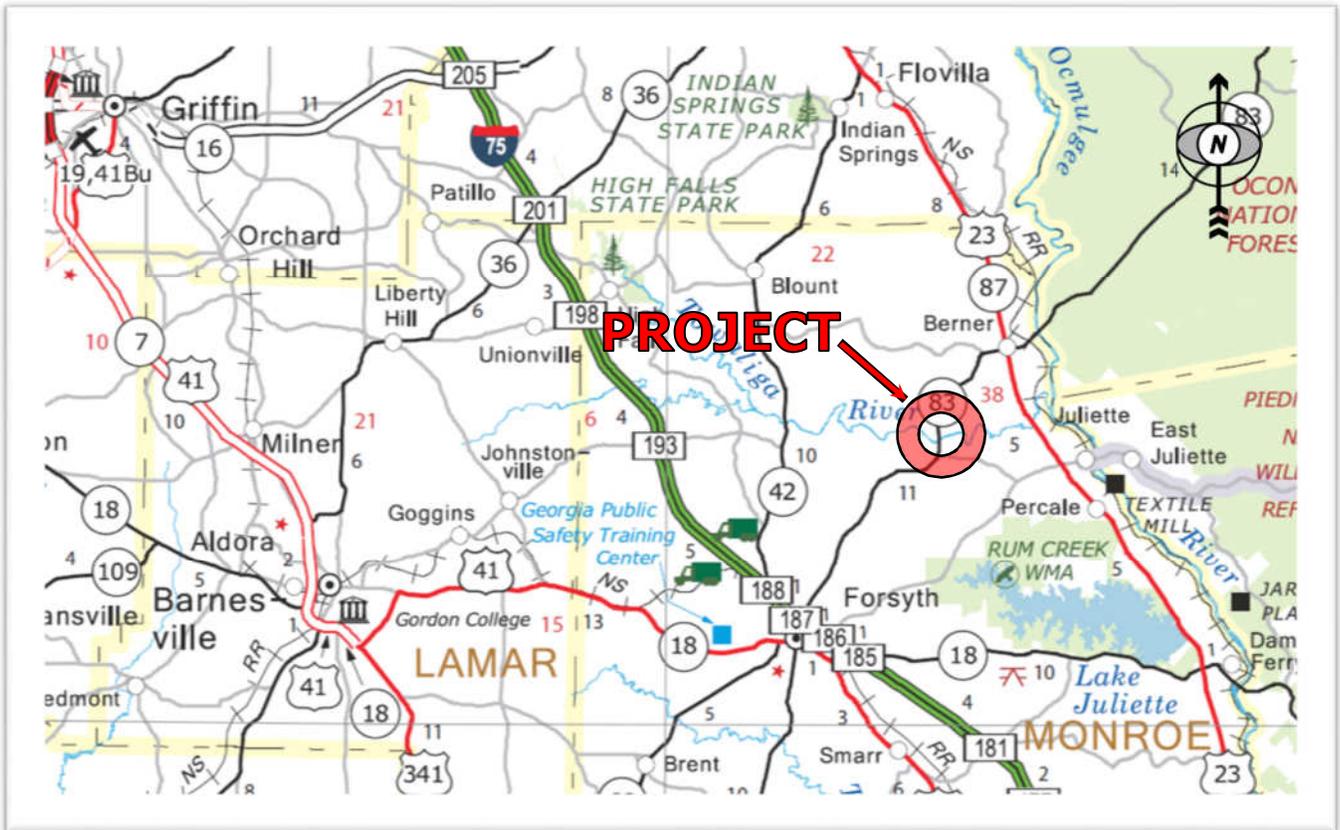
- MPO Area: This project is consistent with the MPO adopted Regional Transportation Plan (RTP)/Long Range Transportation Plan (LRTP).
- Rural Area: This project is consistent with the goals outlined in the Statewide Transportation Plan (SWTP) and/or is included in the State Transportation Improvement Program (STIP).

CINDY VONDUKE\*/EKP 2/27/2015  
 State Transportation Planning Administrator Date

*\* - RECOMMENDATION ON FILE*

County: Monroe

### PROJECT LOCATION MAP



County: Monroe

**PLANNING AND BACKGROUND**

**Project Justification Statement:** This Bridge (Structure ID 207-0024-0; SR 83 over Towaliga River) was built in 1957. The design vehicle used for this bridge is below the current standards. The overall condition of this bridge would be classified as satisfactory to fair. The deck is in satisfactory condition with minor concrete cracking. The superstructure is in satisfactory condition with concrete cracking, and spalling with some exposed reinforcement. The substructure is in fair condition due to moderate concrete cracking and spalls. Due to the inadequate structural integrity of the bridge and the design vehicle being below current standards, replacement is recommended.

Project justification statement provided by:  
 GDOT Bridge Maintenance Unit

**Existing conditions:** The existing roadway contains 12’ lanes and 6’ shoulders with a reinforced concrete bridge crossing Towaliga River. There are no sidewalks and no major intersections within the project limits. There are no major utilities within the project limits, but aerial distribution lines run along the east side of the roadway.

**Other projects in the area:**

Project ID	Description	Location from Project	Notes
M004358	SR 87 from CR 27/Taylor Road Maintenance	4 miles north	Let date 9/20/2013
0011846	CS 686 @ Department of Corrections	8 miles south	Under construction

**MPO:** None

**TIP #:** None

**TIA Regional Commission:** Middle Georgia

**RC Project ID:** N/A

**Congressional District(s):** 008

**Federal Oversight:** Exempt

**Projected Traffic:** ADT

Current Year (2011): 1800

Design Year (2041): 2600

Open Year (2021): 2100

24-Hour Trucks: 23%

Traffic projections prepared by: GDOT Office of Planning

**Functional Classification (Mainline):** Rural Minor Arterial – GDOT designated OSOW truck network

**Complete Streets - Bicycle, Pedestrian, and/or Transit Warrants:**

Warrants met:  None       Bicycle       Pedestrian       Transit

This project does not meet any warrants to provide accommodations for bicyclists, pedestrians, or transit facilities. It is not within close proximity of any school or a bicycle/pedestrian generator, and it is not serviced by fixed route transit. Also, there are no existing bicycle, pedestrian, or transit facilities located on the project. See section 9.4 of the GDOT Design Policy Manual for more details on warrants for accommodation.

County: Monroe

Is this a 3R (Resurfacing, Restoration, & Rehabilitation) Project? No

**Pavement Evaluation and Recommendations:**

- Preliminary Pavement Evaluation Summary Report Required?  No  Yes
- Preliminary Pavement Type Selection Report Required?  No  Yes
- Feasible Pavement Alternatives:  HMA  PCC  HMA & PCC

**DESIGN AND STRUCTURAL**

**Description of the proposed project:** The project extends approximately 0.53 miles along SR 83 and is located 7 miles north of Forsyth. A new permanent bridge will be constructed offset to the east. Traffic will be maintained on the existing bridge during construction.

**Major Structures:**

Structure	Existing	Proposed*
<b>207-0024-0</b> 7 miles north of Forsyth	Reinforced concrete and steel bridge 270' in length – 26' clear width, 12' lanes, with a sufficiency rating of 49.65.	Reinforced concrete and steel bridge 270' length, 40' clear width, 12' lanes, 8' useable shoulder on both sides.

\* No hydraulic study, length assumed from existing structure and cross sectional elements are referenced from GDOT Bridge and Structures Design Manual

**Mainline Design Features: SR 83, Rural Minor Arterial**

Feature	Existing	Standards/ Guidelines <sup>1</sup>	Proposed
<b>Typical Section</b>			
- Number of Lanes	2	N/A	2
- Lane Width(s)	12 ft	11-12 ft	12 ft
- Median Width & Type	N/A	N/A	N/A
- Outside Shoulder or Border Area Width	6 ft useable 2 ft paved	10 ft useable 2-4 ft paved	10 ft useable 2 ft paved <sup>2</sup>
- Outside Shoulder Slope	6%	6%	6%
- Inside Shoulder Width	N/A	N/A	N/A
- Sidewalks	N/A	N/A	N/A
- Auxiliary Lanes	N/A	N/A	N/A
- Bike Lanes	N/A	N/A	N/A
Posted Speed	55 mph	N/A	55 mph
Design Speed	50 mph <sup>3</sup>	50-60 mph	55 mph
Min Horizontal Curve Radius	2291 ft	758-1200 ft	≥ 1060 ft
Maximum Superelevation Rate	6%	6 or 8%	6% <sup>4</sup>
Maximum Grade	3.8%	5%	≤ 5%
Access Control	By Permit	By Permit	By Permit
Design Vehicle	Unknown	WB-67	WB-67
Pavement Type	Asphalt	N/A	Asphalt

<sup>1</sup> According to current GDOT design policy if applicable.

<sup>2</sup> A 2' paved shoulder is a deviation from GDOT criteria. Shoulder width is one of AASHTO's controlling criteria so a design exception will not be needed. The existing corridor utilizes a 2' paved shoulder with no crash history.

<sup>3</sup> Existing Design speed taken from as-built plans dated January 9, 1957.

<sup>4</sup> A maximum superelevation of 6% best matches the existing roadway and will provide the most comfortable transition into the offset alignment.

County: Monroe

Major Interchanges/Intersections: N/A

Lighting required:  No  Yes

Off-site Detours Anticipated:  No  Yes

Transportation Management Plan [TMP] Required:  No  Yes

Project classified as:  Non-significant  Significant

TMP Components Anticipated:  TTC  TO  PI

**Design Exceptions to FHWA/AASHTO controlling criteria anticipated:**

FHWA/AASHTO Controlling Criteria	No	Undetermined	Yes	Appvl Date (if applicable)
1. Design Speed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Lane Width	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Shoulder Width	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Bridge Width	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Horizontal Alignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Superelevation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Vertical Alignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Grade	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Stopping Sight Distance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Cross Slope	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Vertical Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Lateral Offset to Obstruction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Bridge Structural Capacity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Design Variances to GDOT Standard Criteria anticipated:**

GDOT Standard Criteria	Reviewing Office	No	Undetermined	Yes	Appvl Date (if applicable)
1. Access Control/Median Openings	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Intersection Sight Distance	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Intersection Skew Angle	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Lateral Offset to Obstruction	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Rumble Strips	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Safety Edge	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Median Usage	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Roundabout Illumination Levels	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Complete Streets	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. ADA & PROWAG	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. GDOT Construction Standards	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. GDOT Drainage Manual	DP&S	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. GDOT Bridge & Structural Manual	Bridges	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VE Study anticipated:  No  Yes  Completed – Date:

County: Monroe

**UTILITY AND PROPERTY**

Temporary State Route needed:  No  Yes  Undetermined

Railroad Involvement: N/A

Utility Involvements: Central Georgia EMC, Bellsouth, USGS (stream gauge)

SUE Required:  No  Yes  Undetermined

Public Interest Determination Policy and Procedure recommended (Utilities)?  No  Yes

Right-of-Way (ROW): Existing width: 100 ft Proposed width: 170 ft  
Note: Existing and proposed right-of-way varies at bridge.

Required Right-of-Way anticipated:  None  Yes  Undetermined  
Easements anticipated:  None  Temporary  Permanent  Utility  Other

Anticipated total number of impacted parcels:		2
Displacements anticipated:	Businesses:	0
	Residences:	0
	Other:	0
	Total Displacements:	0

Location and Design approval:  Not Required  Required

**CONTEXT SENSITIVE SOLUTIONS**

Issues of Concern: N/A

Context Sensitive Solutions Proposed: N/A

**ENVIRONMENTAL & PERMITS**

Anticipated Environmental Document:

GEPA:  NEPA:  CE  EA/FONSI  EIS

MS4 Permit Compliance – Is the project located in a MS4 area?  No  Yes

Is a PAR required?  No  Yes  Completed – Date: N/A

County: Monroe

**Environmental Permits/Variations/Commitments/Coordination anticipated:**

<b>Permit/ Variance/ Commitment/ Coordination Anticipated</b>	<b>No</b>	<b>Yes</b>	<b>Remarks</b>
1. U.S. Coast Guard Permit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Forest Service/Corps Land	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. CWA Section 404 Permit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Possible
4. Tennessee Valley Authority Permit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Buffer Variance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Possible
6. Coastal Zone Management Coordination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7. NPDES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
8. FEMA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Possible
9. Cemetery Permit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Possible, cemetery in 70' from R/W
10. Other Permits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Other Commitments	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

**Environmental Comments and Information:**

**NEPA/GEPA:** CE is not approved. Approval is anticipated in late 2015 or early 2016.

**Ecology:** The aquatic survey was conducted on October 2, 2014, and ecology waters delineations were completed on October 16, 2014. The Towaliga River is the only state/federal water present and will require a 25-foot buffer offset from the point of wretched vegetation. Several Altamaha shiners (state threatened and petitioned for federal listing) were observed in the immediate vicinity of the bridge. Suitable habitat is also present for the state/federally endangered relict trillium (survey scheduled for spring 2015). There are no biota impaired streams within one mile of the project. The closest biota impaired stream is Hansford Branch which is located approximately 1.4 miles north of the project.

**History:** The historic resource survey fieldwork was completed October 2014. One historic resource was identified: a cemetery. The cemetery is not anticipated to be impacted. The anticipated completion date for the report is June 2015.

**Archeology:** The preliminary archeology field work was completed October 21, 2014 and there are three archaeological resources within the project boundaries. Of the three resources, the cemetery is located furthest south and multiple precautions are being taken to avoid impaction. The other two resources extend beyond the survey area and should not be impacted.

**Air Quality:**

Is the project located in a PM 2.5 Non-attainment area?       No       Yes  
 Is the project located in an Ozone Non-attainment area?       No       Yes  
 Is a Carbon Monoxide hotspot analysis required?       No       Yes

**Noise Effects:** A Type III noise analysis with no modeling required will be prepared for this project.

**Public Meeting:** Because no off-site detour is proposed for this project, no public meeting is anticipated.

**Major stakeholders:** Major stakeholders are the people of Monroe County, property owners, whoever may be connected to the cemetery, and the traveling public.

County: Monroe

**CONSTRUCTION**

Issues potentially affecting constructability/construction schedule: N/A

Early Completion Incentives recommended for consideration:  No  Yes

**COORDINATION, ACTIVITIES, RESPONSIBILITIES, AND COSTS**

**Other coordination to date:** A PTIP meeting was held on February 20, 2013. Several construction methods and existing conditions were discussed. There are limiting conditions on both sides of the bridge. Utilities have prior rights to the east, and a cemetery exists to the west. The minutes are attached for further information.

**Initial Concept Meeting:** N/A

**Concept Meeting:** A concept meeting was held on November 13, 2014. Alternative methods of construction were discussed. The group was largely in favor of a permanent offset bridge. The concept report was revised to reflect this. Several environmental issues were also discussed and the issues they may present. The minutes are attached for further information.

**FAA Coordination:** A private airport exists 3.3 miles away from the project. Due to the nature of the project and low structure height, FAA coordination will not be required.

Project Activity	Party Responsible for Performing Task(s)
Concept Development	GDOT District 3 Design
Design	GDOT District 3 Design
Right-of-Way Acquisition	GDOT District 3 Right of Way
Utility Relocation (Construction)	Utility Owners
Utility Relocation (Pre Let)	GDOT
Letting to Contract	GDOT Bidding Administration
Construction Supervision	GDOT District 3 Construction
Providing Material Pits	Contractor
Providing Detours	N/A
Environmental Studies, Documents, & Permits	HNTB Corporation
Environmental Mitigation	GDOT Office of Environmental Services
Construction Inspection & Materials Testing	GDOT District 3 Construction and Office of Materials

**Project Cost Estimate Summary and Funding Responsibilities:**

	Breakdown of PE	ROW	Reimbursable Utility	CST*	Environmental Mitigation	Total Cost
Funded By	GDOT	GDOT	GDOT	GDOT	GDOT	
\$ Amount	517,531.59	444,000.00	112,987.00	2,544,751.26	50,000.00**	\$3,669,269.85
Date of Estimate	5/6/2009	9/19/2014	11/13/2014	1/7/2015	N/A	

\*CST Cost includes: Construction, Engineering and Inspection, Contingencies and Liquid AC Cost Adjustment.

\*\* Environmental mitigation costs not available at this time, assumed \$50,000.

County: Monroe

**ALTERNATIVES DISCUSSION**

<b>Preferred Alternative:</b> New bridge constructed east of existing bridge			
<b>Estimated Property Impacts:</b>	None	<b>Estimated Total Cost:</b>	<del>\$3,532,009.00</del> <sup>#3,669,770</sup> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">EKO</span>
<b>Estimated ROW Cost:</b>	\$444,000.00	<b>Estimated CST Time:</b>	12 months

**Rationale:** A permanent bridge to the east avoids impacting the cemetery located west of the project. Any new construction has to be offset from the existing alignment which will introduce additional curvature north of the bridge. This curvature will be minimized by utilizing large curves for a smooth transition. A permanent bridge offers substantial savings to construction costs over other alternatives. Additionally, a permanent offset will cause the least amount of disturbance to the river which is home to a federally protected aquatic species.

<b>Alternative 1:</b> Replace existing bridge while maintaining traffic on a temporary bridge			
<b>Estimated Property Impacts:</b>	None	<b>Estimated Total Cost:</b>	\$3,893,133.00
<b>Estimated ROW Cost:</b>	\$444,000.00	<b>Estimated CST Time:</b>	18 months

**Rationale:** A temporary bridge could be constructed on the east or west side of the bridge. The existing curvature of the road suggests that a temporary bridge offset to the east will better accommodate drivers. There are existing utilities to the east and a cemetery to the west. If the bridge were offset to the west, measures would need to be taken to avoid impacting the cemetery. Measures could include a retaining wall, undesirable fore slopes, or a dramatic shift in the alignment which would substantially increase the project termini. A temporary bridge has a longer construction time and a higher cost which makes it less desirable than the preferred alternative.

