

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR S

LOCAL REPORT NUMBER \*

<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> Private Property		LOCAL INFORMATION REPORTING AGENCY NAME * <b>GARFIELD HEIGHTS</b>		NCIC * <b>0 1 8 2 0</b>		LOCAL REPORT NUMBER * <b>2 0 2 2 3 3 0 6</b>		HIT/SKIP 1 - Solved    2 - Unsolved <b>2</b>		NUMBER OF UNITS <b>0 2</b>		UNIT IN ERROR <small>98 - ANIMAL 99 - UNKNOWN</small> <b>0 2</b>	
COUNTY * <b>1 8</b>		LOCALITY * <small>1 - CITY * 2 - VILLAGE * 3 - TOWNSHIP *</small> <b>1</b>		LOCATION: CITY, VILLAGE, TOWNSHIP * <b>GARFIELD HTS</b>		CRASH DATE/TIME <b>11 10 8 2 0 2 2 1 6 3 9</b>				CRASH SEVERITY <b>4</b> 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY			
ROUTE TYPE <small>LOCATION</small>		ROUTE NUMBER <small>LOCATION</small>		PREFIX <small>1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST</small>		LOCATION ROAD NAME <b>IR 480</b>		ROAD TYPE <b>H W</b>		LATITUDE DECIMAL DEGR <b>4 1 . 4 1 4 1 3 0</b>			
ROUTE TYPE <small>REFERENCE</small>		ROUTE NUMBER <small>REFERENCE</small>		PREFIX <small>1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST</small>		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUS) <b>21.4</b>		ROAD TYPE <b>M P</b>		LONGITUDE DECIMAL DEGR <b>8 1 . 6 0 2 3 4 0</b>			
REFERENCE POINT <small>1 - INTERSECTION 2 - MILE POST</small> <b>2</b>		DIRECTION <small>1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST</small>		ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE		ROAD TYPE AL - ALLEY    HW - HIGHWAY    RD - ROAD AV - AVENUE    LA - LANE    SQ - SQUARE BL - BOULEVARD    MP - MILEPOST    ST - STREET CR - CIRCLE    OV - OVAL    TE - TERRACE DR - DRIVE    PI - PIKE    TL - TRAIL HE - HEIGHTS    PL - PLACE    WA - WAY		INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPRO <input type="checkbox"/> WITHIN INTERCHANGE ARE    NUMBER OF APPROACH <b>1</b>					
DISTANCE FROM REFERENCE <small>1 - Miles 2 - Feet</small>		DISTANCE UNIT OF MEASURE <small>1 - Miles 2 - Feet</small>		ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE		ROAD TYPE AL - ALLEY    HW - HIGHWAY    RD - ROAD AV - AVENUE    LA - LANE    SQ - SQUARE BL - BOULEVARD    MP - MILEPOST    ST - STREET CR - CIRCLE    OV - OVAL    TE - TERRACE DR - DRIVE    PI - PIKE    TL - TRAIL HE - HEIGHTS    PL - PLACE    WA - WAY		ROADWAY <input checked="" type="checkbox"/> ROADWAY DIVIDE					
LOCATION OF FIRST HARMFUL EYE <b>0 1</b> <small>1 - ON ROADWAY    9 - CROSSOVER 2 - ON SHOULDER    10 - DRIVEWAY / ALLEY ACCESS 3 - IN MEDIAN    11 - RAILWAY GRADE CROSSING 4 - ON ROADSIDE    12 - SHARED USE PATHS 5 - ON GORE    13 - BIKE LANE 6 - OUTSIDE TRAFFICWAY OR TRAILS 7 - ON RAMP</small>				MANNER OF CRASH COLLISION/IMPACT <b>2</b> <small>1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN</small>				DIRECTION OF TRAV <b>4</b> <small>1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST</small>		MEDIAN TYPE <b>9</b> <small>1 - DIVIDED FLUSH MEDIAN (&lt;4 FEET) 2 - DIVIDED FLUSH MEDIAN (≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE)</small>			
<input type="checkbox"/> WORK ZONE <input type="checkbox"/> RELATED WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT <input type="checkbox"/> ACTIVE SCHOOL ZON		WORK ZONE TYPE <small>1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK</small>		LOCATION OF CRASH IN WORK ZONE <small>1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA</small>		CONTOUR <b>1</b> <small>1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE</small>		CONDITIONS <b>1</b> <small>1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN</small>		SURFACE <b>2</b> <small>1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER /UNKNOWN</small>			
LIGHT CONDITIO <b>1</b> <small>1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING</small>		WEATHER <b>1</b> <small>1 - CLEAR    6 - SNOW 2 - CLOUDY    7 - SEVERE CROSSWINDS 3 - FOG, SMOG, SMOKE    8 - BLOWING SAND, SOIL, DIRT, SNOW 4 - RAIN    9 - FREEZING RAIN OR FREEZING DRIZZLE 5 - SLEET, HAIL    99 - OTHER / UNKNOWN</small>				DRAWING 		INDICATE THE NORTH DIRECTION WITH AN "N" ON THE COMPASS DIAGRAM.					
NARRATIVE UNIT 1 WAS TRAVELING IN THE FAST LANE ON IR 480 WEST AT MILE POST 21.4. UNIT 1 WAS SLOWING IN TRAFFIC WHEN UNIT 2 STRUCK UNIT 1 FROM BEHIND. UNIT 1 PULLED OVER ONTO THE BERM AND UNIT 2 CONTINUED ON IR 480 WEST BOUND WITH OUT EXCHANGING INFORMATION. A WITNESS STATED THAT UNIT 2 WAS A WHITE CADILLAC ESCALADE, UNKNOWN PLATE, FRONT END DAMAGE, BEING DRIVEN BY A WHITE FEMALE. UNIT 2 CONTINUED ONTO THE VALLEY VIEW BRIDGE.													
WITNESS: JOHN 330-933-5903													
CRASH REPORTED DATE/TIME <b>11 10 8 2 0 2 2 1 6 3 9</b>		DISPATCH DATE/TIME <b>11 10 8 2 0 2 2 1 6 4 2</b>		ARRIVAL DATE/TIME <b>11 10 8 2 0 2 2 1 7 0 1</b>		SCENE CLEARED DATE/TIME <b>11 10 8 2 0 2 2 1 7 4 5</b>		REPORT TAKEN B <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/>					
TOTAL TIME ROADWAY <b>0</b>		OTHER INVESTIGATION <b>2 5</b>		TOTAL MINUTES <b>6 9</b>		OFFICER'S NAME * <b>B. Cramer</b>		CHECKED BY OFFICER'S NAME * <b>D. Bailey</b>					
OFFICER'S BADGE NUMBER * <b>0 3 1</b>		CHECKED BY OFFICER'S BADGE NUMBER * <b>L 0 7</b>		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)									

