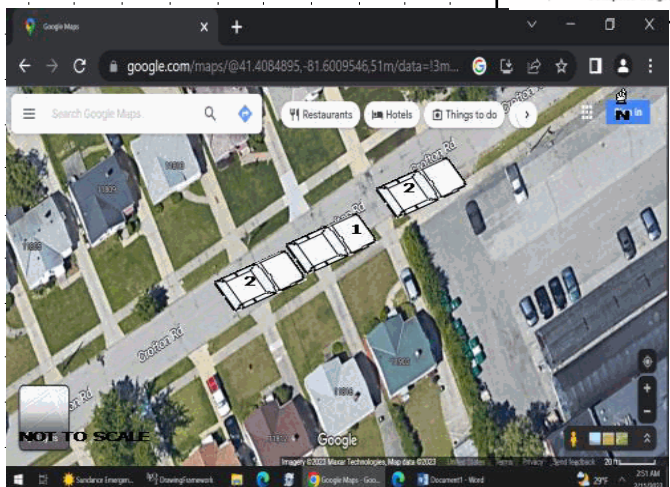


TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR S

LOCAL REPORT NUMBER *

| | | | | | | | | | |
|---|--|---|--|--|--|--|--|---|--|
| <input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH | | <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> Private Property | | LOCAL INFORMATION REPORTING AGENCY NAME * GARFIELD HEIGHTS | | NCIC * 0 1 8 2 0 | | LOCAL REPORT NUMBER * 2 0 2 3 0 4 1 1 | |
| COUNTY * 1 8 | | LOCALITY * 1 | | LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS | | CRASH DATE/TIME * 0 2 1 1 2 0 2 3 0 2 1 0 | | CRASH SEVERITY 5 | |
| ROUTE TYPE <input type="checkbox"/> | | ROUTE NUMBER <input type="checkbox"/> | | PREFIX <input type="checkbox"/> | | LOCATION ROAD NAME CROFTON | | ROAD TYPE R D | |
| ROUTE TYPE <input type="checkbox"/> | | ROUTE NUMBER <input type="checkbox"/> | | PREFIX <input type="checkbox"/> | | REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 11902 | | ROAD TYPE <input type="checkbox"/> | |
| REFERENCE POINT 3 | | DIRECTION 3 | | ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE | | ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS | | HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE | |
| RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY | | INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA | | NUMBER OF APPROACHES <input type="checkbox"/> | | ROADWAY <input type="checkbox"/> ROADWAY DIVIDED | | | |
| DISTANCE FROM REFERENCE 7 5 | | DISTANCE UNIT OF MEASURE 2 | | | | | | | |
| LOCATION OF FIRST HARMFUL EVE 0 1 | | MANNER OF CRASH COLLISION/IMPACT 1 | | DIRECTION OF TRAVEL <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH <input type="checkbox"/> EAST <input type="checkbox"/> WEST | | MEDIAN TYPE <input type="checkbox"/> DIVIDED FLUSH MEDIAN (<4 FEET) <input type="checkbox"/> DIVIDED FLUSH MEDIAN (4-8 FEET) <input type="checkbox"/> DIVIDED, DEPRESSED MEDIAN <input type="checkbox"/> DIVIDED, RAISED MEDIAN (ANY TYPE) <input type="checkbox"/> OTHER / UNKNOWN | | | |
| <input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE | | WORK ZONE TYPE <input type="checkbox"/> LANE CLOSURE <input type="checkbox"/> LANE SHIFT/CROSSOVER <input type="checkbox"/> WORK ON SHOULDER OR MEDIAN <input type="checkbox"/> INTERMITTENT OR MOVING WORK <input type="checkbox"/> OTHER | | LOCATION OF CRASH IN WORK ZONE <input type="checkbox"/> BEFORE THE 1ST WORK ZONE WARNING SIGN <input type="checkbox"/> ADVANCE WARNING AREA <input type="checkbox"/> TRANSITION AREA <input type="checkbox"/> ACTIVITY AREA <input type="checkbox"/> TERMINATION AREA | | CONTOUR 1 | | CONDITIONS 1 | |
| LIGHT CONDITION 3 | | WEATHER 1 | | SURFACE 2 | | 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER /UNKNOWN | | 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN | |
| 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN | | 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL | | 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN | | 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER /UNKNOWN | | | |
| NARRATIVE UNIT 1 WAS PARKED UNOCCUPIED IN FRONT OF 11902 CROFTON ROAD. UNIT 2 (HIT-SKIP STRUCK UNIT 1 IN THE BACK LEFT BUMPER. | | | | |  | | | | |
| CRASH REPORTED DATE/TIME 0 2 1 1 2 0 2 3 0 2 1 0 | | DISPATCH DATE/TIME 0 2 1 1 2 0 2 3 0 2 1 3 | | ARRIVAL DATE/TIME 0 2 1 1 2 0 2 3 0 2 2 1 | | SCENE CLEARED DATE/TIME 0 2 1 1 2 0 2 3 0 2 3 0 | | REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST | |
| TOTAL TIME ROADWAY CLOSED 0 | | OTHER INVESTIGATION TIME <input type="checkbox"/> | | TOTAL MINUTES 9 | | OFFICER'S NAME * Y. Ihiri | | CHECKED BY OFFICER'S NAME* S. Sabelli | |
| | | | | OFFICER'S BADGE NUMBER* 0 3 8 | | CHECKED BY OFFICER'S BADGE NUMBER* S 2 1 | | <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODDS) | |

