

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER \*

2 | 0 | 2 | 3 | 0 | 9 | 3 | 4

- PHOTOS TAKEN     OH-2     OH-3  
 SECONDARY CRASH     OH-1P     OTHER  
 Private Property

LOCAL INFORMATION

REPORTING AGENCY NAME \*

GARFIELD HEIGHTS PD

NCIC \*  
0 | 1 | 8 | 2 | 0

HITSKIP  
1 - Solved  
2 - Unsolved

NUMBER OF UNITS  
0 | 3

INITIALS EDDP  
98 - ANIMAL  
99 - UNKNOWN  
0 | 3

COUNTY \*  
1 | 8

LOCALITY \*  
1

LOCATION: CITY, VILLAGE, TOWNSHIP \*  
GARFIELD HTS

CRASH DATE/TIME \*  
0 | 4 | 0 | 6 | 2 | 0 | 2 | 3 | 0 | 8 | 3 | 4

CRASH SEVERITY  
5  
1 - FATAL  
2 - SERIOUS INJURY SUSPECTED  
3 - MINOR INJURY SUSPECTED  
4 - INJURY POSSIBLE  
5 - PROPERTY DAMAGE ONLY

ROUTE TYPE  
1 | R

ROUTE NUMBER  
4 | 8 | 0

PREFIX  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

LOCATION ROAD NAME

ROAD TYPE

LATITUDE DECIMAL DEGREES  
4 | 1 | . | 3 | 9 | 6 | 0 | 6 | 9

ROUTE TYPE

ROUTE NUMBER

PREFIX  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)  
23.8

ROAD TYPE  
M | P

LONGITUDE DECIMAL DEGREES  
- 8 | 1 | . | 5 | 4 | 1 | 5 | 3 | 5

REFERENCE POINT  
1 - INTERSECTION  
2 - MILE POST  
3 - HOUSE #  
2

DIRECTION  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

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  
 WITHIN INTERSECTION OR ON APPROACH  
 WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES

DISTANCE  
1 - Miles  
2 - Feet  
3 - Yards

DISTANCE  
1 - Miles  
2 - Feet  
3 - Yards

ROADWAY  
 ROADWAY DIVIDED

LOCATION OF FIRST DAMAGE EVENT  
0 | 1  
1 - ON ROADWAY  
2 - ON SHOULDER  
3 - IN MEDIAN  
4 - ON ROADSIDE  
5 - ON GORE  
6 - OUTSIDE TRAFFICWAY  
7 - ON RAMP  
8 - OFF RAMP  
9 - CROSSOVER  
10 - DRIVEWAY / ALLEY ACCESS  
11 - RAILWAY GRADE CROSSING  
12 - SHARED USE PATHS OR TRAILS  
13 - BIKE LANE  
14 - TOLL BOOTH  
99 - OTHER / UNKNOWN

MANNER OF CRASH COLLISION/IMPACT  
1  
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

DIRECTION OF TRAVEL  
4  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

MEDIAN TYPE  
4  
1 - DIVIDED FLUSH MEDIAN (<4 FEET)  
2 - DIVIDED FLUSH MEDIAN (≥4 FEET)  
3 - DIVIDED, DEPRESSED MEDIAN  
4 - DIVIDED, RAISED MEDIAN (ANY TYPE)  
9 - OTHER / UNKNOWN

WORK ZONE RELATED  
 WORKERS PRESENT  
 LAW ENFORCEMENT PRESENT  
 ACTIVE SCHOOL ZONE

WORK ZONE TYPE  
1 - LANE CLOSURE  
2 - LANE SHIFT/CROSSOVER  
3 - WORK ON SHOULDER  
OR MEDIAN  
4 - INTERMITTENT OR MOVING WORK  
5 - OTHER

LOCATION OF CRASH IN WORK ZONE  
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN  
2 - ADVANCE WARNING AREA  
3 - TRANSITION AREA  
4 - ACTIVITY AREA  
5 - TERMINATION AREA

