

# HOW TO READ YOUR NEW YORK STATE POLICE ACCIDENT REPORT

PAGE 1

Page _____ of _____ Pages		New York State Department of Motor Vehicles <b>POLICE ACCIDENT REPORT</b> MV-104A (7/01)										1																																																																																																																											
		<input type="checkbox"/> AMENDED REPORT      DMV COPY																																																																																																																																					
<b>1 Accident Date:</b>		Month		Day		Year		Day of Week		Military Time		No. of Vehicles		No. Injured		No. Killed		Act Investigated at Scene <input type="checkbox"/>		Left Scene <input type="checkbox"/>		Police Photos <input type="checkbox"/>																																																																																																																	
<b>VEHICLE 1</b>												<input type="checkbox"/> VEHICLE 2 <input type="checkbox"/> BICYCLIST <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> OTHER PEDESTRIAN																																																																																																																											
<b>2 VEHICLE 1 - Driver</b>												<b>VEHICLE 2 - Driver</b>																																																																																																																											
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<b>VEHICLE 1 DAMAGE CODES</b>												<b>VEHICLE 2 DAMAGE CODES</b>																																																																																																																											
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<b>7 VEHICLE DAMAGE CODING:</b>												<b>ACCIDENT DIAGRAM</b>																																																																																																																											
1-13. SEE DIAGRAM ON RIGHT.												Circle the diagram below that describes the accident, or draw your own diagram in space provided. 																																																																																																																											
14. UNDERCARRIAGE    17. DEMOLISHED												Cost of repairs to any one vehicle will be more than \$1000.																																																																																																																											
15. TRAILER                 18. NO DAMAGE												<input type="checkbox"/> Unknown/Unable to Determine <input type="checkbox"/> Yes <input type="checkbox"/> No																																																																																																																											
16. OVERTURNED          19. OTHER																																																																																																																																							
<b>8 Reference Marker</b>												<b>Place Where Accident Occurred:</b>																																																																																																																											
Coordinates (if available)												County _____ <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of _____																																																																																																																											
Latitude/Northing												Road on which accident occurred _____ (Route Number or Street Name)																																																																																																																											
Longitude/Easting												at (1) intersecting street _____ (Route Number or Street Name) or @ _____ <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of _____ (Highway, nearest intersecting Route Number or Street Name)																																																																																																																											
<b>9 Accident Description/Officer's Notes</b>																																																																																																																																							
<b>10 ALL INVOLVED</b>																																																																																																																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>8</th> <th>9</th> <th>10</th> <th>11</th> <th>12</th> <th>13</th> <th>14</th> <th>15</th> <th>16</th> <th>17</th> <th>BY</th> <th>TO</th> <th>18</th> <th>Name of all involved</th> <th>Date of Death Only</th> </tr> </thead> <tbody> <tr><td>A</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>B</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>C</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>D</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>E</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>F</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>																									8	9	10	11	12	13	14	15	16	17	BY	TO	18	Name of all involved	Date of Death Only	A																B																C																D																E																F															
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MV104A

