NASS Law Enforcement Data Collection Form

This collection of information is voluntary and will be used to develop a sampling frame of law enforcement agencies. Public reporting burden is estimated to average 120 minutes, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. We will not collect any personal information that would allow anyone to identify you. Please note that a federal agency many not conduct or sponsor and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB control number. The OMB control number for this collection is 2127-XXXX.

County or City Name:						
Date Contacted:						
Police Jurisdiction Name:						
Year of Crash Data:						
Total Crashes:		Total Fatal Crashes:	Total Injury Crash	es:		
# Ped Crashes:		# Motorcycle Crashes:	# CMV Crashes:	·		
County or City Na	me:					
Date Contacted:						
Police Jurisdiction	n Name:					
Year of Crash Data:						
Total Crashes:		Total Fatal Crashes:	Total Injury Crash	Total Injury Crashes:		
# Ped Crashes:		# Motorcycle Crashes:	# CMV Crashes:			
County or City Name:						
Date Contacted:						
Police Jurisdiction Name:						
Year of Crash Dat	a:					
Total Crashes:		Total Fatal Crashes:	Total Injury Crash	es:		
# Ped Crashes:		# Motorcycle Crashes:	# CMV Crashes:			
		<u> </u>		·		
County or City Name:						
Date Contacted:						

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Police Jurisdiction Name:

Attachment 1

PRA Application for OMB Number 2127-XXXX, NASS Law Enforcement Information

Total Crashes:		Total Fatal Crashes:		Total Injury Crash	es:
# Ped Crashes:		# Motorcycle Crashes		# CMV Crashes:	
County or City Name:					
Date Contacted:					
Police Jurisdiction Name:					
Year of Crash Data:					
Total Crashes:		Total Fatal Crashes:		Total Injury Crashes:	
# Ped Crashes:		# Motorcycle Crashes	:	# CMV Crashes:	·
			·		
County or City Name:					
Date Contacted:					

Date Contacted:

Police Jurisdiction Name:

Year of Crash Data:

Total Crashes:
Total Fatal Crashes:

Ped Crashes:
Motorcycle Crashes:

CMV Crashes:

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Year of Crash Data: