

01-09-096945

D.P.S. USE ONLY

Page #

SOUTH CAROLINA TRAFFIC COLLISION REPORT FORM

# Of Units

Amended - Attach Copy of Original Report

Notified

Arrived

Of: 1

TR-310 (Rev 01/2001)

Corrected

2230

2253

Date	Time	County	1- Interstate 2- US Primary 3- SC Primary	4- Secondary 5- County 6- Other	Collision Location (Rt. # / Name)	0- Main 2- Alternate 5- Spur	6- Connection 7- Business	Miles:	Dir.:	(In) Near City or Town of:
9-18-2009	2255	26			5 PRIVATE PROPERTY				(In) NE	Myrtle Beach

Lane # / Dir.	Distance Offset	Direction	1- Interstate 2- US Primary 3- SC Primary	4- Secondary 5- County 6- Other	Base Intersection (Rt. # / Name)	0- Main 2- Alternate 5- Spur	6- Connection 7- Business 9- Other	ASRU Code	MP/Grd
					863 South Ocean Blvd				
R.R. Id.	From	Ramp Only	To	1- Interstate 2- US Primary 3- SC Primary	4- Secondary 5- County 6- Other	Second Intersection (Rt. # / Name)	0- Main 2- Alternate 5- Spur	6- Connection 7- Business 9- Other	Latitude
	N E S W	1- Entrance 2- Exit	N E S W			PARKING LOT			33° 21' 40.50"
									Longitude
									78° 53' 44.30"

Z-061690	Driver/Pedestrian's Full Name	Z-061691	Pedestrian's Full Name
	WATKINS / PENDERBASS / KIMBERLEY		Unit # 2 legally parked.

Unit #	Sex	Race	Street	Unit #	Sex	Race	Street
1	F	W	1100 PINE RIDGE RD	2			
Birth Date	City, State, & Zip			Birth Date	City, State, & Zip		
12-25-1977	HENDERSON, NC 27537						

State	Driver's License #	Insurance Company	State	Driver's License #	Insurance Company
NC		State Auto			

Year	Body	Vehicle Make	VIN #	Year	Body	Vehicle Make	VIN #
2003	VAN	HONDA	5FNRL1891BB141933	1999	4PS	TOYOTA	JT36N82R2X0135207

State	Year	License Plate #	Owner's D.L. #	State	Year	License Plate #	Owner's D.L. #
NC	2003	W4P 6210		SC	1999	BNQ 631	

Home Telephone	Owner's Full Name	Home Telephone	Owner's Full Name
(919) 606-1909	Jimmy Alton Phillips	(564) 907-4520	DAVENPORT / THOMAS / FLETCHER

Bus. Telephone	Street	Bus. Telephone	Street
( )	1100 PINE RIDGE RD	( )	230 WATKINSBURG CT

Contributed To Collision	City, State, & Zip	Contributed To Collision	City, State, & Zip
Yes	HENDERSON NC 27537	No	SIMPSONVILLE SC 29680

Estimated Speed	Speed Limit	C.D.L. Req. Yes	T/B S Req. Yes	Alc/Drg info (see back) Yes	Estimated Speed	Speed Limit	C.D.L. Req. Yes	T/B S Req. Yes	Alc/Drg info (see back) Yes
10	MP	NA	NA	NA	0	NP	NA	NA	NA

Z-061692	Driver/Pedestrian's Full Name	State	Year	License Plate #	Owner's D.L. #

Unit #	Sex	Race	Street	Home Telephone	Owner's Full Name
Birth Date	City, State, & Zip			Bus. Telephone	Street

State	Driver's License #	Insurance Company	Contributed To Collision	City, State, & Zip
			Yes	

Year	Body	Vehicle Make	VIN #	Estimated Speed	Speed Limit	C.D.L. Req. Yes	T/B S Req. Yes	Alc/Drg info (see back) Yes
				NA	NA	NA	NA	NA

Dir. of Travel:	Unit 1: N S E W	Unit 2: N S E W	Unit 3: N S E W

Unit 1 Dam.	Unit 2 Dam.	Unit 3 Dam.	Prop. Dam. 1	Prop. Dam. 2
\$ -1000-	\$ -1000-	\$ NA	\$ NA	\$ NA

Property Owner/Witness	Property Owner/Witness
NA	NA

Address	Address
NA	

State	Zip	Phone	State	Zip	Phone

Photo:	Describe What Happened (Refer to Units by Number)
Y	Unit # 1 / Driver stated as she

was backing up did not see unit

# 2, unit # 1 then struck unit # 2

as it was parked in the parking

lot.

(Large empty area for notes or signature)

NOTICE - THE TR-310 IS FOR STATISTICAL REPORTING PURPOSES ONLY AND IS A REFLECTION OF THE OFFICER'S BEST KNOWLEDGE, OPINION, AND BELIEF COVERING THE COLLISION BUT NO WARRANT IS MADE AS TO THE FACTUAL ACCURACY THEREOF.

Investigating Officer's Name	Rank	Badge #	Code	Date	Reviewer's Name	Rank	Internal Agency Code
SHANE OWENS	PLT	4075	2600600	9-19-2009		CP	01-09-096945



PRIVATE PROPERTY ACCIDENT  
NO DIAGRAM