**OWNER**

UNIT # 01 OWNER NAME: LAST, FIRST, MIDDLE (  Same As Driver )  
FERNBERG HEATHER NICOLE

OWNER ADDRESS: STREET, CITY, STATE, ZIP (  Same As Driver )  
2087 QUAIL ST LAKEWOOD OH 44107

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP (  Same As Driver )  
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**VEHICLE**

LP STATE OH LICENSE PLATE # JLQ1043 VEHICLE IDENTIFICATION # JTTEA1A1A1HXMJ050105111 VEHICLE YEAR 2021 VEHICLE MAKE Toyota

INSURANCE VERIFIED  INSURANCE COMPANY PROGRESSIVE INSURANCE POLICY # 925245951 VEHICLE COLOR BLK VEHICLE MODEL Venza

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY  INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  # OCCUPANTS 01

US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME INSURANCE

HAZARDOUS MATERIAL:  MATERIAL  RELEASED CLASS # \_\_\_\_\_ PLACARD \_\_\_\_\_

UNIT TYPE: 01 (1-PASSENGER CAR, 2-PASSENGER VAN, 3-SPORT UTILITY VEHICLE, 4-PICK UP, 5-CARGO VAN, 7-MOTORCYCLE 2-WHEELED, 8-MOTORCYCLE 3-WHEELED, 9-AUTOCYCLE, 10-MOPEL OR MOTORIZED BICYCLE, 12-GOLF CART, 13-SNOWMOBILE, 14-SINGLE UNIT TRUCK, 15-SEMI-TRACTOR, 16-FARM EQUIPMENT, 17-MOTORHOME, 18-LIMO (LIVERY VEHICLE), 19-BUS (16+ PASSENGERS), 20-OTHER VEHICLE, 21-HEAVY EQUIPMENT, 22-ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23-PEDESTRIAN/SKATE R, 24-WHEELCHAIR (ANY TYPE), 25-OTHER NON-MOTORIST, 26-BICYCLE, 27-TRAIN, 99-UNKNOWN OR HITS KIP)

# OF TRAILING UNITS \_\_\_\_\_

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 9 (1-YES, 2-NO, 9-OTHER / AUTONOMOUS MODE LEVEL)

SPECIAL FUNCTION: 01 (1-NONE, 2-TAXI, 3-ELECTRONIC RIDE SHARING, 4-SCHOOL TRANSPORT, 5-BUS-TRANSIT/COMMU, 6-BUS-CHARTER/TOUR, 7-BUS-INTERCITY, 8-BUS-SHUTTLE, 9-BUS-OTHER, 10-AMBULANCE, 11-FIRE, 12-MILITARY, 13-POLICE, 14-PUBLIC UTILITY, 15-CONSTRUCTION EQUIPMENT, 16-FARM, 17-MOWING, 18-SNOW REMOVAL, 19-TOWING, 20-SAFETY SERVICE, 21-MAIL CARRIER, 99-OTHER/JUNK NOWN)

CARGO BODY TYPE: 01 (1-NO CARGO BODY TYPE APPLICABLE, 2-HEAD LAMPS, 3-TAIL LAMPS, 3-VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4-LOGGING, 5-INTERMODAL CONTAINER CHASSIS, 6-CARGO VAN/ENCLOSED, 8-POLE, 9-CARGO TANK, 10-FLAT BED, 12-CONCRETE MIXER, 13-AUTO TRANSPORTER, 14-GARBAGE/REFUSE, 99-OTHER / UNKNOWN)

VEHICLE DEFECTS: 01 (1-TURN SIGNALS, 2-HEAD LAMPS, 3-TAIL LAMPS, 4-BRAKES, 5-STEERING, 6-TIRE BLOWOUT, 7-WORN OR SLICK TIRES, 8-TRAILER EQUIPMENT DIFF/TWIFF, 9-MOTOR TROUBLE, 10-DISABLED FROM PRIOR ACCIDENT, 99-OTHER / UNKNOWN)

NON-MOTORIST LOCATION AT IMPACT: 01 (1-INTERSECTION-MARKED CROSSWALK, 2-INTERSECTION-UNMARKED CROSSWALK, 3-INTERSECTION-OTHER, 4-MIDBLOCK-MARKED CROSSWALK, 5-TRAVEL LANE-OTHER, 6-BICYCLE LANE, 7-SHOULDER/ROADS IDE, 8-SIDEWALK, 9-MEDIAN/CROSSING ISLAND, 10-DRIVEWAY ACCESS, 11-SHARED USE PATHS, 12-FIRST RESPONDER AT INCIDENT SCENE, 99-OTHER / UNKNOWN)

