

Elliot Drive – Ribicoff Cottages

To: Shane Draughn
FROM: Christopher O. Granatini, P.E.
COPY:
DATE: July 15, 2014

Tighe & Bond updated our traffic model to include the Elliot Drive intersection in Hamden in the 2014 Existing, 2015 Background and 2015 Combined Conditions Analysis. Elliot Drive is a local residential cul-de-sac roadway with seven homes in the Town of Hamden. Based upon the *Institute of Transportation Engineering (ITE), Trip Generation, 9th Edition, 2012* Land Use Code – 210 Single Family Detached Housing it is estimated that Elliot Drive generates four vehicle trips during the weekday morning peak hour (1 entering and 3 exiting) and seven vehicle trips during the weekday afternoon peak hour (4 entering and 3 exiting).

In the 2014 Existing Conditions Analysis, Elliot Drive is configured as a T-intersection with Woodin Street and operates at a LOS A during both the weekday morning and afternoon peak hours, with a delay of 9.7 and 9.3 seconds respectively. For the 2015 Background and 2015 Combined Conditions, Elliot Drive is aligned opposite the proposed Wilmot Road approach. Elliot Drive operates at a LOS B in the 2015 Background, with a delay of 11.2 and 11.1 seconds during the morning and afternoon peak hours, respectively. During the 2015 Combined Conditions the intersection operates at a LOS B with a 10.8 and 11.1 second average delay during the morning and afternoon peak hours.

The Elliot Drive approach and the Wilmot Road connection have no impact to the Woodin Street operations during the peak hours. Woodin Street continues to operate with LOS A during both the weekday morning and afternoon peak hours in the 2015 Background and Combined Conditions.

Ribicoff Cottages – Stop Sign Warrant

TO: Housing Authority of New Haven
FROM: Christopher O. Granatini, P.E.
DATE: August 28, 2014

Tighe & Bond reviewed the unsignalized intersection of Woodin Street and Belden Street in Hamden with regards to the proposed addition of Augustine Street, a new local roadway connection approved by the City of New Haven as part of the redevelopment of the Ribicoff Cottages. The addition of Augustine Street will convert this intersection from a three-leg intersection to a four-leg intersection. Augustine Street will provide both vehicular and pedestrian access to Woodin Street from the proposed Ribicoff Cottages and West Rock development area.

Travel Speeds and Sight Distances

Woodin Street is classified by the Connecticut Department of Transportation (CTDOT) as an urban minor arterial. It runs east-west in southwestern Hamden, near the New Haven city line, connecting Wintergreen Avenue and Dixwell Avenue (Route 10). The speed limit along Woodin Street, in the vicinity of the development is 25 miles per hour, with one travel lane in each direction.

An automatic traffic recorder (ATR) was placed along Woodin Street between West Side Drive and Belden Street in November 2013. This ATR recorded traffic volumes and travel speeds along Woodin Street. A review of the data exhibits an 85th percentile speed of 40 miles per hour. The 85th percentile speed is defined as the speed at which 85 percent of the traffic is traveling at or below. The 85th percentile speed of 40 miles per hour is 15 miles per hour above the posted speed limit.

Intersection sight distances were evaluated at the proposed four-leg intersection of Augustine Street and Belden Street with Woodin Street, to determine if adequate sight lines for vehicles exiting either Augustine Street or Belden Street are provided.

Since the Town of Hamden does not explicitly define intersection sight distance requirements the Connecticut Department of Transportation (CTDOT) Highway Design Manual was consulted to determine intersection sight distance requirements. According to the Connecticut Department of Transportation Highway Design Manual (2003), the intersection sight distances required for passenger vehicles based on 40 miles per hour travel speeds on a two-lane (one travel lane in each direction) roadway are 445 feet to the right and left. The intersection sight distances from the existing Belden Street approach is approximately 225 feet based on a review of existing condition mapping. The proposed sight distances from Augustine Street are approximately 225 feet in both directions. As noted the existing Belden Street intersection sight distance is below minimum CTDOT published requirements. However, based on a review of the accident data presented in our previous memorandum related to roadway safety along Wooding Street there is no reported accident history that indicates the less than minimum sight distance poses an existing safety concern.

RECEIVED

AUG 29 2014

TOWN OF HAMDEN
ENGINEERING DEPARTMENT

Recommended Improvements

While existing sight distances do not appear to be problematic for existing drivers, it is acknowledged that minimum intersection sight distance requirements are not met. Therefore, to address this condition for the existing and proposed condition, the existing side street stop control at the Belden Street intersection is proposed to be converted to all-way stop control with stop signs on each approach and advance stop sign ahead warning signs on the Woodin Street approaches in accordance with the Manual on Uniform Traffic Control Devices (MUTCD). The revised intersection traffic control will facilitate intersection turning movements under protected right of way operations. Furthermore, pedestrian crossings are proposed at this intersection and the all-way stop control will facilitate pedestrian crossing activity. These improvements will also benefit Belden Street traffic, which currently operates under side street stop control only. Additionally, an important benefit of the four-way stop sign control at Belden Street and Augustine Street, is a reduction of travel speeds along Woodin Street.

Justification

Manual on Uniform Traffic Control Devices – Stop Sign Warrants

In accordance with MUTCD standards for multi-way stop control applications, all-way stop control may be considered for "Locations where a road user, after stopping, cannot see conflicting traffic and is not able to negotiate the intersection unless conflicting cross traffic is also required to stop." The less than required sight distances due to the existing roadway geometry and topography of Woodin Street, to the east of the current intersection with Belden Street, combined with operating speeds above the posted speed limit along Woodin Street, justify the installation of all-way stop control to improve traffic safety at this location.

All-Way Stop Control Traffic Operations

Analysis of the weekday morning and afternoon peak hours show that the proposed all-way stop controlled intersection would operate efficiently, with all approaches operating at LOS A in the combined condition with the Augustine Street connection. It is anticipated that the maximum, 95th percentile queue would be less than one vehicle in length and the delay along all approaches less than ten seconds during the weekday morning and afternoon peak hours.

Summary

As noted above, there are several benefits that will be realized through the implementation of all-way stop control at the proposed intersection of Belden Street and Augustine Street at Woodin Street. In addition to mitigating the existing less than required intersection sight distance from the Belden Street approach, the stop sign will also reduce travel speeds along Woodin Street. Furthermore, the all-way stop sign control will facilitate pedestrian crossing activity at this intersection. These benefits will be realized with a negligible effect on traffic operations along Woodin Street

Accident Summary – Ribicoff Cottages

TO: Shane Draughn
FROM: Christopher O. Granatini, P.E.
COPY:
DATE: August 11, 2014

Tighe & Bond obtained vehicle collision history from the Hamden Police Department from January 2011 through December 2013 at two study area intersections along Woodin Street, Woodin Street at Belden Street and Woodin Street at Pine Rock Avenue, and the Woodin Street corridor between Fawn Ridge Drive and Thorpe Drive. During the three-year period at the two study area intersections, there were six reported motor vehicle collisions. All six of these collisions occurred at the Woodin Street at Pink Rock Avenue signalized intersection. There were two collisions in 2013, three collisions in 2012 and one collision in 2011, none of which resulted in an injury as a result of the motor vehicle collision. Three of the collisions were rear end type with the remaining three turning opposite direction, sideswipe opposite direction and fixed object collisions. This collision history shows typical collision types for a signalized intersection.

In addition, during the same three-year period two collisions occurred along Woodin Street between Fawn Ridge Drive and Thorpe Drive. Both occurred at the Woodin Street at Fawn Ridge Drive intersection, one turning opposite direction collision in 2012 and one fixed object collision in 2011. Both collisions were property damage only.

Based on this review of the data, the Woodin Street corridor does not exhibit a pattern of incidents that would indicate existing safety deficiencies within the traffic study area.

A complete set of the reports provided by the Hamden Police Department is attached.

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 REV.01/01

GPS READINGS: Latitude: 41.346215
Time: 00:00 Longitude: -72.945603



FOR DOT USE ONLY

DATE OF ACCIDENT 0 1 2 6 1 1	MILITARY TIME 1 8 4 2	ACCIDENT SEVERITY <input type="checkbox"/> Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO	# VEHICLES INVOLVED 2	PAGE # 1 of 2	POLICE CASE NUMBER A 110003962
TOWN OR CITY NAME HAMDEN		TOWN CODE 0 6 2	ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street Name or Route #) PINE ROCK AVE at WOODIN		
IF NOT AT INTERSECTION 1. MEASURE DISTANCE (Check Appropriate Boxes) <input type="radio"/> Feet <input type="radio"/> Tenths <input type="radio"/> Meters <input type="radio"/> Kilometers		2. DIRECTION <input type="radio"/> North <input type="radio"/> East <input type="radio"/> South <input type="radio"/> West	3. NAME OF NEAREST INTERSECTING STREET, TOWN LINE OR MILE MARKER of Accident Occurred: <input type="checkbox"/> On Private Property <input type="checkbox"/> Parking Lot		

- 02 H
- 2 S
- 43 T
- 11 J
- 12 J
- 1 U
- 11 K
- 12 K
- 1 J
- 1 J
- 1 J
- 11 AA
- 12 AA
- 13 AA
- 14 AA

TRAFFIC UNIT # 1 <input checked="" type="checkbox"/> Vehicle <input type="checkbox"/> Pedestrian <input type="checkbox"/> Non-Contact Vehicle	OPERATOR # or PEDESTRIAN NAME (Last, First, Middle Initial) ONORATO, Jason	ADDRESS (Street Number and Name) 47 Hayward Ave	PROPER LICENSE CLASS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
CITY OR TOWN Hamden	STATE CT	ZIP CODE	SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F
OPERATOR LICENSE # 147763056	STATE CT	DATE OF BIRTH 0 2 2 5 8 6	
OWNER'S NAME (Enter SAME if Owner is Operator) SAME AS ABOVE			
ADDRESS (Street Number and Name) SAME AS ABOVE			
CITY OR TOWN SAME AS ABOVE	STATE	ZIP CODE	BODY TYPE
REGISTRATION # 493UWN	STATE CT	VEHICLE YEAR AND MAKE 1999 GMC	
VEHICLE IDENTIFICATION NUMBER 1 G K E K 1 3 R 6 X J 7 9 7 9 4 5			
CARRIER NAME			
CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)			
SOURCE OF CARRIER NAME <input type="checkbox"/> Shipping Papers/Trip Manifest <input type="checkbox"/> Driver <input type="checkbox"/> Side of Vehicle	<input type="checkbox"/> USDOT # <input type="checkbox"/> ICCMC #		
GROSS VEHICLE WEIGHT RATING #	HAZARDOUS MATERIAL PLACARD REQUIRED? <input type="checkbox"/> Yes <input type="checkbox"/> No 4 Digit # DISPLAYED? <input type="checkbox"/> Yes <input type="checkbox"/> No 1 Digit #		
HAZARDOUS CARGO RELEASED? <input type="checkbox"/> Yes <input type="checkbox"/> No	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> None <input checked="" type="checkbox"/> Arrest <input checked="" type="checkbox"/> Written Warning <input type="checkbox"/> Verbal Warning		
STATUTE OR ORDINANCE #S 14-218a	SUBJECT OF ACTION <input checked="" type="checkbox"/> Operator <input type="checkbox"/> Carrier <input type="checkbox"/> Owner <input type="checkbox"/> Pedestrian		
AUTOMOBILE INSURANCE -- NAME -- POLICY # GEICO 4110124304			
PARTS OF VEHICLE DAMAGED 3311			
VEHICLE TOWED TO: <input type="checkbox"/> TOWED DUE TO DAMAGE			