<b>Alternative 2:</b> Replace existing bridge while maintaining traffic on an off-site detour			
<b>Estimated Property Impacts:</b>	None	<b>Estimated Total Cost:</b>	\$5,764,522.00
<b>Estimated ROW Cost:</b>	\$52,000.00	<b>Estimated CST Time:</b>	12 months

**Rationale:** There are no suitable routes for an off-site detour. The shortest possible detour that could accommodate traffic is 23.2 miles. An off-site detour would add \$2.7 million as a cost to the traveling public. This is substantially higher than any savings offered from utilizing an off-site detour. See the attached roadway user cost analysis for more details.

<b>No-Build Alternative:</b> Leave the existing bridge in place			
<b>Estimated Property Impacts:</b>	N/A	<b>Estimated Total Cost:</b>	N/A
<b>Estimated ROW Cost:</b>	N/A	<b>Estimated CST Time:</b>	N/A

**Rationale:** Due to the inadequate structural integrity of the bridge, a no-build alternative is not recommended.

County: Monroe

**LIST OF ATTACHMENTS/SUPPORTING DATA**

1. Concept Layout
2. Typical Sections
3. Detailed Cost Estimates:
  - a. Construction including Engineering and Inspection and contingencies
  - b. Completed Fuel & Asphalt Price Adjustment forms
  - c. Right-of-Way
  - d. Utilities
4. Traffic Assignments
5. PTIP Minutes
6. Concept Meeting Minutes
7. Bridge Inventory Data Listing
8. Preliminary Pavement Design
9. Concept Utility Report
10. Roadway User Cost Study
11. Crash Summaries

**APPROVALS**

Concur:   
Director of Engineering

Approve:   
Chief Engineer

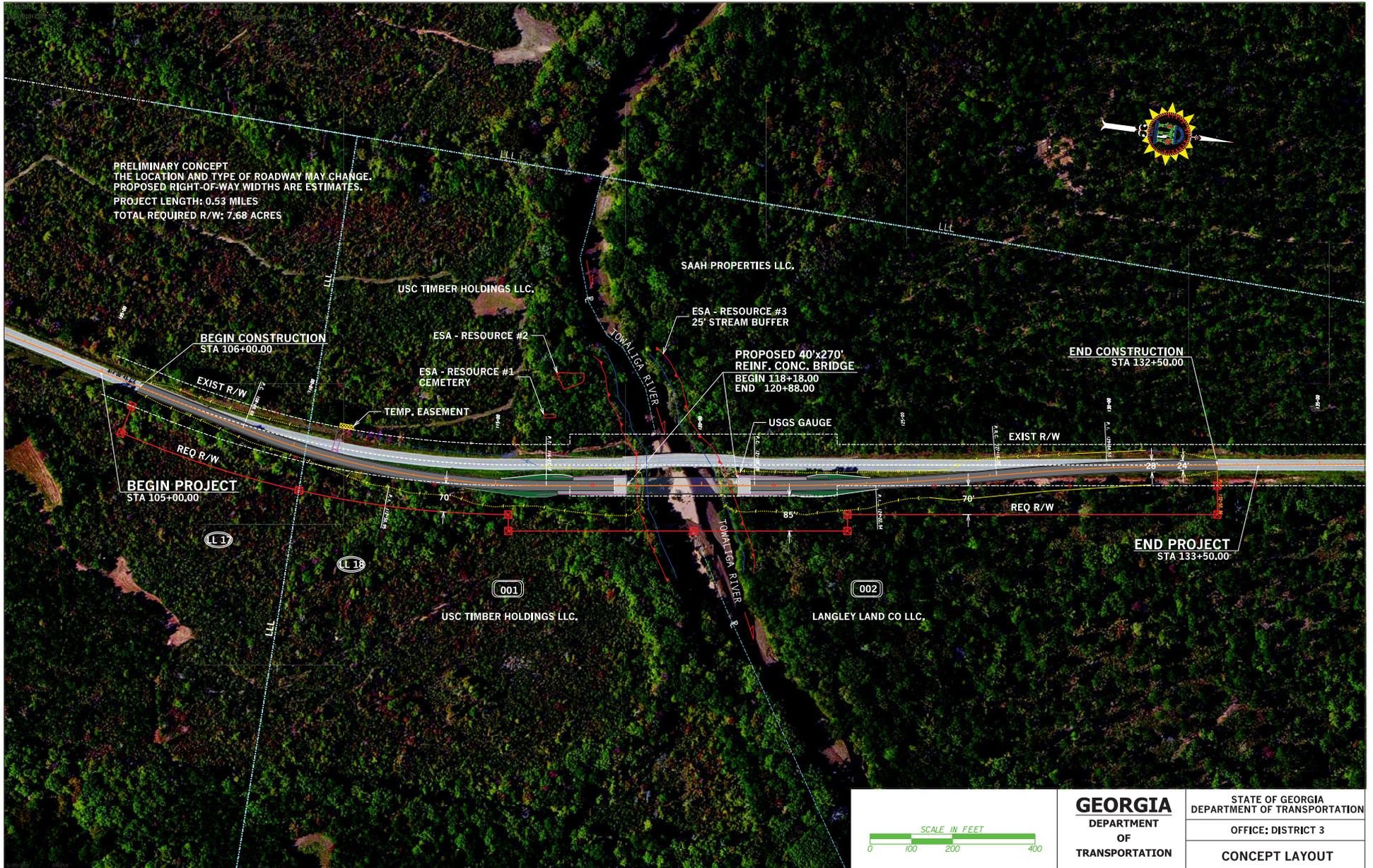
4.20.15  
Date

# ATTACHMENT 1

CONCEPT LAYOUT

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# SR 83 AT TOWALIGA RIVER CONCEPT LAYOUT

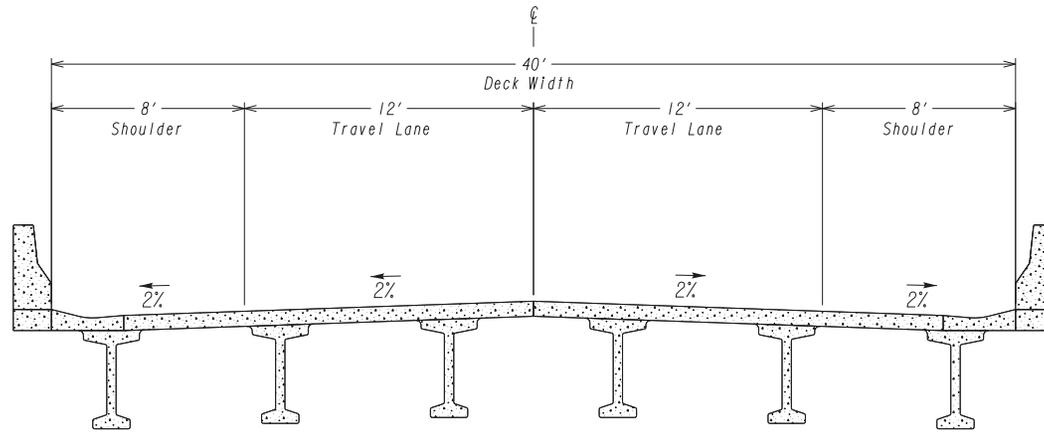


<b>GEORGIA</b> DEPARTMENT OF TRANSPORTATION	STATE OF GEORGIA DEPARTMENT OF TRANSPORTATION
	OFFICE: DISTRICT 3
	CONCEPT LAYOUT

# ATTACHMENT 2

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## TYPICAL SECTIONS



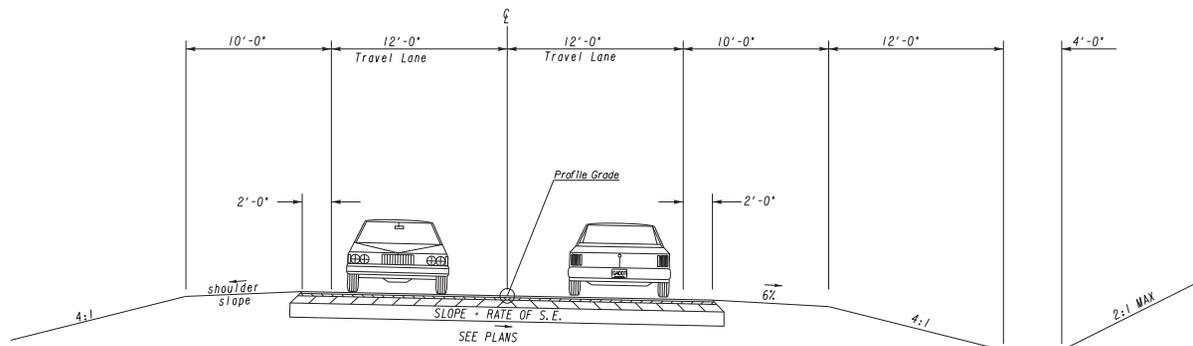
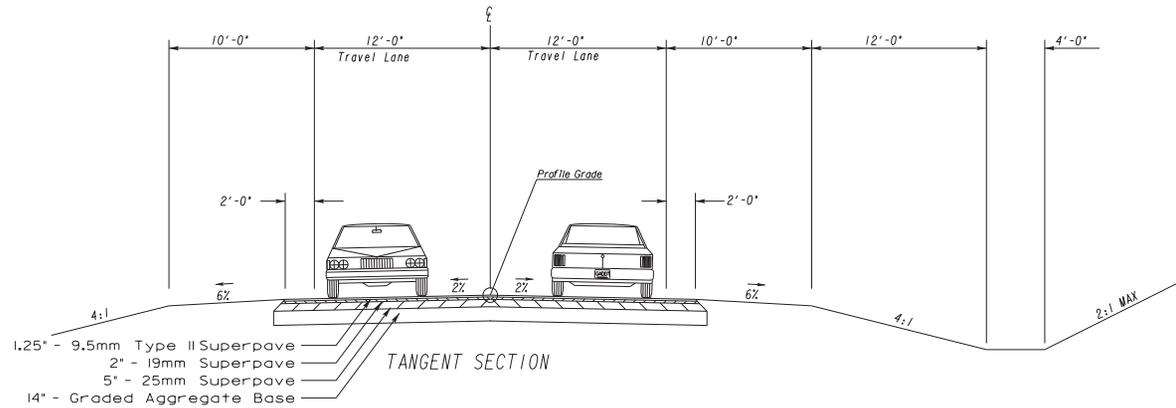
PROPOSED BRIDGE @ TOWALIGA RIVER

**GEORGIA**  
DEPARTMENT  
OF  
TRANSPORTATION

REVISION DATES


STATE OF GEORGIA  
DEPARTMENT OF TRANSPORTATION  
OFFICE: DISTRICT 3  
**TYPICAL SECTIONS**

DRAWING NO.



S. E. RATE	shoulder slope
2.0% OR 3.0%	4.0%
4.0% OR 5.0%	2.0%
6.0% OR 7.0%	1.0%
8.0% +	0.0%

**GEORGIA**  
 DEPARTMENT  
 OF  
 TRANSPORTATION

REVISION DATES

STATE OF GEORGIA  
 DEPARTMENT OF TRANSPORTATION  
 OFFICE: DISTRICT 3  
**TYPICAL SECTIONS**

DRAWING NO.

# ATTACHMENT 3

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## DETAILED COST ESTIMATE

0007046

FED/STATE PROJECT NUMBER:

MONROE SR 83 BRIDGE OVER TOWALIGA RIVER

**0010 - ROADWAY**

ITEM	QUANTITY	UNITS	PRICE	DESCRIPTION	AMOUNT
150-1000	1.000	LS	\$100,000.00000	TRAFFIC CONTROL - CSBRG-0007-00(046)	\$100,000.00
153-1300	1.000	EA	\$75,000.00000	FIELD ENGINEERS OFFICE TP 3	\$75,000.00
210-0100	1.000	LS	\$500,000.00000	GRADING COMPLETE - CSBRG-0007-00(046)	\$500,000.00
211-0300	250.000	CY	\$45.00000	BR EXCAV, STREAM CROSSING	\$11,250.00
310-1101	1600.000	TN	\$21.35291	GR AGGR BASE CRS, INCL MATL	\$34,164.66
318-3000	400.000	TN	\$15.68134	AGGR SURF CRS	\$6,272.54
402-1812	200.000	TN	\$90.00000	RECYL AC LEVELING,INC BM&HL	\$18,000.00
402-3102	200.000	TN	\$85.00000	REC AC 9.5 MM SP,TPII, BL 1 INCL BM & HL	\$17,000.00
402-3121	650.000	TN	\$83.00000	RECYL AC 25MM SP,GP1/2,BM&HL	\$53,950.00
402-3190	400.000	TN	\$80.00000	RECYL AC 19 MM SP,GP 1 OR 2 ,INC BM&HL	\$32,000.00
413-1000	500.000	GL	\$3.00000	BITUM TACK COAT	\$1,500.00
432-5010	600.000	SY	\$10.00000	MILL ASPH CONC PVMT,VARB DEPTH	\$6,000.00
433-1000	267.000	SY	\$165.00000	REINF CONC APPROACH SLAB	\$44,055.00
436-1000	800.000	LF	\$9.00000	ASPH CONC CURB - 5"	\$7,200.00
441-0303	4.000	EA	\$1,800.00000	CONC SPILLWAY, TP 3	\$7,200.00
456-2015	1.000	GLM	\$2,297.20220	INDENT. RUMB. STRIPS - GRND-IN-PL (SKIP)	\$2,297.20
500-3200	30.000	CY	\$151.56358	CL B CONC	\$4,546.91
550-2180	100.000	LF	\$28.73381	SIDE DR PIPE 18",H 1-10	\$2,873.38
550-3418	2.000	EA	\$391.09082	SAFETY END SECTION 18",SD,4:1	\$782.18
550-3618	2.000	EA	\$444.57628	SAFETY END SECTION 18",SD,6:1	\$889.15
634-1200	20.000	EA	\$110.12495	RIGHT OF WAY MARKERS	\$2,202.50
641-1100	84.000	LF	\$65.94188	GUARDRAIL, TP T	\$5,539.12
641-1200	600.000	LF	\$17.44861	GUARDRAIL, TP W	\$10,469.17
641-5001	2.000	EA	\$668.92616	GUARDRAIL ANCHORAGE, TP 1	\$1,337.85
641-5012	2.000	EA	\$1,845.87278	GUARDRAIL ANCHORAGE, TP 12	\$3,691.75
643-0010	500.000	LF	\$5.82596	FIELD FENCE WOVEN WIRE	\$2,912.98
643-8200	1000.000	LF	\$2.02413	BARRIER FENCE (ORANGE), 4 FT	\$2,024.13
<b>SUBTOTAL FOR ROADWAY:</b>					<b>\$953,158.52</b>

**0020 - STRUCTURAL**

ITEM	QUANTITY	UNITS	PRICE	DESCRIPTION	AMOUNT
500-0100	267.000	SY	\$9.80132	GROOVED CONCRETE	\$2,616.95
540-1101	1.000	LS	\$200,000.00000	REM OF EX BR, STA NO - CSBRG-0007-00(046)	\$200,000.00
543-9000	1.000	LS	\$1,020,000.00000	CONSTR OF BRIDGE COMPLETE - CSBRG-0007-00(046)	\$1,020,000.00
<b>SUBTOTAL FOR STRUCTURAL:</b>					<b>\$1,222,616.95</b>

**0040 - SIGNING & MARKING**

ITEM	QUANTITY	UNITS	PRICE	DESCRIPTION	AMOUNT
636-1033	40.000	SF	\$19.90292	HWY SIGNS, TP1MAT,REFL SH TP 9	\$796.12
636-2070	60.000	LF	\$9.49166	GALV STEEL POSTS, TP 7	\$569.50
636-5010	12.000	EA	\$38.78094	DELINEATOR, TP 1	\$465.37
652-5451	2000.000	LF	\$0.27251	SOLID TRAF STRIPE, 5 IN, WHITE	\$545.02
652-5452	2000.000	LF	\$0.27115	SOLID TRAF STRIPE, 5 IN, YELLO	\$542.30
654-1001	60.000	EA	\$4.23034	RAISED PVMT MARKERS TP 1	\$253.82
657-1085	500.000	LF	\$5.50536	PRF PL SD PVT MKG,8",B/W,TP PB	\$2,752.68
657-6085	500.000	LF	\$6.23681	PRF PL SD PVMT MKG,8",B/Y,TPPB	\$3,118.41
<b>SUBTOTAL FOR SIGNING &amp; MARKING:</b>					<b>\$9,043.22</b>

**0080 - EROSION CONTROL**

ITEM	QUANTITY	UNITS	PRICE	DESCRIPTION	AMOUNT
163-0232	2.000	AC	\$600.00000	TEMPORARY GRASSING	\$1,200.00
163-0240	75.000	TN	\$225.00000	MULCH	\$16,875.00
163-0300	2.000	EA	\$1,200.00000	CONSTRUCTION EXIT	\$2,400.00
163-0520	250.000	LF	\$15.00000	CONSTR AND REMOVE TEMP PIPE SLOPE DRAIN	\$3,750.00
163-0527	24.000	EA	\$250.00000	CNST/REM RIP RAP CKDM,STN P RIPRAP/SN BG	\$6,000.00
163-0528	24.000	LF	\$4.02046	CONSTR AND REM FAB CK DAM -TP C SLT FN	\$96.49
163-0528	500.000	LF	\$3.47846	CONSTR AND REM FAB CK DAM -TP C SLT FN	\$1,739.23
163-0529	1100.000	LF	\$3.73811	CNST/REM TEMP SED BAR OR BLD STRW CK DM	\$4,111.92
163-0539	4.000	EA	\$1,300.00000	CONST AND REM RETROFIT-SL BD DM/W STN FL	\$5,200.00
163-0541	4.000	EA	\$279.01161	CONSTR & REM ROCK FILTER DAMS	\$1,116.05
165-0010	550.000	LF	\$0.75000	MAINT OF TEMP SILT FENCE, TP A	\$412.50
165-0041	1340.000	LF	\$2.50000	MAINT OF CHECK DAMS - ALL TYPES	\$3,350.00
165-0071	550.000	LF	\$1.00000	MAINT OF SEDIMENT BARRIER - BALED STRAW	\$550.00
165-0096	4.000	EA	\$1,300.00000	MAINT OF RETROFIT-SLOT BD DAM/W ST FLT	\$5,200.00
165-0101	2.000	EA	\$700.00000	MAINT OF CONST EXIT	\$1,400.00
165-0110	4.000	EA	\$153.56143	MAINT OF ROCK FILTER DAM	\$614.25
167-1000	2.000	EA	\$500.00000	WATER QUALITY MONITORING AND SAMPLING	\$1,000.00
167-1500	12.000	MO	\$500.00000	WATER QUALITY INSPECTIONS	\$6,000.00
171-0010	1100.000	LF	\$1.54653	TEMPORARY SILT FENCE, TYPE A	\$1,701.18
171-0030	2200.000	LF	\$3.19480	TEMPORARY SILT FENCE, TYPE C	\$7,028.56
603-2182	500.000	SY	\$41.14444	STN DUMPED RIP RAP, TP 3, 24"	\$20,572.22
603-7000	500.000	SY	\$3.66216	PLASTIC FILTER FABRIC	\$1,831.08
700-6910	4.000	AC	\$1,000.00000	PERMANENT GRASSING	\$4,000.00
700-7000	8.000	TN	\$63.64051	AGRICULTURAL LIME	\$509.12
700-8000	3.000	TN	\$499.42998	FERTILIZER MIXED GRADE	\$1,498.29
700-8100	150.000	LB	\$2.62433	FERTILIZER NITROGEN CONTENT	\$393.65
711-0100	2000.000	SY	\$3.50000	TURF REINFORCING MATTING, TP 1	\$7,000.00
716-2000	2000.000	SY	\$1.24000	EROSION CONTROL MATS, SLOPES	\$2,480.00
<b>SUBTOTAL FOR EROSION CONTROL:</b>					<b>\$108,029.54</b>

**TOTALS FOR JOB 0007046**

<b>ITEMS COST:</b>	<b>\$2,292,848.23</b>
<b>CONTINGENCY PERCENT:</b>	<b>\$114,642.41</b>
<b>ENGINEERING AND INSPECTION:</b>	<b>\$114,642.41</b>
<b>ESTIMATED COST:</b>	<b>\$2,522,133.05</b>
<b>FUEL CONTINGENCY</b>	<b>\$22,618.21</b>
<b>ESTIMATED COST WITH CONTINGENCY AND E&amp;I:</b>	<b>\$2,544,751.26</b>

PROJ. NO.