OWNER

UNIT # 01 OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver)
HARVEY MALIA CHRISTINE

OWNER PHONE: INCLUDE AREA CODE (Same As Driver)

OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver)
6985 OFFICE PARK DR UNIT LIBERTY TWP OH 45069

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

VEHICLE

LP STATE OH LICENSE PLATE # HDU1597 VEHICLE IDENTIFICATION # VJNKKTUD34FA017471 VEHICLE YEAR 2015 VEHICLE MAKE Toyota

INSURANCE VERIFIED INSURANCE COMPANY AMERICAN FAMILY INSURANCE POLICY # 41069-28028-74 VEHICLE COLOR SIL VEHICLE MODEL Yaris

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

US DOT # _____ TOWED BY: COMPANY NAME _____

HAZARDOUS MATERIAL: MATERIAL CLASS # _____ PLACARD _____ RELEASED

UNIT TYPE 01

1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEEL 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/SKATER
 2 - PASSENGER VAN (MINIVAN) ED 8 - MOTORCYCLE 3-WHEEL 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 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE
 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN
 6 - VAN (9-15 SEATS) 17 - MOTORHOME 19 - SNOWMOBILE 20 - OTHER VEHICLE 25 - OTHER NON- MOTORIST
 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS _____

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

1 - YES 2 - NO 9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL 0

0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN

SPECIAL FUNCTION 01

1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS-TRANSIT/COMMUTER 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 PATROL 21 - MAIL CARRIER 99 - OTHER / UNKNOWN

CARGO BODY TYPE 01

1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL 8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

VEHICLE DEFECTS

1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE 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 - MIDDLEBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION 6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 19 - OTHER / UNKNOWN 99 - OTHER / UNKNOWN

ACTION 4

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

PRE-CRASH ACTION 01

1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN

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 - 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 10 - CROSS MEDIAN 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 VEHICLE 24 - OTHER MOVABLE OBJECT

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

LOCAL REPORT

2 0 2 3 0 4 1 1

DAMAGE

DAMAGE SCALE

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

DAMAGED AREA(S)

INDICATE ALL THAT APPLY

- NO DAMAGE [0] - UNDERCARRIAGE [14] - TOP [13] - ALL AREAS [15] - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT

07

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

TRAFFIC

TRAFFICWAY FLOW

1 - ONE-WAY 2 - TWO-WAY

TRAFFIC CONTROL

1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL

OF THROUGH LANES ON ROAD 02

RAIL GRADE CROSSING

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

UNIT / NON-MOTORIST DIRECTION

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

FROM 4 TO 3

UNIT SPEED 0

POSTED SPEED 0

DETECTED SPEED

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

OWNER

UNIT # 02 OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver)
UNKNOWN UNKNOWN

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

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

VEHICLE

LP STATE _____ LICENSE PLATE # _____ VEHICLE IDENTIFICATION # _____ VEHICLE YEAR _____ VEHICLE MAKE _____

INSURANCE VERIFIED INSURANCE COMPANY _____ INSURANCE POLICY # _____ VEHICLE COLOR _____ VEHICLE MODEL **OTH**

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 01 US DOT # _____ TOWED BY: COMPANY NAME _____

