

7/11/2023

Master Record Number	300897508
Type of Crash: Fatal	
Approved By	5792

## Tennessee Electronic Traffic Crash Report

### Incident Information

Date of Crash <b>06/30/2023</b>	Day of Crash <b>Friday</b>	Local Agency Number <b>0530100</b>		Reporting Agency Name <b>Lenoir City Police Department</b>		Agency Tracking Number <b>20230611336</b>
Time of Crash <b>23:21</b>		Time Notified <b>23:21</b>	Time Arrived <b>23:24</b>	County <b>Loudon</b>		City <b>Lenoir City</b>
Total Vehicles <b>2</b>		Total Occupants <b>2</b>	Total Non-Occupants <b>0</b>	Total Killed <b>1</b>	Total Injured <b>0</b>	Total Un-Injured <b>1</b>
Hit and Run <b>Y</b>	Solved? <b>Y</b>	Police Pursuit <b>N</b>	School Bus Involved? <b>No</b>	Photos Taken? <b>Y</b>	By <b>Police</b>	Photographer Name <b>Officer Zack Parmer</b>
Area <b>Business</b>		Interchange Related? <b>N</b>		Intersect Type <b>Four-Way</b>		
Block Number		Roadway Number <b>321</b>	Roadway Name <b>U.S. Highway 321 North</b>			Suffix
Est Distance	Distance Type	Direction	From Highway Number/Intersection <b>Town Creek Road West</b>	Suffix	Intersect Number	Mile Marker
Roadway Local ID				Intersect Local ID		
Relation to Junction <b>Intersection</b>			Relation to Roadway <b>On Roadway</b>		Route Signing <b>U.S. Route</b>	
Work Zone <b>None</b>			Construction Zone			
Construction Location			Workers Present			
First Harmful Event <b>Motor Vehicle-In-Transport On Same Roadway</b>			Trafficway Type <b>Trafficway - Open</b>			
Weather Conditions <b>Clear</b>			Light Conditions <b>Dark - Lighted</b>	Latitude <b>35.824876</b>	Longitude <b>-84.273896</b>	Rail Crossing ID
Manner of Collision <b>Angle</b>						

### Investigating Officer Details

Investigation Complete <b>Y</b>	Rank <b>Sergeant</b>	First Name <b>Aaron</b>	Middle Initial	Last Name <b>Bialek</b>
Badge Number <b>438</b>	District/Zone	Car Number <b>438</b>	Report Date <b>06/30/2023</b>	

Vehicle Number <b>1</b>	Number of Occupants <b>1</b>	Driver Presence <b>Driver Operated</b>
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**Driver Information**

First Name <b>CESAR</b>		Middle Initial	Last Name <b>CABELLO CORONA</b>		Suffix	Date of Birth	Age <b>31</b>
Home Address		Mailing Address		City	State <b>TN</b>	Zip Code	
Home Phone #	Secondary Phone #	Employer Phone #	Race <b>White/Mexican/Puerto Ri</b>	Ethnicity <b>Hispanic</b>	Gender <b>M</b>	Air Bag <b>AirBag Available-No Deployment</b>	
Safety Equipment <b>Unknown</b>							
Driver's License Number		License State <b>TN</b>	Expiration Date <b>2016</b>	License Class <b>ID</b>	License Status <b>Revoked</b>		Seat Position <b>Front Seat - Left Side</b>
Endorsements 1 <b>None</b>		Complied With	Endorsements 2		Complied With	Endorsements 3	
Restrictions 1 <b>None</b>		Complied With	Restrictions 2		Complied With	Restrictions 3	
Ejected <b>Not Ejected</b>	Ejection Path <b>Not Ejected/Not Applicable</b>			Trapped/Extricated <b>Not Trapped</b>		Injury <b>No Injury</b>	
Medical Transport <b>Not Transported</b>	Ambulance/Hospital						

