

# Pennsylvania Department of Transportation



## "FastFARS" Fatal Crash Notification

PennDOT

Phone: 717-787-2855  
Fax: 717-525-5385  
penndotcrashhelp@pa.gov

**Police Agency:**

**Police Agency Code:**

**Police Incident Number:**

**County of Crash:**

**Date of Crash:**

**Time of Crash:**

**Number of Fatalities:**

**Roadway Name or Route #:**

**Intersecting Road (if applic.):**

**Deceased Names : (if known):**

**Confirmation** - Please check the box **if** all the following are true for **each fatality**. If you cannot confirm the fatality or fatalities, please provide reasons in the comments section below.

- 1) Did the crash take place on a roadway open to the public (i.e. no parking lots)?
- 2) Did the crash involve at least one motor vehicle?
- 3) Was the cause of death due to the crash (i.e. no heart attacks but if a heart attack was the reason for the crash but the crash caused the death the answer is yes)?
- 4) Was the crash absent of deliberate intent (i.e. no suicide)

**Additional Comments (optional):**