



SPECIAL CONDITIONS		NUMBER INJURED 0	HIT & RUN FELONY <input type="checkbox"/>	CITY UNINCORPORATED		JUDICIAL DISTRICT SAN BENITO SUPERIOR COURT SAN BENITO COURTHOUSE		LOCAL REPORT NUMBER 9725-2021-10674		
		NUMBER KILLED 0	HIT & RUN MISDEMEANOR <input type="checkbox"/>	COUNTY SAN BENITO		REPORTING DISTRICT 053		DAY OF WEEK MONDAY	TOW AWAY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
LOCATION	CRASH OCCURRED ON SR-156				MO. DAY YEAR 09/06/2021		TIME (2400) 0230		NCIC # 9725	
	MILEPOST INFORMATION				GPS COORDINATES LATITUDE 36.841491 LONGITUDE -121.491753				OFFICER ID 021660	
	<input type="checkbox"/> AT INTERSECTION WITH				STATE HWY REL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				PHOTOGRAPHS BY: <input checked="" type="checkbox"/> NONE	
	<input checked="" type="checkbox"/> OR: 0.1 MILES WEST of BIXBY RD									
PARTY 1	DRIVER'S LICENSE NUMBER Y3245273		STATE CA	CLASS A	AIR BAG M	SAFETY EQUIP. G	VEH. YEAR 2019	MAKE/MODEL/COLOR KW T680 BLU	LICENSE NUMBER XP2291	
DRIVER	NAME (FIRST, MIDDLE, LAST) <input checked="" type="checkbox"/> JODHBIR SINGH						OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER DHAMI RAJVINDER AND BHANG SINGH			
PEDESTRIAN	STREET ADDRESS <input type="checkbox"/> 2881 TULARE ST.						OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER 11145 N. CLAUSER RD. TURLOCK CA 95380			
PARKED VEHICLE	CITY/STATE/ZIP <input type="checkbox"/> LIVINGSTON CA 95334						DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
BICYCLIST	SEX <input type="checkbox"/> M	HAIR <input type="checkbox"/> BLK	EYES <input type="checkbox"/> BRN	HEIGHT <input type="checkbox"/> 5' 6"	WEIGHT <input type="checkbox"/> 180	BIRTHDATE Mo. Day Year <input type="checkbox"/> 09/11/1986	RACE <input type="checkbox"/> O	BRACCO'S TOWING - HOLLISTER - (831)630-0380		
OTHER	HOME PHONE <input type="checkbox"/> (209) 666-5487		BUSINESS PHONE <input type="checkbox"/> (209) 678-1020			VEHICLE IDENTIFICATION NUMBER: 1XKYDP9XXKJ253814				
OPERATOR	INSURANCE CARRIER <input type="checkbox"/> MALWA FIN. INS.		POLICY NUMBER GWP53043 00			VEHICLE TYPE 25		DESCRIBE VEHICLE DAMAGE <input type="checkbox"/> UNK. <input type="checkbox"/> NONE <input type="checkbox"/> MINOR <input type="checkbox"/> MOD. <input checked="" type="checkbox"/> MAJOR <input type="checkbox"/> ROLL-OVER		
	DIR OF TRAVEL <input type="checkbox"/> W	ON STREET OR HIGHWAY SR-156		LANE 1	THRU LANES 1	TOTAL LANES 1	SPEED LIMIT 55	SHADE IN DAMAGED AREA TOP VIEW 		
PARTY 2	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE/MODEL/COLOR	LICENSE NUMBER	
DRIVER	NAME (FIRST, MIDDLE, LAST)						OWNER'S NAME			
PEDESTRIAN	STREET ADDRESS						OWNER'S ADDRESS			
PARKED VEHICLE	CITY/STATE/ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE	PRIOR MECHANICAL DEFECTS: <input type="checkbox"/> NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE		
OTHER	HOME PHONE		BUSINESS PHONE			VEHICLE IDENTIFICATION NUMBER:				
OPERATOR	INSURANCE CARRIER		POLICY NUMBER			VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE		
	DIR OF TRAVEL	ON STREET OR HIGHWAY		LANE	THRU LANES	TOTAL LANES	SPEED LIMIT	SHADE IN DAMAGED AREA		
PARTY 3	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE/MODEL/COLOR	LICENSE NUMBER	
DRIVER	NAME (FIRST, MIDDLE, LAST)						OWNER'S NAME			
PEDESTRIAN	STREET ADDRESS						OWNER'S ADDRESS			
PARKED VEHICLE	CITY/STATE/ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE	PRIOR MECHANICAL DEFECTS: <input type="checkbox"/> NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE		
OTHER	HOME PHONE		BUSINESS PHONE			VEHICLE IDENTIFICATION NUMBER:				
OPERATOR	INSURANCE CARRIER		POLICY NUMBER			VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE		
	DIR OF TRAVEL	ON STREET OR HIGHWAY		LANE	THRU LANES	TOTAL LANES	SPEED LIMIT	SHADE IN DAMAGED AREA		
PREPARER'S NAME T BROOME, 021660				DISPATCH NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A				REVIEWER'S NAME C. YOUNGS, 021618		DATE REVIEWED 09/15/2021