CONTOUR  
4  
1 - STRAIGHT LEVEL  
2 - STRAIGHT GRADE  
3 - CURVE LEVEL  
4 - CURVE GRADE  
9 - OTHER / UNKNOWN

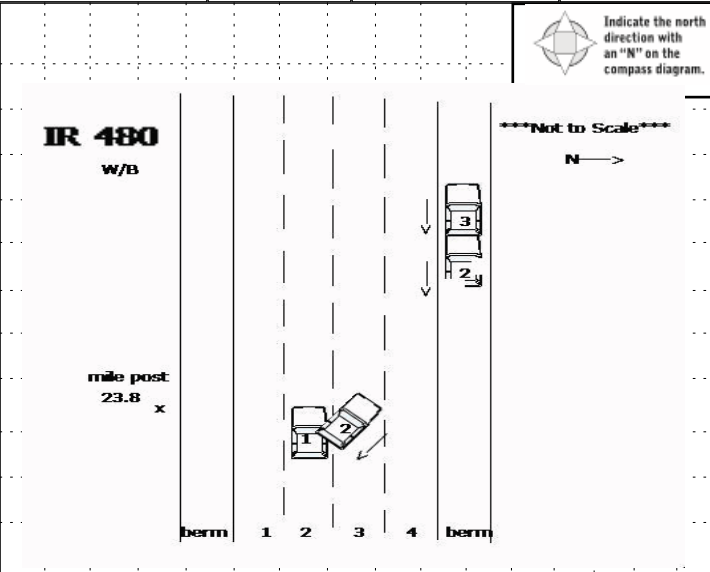
CONDITIONS  
1  
1 - DRY  
2 - WET  
3 - SNOW  
4 - ICE  
5 - SAND, MUD, DIRT, OIL, GRAVEL  
6 - WATER (STANDING, MOVING)  
7 - SLUSH  
9 - OTHER/UNKNOWN

SURFACE  
2  
1 - CONCRETE  
2 - BLACKTOP, BITUMINOUS, ASPHALT  
3 - BRICK/BLOCK  
4 - SLAG, GRAVEL, STONE  
5 - DIRT  
9 - OTHER / UNKNOWN

LIGHT CONDITION  
1  
1 - DAYLIGHT  
2 - DAWN/DUSK  
3 - DARK - LIGHTED ROADWAY  
4 - DARK - ROADWAY NOT LIGHTED  
5 - DARK - UNKNOWN ROADWAY LIGHTING  
9 - OTHER / UNKNOWN

WEATHER  
2  
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

UNIT #2 WAS PARKED, UNOCCUPIED, IN THE RIGHT BERM ON IR480 W/B AT MILE POST 22.0. IT WAS DISABLED WITH TRANSMISSION PROBLEMS AND WAS WAITING FOR A TOW TRUCK. UNIT #3 WAS A TOW TRUCK THAT ARRIVED AND THE DRIVER REMOTELY LOWERED THE WHEEL LIFT AND BACKED UNDER THE FRONT OF UNIT #2. WHEN THE LIFT MADE CONTACT WITH THE FRONT TIRES, THE CAR WAS PUSHED AWAY AND TRAVELED DRIVERLESS INTO ONCOMING TRAFFIC. THUS, UNIT #1, WHICH WAS TRAVELLING IN LANE #2, WAS STRUCK BY UNIT #2.



CRASH REPORTED DATE/TIME  
0 | 4 | 0 | 6 | 2 | 0 | 2 | 3 | 0 | 8 | 3 | 4

DISPATCH DATE/TIME  
0 | 4 | 0 | 6 | 2 | 0 | 2 | 3 | 0 | 8 | 3 | 4

ARRIVAL DATE/TIME  
0 | 4 | 0 | 6 | 2 | 0 | 2 | 3 | 0 | 8 | 4 | 7

SCENE CLEARED DATE/TIME  
0 | 4 | 0 | 6 | 2 | 0 | 2 | 3 | 0 | 9 | 2 | 0

REPORT TAKEN BY  
 POLICE AGENCY  
 MOTORIST

TOTAL TIME ROADWAY CLOSED  
0

OTHER INVESTIGATION TIME  
6 | 5

TOTAL MINUTES  
9 | 8

OFFICER'S NAME \*  
Z. Kovesti  
OFFICER'S BADGE NUMBER\*  
0 | 5 | 5

CHECKED BY OFFICER'S NAME\*  
D. Bailey  
CHECKED BY OFFICER'S BADGE NUMBER\*  
L | 0 | 7

SUPPLEMENT  
(CORRECTION = ADDITION)