TRAFFIC UNIT # 2 <input checked="" type="checkbox"/> Vehicle <input type="checkbox"/> Pedestrian <input type="checkbox"/> Non-Contact Vehicle	OPERATOR #1 or PEDESTRIAN NAME (Last, First, Middle Initial) Shi, Guang Y	ADDRESS (Street Number and Name) 134 Colonial Pl Fl 1	PROPER LICENSE CLASS <input type="checkbox"/> Yes <input type="checkbox"/> No
CITY OR TOWN New Rochelle	STATE NY	ZIP CODE 10801	SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F
OPERATOR LICENSE # 321415695	STATE NY	DATE OF BIRTH 0 4 1 8 6 0	
OWNER'S NAME (Enter SAME if Owner is Operator) SAME AS ABOVE			
ADDRESS (Street Number and Name) SAME AS ABOVE			
CITY OR TOWN SAME AS ABOVE	STATE	ZIP CODE	BODY TYPE
REGISTRATION # DRW2568	STATE NY	VEHICLE YEAR AND MAKE 2003 Lexus	
VEHICLE IDENTIFICATION NUMBER J T J B T 2 O X 5 3 0 0 2 3 3 6 4			
CARRIER NAME			
CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)			
SOURCE OF CARRIER NAME <input type="checkbox"/> Shipping Papers/Trip Manifest <input type="checkbox"/> Driver <input type="checkbox"/> Side of Vehicle	<input type="checkbox"/> USDOT # <input type="checkbox"/> ICCMC #		
GROSS VEHICLE WEIGHT RATING #	HAZARDOUS MATERIAL PLACARD REQUIRED? <input type="checkbox"/> Yes <input type="checkbox"/> No 4 Digit # DISPLAYED? <input type="checkbox"/> Yes <input type="checkbox"/> No 1 Digit #		
HAZARDOUS CARGO RELEASED? <input type="checkbox"/> Yes <input type="checkbox"/> No	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> None <input type="checkbox"/> Arrest <input type="checkbox"/> Written Warning <input type="checkbox"/> Verbal Warning		
STATUTE OR ORDINANCE #S	SUBJECT OF ACTION <input type="checkbox"/> Operator <input type="checkbox"/> Carrier <input type="checkbox"/> Owner <input type="checkbox"/> Pedestrian		
AUTOMOBILE INSURANCE -- NAME -- POLICY # Mercury Casualty 3101011000032815			
PARTS OF VEHICLE DAMAGED 3292			
VEHICLE TOWED TO: <input type="checkbox"/> TOWED DUE TO DAMAGE			

- R 05
- A 4
- B 3
- C 1
- D 1
- E 1
- F 4
- G 2
- H 02
- I 3
- J 31
- J 22
- J 22
- J 22
- V 1
- W 10
- X 2
- Y 2
- Z 2
- AA 21
- AA 22
- AA 23
- AA 24

L	M	N		Date of Birth	O	P	Q
1	1	N	01	TRAFFIC UNIT # 1 OPERATOR OR PEDESTRIAN #	4	2	1 1
2	2	N	01	TRAFFIC UNIT # 2 OPERATOR OR PEDESTRIAN #	4	2	1 2
3				Month Day Year			3
4				Month Day Year			4
5				Month Day Year			5
6				Month Day Year			6
7				Month Day Year			7
8				Month Day Year			8

Police Case Number
1100003962

ACCIDENT DIAGRAM	INDICATE NORTH
MAP NOT TO SCALE	
TRAFFIC UNIT # 1 TRAVELING North On Pine Rock Avenue	TRAFFIC UNIT # 2 TRAVELING South On Pine Rock Avenue

Operator #2 stated he was stopped for the red traffic south bound on Pine Rock Ave at Woodin Street, when motor vehicle #1 made contact as it passed.

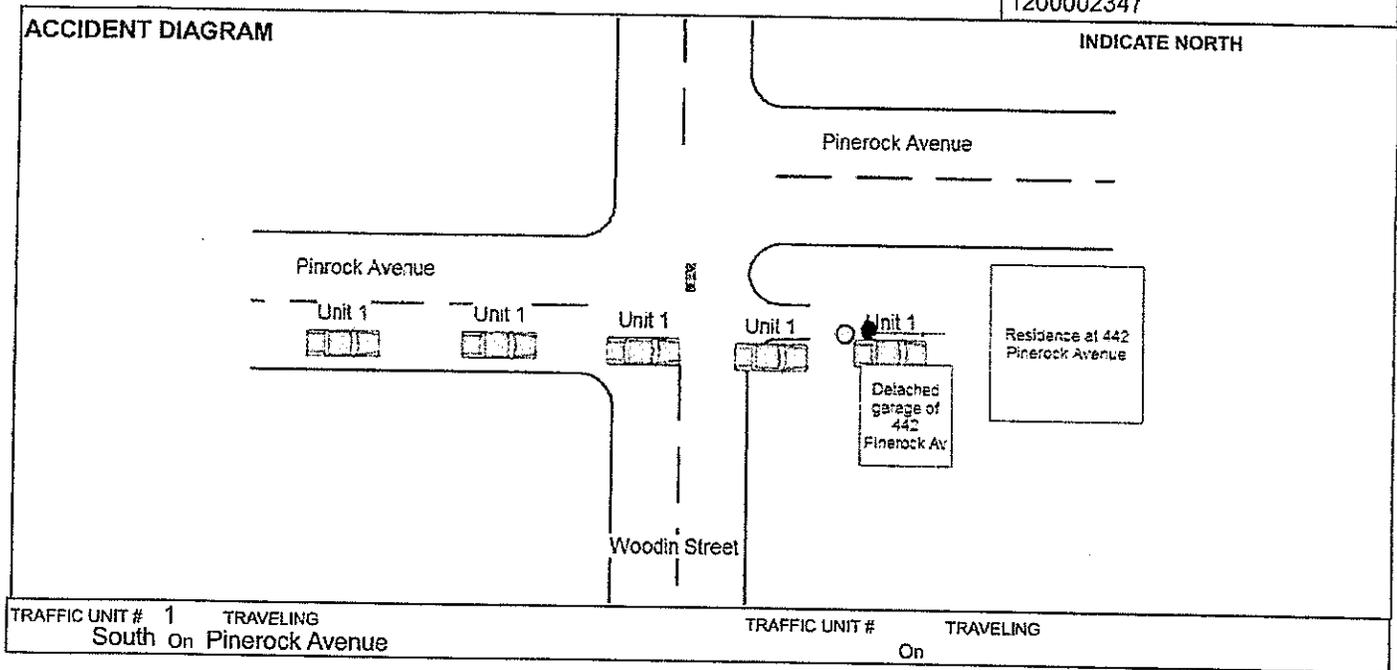
Operator #1 stated he was traveling north bound on Pine Rock Avenue and negotiating the off set of the road at Woodin Street, when he lost control on the snow/slush roadway.

Operator #1 stated that as he was crossing Woodin Street, his motor vehicle fish tailed and his back end hit the left side of motor vehicle #2.

Both motor vehicles received significant damage, with no injuries reported.

Operator #1 is found at fault for traveling too fast for the road conditions, in violation of C.G.S. #14-218a.

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE				
	NAME AND ADDRESS OF PROPERTY OWNER				
	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE				
	NAME AND ADDRESS OF PROPERTY OWNER				
RANK AND SIGNATURE OF INVESTIGATING OFFICER Patrol Officer Degrand, Stephen	OFFICER ID 0084	POLICE AGENCY IDENTIFICATION Hamden	REPORT DATE 02/03/2011	CASE STATUS	SUPERVISOR



(A) NARRATIVE SUMMARY:

Traffic Unit #1 was traveling southbound on Pinerock Avenue approaching the intersection of Woodin Street /Pinerock Avenue. The operator of Traffic Unit #1 lost control of the vehicle as a result of a medical problem (seizure). Traffic Unit #1 continued southbound through the intersection of Woodin Street and Pinerock Avenue. Traffic Unit #1 then left the roadway and continued southbound through the residential property and driveway of 442 Pinerock Avenue. Traffic Unit # 1 then collided with a stone lamp post, stone wall, shrubbery and detached garage of 442 Pinerock Avenue. The operator of Traffic Unit #1, Robert Marzullo (DOB 04-04-1949) was found to be suffering from a seizure as a result of a medical condition. He was treated by HFD EMS and AMR Paramedic on scene and later transported to Yale NH Hospital because of the medical condition. He was not injured as a result of the motor vehicle accident.

The passenger of Traffic Unit #1, Suzanne Marzullo-Williams indicated that she was not injured. She indicated that as Operator #1 (R. Marzullo) was operating the vehicle on Pinerock Ave he began to suffer from a seizure and lost control of the vehicle. She indicated that the vehicle then went off the roadway and collided with the residential property and garage on Pinerock Avenue.

I located a witness to the accident, Nancy Shea. She indicated that she observed Traffic Unit #1 traveling at an elevated rate of speed southbound on Pinerock Avenue. She indicated that as Traffic Unit #1 approached the intersection of Pinerock Ave and Woodin Street, the vehicle failed to negotiate a turn of the intersection, continued southbound leaving the roadway and colliding with a stone wall and garage on the property of 442 Pinerock Avenue.

The property owner of 442 Pinerock, Fernando Matos (02-01-1976) was located and advised of the property

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE Heavy front end, right and left side damage.					
	NAME AND ADDRESS OF PROPERTY OWNER Marzullo, Robert 191 Fairview Ave Hamden, CT 065183145					
	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
RANK AND SIGNATURE OF INVESTIGATING OFFICER Patrol Officer Onofrio, William C. .		OFFICER ID 0078	POLICE AGENCY IDENTIFICATION Hamden	REPORT DATE 01/18/2012	CASE STATUS Closed	SUPERVISOR

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 REV.01/01



GPS READINGS: Latitude: 41.3461
Time: 00:00 Longitude: -72.9461

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DATE OF ACCIDENT: 01/18/12 MILITARY TIME: 1515 ACCIDENT SEVERITY: Fatal Injury PDO # VEHICLES INVOLVED: 1 PAGE #: 3 of 4 POLICE CASE NUMBER: A 1200002347

TOWN OR CITY NAME: Hamden TOWN CODE: 062 ACCIDENT OCCURRED ON: PINE ROCK AVE AT ITS INTERSECTION WITH: WOODIN

IF NOT AT INTERSECTION: 1. MEASURE DISTANCE (Check Appropriate Boxes) Feet Tenths Meters Kilometers 2. DIRECTION: North East South West 3. NAME OF NEAREST INTERSECTING STREET, TOWN LINE OR MILE MARKER of Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # Vehicle Pedestrian Non-Contact Vehicle OPERATOR # or PEDESTRIAN NAME (Last, First, Middle Initial)

ADDRESS (Street Number and Name) PROPER LICENSE CLASS Yes No

CITY OR TOWN STATE ZIP CODE SEX M F

OPERATOR LICENSE # STATE DATE OF BIRTH

OWNER'S NAME (Enter SAME if Owner is Operator)

ADDRESS (Street Number and Name)

CITY OR TOWN STATE ZIP CODE BODY TYPE

REGISTRATION # STATE VEHICLE YEAR AND MAKE

VEHICLE IDENTIFICATION NUMBER

CARRIER NAME

CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)

SOURCE OF CARRIER NAME Shipping Papers/Trip Manifest Driver Side of Vehicle USDOT # ICCMC #

GROSS VEHICLE WEIGHT RATING # HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # DISPLAYED? Yes No 1 Digit #

HAZARDOUS CARGO RELEASED? Yes No ENFORCEMENT ACTION TAKEN None Arrest Written Warning Verbal Warning