SKETCH DIAGRAM

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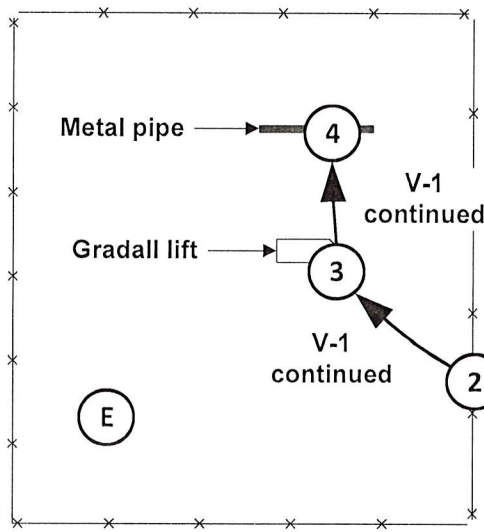
DATE OF CRASH (MO. DAY YEAR)	TIME (2400)	NCIC #	OFFICER ID	NUMBER
09/06/2021	0230	9725	021660	9725-2021-10674

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE =)

SR-156



BIXBY RD.

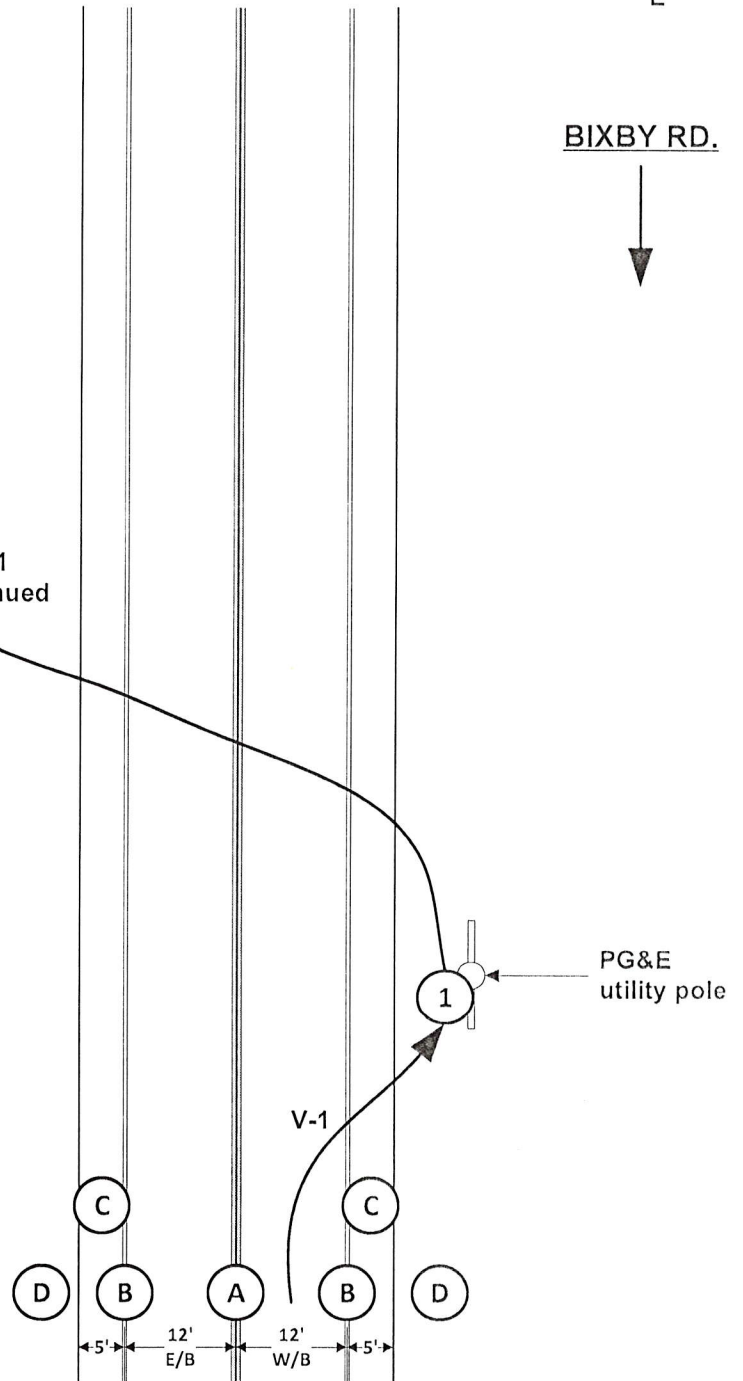


V-1
continued

V-1
continued

LEGEND

- A. Painted solid double yellow lines
- B. Painted solid white line
- C. Asphalt shoulder
- D. Dirt shoulder
- E. PG&E fenced staging area