**OWNER**

UNIT # 0 1 OWNER NAME: LAST, FIRST, MIDDLE (  Same As Driver )  
**GOULD JEFFREY S**

OWNER ADDRESS: STREET, CITY, STATE, ZIP (  Same As Driver )  
**163 CARRIAGE DR 204 CHAGRIN FALLS OH 44022**

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

**DAMAGE**

**DAMAGE SCALE**

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

3

**VEHICLE**

LP STATE OH LICENSE PLATE # JNC1625 VEHICLE IDENTIFICATION # 5Y1XK1331A1F21P6G02181746 VEHICLE YEAR 2023 VEHICLE MAKE Kia

INSURANCE VERIFIED  INSURANCE COMPANY GEICO INSURANCE POLICY # 6062-72-65-98 VEHICLE COLOR GRY VEHICLE MODEL Sportage

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  # OCCUPANTS 0 1

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

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

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

**DAMAGED AREA(S)**  
INDICATE ALL THAT APPLY

1 - NO DAMAGE [0]  2 - UNDERCARRIAGE [14]   
 3 - TOP [13]  4 - ALL AREAS [15]   
 6 - UNIT NOT AT SCENE [16]

UNIT TYPE: 0 3

1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) 7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV) 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 - PEDESTRIANSKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 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 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN

**SPECIAL FUNCTION** 0 1

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** 0 1

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** 0 1

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** 0 1

1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK 3 - INTERSECTION - OTHER 4 - MIDBLOCK - 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 99 - OTHER / UNKNOWN

**ACTION** 0 4

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 6 - MAKING LEFT 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 - 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

**INITIAL POINT OF CONTACT**

0 2

0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

**CONTRIBUTING CIRCUMSTANCES** 0 1

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** 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

**SEQUENCE OF EVENTS**

**EVENTS**

1 1 2

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

**# OF THROUGH LANES ON ROAD** 4

**RAIL GRADE CROSSING**

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

**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** 60

**POSTED SPEED** 60

**DETECTED SPEED** 1

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

OWNER # 0 2 OWNER NAME: LAST, FIRST, MIDDLE ( ) Same As Driver RUCKER EMMANUEL G  
OWNER PHONE: INCLUDE AREA CODE ( ) Same As Driver  
OWNER ADDRESS: STREET, CITY, STATE, ZIP ( ) Same As Driver  
6010 FRANKLIN BLVD 306 CLEVELAND OH 44102  
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

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

LP STATE OH LICENSE PLATE # JCH7806 VEHICLE IDENTIFICATION # 1GKDT113S5132309939 VEHICLE YEAR 2003 VEHICLE MAKE GMC  
INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # VEHICLE COLOR BLU VEHICLE MODEL Envoy  
TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE  
US DOT # TOWED BY: COMPANY NAME INTERSTATE TOWING  
HAZARDOUS MATERIAL: MATERIAL RELEASED CLASS # PLACARD ID #

DAMAGED AREA(S)  
INDICATE ALL THAT APPLY  
[Diagrams showing vehicle damage locations on top, front, rear, and side views with numbered indicators 1-12.]  
- NO DAMAGE [0] - UNDERCARRIAGE [14]  
- TOP [13] - ALL AREAS [15]  
- UNIT NOT AT SCENE [16]

UNIT TYPE: 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN SKATER  
2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 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 (ATV / UTV) 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? 2  
1 - YES 2 - NO 9 - OTHER / UNKNOWN  
AUTONOMOUS MODE LEVEL: 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
2 - PARTIAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION

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 99 - OTHER / UNKNOWN  
11 - DUMP

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 - MIDBLOCK - 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: 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 21 - STANDING OUTSIDE DISABLED VEHICLE  
5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 99 - OTHER / UNKNOWN  
9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE

INITIAL POINT OF CONTACT  
0 7  
0 - NO DAMAGE 14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
99 - UNKNOWN  
13 - TOP

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 11 - DROVE OFF ROAD 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION  
5 - UNSAFE SPEED 12 - IMPROPER BACKING 16 - WRONG WAY

TRAFFIC  
TRAFFICWAY FLOW 2  
1 - ONE-WAY  
2 - TWO-WAY  
TRAFFIC CONTROL 6  
1 - ROUNDABOUT 4 - STOP SIGN  
2 - SIGNAL 5 - YIELD SIGN  
3 - FLASHER 6 - NO CONTROL

SEQUENCE OF EVENTS  
EVENTS  
1 2 0  
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 25 - OTHER FIXED OBJECT  
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT 99 - OTHER / UNKNOWN  
6 - IMPROPER TURN 11 - DROVE OFF ROAD 12 - IMPROPER BACKING 16 - WRONG WAY  
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 STRUCTURE 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  
1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

# OF THROUGH LANES ON ROAD 4  
RAIL GRADE CROSSING  
1 - NOT INVOLVED  
2 - INVOLVED - ACTIVE CROSSING  
3 - INVOLVED - PASSIVE CROSSING

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

UNIT SPEED 3  
POSTED SPEED 60  
DETECTED SPEED 1  
1 - STATED/ESTIMATED SPEED  
2 - CALCULATED / EDR  
3 - UNDETERMINED

UNIT # 0 3 OWNER NAME: LAST, FIRST, MIDDLE ( ) Same As Driver  
**ADVANTAGE INVESTMENTS LLC**

OWNER ADDRESS: STREET, CITY, STATE, ZIP ( ) Same As Driver  
**20680 SOUTHGATE PARK BLVD MAPLE HTS OH 44137**

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
**ADVANTAGE TOWING 20680 SOUTHGATE PARK MAPLE HTS C**

OWNER PHONE: INCLUDE AREA CODE ( ) Same As Driver  
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**

**DAMAGE SCALE**

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

1

LP STATE OH LICENSE PLATE # PLP5296 VEHICLE IDENTIFICATION # 3C1C7WRN1A1L01MG6611991 VEHICLE YEAR 2021 VEHICLE MAKE Dodge

INSURANCE VERIFIED  INSURANCE COMPANY AMGUARD INSURANCE C INSURANCE POLICY # 42390 VEHICLE COLOR WHI VEHICLE MODEL RAM 50

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

US DOT # 3158067 TOWED BY: COMPANY NAME

HAZARDOUS MATERIAL:  MATERIAL RELEASED  PLACARD CLASS # PLACARD ID #

**DAMAGED AREA(S)**  
INDICATE ALL THAT APPLY

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

UNIT TYPE: 20

1 - PASSENGER CAR    7 - MOTORCYCLE 2-WHEELED    12 - GOLF CART    18 - LIMO (LIVERY VEHICLE)    23 - PEDESTRIAN SKATER  
2 - PASSENGER VAN (MINIVAN)    8 - MOTORCYCLE 3-WHEELED    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 (ATV / UTV)    16 - FARM EQUIPMENT    22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE    27 - TRAIN  
6 - VAN (9-15 SEATS)    17 - MOTORHOME

# 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: 0 1

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: 0 1

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    11 - DUMP    10 - FLAT BED    14 - GARBAGE/REFUSE    99 - OTHER / UNKNOWN

VEHICLE DEFECTS: 0 1

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

NON-MOTORIST LOCATION AT IMPACT: 0 1

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 - MIDBLOCK - 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

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    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

**INITIAL POINT OF CONTACT**

0 6

0 - NO DAMAGE    14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM    15 - VEHICLE NOT AT SCENE  
13 - TOP    99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 9 9

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    12 - IMPROPER BACKING

**TRAFFIC**

TRAFFICWAY FLOW: 2

1 - ONE-WAY  
2 - TWO-WAY

TRAFFIC CONTROL: 6

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

**SEQUENCE OF EVENTS**

EVENTS

1 2 1

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    25 - OTHER FIXED OBJECT  
5 - CARGO / EQUIPMENT LOSS OR SHIFT    10 - CROSS MEDIAN    15 - PEDALCYCLE    20 - MOTOR VEHICLE IN TRANSPORT    99 - OTHER / UNKNOWN