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

HAZARDOUS MATERIAL
 MATERIAL CLASS # _____ PLACARD _____
 RELEASED

UNIT TYPE 99

| | | | | |
|-----------------------------|---------------------------------|------------------------|--|----------------------------|
| 1 - PASSENGER CAR | 7 - MOTORCYCLE 2-WHEEL | 12 - GOLF CART | 18 - LIMO (LIVERY VEHICLE) | 23 - PEDESTRIAN/SKATER |
| 2 - PASSENGER VAN (MINIVAN) | 8 - MOTORCYCLE 3-WHEEL | 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 - MOPED OR MOTORIZED BICYCLE | 15 - SEMI-TRACTOR | 21 - HEAVY EQUIPMENT | 26 - BICYCLE |
| 5 - CARGO VAN | 11 - ALL TERRAIN VEHICLE | 16 - FARM EQUIPMENT | 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE | 27 - TRAIN |
| 6 - VAN (9-15 SEATS) | | 17 - MOTORHOME | 99 - UNKNOWN OR HIT/SKIP | |

OF TRAILING UNITS _____

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 9

1 - YES 2 - NO 9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL 9

0 - NO AUTOMATION
1 - DRIVER ASSISTANCE
2 - PARTIAL AUTOMATION
3 - CONDITIONAL AUTOMATION
4 - HIGH AUTOMATION
5 - FULL AUTOMATION
9 - UNKNOWN

SPECIAL FUNCTION

| | | | | |
|-----------------------------|------------------------|-----------------------------|----------------------------|----------------------|
| 1 - NONE | 6 - BUS - CHARTER/TOUR | 11 - FIRE | 16 - FARM | 21 - MAIL CARRIER |
| 2 - TAXI | 7 - BUS - INTERCITY | 12 - MILITARY | 17 - MOWING | 99 - OTHER / UNKNOWN |
| 3 - ELECTRONIC RIDE SHARING | 8 - BUS - SHUTTLE | 13 - POLICE | 18 - SNOW REMOVAL | |
| 4 - SCHOOL TRANSPORT | 9 - BUS - OTHER | 14 - PUBLIC UTILITY | 19 - TOWING | |
| 5 - BUS-TRANSIT/COMMUTER | 10 - AMBULANCE | 15 - CONSTRUCTION EQUIPMENT | 20 - SAFETY SERVICE PATROL | |

CARGO BODY TYPE

| | | | | |
|---|--|----------------------------------|----------------|-----------------------|
| 1 - NO CARGO BODY TYPE / NOT APPLICABLE | 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE | 5 - INTERMODAL CONTAINER CHASSIS | 8 - POLE | 12 - CONCRETE MIXER |
| 2 - BUS | 4 - LOGGING | 6 - CARGO VAN/ENCLOSED BOX | 9 - CARGO TANK | 13 - AUTO TRANSPORTER |
| | | 7 - GRAIN/CHIPS/GRAVEL | 10 - FLAT BED | 14 - GARBAGE/REFUSE |
| | | | 11 - DUMP | 99 - OTHER / UNKNOWN |

VEHICLE DEFECTS

| | | | | |
|------------------|------------------|---------------------------------|-----------------------------------|----------------------|
| 1 - TURN SIGNALS | 4 - BRAKES | 7 - WORN OR SLICK TIRES | 9 - MOTOR TROUBLE | 99 - OTHER / UNKNOWN |
| 2 - HEAD LAMPS | 5 - STEERING | 8 - TRAILER EQUIPMENT DEFECTIVE | 10 - DISABLED FROM PRIOR ACCIDENT | |
| 3 - TAIL LAMPS | 6 - TIRE BLOWOUT | | | |

NON-MOTORIST LOCATION AT IMPACT

| | | | | |
|---------------------------------------|--------------------------------|-----------------------|---------------------------------|--|
| 1 - INTERSECTION - MARKED CROSSWALK | 3 - INTERSECTION - OTHER | 6 - BICYCLE LANE | 9 - MEDIAN/CROSSING ISLAND | 12 - FIRST RESPONDER AT INCIDENT SCENE |
| 2 - INTERSECTION - UNMARKED CROSSWALK | 4 - MIDLANE - MARKED CROSSWALK | 7 - SHOULDER/ROADSIDE | 10 - DRIVEWAY ACCESS | 99 - OTHER / UNKNOWN |
| | 5 - TRAVEL LANE-OTHER LOCATION | 8 - SIDEWALK | 11 - SHARED USE PATHS OR TRAILS | |

