

Master Record Number	400136557
Type Of Crash	Property Damage
Approved By	135

Tennessee Electronic Traffic Crash Report

Incident Information

Date of Crash	— I	Day Of 0	Crash	Local A	gency	/ Number		Reportin	ig Agen	ncy Name			Agency	Trackin	ig Number
8/23/2024		Friday	'	THP06	600			THP D	istrict (6 - Cookeville			624061	1416	
Time of Crash		Time No	otified	Time	e Arriv	/ed	Co	unty				C	City		
14:11		14:21		14	:30		Р	utnam					Not In Cit	y Limit	t
Total Vehicles		Total	Occupants		Tota	I Non-Occupa	ints	Tota	al Killed		Total	Injured		Total	UnInjured
2		2			0			0			0			2	
Hit and Run	Solve	d	Police P	ursuit	Scho	ool Bus Involve	ed I	Photos Ta	aken	Ву	Р	hotograph	er Name		
No	No		No		No			No							
Area					Inte	erchange Rela	ated	1	Interse	ection Type					
Not Applicable					N	lo			Not a	at Intersection	า		-		-
Block Number		Roadwa	ay Number			Roadway Na I-40	ame						Suffix		Mile Marker 273.80
Estimated Distance	:e	l Ir	Distance Type	e	Direc		Fror	m Highway	v/Inters	ection			Suffix		Intersect Number
				0	Eas		1.0		y/into.c				Callix		
Roadway Local Id								Inter	rsect Lo	ocal Id					
Relation To Juncti	ion					F	₹elat	tion to Roa	adway					Route	Signing
Non-Junction							On	Shoulder	r, Righ	t Side				Inter	state
Work Zone								Cons	structio	on Zone					
None															
Construction Loca	ition							Worl	kers Pr	esent					
First Harmful Ever	nt							Traff	ficway 7	Tvpe					
Motor Vehicle-I	n-Trar	າsport O	n Same Roa	adway						y-OPEN					
Weather Condition	ns			Light co	onditio	ons			L	atitude		Longitu	Ide		Rail Crossing Id
Clear				Daylig	ght					36.093120		-85.71	17700		-
Manner of Collisio	n														
Angle															
1st Collision Facto	or				2nd	Collision Fact	or				3rd C	ollision Fa	ctor		

Incident Management

Secondary Crash	Secondary Crash Type	Blockage Occurred
No		Yes
Roadway / Lanes Blocked		Roadway Lanes/ Cleared
Aug 23 2024 2:11PM		Aug 23 2024 5:00PM
Lanes Blocked		
Lane 2		
Incident Started		Incident Cleared
Aug 23 2024 2:11PM		Aug 23 2024 5:00PM

Investigating Officer Details

Investigation Complete	Investigation Complete Rank I			First Name N			ne	Suffix
Νο	Troop	er	Haley		Ν	Uzelac		
Badge Number		District/Zone		Car Number			Report Date	
1520		6		6626			08/24/2024	

Vehicle Number	Number of Occupants	Driver Presence
1	1	Driver Operated

Driver Information

First Name	Ν	/liddle Initia	ıl	Last Name					Suffix	Date Of Birt	۱	Age
Marco Antonio				Avila Tellez						2/18/1986		38
Address Line 1		Addres	ss Line 2	2		City		State	e		Zip	Code
1324 Searcy St						Murfreesbore	0	TN			37	129
Phone Number	Race				Ethr	nicity			Gender			
6292002464	Cauc White		ican Pu	erto Rican Other	His	spanic			м			
Drivers License Number	Drivers	s License S	tate		Expi	ration Date	Drivers Lice	ense (Class	Drivers Lic	ense S	tatus
145222389	TN				20	24	NONE		_	Suspend	ed	
Safety Equipment					Airb	ag			Seat Posit	tion		
Shoulder And Lap Belt Use	ed				Air	Bag Available-	No Deployme	nt	Front Se	eat-Left Side	•	
Endorsement 1	Complied	d With	Endor	sement 2		Complied With	Endorse	emen	t 3	Co	nplied	With
Restriction 1	Complied	d With	Restri	ction 2		Complied With	Restrict	ion 3		Со	nplied	With
Ejected	E	jection Pa	th			•	Trapped/Extric	ated				
Not Ejected							Not Trapped	I				
Injury Code	Medical Tr	ansport	Amb	oulance/Hospital						EN	S Run	#
No Injury	Not Tran	sported										
Incident Responder?			Incide	nt Responder Type								
No												