2

3

**COLLISION WITH FIXED OBJECT - STRUCK**

4

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

5

6

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

# OF THROUGH LANES ON ROAD: 4

**RAIL GRADE CROSSING**

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

**UNIT / NON-MOTORIST DIRECTION**

FROM 4 TO 3

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

**UNIT SPEED**: 2

**POSTED SPEED**: 60

**DETECTED SPEED**: 1

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

# MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER  
2 0 2 3 0 9 3 4

|   |  |                            |   |   |                                   |                         |                           |               |              |           |                                       |
|---|--|----------------------------|---|---|-----------------------------------|-------------------------|---------------------------|---------------|--------------|-----------|---------------------------------------|
| UNIT #<br>0 1   | NAME: LAST, FIRST, MIDDLE<br>GOULD JEFFREY S |                            | DATE OF BIRTH<br>0 3 0 8 1 9 6 0                |   | AGE<br>6 3                        | GENDER<br>M             |                           |               |              |           |                                       |
| ADDRESS: STREET, CITY, STATE, ZIP<br>163 CARRIAGE DR 204 CHAGRIN FALLS OH 44022 |  |                            |   |   | CONTACT PHONE - INCLUDE AREA CODE |                         |                           |               |              |           |                                       |
| INJURIES<br>5   | INJURED TAKEN BY                             | EMS AGENCY (NAME)          | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED<br>0 4  | DOT-COMPLIANT MC HELMET           | SEATING POSITION<br>0 1 | AIR BAG USAGE<br>1        | EJECTION<br>1 | TRAPPED<br>1 |           |                                       |
| OL STATE  | OPERATOR LICENSE NUMBER                      | OFFENSE CHARGED            | LOCAL CODE                                      | OFFENSE DESCRIPTION   | CITATION NUMBER                   |                         |                           |               |              |           |                                       |
| OL CLASS<br>4   | ENDORSEMENT SELECT UP TO 2                   | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY<br>1                       | ALCOHOL / DRUG SUSPECTED<br><input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | CONDITION<br>1                    | STATUS<br>1             | ALCOHOL TEST<br>TYPE<br>1 | VALUE         | STATUS<br>1  | TYPE<br>1 | DRUG TEST(S)<br>RESULT SELECT UP TO 4 |

