OFFICE OF THE CHIEF OF POLICE

NOTICE
8.1

September 3, 2021

TO: All Department Personnel

FROM: Chief of Police

SUBJECT: TRAFFIC COLLISION REPORT – REVISED

BACKGROUND

In 1996, the Department adopted the California Highway Patrol (CHP) "Traffic Collision Report, CHP 555," to document and report traffic collisions. Since this time, law enforcement agencies throughout the State of California have adopted these forms to ensure consistent and accurate traffic collision reporting standards. Consequently, law enforcement agencies are guided by the reporting criteria established by the CHP and as delineated in the CHP's Collision Investigation Manual (CIM).

PURPOSE

The purpose of this Notice is to advise that the CHP has made several revisions to the CIM and the CHP "Traffic Collision Report, CHP Form Set" utilized by the Department. These revisions have resulted in significant changes to terminology such as changing "collision" to "crash." The changes were implemented to ensure consistency with the National Highway Traffic Safety Administration.

A copy of the CHP Traffic Collision Report with the new revisions have been highlighted and are attached. The Multi-Disciplinary Collision Investigation Team (MCIT) has created a quick reference guide to assist with understanding the recent changes. The MCIT has prepared a power point presentation that has been uploaded on the Department's Local Area Network (LAN) to further outline the changes and provide guidance on the proper completion of the CHP Form Set. These changes have been incorporated into all in-service traffic collision investigation lesson plans presented by the MCIT.

The revised Forms are attached for immediate use and duplication and are also available in E-Forms on the Department's LAN. All other versions of these Forms shall be marked "Obsolete" and placed in the Divisional recycling bin. The revised Forms are available to order through Supply Division.

If you have any questions regarding this Notice, please contact Traffic Coordination Section, Traffic Group, at (213) 486-0690.

MICHEL R. MOORE
Chief of Police

DISTRIBUTION "D"

Attachment

STATE OF CALIFORNIA
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

TRAFFIC CRASH REPORT

CHP 555 Page 1 (Rev. 3-20) OPI 060

SPECIAL CONDITIONS	NUMBER INJURED	HIT & RUN FELONY	CITY	JUDICIAL DISTRICT	LOCAL REPORT NUMBER
	NUMBER KILLED	HIT & RUN MISDEMEANOR	COUNTY	REPORTING DISTRICT / BEAT	DAY OF WEEK: S M T W T F S / TOW AWAY: YES NO

LOCATION

CRASH OCCURRED ON	MO. DAY YEAR	TIME (2400)	NCIC #	OFFICER ID

MILEPOST INFORMATION	GPS COORDINATES	PHOTOGRAPHS BY:
FEET/MILES OF	LATITUDE LONGITUDE	NONE

AT INTERSECTION WITH
OR: FEET/MILES OF

STATE HWY REL: YES NO

PARTY

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE/MODEL/COLOR	LICENSE NUMBER	STATE

DRIVER: NAME (FIRST, MIDDLE, LAST)

PEDESTRIAN: STREET ADDRESS

PARKED VEHICLE: CITY/STATE/ZIP

BICYCLIST: SEX | HAIR | EYES | HEIGHT | WEIGHT | BIRTHDATE Mo. Day Year | RACE

OTHER: HOME PHONE | BUSINESS PHONE

OPERATOR: INSURANCE CARRIER | POLICY NUMBER

DIR OF TRAVEL | ON STREET OR HIGHWAY | LANE | THRU LANES | TOTAL LANES | SPEED LIMIT

OWNER'S NAME: SAME AS DRIVER

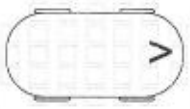
OWNER'S ADDRESS: SAME AS DRIVER

DISPOSITION OF VEHICLE ON ORDERS OF: OFFICER DRIVER OTHER

PRIOR MECHANICAL DEFECTS: NONE APPARENT REFER TO NARRATIVE

VEHICLE IDENTIFICATION NUMBER:

VEHICLE TYPE | DESCRIBE VEHICLE DAMAGE: UNK. NONE MINOR / MOD. MAJOR ROLL-OVER | SHADE IN DAMAGED AREA



CA DOT

CAL-T TCP/PSC MC/MX

PARTY

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE/MODEL/COLOR	LICENSE NUMBER	STATE

DRIVER: NAME (FIRST, MIDDLE, LAST)

