



STATE OF CALIFORNIA  
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL  
**TRAFFIC COLLISION REPORT**  
CHP 555 Page 1 (Rev. 4-11) OPI 060

Page 1 of 5

SPECIAL CONDITIONS		NUMBER INJURED <b>0</b>	HIT & RUN FELONY <input type="checkbox"/>	CITY <b>Richmond</b>	JUDICIAL DISTRICT <b>Bay Superior</b>		LOCAL REPORT NUMBER <b>2020-00004596</b>			
CITY PROPERTY DAMAGE		NUMBER KILLED <b>0</b>	HIT & RUN MISD. <input checked="" type="checkbox"/>	COUNTY <b>Contra Costa</b>	REPORTING DISTRICT <b>SOUTHERN</b>	BEAT <b>2</b>	DAY OF WEEK <b>Saturday</b>	TOW AWAY <input checked="" type="checkbox"/>		
LOCATION	COLLISION OCCURRED ON <b>FLORIDA AV</b>				MO. DAY YEAR <b>05/16/2020</b>	TIME (2400) <b>1630</b>	NCIC # <b>0710</b>	OFFICER I.D. <b>1764</b>		
	MILEPOST INFORMATION <b>FEET</b> OF				GPS COORDINATES LATITUDE <b>37.929272</b> LONGITUDE <b>-122.350413</b>		PHOTOGRAPHS BY <input type="checkbox"/> NONE <b>MCDONELL 1764</b>			
	<input type="checkbox"/> AT INTERSECTION WITH				STATE HWY REL <input type="checkbox"/>					
	<input checked="" type="checkbox"/> OR <b>25 FEET EAST</b> OF <b>20TH ST</b>									
PARTY 1	DRIVER'S LICENSE NUMBER <b>[REDACTED]</b>		STATE <b>CA</b>	CLASS <b>C</b>	AIR BAG <b>M</b>	SAFETY EQUIP. <b>B</b>	VEH. YEAR <b>2005</b>	MAKE / MODEL / COLOR <b>NISSAN ALTIMA Gold</b>	LICENSE NUMBER <b>[REDACTED]</b>	STATE <b>CA</b>
DRIVER	NAME (FIRST, MIDDLE, LAST) <input checked="" type="checkbox"/> <b>KRYSTLE LASHAWNDA HASKET</b>						OWNER'S NAME <input checked="" type="checkbox"/> SAME AS DRIVER			
PEDESTRIAN	STREET ADDRESS <b>[REDACTED]</b>						OWNER'S ADDRESS <input checked="" type="checkbox"/> SAME AS DRIVER			
PARKED VEHICLE	CITY / STATE / ZIP <b>[REDACTED]</b>						DISPOSITION OF VEHICLE ON ORDERS OF: <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
BICYCLIST	SEX <b>F</b>	HAIR <b>Black</b>	EYES <b>Brown</b>	HEIGHT <b>504</b>	WEIGHT <b>280</b>	BIRTH DATE <b>12/18/1985</b>	RACE <b>Black</b>	Checker's Tow - 510-235-7000		
OTHER	HOME PHONE		BUSINESS PHONE		PRIOR MECHANICAL DEFECTS: <input checked="" type="checkbox"/> NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE					
	INSURANCE CARRIER <b>NO INSURANCE</b>		POLICY NUMBER		VEHICLE IDENTIFICATION NUMBER: <b>[REDACTED]</b>					
	DIR OF TRAVEL <b>SOUTH</b>	ON STREET OR HIGHWAY <b>20TH ST</b>			SPEED LIMIT <b>25</b>		VEHICLE TYPE <b>01</b>			
							DESCRIBE VEHICLE DAMAGE <input type="checkbox"/> UNK. <input type="checkbox"/> NONE <input type="checkbox"/> MINOR <input checked="" type="checkbox"/> MOD. <input type="checkbox"/> MAJOR <input type="checkbox"/> ROLL-OVER			
							SHADE N DAMAGE AREA 			
PARTY 2	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
DRIVER	NAME (FIRST, MIDDLE, LAST)						OWNER'S NAME			
PEDESTRIAN	STREET ADDRESS						OWNER'S ADDRESS			
PARKED VEHICLE	CITY / STATE / ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTH DATE	RACE	PRIOR MECHANICAL DEFECTS: <input type="checkbox"/> NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE		
OTHER	HOME PHONE		BUSINESS PHONE		VEHICLE IDENTIFICATION NUMBER:					
	INSURANCE CARRIER		POLICY NUMBER		VEHICLE TYPE					
	DIR OF TRAVEL	ON STREET OR HIGHWAY			SPEED LIMIT		DESCRIBE VEHICLE DAMAGE			
							SHADE N DAMAGE AREA			
PARTY 3	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
DRIVER	NAME (FIRST, MIDDLE, LAST)						OWNER'S NAME			
PEDESTRIAN	STREET ADDRESS						OWNER'S ADDRESS			
PARKED VEHICLE	CITY / STATE / ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER			
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTH DATE	RACE	PRIOR MECHANICAL DEFECTS: <input type="checkbox"/> NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE		
OTHER	HOME PHONE		BUSINESS PHONE		VEHICLE IDENTIFICATION NUMBER:					
	INSURANCE CARRIER		POLICY NUMBER		VEHICLE TYPE					
	DIR OF TRAVEL	ON STREET OR HIGHWAY			SPEED LIMIT		DESCRIBE VEHICLE DAMAGE			
							SHADE N DAMAGE AREA			
PREPARER'S NAME <b>MCDONELL, CHRISTOPHER 1764</b>			DISPATCH NOTIFIED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			REVIEWER'S NAME <b>REINA, DANIEL 1439</b>			DATE REVIEWED <b>05/22/2020</b>	