STATUTE OR ORDINANCE #S SUBJECT OF ACTION Operator Carrier Owner Pedestrian

AUTOMOBILE INSURANCE -- NAME -- POLICY #

PARTS OF VEHICLE DAMAGED

VEHICLE TOWED TO: TOWED DUE TO DAMAGE

TRAFFIC UNIT # Vehicle Pedestrian Non-Contact Vehicle OPERATOR #1 or PEDESTRIAN NAME (Last, First, Middle Initial)

ADDRESS (Street Number and Name) PROPER LICENSE CLASS Yes No

CITY OR TOWN STATE ZIP CODE SEX M F

OPERATOR LICENSE # STATE DATE OF BIRTH

OWNER'S NAME (Enter SAME if Owner is Operator)

ADDRESS (Street Number and Name)

CITY OR TOWN STATE ZIP CODE BODY TYPE

REGISTRATION # STATE VEHICLE YEAR AND MAKE

VEHICLE IDENTIFICATION NUMBER

CARRIER NAME

CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)

SOURCE OF CARRIER NAME Shipping Papers/Trip Manifest Driver Side of Vehicle USDOT # ICCMC #

GROSS VEHICLE WEIGHT RATING # HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # DISPLAYED? Yes No 1 Digit #

HAZARDOUS CARGO RELEASED? Yes No ENFORCEMENT ACTION TAKEN None Arrest Written Warning Verbal Warning

STATUTE OR ORDINANCE #S SUBJECT OF ACTION Operator Carrier Owner Pedestrian

AUTOMOBILE INSURANCE -- NAME -- POLICY #

PARTS OF VEHICLE DAMAGED

VEHICLE TOWED TO: TOWED DUE TO DAMAGE

- 1
- 1
- 1
- 1
- 11
- 12
- 1
- 11
- 12
- 1
- 1
- 1
- 11
- 12
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- 14

- R
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- E
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- I
- J
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- L
- M
- N
- O
- P
- Q
- R
- S
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- U
- V
- W
- X
- Y
- Z
- AA
- AB
- AC
- AD
- AE

	L	M	N	TRAFFIC UNIT #	OPERATOR OR PEDESTRIAN #	Date of Birth	O	P	Q	
1										1
2										2
3						Month	Day	Year		3
4						Month	Day	Year		4
5						Month	Day	Year		5
6						Month	Day	Year		6
7						Month	Day	Year		7
8						Month	Day	Year		8

Police Case Number
1200002347

TRAFFIC UNIT #	TRAVELING	TRAFFIC UNIT #	TRAVELING
On		On	

damage as a result of the accident. He was unable to estimate the damage to his property, but he wished that it would be noted that his stone lamp post, stone wall, shrubbery, east side of his detached garage, and electrical connections to the garage were all destroyed. This Officer observed and confirmed the damage.

Traffic Unit #1 was towed from the scene by AAA (Auto Sports). The operator of Traffic Unit #1, Robert Marzullo (DOB 04-04-1949) was found to be at fault for the accident and his CT operators License was seized pursuant to DMV regulation 14-217-1 requiring a evaluation of Marzullo's fitness to drive. Nothing Further...

- (B) LIST OF MISSING ITEMS: NONE
- (C) LIST OF PHYSICAL EVIDENCE: None
- (D) CASE RECOMMENDATION: Case CLOSED

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
RANK AND SIGNATURE OF INVESTIGATING OFFICER Patrol Officer Onofrio, William C. .	OFFICER ID 0078	POLICE AGENCY IDENTIFICATION Hamden	REPORT DATE 01/18/2012	CASE STATUS Closed	SUPERVISOR	

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 REV.01/01

GPS READINGS: Latitude: 41.346215
 Time: 00:00 Longitude: -72.945603



FOR DOT USE ONLY

DATE OF ACCIDENT 1 0 1 3 1 2	MILITARY TIME 1 7 2 3	ACCIDENT SEVERITY <input type="checkbox"/> Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO	# VEHICLES INVOLVED 2	PAGE # 1 of 2	POLICE CASE NUMBER A 1200041721
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TOWN OR CITY NAME: **HAMDEN** TOWN CODE: **062** ACCIDENT OCCURRED ON **Woodin St** AT ITS INTERSECTION WITH **at**

IF NOT AT INTERSECTION: 1. MEASURE DISTANCE: **50.00** (Check Appropriate Boxes) Feet Tenths Meters Kilometers
 2. DIRECTION: North East South West
 3. NAME OF NEAREST INTERSECTING STREET, TOWN LINE OR MILE MARKER: **of Pine Rock Ave**
 Accident Occurred: On Private Property Parking Lot

TRAFFIC UNIT # 1 Vehicle Pedestrian Non-Contact Vehicle

OPERATOR # or PEDESTRIAN NAME (Last, First, Middle Initial): **Pelley, Catherine**

ADDRESS (Street Number and Name): **15 Rosina Rd** PROPER LICENSE CLASS: Yes No

CITY OR TOWN: **Hamden** STATE: **CT** ZIP CODE: **06514** SEX: M F

OPERATOR LICENSE #: **028792682** STATE: **CT** DATE OF BIRTH: **0 | 2 | 1 | 0 | 9 | 5**

OWNER'S NAME (Enter SAME if Owner is Operator): **PELLEY, MARGARET D**

ADDRESS (Street Number and Name): **15 Rosina Road**

CITY OR TOWN: **Hamden** STATE: **CT** ZIP CODE: **06514** BODY TYPE: **4D SED**

REGISTRATION #: **714ZES** STATE: **CT** VEHICLE YEAR AND MAKE: **2007 HYUN**

VEHICLE IDENTIFICATION NUMBER: **K | M | H | D | U | 4 | 6 | D | 2 | 7 | U | 1 | 2 | 2 | 1 | 2 | 3**

CARRIER NAME: _____

CARRIER ADDRESS (#, Street, City or Town, State, Zip Code): _____

SOURCE OF CARRIER NAME: Shipping Papers/Trip Manifest USDOT # Driver Side of Vehicle ICCMC #

GROSS VEHICLE WEIGHT: _____ HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # _____ DISPLAYED? Yes No 1 Digit # _____

HAZARDOUS CARGO RELEASED? Yes No ENFORCEMENT ACTION TAKEN None Arrest Written Warning Verbal Warning

STATUTE OR ORDINANCE #'S: **14-240** SUBJECT OF ACTION: Operator Carrier Owner Pedestrian

AUTOMOBILE INSURANCE - NAME - POLICY #: **SAFECO K2175758**

PARTS OF VEHICLE DAMAGED: **1396**

VEHICLE TOWED TO: TOWED DUE TO DAMAGE

TRAFFIC UNIT # 2 Vehicle Pedestrian Non-Contact Vehicle

OPERATOR #1 or PEDESTRIAN NAME (Last, First, Middle Initial): **Byers, Therean**

ADDRESS (Street Number and Name): **82 Hightop Cir East** PROPER LICENSE CLASS: Yes No

CITY OR TOWN: **Hamden** STATE: **CT** ZIP CODE: **06514** SEX: M F

OPERATOR LICENSE #: **156565623** STATE: **CT** DATE OF BIRTH: **0 | 3 | 2 | 1 | 7 | 4**

OWNER'S NAME (Enter SAME if Owner is Operator): **CRUZ, ROSANGELY**

ADDRESS (Street Number and Name): **82 High Top Cir East**

CITY OR TOWN: **Hamden** STATE: **CT** ZIP CODE: **06514** BODY TYPE: **2D SED**

REGISTRATION #: **676ZCN** STATE: **CT** VEHICLE YEAR AND MAKE: **2007 MINI**

VEHICLE IDENTIFICATION NUMBER: **W | M | W | M | F | 7 | 3 | 5 | X | 7 | T | L | 8 | 3 | 5 | 4 | 7**

CARRIER NAME: _____

CARRIER ADDRESS (#, Street, City or Town, State, Zip Code): _____

SOURCE OF CARRIER NAME: Shipping Papers/Trip Manifest USDOT # Driver Side of Vehicle ICCMC #

GROSS VEHICLE WEIGHT: _____ HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # _____ DISPLAYED? Yes No 1 Digit # _____

HAZARDOUS CARGO RELEASED? Yes No ENFORCEMENT ACTION TAKEN None Arrest Written Warning Verbal Warning

STATUTE OR ORDINANCE #'S: _____ SUBJECT OF ACTION: Operator Carrier Owner Pedestrian

AUTOMOBILE INSURANCE - NAME - POLICY #: **PROGRESSIVE 22009888-2**

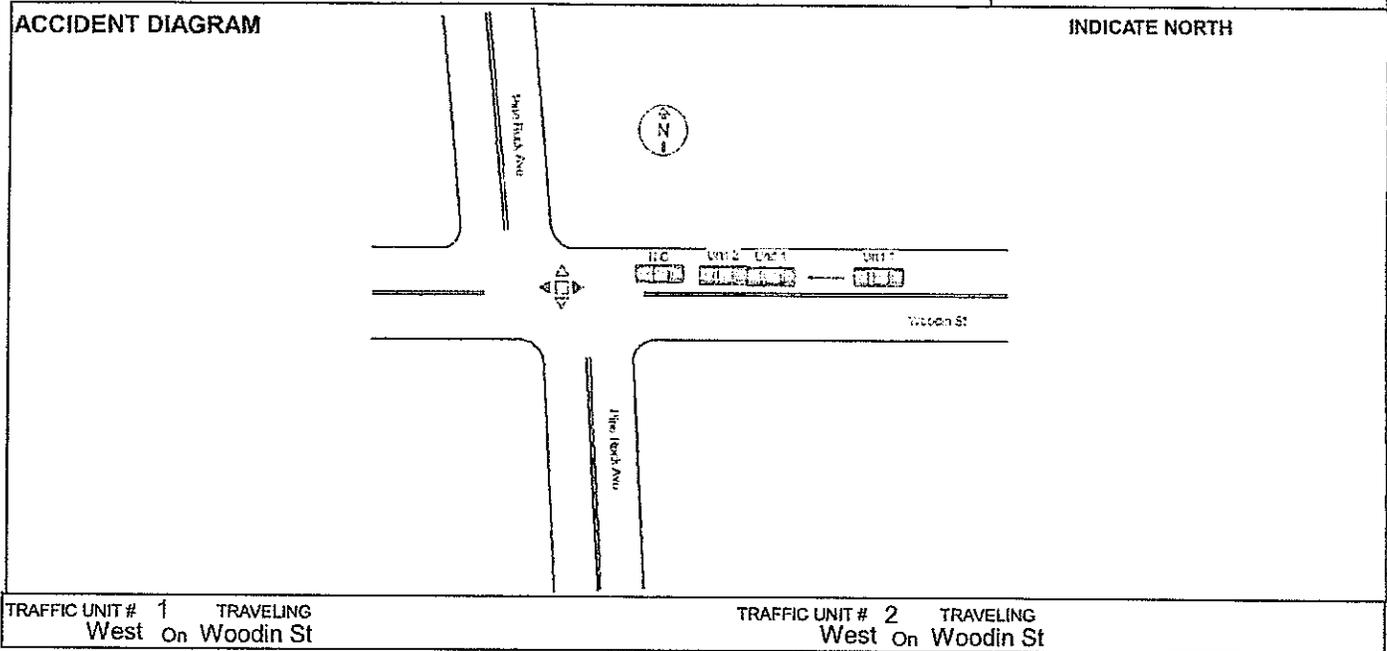
PARTS OF VEHICLE DAMAGED: **3310**

VEHICLE TOWED TO: TOWED DUE TO DAMAGE

02
1
01
11
12
1
11
12
1
1
1
11
12
13
14

R 09
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 2
I 2
J 3
K 32
L 2
M 2
N 2
O 2
P 2
Q 2
R 2
S 2
T 2
U 2
V 1
W 08
X 2
Y 2
Z 2
AA 2
AB 2
AC 2
AD 2
AE 2

	L	M	N		Date of Birth	O	P	Q
1	1	N	01	TRAFFIC UNIT # 1 OPERATOR OR PEDESTRIAN #		4	2	1 1
2	2	N	01	TRAFFIC UNIT # 2 OPERATOR OR PEDESTRIAN #		4	2	1 2
3					Month Day Year			3
4					Month Day Year			4
5					Month Day Year			5
6					Month Day Year			6
7					Month Day Year			7
8					Month Day Year			8



The operator of vehicle #2 stated that he was west bound on Woodin St and was stopped for traffic at the red light at the intersection of Pine Rock Ave when his vehicle was struck from the rear by vehicle #1.