PEDESTRIAN/BICYCLIST/OTHER PEDESTRIAN LOCATION		APPARENT CONTRIBUTING FACTORS		Vehicle	
1. Pedestrian/Bicyclist/Other Pedestrian at Intersection 2. Pedestrian/Bicyclist/Other Pedestrian Not at Intersection		<b>Human</b> 2. Alcohol Involvement 3. Backing Unwisely 4. Driver Inattention/Distracted* 5. Driver Inexperience* 6. Drugs (Illegal) 7. Failure to Yield Right-of-Way 27. Failure to Keep Right 21. Fatigued/Drowsy 8. Fell Asleep 9. Following Too Closely 10. Illness 11. Lost Consciousness 12. Passenger Distraction 13. Passing or Lane Usage Improper 14. Pedestrian/Bicyclist/Other Pedestrian Error/Confusion 15. Physical Disability 16. Prescription Medication 17. Traffic Control Disregarded 18. Turning Improperly 19. Unsafe Speed 20. Unsafe Lane Changing 22. Cell Phone (hand-held) 23. Cell Phone (hands-free) 24. Other Electronic Device* 25. Outside Car Distraction* 26. Reaction to Other Uninvolved Vehicle 28. Aggressive Driving/Road Rage		41. Accelerator Defective 42. Brakes Defective 43. Headlights Defective 44. Other Lighting Defects 45. Oversized Vehicle 46. Steering Failure 47. Tire Failure/Inadequate 48. Tow Hitch Defective 49. Windshield Inadequate 50. Driverless/Pursueway Vehicle 60. Other Vehicular* <b>Environmental</b> 61. Animal's Action 62. Glare 63. Lane Marking Improper/Inadequate 64. Obstruction/Debris 65. Pavement Defective 66. Pavement Slippery 67. Shoulders Defective/Improper 68. Traffic Control Device Improper/Non-Working 69. View Obstructed/Limited	
<b>PEDESTRIAN/BICYCLIST/OTHER PEDESTRIAN ACTION</b> 1. Crossing, With Signal 2. Crossing, Against Signal 3. Crossing, No Signal, Marked Crosswalk 4. Crossing, No Signal or Crosswalk 5. Riding/Walking/Skating Along Highway With Traffic 6. Riding/Walking/Skating Along Highway Against Traffic 7. Emerging from in Front of/Behind Parked Vehicle 8. Going to/From Stopped School Bus 9. Getting On/Off Vehicle Other Than School Bus 11. Working in Roadway 12. Playing in Roadway 13. Other Actions in Roadway* 14. Not in Roadway (Indicate)*		<b>TRAFFIC CONTROL</b> 1. None 2. Traffic Signal 3. Stop Sign 4. Flashing Light 5. Yield Sign 6. Officer/Guard 7. No Passing Zone 8. RR Crossing Sign 9. RR Crossing Flashing Light 10. RR Crossing Gates 11. Stopped School Bus-Red Lights Flashing 12. Construction Work Area 13. Maintenance Work Area 14. Utility Work Area 15. Police/Fire Emergency 16. School Zone 20. Other*		<b>DIRECTION OF VEHICLE:</b> 	
<b>LIGHT CONDITIONS</b> 1. Daylight 2. Dawn 3. Dusk 4. Dark-Road Lighted 5. Dark-Road Unlighted		<b>ROADWAY CHARACTER</b> 1. Straight and Level 2. Straight and Grade 3. Straight at Hillcrest 4. Curve and Level 5. Curve and Grade 6. Curve at Hillcrest		<b>PRE-ACCIDENT VEHICLE ACTION</b> 1. Going Straight Ahead 2. Making Right Turn 16. Making Right Turn on Red 3. Making Left Turn 17. Making Left Turn on Red 4. Making U Turn 5. Starting from Parking 6. Starting in Traffic 7. Slowing or Stopping 8. Stopped in Traffic 9. Entering Parked Position 10. Parked 11. Avoiding Object in Roadway 12. Changing Lanes 13. Passing 14. Merging 15. Backing 18. Police Pursuit 20. Other*	
<b>ROADWAY SURFACE CONDITION</b> 1. Dry 2. Wet 3. Muddy 4. Snow/Ice 5. Slush 6. Flooded 0. Other*		<b>WEATHER</b> 1. Clear 2. Cloudy 3. Rain 4. Snow 5. Sleet/Hail/Freezing Rain 6. Fog/Smog/Smoke 0. Other*		<b>LOCATION OF FIRST EVENT</b> 1. On Roadway 2. Off Roadway	
<b>WHICH VEHICLE OCCUPIED</b> 1. Vehicle No. 1 2. Vehicle No. 2 A. All-Terrain Vehicle (ATV) B. Bicyclist C. In-Line Skater D. Other* P. Pedestrian S. Snowmobiler		<b>LOCATION OF MOST SEVERE PHYSICAL COMPLAINT</b> 1. Head 2. Face 3. Eye 4. Neck 5. Chest 6. Back 7. Shoulder-Upper Arm 8. Elbow-Lower Arm-Hand 9. Abdomen - Pelvis 10. Hip-Upper Leg 11. Knee-Lower Leg-Foot 12. Entire Body		<b>TYPE OF ACCIDENT - COLLISION WITH</b> 1. Other Motor Vehicle 2. Pedestrian 3. Bicyclist 4. Animal 5. Railroad Train 6. In-Line Skater 7. Drift 8. Other Pedestrian 10. Other Object (Not Fixed)*	
<b>POSITION IN/ON VEHICLE</b> 1. Driver 2-7. Passengers 8. Riding/Hanging on Outside		<b>TYPE OF PHYSICAL COMPLAINT</b> 1. Amputation 2. Concussion 3. Internal 4. Minor Bleeding 5. Severe Bleeding 6. Minor Burn 7. Moderate Burn 8. Severe Burn 9. Fracture - Dislocation 10. Contusion - Bruise 11. Abrasion 12. Complaint of Pain 13. None Visible 14. Whiplash		<b>COLLISION WITH FIXED OBJECT</b> 11. Light Support/Utility Pole 12. Guide Rail-Not At End 13. Guide Rail-End 14. Crash Cushion 15. Sign Post 16. Tree 17. Building/Wall 18. Curbing 19. Fence 20. Bridge Structure 21. Culvert/Head Wall 22. Median-Not At End 23. Median-End 24. Barrier 25. Snow Embankment 26. Earth Embankment/Rock Cut/Ditch 27. Fire Hydrant 30. Other Fixed Object* <b>NO COLLISION</b> 31. Overturned 32. Fire/Explosion 33. Submersion 34. Ran Off Roadway Only 40. Other*	
<b>SAFETY EQUIPMENT USED</b> 1. None 2. Lap Belt 3. Harness 4. Lap Belt/Harness 5. Child Restraint Only 6. Helmet (Motorcycle Only) 7. Air Bag Deployed 8. Air Bag Deployed/Lap Belt 9. Air Bag Deployed/Harness A. Air Bag Deployed/Lap Belt/Harness B. Air Bag Deployed/Child Restraint 0. Other*		<b>EJECTION FROM VEHICLE</b> 1. Not Ejected 2. Partially Ejected 3. Ejected AGE SEX M/F		<b>VICTIM'S PHYSICAL AND EMOTIONAL STATUS</b> 1. Apparent Death 2. Unconscious 3. Semiconscious 4. Incoherent 5. Shock 6. Conscious <b>INJURED TAKEN</b> 17 BY TO 18	
<b>COVER SHEET</b> 1. Vehicle No. 1 2. Vehicle No. 2 3. Vehicle No. 3 4. Vehicle No. 4 5. Vehicle No. 5 6. Vehicle No. 6 7. Vehicle No. 7 8. Vehicle No. 8 9. Vehicle No. 9 10. Vehicle No. 10 11. Vehicle No. 11 12. Vehicle No. 12 13. Vehicle No. 13 14. Vehicle No. 14 15. Vehicle No. 15 16. Vehicle No. 16 17. Vehicle No. 17 18. Vehicle No. 18 19. Vehicle No. 19 20. Vehicle No. 20 21. Vehicle No. 21 22. Vehicle No. 22 23. Vehicle No. 23 24. Vehicle No. 24 25. Vehicle No. 25 26. Vehicle No. 26 27. Vehicle No. 27 28. Vehicle No. 28 29. Vehicle No. 29 30. Vehicle No. 30 31. Vehicle No. 31 32. Vehicle No. 32 33. Vehicle No. 33 34. Vehicle No. 34 35. Vehicle No. 35 36. Vehicle No. 36 37. Vehicle No. 37 38. Vehicle No. 38 39. Vehicle No. 39 40. Vehicle No. 40		<b>COVER SHEET</b> 1. Vehicle No. 1 2. Vehicle No. 2 3. Vehicle No. 3 4. Vehicle No. 4 5. Vehicle No. 5 6. Vehicle No. 6 7. Vehicle No. 7 8. Vehicle No. 8 9. Vehicle No. 9 10. Vehicle No. 10 11. Vehicle No. 11 12. Vehicle No. 12 13. Vehicle No. 13 14. Vehicle No. 14 15. Vehicle No. 15 16. Vehicle No. 16 17. Vehicle No. 17 18. Vehicle No. 18 19. Vehicle No. 19 20. Vehicle No. 20 21. Vehicle No. 21 22. Vehicle No. 22 23. Vehicle No. 23 24. Vehicle No. 24 25. Vehicle No. 25 26. Vehicle No. 26 27. Vehicle No. 27 28. Vehicle No. 28 29. Vehicle No. 29 30. Vehicle No. 30 31. Vehicle No. 31 32. Vehicle No. 32 33. Vehicle No. 33 34. Vehicle No. 34 35. Vehicle No. 35 36. Vehicle No. 36 37. Vehicle No. 37 38. Vehicle No. 38 39. Vehicle No. 39 40. Vehicle No. 40		<b>COVER SHEET</b> 1. Vehicle No. 1 2. Vehicle No. 2 3. Vehicle No. 3 4. Vehicle No. 4 5. Vehicle No. 5 6. Vehicle No. 6 7. Vehicle No. 7 8. Vehicle No. 8 9. Vehicle No. 9 10. Vehicle No. 10 11. Vehicle No. 11 12. Vehicle No. 12 13. Vehicle No. 13 14. Vehicle No. 14 15. Vehicle No. 15 16. Vehicle No. 16 17. Vehicle No. 17 18. Vehicle No. 18 19. Vehicle No. 19 20. Vehicle No. 20 21. Vehicle No. 21 22. Vehicle No. 22 23. Vehicle No. 23 24. Vehicle No. 24 25. Vehicle No. 25 26. Vehicle No. 26 27. Vehicle No. 27 28. Vehicle No. 28 29. Vehicle No. 29 30. Vehicle No. 30 31. Vehicle No. 31 32. Vehicle No. 32 33. Vehicle No. 33 34. Vehicle No. 34 35. Vehicle No. 35 36. Vehicle No. 36 37. Vehicle No. 37 38. Vehicle No. 38 39. Vehicle No. 39 40. Vehicle No. 40	