CSBRG-0007-00(046)

CALL NO.

P.I. NO.

0007046

DATE

3/20/2015

INDEX (TYPE)

REG. UNLEADED

DATE	INDEX
Mar-15	\$ 2.291

DIESEL

\$ 2.848

LIQUID AC

\$ 505.00

Link to Fuel and AC Index:

<http://www.dot.ga.gov/doingbusiness/Materials/Pages/asphaltcementindex.aspx>

LIQUID AC ADJUSTMENTS

PA=[((APM-APL)/APL)]xTMTxAPL

Asphalt

Price Adjustment (PA)

21967.5

\$

21,967.50

Monthly Asphalt Cement Price month placed (APM)

Max. Cap

60%

\$ 808.00

Monthly Asphalt Cement Price month project let (APL)

\$ 505.00

Total Monthly Tonnage of asphalt cement (TMT)

72.5

ASPHALT	Tons	%AC	AC ton
Leveling	200	5.0%	10
12.5 OGFC		5.0%	0
12.5 mm		5.0%	0
9.5 mm SP	200	5.0%	10
25 mm SP	650	5.0%	32.5
19 mm SP	400	5.0%	20
	<b>1450</b>		<b>72.5</b>

BITUMINOUS TACK COAT

Price Adjustment (PA)

\$ 650.71

\$

650.71

Monthly Asphalt Cement Price month placed (APM)

Max. Cap

60%

\$ 808.00

Monthly Asphalt Cement Price month project let (APL)

\$ 505.00

Total Monthly Tonnage of asphalt cement (TMT)

2.147550461

Bitum Tack

Gals	gals/ton	tons
500	232.8234	2.14755046

PROJ. NO.

CSBRG-0007-00(046)

CALL NO.

P.I. NO.

0007046

DATE

3/20/2015

**BITUMINOUS TACK COAT (surface treatment)**

Price Adjustment (PA)						<b>0</b>	\$	-
Monthly Asphalt Cement Price month placed (APM)		Max. Cap	60%	\$	808.00			
Monthly Asphalt Cement Price month project let (APL)				\$	505.00			
Total Monthly Tonnage of asphalt cement (TMT)					0			

Bitum Tack	SY	Gals/SY	Gals	gals/ton	tons
Single Surf. Trmt.		0.20	0	232.8234	0
Double Surf.Trmt.		0.44	0	232.8234	0
Triple Surf. Trmt		0.71	0	232.8234	0
					0

<b>TOTAL LIQUID AC ADJUSTMENT</b>							\$	<b>22,618.21</b>
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GEORGIA DEPARTMENT OF TRANSPORTATION  
PRELIMINARY ROW COST ESTIMATE SUMMARY

Date: 9/19/2014 Project: 0007046  
 Revised: County: Monroe  
 PI: 0007046

Description: SR 83 at Towaliga River  
 Project Termini: SR 83 at Towaliga River

Existing ROW: Varies  
 Required ROW: Varies  
 Parcels: 6

Land and Improvements \_\_\_\_\_ \$275,400.00

Proximity Damage	\$0.00
Consequential Damage	\$0.00
Cost to Cures	\$0.00
Trade Fixtures	\$0.00
Improvements	\$30,000.00

Valuation Services \_\_\_\_\_ \$22,500.00

Legal Services \_\_\_\_\_ \$41,550.00

Relocation \_\_\_\_\_ \$52,000.00

Demolition \_\_\_\_\_ \$0.00

Administrative \_\_\_\_\_ \$52,000.00

TOTAL ESTIMATED COSTS \_\_\_\_\_ \$443,450.00

**TOTAL ESTIMATED COSTS (ROUNDED) \_\_\_\_\_ \$444,000.00**

Preparation Credits	Hours	Signature

Prepared By: Dashone Alexander CG#: 286999 09/19/2014 (DATE)

Approved By: Dashone Alexander CG#: 286999 09/19/2014 (DATE)

**NOTE: No Market Appreciation is included in this Preliminary Cost Estimate**

# DEPARTMENT OF TRANSPORTATION STATE OF GEORGIA

## INTERDEPARTMENT CORRESPONDENCE

FILE **CSBRG-0007-00(046), Monroe County, P.I. # 0007046** OFFICE Thomaston  
*SR 83 @ Towaliga River*

FROM Kerry Gore, District Utilities Engineer DATE November 13, 2014

TO Sue Anne Decker, Project Manager

SUBJECT **PRELIMINARY UTILITY COST (ESTIMATE)**

As requested by your office, we are furnishing you with a Preliminary Utility Cost estimate for each utility with facilities potentially located within the project limits.

<u>FACILITY OWNER</u>	<u>NON-REIMBURSABLE</u>	<u>REIMBURSABLE</u>
BellSouth d/b/a AT&T Georgia		19,250
Central Georgia EMC		93,737
U.S. Geological Survey	6,000	
<b>TOTALS</b>	<b>\$ 6,000</b>	<b>\$ 112,987</b>

Total Preliminary Utility Cost Estimate **118,987**.

If you have any questions, please contact Tyler Peek at 706-646-7605.

KG/TP

cc: Mike Bolden, State Utilities Engineer (*via: e-mail*)  
Angela Robinson, Office of Financial Management (*via: e-mail*)  
Kraig Collins, Area Engineer (*via: e-mail*)

# ATTACHMENT 4

## TRAFFIC ASSIGNMENTS

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# NO-BUILD = BUILD

## Department of Transportation

### State of Georgia

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#### INTERDEPARTMENT CORRESPONDENCE

**FILE** CSBRG-0007-00(046), Monroe County                      **OFFICE** Planning  
P.I. # 0007046  
**DATE** January 8, 2013

**FROM** Cynthia L. VanDyke, State Transportation Planning Administrator

**TO** Genetha Rice-Singleton, State Program Delivery Design Engineer  
**Attention:** Sue Anne Decker, P.E.

**SUBJECT** **Traffic Assignment** for SR 83 @ TOWALIGA RIVER.

We are furnishing estimated Traffic Assignment for the above project as follows:

**TC # 0157**  
2011 ADT = 1800  
2021 ADT = 2100  
2041 ADT = 2600  
2011 DHV = 175  
2021 DHV = 190  
2041 DHV = 235  
K = 9%  
D = 70%  
T. = 17%  
S.U. T = 8%  
COMB. T = 9%  
24 HOUR T = 23%  
S.U. = 7%  
COMB. = 16%

If you have any questions concerning this information please contact Leslie Woods at (404) 631-1773.

CLV/LRW

## Traffic Projections/Forecasting Summary Sheet

CSBRG-0007-00(046), P.I. # 0007046

Monroe County

**Counts** were taken from 2011 coverage

### Growth Factors

***Build = No-Build***

Existing Year to Base Year 1.5%

Base Year to Design Year 1.0%

K = 9%

D = 70%

### Assumptions

- Looked at 10-year historical trend.
- Considered ARC projections for Monroe County as an additional tool (2.5%).
- Assuming a bridge replacement will not draw much more traffic, a lower growth rate was used.

# ATTACHMENT 5

PTIP MEETING MINUTES

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PTIP Meeting Minutes  
February 20, 2013  
CSBRG-0007-00(046), Monroe County  
PI No. 0007046  
SR 83 over Towaliga River

Attendees

- Sue Anne Decker, GDOT Project Manager
- Jeff Fletcher, Engineering Management/Operations Manager
- Jason Mobley, GDOT District 3 Design
- Jim Hoskins, District 3 Design
- Cameron Brown, District 3 Design
- Bill Rountree, District 3 Preconstruction (via telephone)
- Greg Smith, District 3 Location (via Telephone)
- Keith Posey, GDOT Design Policy and Support
- Katrina Anderson, GDOT Right-of-Way
- Gail D'Avino, GDOT Environmental Services
- Andy Casey, GDOT Roadway Design
- Ben Rabun, GDOT Bridge Design

Sue Anne opened the meeting with a description of the project, and stated that the project had 2016 PE, 2018 RW and 2020 UTL/CST.

Ben stated that the project had been moved up to 2014 PE, 2016 RW, and 2018 CST/UTL. He further stated that 2013 funds may be available for use and that a 1625 for PE fund should be requested soon. He suggested that Sue Anne coordinate with Bob Rogers, Financial Management, to see if PE can be authorized in FY 2013.

Concept Development activities were discussed. Jason stated that District Design would complete the concept report.

Keith stated that the review time for the concept report was too short.

Detour options were discussed. Jason stated that there were no suitable roads for an off-site detour and they recommend building a parallel bridge to the east. Aerial images suggest that the original roadway and bridge alignment was to the east and that RW may already exist. It was also noted that a utility pole line also runs along the east side of the bridge.

Ben stated that the information from Road Inventory indicated that the 2007 ADT was 2160 vpd. Additionally, it was noted that SR 83 was a major route from Forsyth to Monticello, and the bridge was constructed in 1957.

Jim noted that there were several National Parks near the bridge, but none in the 4 quadrants of the project limits.

Gail noted that the bridge was not eligible for the historic register, and that the abutments from the previous bridge (assumed to have been built to the east) were not eligible, if they are even present in the field. Additionally, she asked if there were any boat ramps near the project limits. None were known to exist.

Ben suggested that the bridge be built to the east and the existing bridge be used for traffic until the new bridge was complete.

Bill noted that the utilities to the east probably have prior rights and that utility cost and coordination was required, and suggested that we consider building the bridge to the west.

Ben stated that building the bridge to the west would put a kink in the roadway.

Greg stated that his survey crew saw a cemetery on the west side of the road.

Ben and Bill discussed the project's funding; roadway costs versus bridge costs, and the fact that the roadway approaches would be significantly greater than the cost to build the bridge.

Gail asked Sue Anne to procure an environmental consultant for all environmental services, none will be completed in-house. She anticipates that the CE would be approved in late 2015 or early 2016. She further stated that there are three threatened or endangered species (T & E Species) on the project and that their survey season was from October to April, and that her office would provide a scope of services for the task order.

Sue Anne noted that concurrences to the schedule would be need by May 1<sup>st</sup>, if they schedule is to be approved and active prior to her going on maternity leave.

Jason noted that District Design could start as soon as the PE funds were authorized.

Bill suggested that Sue Anne coordinate with Kerry Gore, District Utilities, on the impact to the existing utility pole line.

## Action Items

### PM

- Meeting Minutes
- Environmental Task Order

### Design

- Schedule with duration
- In-house Man hour estimate

### Environmental

- Scope of Services for task order

### Attachments:

0007046 PTIP Package

CC: Project file  
Attendees  
Director of Engineering  
Genetha Rice-Singleton, State Program Delivery Engineer  
Glenn Bowman, State Environmental Administrator  
Phil Copeland, State Right-of-Way Administrator

# ATTACHMENT 6

## CONCEPT MEETING MINUTES

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# DEPARTMENT OF TRANSPORTATION STATE OF GEORGIA

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## MEETING SUMMARY DATE: November 13, 2014

**LOCATION:** District Three Auditorium B

**ATTENDEES:** See Sign-in Sheet

**COPIES:** To file and attendees

**SUBJECT:** **Concept Team Meeting**  
CSBRG-0007-00(046), P.I. No. 0007046, Monroe County, SR 83 @ Towaliga River

### DISCUSSION:

Sue Anne Decker began the meeting by describing some project specific details. She pointed out there is no clear off-site detour and utilities run along the east side of the project. She then stated a cemetery exists to the west and any construction on that side could potentially impact it. Charlotte confirmed these issues and added there was a protected aquatic species on the project, the shiner. She went on to say it was particularly vulnerable to sediment and precautions would have to be taken to mitigate sediment in the river, and likely to be put on the federal list of threatened or endangered species.

Gary Pierce reviewed the alternatives considered for this project. Alternative #1, the preferred alternative in the concept report provided, is a temporary bridge offset to the east. This would maintain the existing alignment and avoid environmental impacts; however it would cost an additional \$400,000.00 versus a permanent parallel offset. Alternative #2 is a permanent parallel bridge, which would involve a shift off the existing alignment. Alternative #3 is an off-site detour, which is approximately 23 miles long. Bill DuVall noted that the bypass length on the Bridge inventory sheet was shown as 9 miles. Jason Mobley opened up a group discussion on preference of alternative.

Sue Anne asked about the profile. Gary stated that the bridge would be raised approximately 5 feet.

Bill noted that the construction cannot be staged on the existing bridge due to the substructure of the bridge. A shift in the alignment (either with a temporary bridge or a permanent offset would be needed).

The group was largely in favor of a permanent offset bridge. Sheldon Minor said permits are needed for both a temporary and permanent bridge and preferred a permanent bridge. Charlotte mentioned there would be less overall disturbance to the environment with a permanent offset. Gene McKissick also favored the permanent offset stating that it is easier to design and construct.

Charlotte asked about the excessive required ROW to the west side of the project. Gary stated it was provided so the environmental study would sufficiently cover the area when it was unsure how much area would be impacted.

Tyler asked if a temporary bridge to the west was feasible, citing approximately \$100,000.00 in utility reimbursement cost. Daniel Pass mentioned there may be curve issues. Gary stated that the profile was being raised nearly 5 feet and any construction to that side would definitely impact the cemetery.

Michael Presley asked if the off-site detour was being considered. Jim Hoskins answered no and stated the detour is 23 miles. Michael went on to say that traffic operations favors maintaining existing alignments, but if there is overwhelming evidence that this is not favorable, changing the alignment is not a problem. Daniel stated the curvature introduced would be minor. Gary confirmed that the curvature was minor would not even require superelevation. Michael went on to say it would be useful to analyze the possibility of having an off-site detour. Sue Anne reviewed Google Earth for possible detour routes. Dan suggested conducting a Roadway User Cost study. He stated this would be a valuable tool to aid in selecting an alternative. Jason suggested getting public opinion about an off-site detour. Sue Anne stated that a PIOH would substantially increase the PE cost. She also stated that when compared with the permanent parallel bridge alternative, the off-site detour would not be popular with road users.

Bill brought up environmental concerns with construction. He stated it would be difficult to drive the bridge pylons into the river bed. He also mentioned the possibility of dumping large amounts of rocks into the river when they bore holes for the pylons. Someone stated you have to impact the environment and the best thing you can do is mitigate those impacts.

Tyler mentioned that the USGS has gauge on the bridge and it would need to be considered a non-reimbursable utility. He asked that USGS and Bellsouth be added to the list of utility owners on the concept report.

Sue Anne concluded that both a permanent offset bridge and an off-site detour are the alternatives under consideration. The Roadway User Cost study would be a factor in determining the preferred alternative, but the information at hand suggests that a permanent offset bridge is the favorable choice.

Michelle Pate pointed out that the paved shoulder should be 6', not 2'. Dan stated that GDOT refers to AASHTO for guidance on paved shoulder width and that the charts she was referencing were preferred widths. He confirmed a design exception would not be needed and would follow up with further discussion.

A comment was made to move the required right-of-way away from the cemetery. Gary said this would not be a problem and the ROW would be substantially reduced.

The meeting was concluded.