The operator of vehicle #1 stated that she was west bound on Woodin St and had stopped for traffic ahead of her. She stated that she started creeping forward anticipating that the traffic would move, and inadvertently struck vehicle #2.

There was minor damage to both vehicles consistent with the above described accident. None of the involved parties claimed any injury as a result of the accident. The operator of vehicle #1 was found at fault for the accident for 14-240 Following Too Close. Both vehicles were driven from the scene.

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
RANK AND SIGNATURE OF INVESTIGATING OFFICER	OFFICER ID	POLICE AGENCY IDENTIFICATION	REPORT DATE	CASE STATUS	SUPERVISOR	
Patrol Officer Nawrocki, Michael	0020	Hamden	10/13/2012	Closed		

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 REV.01/01

GPS READINGS: Latitude: 41.346215
Time: 00:00 Longitude: -72.945603



FOR DOT USE ONLY

DATE OF ACCIDENT: 1/21/91 2 MILITARY TIME: 1157 ACCIDENT SEVERITY: Fatal Injury PDO # VEHICLES INVOLVED: 2 PAGE #: 1 of 2 POLICE CASE NUMBER: A 1200051303

TOWN OR CITY NAME: HAMDEN TOWN CODE: 062 ACCIDENT OCCURRED ON: PINE ROCK AVENUE AT ITS INTERSECTION WITH: WOODIN STREET

IF NOT AT INTERSECTION: 1. MEASURE DISTANCE: 40.00 2. DIRECTION: North 3. NAME OF NEAREST INTERSECTING STREET, TOWN LINE OR MILE MARKER: WOODIN STREET

TRAFFIC UNIT # 1: Vehicle Pedestrian Non-Contact Vehicle

OPERATOR # or PEDESTRIAN NAME: Hoskie, Roberta

ADDRESS: 120 Wintergreen Ave PROPER LICENSE CLASS: Yes No

CITY OR TOWN: Hamden STATE: CT ZIP CODE: 06514 SEX: M F

OPERATOR LICENSE #: 246647632 STATE: CT DATE OF BIRTH: 1/22/57

OWNER'S NAME: (Enter SAME if Owner is Operator)

ADDRESS: (Street Number and Name)

CITY OR TOWN: STATE: ZIP CODE: BODY TYPE: 4D SED

REGISTRATION #: 893YKT STATE: CT VEHICLE YEAR AND MAKE: 2002 INFI

VEHICLE IDENTIFICATION NUMBER: J N K B F 0 1 A 1 2 M 0 0 0 2 0 9

CARRIER NAME

CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)

SOURCE OF CARRIER NAME: Shipping Papers/Trip Manifest Driver Side of Vehicle USDOT # ICCMC #

GROSS VEHICLE WEIGHT RATING #: HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # DISPLAYED? Yes No 1 Digit #

HAZARDOUS CARGO RELEASED? Yes No ENFORCEMENT ACTION TAKEN: None Arrest Written Warning Verbal Warning

STATUTE OR ORDINANCE #S: 14-240 SUBJECT OF ACTION: Operator Carrier Owner Pedestrian

AUTOMOBILE INSURANCE - NAME - POLICY #

ESURANCE 004269735

PARTS OF VEHICLE DAMAGED

3538

VEHICLE TOWED TO: TOWED DUE TO DAMAGE

TRAFFIC UNIT # 2: Vehicle Pedestrian Non-Contact Vehicle

OPERATOR #1 or PEDESTRIAN NAME: Allen, Hattie

ADDRESS: 59 Katherine Dr PROPER LICENSE CLASS: Yes No

CITY OR TOWN: Hamden STATE: CT ZIP CODE: 06514 SEX: M F

OPERATOR LICENSE #: 081689404 STATE: CT DATE OF BIRTH: 08/15/41

OWNER'S NAME: (Enter SAME if Owner is Operator)

SAME AS ABOVE

ADDRESS: (Street Number and Name)

SAME AS ABOVE

CITY OR TOWN: STATE: ZIP CODE: BODY TYPE: 4D SED

REGISTRATION #: 248NHF STATE: CT VEHICLE YEAR AND MAKE: 2008 LEXS

VEHICLE IDENTIFICATION NUMBER: J T H B J 4 6 G X 8 2 2 5 2 5 1 6

CARRIER NAME

CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)

SOURCE OF CARRIER NAME: Shipping Papers/Trip Manifest Driver Side of Vehicle USDOT # ICCMC #

GROSS VEHICLE WEIGHT RATING #: HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # DISPLAYED? Yes No 1 Digit #

HAZARDOUS CARGO RELEASED? Yes No ENFORCEMENT ACTION TAKEN: None Arrest Written Warning Verbal Warning

STATUTE OR ORDINANCE #S: SUBJECT OF ACTION: Operator Carrier Owner Pedestrian

AUTOMOBILE INSURANCE - NAME - POLICY #

GEICO 2013-65-50-28

PARTS OF VEHICLE DAMAGED

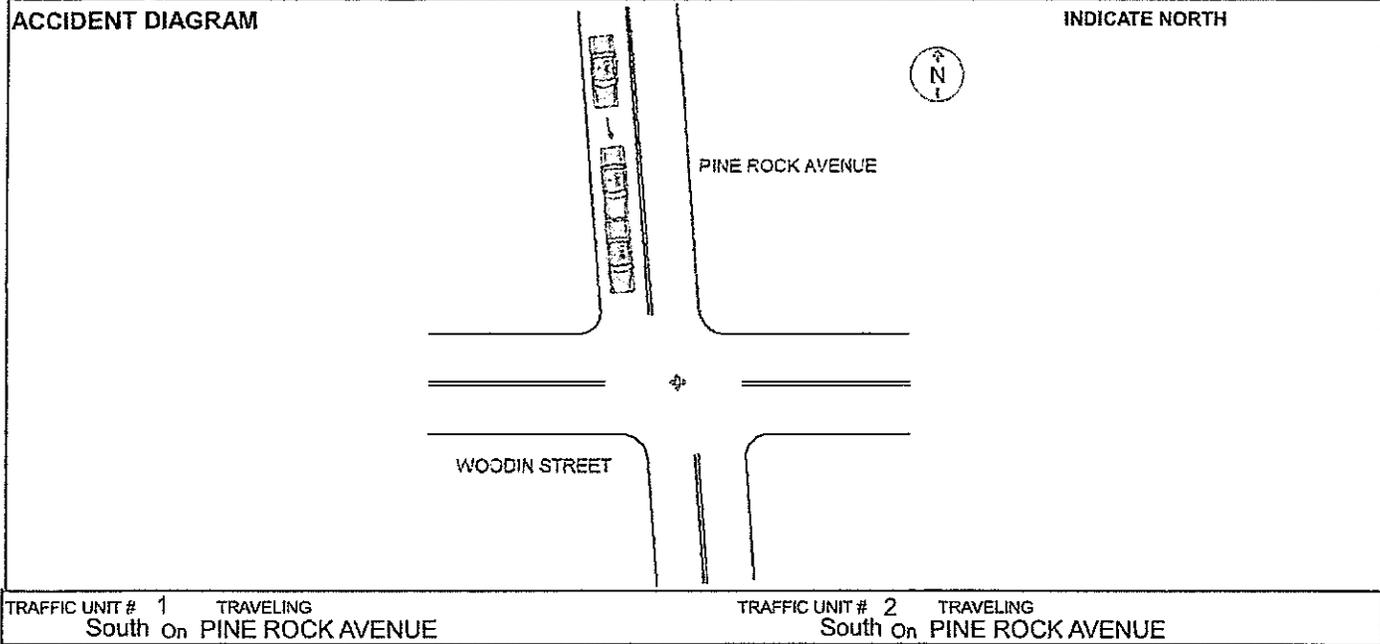
3310

VEHICLE TOWED TO: TOWED DUE TO DAMAGE

02 1 01 11 12 13 14

R 09 A 1 B 1 C 1 D 1 E 0 F 4 G 2 H 2 02 S 3 T 31 J 21 J 22 U 2 K 21 K 22 V 1 W 08 X 2 Y 2 Z 2 AA 21 AA 22 AA 23 AA 24

	L	M	N		Date of Birth	O	P	Q
1	1	N	01	TRAFFIC UNIT # 1 OPERATOR OR PEDESTRIAN #		4	2	1
2	2	N	01	TRAFFIC UNIT # 2 OPERATOR OR PEDESTRIAN #		4	2	1
3	2	N	03	ALLEN, WILLARD JR 59 Katherine Dr Hamden, CT 06514	08/15/41	4	2	1
4					Month Day Year			
5					Month Day Year			
6					Month Day Year			
7					Month Day Year			
8					Month Day Year			



Operator 1 said she was stopped for traffic, ahead of her, travelling south on Pine Rock Avenue at its intersection with Woodin Street. Operator 1 foot came off the brake and she slowly rolled into the rear of Vehicle 2 which was stopped ahead of hers. Operator 1 was not injured and there was no damage to her vehicle.

Operator 2 said she was stopped for the traffic control signal on Pine Rock Avenue at its intersection with Woodin Street when the rear of her vehicle was struck by Vehicle 1. There was no visible damage to the rear of Vehicle 2 that I could see. Both occupants of Vehicle 2 said they were not injured.

I determined that Operator 1 was at fault for Following Too Closely, 14-240 and she was given a verbal warning; however, I learned (through DMV files) that her Connecticut driver's license was suspended. Operator 1 was issued Misdemeanor Summons # MC092950 charging her with Operating Under Suspension, 14-215, and she was given a court date of 01/08/2012 at GA # 7 in Meriden.