PEDESTRIAN: STREET ADDRESS

PARKED VEHICLE: CITY/STATE/ZIP

BICYCLIST: SEX | HAIR | EYES | HEIGHT | WEIGHT | BIRTHDATE Mo. Day Year | RACE

OTHER: HOME PHONE | BUSINESS PHONE

OPERATOR: INSURANCE CARRIER | POLICY NUMBER

DIR OF TRAVEL | ON STREET OR HIGHWAY | LANE | THRU LANES | TOTAL LANES | SPEED LIMIT

OWNER'S NAME: SAME AS DRIVER

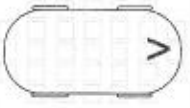
OWNER'S ADDRESS: SAME AS DRIVER

DISPOSITION OF VEHICLE ON ORDERS OF: OFFICER DRIVER OTHER

PRIOR MECHANICAL DEFECTS: NONE APPARENT REFER TO NARRATIVE

VEHICLE IDENTIFICATION NUMBER:

VEHICLE TYPE | DESCRIBE VEHICLE DAMAGE: UNK. NONE MINOR / MOD. MAJOR ROLL-OVER | SHADE IN DAMAGED AREA



CA DOT

CAL-T TCP/PSC MC/MX

PARTY

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE/MODEL/COLOR	LICENSE NUMBER	STATE

DRIVER: NAME (FIRST, MIDDLE, LAST)

PEDESTRIAN: STREET ADDRESS

PARKED VEHICLE: CITY/STATE/ZIP

BICYCLIST: SEX | HAIR | EYES | HEIGHT | WEIGHT | BIRTHDATE Mo. Day Year | RACE

OTHER: HOME PHONE | BUSINESS PHONE

OPERATOR: INSURANCE CARRIER | POLICY NUMBER

DIR OF TRAVEL | ON STREET OR HIGHWAY | LANE | THRU LANES | TOTAL LANES | SPEED LIMIT

OWNER'S NAME: SAME AS DRIVER

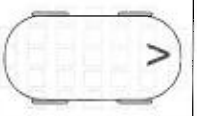
OWNER'S ADDRESS: SAME AS DRIVER

DISPOSITION OF VEHICLE ON ORDERS OF: OFFICER DRIVER OTHER

PRIOR MECHANICAL DEFECTS: NONE APPARENT REFER TO NARRATIVE

VEHICLE IDENTIFICATION NUMBER:

VEHICLE TYPE | DESCRIBE VEHICLE DAMAGE: UNK. NONE MINOR / MOD. MAJOR ROLL-OVER | SHADE IN DAMAGED AREA



CA DOT

CAL-T TCP/PSC MC/MX

PREPARER'S NAME	DISPATCH NOTIFIED	REVIEWER'S NAME	DATE REVIEWED
	YES NO N/A		

STATE OF CALIFORNIA
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

TRAFFIC CRASH CODING

CHP 555 Page 2 (Rev. 3-20) OPI 060

DATE OF CRASH (MO. DAY YEAR)	TIME (2400)	NCIC #	OFFICER ID	NUMBER

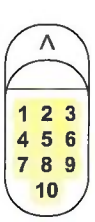
PROPERTY DAMAGE

OWNER'S NAME	OWNER'S ADDRESS

PERSON NOTIFIED	☐ SAME AS OWNER	TELEPHONE NUMBER	METHOD OF NOTIFICATION *(MARK ALL THAT APPLY)* ☐ IN PERSON ☐ PHONE ☐ DISPATCH ☐ CHP 422	LOG / INCIDENT NUMBER

DESCRIPTION OF DAMAGE

SEATING POSITION



1 TO 9 - STANDARD SEATING POSITION

10 - REAR OCC. TRK, VAN, STATION WAGON, ETC.*

11 - POSITION UNKNOWN*

0 - OTHER*

SAFETY EQUIPMENT

OCCUPANTS
A - NONE IN VEHICLE
B - UNKNOWN
C - LAP BELT USED
D - LAP BELT NOT USED
E - SHOULDER HARNESS USED
F - SHOULDER HARNESS NOT USED
G - LAP / SHOULDER HARNESS USED
H - LAP / SHOULDER HARNESS NOT USED
J - PASSIVE RESTRAINT USED
K - PASSIVE RESTRAINT NOT USED
P - NOT REQUIRED

CHILD RESTRAINT
Q - IN VEHICLE USED
R - IN VEHICLE NOT USED
S - IN VEHICLE USE UNKNOWN
T - IN VEHICLE IMPROPER USE
U - NONE IN VEHICLE

MC / BICYCLE - HELMET

DRIVER	PASSENGER
V - NO	X - NO
W - YES	Y - YES

AIR BAG

B - UNKNOWN
L - AIR BAG DEPLOYED
M - AIR BAG NOT DEPLOYED
N - OTHER
P - NOT REQUIRED

EJECTED FROM VEHICLE

0 - NOT EJECTED
1 - FULLY EJECTED
2 - PARTIALLY EJECTED
3 - UNKNOWN

INATTENTION CODES

A - CELL PHONE HANDHELD
B - CELL PHONE HANDSFREE
C - ELECTRONIC EQUIPMENT
D - RADIO / CD
E - SMOKING
F - EATING
G - CHILDREN
H - ANIMALS
I - PERSONAL HYGIENE
J - READING
K - OTHER

ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (*) SHOULD BE EXPLAINED IN THE NARRATIVE.