MV-1040CV (11/13)

**There are only 3 valid entries for injury code boxes 14, 15 and 16:**

1. three dashes (-) meaning "does not apply" because no injury occurred.
2. three X's meaning that an injury did occur but its complete nature is "unknown".
3. three numeric injury codes which individually reflect the LOCATION OF MOST SEVERE PHYSICAL COMPLAINT, the TYPE OF PHYSICAL COMPLAINT and the VICTIM'S PHYSICAL AND EMOTIONAL STATUS.

The injury codes in column 14, the LOCATION OF MOST SEVERE PHYSICAL COMPLAINT, are self-explanatory. Definitions of the injury codes for columns 15 and 16 are as follows:

**COLUMN 15 - TYPE OF PHYSICAL COMPLAINT:**  
This column is used to describe the type of physical injury sustained. The following are definitions of the Types of Physical Complaints for Column 15.

1. Amputation — Severed parts.
2. Concussion — Dazed condition as the result of a blow to the head.
3. Internal — No visible injury, but signs of anxiety, internal pain and thirst.
4. Minor Bleeding — Slight discharge of blood.
5. Severe Bleeding — Steady flow of blood that is not controlled.
6. Minor Burn — Reddening of the skin.
7. Moderate Burn — Reddening, blistering of skin over large area.
8. Severe Burn — Reddening, blistering or charring of the skin over a large portion of the body.
9. Fracture — Dislocation, evidence of displacement of bones.
10. Contusion/Bruise — Discoloration.
11. Abrasion — Top layer of skin is scraped.
12. Complaint of pain — No visible injury noted, but victim complains of pain.
13. None Visible — No visible injuries, but victim is other than normal.
14. Whiplash — Complaint of neck and head pain.

**Column 16 — VICTIM'S PHYSICAL AND EMOTIONAL STATUS:** Column 16 is used to describe the overall condition of the injured person. A victim's status is defined as follows:

1. Apparent Death.
2. Unconscious — Victim unaware of surroundings, and does not respond to verbal or physical stimuli.
3. Semi-conscious — Victim not fully aware of surroundings.
4. Incoherent — Lacking orderly continuity of thought.
5. Shock — Depressed condition of all body functions, resulting from serious injury or incident.
6. Conscious — Normal and aware of surroundings.