ACTION: 4 (1-NON-CONTACT, 2-NON-COLLISION, 3-STRIKING, 4-STUCK, 5-BOTH STRIKING & STRUCK, 9-OTHER / UNKNOWN, 1-STRAIGHT AHEAD, 2-BACKING, 3-CHANGING LANES, 4-OVERTAKING/PASSING, 5-MAKING RIGHT TURN, 7-MAKING U-TURN, 8-ENTERING TRAFFIC LANE, 9-LEAVING TRAFFIC LANE, 10-PARKED, 11-SLOWING OR STOPPED IN TRAFFIC, 13-NEGOTIATING A CURVE, 14-ENTERING OR CROSSING SPECIFIED LOCATION, 15-WALKING, RUNNING, JOGGING, PLAYING, 16-WORKING VEHICLE, 18-APPROACHING OR LEAVING VEHICLE, 19-STANDING, 20-OTHER NON-MOTORIST, 21-STANDING DISABLED, 22-NOT DISCERNABLE, 23-OPENING DOOR INTO ROADWAY, 99-OTHER IMPROPER ACTION)

CONTRIBUTING CIRCUMSTANCES: 01 (1-NONE, 2-FAILURE TO YIELD, 3-RAN RED LIGHT, 4-RAN STOP SIGN, 5-UNSAFE SPEED, 6-IMPROPER TURN, 7-LEFT OF CENTER, 8-FOLLOWING TOO CLOSE/ACDA, 9-IMPROPER LANE CHANGING, 10-IMPROPER PASSING, 11-DROVE OFF ROAD, 12-IMPROPER BACKING, 13-IMPROPER START FROM A PARKED POSITION, 14-STOPPED OR PARKED ILLEGALLY, 15-SWERVING TO AVOID, 16-WRONG WAY, 17-VISION OBSTRUCTION, 18-OPERATING DEFECTIVE EQUIPMENT, 19-LOAD SHIFTING/FALLING/SPILLING, 20-IMPROPER CROSSING, 21-LYING IN ROADWAY, 22-NOT DISCERNABLE, 23-OPENING DOOR INTO ROADWAY, 99-OTHER IMPROPER ACTION)

SEQUENCE OF EVENTS

EVENTS: 1 (1-OVERTURN/ROLLOVER, 2-FIRE/EXPLOSION, 3-IMMERSION, 4-JACKKNIFE, 5-CARGO / EQUIPMENT LOSS OR SHIFT, 6-EQUIPMENT FAILURE, 7-SEPARATION OF UNITS, 8-RAN OFF ROAD RIGHT, 9-RAN OFF ROAD LEFT, 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL, 12-DOWNHILL RUNAWAY, 13-OTHER NON-COLLISION, 14-PEDESTRIAN, 15-PEDALCYCLE, 16-RAILWAY VEHICLE, 17-ANIMAL - FARM, 18-ANIMAL - DEER, 19-ANIMAL - OTHER, 20-MOTOR VEHICLE IN TRANSPORT, 21-PARKED MOTOR VEHICLE, 22-WORK ZONE MAINTENANCE EQUIPMENT, 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR)

