State of Connecticut
Department of Public Safety / Division of State Police

# ACCIDENT INFORMATION SUMMARY

State Police Troop: G
Case Number: DPS- 05-034261
Notations: Traffic: L Weather: R Lane 2 of 2 Direction of Travel: N (S) E W

Investigating Trooper: J. Ortiz #1123 Date: 7/13/05 Time: 0824

No. & Type of Veh's Involved: 3 Car (Passenger Car, Truck, Bus, Etc.)
Related Information: — (Pedestrian, Pole, Bridge Abutment, Etc)

Town / City: Trumbull
Location of Accident: Rt 8 S/B X10

Utility Pole Name & Number (If Applicable):
Other (Specify):

**Oper #1:** Oconnell, Ryan C
DOB: 7-17-72 Gender: ☒ M ☐ F
Address: 671 Courtland Ave.
Town: Bridgeport State: Ct. Zip: 06605
Oper. Lic. # 197403213 Type: 2 State: Ct.
Owner #1:
Address: Same
Registration Plate: 375-PFG State: Ct.
Make: Honda Model: Accord 4dr Year: 03
VIN: 1HGCM56683A107243
Seatbelt(s): ☐ Yes ☐ No Airbag: ☒ Yes (Deployed ☒ Y ☐ N) ☐ No ☐ N/A
Insurance Company:
Insurance Policy #:
Injuries: Head Injuries, Ribs, internal
Vehicle Damage: Total Heavy left Side
Vehicle Towed: ☐ No ☒ Yes, midtown
Occupant(s): [Name / DOB / Address / Position in Veh]

* Expired USAA # 007994159C. Chek?

**Oper #2:** Sabol, Nancy B
DOB: 9-10-38 Gender: ☐ M ☒ F
Address: 406 Canoe Brook
Town: Huntington State: Ct. Zip: 06484
Oper. Lic. # 211164552 Type: 2 State: Ct
Owner #2:
Address: Same
Registration Plate: SABOL State: Ct.
Make: Miss. Model: Alt. 4dr Year: 03
VIN: 1N4AL11ES3C137813
Seatbelt(s): ☒ Yes ☐ No Airbag: ☐ Yes (Deployed ☐ Y ☐ N) ☐ No ☐ N/A
Insurance Company: Hartford Ins midwest
Insurance Policy #: 55-PHE322859-223600
Injuries: none
Vehicle Damage: front End
Vehicle Towed: ☐ No ☒ Yes, midtown
Occupant(s): [Name / DOB / Address / Position in Veh]

Sabol, Melanie 9/22/82
20 Sheehy la.
Shelton Ct. 926-6043

**Oper #3:** Acevedo, Marilyn
DOB: 062670 Gender: ☐ M ☒ F
Address: 100 Manila St
Town: Bpt State: Ct. Zip: 06610
Oper. Lic. # 187087053 Type: 2 State: Ct
Owner #3:
Address: Same
Registration Plate: 224TUD State: Ct.
Make: Jeep Model: Lib. 4dr Year: 02
VIN: 1J8GL48K62W223183
Seatbelt(s): ☒ Yes ☐ No Airbag: ☒ Yes (Deployed ☐ Y ☐ N) ☐ No ☐ N/A
Insurance Company: Geico
Insurance Policy #:
Injuries:
Vehicle Damage: Rollover
Vehicle Towed: ☐ No ☐ Yes, midtown
Occupant(s): [Name / DOB / Address / Position in Veh]

**Oper #4:**
DOB: Gender: ☐ M ☐ F
Address:
Town: State: Zip:
Oper. Lic. # Type: State:
Owner #4:
Address:
Registration Plate: State:
Make: Model: Year:
VIN:
Seatbelt(s): ☐ Yes ☐ No Airbag: ☐ Yes (Deployed ☐ Y ☐ N) ☐ No ☐ N/A
Insurance Company:
Insurance Policy #:
Injuries: Megan Murphy, [illegible]
Vehicle Damage:
Vehicle Towed: ☐ No ☐ Yes,
Occupant(s): [Name / DOB / Address / Position in Veh]

262-2881

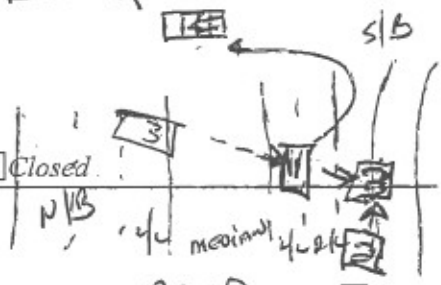
DPS-38-C (Rev. 07/'02)

Page #1 - Troop Copy (Complete Reverse Side) Additional Pages - Operator's Copy

## Brief Description of Accident

Veh#1 was traveling on Rt8 S/B X10 L/L.
Veh#2 was traveling on Rt8 S/B X10 off-Ramp.
Veh#3 was traveling on Rt8 N/B S/O X11.

Oper Veh#3 lost Control of her Vehicle. She Swerved onto the median. She Continued and hit Veh#1 on the S/B L/L. Veh#3 rolled over and Continued towards the X10 offramp where She was hit by Veh#2.




*This investigation is:* ☐ *Open / Continuing* ☐ *Closed*

**MEDICAL ATTENTION:**

| | | | |
|---|---|---|---|
| #1 Ambulance | ☑ Yes, Company AMR ☐ No | #2 Ambulance | ☑ Yes, Company AMR ☐ No |
| Patient Name: | Ryan Oconnell | Patient Name: | Marilyn Acevedo |
| Hospital | Bpt | Hospital | Bpt |
| Injuries | Ribs, Head, Internal | Injuries | Body pain |
| #3 Ambulance | ☐ Yes, Company ____ ☐ No | #4 Ambulance | ☐ Yes, Company ____ ☐ No |
| Patient Name: | | Patient Name: | |
| Hospital | | Hospital | |
| Injuries | | Injuries | |

**FATALITIES:** ***Do Not Release Unless Next of Kin Notified***

| | | | |
|---|---|---|---|
| Name | | Name | |
| Next of Kin Notified? | ☐ Yes ☐ No | Next of Kin Notified? | ☐ Yes ☐ No |
| Name | | Name | |
| Next of Kin Notified? | ☐ Yes ☐ No | Next of Kin Notified? | ☐ Yes ☐ No |

**ENFORCEMENT ACTION:** UNDER Investigation.

| | | | |
|---|---|---|---|
| Arrested | | Arrested | |
| Warned | | Warned | |

**Supervisor's Approval Required:** Signature [signature] # 274 Date 7/13/05