**COLUMN 17 — INJURED TAKEN BY:** The means by which an injured person is transported to a hospital is to be recorded in Column 17. If the vehicle is an ambulance with a New York ambulance license plate, enter the license plate number. For injured persons taken for emergency medical treatment in a vehicle other than an ambulance with a NY ambulance license plate, enter the following codes in column 17:

- 9992 Helicopter
- 9993 Unknown Ambulance
- 9994 Coroner's Van or Municipal Emergency Equip.
- 9995 Private Vehicle
- 9996 Invalid Coach (Funeral)
- 9997 Fire Vehicle
- 9998 Police Car
- 9999 Police Ambulance

**COLUMN 18 — INJURED TAKEN TO:** See the hospital codes on the bleed-through sheet.

For additional information on filling out this form, refer to the Police Accident Report Manual (Form P-33).



MV-10400V (11/13)

**ALBANY COUNTY HOSPITALS**

Albany Medical Center Hospital - 0101  
 Childs Hospital - 0104  
 Eddy Cohoes Rehabilitation Center - 0107  
 Memorial Hospital - 0103  
 St. Peter's Hospital - 0102  
 V.A. Hospital - 0106

**ALLEGANY COUNTY HOSPITALS**

Cuba Memorial Hospital - 0201  
 Memorial Hospital of William & Gertrude F. Jones - 0202

**BRONX COUNTY HOSPITALS**

Bronx Municipal Hospital Center - 7003  
 Bronx Psychiatric Center - 7004  
 Bronx V.A. Hospital - 7005  
 Calvary Hospital Inc. - 7006  
 Lincoln Hospital and Medical Health Center - 7010  
 Our Lady of Mercy Medical Center - 7011  
 Montefiore Hospital and Medical Center - 7012  
 North Central Bronx Hospital - 7026  
 Our Lady of Mercy Medical Center Russo Pavilion - 7016  
 Prospect Hospital After Care - 7017  
 St. Barnabas Hospital - 7019  
 The Bronx-Lebanon Hospital Center Concourse Division - 7020  
 The Bronx-Lebanon Hospital Center Fulton Division - 7021  
 Montefiore Hosp. J. D. Weiler Hosp. of  
 A. Einstein Coll. of Med. - 7022  
 Union Hospital - 7023  
 Westchester Square Hospital - 7025  
 Montefiore Center, Henry and Lucy Moses Division - 7026

**BROOME COUNTY HOSPITALS**

Binghamton Psychiatric Center - 0305  
 Medcenter Division of United Health Services - 0303  
 Our Lady of Lourdes Memorial Hospital - 0304  
 United Health Services-Binghamton General Hospital Div. - 0301  
 United Health Services-Wilson Hospital Division - 0302

**CATTARAUGUS COUNTY HOSPITALS**

Dean General Hospital - Main - 0401  
 Dean General Hospital - West - 0405  
 Parkway Primary Care - 0406  
 Tri-County Memorial Hospital - 0404

**CAYUGA COUNTY HOSPITALS**

Albany Memorial Hospital - 0501

**CHAUTAUQUA COUNTY HOSPITALS**

Brooks Memorial Hospital - 0601  
 Jamestown General Hospital - 0602  
 Lake Shore Hospital Inc. - 0603  
 WCA Hospital at Jones Memorial Health Center - 0606  
 Westfield Memorial Hospital - 0604  
 Women's Christian Association - 0605

**CHEMUNG COUNTY HOSPITALS**

Arnold-Ogden Memorial Hospital - 0701  
 St. Joseph's Hospital - 0702

**CHENANGO COUNTY HOSPITALS**

Chenango Memorial Hospital Inc. - 0801

**CLINTON COUNTY HOSPITALS**

Champlain Valley Physicians Hospital - 0901  
 Plattsburgh Air Force Base Hospital - 0903

**COLUMBIA COUNTY HOSPITALS**

Columbia-Greene Medical Center, Columbia Division - 1001

**CORTLAND COUNTY HOSPITALS**

Cortland Memorial Hospital Inc. - 1101

**DELAWARE COUNTY HOSPITALS**

Community Hospital - 1201  
 Delaware Valley Hospital - 1202  
 Margaretville Memorial Hospital - 1203  
 O'Connor Hospital, Division of Bassett Health Care - 1205  
 The Hospital - 1206

**DUTCHESS COUNTY HOSPITALS**

Highland Hospital - 1304  
 Hudson River Psychiatric Center - 1301  
 Northern Dutchess Hospital - 1305  
 St. Francis Hospital - 1307  
 V.A. Medical Center, Castle Point - 1302  
 Vassar Brothers Hospital - 1306

**NEW YORK STATE HOSPITAL CODES****ERIE COUNTY HOSPITALS**

Bertrand Charfee Hospital - 1402  
 Booth Memorial Hospital - 1410  
 Buffalo Columbus Hospital, Inc. - 1412  
 Buffalo General Hospital - 1404  
 Buffalo General Hospital - Deaconess Center - 1414  
 Buffalo Psychiatric Center - 1421  
 Childrens Hospital - 1413  
 Erie County Medical Center - 1405  
 Gowanda Psychiatric Center - 1407  
 Kenmore Mercy Hospital - 1416  
 La'ayette General Hospital - 1417  
 Mercy Hospital - 1418  
 Millard Fillmore Hospital - 1401  
 Millard Fillmore Suburban Hospital - 1423  
 Our Lady of Victory Hospital - 1408  
 Roswell Park Memorial Institute - 1420  
 Sheehan Memorial Hospital - 1406  
 Sisters of Charity Hospital - 1411  
 Sheridan Park Hospital - 1415  
 St. Francis Hospital - 1419  
 St. Joseph Hospital of Cheekowaga - 1422  
 V.A. Medical Center - 1403