PRIMARY CRASH FACTOR LIST NUMBER (#) OF PARTY AT FAULT

A CVC SECTION VIOLATED: CITED ☐YES ☐NO
B OTHER IMPROPER DRIVING*:
C OTHER THAN DRIVER*
D UNKNOWN*

WEATHER *(MARK 1 TO 2 ITEMS)*

A CLEAR
B CLOUDY
C RAINING
D SNOWING
E FOG / VISIBILITY FT.
F OTHER*:
G WIND

LIGHTING

A DAYLIGHT
B DUSK - DAWN
C DARK - STREET LIGHTS
D DARK - NO STREET LIGHTS
E DARK - STREET LIGHTS NOT FUNCTIONING*

ROADWAY SURFACE

A DRY
B WET
C SNOWY - ICY
D SLIPPERY (MUDDY, OILY, ETC.)

ROADWAY CONDITION(S) *(MARK 1 TO 2 ITEMS)*

A HOLES, DEEP RUT*
B LOOSE MATERIAL ON ROADWAY*
C OBSTRUCTION ON ROADWAY*
D CONSTRUCTION - REPAIR ZONE
E REDUCED ROADWAY WIDTH
F FLOODED*
G OTHER*:
H NO UNUSUAL CONDITIONS

TRAFFIC CONTROL DEVICES

A CONTROLS FUNCTIONING
B CONTROLS NOT FUNCTIONING*
C CONTROLS OBSCURED
D NO CONTROLS PRESENT / FACTOR*

TYPE OF CRASH

A HEAD - ON
B SIDE SWIPE
C REAR END
D BROADSIDE
E HIT OBJECT
F OVERTURNED
G VEHICLE / PEDESTRIAN
H OTHER*:

MOTOR VEHICLE INVOLVED WITH *(MARK 1 TO 2 ITEMS)*

A NONCOLLISION
B PEDESTRIAN
C OTHER MOTOR VEHICLE
D MOTOR VEHICLE ON OTHER ROADWAY
E PARKED MOTOR VEHICLE
F TRAIN
G BICYCLE
H ANIMAL:
I FIXED OBJECT:
J OTHER OBJECT:
K ADDITIONAL OBJECT(S) STRUCK

PEDESTRIAN'S ACTIONS

A NO PEDESTRIANS INVOLVED
B CROSSING IN CROSSWALK - AT INTERSECTION
C CROSSING IN CROSSWALK - NOT AT INTERSECTION
D CROSSING - NOT IN CROSSWALK
E IN ROAD - INCLUDES SHOULDER
F NOT IN ROAD
G APPROACHING / LEAVING SCHOOL BUS

VEHICLE AUTOMATION LEVEL

A SAE LEVEL - 0
B SAE LEVEL - 1
C SAE LEVEL - 2
D SAE LEVEL - 3
E SAE LEVEL - 4
F SAE LEVEL - 5
G UNKNOWN*

VEHICLE AUTOMATION ENGAGED

A NO AUTOMATION
B DRIVER ASSISTANCE
C PARTIAL AUTOMATION
D CONDITIONAL AUTOMATION
E HIGH AUTOMATION
F FULL AUTOMATION
G UNKNOWN*

OTHER ASSOCIATED FACTOR(S) *(MARK 1 TO 2 ITEMS)*

A CVC SECTION VIOLATION: CITED ☐YES ☐NO
B CVC SECTION VIOLATION: CITED ☐YES ☐NO
C CVC SECTION VIOLATION: CITED ☐YES ☐NO
D
E VISION OBSCUREMENT:
F INATTENTION*:
G STOP & GO TRAFFIC
H ENTERING / LEAVING RAMP
I PREVIOUS CRASH
J UNFAMILIAR WITH ROAD
K DEFECTIVE VEH. EQUIP.: CITED ☐YES ☐NO
L UNINVOLVED VEHICLE
M OTHER*:
N NONE APPARENT
O RUNAWAY VEHICLE