Transcribed by: District Three Design  
Reviewed By: Sue Anne Decker, Project Manager

Design Notebook Copy  Project File Copy

Concept Team Meeting

November 13, 2014

0007036 Harris - SR 219 @ Mountain Oak Creek

0007046 Monroe - SR 83 @ Towaliga River

~~SR 204/85 Bridge Replacement over Norfolk Southern Railroad~~

Name	Agency/Position	Email address and Phone Number
Sue Anne Decker	GDOT/PM	sdecker@dot.ga.gov 706-646-7559
Charlotte Weber	HNTB/NEPA	chweber@hntb.com 404-946-5712
David English	GDOT/Eng. Serv.	denglish@dot.ga.gov
Blake Holmes	Central GA EMC	bholmes@cgemc.com 770-630-7136
TYLER PEEK	GDOT/UTILITIES	tpeek@dot.ga.gov 706-646-7605
Mike Taylor	A7+T	jt0579@att.com 478-788-1043
Jim Hoskins	GDOT/D3 Design	jhoskins@dot.ga.gov 706-646-7574
Patrick Weaver	GDOT/D3 Design	pweaver@dot.ga.gov 706-646-7575
GARY PIERCE	GDOT/D3 DESIGN	gpierce@dot.ga.gov
JASON MORSLEY	GDOT/D3 DESIGN	jnmorsley@dot.ga.gov 706-646-7571
Michael Presley	GDOT/D3 Traffic Ops	mpresley@dot.ga.gov 706-646-6676
Bill DuVal	Bridge	
Michelle Pate	Eng. Serv.	

Name	Agency/Position	Email address and Phone Number
Gene McKissick	WHS	
Kraig A Collins	GDOT	krcollins@dot.ga.gov
Shelton Minor	GDOT	smminor@dot.ga.gov
Ken Robinson	GDOT	krobinson@dot.ga.gov
George Johnson	GDOT	gejohnson@dot.ga.gov

# ATTACHMENT 7

## BRIDGE INVENTORY DATA LISTING

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# Bridge Inventory Data Listing



Parameters: Bridge Serial Num

Structure ID:207-0024-0

Monroe

SUFF. RATING: 49.65

**Location & Geography**

**Structure ID:** 207-0024-0  
 200 Brgde Information: 07  
 \*6A Feature Int: TOWALIGA RIVER  
 \*6B Critical Bridge: 0  
 \*7A Route No Carried: SR00083  
 \*7B Facility Carried: SR 83  
 9 Location: 7 MI NE OF FORSYTH  
 2 Dot District: 3  
 207 Year Photo: 2012  
 \*91 Inspection Frequency: 24 Date: 10/16/2012  
 92A Fract Crit Insp Freq: 0 Date: 02/01/1901  
 92B Underwater Insp Freq: 1 Date: 02/10/2011  
 92C Other Spc. Insp Freq: 0 Date: 02/01/1901  
 \* 4 Place Code: 00000  
 \*5 Inventory Route(O/U): 1  
 Type: 3  
 Designation: 1  
 Number: 00083  
 Direction: 0  
 \*16 Latitude: 33 - 06.8730 HMMS Prefix:SR  
 \*17 Longitude: 83 - 52.2180 HMMS Suffix:00  
 MP: 20.36  
 98 Border Bridge: 000 % Shared:00  
 99 ID Number: 0000000000000000  
 \*100 STRAHNET: 0  
 12 Base Highway Network: 1  
 13A LRS Inventory Route: 2071008300  
 13B Sub Inventory Route: 0  
 \*101 Parallel Structure: N  
 \*102 Direction of Traffic: 2  
 \*264 Road Inventory Mile Post: 019.87  
 \*208 Inspection Area: 03 Initials: WBP  
 Engineer's Initials: gmc  
 \* Location ID No: 207-00083D-019.89N

\*104 Highway System: 0  
 \*26 Functional Classification: 06  
 \*204 Federal Route Type: F No: 01611  
 105 Federal Lands Highway: 0  
 \*110 Truck Route: 0  
 206 School Bus Route: 1  
 217 Benchmark Elevation: 0000.00  
 218 Datum: 0  
 \*19 Bypass Length: 09  
 \*20 Toll: 3  
 \*21 Maintanance: 01  
 \*22 Owner: 01  
 \*31 Design Load: 2  
 37 Historical Significance: 5  
 205 Congressional District: 08  
 27 Year Constructed: 1957  
 106 Year Reconstructed: 0000  
 33 Bridge Median: 0  
 34 Skew: 00  
 35 Structure Flared: 0  
 38 Navigation Control: 0  
 213 Special Steel Design: 0  
 267 Type of Paint: 0  
 \*42 Type of Service On: 1  
 Type of Service Under: 5  
 214 Movable Bridge: 0  
 203 Type Bridge: A - O - O - O  
 259 Pile Encasement: 3  
 \*43 Structure Type Main: 1 04  
 45 No.Spans Main: 006  
 44 Structure Type Appr: 0 00  
 46 No Spans Appr: 0000  
 226 Bridge Curve Horz: 0 Vert: 1.00  
 111 Pier Protection: 0  
 107 Deck Structure Type: 1  
 108 Wearing Structure Type: 6  
 Membrane Type: 8  
 Deck Protection: 8

**Signs & Attachments**

225 Expansion Joint Type: 02  
 242 Deck Drains: 1  
 243 Parapet Location: 0  
 Height: 0.00  
 Width: 0.00  
 238 Curb Height: 1  
 Curb Material: 1  
 239 Handrail: 1 1  
 \*240 Median Barrier Rail: 0  
 241 Bridge Median Height: 0  
 \* Bridge Median Width: 0  
 230 Guardrail Loc. Dir. Rear: 3  
 Fwr: 3  
 Oppo. Dir. Rear: 0  
 Oppo. Fwr: 0  
 244 Aproach Slab: 3  
 224 Retaining Wall: 0  
 233Posted Speed Limit: 55  
 236 Warning Sign: 0.00  
 234 Delineator: 1.00  
 235 Hazard Boards: 1  
 237 Utilities Gas: 00  
 Water: 00  
 Electric: 00  
 Telephone: 00  
 Sewer: 00  
 247 Lighting Street: 0  
 Navigation: 0  
 Aerial: 0  
 \*248 County Continuity No.: 00



# ATTACHMENT 8

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## PRELIMINARY PAVEMENT DESIGN

## Flexible Pavement Design Analysis

<b>PI Number</b>	0007046	<b>County(s)</b>	Monroe
<b>Project Number</b>	CSBRG-0007-00(046)	<b>Design Name</b>	BRG REPLACEMT SR83 OVER TOWALIGA RIVER
<b>Project Description</b>	2041 TRAFFIC, TRUCK 23%, MONROE 0007046		

Traffic Data (AADTs are one-way)					Miscellaneous Data		
<b>Initial Design Year</b>	2021	<b>Initial AADT, VPD</b>	1,050	<b>24 Hour Truck %</b>	23.00	<b>Lanes in one direction</b>	1
<b>Final Design Year</b>	2041	<b>Final AADT, VPD</b>	1,300	<b>SU Truck %</b>	7.00	<b>Curb &amp; Gutter/Barrier</b>	No
		<b>Mean AADT, VPD</b>	1,175	<b>MU Truck %</b>	16.00		

Design Data					
<b>Lane Distribution Factor (%)</b>	100.00	<b>Soil Support Value</b>	2.50	<b>Single Unit ESAL</b>	0.40
<b>Terminal Serviceability Index</b>	2.50	<b>Regional Factor</b>	1.60	<b>Multiple Unit ESAL</b>	1.50
		<b>User Defined 18-KIP ESAL</b>	0.95	<b>Calculated 18-KIP ESAL</b>	1.17
<b>Non-Standard Value Comment</b>					

Design Loading (Calculated 18-KIP ESAL)					
<b>Mean AADT, VPD</b>	<b>LDF (%)</b>	<b>Vehicle Type</b>	<b>Volume (%)</b>	<b>ESAL Factor</b>	<b>Daily ESAL</b>
1,175	100.00	Single Unit Truck	7.00	0.40	33
		Multi Unit Truck	16.00	1.50	282
<b>Total Daily ESALs</b>					315
<b>Total Design Period ESALs</b>					2,299,500

Proposed Flexible Full Depth Pavement Structure				
<b>Course</b>	<b>Material</b>	<b>Thickness (inches)</b>	<b>Structural Coefficient</b>	<b>Structural Value</b>
Course 1	9.5 mm Type II Superpave	1.25	0.4400	0.55
Course 2	19 mm Superpave	2.00	0.4400	0.88
Course 3	25 mm Superpave	1.25	0.4400	0.55
		2.75	0.3000	0.83
Course 4	Graded Aggregate Base	14.00	0.1600	2.24
<b>Required SN</b>	5.12	<b>Proposed pavement is 1.50% Underdesigned</b>		<b>Proposed SN</b>
				5.05

<b>Design Remarks</b>	TRAFFIC FURNISHED BY CYNTHIA L. VANDYKE, STATE TRANSPORTATION PLANNING, 2013 JAN 8: TC# 0157
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Prepared By \_\_\_\_\_ 6/11/2013 2:13 PM  
JIM HOSKINS, DE III Date

Recommended By \_\_\_\_\_  
District Engineer Date

Approved By \_\_\_\_\_  
State Pavement Engineer Date

# ATTACHMENT 9

## CONCEPT UTILITY REPORT

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## Concept Utility Report

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**Project Number:** CSBRG-0007-00(046)

**District:** 3

**County:** Monroe

**Prepared by:** Tyler Peek

**P.I. #** 0007046

**Date:** November 10, 2014

**Project Description:** Bridge Replacement - SR 83 @ Towaliga River, 7 miles N of Forsyth

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*The information provided herein has been gathered from Georgia811 and/or field visits and serves as an estimate. Nothing contained in this report is to be used as a substitute for 1<sup>st</sup> Submission or SUE.*

**Are SUE services recommended?** No Level: A B C D

**Public Interest Determination (PID):**  Automatic  Mandatory  Consideration  
 No Use  Exempt

**Is a separate utility funding phase recommended?** No

**Existing Facilities:** Central Georgia EMC, BellSouth, U.S. Geological Survey (stream gage)

**Potential Project (Schedule/Budget) Impacts:** The current alignment of the temporary bridge to the east side of the existing bridge impacts the existing overhead power/telephone line. Some of these impacts could be reimbursable.

The U.S. Geological Survey maintains a real-time stream gage for flood warning and long-term hydrologic analysis. This gage will need to be relocated and placed on the temporary bridge and new permanent bridge.

**Capital Improvement Projects (Utilities) Anticipated in the Area:** \_\_\_\_\_

**Project Specific Recommendations for Avoidance/Mitigation:** Move the temporary bridge to the west side of the existing bridge - this will lessen utility impacts and costs.

**Right of Way Coordination:** Ensure that easements are purchased with the right to place utilities.

**Environmental Coordination:** Ensure that environmental studies factor in relocation of utilities. ESAs within the required R/W may be subject to placement of utilities.

The following utilities have facilities within the project limits. Utilities have been located using Georgia811 and/or field visits.

Existing Facilities/Appurtenances	Approximate Limits (Station/Offset)	Reimbursable cost (est.)	Non-reimbursable cost (est.)	Facilities to Avoid (Station/Offset)	Facility Retention Recommended	Comments
<b>BellSouth:</b> aerial fiber optic (on GPC poles) and underground copper cable, attachment to existing bridge	Entire project	\$19,250.00				
<b>Central Georgia EMC:</b> aerial distribution	Entire project.	\$93,736.69				
<b>U.S. Geological Survey</b>	Bridge		\$6,000.00			Bridge attachment - will need to be placed on new bridge

# ATTACHMENT 10

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## ROADWAY USER COST (RUC) STUDY



**Georgia Department of Transportation**  
**Office of Design – District 3**

**Roadway User Cost Study**

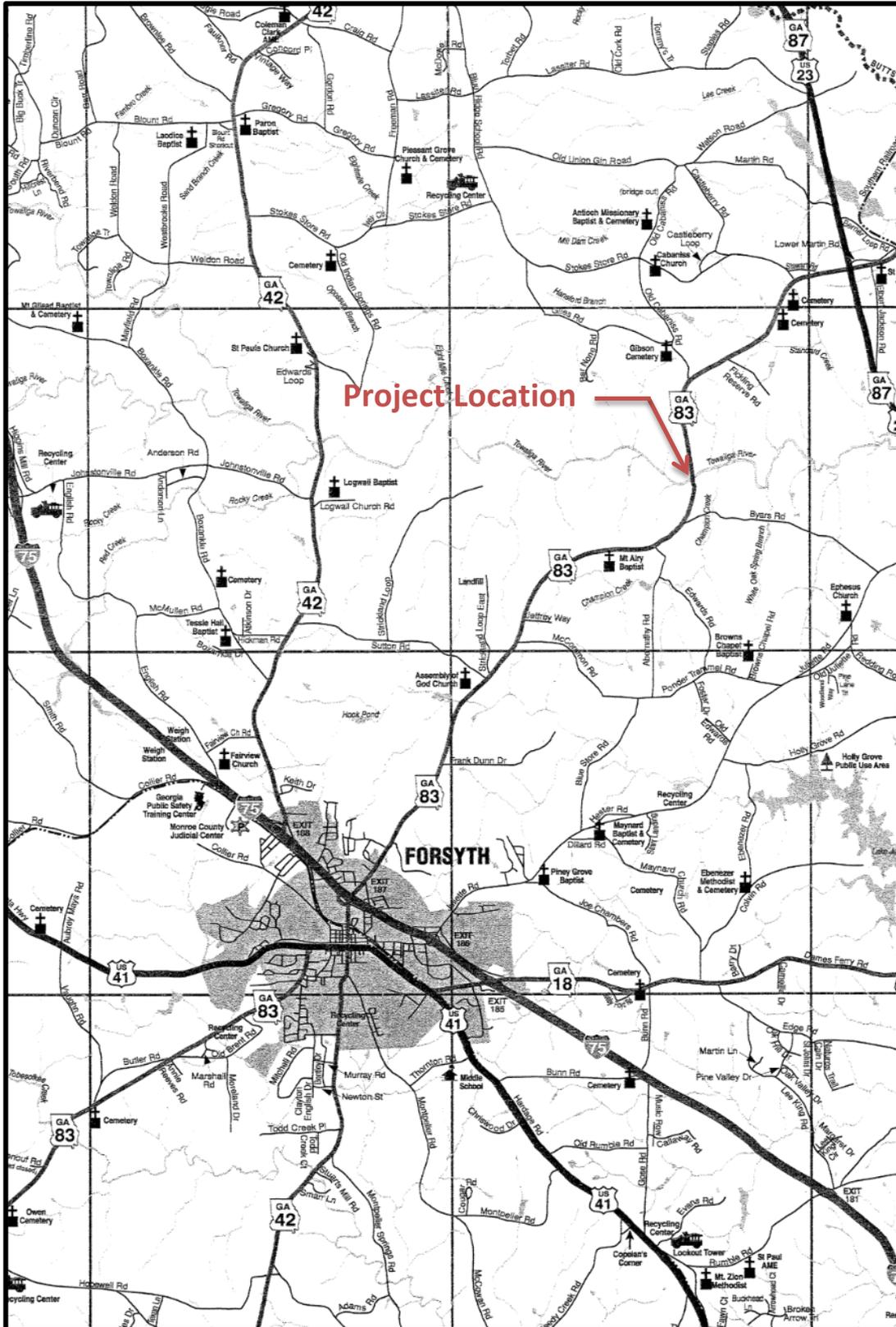
Bridge Replacement on State Route 83 over Towaliga River

Monroe County

PI #0007046

December 3, 2014

# Location Map



**Description of the proposed project:** The project extends approximately 0.53 miles along SR 83 and is located 7 miles north of Forsyth. A new permanent bridge will be constructed offset to the east. Traffic will be maintained on the existing bridge during construction.

**Existing conditions:** The existing roadway contains 12' lanes and 6' shoulders with a reinforced concrete bridge crossing Towaliga River. There are no sidewalks and no major intersections within the project limits. There are no major utilities within the project limits, but aerial distribution lines run along the east side of the roadway.

**Project Justification Statement:** This Bridge (Structure ID 207-0024-0; SR 83 over Towaliga River) was built in 1957. The design vehicle used for this bridge is below the current standards. The overall condition of this bridge would be classified as satisfactory to fair. The deck is in satisfactory condition with minor concrete cracking. The superstructure is in satisfactory condition with concrete cracking, and spalling with some exposed reinforcement. The substructure is in fair condition due to moderate concrete cracking and spalls. Due to the inadequate structural integrity of the bridge and the design vehicle being below current standards, replacement is recommended.

**PI 0007046 Monroe County  
 Bridge Replacement on SR 83 over Towaliga River**

**Summary of calculated Road User Costs (RUC)**

<b>Roadway Closure</b>	<b>Duration</b>	<b>% Traffic that detours</b>	<b>Vehicles affected</b>	<b>Added Time</b>	<b>Adjusted RUC (50% of calculated)</b>	<b>Notes</b>
	hr	%	ea	hr	\$	
<b>Bridge</b>	12 Months	<b>75%</b>	1,950	<b>0.22</b>	<b>\$ 2,737,500.00</b>	

**Notes:**

1. RUC amounts don't include additional costs for assumed voluntary detour of traffic/trip cancelations.

## Roadway User Cost

Bridge Replacement on SR 83 over Towaliga River

**Table 1: Summary of laneage and relative traffic volumes by roadway segment.**

Segment	Segment Description				Laneage	Traffic Volumes - RCDATA Sept 2010			
	County	Mile Post at Beginning of Segment	Segment length	Location at Beginning of Segment	No. of Lanes	Traffic ADT (two way) date?	Posted Speed	Traffic ADT/lane	Travel Time
		mi.	mi		ea	vpd	MPH	vpd/lane	Hr
NORMAL ROUTE	Monroe	13.28	10.5	SR 83 @ I-75	2	1800	55	900	0.19
	<b>Travel Length without Detour (mile)</b>		<b>10.50</b>	<b>Travel Time without Detour</b>				<b>0.19</b>	
DETOUR ROUTE	Monroe	13.28		Begin Detour SR 83 @ N. Frontage Road					
		15.15	1.9	SR 401 (I-75)	2	390	55	98	0.03
		8.61	10.1	SR 18	2	2,340	55	1,170	0.18
		5.07	10.5	SR 87	2	4,540	55	2,270	0.19
				End of Detour SR 83					
	<b>Travel Length with Detour (mile)</b>		<b>22.50</b>	<b>Travel Time with Detour</b>				<b>0.41</b>	
<b>Added Travel Length (mile)</b>		<b>12.00</b>	<b>Added Travel Time</b>				<b>0.22</b>		

Note:

Assume that Detour route segments will not exceed capacity when added traffic volume is in place during time of construction.