PG&E
utility pole

V-1

5' 12' 12' 5'
E/B W/B

PREPARED BY	ID NUMBER	MO. DAY YEAR	REVIEWER'S NAME	MO. DAY YEAR
T BROOME	021660	09/06/2021	C. YOUNGS, 021618	09/15/2021

NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
09/06/2021	0230	9725	021660	9725-2021-10674

1 Notification:

2 I was dispatched to a traffic collision with an ambulance responding at 0234 hours. I responded
3 from the CHP Hollister-Gilroy Area office and arrived on scene at 0249 hours. Upon my arrival I
4 determined this to be a traffic collision with property damage only. All times, speeds, and
5 measurements are approximate. All measurements were obtained by a departmentally issued
6 rolatape, visual estimations, foot pace, and vehicle odometer.

8 Statements:

9 Party #1 (P-1, Singh) related to me in essence he was driving Vehicle #1 (V-1, Kenworth)
10 westbound on SR-156, west of Bixby Rd., at 55-58 mph. P-1 thinks he fell asleep for a few
11 seconds and woke up when V-1 started to go off the roadway. P-1 applied the brakes to V-1 in
12 attempt to avoid colliding with the chain link fence. P-1 stated, "everything happened so fast."

14 Summary:

15 ***THE SUMMARY, AREAS OF IMPACT, AND CAUSE WERE DETERMINED BY THE STATEMENT AND VEHICLE***
16 ***DAMAGE.***

18 P-1 (Singh) was driving V-1 (Kenworth) westbound on SR-156 west of Bixby Rd. at 58 mph. Due
19 to P-1's unsafe turning movement to the right, V-1 travelled off the road collided with a PG&E
20 utility pole. P-1 then steered V-1 to the left and V-1 traveled off the roadway and collided with a
21 chain link fence, gradall lift, and a metal pipe. After the collision V-1 remained at its points of rest,
22 on its wheels facing a westerly direction.

24 Areas of Impact (AOIs):

25 AOI #1 (V-1 vs. PG&E utility pole) was located 13 feet north of the north roadway edge of
26 westbound SR-156 and 0.1 mile west of the east roadway edge prolongation line of Bixby Rd.

28 AOI #2 (V-1 vs. chain link fence) was located 39 feet south of the south roadway edge of
29 eastbound SR-156 and 56 feet west of AOI #1.

31 AOI #3 (V-1 vs. gradall lift) was located 54 feet south of the south roadway edge of eastbound
32 SR-156 and 13 feet west of AOI #2.

34 AOI #4 (V-1 vs. metal pipe) was located 55 feet south of the south roadway edge of eastbound
35 SR-156 and 14 feet west of AOI #3.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
T BROOME	021660	09/06/2021	C. YOUNGS, 021618	09/15/2021

NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
09/06/2021	0230	9725	021660	9725-2021-10674

1 Cause:

2 P-1 (Singh) drove V-1 (Kenworth) in violation of section 22107 VC which states: "No person shall
3 turn a vehicle from a direct course or move right or left upon a roadway until such movement can
4 be made with reasonable safety and then only after the giving of an appropriate signal in the
5 manner provided in this chapter in the event any other vehicle may be affected by the movement."
6 Due to P-1's unsafe turning movement to the right, V-1 travelled off the road collided with a PG&E
7 utility pole. P-1 then steered V-1 to the left and V-1 traveled off the roadway and collided with a
8 chain link fence, gradall lift, and a metal pipe. After the collision V-1 remained at its points of rest,
9 on its wheels facing a westerly direction

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
T BROOME	021660	09/06/2021	C. YOUNGS, 021618	09/15/2021