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
RANK AND SIGNATURE OF INVESTIGATING OFFICER Patrol Officer Baris, Stephen	OFFICER ID 0083	POLICE AGENCY IDENTIFICATION Hamden	REPORT DATE 12/28/2012	CASE STATUS Closed	SUPERVISOR	

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 REV.01/01



GPS READINGS: Latitude: 41.346215
Time: 00:00 Longitude: -72.945603

FOR DOT USE ONLY

DATE OF ACCIDENT 05/20/13 MILITARY TIME 0815 ACCIDENT SEVERITY Fatal Injury PDO # VEHICLES INVOLVED 2 PAGE # 1 of 2 POLICE CASE NUMBER A 1300020998

TOWN OR CITY NAME Hamden TOWN CODE 062 ACCIDENT OCCURRED ON PINE ROCK AVE AT ITS INTERSECTION WITH WOODIN ST

IF NOT AT INTERSECTION 1. MEASURE DISTANCE (Check Appropriate Boxes) Feet Tenths Meters Kilometers 2. DIRECTION North East South West 3. NAME OF NEAREST INTERSECTING STREET, TOWN LINE OR MILE MARKER of WOODIN ST Accident Occurred: On Private Property Parking Lot

02 H

1 S

01 T

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12

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X 11

X 12

TRAFFIC UNIT # 1 Vehicle Pedestrian Non-Contact Vehicle

OPERATOR # 1 or PEDESTRIAN NAME (Last, First, Middle Initial) Campbell, David

ADDRESS (Street Number and Name) 24 Michael Rd PROPER LICENSE CLASS Yes No

CITY OR TOWN STATE ZIP CODE SEX Hamden CT 06514 M F

OPERATOR LICENSE # STATE DATE OF BIRTH 062170438 CT 0612151

OWNER'S NAME (Enter SAME if Owner is Operator) SAME AS ABOVE

ADDRESS (Street Number and Name) SAME AS ABOVE

CITY OR TOWN STATE ZIP CODE BODY TYPE Hamden CT 06514 ST WAG

REGISTRATION # STATE VEHICLE YEAR AND MAKE JS5362 CT 2003 FORD

VEHICLE IDENTIFICATION NUMBER 1FMZU73K73UC3B843

CARRIER NAME

CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)

SOURCE OF CARRIER NAME Shipping Papers/Trip Manifest Driver Side of Vehicle USDOT # ICCMC #

GROSS VEHICLE WEIGHT RATING # HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # DISPLAYED? Yes No 1 Digit #

HAZARDOUS CARGO RELEASED? Yes No ENFORCEMENT ACTION TAKEN Arrest Written Warning Verbal Warning

STATUTE OR ORDINANCE #S SUBJECT OF ACTION 14-240 Operator Carrier Owner Pedestrian

AUTOMOBILE INSURANCE - NAME - POLICY # ALLSTATE 019638250 09/01

PARTS OF VEHICLE DAMAGED Front

VEHICLE TOWED TO: TOWED DUE TO DAMAGE

TRAFFIC UNIT # 2 Vehicle Pedestrian Non-Contact Vehicle

OPERATOR # 2 or PEDESTRIAN NAME (Last, First, Middle Initial) RAFFONE, ADELE L

ADDRESS (Street Number and Name) 116 Michael Rd PROPER LICENSE CLASS Yes No

CITY OR TOWN STATE ZIP CODE SEX Hamden CT 06514 M F

OPERATOR LICENSE # STATE DATE OF BIRTH 212764640 CT 0911154

OWNER'S NAME (Enter SAME if Owner is Operator) SAME AS ABOVE

ADDRESS (Street Number and Name) SAME AS ABOVE

CITY OR TOWN STATE ZIP CODE BODY TYPE Hamden CT 06514 4D SED

REGISTRATION # STATE VEHICLE YEAR AND MAKE 783UFX CT 2012 NISS

VEHICLE IDENTIFICATION NUMBER 1N4AL2AP9CN453257

CARRIER NAME

CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)

SOURCE OF CARRIER NAME Shipping Papers/Trip Manifest Driver Side of Vehicle USDOT # ICCMC #

GROSS VEHICLE WEIGHT RATING # HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # DISPLAYED? Yes No 1 Digit #

HAZARDOUS CARGO RELEASED? Yes No ENFORCEMENT ACTION TAKEN None Arrest Written Warning Verbal Warning

STATUTE OR ORDINANCE #S SUBJECT OF ACTION Operator Carrier Owner Pedestrian

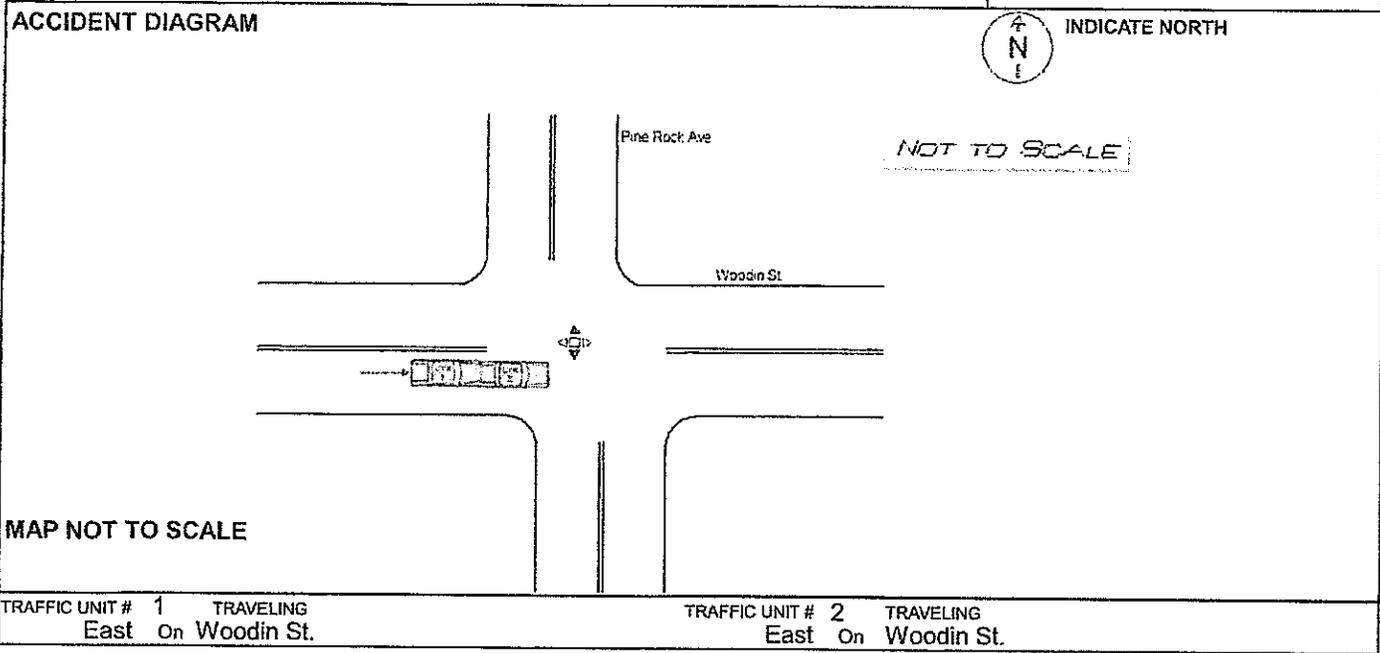
AUTOMOBILE INSURANCE - NAME - POLICY # NEW LONDON COUNTY MUTUAL INS. CO. A135 540

PARTS OF VEHICLE DAMAGED Rear

VEHICLE TOWED TO: TOWED DUE TO DAMAGE

R 09
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 2 02
I 2 3
J 2 44
K 2
L 2
M 1
N 08
O 1
P 1
Q 1
R 1
S 1
T 1
U 1
V 1
W 08
X 1
Y 1
Z 1
AA 1
AB 1
AC 1
AD 1
AE 1

	L	M	N		Date of Birth	O	P	Q
1	1	N	01	TRAFFIC UNIT # 1 OPERATOR OR PEDESTRIAN #		4	3	1 1
2	2	N	01	TRAFFIC UNIT # 2 OPERATOR OR PEDESTRIAN #		4	3	1 2
3					Month Day Year			3
4					Month Day Year			4
5					Month Day Year			5
6					Month Day Year			6
7					Month Day Year			7
8					Month Day Year			8



Operator 1 stated he was traveling e/b on Woodin St. Operator 1 stated that he was behind vehicle 2 when he looked away from the road way to change the radio station. Operator 1 stated that he did not see vehicle 2 stop to make a left turn. Operator 1 stated he then struck the vehicle from behind causing minor damage.

Operator 2 stated he was traveling e/b on Woodin St. Operator 2 stated she stopped to make a left turn onto Pine Rock Ave. Operator 2 stated she was struck from behind by vehicle 1.

All parties involved stated that they were not injured. Operator 1 is at fault for the accident and was given a verbal warning for: Failure to keep safe distance CGS. 14-240. Vehicles moved prior to arrival.

Both parties were given an accident exchange form that includes the case incident number, this officer's name, badge and department telephone number. Both parties exchanged information at the scene.

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
RANK AND SIGNATURE OF INVESTIGATING OFFICER	OFFICER ID	POLICE AGENCY IDENTIFICATION	REPORT DATE	CASE STATUS	SUPERVISOR	
/OFF David Falcigno/	0026	HAMDEN POLICE DEPA	05/21/2013		/SGT Edward Ameno/	

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 REV.01/01

GPS READINGS: Latitude: 41.346215
 Time: 00:00 Longitude: -72.945603



FOR DOT USE ONLY

DATE OF ACCIDENT 07/08/13	MILITARY TIME 1215	ACCIDENT SEVERITY <input type="checkbox"/> Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO	# VEHICLES INVOLVED 2	PAGE # 1 of 2	POLICE CASE NUMBER A 1300029714
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TOWN OR CITY NAME: Hamden TOWN CODE: 062
 ACCIDENT OCCURRED ON (Street Name or Route #) AT ITS INTERSECTION WITH (Street Name or Route #)
 Woodin St. at Pine Rock Ave.

IF NOT AT INTERSECTION: Feet Tenths Meters Kilometers
 2. DIRECTION: North East South West
 3. NAME OF NEAREST INTERSECTING STREET, TOWN LINE OR MILE MARKER of
 Accident Occurred: On Private Property Parking Lot

02
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1
11
12

TRAFFIC UNIT # 1 Vehicle Pedestrian Non-Contact Vehicle
 OPERATOR # 1 or PEDESTRIAN NAME (Last, First, Middle Initial)
 MORREN, CARLTON
 ADDRESS (Street Number and Name) 160 Circular Ave
 PROPER LICENSE CLASS Yes No
 CITY OR TOWN STATE ZIP CODE SEX
 Hamden CT 06181 M
 OPERATOR LICENSE # 068066413 STATE CT DATE OF BIRTH 06/11/43
 OWNER'S NAME (Enter SAME if Owner is Operator) SAME AS ABOVE
 ADDRESS (Street Number and Name) SAME AS ABOVE
 CITY OR TOWN STATE ZIP CODE BODY TYPE
 SAME AS ABOVE CT PICKUP
 REGISTRATION # STATE VEHICLE YEAR AND MAKE
 4CS655 CT 2000 CHEV
 VEHICLE IDENTIFICATION NUMBER
 1GCEK19T6YZ251714
 CARRIER NAME
 CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)
 SOURCE OF CARRIER NAME Shipping Papers/Trip Manifest USDOT # Driver Side of Vehicle ICCMC #
 GROSS VEHICLE WEIGHT HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit #
 RATING # DISPLAYED? Yes No 1 Digit #
 HAZARDOUS CARGO ENFORCEMENT ACTION TAKEN None
 RELEASED? Yes No Arrest Written Warning Verbal Warning
 STATUTE OR ORDINANCE #S SUBJECT OF ACTION Operator Carrier Owner Pedestrian
 14-242(e)
 AUTOMOBILE INSURANCE - NAME - POLICY #
 ALLSTATE 9 19 160952 12/04
 PARTS OF VEHICLE DAMAGED
 Front
 VEHICLE TOWED TO: TOWED DUE TO DAMAGE
 Wheelers