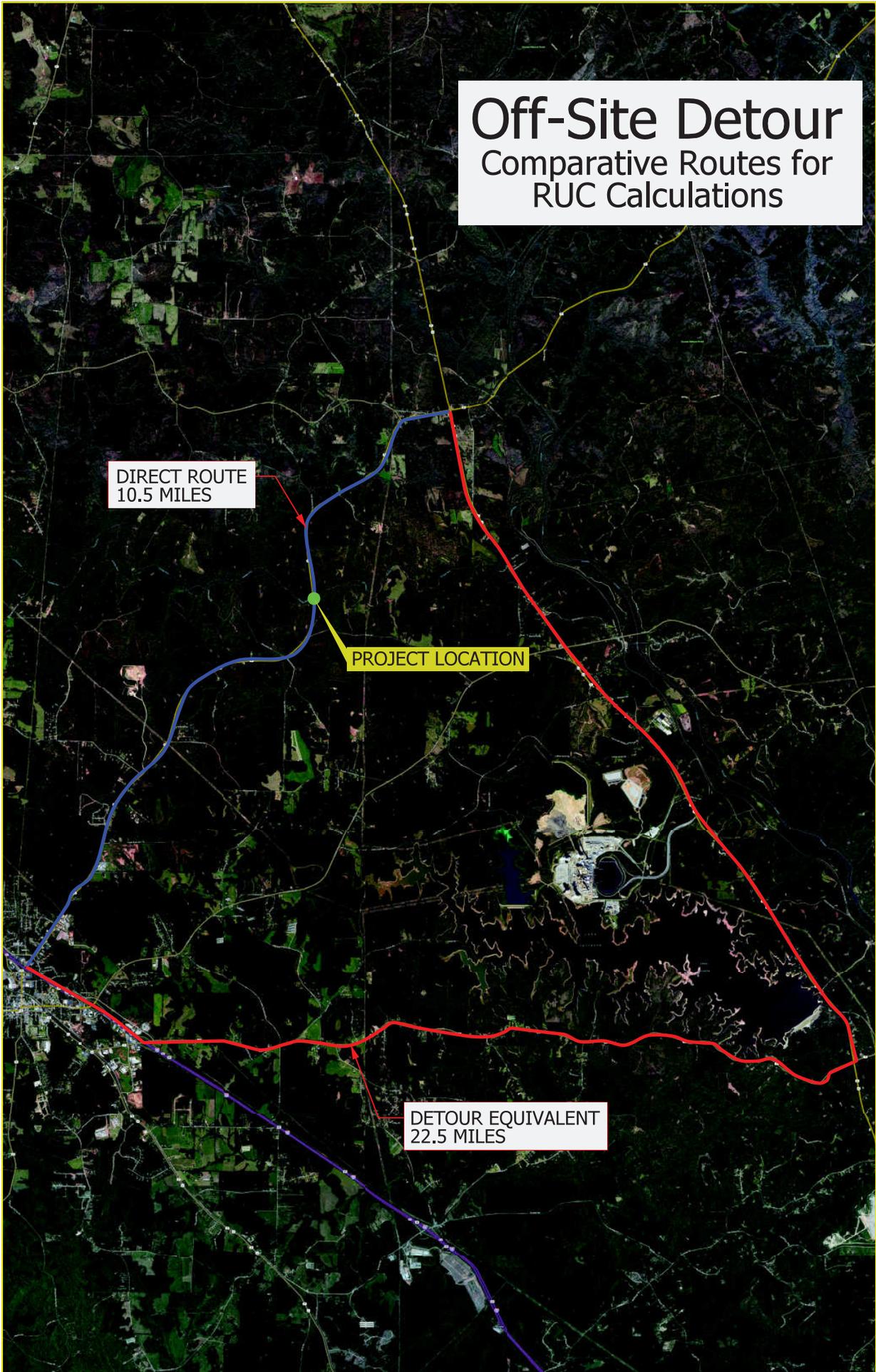
# Off-Site Detour

Comparative Routes for  
RUC Calculations

DIRECT ROUTE  
10.5 MILES

PROJECT LOCATION

DETOUR EQUIVALENT  
22.5 MILES



## Roadway User Cost

### Bridge Replacement on SR 83 over Towaliga River

Reference from another cell or sheet    Black    Input Calculated    Red Blue

**Table 3a: Circuity (Detour) Delay**

Travel Length without Detour (mile)	Travel Length with Detour (mile)	Added Travel Length (mile)	Travel Time without Detour (hr/veh)	Travel Time with Detour (hr/veh)	Added Time to Travel Detour (hr/veh)
10.50	22.50	12	0.19	0.41	0.22

**Table 4: Escalation factors**

Cost Factors	1970 CPI-U <sup>2</sup>	Current CPI-U <sup>1</sup>	Escalation Factor
Idling & VOC (transportation)	37.50	286.70	7.65
Time Value (all components)	38.80	237.43	6.12

<sup>1</sup>From Bureau of Labor Statistics for October 2014 "transportation" and "all components" categories.

<sup>2</sup>As reported in NJ DOT Road User Cost Manual for 1970.

**Table 5: Cost Rates**

Vehicle Class	1970			Current		
	Time Value Cost Rate <sup>1</sup>	Idling Cost Rate <sup>2</sup>	VOC Cost Rate <sup>2</sup>	Time Value Cost Rate	Idling Cost Rate	VOC Cost Rate
	\$/Veh-hr	\$/Veh-hr	\$/mile	\$/Veh-hr	\$/Veh-hr	\$/mile
Car	3.00	0.1819	0.06	18.36	1.39	0.46
Truck	5.00	0.2092	0.12	30.60	1.60	0.92

<sup>1</sup>From NCHRP Report 133 as indicated in NJ manual

<sup>2</sup>Average of SU and combination truck values from NCHRP as stated in the NJ manual.



## Economic News Release

**Table 1. Consumer Price Index for All Urban Consumers (CPI-U):  
U. S. city average, by expenditure category**

Table 1. Consumer Price Index for All Urban Consumers (CPI-U): U.S. city average, by expenditure category, October 2014  
[1982-84=100, unless otherwise noted]

Expenditure category	Relative importance Sep. 2014	Unadjusted indexes			Unadjusted percent change		Seasonally adjusted percent change		
		Oct. 2013	Sep. 2014	Oct. 2014	Oct. 2013- Oct. 2014	Sep. 2014- Oct. 2014	Jul. 2014- Aug. 2014	Aug. 2014- Sep. 2014	Sep. 2014- Oct. 2014
All items	100.000	233.546	238.031	237.433	1.7	-0.3	-0.2	0.1	0.0
Food	13.987	237.871	244.630	245.166	3.1	0.2	0.2	0.3	0.1
Food at home	8.282	234.418	241.578	242.121	3.3	0.2	0.2	0.3	0.1
Cereals and bakery products	1.122	270.303	270.660	271.313	0.4	0.2	0.2	-0.4	0.3
Meats, poultry, fish, and eggs	1.985	239.834	260.805	259.840	8.3	-0.4	1.5	0.7	-0.4
Dairy and related products <sup>(1)</sup>	0.878	216.596	227.604	228.831	5.6	0.5	0.6	0.5	0.5
Fruits and vegetables	1.341	291.767	293.282	297.528	2.0	1.4	-0.8	0.1	0.9
Nonalcoholic beverages and beverage materials	0.937	166.361	166.080	167.350	0.6	0.8	-0.2	0.2	0.6
Other food at home	2.019	203.685	207.287	206.460	1.4	-0.4	-0.2	0.5	-0.4
Food away from home <sup>(1)</sup>	5.705	244.350	250.570	251.100	2.8	0.2	0.2	0.3	0.2
Energy	9.330	238.524	247.077	234.745	-1.6	-5.0	-2.6	-0.7	-1.9
Energy commodities	5.411	295.802	299.558	281.453	-4.9	-6.0	-3.9	-1.1	-3.0
Fuel oil <sup>(1)</sup>	0.161	365.450	355.892	341.771	-6.5	-4.0	-1.2	-2.1	-4.0
Motor fuel	5.156	291.812	295.716	277.290	-5.0	-6.2	-4.1	-1.1	-3.1
Gasoline (all types)	5.072	290.306	294.222	275.729	-5.0	-6.3	-4.1	-1.0	-3.0
Energy services <sup>(2)</sup>	3.919	194.248	207.824	200.471	3.2	-3.5	-0.6	-0.2	-0.2
Electricity <sup>(2)</sup>	3.053	200.392	215.054	206.667	3.1	-3.9	0.1	-0.7	0.5
Utility (piped) gas service <sup>(2)</sup>	0.866	173.329	183.376	179.226	3.4	-2.3	-2.8	1.6	-2.7
All items less food and energy	76.683	235.162	238.841	239.413	1.8	0.2	0.0	0.1	0.2
Commodities less food and energy commodities	19.428	147.814	147.268	147.542	-0.2	0.2	-0.1	0.0	0.0
Apparel	3.468	131.070	130.324	131.961	0.7	1.3	-0.2	0.0	-0.2
New vehicles	3.487	145.488	145.880	146.306	0.6	0.3	0.2	0.0	0.2
Used cars and trucks	1.671	150.413	151.153	147.893	-1.7	-2.2	-0.3	-0.1	-0.9

Table 1. Consumer Price Index for All Urban Consumers (CPI-U): U. S. city average, by ... Page 2 of 2

Expenditure category	Relative importance Sep. 2014	Unadjusted indexes			Unadjusted percent change		Seasonally adjusted percent change		
		Oct. 2013	Sep. 2014	Oct. 2014	Oct. 2013-Oct. 2014	Sep. 2014-Oct. 2014	Jul. 2014-Aug. 2014	Aug. 2014-Sep. 2014	Sep. 2014-Oct. 2014
Medical care commodities	1.731	337.478	346.347	346.324	2.6	0.0	-0.1	0.5	0.0
Alcoholic beverages	0.997	235.348	237.828	238.045	1.1	0.1	0.8	0.1	0.1
Tobacco and smoking products <sup>(1)</sup>	0.699	887.056	904.487	909.872	2.6	0.6	0.0	-0.1	0.6
Services less energy services	57.255	288.243	294.676	295.434	2.5	0.3	0.0	0.2	0.3
Shelter	32.100	264.719	272.165	272.788	3.0	0.2	0.2	0.3	0.2
Rent of primary residence <sup>(2)</sup>	6.990	269.960	277.998	278.985	3.3	0.4	0.2	0.3	0.2
Owners' equivalent rent of residences <sup>(2)(3)</sup>	23.839	272.623	279.292	280.046	2.7	0.3	0.2	0.2	0.2
Medical care services	5.826	457.135	465.403	466.038	1.9	0.1	0.0	0.1	0.2
Physicians' services <sup>(2)</sup>	1.561	355.354	359.879	359.855	1.3	0.0	0.4	0.0	0.1
Hospital services <sup>(2)(4)</sup>	1.808	269.270	279.540	280.496	4.2	0.3	0.0	0.3	0.2
Transportation services	5.488	281.697	283.425	286.691	1.8	1.2	-0.6	0.1	0.8
Motor vehicle maintenance and repair <sup>(1)</sup>	1.147	263.085	267.256	268.094	1.9	0.3	-0.1	0.4	0.3
Motor vehicle insurance	2.216	424.601	438.496	444.443	4.7	1.4	0.1	0.4	0.6
Airline fare	0.705	310.012	292.397	301.466	-2.8	3.1	-4.7	-0.5	2.4

**Footnotes**  
(1) Not seasonally adjusted.  
(2) This index series was calculated using a Laspeyres estimator. All other item stratum index series were calculated using a geometric means estimator.  
(3) Indexes on a December 1982=100 base.  
(4) Indexes on a December 1996=100 base.  
NOTE: Index applies to a month as a whole, not to any specific date.

[Table of Contents](#)

Last Modified Date: November 20, 2014

U.S. Bureau of Labor Statistics | Division of Consumer Prices and Price Indexes, PSB Suite 3130, 2 Massachusetts Avenue, NE Washington, DC 20212-0001

[www.bls.gov/CPI](http://www.bls.gov/CPI) | Telephone: 1-202-691-7000 | [Contact CPI](#)



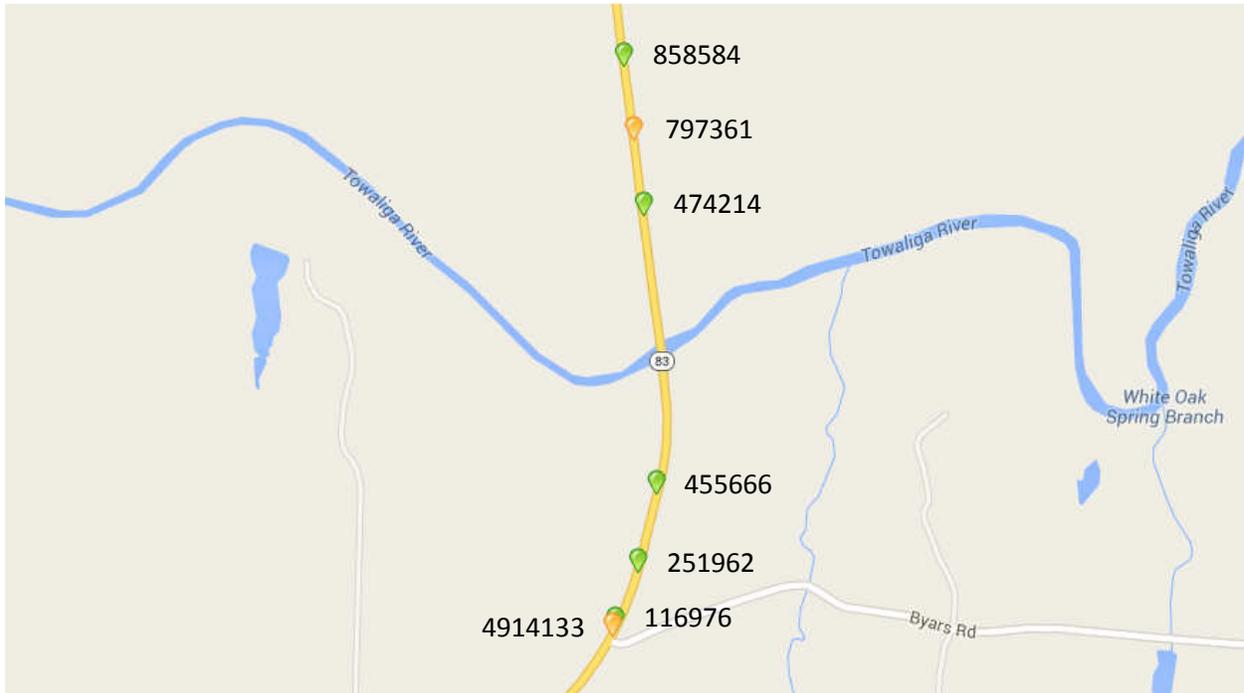
# ATTACHMENT 11

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## CRASH SUMMARIES

# Crash History Map & Accident IDs

Crash history reported from 2000-2015



Property   Injury   Fatality

Accident ID	Accident Cause
858584	Deer
797361	Run-off road
474214	Run-off road
455666	Run-off road
251962	Run-off road
116976	Deer
4914133	Deer

Only two accidents (455666 & 251962) appear to be caused by the existing curvature of the road. One driver attempted to recover, but overcorrected causing the vehicle to overturn. The other driver was distracted by their cell phone and veered off the road.

The existing roadside conditions have narrow shoulders with steep slopes -- Conditions that do not accommodate driver recovery. A properly constructed roadway and 10' overall shoulder will improve the existing conditions that may have led to these crashes.

The accident reports are attached for reference.