DATE OF CRASH (MO, DAY, YEAR) 09/06/2021		TIME (2400) 0230	NCIC # 9725	OFFICER ID 021660	NUMBER 9725-2021-10674
PROPERTY DAMAGE		OWNER'S NAME PG&E		OWNER'S ADDRESS 1980 SANTA ANA RD. HOLLISTER CA 95023	
PERSON NOTIFIED PG&E		<input checked="" type="checkbox"/> SAME AS OWNER	TELEPHONE NUMBER (831) 635-2230	METHOD OF NOTIFICATION (MARK ALL THAT APPLY) <input checked="" type="checkbox"/> IN PERSON <input type="checkbox"/> PHONE <input type="checkbox"/> DISPATCH <input type="checkbox"/> CHP 422	LOG / INCIDENT NUMBER 210906M1Y00027
DESCRIPTION OF DAMAGE BROKEN PG&E POLE; BROKEN CHAIN LINK FENCE; DAMAGED FORKLIFT; BENT METAL POLE					
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		TRAFFIC CONTROL DEVICES		VEHICLE AUTOMATION LEVEL	
1 A CVC SECTION VIOLATED, CITED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO VC 22107		A CONTROLS FUNCTIONING X		A SAE LEVEL - 0	
B OTHER IMPROPER DRIVING*		B CONTROLS NOT FUNCTIONING*		B SAE LEVEL - 1	
C OTHER THAN DRIVER*		C CONTROLS OBSCURED		C SAE LEVEL - 2	
D UNKNOWN*		D NO CONTROLS PRESENT / FACTOR*		D SAE LEVEL - 3	
WEATHER (MARK 1 TO 2 ITEMS)		TYPE OF CRASH		E SAE LEVEL - 4	
X A CLEAR		A HEAD - ON		F SAE LEVEL - 5	
B CLOUDY		B SIDE SWIPE		G UNKNOWN*	
C RAINING		C REAR END		H SLOWING / STOPPING	
D SNOWING		D BROADSIDE		I PASSING OTHER VEHICLE	
E FOG / VISIBILITY FT.		E HIT OBJECT X		J CHANGING LANES	
F OTHER*		F OVERTURNED		K PARKING MANEUVER	
G WIND		G VEHICLE / PEDESTRIAN		L ENTERING TRAFFIC	
LIGHTING		H OTHER*		M OTHER UNSAFE TURNING	
A DAYLIGHT		MOTOR VEHICLE INVOLVED WITH (MARK 1 TO 2 ITEMS)		N XING INTO OPPOSING LANE	
B DUSK - DAWN		A NONCOLLISION		O PARKED	
C DARK - STREET LIGHTS		B PEDESTRIAN		P MERGING	
X D DARK - NO STREET LIGHTS		C OTHER MOTOR VEHICLE		Q TRAVELING WRONG WAY	
E DARK - STREET LIGHTS NOT FUNCTIONING*		D MOTOR VEHICLE ON OTHER ROADWAY		R OTHER*	
ROADWAY SURFACE		E PARKED MOTOR VEHICLE		S LANE SPLITTING	
X A DRY		F TRAIN		SOBRIETY - DRUG - PHYSICAL (MARK ALL THAT APPLY)	
B WET		G BICYCLE		A HAD NOT BEEN DRINKING	
C SNOWY - ICY		H ANIMAL:		B HBD - UNDER THE INFLUENCE	
D SLIPPERY (MUDDY, OILY, ETC.)		I FIXED OBJECT: PG&E UTILITY POLE X		C HBD - NOT UNDER INFLUENCE*	
ROADWAY CONDITION(S) (MARK 1 TO 2 ITEMS)		J OTHER OBJECT:		D HBD - IMPAIRMENT UNKNOWN*	
A HOLES, DEEP RUT*		K ADDITIONAL OBJECT(S) STRUCK		E UNDER DRUG INFLUENCE*	
B LOOSE MATERIAL ON ROADWAY*		PEDESTRIAN'S ACTIONS		DRE EXAM. CONDUCTED	
C OBSTRUCTION ON ROADWAY*		X A NO PEDESTRIANS INVOLVED		STIMULANT	
D CONSTRUCTION - REPAIR ZONE		B CROSSING IN CROSSWALK - AT INTERSECTION		HALLUCINOGEN	
E REDUCED ROADWAY WIDTH		C CROSSING IN CROSSWALK - NOT AT INTERSECTION		DISSOCIATIVE ANESTHETICS	
F FLOODED*		D CROSSING - NOT IN CROSSWALK		NARCOTIC ANALGESIC	
G OTHER*		E IN ROAD - INCLUDES SHOULDER		INHALANT	
X H NO UNUSUAL CONDITIONS		F NOT IN ROAD X		CANNABIS	
SKETCH		G APPROACHING / LEAVING SCHOOL BUS		DEPRESSANT	
REFER TO SKETCH PAGE(S)		MISCELLANEOUS		F IMPAIRMENT - PHYSICAL*	
				G IMPAIRMENT NOT KNOWN	
				H NOT APPLICABLE	
				I SLEEPY / FATIGUED*	
				SPECIAL INFORMATION	
				X 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*	