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						DRGIA County E CRASH REPORT							Date Rec.	by GDOT		
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Road of At Its Occurrence Intersection								I								ed Report
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									□Ped □Bike							
☐ Susp	Bike At Fault	Addres	S						BikeAddress Susp At Fault							
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Driver's	License No.		Cla	ss State		Cou	untry	Driver's License No. Class State Country						intry		
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Trailer T	ag #	State		County	Year			Trailer Tag # S		State	state County		Year			
□ Same	as Driver	Owne	r's Last N	lame	First		Middle	Same as Driver Owner's Last Name First Middle							Middle	
Address								Address								
City		Sta	ite		Zip			City State Zip								
Removed By:			☐ Request ☐ List			Removed By:							Request List			
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Traffic-Way Flow: Road Comp.								Traffic-Way Flow: Road Comp						oad Character:		
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Number of Lanes: Posted Spec			-	Device Inoperative:  Yes No												
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	Information #			00648				Citation Information:           Citation #         O.C.G.A. §								
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	Carrier Name:							Carrier N	lame:							
Address			-	City State Zip				Address			-	-			Zip	
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Numer of Collision:       Location at Area of Impact:       Weather:       Burrise Condition:       Light Condition:         NUMER of Collision:       NUMERATION:       NUMERATION:       NUMERATION:       NUMERATION:       NUMERATION:         NUMER of Collision:       NUMERATION:       NUMERATION:       NUMERATION:       NUMERATION:       NUMERATION:       NUMERATION:         NUMERS OF Them Vehicle:       SCORENT ON MUCE INFORMATION:       NUMERATION:       NUMERATION:       NUMERATION:       NUMERATION:         Numer of Collision:       NUMERATION:       SCORENT ON MUCE INFORMATION:       NUMERATION:       Numeration: <td< th=""><th></th><th colspan="12">COLLISION FIELDS</th></td<>		COLLISION FIELDS											
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GDOT-523 (07/2023) MAIL TO: Georgia Department of Transportation, CRASH REPORTING UNIT, 935 East Confederate Ave., Atlanta, GA 30316-2590