Accident Number **C2008-20590** Agency NCIC No. **GA1020000** **GEORGIA UNIFORM MOTOR VEHICLE ACCIDENT REPORT** County **Monroe** Date Rec. By DPS

Date **112208** Day Of Week  Sun  M  T  W  Th  F  S Time **05:32pm** Off. Arrived **05:40pm** Total Number Of: Vehicles **1** Injuries **0** Fatalities **0** Inside City Of:

Road of Occurrence **GA 83 N** At Its Intersection **BYARS RD** Corrected Report Yes   
1  Interstate 2  Lowest St. Rt. 3  Co. Road 4  City St With 1  Interstate 2  Lowest St. Rt. 3  Co. Road 4  City St  
Not At Its Intersection But \_\_\_\_\_ Miles 1  North 3  East Of: \_\_\_\_\_ Feet 2  South 4  West 1  Interstate 2  Lowest St. Rt. 3  Co. Road 4  City St. 5  Co. Line  
Suppl. To Original Yes   
And Continuing in the Direction Checked Above The Next Reference Point is 1  Interstate 2  Lowest St. Rt. 3  Co. Road 4  City St. 5  Co. Line

Driver # **1** Last Name **ALLEN** First **BENJAMIN** Middle \_\_\_\_\_ Driver # \_\_\_\_\_ Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Address **167 OLD RACETRACK RD** Address \_\_\_\_\_  
Ped  Ped

City **HILLSVILLE VA** State **VA** Zip **24343** DOB **04/07/1931** City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Driver's License No. **T23902200** Class **C** State **VA**  Male  Female Driver's License No. \_\_\_\_\_ Class \_\_\_\_\_ State \_\_\_\_\_  Male  Female

Posted Speed **55** Insurance Co. **LIBERTY MUTUAL** Policy No. **A06238096051** Posted Speed \_\_\_\_\_ Insurance Co. \_\_\_\_\_ Policy No. \_\_\_\_\_  
Year **2006** Make **TOYOTA** Model **AVALON** Telephone No. **2767283692** Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Telephone No. \_\_\_\_\_

VIN **4T1BK36B76U082335** Vehicle Color **WHITE** VIN \_\_\_\_\_ Vehicle Color \_\_\_\_\_  
Tag # **LQZ803** State **VA** County \_\_\_\_\_ Year **2009** Tag # \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Year \_\_\_\_\_  
Trailer Tag # \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Year \_\_\_\_\_

Same As Driver Owner's Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  Same As Driver Owner's Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Removed By **DRIVER**  Request  List Removed By \_\_\_\_\_  Request  List

Alcohol Test **2** Type \_\_\_\_\_ Results \_\_\_\_\_ Drug Test **2** Type \_\_\_\_\_ Results \_\_\_\_\_  
Driver Condition **1** Direction Of Travel **1** Vision Obscured **1** Contributing Factors **12** Driver Condition \_\_\_\_\_ Direction Of Travel \_\_\_\_\_ Vision Obscured \_\_\_\_\_ Contributing Factors \_\_\_\_\_  
Vehicle Condition **1** Vehicle Maneuver **10** Pedestrian Maneuver \_\_\_\_\_ Vehicle Condition \_\_\_\_\_ Vehicle Maneuver \_\_\_\_\_ Pedestrian Maneuver \_\_\_\_\_  
Most Harmful Event **14** Vehicle Class **1** Vehicle Type **1** Most Harmful Event \_\_\_\_\_ Vehicle Class \_\_\_\_\_ Vehicle Type \_\_\_\_\_  
Traffic Control **7** Device Inoperative?  Yes  No Traffic Control \_\_\_\_\_ Device Inoperative?  Yes  No

Injured Taken To \_\_\_\_\_ By: \_\_\_\_\_  
EMS Notified Time \_\_\_\_\_ EMS Arrival Time \_\_\_\_\_ Hospital Arrival Time \_\_\_\_\_ Photos Taken:  Yes  No By: \_\_\_\_\_

Report By: **HASKINS, TODD** Department **MONROE COUNTY S.O.** Report Date **11/23/2008** Checked By: **FREEMAN, BRADY** Date Checked **11/24/08**  
Witness(es): Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone No. \_\_\_\_\_

DPS MICROFILM NUMBER (DO NOT WRITE IN THIS SPACE) **85360056**

**COMMERCIAL VEHICLES ONLY**

Carrier Name \_\_\_\_\_ Vehicle # \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Number of Axles \_\_\_\_\_ G.V.W.R. \_\_\_\_\_ Fed. Reportable  Yes  No Cargo Body Type \_\_\_\_\_  
Vehicle Config. \_\_\_\_\_ I.C.C.M.C. # \_\_\_\_\_ U.S. D.O.T. # \_\_\_\_\_ Interstate Intrastate    
C.D.L.?  Yes  No C.D.L. Suspended?  Yes  No  
Vehicle Placarded?  Yes  No Hazardous Materials?  Yes  No Released?  Yes  No  
If YES, Name or 4 Digit Number from Diamond or Box: \_\_\_\_\_  
1 Digit Number from Bottom of Diamond: \_\_\_\_\_  
\_\_\_\_ Ran Off Road \_\_\_\_ Down Hill \_\_\_\_ Cargo Loss \_\_\_\_ Separation  
Runaway Or Shift of Units

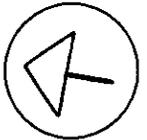
MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY ACCIDENT REPORTING UNIT, P.O. BOX 1456, ATLANTA, GEORGIA 30371-2303

REMARKS

DRIVER OF VEHICLE # 1 STATED THAT A DEER RAN INTO THE SIDE OF HIS VEHICLE.

INDICATE ON THIS DIAGRAM WHAT HAPPENED

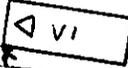
INDICATE NORTH



Byars Rd.

GA 83 N

Deer



not to scale

Accident Investigation Site?

Yes  No

Site Number: \_\_\_\_\_

CITATIONS - VEHICLE #

CITATIONS - VEHICLE #

First Harmful Event	14	Traffic-Way Flow	1	Weather	1	Surface Cond.	1	Light Condition	2	Manner Of Collision	6	Location At Area Of Impact	1	Road Comp.	2	Road Defects	1	Road Character	5
---------------------	----	------------------	---	---------	---	---------------	---	-----------------	---	---------------------	---	----------------------------	---	------------	---	--------------	---	----------------	---

VEH. # 1 VEH. # \_\_\_\_\_

Number of Occupants

3

Point Of Initial Contact

11

Damage to Vehicles

3

SKID DISTANCE BEFORE IMPACT \_\_\_\_\_ VEH.

AFTER \_\_\_\_\_ VEH.

85360 VEH.

Width Of Road

2 LANES

Damage Other Than Vehicle:

Owner:

AGE	SEX	VEH NO.	POS.	INJURY	TAKEN FOR TREAT.	EJECT	SAFETY EQUIP.	EXTRIC.	AIR BAG
-----	-----	---------	------	--------	------------------	-------	---------------	---------	---------

Occupants

Driver # 1 Or Pedestrian # \_\_\_\_\_

Driver # \_\_\_\_\_ Or Pedestrian # \_\_\_\_\_

Last Name	First	Address	City	State	Zip	AGE	SEX	VEH NO.	POS.	INJURY	TAKEN FOR TREAT.	EJECT	SAFETY EQUIP.	EXTRIC.	AIR BAG
WHITE	JEAN	808 BARNES	FUQUAY	NC	27526	45	F	1	3	0	2	1	3	2	2
ALLEN	MARTHA	167 OLD RA	HILLSV	VA	24343	77	F	1	4	0	2	1	3	2	2

MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY, ACCIDENT REPORTING UNIT, P.O. BOX 1456, ATLANTA, GEORGIA, 30371-2303

MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY - ACCIDENT REPORTING UNIT, P.O. BOX 1456, ATLANTA, GEORGIA 30371-2303

Accident Number <b>C2009-08192</b>		Agency NCIC No. <b>GA1020000</b>		GEORGIA UNIFORM MOTOR VEHICLE ACCIDENT REPORT			County <b>Monroe</b>		Date Rec. By DPS		
Date <b>052609</b>	Day Of Week <input type="checkbox"/> Sun <input type="checkbox"/> M <input checked="" type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> S			Time <b>04:09pm</b>	Off. Arrived <b>04:17pm</b>	Total Number Of: Vehicles <b>1</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of:			
Road of Occurrence <b>GA83 NORTH</b>				At Its Intersection With <b>ABERNATHY ROAD</b>				Corrected Report Yes <input type="checkbox"/>			
1 <input type="checkbox"/> Interstate 2 <input checked="" type="checkbox"/> Lowest St. Rt. 3 <input type="checkbox"/> Co. Road 4 <input type="checkbox"/> City St.				1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St. Rt. 3 <input type="checkbox"/> Co. Road 4 <input type="checkbox"/> City St.				Suppl. To Original Yes <input type="checkbox"/>			
Not At Its Intersection But <b>1/2</b>		<input checked="" type="checkbox"/> Miles <input type="checkbox"/> Feet		1 <input type="checkbox"/> North 3 <input checked="" type="checkbox"/> East 2 <input type="checkbox"/> South 4 <input type="checkbox"/> West		Of: <b>ABERNATHY ROAD</b>		1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St. Rt. 3 <input checked="" type="checkbox"/> Co. Road 4 <input type="checkbox"/> City St. 5 <input type="checkbox"/> Co. Line			
And Continuing in the Direction Checked Above		<b>OLD CABANISS ROAD</b>				1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St. Rt. 3 <input checked="" type="checkbox"/> Co. Road 4 <input type="checkbox"/> City St. 5 <input type="checkbox"/> Co. Line					

Driver # <b>1</b> Last Name <b>SLAUGHTER</b> First <b>MARLO</b> Middle <b>KNIGHT</b>				Driver # Last Name First Middle			
Address <b>385 W. GREENE STREET</b>				Address			
City <b>Monticello</b> State <b>GA</b> Zip <b>31064</b>		DOB <b>04/25/1968</b>		City State Zip DOB			
Driver's License No. <b>058584327</b>		Class <b>C</b> State <b>GA</b>		Driver's License No. Class State		<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	
Posted Speed <b>55</b>		Insurance Co. <b>FARM BUREAU</b>		Policy No. <b>APV2011223</b>		Posted Speed Insurance Co. Policy No.	
Year <b>2001</b> Make <b>FORD</b>		Model <b>EXPEDITION</b>		Year Make Model Telephone No.			
VIN <b>1FMRU15W71LA615</b>		Vehicle Color <b>BLUE</b>		VIN Vehicle Color			
Tag # <b>ALH5192</b> State <b>GA</b>		County <b>JASPER</b> Year <b>2010</b>		Tag # State County Year			
Trailer Tag #		State County Year		Trailer Tag # State County Year			
<input checked="" type="checkbox"/> Same As Driver		Owner's Last Name First Middle		<input type="checkbox"/> Same As Driver		Owner's Last Name First Middle	
Address				Address			
City State Zip				City State Zip			
Removed By <b>MID-GA WRECKER</b>				Removed By <input type="checkbox"/> Request <input checked="" type="checkbox"/> List			
Alcohol Test <b>2</b>		Type Results		Drug Test <b>2</b>		Type Results	
Driver Condition <b>1</b>		Direction Of Travel <b>3</b>		Vision Obscured <b>6</b>		Contributing Factors <b>25 10</b>	
Vehicle Condition <b>1</b>		Vehicle Maneuver <b>10</b>		Pedestrian Maneuver			
Most Harmful Event <b>33</b>		Vehicle Class <b>1</b>		Vehicle Type <b>1</b>		Most Harmful Event Vehicle Class Vehicle Type	
Traffic Control <b>6</b>		Device Inoperative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Traffic Control		Device Inoperative <input type="checkbox"/> Yes <input type="checkbox"/> No	

Injured Taken To <b>NA</b>		By:	
EMS Notified Time		EMS Arrival Time	
Hospital Arrival Time		Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Report By: <b>MADDOX, CLAY</b>		Department <b>MONROE CO SO</b>	
Report Date <b>05/26/2009</b>		Checked By: <i>M. C.</i>	
Date Checked <b>5/27/09</b>		Witness(es): Name Address City State Zip Code Telephone No.	
<b>92450138</b>			

DPS MICROFILM NUMBER (DO NOT WRITE IN THIS SPACE)

COMMERCIAL VEHICLES ONLY							
Carrier Name Vehicle #				Carrier Name Vehicle #			
Address				Address			
City State Zip		City State Zip		City State Zip		City State Zip	
Number of Axles		G.V.W.R.		Fed. Reportable		Cargo Body Type	
1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Type	
Vehicle Config.		I.C.C.M.C. #		U.S. D.O.T. #		Interstate <input type="checkbox"/>	
1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		C.D.L. Suspended?		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Intrastate <input type="checkbox"/>	
Vehicle Placarded?		Hazardous Materials?		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Released?	
1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	
If YES, Name or 4 Digit Number from Diamond or Box:				If YES, Name or 4 Digit Number from Diamond or Box:			
1 Digit Number from Bottom of Diamond:				1 Digit Number from Bottom of Diamond:			
Ran Off Road		Down Hill Runaway		Cargo Loss Or Shift		Separation of Units	
Ran Off Road		Down Hill Runaway		Cargo Loss Or Shift		Separation of Units	

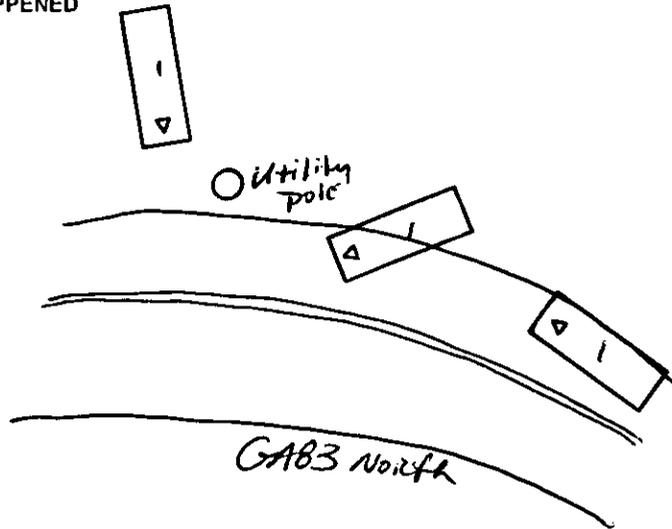
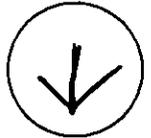
MAY 29 2009

REMARKS

Driver 1 stated she was traveling east on Ga83 when her right side tires dropped off the edge of the roadway. She attempted to correct, but vehicle began to rotate counter-clockwise. Vehicle traveled sideways down thru a ditch and came to rest facing north in a wooded thicket.

INDICATE ON THIS DIAGRAM WHAT HAPPENED

INDICATE NORTH



Accident Investigation Site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CITATIONS - VEHICLE #	CITATIONS - VEHICLE #
Site Number: _____		

First Harmful Event	11	Traffic-Way Flow	1	Weather	3	Surface Cond.	2	Light Condition	1	Manner Of Collision	6	Location At Area Of Impact	2	Road Comp.	2	Road Defects	1	Road Character	5
---------------------	----	------------------	---	---------	---	---------------	---	-----------------	---	---------------------	---	----------------------------	---	------------	---	--------------	---	----------------	---

VEH. # <u>1</u>	VEH. # _____	SKID DISTANCE BEFORE IMPACT _____ VEH.	AFTER <u>02150138</u> _____ VEH.	Width Of Road <b>24 FEET</b>
Number of Occupants	1	_____	_____	
Point Of Initial Contact	6	_____	_____	
Damage to Vehicles	2	_____	_____	

Damage Other Than Vehicle:	Owner:	AGE	SEX	VEH NO.	POS.	INJURY	TAKEN FOR TREAT.	EJECT	SAFETY EQUIP.	EXTRIC.	AIR BAG
Occupants	Driver # <u>1</u> Or Pedestrian # _____					0	2	1	3	2	2
	Driver # _____ Or Pedestrian # _____										
Last Name	First	Address	City	State	Zip						

MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY, ACCIDENT REPORTING UNIT, P.O. BOX 1456, ATLANTA, GEORGIA, 30371-2303

MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY, ACCIDENT REPORTING UNIT, P.O. BOX 1466, ATLANTA, GEORGIA 30317-2303

Accident Number <b>C2007-35437</b>		Agency NCIC No. <b>GA102000</b>		GEORGIA UNIFORM MOTOR VEHICLE ACCIDENT REPORT			County <b>Monroe</b>		Date Rec. By DPS		
Date <b>12/13/07</b>		Day Of Week <input type="checkbox"/> Sun <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input checked="" type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> S		Time <b>08:26am 08:36am</b>		Total Number Of Vehicles <b>1</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of:			
Road of Occurrence <b>GA 83</b>				At Its Intersection With <b>1</b> Interstate <b>2</b> Lowest St. Rt. <b>3</b> Co. Road <b>4</b> City St.				Corrected Report Yes <input type="checkbox"/>			
Not At Its Intersection But <b>1/4</b>				Miles <input checked="" type="checkbox"/> North <input type="checkbox"/> East <input type="checkbox"/> South <input type="checkbox"/> West				Suppl. To Original Yes <input type="checkbox"/>			
And Continuing in the Direction Checked Above The Next Reference Point is				<b>OLD CABINESS RD</b>							

Driver # <b>1</b> Last Name <b>FAULKNER</b> First <b>KERRY</b> Middle <b>NEAL</b>				Driver # _____ Last Name _____ First _____ Middle _____			
Address <b>1000 SUTTON RD</b>				Address _____			
City <b>FORSYTH</b> State <b>GA</b> Zip <b>31029</b>		DOB <b>06/09/1973</b>		City _____ State _____ Zip _____		DOB _____	
Driver's License No. <b>049197794</b> Class <b>C</b> State <b>GA</b>		<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Driver's License No. _____ Class _____ State _____		<input type="checkbox"/> Male <input type="checkbox"/> Female	
Posted Speed <b>55</b> Insurance Co. <b>GEICO</b>		Policy No. <b>4033-05-30-2</b>		Posted Speed _____ Insurance Co. _____		Policy No. _____	
Year <b>2006</b> Make <b>FORD</b> Model <b>EXPEDITION</b>		Telephone No. <b>4787311551</b>		Year _____ Make _____ Model _____		Telephone No. _____	
VIN <b>1FMFU19506LA87517</b>		Vehicle Color <b>SILVER</b>		VIN _____ Vehicle Color _____			
Tag # <b>BIGDEDY</b> State <b>GA</b> County <b>Monroe</b> Year <b>2008</b>		Trailer Tag # _____ State _____ County _____ Year _____		Tag # _____ State _____ County _____ Year _____		Trailer Tag # _____ State _____ County _____ Year _____	
<input checked="" type="checkbox"/> Same As Driver Owner's Last Name First Middle				<input type="checkbox"/> Same As Driver Owner's Last Name First Middle			
Address _____				Address _____			
City _____ State _____ Zip _____				City _____ State _____ Zip _____			
Removed By <b>FORSYTH</b> <input type="checkbox"/> Request <input checked="" type="checkbox"/> List				Removed By _____ <input type="checkbox"/> Request <input type="checkbox"/> List			
Alcohol Test <b>2</b> Type _____ Results _____		Drug Test <b>2</b> Type _____ Results _____		Alcohol Test _____ Type _____ Results _____		Drug Test _____ Type _____ Results _____	
Driver Condition <b>1</b> Direction Of Travel <b>1</b> Vision Obscured <b>1</b>		Contributing Factors <b>25 10</b>		Driver Condition _____ Direction Of Travel _____ Vision Obscured _____		Contributing Factors _____	
Vehicle Condition <b>1</b> Vehicle Maneuver <b>10</b> Pedestrian Maneuver _____		Most Harmful Event <b>33</b> Vehicle Class <b>1</b> Vehicle Type <b>1</b>		Vehicle Condition _____ Vehicle Maneuver _____ Pedestrian Maneuver _____		Most Harmful Event _____ Vehicle Class _____ Vehicle Type _____	
Traffic Control <b>7</b> Device Inoperative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Traffic Control _____ Device Inoperative? <input type="checkbox"/> Yes <input type="checkbox"/> No		Traffic Control _____ Device Inoperative? <input type="checkbox"/> Yes <input type="checkbox"/> No		Traffic Control _____ Device Inoperative? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Injured Taken To _____				By: _____			
EMS Notified Time _____		EMS Arrival Time _____		Hospital Arrival Time _____		Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No By: _____	
Report By: <b>DAVIS, ERIC</b>		Department: <b>MONROE CO SHERIFF</b>		Report Date: <b>12/13/2007</b>		Checked By: <b>W.B.H.</b> Date Checked: <b>12/13/07</b>	
Witness(es): Name _____		Address _____ City _____		State _____ Zip Code _____		Telephone No. _____	
DPS MICROFILM NUMBER (DO NOT WRITE IN THIS SPACE) <b>75810100276</b>							

COMMERCIAL VEHICLES ONLY							
Carrier Name Vehicle # Address City State Zip				Carrier Name Vehicle # Address City State Zip			
Number of Axles		G.V.W.R.		Fed. Reportable		Cargo Body Type	
Vehicle Config.		I.C.C.M.C. #		U.S. D.O.T. #		Interstate Intra-state	
C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No		C.D.L. Suspended?		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vehicle Placarded?		Hazardous Materials?		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, Name or 4 Digit Number from Diamond or Box:		1 Digit Number from Bottom of Diamond:		If YES, Name or 4 Digit Number from Diamond or Box:		1 Digit Number from Bottom of Diamond:	
Ran Off Road		Down Hill Runaway		Cargo Loss Or Shift		Separation of Units	

REMARKS

VEHICLE 1 RAN OFF OF THE RIGHT SIDE OF THE ROADWAY AND STRUCK SOME TREES.

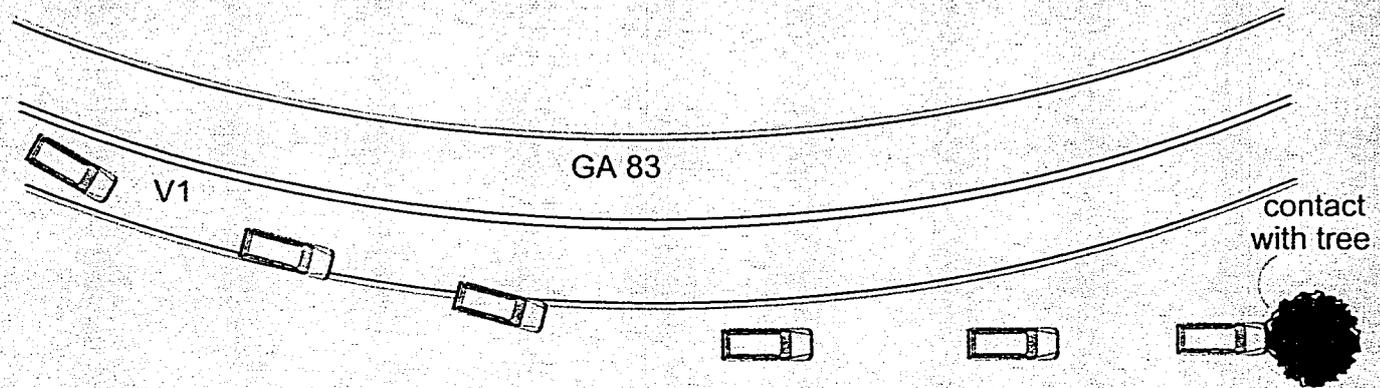
DRIVER 1 STATED THAT HIS CELL PHONE RANG AND DISTRACTED HIM, CAUSING HIM TO RUN OFF OF THE ROAD.

INDICATE ON THIS DIAGRAM WHAT HAPPENED

INDICATE NORTH



Diagram not drawn to scale



Accident Investigation Site? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CITATIONS - VEHICLE #				CITATIONS - VEHICLE #			
Site Number:									

First Harmful Event	29	Traffic-Way Flow	1	Weather	1	Surface Cond.	1	Light Condition	1	Manner Of Collision	6	Location At Area Of Impact	3	Road Comp.	2	Road Defects	1	Road Character	4
---------------------	----	------------------	---	---------	---	---------------	---	-----------------	---	---------------------	---	----------------------------	---	------------	---	--------------	---	----------------	---

VEH. # 1		VEH. #		SKID DISTANCE BEFORE IMPACT		AFTER		Width Of Road	
Number of Occupants	1			VEH.		VEH.		75810100276 2 LANES	
Point Of Initial Contact	12								
Damage to Vehicles	3								

Damage Other Than Vehicle:		Owner:				AGE	SEX	VEH NO.	POS.	INJURY	TAKEN FOR TREAT.	EJECT	SAFETY EQUIP.	EXTRIC.	AIR BAG
Occupants		Driver # 1 Or Pedestrian #								0	2	1	8	2	2
Last Name		First	Address	City	State	Zip									

MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY, ACCIDENT REPORTING UNIT, P.O. BOX 1486, ATLANTA, GEORGIA, 30371-2303

Accident Number <b>C2007-36199</b>		Agency NCIC No. <b>GA102000</b>		GEORGIA UNIFORM MOTOR VEHICLE ACCIDENT REPORT			County <b>MONROE</b>		Date Rec. By DPS	
Date <b>122807</b>		Day Of Week <input type="checkbox"/> Sun <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input checked="" type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> S		Time <b>08:02am</b>		Off Arrived <b>08:02am</b>		Total Number Of: Vehicles <b>1</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of
Road of Occurrence <b>GA 83 NORTH</b>				At Its Intersection With <b>OLD CABINESS RD.</b>				Corrected Report Yes <input type="checkbox"/>		Suppl. To Original Yes <input type="checkbox"/>
Not At Its Intersection But <b>1</b>		<input checked="" type="checkbox"/> Miles <input type="checkbox"/> Feet		1 <input checked="" type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input type="checkbox"/> West		1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St Rt 3 <input checked="" type="checkbox"/> Co Road 4 <input type="checkbox"/> City St 5 <input type="checkbox"/> Co Line				
And Continuing in the Direction Checked Above <b>ABERNATHY RD.</b>				The Next Reference Point is						

Driver # <b>1</b> Last Name <b>GILLETTE</b> First <b>JAMES</b> Middle <b>THOMAS</b>				Driver # _____ Last Name _____ First _____ Middle _____			
Address <b>379 WADES BORO CIR.</b>				Address _____			
City <b>FRANKLIN</b>		State <b>NC</b>		Zip <b>28734</b>		DOB <b>08/26/1938</b>	
Driver's License No. <b>7910237</b>		Class <b>C</b>		State <b>NC</b>		<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	
Posted Speed <b>55</b>		Insurance Co. <b>PENNSYLVANIA NATI</b>		Policy No. <b>1200358512</b>			
Year <b>2005</b>		Make <b>MERCURY</b>		Model <b>GRAND MARQ</b>		Telephone No. <b>8284211610</b>	
VIN <b>2MEFM75W75X670592</b>				Vehicle Color <b>GOLD</b>			
Tag # <b>1237</b>		State <b>NC</b>		County <b>2008</b>		Year	
Trailer Tag #		State		County		Year	
<input checked="" type="checkbox"/> Same As Driver Owner's Last Name First Middle				<input type="checkbox"/> Same As Driver Owner's Last Name First Middle			
Address				Address			
City State Zip				City State Zip			
Removed By <input type="checkbox"/> Request <input type="checkbox"/> List				Removed By <input type="checkbox"/> Request <input type="checkbox"/> List			
Alcohol Test <b>2</b>		Type		Results		Drug Test <b>2</b>	
Driver Condition <b>8</b>		Direction Of Travel <b>2</b>		Vision Obscured <b>1</b>		Contributing Factors <b>10</b>	
Vehicle Condition <b>1</b>		Vehicle Maneuver <b>5</b>		Pedestrian Maneuver			
Most Harmful Event <b>11</b>		Vehicle Class <b>1</b>		Vehicle Type <b>1</b>			
Traffic Control <b>7</b>		Device Inoperative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Injured Taken To <b>NONE REPORTED</b>				By:			
EMS Notified Time		EMS Arrival Time		Hospital Arrival Time		Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No By:	
Report By <b>BECK, CHAD</b>		Department <b>MONROE COUNTY S.O.</b>		Report Date <b>12/28/2007</b>		Checked By <b>HERNDON, TOMMY</b> <sup>USA</sup> Date Checked <b>12/28/07</b>	
Witness(es) Name		Address		City		State Zip Code Telephone No.	

DPS MICROFILM NUMBER (DO NOT WRITE IN THIS SPACE) **75010100300**

COMMERCIAL VEHICLES ONLY							
Carrier Name Vehicle # Address City State Zip				Carrier Name Vehicle # Address City State Zip			
Number of Axles		G.V.W.R.		Fed. Reportable		Cargo Body Type	
1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No			
Vehicle Config.		I.C.C.M.C. #		U.S. D.O.T. #		Interstate Intrastate	
1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	
CDL? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		CDL Suspended? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Vehicle Placarded? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Hazardous Materials? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	
1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	
If YES, Name or 4 Digit Number from Diamond or Box: 1 Digit Number from Bottom of Diamond:				If YES, Name or 4 Digit Number from Diamond or Box: 1 Digit Number from Bottom of Diamond:			
Ran Off Road		Down Hill Runaway		Cargo Loss Or Shift		Separation of Units	
_____		_____		_____		_____	

MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY, ACCIDENT REPORTING UNIT, P.O. BOX 1456, ATLANTA, GEORGIA 30371-2303

JAN 02 2008



Accident Number <b>C2006-26861</b>		Agency NCIC No. <b>GA1020000</b>		GEORGIA UNIFORM <b>MOTOR VEHICLE ACCIDENT REPORT</b>			County <b>Monroe</b>		Date Rec. By DPS	
Date <b>112206</b>		Day Of Week <input type="checkbox"/> Sun <input type="checkbox"/> M <input type="checkbox"/> T <input checked="" type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> S		Time <b>12:37pm</b>		Off. Arrived <b>12:37pm</b>		Total Number Of: Vehicles <b>1</b> Injuries <b>1</b> Fatalities <b>0</b>		Inside City Of:
Road of Occurrence <b>GA 83</b>						At Its Intersection With				Corrected Report Yes <input type="checkbox"/>
1 <input type="checkbox"/> Interstate 2 <input checked="" type="checkbox"/> Lowest St Rt 3 <input type="checkbox"/> Co Road 4 <input type="checkbox"/> City St						1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St Rt 3 <input type="checkbox"/> Co Road 4 <input type="checkbox"/> City St				Suppl. To Original Yes <input type="checkbox"/>
Not At Its Intersection But <b>3</b>						Of: <b>OLD CABINESS RD.</b>				
<input type="checkbox"/> Miles 1 <input type="checkbox"/> North 3 <input type="checkbox"/> East 4 <input type="checkbox"/> West						1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St Rt 3 <input checked="" type="checkbox"/> Co Road 4 <input type="checkbox"/> City St 5 <input type="checkbox"/> Co Line				
And Continuing in the Direction Checked Above <b>BYARS RD.</b>										
The Next Reference Point is						1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St Rt 3 <input checked="" type="checkbox"/> Co Road 4 <input type="checkbox"/> City St 5 <input type="checkbox"/> Co Line				

Driver # <b>1</b>	Last Name <b>HEATH</b>	First <b>WILLIE</b>	Middle <b>VAN</b>
Address <b>113 POPLAR ST.</b>			
City <b>JACKSON</b>	State <b>GA</b>	Zip <b>30233</b>	DOB <b>04/06/1944</b>
Driver's License No. <b>001205545</b>	Class <b>C</b>	State <b>GA</b>	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
Posted Speed <b>55</b>	Insurance Co <b>AUTO OWNERS</b>	Policy No. <b>44098971</b>	
Year <b>1994</b>	Make <b>FORD</b>	Model <b>RANGER</b>	Telephone No. <b>7707755338</b>
VIN <b>1FTCR10A6RUD75334</b>		Vehicle Color <b>BLK</b>	
Tag # <b>9718RF</b>	State <b>GA</b>	County <b>BUTTS</b>	Year <b>2007</b>
Trailer Tag #	State	County	Year
<input checked="" type="checkbox"/> Same As Driver	Owner's Last Name	First	Middle
Address			
City State Zip			
Removed By <input type="checkbox"/> Request <input checked="" type="checkbox"/> List			
Alcohol Test <b>2</b>	Type	Results	Drug Test <b>2</b>
Type	Results	Type	Results
Driver Condition <b>1</b>	Direction Of Travel <b>2</b>	Vision Obscured <b>1</b>	Contributing Factors <b>10</b>
Vehicle Condition <b>1</b>	Vehicle Maneuver <b>5</b>	Pedestrian Maneuver	
Most Harmful Event <b>11</b>	Vehicle Class <b>1</b>	Vehicle Type <b>2</b>	
Traffic Control <b>7</b>	Device Inoperative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Driver #	Last Name	First	Middle
Address			
City	State	Zip	DOB
Driver's License No.	Class	State	<input type="checkbox"/> Male <input type="checkbox"/> Female
Posted Speed	Insurance Co.	Policy No.	
Year	Make	Model	Telephone No.
VIN		Vehicle Color	
Tag #	State	County	Year
Trailer Tag #	State	County	Year
<input type="checkbox"/> Same As Driver	Owner's Last Name	First	Middle
Address			
City State Zip			
Removed By <input type="checkbox"/> Request <input type="checkbox"/> List			
Alcohol Test	Type	Results	Drug Test
Type	Results	Type	Results
Driver Condition	Direction Of Travel	Vision Obscured	Contributing Factors
Vehicle Condition	Vehicle Maneuver	Pedestrian Maneuver	
Most Harmful Event	Vehicle Class	Vehicle Type	
Traffic Control	Device Inoperative? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Injured Taken To <b>MONROE COUNTY HOSPITAL</b>	By: <b>MONROE COUNTY EMS</b>
EMS Notified Time <b>12:38pm</b>	EMS Arrival Time <b>12:46pm</b>
Hospital Arrival Time <b>01:22pm</b>	Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Report By: <b>BECK, CHAD</b>	Department <b>MONROE COUNTY S.O.</b>
Report Date <b>11/24/2006</b>	Checked By: <b>HASKINS, TODD</b>
Witness(es): Name	Date Checked <b>11/24/06</b>
Address	City
State	Zip Code
Telephone No.	

DPS MICROFILM NUMBER (DO NOT WRITE IN THIS SPACE) **65320100015**

COMMERCIAL VEHICLES ONLY							
Carrier Name Vehicle # Address				Carrier Name Vehicle # Address			
City State Zip				City State Zip			
Number of Axles	G.V.W.R.	Fed. Reportable 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Cargo Body Type	Number of Axles	G.V.W.R.	Fed. Reportable 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Cargo Body Type
Vehicle Config.	I.C.C.M.C. #	U.S. D.O.T. #	Interstate <input type="checkbox"/> Intrastate <input type="checkbox"/>	Vehicle Config.	I.C.C.M.C. #	U.S. D.O.T. #	Interstate <input type="checkbox"/> Intrastate <input type="checkbox"/>
C.D.L.? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	C.D.L. Suspended?	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Vehicle Placarded?	C.D.L.? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	C.D.L. Suspended?	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Vehicle Placarded?
1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Hazardous Materials?	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Released?	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Hazardous Materials?	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Released?
If YES, Name or 4 Digit Number from Diamond or Box: 1 Digit Number from Bottom of Diamond:				If YES, Name or 4 Digit Number from Diamond or Box: 1 Digit Number from Bottom of Diamond:			
<input type="checkbox"/> Ran Off Road	<input type="checkbox"/> Down Hill Runaway	<input type="checkbox"/> Cargo Loss Or Shift	<input type="checkbox"/> Separation of Units	<input type="checkbox"/> Ran Off Road	<input type="checkbox"/> Down Hill Runaway	<input type="checkbox"/> Cargo Loss Or Shift	<input type="checkbox"/> Separation of Units

NOV 29 2006

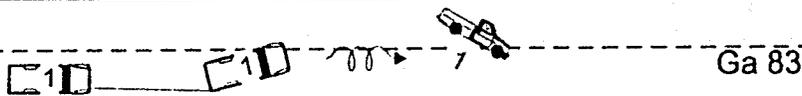
MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY, ACCIDENT REPORTING UNIT, P.O. BOX 1456, ATLANTA, GEORGIA, 30371-2303

REMARKS

Driver #1 stated that he veered off the roadway causing him to lose control of his vehicle rolling over several times coming to rest on the passenger side causing severe damage to the vehicle.

INDICATE ON THIS DIAGRAM WHAT HAPPENED

INDICATE NORTH



Not to Scale

Accident Investigation Site?