Driver Conditions and Actions

Hit and Run	Driver/Vehicle Man	euver	Distr	action Action		Distraction Source
No Hit And Run	Negotiating A Co	urve	Not	t Distracted		
Driver's 1st Condition		Driver's 2nd Condition	n		Driver's 3	rd Condition
Under the Influence Drugs/Alc	ohol					
Driver's 1st Action				Drivers 2nd Action		
Failure To Keep In Proper Lane	е			Other		
Driver's 3rd Action	[Driver's 4th Action			Driver's	5th Action

Alcohol and Drugs

Officer Suspect Alcohol Us	se		Determination Method		Alcoh	ol Test Status		
Yes			Observed		Test	t Given		
1st Alcohol Test Type		1st Alcohc	ol Test Result	2nd Alcohol Test Ty	/pe	2	nd Alcohol	Test Result
Whole Blood		Pending	I		_			
Officer Suspect Drug Use			Determination Method		Drug ⁻	Test Status		
No			Observed		Test	t Not Given		
1st Drug Test Type	1st Drug Tes	t Result	2nd Drug Test Type	2nd Drug Test Resu	ult	3rd Drug Test	Туре	3rd Drug Test Result

Driver Violations

1st Violation	1st Violation Category	1st Violation Description	1st Violation Statute	
241559935	Alcohol/Drugs	Dui	55-10-401	
2nd Violation	2nd Violation Category	2nd Violation Description	2nd Violation Statute	
241559937	Other Moving	Due Care	55-8-136	
3rd Violation	3rd Violation Category	3rd Violation Description	3rd Violation Statute	
241559936	Other Non-Moving	Suspended History Only	55-50-504	
4th Violation	4th Violation Category	4th Violation Description	4th ViolationStatute	
241559937	Other Non-Moving	No Insurance	55-12-139	
5th Violation	5th Violation Category	5th Violation Description	5th ViolationStatute	
241559937	Other Non-Moving	No Medical Card	65-15-111	

Vehicle Information

Owner First N	ame		C	Dwner M	iddle Name		Ow	ner Last Name			Owner Suffix		
Calvin				Arch			H	enderson					
Address Line	1		A	Address Line 2				City	State	Zip Code	Phone Number		
23220 Parks	hire Court							NEW CANEY	тх	77357	000000000		
Vehicle Year		Vehic	le Make	Vehicle N			e Model		Color				
2005		CHE	V			3500			White				
VIN		License F	Plate Numbe	er	State			Plate Expiration	Body St	yle			
1GCJC3328	5F823970	RNB780	09		Texas			04/2024	Stand	ard Pickup			
HAZMAT?	FMCSA Rep	ortable?			-			Unit Type					
No	Yes							Motor Vehicle	n-Transpo	ort			
Gross Weight							Vehicle C	onfiguration					
10001 To 26	000			Single Unit 3 Plus Axles					i				
Vehicle Opera	tion Type						Cargo Bo	dy Type					
Commercia	ly Owned/Us	sed					Medium	n-Heavy Truck Or	Other				
1st Factor				2nd F	actor			;	3rd Factor				
NONE													
Vehicle Specia	al Use			Туре	of Special Us	se		1	Emergency	/ Use			
No Special	Function								No				
Towed					Towed Loc	ation							
Towed Due	To Other Tha	an Damage	_		Reed's W	recker S	ervice			_			
1st Trailer			1st Trailer I	License I	Plate Informa	ation	2nd Traile	er		2nd Trailer Lic	cense Plate Information		
Semi Trailer	All Types		TN U5821	164 PER	М								
Insurance 1		surance 1 Ty		nsurance	e 1 Carrier				Insuran	ce 1 Start Date	Insurance 1 End Date		
	1	No Insuranc	e										
Insurance 2 Insurance 2 Type Insurance				ance 2 Carrier				Insuran	ce 2 Start Date	Insurance 2 End Date			
Insurance 3 Insurance 3 Type Insurance 3				e 3 Carrier	3 Carrier				ce 3 Start Date	Insurance 3 End Date			

Vehicle Damage and Roadway Characteristics

Most Harmful Event					Fire in Vehicle
Motor Vehicle-In-Transport On Sa	ame Roadway				No
Events 1	Even	ts 2		Events 3	
Cross Center Line	Mo	tor Vehicle-In-Transport On San	ne Roadway		
Events 4	Even	ts 5		Events 6	
Point of First Impact	Exter	nt of Damage		Officer Damage Estima	ate
Left Side-Center	Dis	abling Damage		Greater Than Thresh	nold
Areas of Vehicle Damage Left Side-Center				-	
Travel Direction East	Traveling On 40				
Trafficway Flow		Roadway Surface Type	Numb	per of Travel Lanes	
Two-Way Divided With Traffic Ba	rrier	Asphalt	Two	Lanes	
Trafficway Hazards					
None					
Traffic Control Devices	Traffi	c Control Device Functioning		Roadway Route Signin	g
No Control	No	Controls		Interstate	
Roadway Surface Conditions	Road	way Character Alignment		Roadway Character Pr	ofile
Dry	Cui	rve Left		Downhill Grade	
Speed Limit Access cor	ntrol				
70 Full Cont	rol Only Ramp Entry	and Exit			