**ESSEX COUNTY HOSPITALS**

Adirondack Medical Center - Lake Placid Site - 1504  
 Elizabethtown Community Hospital - 1501  
 Moses-Ludington Hospital - 1503

**FRANKLIN COUNTY HOSPITALS**

Adirondack Medical Center - Saranac Lake Site - 1605  
 Alice Hyde Memorial Hospital - 1602  
 Mercy General Hospital - 1603  
 Sunmount Hospital - 1604

**FULTON COUNTY HOSPITALS**

Johnstown Hospital - 1701  
 Nathan Littauer Hospital - 1702

**GENESEE COUNTY HOSPITALS**

Batavia V. A. Hospital - 1803  
 Genesee Memorial Hospital - 1801  
 St. Jerome Hospital - 1802

**HERKIMER COUNTY HOSPITALS**

Herkimer Memorial Hospital - 2101  
 Little Falls Hospital - 2102  
 Mohawk Valley General Hospital - 2103

**JEFFERSON COUNTY HOSPITALS**

Camp Drum Hospital - 2205  
 Carthage Area Hospital - 2201  
 Edward J. Noble Hospital of Alexandria Bay - 2202  
 House of the Good Samaritan - 2203  
 Mercy Hospital of Watertown - 2204

**Kings County Hospitals**

Baptist Medical Center of New York - 7141  
 Brookdale Hospital Center - 7103  
 Brooklyn Hospital Center Downtown Campus - 7105  
 Brooklyn V.A. Hospital - 7107  
 Brooklyn Hospital Center Caledonian Campus - 7108  
 Canon C. Peck Memorial Hospital - 7109  
 Community Hospital of Brooklyn - 7110  
 Coney Island Hospital - 7111  
 Flatbush General Hospital - 7113  
 Hospital of the Holy Family Division of Catholic Med. Cr. - 7115  
 Jewish Hospital and Medical Center - 7116  
 Kings County Hospital Center - 7119  
 Kings Highway Hospital - 7120  
 Kingsbrook Jewish Medical Center - 7121  
 Long Island College Hospital - 7124  
 Lutheran Medical Center - 7126  
 Maimonides Medical Center - 7127  
 Methodist Hospital of Brooklyn - 7128  
 St. John's Interfaith Medical Center - 7132  
 St. Mary's Hospital of Brooklyn - 7133  
 State University Hospital Downstate Medical Center - 7134  
 Victory Memorial Hospital - 7137  
 Wyckoff Heights Medical Center - 7139  
 Woodhull Medical and Mental Health Center - 7142  
 University Hospital of Brooklyn - 7143  
 Wyckoff Heights Med. Ctr. Jackson Heights Division - 7144

**LEWIS COUNTY HOSPITALS**

Lewis County General Hospital - 2401

**LIVINGSTON COUNTY HOSPITALS**

Dansville Memorial Hospital - 2501  
 Mt. Morris Tuberculosis Hospital - 2502  
 Nicholas H. Noyes Memorial Hospital - 2503

**MADISON COUNTY HOSPITALS**

Community Memorial Hospital - 2601  
 Oneida City Hospital - 2602

**MONROE COUNTY HOSPITALS**

Genesee Hospital - 2708  
 Highland Hospital - 2701  
 Lakeside Memorial Hospital - 2702  
 Monroe Community Hospital - 2709  
 Park Ridge Hospital - 2703  
 Rochester General Hospital - 2704  
 Rochester Psychiatric Center - 2707  
 St. Mary's Hospital - 2705  
 Strong Memorial Hospital - 2706

**MONTGOMERY COUNTY HOSPITALS**

Amsterdam Memorial Hospital - 2601  
 St. Mary's Hospital - 2602

**NASSAU COUNTY HOSPITALS**

Central General Hospital - 2906  
 Franklin General Hospital Medical Center - 2913  
 Hempstead General Hospital - 2907  
 H.I.P. Hospital of Long Island - 2903  
 Long Beach Hospital - 2900  
 Long Island Jewish Hillside Medical Center - 2918  
 Lydia E. Hall Hospital - 2912  
 Massapequa General Hospital - 2917  
 Mercy Hospital - 2915  
 Mid Island Hospital - 2910  
 Nassau County Medical Center - 2909  
 North Shore University Hospital - 2901  
 North Shore Univ. Hosp. at Glen Cove - 2902  
 South Nassau Community Hospital - 2911  
 St. Francis Hospital - 2916  
 Syosset Community Hospital - 2919  
 Winthrop University Hospital - 2905

**NEW YORK COUNTY HOSPITALS**

New York Downtown Hospital - 7201  
 Bellevue Hospital Center - 7202  
 Beth Israel Medical Center - 7203  
 Coler Memorial Hospital - 7204  
 Cabrini Medical Center - 7258  
 Columbia-Presbyterian Medical Center - 7205  
 Doctors Hospital - 7208  
 Flower and Fifth Avenue Hospital - 7209  
 Goldwater Memorial Hospital - 7212  
 Harlem Hospital Center - 7215  
 Hospital for Joint Diseases - 7216  
 Hospital for Special Surgery - 7216  
 Joint Diseases North General Hospital - 7259  
 Lenox Hill Hospital - 7223  
 Manhattan Eye, Ear and Throat Hospital - 7226  
 Manhattan State Hospital - 7227  
 Manhattan V.A. Hospital - 7228  
 Medical Arts Center Hospital - 7229  
 Memorial Hospital for Cancer & Allied Diseases - 7230  
 Metropolitan Hospital Center - 7231  
 Mount Sinai Hospital - 7233  
 New York Hospital - 7234  
 New York Eye and Ear Infirmary - 7237  
 New York Infirmary - 7239  
 New York University Medical Center - 7241  
 Rockefeller University Hospital - 7246  
 St. Luke's Roosevelt Hospital Center - 7247  
 Saint Clare's Hospital and Health Center - 7249  
 St. Luke's Hospital Center - 7251  
 St. Vincent's Hospital and Medical Center - 7252  
 Presbyterian Hospital in NYC A. Pavilion Division - 7260  
 Presbyterian Hospital in the City of New York - 7261