TRAFFIC UNIT # 2 Vehicle Pedestrian Non-Contact Vehicle
 OPERATOR # 2 or PEDESTRIAN NAME (Last, First, Middle Initial)
 Oglesby, Daniel
 ADDRESS (Street Number and Name) 545 Woodin St
 PROPER LICENSE CLASS Yes No
 CITY OR TOWN STATE ZIP CODE SEX
 Hamden CT 065183145 M
 OPERATOR LICENSE # 057196314 STATE CT DATE OF BIRTH 05/02/83
 OWNER'S NAME (Enter SAME if Owner is Operator) SAME AS ABOVE
 ADDRESS (Street Number and Name) SAME AS ABOVE
 CITY OR TOWN STATE ZIP CODE BODY TYPE
 SAME AS ABOVE CT WGN
 REGISTRATION # STATE VEHICLE YEAR AND MAKE
 487YVO CT 2005 DODG
 VEHICLE IDENTIFICATION NUMBER
 2D4FV48T55H515308
 CARRIER NAME
 CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)
 SOURCE OF CARRIER NAME Shipping Papers/Trip Manifest USDOT # Driver Side of Vehicle ICCMC #
 GROSS VEHICLE WEIGHT HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit #
 RATING # DISPLAYED? Yes No 1 Digit #
 HAZARDOUS CARGO ENFORCEMENT ACTION TAKEN None
 RELEASED? Yes No Arrest Written Warning Verbal Warning
 STATUTE OR ORDINANCE #S SUBJECT OF ACTION Operator Carrier Owner Pedestrian
 AUTOMOBILE INSURANCE - NAME - POLICY #
 E-SURANCE PACT-4574653
 PARTS OF VEHICLE DAMAGED
 L Frnt
 VEHICLE TOWED TO: TOWED DUE TO DAMAGE
 Wheelers-AAA

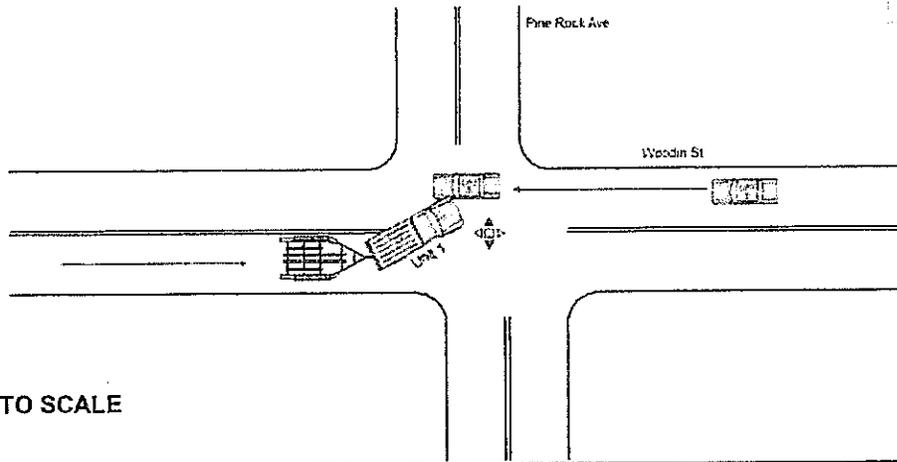
R 02
A 1
B 1
C 1
D 1
E 1
F 4
G 2
H 02
I 1
J 01
K 21
L 22
M 1
N 05
O 21
P 22
Q 22
R 22
S 22
T 22
U 22
V 22
W 05
X 22
Y 22
Z 22
AA 21
AB 22
AC 22
AD 22
AE 22

	L	M	N		Date of Birth	O	P	Q
1	1	N	01	TRAFFIC UNIT # 1 OPERATOR OR PEDESTRIAN #		4	2	1 1
2	2	N	01	TRAFFIC UNIT # 2 OPERATOR OR PEDESTRIAN #		4	3	1 2
3					Month Day Year			3
4					Month Day Year			4
5					Month Day Year			5
6					Month Day Year			6
7					Month Day Year			7
8					Month Day Year			8

ACCIDENT DIAGRAM



NOT TO SCALE



MAP NOT TO SCALE

TRAFFIC UNIT # 1 TRAVELING
East On Woodin

TRAFFIC UNIT # 2 TRAVELING
West On Woodin St.

Operator 1 stated he was traveling E/B on Woodin St. Operator 1 stated he had a green light and attempted a left turn onto Pine Rock Ave. Operator 1 stated that he activated his left turn signal and then attempted the turn. Operator 1 stated he did not see vehicle 2 traveling W/B coming toward him and collided into vehicle 2 causing moderate damage to both vehicles.

Operator 2 stated he was traveling W/B on Woodin St. Operator 2 stated that he had a green light. Operator 2 stated vehicle 1 turned left into him causing damage to his vehicle on the driver's side. Operator 2 stated he was unsure if vehicle had an activated turn signal or not.

All parties involved stated that they were not injured. Operator 1 is at fault for the accident and was given an infraction for: Failure to grant right of way when making a left turn CGS.14-242(e) and Operating without a license. CGS. 14-36a. Vehicles moved prior to arrival. Both vehicles towed by Wheelers.

Both parties were given an accident exchange form that includes the case incident number, this officer's name, badge and department telephone number. Both parties exchanged information at the scene.

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
RANK AND SIGNATURE OF INVESTIGATING OFFICER	OFFICER ID	POLICE AGENCY IDENTIFICATION	REPORT DATE	CASE STATUS	SUPERVISOR	
/OFF David Falcigno/	0026	HAMDEN POLICE DEPA	07/15/2013		/SGT Edward Arreno/	

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 REV.01/01



GPS READINGS: Latitude: 41.351
Time: 00:00 Longitude: -72.9578

FOR DOT USE ONLY

DATE OF ACCIDENT 0 6 2 5 1 1	MILITARY TIME 1 2 5 3	ACCIDENT SEVERITY <input type="checkbox"/> Fatal <input type="checkbox"/> Injury <input checked="" type="checkbox"/> PDO	# VEHICLES INVOLVED 1	PAGE # 1 of 2	POLICE CASE NUMBER A 1100025533
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TOWN OR CITY NAME Hamden	TOWN CODE 0 6 2	ACCIDENT OCCURRED ON (Street Name or Route #) 699 WOODIN ST. at	AT ITS INTERSECTION WITH (Street Name or Route #)
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IF NOT AT INTERSECTION

1. MEASURE DISTANCE (Check Appropriate Boxes) 0.25
 Feet
 Tenths
 Meters
 Kilometers

2. DIRECTION
 North East
 South West

3. NAME OF NEAREST INTERSECTING STREET, TOWN LINE OR MILE MARKER
of FAWN RIDGE
Accident Occurred: On Private Property Parking Lot

02
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12
1
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11
12
13
14

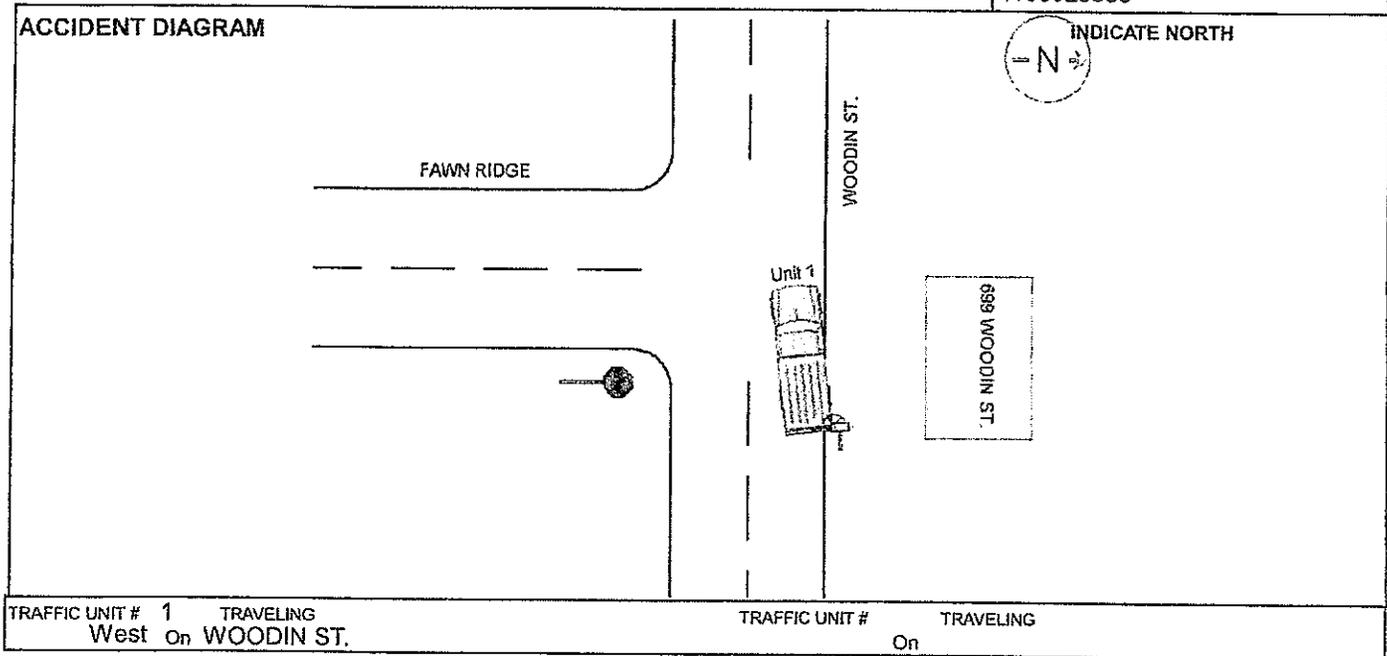
TRAFFIC UNIT # 1	<input checked="" type="checkbox"/> Vehicle <input type="checkbox"/> Pedestrian <input type="checkbox"/> Non-Contact Vehicle		
OPERATOR #	or PEDESTRIAN NAME (Last, First, Middle Initial) Torres, Freddison		
ADDRESS (Street Number and Name) 91 Perry Rd	PROPER LICENSE CLASS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
CITY OR TOWN Hamden	STATE CT	ZIP CODE	SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F
OPERATOR LICENSE # 178612976	STATE CT	DATE OF BIRTH 0 5 1 8 9 2	
OWNER'S NAME (Enter SAME if Owner is Operator) SAME AS ABOVE			
ADDRESS (Street Number and Name) SAME AS ABOVE			
CITY OR TOWN SAME AS ABOVE	STATE	ZIP CODE	BODY TYPE St Wag
REGISTRATION # 890NUP	STATE CT	VEHICLE YEAR AND MAKE 1999 Niss	
VEHICLE IDENTIFICATION NUMBER J N 8 A R 0 5 Y 0 X W 3 0 5 6 7 8			
CARRIER NAME			
CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)			
SOURCE OF CARRIER NAME <input type="checkbox"/> Shipping Papers/Trip Manifest <input type="checkbox"/> USDOT # } <input type="checkbox"/> Driver <input type="checkbox"/> Side of Vehicle <input type="checkbox"/> ICCMC # }			
GROSS VEHICLE WEIGHT	HAZARDOUS MATERIAL PLACARD REQUIRED? <input type="checkbox"/> Yes <input type="checkbox"/> No 4 Digit #	RATING #	HAZARDOUS MATERIAL PLACARD DISPLAYED? <input type="checkbox"/> Yes <input type="checkbox"/> No 1 Digit #
HAZARDOUS CARGO RELEASED? <input type="checkbox"/> Yes <input type="checkbox"/> No	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> None <input type="checkbox"/> Arrest <input type="checkbox"/> Written Warning <input type="checkbox"/> Verbal Warning		
STATUTE OR ORDINANCE #S	SUBJECT OF ACTION <input type="checkbox"/> Operator <input type="checkbox"/> Carrier <input type="checkbox"/> Owner <input type="checkbox"/> Pedestrian		
AUTOMOBILE INSURANCE -- NAME -- POLICY # Progressive 47460960-6			
PARTS OF VEHICLE DAMAGED 3307			
VEHICLE TOWED TO: <input type="checkbox"/> TOWED DUE TO DAMAGE			