Commercial Carrier Information

US DOT	Carrier N	ame			Carr	ier Type			ICC	МС	TN DOS
0000000	Unknov	vn			Int	rastate					TNI036d10100
Total Axles #	al Axles # Address Line 1			Address Line 2				State Zip		Zip Code	Phone Number
4 Unknown				_	_	UNKNC	OWN	ТХ		00000	000000000
1st Hazardous Materials HAZMAT Class		HAZMAT Class	Placard	Placard #	Rele	Released Hazardous Materials Relea			ease	d	
2nd Hazardous Materials HAZMAT Class			Placard	Placard #	Rele	ased	Hazardous Materia	ls Rel	ease	d	
3rd Hazardous Materials HAZMAT Class			Placard	Placard #	Rele	ased	Hazardous Materia	ls Rel	ease	d	

Vehicle Number	Number of Occupants	Driver Presence
2	1	Driver Operated

Driver Information

First Name	Mi	iddle Initial	l	Last Name					Suffix	Date Of Birth		Age
Pardeep				Singh						12/25/2000		23
Address Line 1		Address	Line 2			City		Stat	te		Zip (Code
30 A Chestnut St						CARTERET		N.	J		07	800
Phone Number	Race				Ethr	nicity			Gender			
9293940022		(Americar Eskimo)	n, Cana	dian, Alaskan,	No	n-Hispanic			м			
Drivers License Number	Drivers	License Sta	ate		Expi	ration Date	Driver	s License	Class	Drivers Lice	nse St	tatus
S44906160012001	NJ				202	25	Α		_	Valid		
Safety Equipment					Airba	ag			Seat Posi	ition		
Shoulder And Lap Belt Use	ed				Air	Bag Available-	No Deplo	yment	Front S	eat-Left Side		
Endorsement 1	Complied	With	Endors	ement 2		Complied With	Er	dorsemer	nt 3	Com	plied \	Nith
Restriction 1	Complied	With	Restric	tion 2		Complied With	Re	estriction 3	}	Com	plied \	With
Ejected	Ej	ection Path	1				Trapped/	Extricated				
Not Ejected							Not Tra	pped				
Injury Code	Medical Tra	nsport	Ambu	ulance/Hospital						EMS	8 Run‡	#
No Injury	Not Trans	ported										
Incident Responder?			Inciden	it Responder Type								
No												

Driver Conditions and Actions

Hit and Run	Driver/Vehicle Mar	neuver	Distraction Action			Distraction Source
No Hit And Run	Negotiating A C	urve	Not	Distracted		
Driver's 1st Condition		Driver's 2nd Condition	٦		Driver's 3	rd Condition
Appeared Normal						
Driver's 1st Action				Drivers 2nd Action		
None						
Driver's 3rd Action		Driver's 4th Action			Driver's	5th Action

Alcohol and Drugs

U						
Officer Suspect Alcohol Us	se	Determination Method		Alcohol Test Status		
No		Observed		Test Not Given		
1st Alcohol Test Type	1st Alcoh	ol Test Result	2nd Alcohol Test Ty	ре	2nd Alcohol	Test Result
Officer Suspect Drug Use		Determination Method		Drug Test Status		
No		Observed		Test Not Given		
1st Drug Test Type	1st Drug Test Result	2nd Drug Test Type	2nd Drug Test Resu	It 3rd Drug Tes	t Type	3rd Drug Test Result

Driver Violations

1st Violation	1st Violation Category	1st Violation Description	1st Violation Statute
2nd Violation	2nd Violation Category	2nd Violation Description	2nd Violation Statute
3rd Violation	3rd Violation Category	3rd Violation Description	3rd Violation Statute
4th Violation	4th Violation Category	4th Violation Description	4th ViolationStatute
5th Violation	5th Violation Category	5th Violation Description	5th ViolationStatute