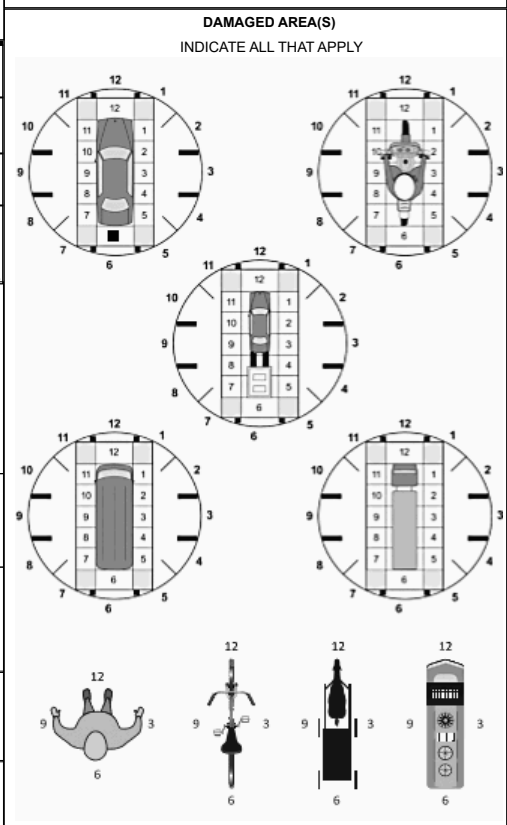
COLLISION WITH FIXED OBJECT - STRUCK

EVENTS: 1 (25-IMPACT ATTENUATOR / CRASH CUSHION, 26-BRIDGE OVERHEAD STRUCTURE, 27-BRIDGE PIER OR ABUTMENT, 28-BRIDGE PARAPET, 29-BRIDGE RAIL, 30-GUARDRAIL FACE, 31-GUARDRAIL END, 32-PORTABLE BARRIER, 33-MEDIAN CABLE BARRIER, 34-MEDIAN GUARDRAIL BARRIER, 35-MEDIAN CONCRETE BARRIER, 36-MEDIAN OTHER BARRIER, 37-TRAFFIC SIGN POST, 38-OVERHEAD SIGN POST, 39-LIGHT/LUMINARIES SUPPORT, 40-UTILITY POLE, 41-OTHER POST, POLE OR SUPPORT, 42-CULVERT, 43-CURB, 44-DITCH, 45-EMBANKMENT, 46-FENCE, 47-MAILBOX, 48-TREE, 49-FIRE HYDRANT, 50-WORKZONE MAINTENANCE EQUIPMENT, 51-WALL, 52-BUILDING, 53-TUNNEL, 54-OTHER FIXED OBJECT, 99-OTHER / UNKNOWN)

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

LOCAL REPORT: 20223306

DAMAGE: 3 (1-NONE, 2-MINOR DAMAGE, 3-FUNCTIONAL DAMAGE, 4-DISABLING, 9-UNKNOWN)



INITIAL POINT OF CONTACT: 06 (0-NO DAMAGE, 1-12-REFER TO UNIT DIAGRAM, 13-TOP, 14-UNDERCARRIAGE, 15-VEHICLE NOT AT SCENE, 99-OTHER / UNKNOWN)

TRAFFIC: TRAFFICWAY FLOW: 1 (1-ONE-WAY, 2-TWO-WAY), TRAFFIC CONTROL: 6 (1-ROUNDBOUT, 2-SIGNAL, 4-STOP SIGN, 5-YIELD SIGN, 6-NO CONTROL)

# OF THROUGH LANES: 4 RAIL GRADE CROSSING: 1 (1-NOT INVOLVED, 2-INVOLVED - ACTIVE CROSSING, 3-INVOLVED - PASSIVE CROSSING)

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4 (1-NORTH, 2-SOUTH, 3-EAST, 4-WEST, 5-NORTHEAST, 6-NORTHWEST, 7-SOUTHEAST, 8-SOUTHWEST, 9-OTHER / UNKNOWN)

UNIT SPEED: 45 POSTED SPEED: 60 DETECTED SPEED: 1 (1-STATED/ESTIMATED SPEED, 2-CALCULATED / EDR, 3-UNDETERMINED)

**OWNER**

UNIT # 0 2 OWNER NAME: LAST, FIRST, MIDDLE ( ) Same As Driver

OWNER ADDRESS: STREET, CITY, STATE, ZIP ( ) Same As Driver

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**

**DAMAGE SCALE**

9 1 - NONE 3 - FUNCTIONAL DAMAGE  
2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
9 - UNKNOWN

**VEHICLE**

LP STATE \_\_\_\_\_ LICENSE PLATE # \_\_\_\_\_ VEHICLE IDENTIFICATION # \_\_\_\_\_ VEHICLE YEAR \_\_\_\_\_ VEHICLE MAKE **Cadillac**

INSURANCE VERIFIED  INSURANCE COMPANY \_\_\_\_\_ INSURANCE POLICY # \_\_\_\_\_ VEHICLE COLOR **WHI** VEHICLE MODEL **Escalade**