**Driver Conditions and Actions**

Hit And Run? <b>Driver And Vehicle Left Scene</b>		Driver/Vehicle Maneuver <b>Going Straight</b>		Distraction <b>Unknown</b>	
Driver's 1st Condition <b>Unknown</b>		Driver's 2nd Condition		Driver's 3rd Condition	
Driver's 1st Action <b>Failure To Yield Right of Way</b>			Driver's 2nd Action		
Driver's 3rd Action			Driver's 4th Action		

**Alcohol and Drugs**

Presence of Alcohol <b>Unknown</b>		Determination Method <b>Unknown/Not Reported</b>		Alcohol Test Status <b>Test Not Given</b>	
1st Alcohol Test Type <b>Not Tested</b>		1st Alcohol Test Result <b>None Given</b>			
Presence of Drugs <b>Unknown</b>		Determination Method <b>Unknown</b>		Drug Test Status <b>Test Not Given</b>	
1st Drug Test Type <b>Not Tested For Drugs</b>	1st Drug Test Result <b>No Drug Reported</b>	2nd Drug Test Type	2nd Drug Test Result	3rd Drug Test Type	3rd Drug Test Result

**Vehicle Information**

Same as Driver? <b>No</b>	Owner First Name <b>NAZARETH</b>		Owner Middle Name <b>CRISTIAN</b>		Owner Last Name <b>PULIDO</b>		Owner Suffix
Home Address		Mailing Address		City	State <b>TN</b>	Zip Code <b>37771-</b>	Home Phone # <b>(865) 000-0000</b>
Secondary Phone #	Employer Phone #	Vehicle Year <b>2014</b>	Vehicle Make		Vehicle Model <b>TC</b>	Color <b>Black</b>	
VIN	License Plate Number		State <b>TN</b>	Exp Year <b>02/2024</b>	Body Code <b>Two-Door Sedan Hardtop Coupe</b>		
HAZMAT? <b>No</b>	FMCSA Reportable? <b>No</b>	Unit Type <b>Motor Vehicle In-Transport</b>					
Bus Use <b>Not Used As School Bus</b>				Vehicle Configuration			
Gross Weight <b>10,000 Or Less-No Haz-8 Or Less</b>		Vehicle Operation Type <b>Personally Owned/Used</b>			Cargo Body Type		
1st Factor <b>None</b>		2nd Factor			3rd Factor		
Vehicle Insurance	Insurance Type <b>No Insurance</b>		Insurance Carrier			Insurance Start Date	Insurance End Date
Cargo Insurance	Insurance Type		Insurance Carrier			Insurance Start Date	Insurance End Date

### Vehicle Damage and Roadway Characteristics

Most Harmful Event <b>Motor Vehicle-In-Transport On Same Roadway</b>		Emergency Use? <b>No</b>	Over Underride <b>No Underride - Override</b>		Fire in Vehicle? <b>No</b>		
Event 1 <b>Motor Vehicle-In-Transport On Same Roadway</b>	Event 2			Event 3			
Event 4	Event 5			Event 6			
Point of First Impact <b>Left Side-Far Rear</b>	Extent of Damage <b>Minor Damage</b>	Officer Damage Estimate <b>Greater Than Threshold</b>		Vehicle Special Use <b>No Special Use</b>			
Towed? <b>Towed Due To Other Than Damage</b>	Towed Where? <b>Lenoir City Impound Lot</b>	Areas of Vehicle Damage <b>Rear End, Left Side-Far Rear</b>					
1st Trailer	1st Trailer License Plate Information		2nd Trailer	2nd Trailer License Plate Information			
Travel Direction <b>North</b>	Traveling On <b>Town Creek Road West</b>	Trafficway Flow <b>Two-Way Divided Without Traffic Barrier</b>		Roadway Surface Type <b>Asphalt</b>			
Trafficway Hazards <b>No Apparent Hazards</b>							
Number of Travel Lanes <b>Two Lanes</b>	Traffic Control Devices <b>Stop Sign</b>		Traffic Control Device Functioning <b>Device Functioning Properly</b>		Roadway Route Signing <b>Municipal Route</b>		
Roadway Surface Conditions <b>Dry</b>	Roadway Character Alignment <b>Straight</b>	Roadway Character Profile <b>Level</b>	Speed Limit <b>40</b>	Access Control <b>No Control</b>			
<b>Commercial Carrier Information</b>							
US DOT	Carrier Name		Carrier Type		ICC MC	TN DOS	
Home Address		Mailing Address		City	State	Zip Code	Phone
1st Hazardous Materials		HAZMAT Class	Placard?	Placard #	Released?	Hazardous Materials Released	
2nd Hazardous Materials		HAZMAT Class	Placard?	Placard #	Released?	Hazardous Materials Released	
3rd Hazardous Materials		HAZMAT Class	Placard?	Placard #	Released?	Hazardous Materials Released	