|  |  |                            |   |   |                                   |                         |                           |               |              |           |                                       |
|--|--|----------------------------|---|---|-----------------------------------|-------------------------|---------------------------|---------------|--------------|-----------|---------------------------------------|
| UNIT #<br>0 3  | NAME: LAST, FIRST, MIDDLE<br>LEFRIDGE JONATHAN L |                            | DATE OF BIRTH<br>1 1 0 5 1 9 8 7                |   | AGE<br>3 5                        | GENDER<br>M             |                           |               |              |           |                                       |
| ADDRESS: STREET, CITY, STATE, ZIP<br>2786 E. 127TH STREET CLEVELAND OH 44120 |  |                            |   |   | CONTACT PHONE - INCLUDE AREA CODE |                         |                           |               |              |           |                                       |
| INJURIES<br>5  | INJURED TAKEN BY                                 | EMS AGENCY (NAME)          | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED<br>0 4  | DOT-COMPLIANT MC HELMET           | SEATING POSITION<br>0 1 | AIR BAG USAGE<br>1        | EJECTION<br>1 | TRAPPED<br>1 |           |                                       |
| OL STATE   | OPERATOR LICENSE NUMBER                          | OFFENSE CHARGED            | LOCAL CODE                                      | OFFENSE DESCRIPTION   | CITATION NUMBER                   |                         |                           |               |              |           |                                       |
| OL CLASS<br>4  | ENDORSEMENT SELECT UP TO 2                       | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY<br>1                       | ALCOHOL / DRUG SUSPECTED<br><input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | CONDITION<br>1                    | STATUS<br>1             | ALCOHOL TEST<br>TYPE<br>1 | VALUE         | STATUS<br>1  | TYPE<br>1 | DRUG TEST(S)<br>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                          | INJURED TAKEN BY           | EMS AGENCY (NAME)          | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED                                    | DOT-COMPLIANT MC HELMET           | SEATING POSITION | AIR BAG USAGE        | EJECTION | TRAPPED |      |                                       |
| OL STATE                          | OPERATOR LICENSE NUMBER    | OFFENSE CHARGED            | LOCAL CODE                                      | OFFENSE DESCRIPTION                                      | CITATION NUMBER                   |                  |                      |          |         |      |                                       |
| OL CLASS                          | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY                            | ALCOHOL / DRUG SUSPECTED<br>ALCOHOL MARIJUANA OTHER DRUG | CONDITION                         | STATUS           | ALCOHOL TEST<br>TYPE | VALUE    | STATUS  | TYPE | DRUG TEST(S)<br>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 & CLASS B BUS                     | 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE   | 5 - TEST GIVEN, RESULTS UNKNOWN                |
| <b>INJURED TAKEN BY</b>                        |   | <b>EJECTION</b>                    |                              | <b>ALCOHOL TEST TYPE</b>                                 |  |  |
| 1 - NOT TRANSPORTED / TREATED AT SCENE         | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)         | 1 - NOT EJECTED                    | H - HAZMAT                   | 6 - PASSENGER  | 6 - PASSENGER  | 1 - NONE                                       |
| 2 - EMS  | 8 - THIRD - MIDDLE                                  | 2 - PARTIALLY EJECTED              | M - MOTORCYCLE               | 7 - OTHER DISTRACTION INSIDE THE VEHICLE                 | 7 - OTHER DISTRACTION INSIDE THE VEHICLE   | 2 - BLOOD                                      |
| 3 - POLICE                                     | 9 - THIRD - RIGHT SIDE                              | 3 - TOTALLY EJECTED                | P - PASSENGER                | 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE               | 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE   | 3 - URINE                                      |
| 9 - OTHER / UNKNOWN                            | 10 - SLEEPER SECTION OF TRUCK CAB                   | 4 - NOT APPLICABLE                 | N - TANKER                   | 9 - OTHER / UNKNOWN                                      | 9 - OTHER / UNKNOWN  | 4 - BREATH                                     |
| <b>SAFETY EQUIPMENT</b>                        |   | <b>TRAPPED</b>                     |                              | <b>CONDITION</b>   |  | 5 - OTHER                                      |
| 1 - NONE USED                                  | 12 - PASSENGER IN UNENCLOSED CARGO AREA             | 1 - NOT TRAPPED                    | Q - MOTOR SCOOTER            | 1 - APPARENTLY NORMAL                                    | 1 - APPARENTLY NORMAL  |  |
| 2 - SHOULDER BELT ONLY USED                    | 13 - TRAILING UNIT                                  | 2 - EXTRICATED BY MECHANICAL MEANS | R - THREE-WHEEL MOTORCYCLE   | 2 - PHYSICAL IMPAIRMENT                                  | 2 - PHYSICAL IMPAIRMENT  |  |
| 3 - LAP BELT ONLY USED                         | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | 3 - FREED BY NON-MECHANICAL MEANS  | S - SCHOOL BUS               | 3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)         | 3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)                                     |  |
| 4 - SHOULDER & LAP BELT USED                   | 15 - NON-MOTORIST                                   |                                    | T - DOUBLE & TRIPLE TRAILERS | 4 - ILLNESS  | 4 - ILLNESS  |  |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING    | 99 - OTHER / UNKNOWN                                |                                    | X - TANKER / HAZMAT          | 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.                 | 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.   |  |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING       |   |                                    |                              | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL                             |  |
| 7 - BOOSTER SEAT                               |   |                                    |                              | 9 - OTHER / UNKNOWN                                      | 9 - OTHER / UNKNOWN  |  |
| 8 - HELMET USED                                |   |                                    |                              |  |  |  |
| 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) |   |                                    |                              |  |  |  |
| 10 - REFLECTIVE CLOTHING                       |   |                                    |                              |  |  |  |
| 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY      |   |                                    |                              |  |  |  |
| 99 - OTHER / UNKNOWN                           |   |                                    |                              |  |  |  |
|  |   |                                    | <b>GENDER</b>                |  |  | <b>DRUG TEST RESULT(S)</b>                     |
|  |   |                                    | F - FEMALE                   |  |  | 1 - AMPHETAMINES                               |
|  |   |                                    | M - MALE                     |  |  | 2 - BARBITURATES                               |
|  |   |                                    | U - OTHER/UNKNOWN            |  |  | 3 - BENZODIAZEPINES                            |
|  |   |                                    |                              |  |  | 4 - CANNABINOIDS                               |
|  |   |                                    |                              |  |  | 5 - COCAINE                                    |
|  |   |                                    |                              |  |  | 6 - OPIATES / OPIOIDS                          |
|  |   |                                    |                              |  |  | 7 - OTHER                                      |
|  |   |                                    |                              |  |  | 8 - NEGATIVE RESULTS                           |