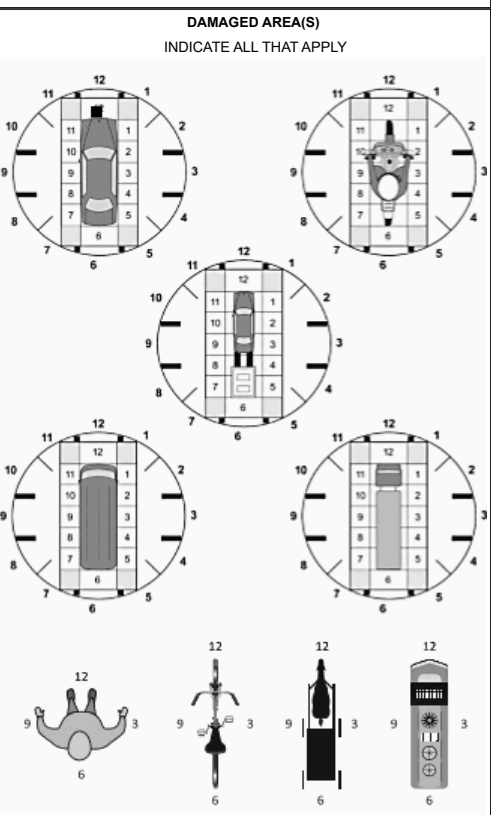
TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY

US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  # OCCUPANTS 0 1

VEHICLE WEIGHT GVWR/GC WTS: 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.

HAZARDOUS MATERIAL:  MATERIAL CLASS # \_\_\_\_\_ PLACARD  RELEASED



UNIT TYPE 0 3

1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHE ELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/SKATE R

2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHE ELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)

3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST

4 - PICK UP 10 - MOPEL OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE

5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN 99 - UNKNOWN OR HITS KIP

# OF TRAILING UNITS \_\_\_\_\_

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 9

1 - YES 2 - NO 9 - OTHER /

0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION

**SPECIAL FUNCTION**

0 1

1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER

2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 22 - CONCRETE MIXER

3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL 23 - AUTO TRANSPORTER

4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING 24 - GARBAGE/REFUSE

5 - BUS-TRANSIT/COMMU 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE

1 - NO CARGO BODY TYPE APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED 8 - POLE 9 - CARGO TANK 10 - FLAT BED 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE

**VEHICLE DEFECTS**

0 1

1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER / UNKNOWN

2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DIFF/TWIF 10 - DISABLED FROM PRIOR ACCIDENT

3 - TAIL LAMPS 6 - TIRE BLOWOUT

**NON-MOTORIST LOCATION AT IMPACT**

3

1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 7 - SHOULDER/ROADS IDE 8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER /

2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDDLEBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER

**ACTION**

3

1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN

1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN

7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC

13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING

18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING DISABLED 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION

**INITIAL POINT OF CONTACT**

1 2

0 - NO DAMAGE 14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM OUTSIDE 15 - VEHICLE NOT AT SCENE  
13 - TOP

**CONTRIBUTING CIRCUMSTANCES**

0 8

1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN

7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING

13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY

17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING

21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION

**TRAFFIC**

**TRAFFICWAY FLOW**

1 1 - ONE-WAY 2 - TWO-WAY

**TRAFFIC CONTROL**

6 1 - ROUNDABOUT 2 - SIGNAL 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL

**# OF THROUGH LANES**

4

**RAIL GRADE CROSSING**

1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING

**EVENT(S)**

**SEQUENCE OF EVENTS**

1 2 0

1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT

6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT

11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE

16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE

22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR

**COLLISION WITH FIXED OBJECT - STRUCK**

25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE

31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER

37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT

43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT

50 - WORKZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN

**FIRST HARMFUL EVENT** 1 **MOST HARMFUL EVENT** 1

**UNIT / NON-MOTORIST DIRECTION**

FROM 3 TO 4

1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN

**UNIT SPEED**

**DETECTED SPEED**

3 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

**POSTED SPEED**

6 0

# MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER  
2 0 2 2 3 3 0 6

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE FERNBERG HEATHER NICOLE				DATE OF BIRTH 1 2 1 6 1 9 9 4		AGE 2 7	GENDER F			
ADDRESS: STREET, CITY, STATE, ZIP 2087 QUAIL ST LAKEWOOD OH 44107					CONTACT PHONE - INCLUDE AREA CODE						
INJURIES 4	INJURE D TAKEN 9	EMS AGENCY (NA ME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED		LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER				
OL CLASS 4	ENDORSEME NT	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTE 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS 1	TYPE 1	VALUE 1	STATUS 1	TYPE 1	RESULT SELECT UP TO 4