MOVEMENT PRECEDING CRASH

A STOPPED
B PROCEEDING STRAIGHT
C RAN OFF ROAD
D MAKING RIGHT TURN
E MAKING LEFT TURN
F MAKING U TURN
G BACKING
H SLOWING / STOPPING
I PASSING OTHER VEHICLE
J CHANGING LANES
K PARKING MANEUVER
L ENTERING TRAFFIC
M OTHER UNSAFE TURNING
N XING INTO OPPOSING LANE
O PARKED
P MERGING
Q TRAVELING WRONG WAY
R OTHER*:
S LANE SPLITTING

SOBRIETY - DRUG - PHYSICAL *(MARK ALL THAT APPLY)*

A HAD NOT BEEN DRINKING
B HBD - UNDER THE INFLUENCE
C HBD - NOT UNDER INFLUENCE*
D HBD - IMPAIRMENT UNKNOWN*
E UNDER DRUG INFLUENCE*

DRE EXAM. CONDUCTED
STIMULANT
HALLUCINOGEN
DISSOCIATIVE ANESTHETICS
NARCOTIC ANALGESIC
INHALANT
CANNABIS
DEPRESSANT

F IMPAIRMENT - PHYSICAL*
G IMPAIRMENT NOT KNOWN
H NOT APPLICABLE
I SLEEPY / FATIGUED*

SPECIAL INFORMATION

A HAZARDOUS MATERIAL
B CELL PHONE HANDHELD IN USE
C CELL PHONE HANDSFREE IN USE
D CELL PHONE NOT IN USE
E CELL PHONE USE UNKNOWN
F SCHOOL BUS RELATED

BIKEWAY FACILITY

A SHARED ROADWAY
B CLASS I - BIKE PATH*
C CLASS II - BIKE LANE*
D CLASS III - BIKE ROUTE*
E CLASS IV - SEPARATED BIKEWAY*

SKETCH

INDICATE NORTH

MISCELLANEOUS

STATE OF CALIFORNIA
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

INJURED / WITNESS / PASSENGERS

CHP 555 Page 3 (Rev. 3-20) OPI 060

DATE OF CRASH (MO. DAY YEAR)	TIME (2400)	NCIC #	OFFICER ID	NUMBER

WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ("X" ONE)				INJURED WAS ("X" ONE)						PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED
				FATAL INJURY	SUSPECTED SERIOUS INJURY	SUSPECTED MINOR INJURY	POSSIBLE INJURY	DRIVER	PASS.	PED.	BICYCLIST	OTHER	OPER.					
☐ #	☐			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐					

NAME / D.O.B. / ADDRESS | TELEPHONE

(INJURED ONLY) TRANSPORTED BY: | EMS RUN NUMBER | TAKEN TO:

DESCRIBE INJURIES

☐ VICTIM OF VIOLENT CRIME NOTIFIED

☐ # ☐ | | | ☐ ☐ ☐ ☐ | ☐ ☐ ☐ ☐ ☐ ☐ | | | | | | | |

NAME / D.O.B. / ADDRESS | TELEPHONE

(INJURED ONLY) TRANSPORTED BY: | EMS RUN NUMBER | TAKEN TO:

DESCRIBE INJURIES

☐ VICTIM OF VIOLENT CRIME NOTIFIED

☐ # ☐ | | | ☐ ☐ ☐ ☐ | ☐ ☐ ☐ ☐ ☐ ☐ | | | | | | | |

NAME / D.O.B. / ADDRESS | TELEPHONE

(INJURED ONLY) TRANSPORTED BY: | EMS RUN NUMBER | TAKEN TO:

DESCRIBE INJURIES

☐ VICTIM OF VIOLENT CRIME NOTIFIED

☐ # ☐ | | | ☐ ☐ ☐ ☐ | ☐ ☐ ☐ ☐ ☐ ☐ | | | | | | | |

NAME / D.O.B. / ADDRESS | TELEPHONE

(INJURED ONLY) TRANSPORTED BY: | EMS RUN NUMBER | TAKEN TO:

DESCRIBE INJURIES

☐ VICTIM OF VIOLENT CRIME NOTIFIED

☐ # ☐ | | | ☐ ☐ ☐ ☐ | ☐ ☐ ☐ ☐ ☐ ☐ | | | | | | | |

NAME / D.O.B. / ADDRESS | TELEPHONE

(INJURED ONLY) TRANSPORTED BY: | EMS RUN NUMBER | TAKEN TO:

DESCRIBE INJURIES

☐ VICTIM OF VIOLENT CRIME NOTIFIED

PREPARER'S NAME	ID NUMBER	MO. DAY YEAR	REVIEWER'S NAME	MO. DAY YEAR

QUICK REFERENCE GUIDE

Traffic Investigation Revisions
Multi-Disciplinary Collision Investigation Team

New Terminology

Collision → Crash – All past references of "Collision" have changed to "Crash"

Severe (A) Injury shall now be referred to as **Suspected Serious Injury**

Other Visible (B) Injury shall now be referred to as **Suspected Minor Injury**

Complaint of Pain (C) Injury shall now be referred to as **Possible Injury**

CHP 555 - TRAFFIC COLLISION REPORT

Page 1

Special Conditions Box

- Enter "Autonomous Vehicle" if involved in reported crash

Party – "Operator" check box added

The Operator is the individual engaging autonomous mode either from driver seat (Level 3) or remotely (Level 4).

Lane/Thru Lanes/Total Lanes added

- Documenting lanes
    - **Lane**: Actual lane that the vehicle was in
    - **Thru Lanes**: Total number of lanes that traffic can go straight (same direction), excluding left turn only or right turn only lanes
    - **Total Lanes**: Total number of lanes including all lanes (Same direction)

Page 2

Property Damage Section – Notification Updated

- Line added to document the person that was notified of the property damage and method of notification

Seating Position

- Additional options added for 3rd row seat in SUVs and Minivans

- New information (not mentioned in 555 form set)
    - Motorcycle/Mopeds/Bicycle seating positions
        - Passenger position 2 is directly behind the driver
        - Passenger position 3 is the occupant of a side car
        - Passenger position 0 is to be any other location.

"Motor Vehicle Involved With"- New box added

- If multiple AOI, mark first AOI, plus "K – Additional object struck"
  Example: Stop sign is struck after a sideswipe crash.

Vehicle Automation Level

The following was added to document the level of Automation the vehicle is equipped to operate.

- **Level 0: No Automation**
  - No Automation; i.e. standard cruise control, blind spot monitoring,
- **Level 1: Driver Assistance**
  - Only 1 system of automation can be engaged at a time
    Example: Adaptive cruise control would not work simultaneously with lane keep assist.
- **Level 2: Partial Automation**
  - Both adaptive cruise control and lane keep assist work simultaneously with driver intervention as needed. Example: Tesla's Autopilot, Cadillac's Super Cruise
- **Level 3: Conditional Automation**
  - A company vehicle with testing permit, only in a specific designated location/area.
  - Driver can engage Automated Driving System and driver becomes operator.
  - Operator still seated in the driver's seat
- **Level 4: High Automation**
  - A company vehicle with testing permit, only in a specific designated location/area.
  - Operator is not seated in the driver's seat and remotely engage autonomous mode in the vehicle.
- **Level 5: Full Automation**
  - Vision of Autonomous vehicle with no limitation – No human!

Vehicle Automation Engaged

- Document which level of Automation the driver/operator had engaged at the time of crash.

  Example: A Tesla Model Y, which is a Standard Level 2 equipped vehicle, was being driven and it did not have autopilot engaged when it crashed into the rear of another vehicle.
  - "Vehicle Automation Level" would be documented as *Level - 2*, because the vehicle is capable of Level – 2 driving.
  - "Vehicle Automation Engaged" would be documented as *No Automation,* because the Tesla did not have autopilot engaged at the time of crash

"Lane Splitting" box added to/or/for movement preceding crash

- To be used if a motorcycle was riding between rows of vehicles.

Sobriety-Drug-Physical

- Document ALL that applies.

  Example: Jake conducted a DUI Investigation and DRE responded for an evaluation. The DRE opinion was cannabis and stimulants. This field would be marked: "Under Drug Influence," "DRE Exam Conducted," "Stimulant," and "Cannabis."

Special Information

- "Cell Phone Use Unknown" box was added

Bikeway Facility

The following boxes were added:

- **Shared Roadway**
  - No bike lanes present, just vehicle traffic lanes/ lane lines
- **Class I – Bike Path**
  - Special path, separated from cars, and shared by bikes and pedestrians
- **Class II – Bike Lane**
  - Marked bike lane on roadway, with no physical barrier between cars and bikes.
- **Class III – Bike Route**
  - Posted street signs for directional route as preferred route for bicycles specifically
- **Class IV – Separated Bikeway**
  - Marked bike lane on roadway, with a physical barrier between cars and bikes, such as parked cars or separated by traffic dividers.

Page 3

"EMS Run Number" was added to document the number created by an EMS when a patient is transported to medical center.