MS-104DOV (11/13)

**NIAGARA COUNTY HOSPITALS**

Degrift Memorial Hospital - 3101  
 Inter-community Memorial Hospital - 3102  
 Lockport Memorial Hospital - 3103  
 Mount, St. Mary's Hospital - 3104  
 Mount View Hospital - 3105  
 Niagara Falls Memorial Medical Center - 3106  
 Ransomville General Hospital - 3107

**ONEIDA COUNTY HOSPITALS**

Childrens Hospital and Rehabilitation Center - 3201  
 Faxon Hospital, Inc. - 3203  
 Griffs A.F.B. Hospital - 3209  
 Mercy Psychiatric Center - 3202  
 Rome Hospital & Murphy Memorial Hospital - 3204  
 Rose Hospital - 3206  
 St. Elizabeth Hospital - 3207  
 St. Luke's Memorial Hospital Center - 3208  
 Utica Psychiatric Center - 3205

**ONONDAGA COUNTY HOSPITALS**

Community-General Hospital - 3302  
 Crouse-Ingling Memorial Hospital - 3305  
 St. Joseph's Hospital - 3304  
 St. Mary's Hospital of Syracuse - 3306  
 State University Hospital Upstate Medical Center - 3307  
 V.A. Hospital - 3301

**ONTARIO COUNTY HOSPITALS**

Canandaigua V.A. Hospital - 3401  
 Clifton Springs Hospital and Clinic - 3403  
 Frederick Ferris Thompson Hospital - 3402  
 Geneva General Hospital - Long Term Care - 3404

**ORANGE COUNTY HOSPITALS**

Arden Hill Hospital - 3505  
 Cornwall Hospital - 3506  
 Horton Memorial Hospital - 3503  
 Middletown Psychiatric Center - 3504  
 St. Anthony Community Hospital - 3507  
 Mercy Community Hospital of Port Jervis - 3508  
 St. Luke's Hospital of Newburgh - 3509  
 Tuxedo Memorial Hospital Health Care Center - 3501  
 West Point Hospital - 3514

**ORLEANS COUNTY HOSPITALS**

Medina Memorial Hospital - 3602

**OSWEGO COUNTY HOSPITALS**

A.L. Lee Memorial Hospital - 3701  
 Oswego Hospital - 3702

**OTSEGO COUNTY HOSPITALS**

Aurelia Osborn Fox Memorial Hospital - 3801  
 Mary Inogene Bassett Hospital - 3803

**PUTNAM COUNTY HOSPITALS**

Julia L. Butterfield Memorial Hospital - 3901  
 Putnam Hospital Center - 3902

**Queens County Hospitals**

Astoria General Hospital - 7301  
 Booth Memorial Medical Center - 7302  
 Boulevard Hospital - 7303  
 Catholic Medical Center - Brooklyn-Queens, Inc. 7304  
 City Hospital Center at Elmhurst (Satellite) - 7306  
 Creedmore Psychiatric Center - 7306  
 Deepdale General Hospital - 7307  
 Flushing Hospital and Medical Center - 7308  
 Catholic Medical Center-Brooklyn-Queens, Inc. St. Joseph's Hospital Div. - 7309  
 H.I.P. Hospital, Inc. - 7310  
 Jamaica Hospital - 7311  
 Long Island Jewish-Hillside Medical Center - 7314  
 Mary Immaculate Hospital Div. of Cath. Med. Ctr., Brooklyn-Queens - 7315  
 Parkway Hospital - 7316  
 Parsons Hospital - 7317  
 Peninsula Hospital Center - 7318  
 Physician's Hospital - 7319  
 Queens Hospital Center - 7321  
 St. John's Episcopal Hospital South Shore Div. - 7322  
 St. Albans Navit Hospital - 7323  
 St. John's Queen Hospital Div. of Cath. Med. Ctr., Brooklyn-Queens - 7324  
 St. Mary's Hospital for Children - 7325  
 Laguardia Hospital - 7326

**NEW YORK STATE HOSPITAL CODES****RENSSELAER COUNTY HOSPITALS**

Leonard Hospital - 4101  
 Samaritan Hospital - 4102  
 St. Mary's Hospital - 4103

**RICHMOND COUNTY HOSPITALS**

Bayley Seion Hospital - 7406  
 Doctor's Hospital of Staten Island - 7401  
 Richmond Memorial Hospital and Health Center - 7402  
 Sea View Hospital and Home - 7403  
 St. Vincent's Medical Center of Richmond - 7404  
 Staten Island Hospital - The Urgent Care Center - 7405  
 U.S. Public Health Service Hospital (Marine Hospital) - 7406  
 Staten Island University Hospital - North - 7409  
 Staten Island University Hospital - South - 7410