Yes  No

Site Number: \_\_\_\_\_

CITATIONS - VEHICLE #

CITATIONS - VEHICLE #

First Harmful Event	11	Traffic-Way Flow	1	Weather	1	Surface Cond.	1	Light Condition	1	Manner Of Collision	6	Location At Area Of Impact	3	Road Comp.	2	Road Defects	1	Road Character	1
---------------------	----	------------------	---	---------	---	---------------	---	-----------------	---	---------------------	---	----------------------------	---	------------	---	--------------	---	----------------	---

VEH. # <u>1</u> VEH. # _____		SKID DISTANCE BEFORE IMPACT	<u>213 FEET</u> VEH.	AFTER	<u>80 FEET</u> VEH.	Width Of Road	<u>24 FEET</u>
Number of Occupants	<u>1</u>						
Point Of Initial Contact	<u>12</u>						
Damage to Vehicles	<u>4</u>						

69920100015

Damage Other Than Vehicle:		Owner:		AGE	SEX	VEH NO.	POS.	INJURY	TAKEN FOR TREAT.	EJECT	SAFETY EQUIP.	EXTRIC.	AIR BAG
Occupants		Driver # <u>1</u> Or Pedestrian #						<u>3</u>	<u>1</u>	<u>1</u>	<u>8</u>	<u>1</u>	<u>0</u>
Last Name		First	Address	City	State	Zip							

MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY, ACCIDENT REPORTING UNIT, P.O. BOX 1466, ATLANTA, GEORGIA, 30371-2303

Accident Number <b>C200706185</b>		Agency NCIC No. <b>GA1020000</b>		GEORGIA UNIFORM MOTOR VEHICLE ACCIDENT REPORT			County <b>MONROE</b>		Date Rec. By DPS			
Date <b>031207</b>	Day Of Week <input type="checkbox"/> Sun <input checked="" type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> S			Time <b>08:35pm</b>	Off. Arrived <b>08:51pm</b>	Total Number Of: Vehicles <b>1</b> Injuries <b>0</b> Fatalities <b>0</b>		Inside City Of:				
Road of Occurrence <b>GA 83 N</b> 1 <input type="checkbox"/> Interstate 2 <input checked="" type="checkbox"/> Lowest St. Rt. 3 <input type="checkbox"/> Co. Road 4 <input type="checkbox"/> City St.				At Its Intersection With 1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St. Rt. 3 <input type="checkbox"/> Co. Road 4 <input type="checkbox"/> City St.				Corrected Report Yes <input type="checkbox"/> Suppl. To Original Yes <input type="checkbox"/>				
Not At Its Intersection But <b>1</b> <input type="checkbox"/> Miles 1 <input checked="" type="checkbox"/> North 3 <input type="checkbox"/> East <input type="checkbox"/> Feet 2 <input type="checkbox"/> South 4 <input type="checkbox"/> West				Of: <b>BYARS RD</b> 1 <input type="checkbox"/> Interstate 2 <input type="checkbox"/> Lowest St. Rt. 3 <input checked="" type="checkbox"/> Co. Road 4 <input type="checkbox"/> City St. 5 <input type="checkbox"/> Co. Line								
And Continuing in the Direction Checked Above The Next Reference Point is <b>GA 87</b> 1 <input type="checkbox"/> Interstate 2 <input checked="" type="checkbox"/> Lowest St. Rt. 3 <input type="checkbox"/> Co. Road 4 <input type="checkbox"/> City St. 5 <input type="checkbox"/> Co. Line												

Driver # <b>1</b>	Last Name <b>MEDINA</b>	First <b>ALEXANDER</b>	Middle	Driver #	Last Name	First	Middle
Ped <input type="checkbox"/>	Address <b>1375 COLLEGE STATION # 90</b>			Ped <input type="checkbox"/>	Address		
City <b>ATHENS</b>	State <b>GA</b>	Zip <b>30605</b>	DOB <b>07/28/1977</b>	City	State	Zip	DOB
Driver's License No. <b>049968483</b>	Class <b>C</b>	State <b>GA</b>	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Driver's License No.	Class	State	<input type="checkbox"/> Male <input type="checkbox"/> Female
Posted Speed <b>55</b>	Insurance Co. <b>PROGRESSIVE</b>	Policy No. <b>389051632</b>		Posted Speed	Insurance Co.	Policy No.	

Year <b>1985</b>	Make <b>PONTIAC</b>	Model <b>BONNEVILLE</b>	Telephone No. <b>7062488318</b>	Year	Make	Model	Telephone No.
VIN <b>1G24X52K6S4217210</b>			Vehicle Color <b>BLACK</b>	VIN			Vehicle Color
Tag # <b>AIY0528</b>	State <b>GA</b>	County	Year <b>2007</b>	Tag #	State	County	Year
Trailer Tag #	State	County	Year	Trailer Tag #	State	County	Year

<input checked="" type="checkbox"/> Same As Driver	Owner's Last Name	First	Middle	<input type="checkbox"/> Same As Driver	Owner's Last Name	First	Middle
Address				Address			
City		State	Zip	City		State	Zip
Removed By <b>DRIVER</b>				Removed By			
<input checked="" type="checkbox"/> Request <input type="checkbox"/> List				<input type="checkbox"/> Request <input type="checkbox"/> List			

Alcohol Test <b>2</b>	Type	Results	Drug Test <b>2</b>	Type	Results	Alcohol Test	Type	Results	Drug Test	Type	Results				
Driver Condition <b>1</b>	Direction Of Travel <b>1</b>	Vision Obscured <b>1</b>	Contributing Factors <b>1</b>		Driver Condition	Direction Of Travel	Vision Obscured	Contributing Factors		Driver Condition	Direction Of Travel	Vision Obscured	Contributing Factors		
Vehicle Condition <b>1</b>	Vehicle Maneuver <b>5</b>	Pedestrian Maneuver			Vehicle Condition	Vehicle Maneuver	Pedestrian Maneuver			Vehicle Condition	Vehicle Maneuver	Pedestrian Maneuver			
Most Harmful Event <b>7</b>	Vehicle Class <b>14</b>	Vehicle Class <b>1</b>	Vehicle Type <b>1</b>	Most Harmful Event	Vehicle Class	Vehicle Class	Vehicle Type	Most Harmful Event	Vehicle Class	Vehicle Class	Vehicle Type	Most Harmful Event	Vehicle Class	Vehicle Type	
Traffic Control <b>7</b>	Device Inoperative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Traffic Control	Device Inoperative? <input type="checkbox"/> Yes <input type="checkbox"/> No			Traffic Control	Device Inoperative? <input type="checkbox"/> Yes <input type="checkbox"/> No			Traffic Control	Device Inoperative? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Report By: <b>HASKINS, TODD</b>	Department <b>MONROE COUNTY S.O.</b>	Report Date <b>03/12/2007</b>	Checked By: <b>FREEMAN, BRAD</b>	Date Checked <b>3-13-07</b>
Witness(es): Name	Address	City	State	Zip Code
				Telephone No.

DPS MICROFILM NUMBER (DO NOT WRITE IN THIS SPACE) **71341000201**

COMMERCIAL VEHICLES ONLY															
Carrier Name Vehicle # Address						Carrier Name Vehicle # Address									
City		State	Zip		City		State	Zip							
Number of Axles	G.V.W.R.	Fed. Reportable 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Cargo Body Type	Number of Axles	G.V.W.R.	Fed. Reportable 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Cargo Body Type						
Vehicle Config.	I.C.C.M.C. #	U.S. D.O.T. #		Interstate Intrastate	Vehicle Config.	I.C.C.M.C. #	U.S. D.O.T. #		Interstate Intrastate						
C.D.L.? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	C.D.L. Suspended? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Vehicle Placarded? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Hazardous Materials? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	C.D.L.? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	C.D.L. Suspended? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Vehicle Placarded? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Hazardous Materials? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No						
If YES, Name or 4 Digit Number from Diamond or Box: 1 Digit Number from Bottom of Diamond:				If YES, Name or 4 Digit Number from Diamond or Box: 1 Digit Number from Bottom of Diamond:											
Ran Off Road		Down Hill Runaway		Cargo Loss Or Shift		Separation of Units		Ran Off Road		Down Hill Runaway		Cargo Loss Or Shift		Separation of Units	

MAIL TO: GEORGIA DEPARTMENT OF PUBLIC SAFETY, ACCIDENT REPORTING UNIT, P.O. BOX 1466, ATLANTA, GEORGIA, 30371-2303

**MAR 13 2007**





# STATE OF GEORGIA TRAFFIC CRASH REPORT

Georgia State Patrol  
Georgia Department of Public Safety  
P.O. Box 1456  
Atlanta, Georgia 30371-1456

Crash Number <b>C000260334-01</b>	Reporting Agency <b>GEORGIA DEPARTMENT OF PUBLIC SAFETY</b>	Reporting Agency Case Number C000260334-01	Reporting Agency CAD Number GSPD14CAD058926
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### CRASH IDENTIFIERS

County of Crash <b>MONROE</b>	City or Place of Crash City Limits	Crash Date/Time <b>07/20/2014 08:31 PM</b>	Reported Date/Time 07/20/2014 08:31 PM	Dispatched Date/Time 07/20/2014 08:31 PM
On Scene Date/Time 07/20/2014 08:31 PM	Cleared Scene Date/Time 07/20/2014 09:10 PM	Complete Date/Time 07/20/2014 09:10 PM	Reason (if Investigation Not Complete)	Source of Information <b>LAW ENFORCEMENT AGENCY</b>

### ROADWAY INFORMATION

Roadway Description for Location of Occurrence <b>GA 83 MM 21</b>	Distance to City or Place of Crash	Latitude <b>33.10764000</b>	Longitude <b>-83.87187000</b>
Intersecting Roadway Description for Location of Occurrence <b>NORTH OF FICKLING RESERVE ROAD</b>	Distance / Direction from Crash Location	Roadway Blocked	Roadway Cleared Date/Time
Part of National Highway System <b>NO</b>	Roadway Functional Class Type <b>RURAL</b>	Roadway Functional Class Detail <b>MINOR COLLECTOR</b>	
Type of Shoulder <b>UNPAVED</b>	Roadway Lighting <b>NO LIGHTING</b>	Roadway Bikeway Facility <b>NONE</b>	Signed Bicycle Route <b>NOT APPLICABLE</b>
Traffic Control Type at Intersection <b>NO CONTROL</b>	Mainline Number of Lanes at Intersection	Side Road Number of Lanes at Intersection	

### CRASH INFORMATION

Light Condition <b>DUSK</b>	Weather Condition <b>CLEAR</b>	Roadway Surface Condition <b>WET</b>	Crash Pictures Taken							
First Harmful Event Type <b>COLLISION NON-FIXED OBJECT</b>	First Harmful Event Detail <b>ANIMAL</b>									
Total Counts	Vehicles <b>1</b>	CMV <b>0</b>	Motorists <b>1</b>	Non-Motorists <b>0</b>	Injured <b>1</b>	Fatalities <b>0</b>	Witnesses <b>0</b>	Other Persons <b>0</b>	Businesses <b>0</b>	Violations <b>0</b>
First Harmful Event's Relation to Junction <b>NON-JUNCTION</b>	Is First Harmful Event within Interchange Area <b>NO</b>	Type of Intersection <b>NOT AT INTERSECTION</b>								
Contributing Circumstances: Environment <b>ANIMAL(S) IN ROADWAY</b>			Contributing Circumstances: Environment <b>NONE</b>			Contributing Circumstances: Environment <b>NONE</b>				
Contributing Circumstances: Road <b>NONE</b>			Contributing Circumstances: Road <b>NONE</b>			Contributing Circumstances: Road <b>NONE</b>				
School Bus Related <b>NO</b>	Work Zone Related <b>NO</b>	Crash Location in Work Zone								

### VEHICLE V01

Motor Vehicle Type <b>V01 MOTOR VEHICLE IN TRANSPORT</b>	State <b>GA</b>	License Number <b>MRSMARY</b>	Registration Expires <b>12/10/2014</b>	Permanent Registration	VIN <b>4S4WX92D184413961</b>	
Year <b>2008</b>	Make <b>SUBARU</b>	Model <b>TRIBECA</b>	Style <b>MP</b>	Color <b>BLU</b>	Body Type Category <b>PASSENGER CAR</b>	
Special Function of Motor Vehicle in Transport <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NO</b>			Type of Bus Use <b>NOT A BUS</b>		
Owner First Name <b>MARY</b>	Owner Middle Name <b>ANN</b>	Owner Last Name <b>ROGERS</b>	Owner Suffix	Owner Business (if not Person)		
Address <b>64 TOMMYS TRL</b>		Address Other		City <b>FORSYTH</b>	State <b>GA</b>	Zip Code <b>31029-3422</b>
Owner Phone Number	Owner Phone Number (other)	Insurance Company <b>USAA GENERAL</b>	Insurance Policy Number <b>VALID-GCIC</b>			
Vehicle Removal <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Towed By <b>BICE TOWING</b>	Wrecker Selection Method <b>ROTATION</b>				
Direction of Travel Before Crash <b>NORTHBOUND</b>	Speed: Estimated <b>55</b> Posted <b>55</b>	Roadway Type <b>UNDIVIDED HIGHWAY</b>	Total Lanes <b>2</b>	Roadway Horizontal Alignment <b>STRAIGHT</b>	Roadway Grade <b>LEVEL</b>	
Trafficway Description <b>TWO-WAY NOT DIVIDED</b>	Traffic Control Device Type <b>OTHER</b>			Working Properly <b>YES</b>		
Roadway Description for Vehicle Travel <b>GA 83 MM 21</b>						
Vehicle Maneuver Action (by this vehicle) <b>MOVEMENTS ESSENTIALLY STRAIGHT AHEAD</b>	Hit & Run (by this vehicle) <b>NO DID NOT LEAVE SCENE</b>	Damage Extent (for this vehicle) <b>DISABLING DAMAGE</b>				
1st Sequence of Events Type (this vehicle) <b>COLLISION NON-FIXED OBJECT</b>	1st Sequence of Events Detail (this vehicle) <b>ANIMAL</b>					
2nd Sequence of Events Type (this vehicle) <b>COLLISION WITH FIXED OBJECT</b>	2nd Sequence of Events Detail (this vehicle) <b>DITCH</b>					
3rd Sequence of Events Type (this vehicle) <b>UNKNOWN</b>	3rd Sequence of Events Detail (this vehicle)					
4th Sequence of Events Type (this vehicle) <b>UNKNOWN</b>	4th Sequence of Events Detail (this vehicle)					
Most Harmful Event Type (this vehicle) <b>COLLISION WITH FIXED OBJECT</b>	Most Harmful Event Detail (this vehicle) <b>DITCH</b>					
Contributing Circumstances 1 (this vehicle) <b>NONE</b>			Contributing Circumstances 2 (this vehicle) <b>NONE</b>			
Area of Initial Impact		Most Damaged Area				
.. Non Collision		.. Non Collision				
.. Top		.. Top				
.. Undercarriage		.. Undercarriage				
.. Unknown		.. Unknown				

Occupant Type <b>DRIVER</b>	Person Name (First Middle Last Suffix) <b>MARY ANN ROGERS</b>	Injury Status <b>NON FATAL INJURY</b>
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### DRIVER V01

Person Type <b>DRIVER</b>	NM#	Vehicle# <b>V01</b>	Person Type Detail
First Name <b>MARY</b>	Middle Name <b>ANN</b>	Last Name <b>ROGERS</b>	Suffix
Date of Birth <b>12/10/1952</b>	Age <b>61</b>	Sex <b>F</b>	

Crash Number <b>C000260334-01</b>		Reporting Agency <b>GEORGIA DEPARTMENT OF PUBLIC SAFETY</b>			Reporting Agency Case Number C000260334-01		Reporting Agency CAD Number GSPD14CAD058926		
Address <b>64 TOMMYS TRL</b>				Address Other		City <b>FORSYTH</b>		State <b>GA</b>	Zip Code <b>31029</b>
Phone Number		Phone Number (other)		Condition at Time of Crash <b>APPARENTLY NORMAL</b>					
Driver License Number <b>051496493</b>		Class <b>C</b>	Expires <b>12/10/2020</b>	State <b>GA</b>	Jurisdiction <b>02</b>	Type <b>NON-CDL DRIVER'S LICENSE</b>		Status <b>VALID LICENSE</b>	
Drivers License Restrictions 1 <b>NONE</b>			Drivers License Restrictions 2 <b>NONE</b>			Drivers License Restrictions 3 <b>NONE</b>			
Driver Distracted By <b>NOT DISTRACTED</b>					Driver Vision Obstructions <b>VISION NOT OBSCURED</b>				
Driver Actions at Time of Crash 1 (based on judgement of investigation officer) <b>OTHER CONTRIBUTING ACTION</b>					Driver Actions at Time of Crash 2 (based on judgement of investigation officer) <b>NO CONTRIBUTING ACTION</b>				
Driver Actions at Time of Crash 3 (based on judgement of investigation officer) <b>NO CONTRIBUTING ACTION</b>					Driver Actions at Time of Crash 4 (based on judgement of investigation officer) <b>NO CONTRIBUTING ACTION</b>				
Motor Vehicle Seating Position: Row <b>FRONT</b>		Motor Vehicle Seating Position: Seat <b>LEFT</b>		Motor Vehicle Seating Position: Other <b>NOT APPLICABLE</b>			Seating Position Unknown		
Restraint Systems <b>SHOULDER AND LAP BELT USED</b>					Helmet Use				
Air Bag Deployed <b>DEPLOYED-COMBINATION</b>					Ejection <b>NOT EJECTED</b>				
Trapped Extrication <b>NOT TRAPPED</b>									
Injury Severity Level Type <b>NON FATAL INJURY</b>			Injury Severity Level Detail <b>NON-INCAPACITATING (B)</b>			Primary or Most Obvious of Body Area Injured During Crash <b>THORAX (CHEST)</b>			
Source of Transport to Medical Facility <b>EMS GROUND</b>		EMS Agency Name or ID <b>MONROE COUNTY EMS</b>		EMS Run Number <b>UNK</b>		Medical Facility Transported To <b>M.C.C.G.</b>			
Law Enforcement Suspected Alcohol Use <b>NO</b>		Alcohol Test Type		Alcohol Tested <b>TEST NOT GIVEN</b>		Alcohol Test Result		<b>BAC</b>	
Law Enforcement Suspected Drug Use <b>NO</b>		Drug Test Type		Drug Tested <b>TEST NOT GIVEN</b>		Drug Test Result			

**NARRATIVE: C000260334**

Vehicle 1 was traveling north on GA 83 near mile marker 21. A deer darted into the road from the west shoulder. The front of vehicle 1 struck the deer. After striking the deer, vehicle 1 veered to the right. Vehicle 1 left the roadway. Vehicle 1 traveled down a small embankment and into a ditch as it rolled onto its roof. Vehicle 1 came to an uncontrolled final rest facing east on the east shoulder on its roof.  
No video.

REPORTING OFFICER		APPROVING OFFICER (SUPERVISOR)	
Reporting Officer Name <b>ROLLINS, B.</b>	Signature 	Approving Officer Name <b>R. FISHEL</b>	Signature 
ID Number <b>0929</b>	Rank <b>TFC2</b>	ID Number <b>0501</b>	Rank <b>CORPORAL</b>
Org / Unit <b>E-25</b>		Org / Unit <b>E-25</b>	

DIAGRAM OF ACCIDENT

NOT TO SCALE