## TRAFFIC COLLISION CODING

CHP 555 Page 2 (Rev. 4-11) OPI 060

DATE OF COLLISION (MO. DAY. YEAR)		TIME (2400)		NCIC #		OFFICER I.D.		NUMBER						
05/16/2020		1630		0710		1764		2020-00004596						
PROPERTY DAMAGE	OWNER'S NAME <b>CITY OF RICHMOND</b>			OWNER'S ADDRESS <b>6 13TH STREET</b>				NOT F E D <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO						
	DESCRIPTION OF DAMAGE <b>SOUTH CURB IN 2000 BLOCK OF FLORIDA AVE</b>													
<b>SEATING POSITION</b> 		<b>SAFETY EQUIPMENT</b> <b>OCCUPANTS</b> A - NONE IN VEHICLE B - UNKNOWN C - LAP BELT USED D - LAP BELT NOT USED E - SHOULDER HARNESS USED F - SHOULDER HARNESS NOT USED G - LAP/SOULDER HARNESS USED H - LAP/SOULDER HARNESS NOT USED J - PASSIVE RESTRAINT USED K - PASSIVE RESTRAINT NOT USED P - NOT REQUIRED <b>CHILD RESTRAINT</b> Q - IN VEHICLE USED R - IN VEHICLE NOT USED S - IN VEHICLE USE UNKNOWN T - IN VEHICLE IMPROPER USE U - NONE IN VEHICLE <b>M / C BICYCLE HELMET</b> DRIVER PASSENGER V - NO X - NO W - YES Y - YES			<b>AIR BAG</b> B - UNKNOWN L - AIR BAG DEPLOYED M - AIR BAG NOT DEPLOYED N - OTHER P - NOT REQUIRED <b>EJECTED FROM VEHICLE</b> 0 - NOT EJECTED 1 - FULLY EJECTED 2 - PARTIALLY EJECTED 3 - UNKNOWN		<b>INATTENTION CODES</b> A - CELLPHONE HANDHELD B - CELLPHONE HANDSFREE C - ELECTRONIC EQUIPMENT D - RADIO / CD E - SMOKING F - EATING G - CHILDREN H - ANIMALS I - PERSONAL HYGIENE J - READING K - OTHER							
<b>ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (*) SHOULD BE EXPLAINED IN THE NARRATIVE</b>														
<b>PRIMARY COLLISION FACTOR</b> <b>LIST NUMBER (#) OF PARTY AT FAULT</b>		<b>TRAFFIC CONTROL DEVICES</b>			1	2	3	<b>SPECIAL INFORMATION</b>		1	2	3	<b>MOVEMENT PRECEDING COLLISION</b>	
1 A 23152A Cited YES		A CONTROLS FUNCTIONING						A HAZARDOUS MATERIAL					A STOPPED	
B OTHER IMPROPER DRIVING*		B CONTROLS NOT FUNCTIONING*						B CELL PHONE HANDHELD IN USE					B PROCEEDING STRAIGHT	
C OTHER THAN DRIVER*		C CONTROLS OBSCURED						C CELL PHONE HANDSFREE IN USE					C RAN OFF ROAD	
D UNKNOWN*		D NO CONTROLS PRESENT/FACTOR*			X			D CELL PHONE NOT IN USE					D MAKING RIGHT TURN	
		<b>TYPE OF COLLISION</b>						E SCHOOL BUS RELATED	X				E MAKING LEFT TURN	
		A HEAD - ON						F 75 FT MOTORTRUCK COMBO					F MAKING U TURN	
		B SIDESWIPE						G 32 FT TRAILER COMBO					G BACKING	
		C REAR END											H SLOWING / STOPPING	