Vehicle Information

Owner First N	lame		C	wner M	iddle Name	Owner Last Name					Owner Suffix			
Golden	_						1	rucking Llc		Ctata Zin Cada Dhana Numha				
Address Line	-		A	ddress I	Line 2			City	State	Zip Code	Phone Number			
30 A Chest	nut St					-		CARTERET	NJ					
Vehicle Year		Vehic	e Make			Vehicle	e Model		Color	Color				
2023		KW				tt			Green					
VIN		License P	late Number	r	State			Plate Expiration	Body St	yle				
1XKYD49X	7PJ163073	AY605Z			New Jersey	y		03/2025		Truck-Tractor (Cab only or any number o trailing units)				
HAZMAT?	FMCSA Rep	ortable?			•			Unit Type						
No	Yes							Motor Vehicle	In-Transpo	ort				
Gross Weigh	t						Vehicle Configuration							
26001 or G	reater						Tractor Semi-trailer							
Vehicle Oper	ation Type						Cargo Bo	dy Type						
Commercia	ally Owned/Us	sed					Van En	closed-Box						
1st Factor	-			2nd F	actor				3rd Factor					
NONE														
Vehicle Spec	ial Use			Type	of Special Use	;			Emergency	Use				
No Special				51	•				No					
Towed					Towed Locat	tion								
Towed Due	To Vehicle D	amage			M & W (Ow	ner Ar	ranged)							
1st Trailer			1st Trailer L	icense l	Plate Informati	ion	2nd Trailer 2nd Trailer License				ense Plate Information			
Semi Traile	r All Types		ME 26740	8E 02/2	032									
Insurance 1	In	surance 1 Ty	rpe Ir	surance	e 1 Carrier				Insuran	ce 1 Start Date	Insurance 1 End Date			
981530234	,	Vehicle	-	Progressive					5/21/2	024	5/21/2025			
Insurance 2	In	surance 2 Ty	rpe Ir	surance	e 2 Carrier				Insuran	ce 2 Start Date	Insurance 2 End Date			
Insurance 3	In	Insurance 3 Type Insurance 3 Carrier			e 3 Carrier		Insurance 3 Start Date			Insurance 3 End Date				

Vehicle Damage and Roadway Characteristics

Most Harmful Event				Fire in Vehicle
Motor Vehicle-In-Transport On Same Ro	adway			No
Events 1	Events 2		Events 3	•
Ran Off Road-Right	Motor Vehicle-In-Transport On Same	Roadway	Ditch	
Events 4	Events 5		Events 6	
Point of First Impact	Extent of Damage		Officer Damage Estima	ite
Front End	Disabling Damage		Greater Than Thresh	nold
Areas of Vehicle Damage				
Front End, Right Side-Far Front				
Travel Direction Trav	veling On			
East 40				
Trafficway Flow	Roadway Surface Type	Numb	er of Travel Lanes	
Two-Way Divided With Traffic Barrier	Asphalt	Two	Lanes	
Trafficway Hazards				
None				
Traffic Control Devices	Traffic Control Device Functioning		Roadway Route Signing	g
No Control	No Controls		Interstate	
Roadway Surface Conditions	Roadway Character Alignment		Roadway Character Pro	ofile
Dry	Curve Left		Downhill Grade	
Speed Limit Access control				
70 Full Control Only	y Ramp Entry and Exit			

Commercial Carrier Information

US DOT	Carrier N	Carrier Name					Carrier Type				TN DOS
02538005	Dhadd	Dhadda Trucking Inc								TNI031d30265	
Total Axles #	Address Line 1 Address Line 2				City St			ate Zip Code		Phone Number	
5	42 Clau	uss St		CARTERET				NJ		07008	7325856861
1st Hazardous Mat	erials	HAZMAT Class	Placard	Placard #	Rele	eased	Hazardous Materials Released				
2nd Hazardous Ma	iterials	HAZMAT Class	Placard	Placard #	Released		Hazardous Materials Released				
3rd Hazardous Ma	terials	HAZMAT Class	Placard	Placard #	Rele	eased	Hazardous Materia	ls Rel	ease	d	

Collision Witnesses

First Name	Middle Name	Last N	lame	Suffix	Date Of Birth	
James	_	Irby	_			_
Address Line 1	Address Line 2		City	S	tate	Zip Code
1291 S Walnut Ave			Cookeville		TN	38501
Phone Number						
9312678298						

Narrative

Vehicle 1 was traveling east in lane 2 negotiating a curve to the left on a slight downhill grade on Interstate 40 around the 274 mile marker. Vehicle 2 was traveling east in lane 2 behind Vehicle 1 negotiating a curve to the left on a slight downhill grade on Interstate 40 around the 274 mile marker. Due to the weight of the load Vehicle 1 was hauling, Vehicle 1 lost control of its trailer and it started to fishtail. Vehicle 1 jackknifed and came to a final rest in lane 2, partially lane 1, on the right shoulder facing north. Vehicle 2 swerved to avoid Vehicle 1. Vehicle 2 ran off the right side of the roadway and struck Vehicle 1's trailer on the right shoulder. Vehicle 1's trailer flipped onto its right side after impact with Vehicle 2. Vehicle 2 came to a final rest in the ditch facing east.

Vehicle 1 sustained no damage, only the trailer.

Registered owner of Vehicle 1's trailer is Roof Construction located at 308 Santa Rosa Drive in Old Hickory, TN 37138.



Not To Scale