TRAFFIC UNIT #	<input type="checkbox"/> Vehicle <input type="checkbox"/> Pedestrian <input type="checkbox"/> Non-Contact Vehicle		
OPERATOR #1	or PEDESTRIAN NAME (Last, First, Middle Initial)		
ADDRESS (Street Number and Name)	PROPER LICENSE CLASS <input type="checkbox"/> Yes <input type="checkbox"/> No		
CITY OR TOWN	STATE	ZIP CODE	SEX <input type="checkbox"/> M <input type="checkbox"/> F
OPERATOR LICENSE #	STATE	DATE OF BIRTH	
OWNER'S NAME (Enter SAME if Owner is Operator)			
ADDRESS (Street Number and Name)			
CITY OR TOWN	STATE	ZIP CODE	BODY TYPE
REGISTRATION #	STATE	VEHICLE YEAR AND MAKE	
VEHICLE IDENTIFICATION NUMBER			
CARRIER NAME			
CARRIER ADDRESS (#, Street, City or Town, State, Zip Code)			
SOURCE OF CARRIER NAME <input type="checkbox"/> Shipping Papers/Trip Manifest <input type="checkbox"/> USDOT # } <input type="checkbox"/> Driver <input type="checkbox"/> Side of Vehicle <input type="checkbox"/> ICCMC # }			
GROSS VEHICLE WEIGHT	HAZARDOUS MATERIAL PLACARD REQUIRED? <input type="checkbox"/> Yes <input type="checkbox"/> No 4 Digit #	RATING #	HAZARDOUS MATERIAL PLACARD DISPLAYED? <input type="checkbox"/> Yes <input type="checkbox"/> No 1 Digit #
HAZARDOUS CARGO RELEASED? <input type="checkbox"/> Yes <input type="checkbox"/> No	ENFORCEMENT ACTION TAKEN <input type="checkbox"/> None <input type="checkbox"/> Arrest <input type="checkbox"/> Written Warning <input type="checkbox"/> Verbal Warning		
STATUTE OR ORDINANCE #S	SUBJECT OF ACTION <input type="checkbox"/> Operator <input type="checkbox"/> Carrier <input type="checkbox"/> Owner <input type="checkbox"/> Pedestrian		
AUTOMOBILE INSURANCE -- NAME -- POLICY #			
PARTS OF VEHICLE DAMAGED			
VEHICLE TOWED TO: <input type="checkbox"/> TOWED DUE TO DAMAGE			

R 15
A 1
B 1
C 1
D 1
E 0
F 3
G 2
H
I
J 21
J 22
K 21
K 22
V 1
W 13
X 2
Y 2
Z 2
AA 21
AA 22
AA 23
AA 24

	L	M	N		Date of Birth	O	P	Q
1	1	N	01	TRAFFIC UNIT # OPERATOR OR PEDESTRIAN #		4	2	1
2				TRAFFIC UNIT # OPERATOR OR PEDESTRIAN #				2
3					Month Day Year			3
4					Month Day Year			4
5					Month Day Year			5
6					Month Day Year			6
7					Month Day Year			7
8					Month Day Year			8

Police Case Number
1100025533



Veh.#1 was traveling west on Woodin St. when it malfunction causing it to stop and roll back into the mailbox located in front of 699 Woodin St..

Oper. #1 stated that the vehicle just "died" on him and rolled into the mailbox pole.

The owner of the mailbox, Edward Colaiacovo was notified of the damage.

No injuries were reported.

OFFICIAL COPY
Hamden Police Department
Records Division

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE					
	NAME AND ADDRESS OF PROPERTY OWNER					
RANK AND SIGNATURE OF INVESTIGATING OFFICER Patrol Officer Montijo, Beatriz	OFFICER ID 0077	POLICE AGENCY IDENTIFICATION	REPORT DATE 06/25/2011	CASE STATUS Closed	SUPERVISOR	

CONNECTICUT UNIFORM POLICE ACCIDENT REPORT FORM PR-1 REV.01/01



GPS READINGS: Latitude: 41.3505
Time: 00:00 Longitude: -72.958

FOR DOT USE ONLY

DATE OF ACCIDENT: 09/15/12 MILITARY TIME: 1243 ACCIDENT SEVERITY: Fatal Injury PDO # VEHICLES INVOLVED: 2 PAGE #: 1 of 2 POLICE CASE NUMBER: A 120037640

TOWN OR CITY NAME: Hamden TOWN CODE: 062 ACCIDENT OCCURRED ON: WOODIN ST AT ITS INTERSECTION WITH: Fawn Ridge Dr.

IF NOT AT INTERSECTION: 1. MEASURE DISTANCE: Feet Tenths Meters Kilometers 2. DIRECTION: North East South West 3. NAME OF NEAREST INTERSECTING STREET, TOWN LINE OR MILE MARKER: of Accident Occurred: On Private Property Parking Lot

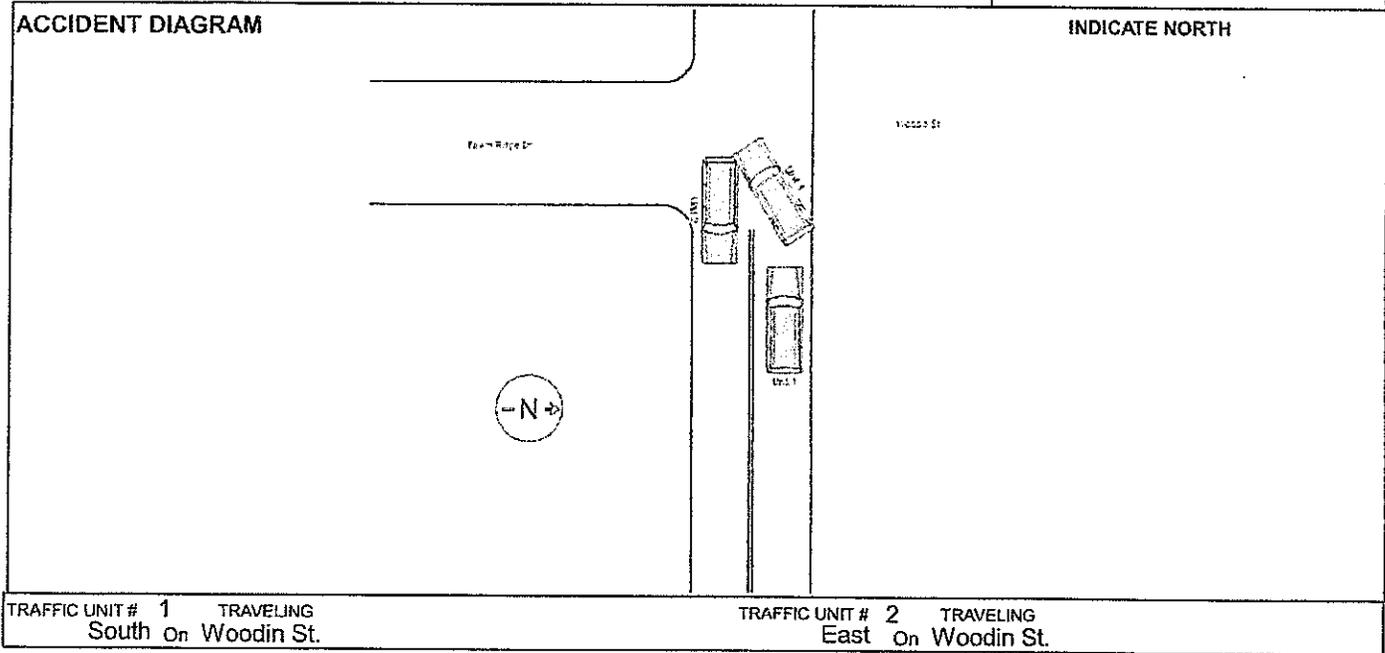
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TRAFFIC UNIT # 1 Vehicle Pedestrian Non-Contact Vehicle
 OPERATOR # or PEDESTRIAN NAME (Last, First, Middle Initial): Nicoll, Heather
 ADDRESS (Street Number and Name): 245 E Woodland St PROPER LICENSE CLASS: Yes No
 CITY OR TOWN: Meriden STATE: CT ZIP CODE: 06451 SEX: M F
 OPERATOR LICENSE #: 127207172 STATE: CT DATE OF BIRTH: 1/23/07
 OWNER'S NAME (Enter SAME if Owner is Operator): SAME AS ABOVE
 ADDRESS (Street Number and Name): SAME AS ABOVE
 CITY OR TOWN: SAME AS ABOVE STATE: ZIP CODE: BODY TYPE: 4D SED
 REGISTRATION #: SHREK1 STATE: CT VEHICLE YEAR AND MAKE: 2012 KIA
 VEHICLE IDENTIFICATION NUMBER: 5X1YK13A6XC1G2615348
 CARRIER NAME:
 CARRIER ADDRESS (#, Street, City or Town, State, Zip Code):
 SOURCE OF CARRIER NAME: Shipping Papers/Trip Manifest Driver Side of Vehicle USDOT # ICCMC #
 GROSS VEHICLE WEIGHT: HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # DISPLAYED? Yes No 1 Digit #
 HAZARDOUS CARGO: ENFORCEMENT ACTION TAKEN None RELEASED? Yes No Arrest Written Warning Verbal Warning
 STATUTE OR ORDINANCE #S: 14-242(a) SUBJECT OF ACTION: Operator Carrier Owner Pedestrian
 AUTOMOBILE INSURANCE - NAME - POLICY #: METROPOLITAN INS. CO. 5945324120
 PARTS OF VEHICLE DAMAGED: 3294
 VEHICLE TOWED TO: TOWED DUE TO DAMAGE

TRAFFIC UNIT # 2 Vehicle Pedestrian Non-Contact Vehicle
 OPERATOR #1 or PEDESTRIAN NAME (Last, First, Middle Initial): NEAL, TARA
 ADDRESS (Street Number and Name): 91 Jennifer Rd PROPER LICENSE CLASS: Yes No
 CITY OR TOWN: Hamden STATE: CT ZIP CODE: 06514 SEX: M F
 OPERATOR LICENSE #: 034624951 STATE: CT DATE OF BIRTH: 03/21/63
 OWNER'S NAME (Enter SAME if Owner is Operator): TOYOTA LEASE TRUST
 ADDRESS (Street Number and Name): Box 105386
 CITY OR TOWN: Atlanta STATE: GA ZIP CODE: BODY TYPE: ST WAG
 REGISTRATION #: 877ZDU STATE: CT VEHICLE YEAR AND MAKE: 2011 TOYT
 VEHICLE IDENTIFICATION NUMBER: 2T3BF4DV2B1751143
 CARRIER NAME:
 CARRIER ADDRESS (#, Street, City or Town, State, Zip Code):
 SOURCE OF CARRIER NAME: Shipping Papers/Trip Manifest Driver Side of Vehicle USDOT # ICCMC #
 GROSS VEHICLE WEIGHT: HAZARDOUS MATERIAL PLACARD REQUIRED? Yes No 4 Digit # DISPLAYED? Yes No 1 Digit #
 HAZARDOUS CARGO: ENFORCEMENT ACTION TAKEN None RELEASED? Yes No Arrest Written Warning Verbal Warning
 STATUTE OR ORDINANCE #S: SUBJECT OF ACTION: Operator Carrier Owner Pedestrian
 AUTOMOBILE INSURANCE - NAME - POLICY #: STATE FARM 048 3023-B31-07
 PARTS OF VEHICLE DAMAGED: 3311
 VEHICLE TOWED TO: TOWED DUE TO DAMAGE

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1	1	N	01	TRAFFIC UNIT # 1 OPERATOR OR PEDESTRIAN #		4	2	1 1
2	2	N	01	TRAFFIC UNIT # 2 OPERATOR OR PEDESTRIAN #		4	2	1 2
3					Month Day Year			3
4					Month Day Year			4
5					Month Day Year			5
6					Month Day Year			6
7					Month Day Year			7
8					Month Day Year			8



A) Narrative Summary:

On 09/15/2012, at 12:43 hours, I, Officer Lovett #50, responded to the intersection of Woodin St. and Fawn Ridge Dr., for a motor vehicle accident.