**ROCKLAND COUNTY HOSPITALS**

Good Samaritan Hospital - 4302  
 Helen Hayes Hospital - 4305  
 Nyack Hospital - 4303  
 N.Y.S. Rehabilitation Hospital - 4304  
 Rockland Psychiatric Center - 4301  
 Summit Park Hospital - Rockland Co. Infirmary - 4305

**ST. LAWRENCE COUNTY HOSPITALS**

A. Barton Hopburn Hospital - 4401  
 Canton-Potsdam Hospital - 4406  
 Clifton Fine Hospital - 4403  
 Edward J. Noble Hospital - (Canton) - 4404  
 Edward J. Noble Hospital - (Gouverneur) - 4408  
 Messina Memorial Center Hospital - 4405  
 St. Lawrence Psychiatric Center - 4407

**SARATOGA COUNTY HOSPITALS**

Adirondack Regional Hospital - 4502  
 Benedict Health Center - 4503  
 Saratoga Hospital - 4501

**SCHENECTADY COUNTY HOSPITALS**

Bellevue Maternity Hospital - 4605  
 Ellis Hospital - 4603  
 St. Clare's Hospital - 4601

**SCHOHARIE COUNTY HOSPITALS**

Community Hospital of Schoharie County, Inc. - 4701

**SCHUYLER COUNTY HOSPITALS**

Schuyler Hospital - 4801

**SENECA COUNTY HOSPITALS**

Seneca Falls Hospital - 4901  
 Taylor-Brown Health Care Center and Nursing Home - 4902  
 Willard Psychiatric Center - 4903

**STEBEN COUNTY HOSPITALS**

Barn V.A. Hospital - 5005  
 Bethesda Hospital - 5001  
 Corning Hospital - 5002  
 Ira Davenport Memorial Hospital - 5003  
 St. James Mercy Hospital - 5004

**SUFFOLK COUNTY HOSPITALS**

Brookhaven Memorial Hospital - 5116  
 Brunswick Hospital Center - 5111  
 Central Islip Psychiatric Center - 5117  
 Central Suffolk Hospital - 5101  
 Community Hospital of Western Suffolk - 5112  
 Eastern Long Island Hospital - 5121  
 Good Samaritan Hospital - 5108  
 Huntington Hospital - 5104  
 J.T. Mather Hospital - 5110  
 Kings Park Psychiatric Center - 5113  
 Pilgrim Psychiatric Center - 5107  
 Southampton Hospital - 5119  
 Southside Hospital - 5114  
 South Oaks Psychiatric Center - 5109  
 St. Charles Hospital - 5122  
 St. John's Smithtown Hospital - 5115  
 Suffolk State School - 5133  
 University Hospital Stony Brook - 5134  
 V.A. Medical Center - Northport - 5118

**SULLIVAN COUNTY HOSPITALS**

Community General Hosp. of Sullivan Co. - G. Herman Div. - 5201  
 Community General Hosp. of Sullivan Co. - Harris - 5204

**TIOGA COUNTY HOSPITALS**

Tioga General Hospital - 5301

**TOMPKINS COUNTY HOSPITALS**

Robert Packer Hospital - 5402  
 Tompkins Community Hospital - 5401

**ULSTER COUNTY HOSPITALS**

Beneditine Hospital - 5503  
 Ellenville Community Hospital - 5502  
 Kingston Hospital - 5501

**WARREN COUNTY HOSPITALS**

Glens Falls Hospital, Inc. - 5601

**WASHINGTON COUNTY HOSPITALS**

Emma Loring Stevens Hospital - 5701  
 Mary McClellan Hospital - 5702

**WAYNE COUNTY HOSPITALS**

Lyons Community Hospital - 5802  
 Mayers Community Hospital - 5803  
 Newark-Wayne Community Hospital, Inc. - 5804

**WESTCHESTER COUNTY HOSPITALS**

Bytchedale Childrens Hospital - 5901  
 Burke Rehabilitation Center - 5902  
 Community Hospital at Dobbs Ferry - 5903  
 FDR V.A. Hospital in Montrose - 5911  
 Hudson Valley Hospital Center - 5908  
 Lawrence Hospital - 5906  
 Mount Vernon Hospital - 5920  
 New Rochelle Hospital Medical Center - 5923  
 Northern Westchester Hospital - 5907  
 NY Hospital-Cornel Medical Center-Westchester Div. - 5916  
 Phelps Memorial Hospital - 5909  
 St. Agnes Hospital - 5919  
 St. John's Riverside Hospital - 5910  
 St. Joseph's Hospital - 5925  
 St. Vincent's Hospital and Medical Center of NY - 5917  
 United Hospital - 5912  
 Westchester County Medical Center - 5905  
 White Plains Hospital - 5913  
 Yonkers General Hospital - 5914

**WYOMING COUNTY HOSPITALS**

Wyoming County Community Hospital - 6001

**YATES COUNTY HOSPITALS**

Soldiers and Sailors Memorial Hospital - 6101

**OUT-OF-STATE**

Canada - 5270  
 Connecticut - 5370  
 Massachusetts - 9170  
 New Jersey - 9670  
 Pennsylvania - 9470  
 Vermont - 9070  
 Any Other - 9970



## TRUCK/BUS CLASSIFICATION

The table below gives the codes that should be entered on the MV-104A (Police Accident Report) in the box (Vehicle Type". These codes apply to all buses except school buses, and to all trucks except pick-up trucks.

For example, an accident-involved vehicle that is a flat-bed truck with two axes on the tractor and two on the trailer would be coded G3; a New York City transit authority bus would be coded A.