ACTION 3

PRE-CRASH ACTION 99

| | | | | |
|----------------------------|------------------------|------------------------------------|--|--|
| 1 - NON-CONTACT | 1 - STRAIGHT AHEAD | 7 - MAKING U-TURN | 13 - NEGOTIATING A CURVE | 18 - APPROACHING OR LEAVING VEHICLE |
| 2 - NON-COLLISION | 2 - BACKING | 8 - ENTERING TRAFFIC LANE | 14 - ENTERING OR CROSSING SPECIFIED LOCATION | 19 - STANDING |
| 3 - STRIKING | 3 - CHANGING LANES | 9 - LEAVING TRAFFIC LANE | 15 - WALKING, RUNNING, JOGGING, PLAYING | 20 - OTHER NON-MOTORIST |
| 4 - STRUCK | 4 - OVERTAKING/PASSING | 10 - PARKED | 16 - WORKING IN TRAFFIC | 21 - STANDING OUTSIDE DISABLED VEHICLE |
| 5 - BOTH STRIKING & STRUCK | 5 - MAKING RIGHT TURN | 11 - SLOWING OR STOPPED IN TRAFFIC | 17 - PUSHING VEHICLE | 99 - OTHER / UNKNOWN |
| 9 - OTHER / UNKNOWN | 6 - MAKING LEFT TURN | 12 - DRIVERLESS | | |

CONTRIBUTING CIRCUMSTANCES

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

SEQUENCE OF EVENTS

EVENTS

| | | | | |
|-------------------------------------|-------------------------|--|---------------------------------|---|
| 1 - OVERTURN/ROLLOVER | 6 - EQUIPMENT FAILURE | 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL | 16 - RAILWAY VEHICLE | 22 - WORK ZONE MAINTENANCE EQUIPMENT |
| 2 - FIRE/EXPLOSION | 7 - SEPARATION OF UNITS | 12 - DOWNHILL RUNAWAY | 17 - ANIMAL - FARM | 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE |
| 3 - IMMERSION | 8 - RAN OFF ROAD RIGHT | 13 - OTHER NON-COLLISION | 18 - ANIMAL - DEER | 24 - OTHER MOVABLE OBJECT |
| 4 - JACKKNIFE | 9 - RAN OFF ROAD LEFT | 14 - PEDESTRIAN | 19 - ANIMAL - OTHER | |
| 5 - CARGO / EQUIPMENT LOSS OR SHIFT | 10 - CROSS MEDIAN | 15 - PEDALCYCLE | 20 - MOTOR VEHICLE IN TRANSPORT | |
| | | | 21 - PARKED MOTOR VEHICLE | |

COLLISION WITH FIXED OBJECT - STRUCK

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

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

LOCAL REPORT

2 0 2 3 0 4 1 1

DAMAGE

DAMAGE SCALE

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

1

DAMAGED AREA(S)

INDICATE ALL THAT APPLY

- NO DAMAGE [0] - UNDERCARRIAGE [14]
 - TOP [13] - ALL AREAS [15]
 - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT

99

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

TRAFFIC

TRAFFICWAY FLOW

2

1 - ONE-WAY
2 - TWO-WAY

TRAFFIC CONTROL

6

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

OF THROUGH LANES ON ROAD

02

RAIL GRADE CROSSING

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

UNIT / NON-MOTORIST DIRECTION

FROM 4 TO 3

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

UNIT SPEED

DETECTED SPEED

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

POSTED SPEED

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
2 0 2 3 0 4 1 1

| | | | | | |
|--|---------------|---|--------------------------------------|------------------------------|-------------|
| MOTORIST / NON-MOTORIST | UNIT # 0 1 | NAME: LAST, FIRST, MIDDLE HARVEY MALIA CHRISTINE | DATE OF BIRTH 0 7 1 8 1 9 9 5 | AGE 2 7 | GENDER F |
| ADDRESS: STREET, CITY, STATE, ZIP 6985 OFFICE PARK DR UNIT LIBERTY TWP OH 45069 | | | CONTACT PHONE - INCLUDE AREA CODE | | |
| INJURIES 5 | | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) 1 | | SAFETY EQUIPMENT USED 0 1 | |
| OL STATE | | OPERATOR LICENSE NUMBER | | OFFENSE CHARGED | |
| OL CLASS 4 | | ENDORSEMENT SELECT UP TO 2 | | RESTRICTION SELECT UP TO 3 | |
| DRIVER DISTRACTED BY 1 | | ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | | CONDITION 1 | |
| DOT-COMPLIANT MC HELMET <input type="checkbox"/> | | SEATING POSITION 0 1 | | AIR BAG USAGE 1 | |
| EJECTION 1 | | TRAPPED 1 | | CITATION NUMBER | |