UNIT # 0 2	NAME: LAST, FIRST, MIDDLE UNKNOWN UNKNOWN				DATE OF BIRTH		AGE 1 2 2	GENDER F			
ADDRESS: STREET, CITY, STATE, ZIP OH					CONTACT PHONE - INCLUDE AREA CODE						
INJURIES 5	INJURE D TAKEN	EMS AGENCY (NA ME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 9 9	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 9	EJECTION 1	TRAPPED 1		
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED		LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER				
OL CLASS	ENDORSEME NT	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTE 9	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUAN <input type="checkbox"/> OTHER DRUG	CONDITION 9	ALCOHOL TEST STATUS 1	TYPE 1	VALUE 1	STATUS 1	TYPE 1	RESULT SELECT UP TO 4

UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER			
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
INJURIES	INJURE D TAKEN	EMS AGENCY (NA ME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED		LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER				
OL CLASS	ENDORSEME NT	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTE	ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUAN OTHER DRUG	CONDITION	ALCOHOL TEST STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4

INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1 - FATAL	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN
2 - SUSPECTED SERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2 - TEST REFUSED
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C	3 - CORRECTIVE LENSES	3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE	4 - TEST GIVEN, RESULTS KNOWN
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M / C MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS KNOWN
<b>INJURED TAKEN BY</b>	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	<b>ALCOHOL TEST TYPE</b>
1 - NOT TRANSPORTED /TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	<b>EJECTION</b>	<b>OL ENDORSEMENT</b>	7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	1 - NONE
2 - EMS	8 - THIRD - MIDDLE	1 - NOT EJECTED	H - HAZMAT	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED	M - MOTORCYCLE	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	3 - URINE
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED	P - PASSENGER	10 - LIMITED TO DAYLIGHT ONLY	<b>CONDITION</b>	4 - BREATH
<b>SAFETY EQUIPMENT</b>	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER	11 - LIMITED TO EMPLOYMENT	1 - APPARENTLY NORMAL	5 - OTHER
1 - NONE USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	<b>TRAPPED</b>	Q - MOTOR SCOOTER	12 - LIMITED - OTHER	2 - PHYSICAL IMPAIRMENT	<b>DRUG TEST TYPE</b>
2 - SHOULDER BELT ONLY USED	13 - TRAILING UNIT	1 - NOT TRAPPED	R - THREE-WHEEL MOTORCYCLE	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	1 - NONE
3 - LAP BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS	S - SCHOOL BUS	14 - MILITARY VEHICLES ONLY	4 - ILLNESS	2 - BLOOD
4 - SHOULDER & LAP BELT USED	15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	3 - URINE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	99 - OTHER / UNKNOWN		X - TANKER / HAZMAT	16 - OUTSIDE MIRROR	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	4 - OTHER
6 - CHILD RESTRAINT SYSTEM - REAR FACING			<b>GENDER</b>	17 - PROSTHETIC AID	9 - OTHER / UNKNOWN	<b>DRUG TEST RESULT(S)</b>
7 - BOOSTER SEAT			F - FEMALE	18 - OTHER		1 - AMPHETAMINES
8 - HELMET USED			M - MALE			2 - BARBITURATES
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)			U - OTHER/UNKNOWN			3 - BENZODIAZEPINES
10 - REFLECTIVE CLOTHING						4 - CANNABINOIDS
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						5 - COCAINE
99 - OTHER / UNKNOWN						6 - OPIATES / OPIOIDS
						7 - OTHER
						8 - NEGATIVE RESULTS