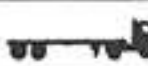







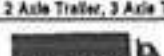



We also request that the investigating officer provide the following information about cargo in the "Accident Description/Officer Notes" section, where applicable.

Was vehicle authorized:

1. to be oversize (height and/or width load)
2. to carry an overweight load?

and/or labeled to transport:

3. flammable/explosive materials?
4. poisonous/corrosive materials?
5. radioactive materials?
6. other hazardous cargo (explain?)

		TYPE OF VEHICLE			
		(1) BOX	(2) TANK	(3) PLATFORM	
					
N U M B E R  O F  A X I E S	C	 2 Axle Single Unit	C1	C2	C3
	D	 3 Axle Single Unit	D1	D2	D3
	E	 4 Axle Single Unit	E1	E2	E3
	F	 1 Axle Trailer, 2 Axle Tractor	F1	F2	F3
	G	 2 Axle Trailer, 2 Axle Tractor	G1	G2	G3
	H	 3 Axle Trailer, 3 Axle Tractor	H1	H2	H3
	I	 2 Axle Trailer, 3 Axle Tractor	I1	I2	I3
	J	 3 Axle Trailer, 3 Axle Tractor	J1	J2	J3
	K	 2 Axle Trailer, 3 Axle Truck	K1	K2	K3
	L	 Semi & Trailer, Tractor 3 Axle (Doubles)	L1	L2	L3
	M	 Other Combinations	M1	M2	M3
B U S E S	A	TRANSIT BUS	A	A	A
	B	OVER-THE ROAD COACH	B	B	B

## PAGE 1

- 1.** Nearly everything you need to know about your car accident can be found on this page. That's why it's critical that every single detail accurately reflects exactly what happened in your accident. This is especially true with the numbered boxes on the left and right-hand margins of this page. Each one of those boxes (which the form calls "columns") refers to specific circumstances and has specific codes which the investigating officer writes in each box. You can find more information about these codes below – or by simply contacting our law firm. If you have a question, we can find the answer.
- 2.** If the investigating police officer determined that one of the drivers violated the law during the accident, the officer will include that information here. Such information could have a dramatic impact on the outcome of your car insurance claim. If the other driver broke the law and caused your accident, your claim could potentially be worth more.
- 3.** The five boxes listed here refer to where the point of impact occurred in your car accident. If you were driving vehicle one and the other driver hit the right-front corner of your car, Box 1 will likely contain a "3." These numbers are very important since they indicate where the cars were when the accident occurred. If the other driver crossed the center line and caused a head-on collision, these numbers should reflect that information. Otherwise, insurance companies might use this data to reduce or deny your claim.
- 4.** Every single word in this section matters. The words the investigating officer uses to describe your accident will be carefully analyzed by insurance companies. If they think there's anything here that makes your accident seem like it was your fault, they will likely focus on those words and use them as justification for paying you less than you rightfully deserve. We can help you review this section and make sure you agree with every single word. If not, we can advocate to have the accident report amended or take other actions on your behalf.

## PAGE 2

- 5.** The codes for Columns 19 through 24 on Page 1 can be found here. These codes refer to the "apparent contributing factors" which resulted in your collision. Codes can include "alcohol involvement" (2), "driver inattention/distracted" (4), "fell asleep" (8), "unsafe speed" (19), "aggressive driving/road rage" (28) and "texting" (31). If the investigating police officer believed the other driver contributed to your accident, that information will likely be found here. Insurance companies carefully review this section when determining who caused your crash. You should as well – and we can help.
- 6.** The codes for Columns 4, 5, 6 and 7 on Page 1 refer to the conditions at the time of the accident. This includes the light conditions, condition of the road and weather conditions. Often, drivers who cause collisions later try to claim the road was dark or wet and they simply couldn't stop in time – even though the road was dry and you could see just fine. Small inconsistencies like these can sometimes have a big impact on the outcome of your case.
- 7.** If you were injured in your car accident, the codes for Columns 14, 15 and 16 on Page 1 should reflect that information. The same is true if the other driver was injured – or not injured – in the accident. Insurance companies will review the numbers listed in these boxes and often use this data when determining whether or how much to compensate injury victims. Make sure this information is accurate. Otherwise, you might have a hard time getting the money you rightfully deserve for your crash.

## PAGE 3

**8.** This page goes into more detail about Columns 14, 15, and 16 – the boxes reserved for the type of injuries sustained by drivers and passengers in your motor vehicle accident. We cannot stress to you enough just how important it is that you carefully review the numbers listed in this section. If you disagree with any of the codes written in these boxes, contact our law firm. We can help you make sure your accident report accurately reflects the injuries you sustained in your accident. That way, you can get the money you need after your accident.

## PAGE 4

**9.** Every hospital in New York State has a 4-digit code investigating police officers use when describing which hospital injury victims were taken to after a car accident. This 4-digit code will then be entered in Column 18 on Page 1. Here again, make sure the correct code was entered in Column 18. If you were taken to Bronx Municipal Hospital Center, Column 18 should have 7003 written in that column.

## PAGE 5

**10.** More 4-digit codes for more New York State hospitals for Column 18 on Page 1 can be found on this page.

## PAGE 6

**11.** If your motor vehicle accident involved a truck or bus, the codes for what type of truck caused your accident will be found here and entered in box marked "Vehicle Type" on Page 1. Here again, make sure this information is accurate. Otherwise, insurance companies could use any mistake made here as justification for reducing or denying your claim. We can review this section with you – or any other section on your accident form – and make sure all the facts accurately reflect exactly what happened in your accident.