Vehicle Number <b>2</b>	Number of Occupants <b>1</b>	Driver Presence <b>Driver Operated</b>
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**Driver Information**

First Name <b>JOSEPH</b>	Middle Initial <b>R</b>	Last Name <b>ROBBINS</b>	Suffix	Date of Birth	Age <b>39</b>
Home Address	Mailing Address	City	State <b>TN</b>	Zip Code	
Home Phone #	Secondary Phone #	Employer Phone #	Race <b>White/Mexican/Puerto Ri</b>	Ethnicity <b>Non-Hispanic</b>	Gender <b>M</b> Air Bag <b>Not Available</b>

Safely Equipment <b>DOT Compliant Motorcycle Helmet</b>					
Driver's License Number	License State <b>TN</b>	Expiration Date <b>2026</b>	License Class <b>D</b>	License Status <b>Valid</b>	Seat Position <b>Front Seat - Middle</b>
Endorsements 1 <b>None</b>	Complied With	Endorsements 2	Complied With	Endorsements 3	Complied With
Restrictions 1 <b>None</b>	Complied With	Restrictions 2	Complied With	Restrictions 3	Complied With
Ejected <b>Not Applicable</b>	Ejection Path <b>Not Ejected/Not Applicable</b>	Trapped/Extricated <b>Not Applicable</b>	Injury <b>Fatal</b>		
Medical Transport <b>EMS - Ground</b>	Ambulance/Hospital <b>Priority EMS</b>				

Hit And Run?			Driver/Vehicle Maneuver <b>Going Straight</b>		Distraction <b>None</b>
Other Involved Person Left Scene					
Driver's 1st Condition <b>Unknown</b>	Driver's 2nd Condition	Driver's 3rd Condition			
Driver's 1st Action <b>None</b>	Driver's 2nd Action		Driver's 3rd Action		
Driver's 3rd Action	Driver's 4th Action				

Presence of Alcohol <b>Unknown</b>		Determination Method <b>Unknown/Not Reported</b>	Alcohol Test Status <b>Test Not Given</b>		
1st Alcohol Test Type <b>Not Tested</b>		1st Alcohol Test Result <b>None Given</b>			
Presence of Drugs <b>Unknown</b>		Determination Method <b>Unknown</b>	Drug Test Status <b>Test Not Given</b>		
1st Drug Test Type <b>Not Tested For Drugs</b>	1st Drug Test Result <b>No Drug Reported</b>	2nd Drug Test Type	2nd Drug Test Result	3rd Drug Test Type	3rd Drug Test Result

Same as Driver? <b>Yes</b>						Owner First Name	Owner Middle Name	Owner Last Name	Owner Suffix
Home Address		Mailing Address		City	State	Zip Code	Home Phone #		
Secondary Phone #	Employer Phone #	Vehicle Year <b>2004</b>	Vehicle Make <b>Honda</b>	Vehicle Model <b>SHADOW</b>	Color <b>Blue</b>				
VIN	License Plate Number	State <b>TN</b>	Exp Year <b>04/2024</b>	Body Code <b>Motorcycle</b>					
HAZMAT? <b>No</b>	FMCSA Reportable? <b>No</b>	Unit Type <b>Motor Vehicle In-Transport</b>							
Bus Use <b>Not Used As School Bus</b>				Vehicle Configuration					
Gross Weight <b>10,000 Or Less-No Haz-8 Or Less</b>		Vehicle Operation Type <b>Personally Owned/Used</b>			Cargo Body Type				
1st Factor <b>None</b>		2nd Factor			3rd Factor				
Vehicle Insurance	Insurance Type <b>Vehicle</b>	Insurance Carrier			Insurance Start Date <b>05/07/2023</b>	Insurance End Date <b>11/07/2023</b>			
Cargo Insurance	Insurance Type	Insurance Carrier			Insurance Start Date	Insurance End Date			