<b>WEATHER (MARK 1 TO 2 ITEMS)</b>		D BROADSIDE											I PASSING OTHER VEHICLE	
A CLEAR		E HIT OBJECT											J CHANGING LANES	
B CLOUDY		F OVERTURNED											K PARKING MANEUVER	
C RAINING		G VEHICLE PEDESTRIAN											L ENTERING TRAFFIC	
D SNOWING		H OTHER*:											M OTHER UNSAFE TURNING	
E FOG / VISIBILITY .FT													N XING INTO OPPOSING LANE	
F OTHER*:													O PARKED	
G WIND		<b>MOTOR VEHICLE INVOLVED WITH</b>											P MERGING	
		A NON - COLLISION											Q TRAVELING WRONG WAY	
<b>LIGHTING</b>		B PEDESTRIAN											R OTHER*:	
X A DAYLIGHT		C OTHER MOTOR VEHICLE												
B DUSK - DAWN		D MOTOR VEHICLE ON OTHER ROADWAY			1	2	3	O HER ASSOCIATED FACTOR(S) (MARK 1 0 2 1 EMS)						
C DARK - STREET LIGHTS		E PARKED MOTOR VEHICLE			X			A VC SECTION VIOLATION CITED						
D DARK - NO STREET LIGHTS		F TRAIN						22350						
E DARK - STREET LIGHTS NOT FUNCTIONING*		G BICYCLE						B VC SECTION VIOLATION CITED						
		H ANIMAL:												
<b>ROADWAY SURFACE</b>		I FIXED OBJECT: CURB						C VC SECTION VIOLATION CITED						
X A DRY		J OTHER OBJECT:							1	2	3		<b>SOBRIETY - DRUG PHYSICAL</b>	
B WET								E VISION OBSCUREMENT	X				A HAD NOT BEEN DRINKING	
C SNOWY - ICY								F INATTENTION*:					B HBD - UNDER THE INFLUENCE	
D SLIPPERY (MUDDY, OILY, ETC.)								G STOP & GO TRAFFIC					C HBD - NOT UNDER INFLUENCE.*	
<b>ROADWAY CONDITIONS (MARK 1 0 2 1 EMS)</b>		<b>PEDESTRIAN'S ACTIONS</b>						H ENTERING / LEAVING RAMP					D HBD. -IMPAIRMENT UNKNOWN.*	
A HOLES, DEEP RUTS		A NO PEDESTRIANS INVOLVED						I PREVIOUS COLLISION					E UNDER DRUG INFLUENCE*	
B LOOSE MATERIAL ON ROADWAY*		B CROSSING IN CROSSWALK AT INTERSECTION						J UNFAMILIAR WITH ROAD					F IMPAIRMENT - PHYSICAL*	
C OBSTRUCTION ON ROADWAY*		C CROSSING IN CROSSWALK - NOT AT INTERSECTION						DEFECTIVE VEH. EQUIP. CITED					G IMPAIRMENT NOT KNOWN	
D CONSTRUCTION-REPAIR ZONE		D CROSSING - NOT IN CROSSWALK						L UNINVOLVED VEHICLE					H NOT APPLICABLE	
E REDUCED ROADWAY WIDTH		E IN ROAD - INCLUDES SHOULDER						M OTHER*:					I SLEEPY / FATIGUED*	
F FLOODED*		F NOT IN ROAD						N NONE APPARENT						
G OTHER*:		G APPROACHING / LEAVING SCHOOL BUS						O RUNAWAY VEHICLE						
X H NO UNUSUAL CONDITIONS														
<div>Miscellaneous</div> <div><input checked="" type="checkbox"/> "See Attached Sketch"</div> <div><input type="checkbox"/> "See Attached factual diagram"</div>														