Op. #1, Heather Nicholl, said she was traveling west on Woodin St.. Op. #1 said she was slowing down with the intention of making a left turn onto Fawn Ridge Dr.. Op. #1 said she went to make the left turn and she did not see Op. #2. Op. #1 said she hit the rear of Op. #2's vehicle with the front left part of her vehicle. Op. #1 said she was not injured as a result of the accident.

Op. #2, Tara Neal, said she was traveling east on Woodin St.. Op. #2 said Op. #1 made her left turn to quick and clipped the left rear part of her vehicle. Op. #2 said she was not injured as a result of the accident.

I observed minor damage to the front left part of Op. #1's vehicle as well as damage to the left rear of Op. #2's vehicle. I find Op. #1 at fault for this accident giving her a verbal warning for Improper Turn, in violation of CGS 14-242.

Nothing Further

OFFICIAL COPY
Hamden Police Department
Records Division

B) List of Missing Items: none

C) List of Physical Evidence: none

D) Case Designation: closed

DAMAGE TO PROPERTY OTHER THAN INVOLVED VEHICLES	1. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE				
	NAME AND ADDRESS OF PROPERTY OWNER				
	2. DESCRIBE THE NATURE AND EXTENT OF PROPERTY DAMAGE				
	NAME AND ADDRESS OF PROPERTY OWNER				
RANK AND SIGNATURE OF INVESTIGATING OFFICER Patrol Officer Lovett, Nicholas	OFFICER ID 0050	POLICE AGENCY IDENTIFICATION Hamden	REPORT DATE 09/21/2012	CASE STATUS Closed	SUPERVISOR

Ribicoff Cottages – Stop Sign Warrant

TO: Housing Authority of New Haven
FROM: Christopher O. Granatini, P.E.
DATE: August 28, 2014
Revised September 5, 2014

Tighe & Bond reviewed the unsignalized intersection of Woodin Street and Belden Street in Hamden with regards to the proposed addition of Augustine Street, a new local roadway connection approved by the City of New Haven as part of the redevelopment of the Ribicoff Cottages. The addition of Augustine Street will convert this intersection from a three-leg intersection to a four-leg intersection. Augustine Street will provide both vehicular and pedestrian access to Woodin Street from the proposed Ribicoff Cottages and West Rock development area.

Travel Speeds and Sight Distances

Woodin Street is classified by the Connecticut Department of Transportation (CTDOT) as an urban minor arterial. It runs east-west in southwestern Hamden, near the New Haven city line, connecting Wintergreen Avenue and Dixwell Avenue (Route 10). The speed limit along Woodin Street, in the vicinity of the development is 25 miles per hour, with one travel lane in each direction.

An automatic traffic recorder (ATR) was placed along Woodin Street between West Side Drive and Belden Street in November 2013. This ATR recorded traffic volumes and travel speeds along Woodin Street. A review of the data exhibits an 85th percentile speed of 40 miles per hour. The 85th percentile speed is defined as the speed at which 85 percent of the traffic is traveling at or below. The 85th percentile speed of 40 miles per hour is 15 miles per hour above the posted speed limit.

Intersection sight distances were evaluated at the proposed four-leg intersection of Augustine Street and Belden Street with Woodin Street, to determine if adequate sight lines for vehicles exiting either Augustine Street or Belden Street are provided.

Since the Town of Hamden does not explicitly define intersection sight distance requirements the Connecticut Department of Transportation (CTDOT) Highway Design Manual was consulted to determine intersection sight distance requirements. According to the Connecticut Department of Transportation Highway Design Manual (2003), the intersection sight distances required for passenger vehicles based on 40 miles per hour travel speeds on a two-lane (one travel lane in each direction) roadway are 445 feet to the right and left. The intersection sight distances from the existing Belden Street approach is approximately 225 feet in both directions based on a review of existing condition mapping. The proposed sight distances from Augustine Street are approximately 225 feet in both directions. As noted the existing Belden Street intersection sight distance is below minimum CTDOT published requirements. However, based on a review of the accident data presented in our previous memorandum related to roadway safety along Wooding Street there is no reported accident history that indicates the less than minimum sight distance poses an existing safety concern.

Recommended Improvements

While existing sight distances do not appear to be problematic for existing drivers, it is acknowledged that minimum intersection sight distance requirements are not met. Therefore, to address this condition for the existing and proposed condition, the existing side street stop control at the Belden Street intersection is proposed to be converted to all-way stop control with stop signs on each approach and with an advance stop sign ahead warning sign on the Woodin Street westbound approach in accordance with the Manual on Uniform Traffic Control Devices (MUTCD). The revised intersection traffic control will facilitate intersection turning movements under protected right of way operations. Furthermore, pedestrian crossings are proposed at this intersection and the all-way stop control will facilitate pedestrian crossing activity. These improvements will also benefit Belden Street traffic, which currently operates under side street stop control only. Additionally, an important benefit of the four-way stop sign control at Belden Street and Augustine Street, is a reduction of travel speeds along Woodin Street.

Justification

Manual on Uniform Traffic Control Devices – Stop Sign Warrants

In accordance with MUTCD standards for multi-way stop control applications, all-way stop control may be considered for "Locations where a road user, after stopping, cannot see conflicting traffic and is not able to negotiate the intersection unless conflicting cross traffic is also required to stop." The less than required sight distances due to the existing roadway geometry and topography of Woodin Street, to the east of the current intersection with Belden Street, combined with operating speeds above the posted speed limit along Woodin Street, justify the installation of all-way stop control to improve traffic safety at this location.

All-Way Stop Control Traffic Operations

Analysis of the weekday morning and afternoon peak hours show that the proposed all-way stop controlled intersection would operate efficiently, with all approaches operating at LOS A in the combined condition with the Augustine Street connection. It is anticipated that the maximum, 95th percentile queue would be less than one vehicle in length and the delay along all approaches less than ten seconds during the weekday morning and afternoon peak hours. A summary of the results of the capacity analysis are enclosed.

Summary

As noted above, there are several benefits that will be realized through the implementation of all-way stop control at the proposed intersection of Belden Street and Augustine Street at Woodin Street. In addition to mitigating the existing less than required intersection sight distance from the Belden Street approach, the stop sign will also reduce travel speeds along Woodin Street and provide very good traffic operations at the proposed all-way stop controlled intersection. Furthermore, the all-way stop sign control will facilitate pedestrian crossing activity at this intersection. These benefits will be realized with a negligible effect on traffic operations along Woodin Street

Intersection												
Intersection Delay, s/veh	8.2											
Intersection LOS	A											
Movement	EBU	EBL	EBT	EBR	WBU	WBL	WBT	WBR	NBU	NBL	NBT	NBR
Vol, veh/h	0	2	140	0	0	26	134	6	0	3	0	39
Peak Hour Factor	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92
Heavy Vehicles, %	2	2	2	2	2	2	2	2	2	2	2	2
Mvmt Flow	0	2	152	0	0	28	146	7	0	3	0	42
Number of Lanes	0	0	1	0	0	0	1	0	0	0	1	0

Approach	EB	WB	NB
Opposing Approach	WB	EB	SB
Opposing Lanes	1	1	1
Conflicting Approach Left	SB	NB	EB
Conflicting Lanes Left	1	1	1
Conflicting Approach Right	NB	SB	WB
Conflicting Lanes Right	1	1	1
HCM Control Delay	8.2	8.4	7.4
HCM LOS	A	A	A

Lane	NBLn1	EBLn1	WBLn1	SBLn1
Vol Left, %	7%	1%	16%	79%
Vol Thru, %	0%	99%	81%	0%
Vol Right, %	93%	0%	4%	21%
Sign Control	Stop	Stop	Stop	Stop
Traffic Vol by Lane	42	142	166	19
LT Vol	0	140	134	0
Through Vol	39	0	6	4
RT Vol	3	2	26	15
Lane Flow Rate	46	154	180	21
Geometry Grp	1	1	1	1
Degree of Util (X)	0.053	0.18	0.209	0.027
Departure Headway (Hd)	4.151	4.189	4.177	4.754
Convergence, Y/N	Yes	Yes	Yes	Yes
Cap	868	844	848	757
Service Time	2.152	2.274	2.256	2.758
HCM Lane V/C Ratio	0.053	0.182	0.212	0.028
HCM Control Delay	7.4	8.2	8.4	7.9
HCM Lane LOS	A	A	A	A
HCM 95th-tile Q	0.2	0.7	0.8	0.1

Intersection

Intersection Delay, s/veh

Intersection LOS

Movement	SBU	SBL	SBT	SBR
Vol, veh/h	0	15	0	4
Peak Hour Factor	0.92	0.92	0.92	0.92
Heavy Vehicles, %	2	2	2	2
Mvmt Flow	0	16	0	4
Number of Lanes	0	0	1	0

Approach

Opposing Approach	NB
Opposing Lanes	1
Conflicting Approach Left	WB
Conflicting Lanes Left	1
Conflicting Approach Right	EB
Conflicting Lanes Right	1
HCM Control Delay	7.9
HCM LOS	A

Lane

Intersection												
Intersection Delay, s/veh	8											
Intersection LOS	A											
Movement	EBU	EBL	EBT	EBR	WBU	WBL	WBT	WBR	NBU	NBL	NBT	NBR
Vol, veh/h	0	5	80	0	0	37	124	21	0	1	0	42
Peak Hour Factor	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92	0.92
Heavy Vehicles, %	2	2	2	2	2	2	2	2	2	2	2	2
Mvmt Flow	0	5	87	0	0	40	135	23	0	1	0	46
Number of Lanes	0	0	1	0	0	0	1	0	0	0	1	0

Approach	EB	WB	NB
Opposing Approach	WB	EB	SB
Opposing Lanes	1	1	1
Conflicting Approach Left	SB	NB	EB
Conflicting Lanes Left	1	1	1
Conflicting Approach Right	NB	SB	WB
Conflicting Lanes Right	1	1	1
HCM Control Delay	7.8	8.3	7.2
HCM LOS	A	A	A

Lane	NBLn1	EBLn1	WBLn1	SBLn1
Vol Left, %	2%	6%	20%	58%
Vol Thru, %	0%	94%	68%	0%
Vol Right, %	98%	0%	12%	42%
Sign Control	Stop	Stop	Stop	Stop
Traffic Vol by Lane	43	85	182	12
LT Vol	0	80	124	0
Through Vol	42	0	21	5
RT Vol	1	5	37	7
Lane Flow Rate	47	92	198	13
Geometry Grp	1	1	1	1
Degree of Util (X)	0.052	0.108	0.224	0.016
Departure Headway (Hd)	3.999	4.202	4.081	4.484
Convergence, Y/N	Yes	Yes	Yes	Yes
Cap	901	844	874	803
Service Time	1.999	2.272	2.131	2.486
HCM Lane V/C Ratio	0.052	0.109	0.227	0.016
HCM Control Delay	7.2	7.8	8.3	7.6
HCM Lane LOS	A	A	A	A
HCM 95th-tile Q	0.2	0.4	0.9	0

Intersection

Intersection Delay, s/veh

Intersection LOS

Movement	SBU	SBL	SBT	SBR
Vol, veh/h	0	7	0	5
Peak Hour Factor	0.92	0.92	0.92	0.92
Heavy Vehicles, %	2	2	2	2
Mvmt Flow	0	8	0	5
Number of Lanes	0	0	1	0

Approach

Approach	SB
Opposing Approach	NB
Opposing Lanes	1
Conflicting Approach Left	WB
Conflicting Lanes Left	1
Conflicting Approach Right	EB
Conflicting Lanes Right	1
HCM Control Delay	7.6
HCM LOS	A

Lane