**Vehicle Damage and Roadway Characteristics**

Most Harmful Event <b>Motor Vehicle-In-Transport On Same Roadway</b>		Emergency Use? <b>No</b>	Over Underride <b>No Underride - Override</b>	Fire in Vehicle? <b>No</b>
Event 1 <b>Motor Vehicle-In-Transport On Same Roadway</b>	Event 2		Event 3	
Event 4	Event 5		Event 6	
Point of First Impact <b>Front End</b>	Extent of Damage <b>Minor Damage</b>	Officer Damage Estimate <b>Greater Than Threshold</b>		Vehicle Special Use <b>No Special Use</b>
Towed? <b>Towed Due To Other Than Damage</b>	Towed Where? <b>Malone's Wrecker Service</b>	Areas of Vehicle Damage <b>Front End</b>		
1st Trailer	1st Trailer License Plate Information	2nd Trailer	2nd Trailer License Plate Information	
Travel Direction <b>South</b>	Traveling On <b>U.S. Highway 321 North</b>	Trafficway Flow <b>Two-Way Divided Without Traffic Barrier</b>		Roadway Surface Type <b>Asphalt</b>
Trafficway Hazards <b>No Apparent Hazards</b>				
Number of Travel Lanes <b>Two Lanes</b>	Traffic Control Devices <b>No Control</b>		Traffic Control Device Functioning <b>No Control</b>	Roadway Route Signing <b>U.S. Route</b>
Roadway Surface Conditions <b>Dry</b>	Roadway Character Alignment <b>Straight</b>	Roadway Character Profile <b>Uphill Grade</b>	Speed Limit <b>40</b>	Access Control <b>No Control</b>

**Commercial Carrier Information**

US DOT	Carrier Name		Carrier Type		ICC MC	TN DOS
Home Address		Mailing Address	City	State	Zip Code	Phone
1st Hazardous Materials	HAZMAT Class	Placard?	Placard #	Released?	Hazardous Materials Released	
2nd Hazardous Materials	HAZMAT Class	Placard?	Placard #	Released?	Hazardous Materials Released	
3rd Hazardous Materials	HAZMAT Class	Placard?	Placard #	Released?	Hazardous Materials Released	

**Narrative**

On 06/30/2023 at 2321hrs, Officers with the Lenoir City Police Department responded to a hit and run traffic crash at U.S. Highway 321 North and Town Creek Road West. Upon arrival, Officers observed a male unresponsive in the intersection on U.S. Highway 321 North and Town Creek Road West and was later pronounced deceased on scene. During investigation, it was determined Unit #1 was stopped on Town Creek Road West and U.S. Highway 321 North intersection. Unit #1 entered the intersection and failed to yield to Unit #2, who was traveling south in the right lane on U.S. Highway 321 North. Unit #1 failing to yield to Unit #2 caused Unit #2 to collide into Unit #1's left rear corner. Roadway evidence showed Unit #2 locking the brakes causing a skid mark and laying the motorcycle on it's left side causing scrapes on the roadway prior to collision. The collision resulted in Joseph Robbins to be thrown off the motorcycle and the motorcycle to continue to slid on U.S. Highway 321 North. Unit #1 continued onto Town Creek Road East leaving the scene of the accident and was located the following morning by Lenoir City Police Department.

# Unofficial Tennessee Electronic Traffic Crash Report - Diagram

Date of Crash  
06/30/2023

Time of Crash  
23:21

Local Agency Number  
0530100

Reporting Agency Name  
Lenoir City Police Department

Not To Scale