**SKETCH**

CHP 555 Page 4 (Rev. 4-11) OPI 060

DATE OF COLLISION (MO. DAY YEAR)	T ME (2400)	NCIC #	OFFICER I.D.	NUMBER
05/16/2020	1630	0710	1764	2020-00004596

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED



PREPARED BY	ID NUMBER	MO DAY YEAR	REV EWERS NAME	MO DAY YEAR
MCDONELL, CHRISTOPHER 1764	1764	05/16/2020	REINA, DANIEL 1439	05/22/2020



DATE OF COLLISION (MO. DAY YEAR)	TIME (2400)	NCIC #	OFFICER I.D.	NUMBER
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**FACTS:**

**NOTIFICATION:** I was dispatched to a call of a hit and run, and possibly female with a firearm. at 1628 hours. I responded from Central Richmond and arrived on scene at 1635 hours. All times, speeds and measurements in this investigation are approximate. Measurements were taken by estimation, except where otherwise indicated.

**SCENE:** The scene of the collision occurred on the south curb of Florida Ave, just east of S. 20th Street, in the City of Richmond. There are no stop signs or signal controlling this street, and there is a cement divider that separates Florida Ave diagonally from the southeast curb line to the northwest curb line (see sketch for further). Florida Ave is a city street that travels through the south portion of Richmond. The street is a well-lit, even surface that consists primarily of asphalt. S. 20th Street is a north/south running street that travels through the southern portion of Richmond. The area where this collision occurred is a residential neighborhood, designating a 25 MPH speed limit.

**PARTIES:**

**PARTY # 1 (P-1, Krystle Hasket):** At the time of police arrival on scene, P-1 was not located near the scene of the collision. P-1 was physically detained by officers approximately one city block from the collision.

**Vehicle #1 (V-1, Gold Nissan Altima):** V-1 was discovered on the south curb of Florida Ave, blocking the sidewalk. V-1 was unoccupied and unaccompanied by P-1. V-1 was on all four wheels with moderate damage to the front right wheel and right bumper.

**PHYSICAL EVIDENCE:** I documented photographs of the collision scene with my department-issued cell phone, then uploaded them to the Axon Capture cloud for evidence.

**HIT AND RUN:** Upon police arrival, V-1 was unoccupied. P-1 had fled the scene and failed to exchange insurance information, in violation of 20002(a) CVC.

**OTHER FACTUAL INFORMATION:** Following the collision, V-1 collided the south curb in the 2000 block of Florida Ave causing minor cosmetic damage (AOI#1). Additionally, V-1 collided with a PG&E

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electrical post along the south curb of Florida (2000 block), which is approximately 30-feet east of its intersection with S. 20th Street. It appeared an electrical wire cover running down the side of the post was split from the vehicles impact. No further property damage was recorded.

**STATEMENTS:**

**PARTY # 1 (Hasket):** Refer to Crime/Incident report for further details on P-1's statement.

**OPINIONS AND CONCLUSIONS:**

**SUMMARY:** P-1 was traveling southbound on S. 20th Street towards Florida Ave. P-1 attempted to negotiate an eastbound turn onto Florida Ave, however she lost control of V-1 and mounted the south curb. V-1's right front wheel was damaged (bent) from colliding with the curb, causing V-1 to come to rest several feet following the collision.

**AREA OF IMPACT:**

AOI #1: The area of impact where V-1 collided with the south curb was approximately 32 feet south of the north curb line of Florida Ave and 40 feet east of the east curb line of S. 20th Street.

AOI #2: The area of impact where V-1 collided with the PG&E electrical post was approximately 32 feet south of the north curb line and 52 feet east of the east curb line of S. 20th Street.

**INTOXICATION NARRATIVE:** Refer to Crime/Incident for further details.

**CAUSE:** P-1 caused the collision to occur by being in violation of 23152(a)/(b) CVC.

**RECOMMENDATIONS:** Route to Richmond Traffic Unit for review.

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