| | | | | | |
|---|---------------|---|-----------------------------------|------------------------------|-------------|
| MOTORIST / NON-MOTORIST | UNIT # 0 2 | NAME: LAST, FIRST, MIDDLE UNKNOWN UNKNOWN | DATE OF BIRTH | AGE 1 2 3 | GENDER U |
| ADDRESS: STREET, CITY, STATE, ZIP UNKNOWN CLEVELAND OH | | | CONTACT PHONE - INCLUDE AREA CODE | | |
| INJURIES | | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) 9 9 | | SAFETY EQUIPMENT USED 9 9 | |
| OL STATE | | OPERATOR LICENSE NUMBER | | OFFENSE CHARGED | |
| OL CLASS | | ENDORSEMENT SELECT UP TO 2 | | RESTRICTION SELECT UP TO 3 | |
| DRIVER DISTRACTED BY | | ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | | CONDITION 1 | |
| DOT-COMPLIANT MC HELMET <input type="checkbox"/> | | SEATING POSITION 0 1 | | AIR BAG USAGE 9 | |
| EJECTION 3 | | TRAPPED 1 | | CITATION NUMBER | |

| | | | | | |
|---|--------|---|-----------------------------------|----------------------------|--------|
| MOTORIST / NON-MOTORIST | UNIT # | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
| ADDRESS: STREET, CITY, STATE, ZIP | | | CONTACT PHONE - INCLUDE AREA CODE | | |
| INJURIES | | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | | SAFETY EQUIPMENT USED | |
| OL STATE | | OPERATOR LICENSE NUMBER | | OFFENSE CHARGED | |
| OL CLASS | | ENDORSEMENT SELECT UP TO 2 | | RESTRICTION SELECT UP TO 3 | |
| DRIVER DISTRACTED BY | | ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | | CONDITION | |
| DOT-COMPLIANT MC HELMET <input type="checkbox"/> | | SEATING POSITION | | AIR BAG USAGE | |
| EJECTION | | TRAPPED | | CITATION NUMBER | |

| 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 UNKNOWN |
| INJURED TAKEN BY | | EJECTION | | OL ENDORSEMENT | | ALCOHOL TEST TYPE |
| 1 - NOT TRANSPORTED / TREATED AT SCENE | | 1 - NOT EJECTED | | H - HAZMAT | | 1 - NONE |
| 2 - EMS | | 2 - PARTIALLY EJECTED | | M - MOTORCYCLE | | 2 - BLOOD |
| 3 - POLICE | | 3 - TOTALLY EJECTED | | P - PASSENGER | | 3 - URINE |
| 9 - OTHER / UNKNOWN | | 4 - NOT APPLICABLE | | N - TANKER | | 4 - BREATH |
| SAFETY EQUIPMENT | | TRAPPED | | Q - MOTOR SCOOTER | | 5 - OTHER |
| 1 - NONE USED | | 1 - NOT TRAPPED | | R - THREE-WHEEL | | DRUG TEST TYPE |
| 2 - SHOULDER BELT ONLY USED | | 2 - EXTRICATED BY MECHANICAL MEANS | | MOTORCYCLE | | 1 - NONE |
| 3 - LAP BELT ONLY USED | | 3 - FREED BY NON-MECHANICAL MEANS | | S - SCHOOL BUS | | 2 - BLOOD |
| 4 - SHOULDER & LAP BELT USED | | | | T - DOUBLE & TRIPLE TRAILERS | | 3 - URINE |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | | | | X - TANKER / HAZMAT | | 4 - OTHER |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING | | | | | | CONDITION |
| 7 - BOOSTER SEAT | | | | | | 1 - APPARENTLY NORMAL |
| 8 - HELMET USED | | | | | | 2 - PHYSICAL IMPAIRMENT |
| 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) | | | | | | 3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED) |
| 10 - REFLECTIVE CLOTHING | | | | | | 4 - ILLNESS |
| 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY | | | | | | 5 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED) |
| 99 - OTHER / UNKNOWN | | | | | | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL |
| | | | | | | 7 - OTHER / UNKNOWN |
| | | | | | | DRUG TEST RESULT(S) |
| | | | | | | 1 - AMPHETAMINES |
| | | | | | | 2 - BARBITURATES |
| | | | | | | 3 - BENZODIAZEPINES |
| | | | | | | 4 - CANNABINOIDS |
| | | | | | | 5 - COCAINE |
| | | | | | | 6 - OPIATES / OPIOIDS |
| | | | | | | 7 - OTHER |
| | | | | | | 8 - NEGATIVE RESULTS |