OF PUBLIC SAFETY TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT									LOCAL REPORT NUMBER *			
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION									2   3   3   7		ш	
SECONDARY CRASH		REPORTING AGENC		HTS	0 1	HIT/SKIP 1 - Solved 2 - Unsolved	MIMRED OF HINTS	0 2	EDDOD 8 - ANIMAL 9 - UNKNOWN			
1	COUNTY' LOCALITY' LOCATION: CITY, VILLAGE, TOWNSHIP'    1   8							CRASH DATE/TIME* CRASH SEVE				
ROUTE TYPE	ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH LOCATION ROAD NAME ROAD TYPE					LATITIDE COMMA CODECC 3 - MINOR NULLY  1 ATTITUDE COMMA CODECC 3 - MINOR NULLY						
LOCATION			2 - SOUTH 3 - EAST 4 - WEST	E 88 TI	4		S <sub>I</sub> T <sub>I</sub>	SUSPECTED 4- INJURY PC 5- PROPERT				
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	4763	CE ROAD NAME (ROAD, MILEPOST,	HOUSE #)	ROAD TYPE	- 8 1 1 6 2		ONLY		
REFERENCE POINT   DIRECTION   1 - INTERSECTION   2 - SOUTH   US - FI   3 - HOUSE #   3 - EAST   4 - WEST   CR - N			ROUTE TYPE STATE ROUTE (TP) RAL US ROUTE E ROUTE SERED COUNTY ROU SERED TOWNSHIP E	TE	AL - ALLEY HW AV - AVENUE LA BL - BOULEVARD MP CR - CIRCLE OV CT - COURT PK DR - DRIVE PI	- LANE S - MILEPOST S - OVAL T - PARKWAY T	D - ROAD Q - SQUARE T - STREET E - TERRACE L - TRAIL JA - WAY	☐ WITHIN INTERCO	ROADWAY	NUMBER of APPI	ROACHES	
	3 - Yards				MANINED ORACII COLLIC	IONIUM OT		ROADWAY DIVI		MEDIAN TYPE		
0   1   1 - ON ROAD 2 - ON SHOUL 3 - IN MEDICAL 4 - ON ROAD 5 - ON GORE 6 - OUTSIDE TRAFFICIO 7 - ON RAME 8 - OFF RAME	JLDER 10 - DRIVEWA N ACCESS SSIDE 11 - RAILWAY E CROSSIN E 12 - SHARED WAY OR TRAIL P 13 - BIKE LAN	ER AY/ALLEY GRADE IG USE PATHS LS IE OTH	1	1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON		REAR  E, SAME DIRECTION  E, OPPOSITE DIRECTION		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	1 - DIVIDI (<4 FE 2 - DIVIDI (24 FE 3 - DIVIDI 4 - DIVIDI (ANY)	ED FLUSH MEDIAN ET) ED FLUSH MEDIAN ET) ED, DEPRESSED MEDIAN ED, RAISED MEDIAN		
	2 3	WORK ZON LANE CLOSURE LANE SHIFT/CROSS: WORK ON SHOULDE OR MEDIAN INTERMITTENT OR M OTHER	OVER ER		1 - BEFOR WARNII 2 - ADVAN 3 - TRANS 4 - ACTIVI	CRASH IN WORK ZON E THE 1ST WORK ZON NG SIGN CE WARNING AREA ITION AREA TY AREA JATION AREA		CONTOUR  1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT,	1 - CONCRE 2 - BLACKTO BITUMINC ASPHALT 3 - BRICK/BI	P, DUS, OCK	
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTE 4 - DARK - ROADV	ED ROADWAY WAY NOT LIGHTED OWN ROADWAY LIGHTING	2_	1 - CLEAR 2 - CLOUD 3 - FOG, S 4 - RAIN 5 - SLEET,	MOG, SMOKE	6 - SNOW 7 - SEVERE CROSSW 8 - BLOWING SAND,	SOIL, DIRT, SNOW R FREEZING DRIZZLE		9 - OTHER /UNKNOWN	OIL, GRAVEL  - WATER (STANDING, MOVING)  7 - SLUSH 9 - OTHERUNKNOWN	4 - SLAG, GE STONE 5 - DIRT 9 - OTHER /UNKNOW		
NARRATIVE UNIT 1 WAS F	PARKED ON T	HF STRI	FT IN F	RONT O	 F					direc	ate the north tion with I" on the	
4763 E 88 ST								• • <del> </del> • • • • • • • • • • • • • • • • • • •			ass diagram.	
DRIVEWAY O					ND					N @		
LEFT.THE.SC	ENE WITHOU	JT LEAVII	NG ANY						1	2	2	
INFORMATION									1			
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CRASH REPORTED DATE: TIME DISPATCH DATE: TIME   DISPATCH DATE: TIM							SCENE CLEA	RED DATE/TIME	■ POLICE AG	TAKEN BY ENCY		
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	officer's  J. Ma	NAME *				FICER'S NAME*		MOTORIST SUI	PPLEMENT	
			0. IVIGITS  OFFICER'S BADGE NUMBER*    R   P   T   1				CHECKED BY OFFICER'S BADGE	NUMBER*		TION on ADDITION  IN REPORT SENT TO COPE		

	OH OF MAPET	HIO DEPARTMENT PUBLIC SAFETY UNIT		2,0,2,3,2	LOCAL REPORT NUMBER					
	UNIT#	OWNER NAME: LAST, FIRST, MIDDL  JENKINS TE	( L Sam		DAMAGE  DAMAGE SCALE					
OWNER	OWNER ADDRE	ESS: STREET, CITY, STATE, ZIP  AUDREY D	(☐ Same As Dr	iver) N SYRA(	SHEE	NY	13212	1- NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
0		ARRIER: NAME, ADDRESS, CITY, STATE, ZIF	· ·	NOTRA		IN I			5 - UNINCOMN	
	LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE							DAMAGED AREA(S) INDICATE ALL THAT APPLY		
	NY	HFN7577	<u>.J.M.3,K.E.4</u>	C Y 4 E 0 4 2 0  INSURANCE POLICY#	7, 7, 9,	2 0 1 4	Mazda	11 12 1	11 12 1	
		URANCE INSURANCE COMPANY PROGRES		INSURANCE POLICY #		VEHICLE COLOR BLK	VEHICLE MODEL CX-5	10 12 1	2 10 12 1	
	☐ COMMERC	TYPE OF USE  CIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED	BY: COMPANY NAME		9 9 3	3 7 3 3	
	INTERLO DEVICE EQUIPPE	☐ HIT/SKIP UNIT	#OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		HAZARDOUS MA MATERIAL RELEASED PLACARD	ATERIAL  CLASS# PLACARD ID#	8 7 6 5	8 7 5 5 4 11 12 1 6 5	
Ē	O 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	19 - BUS (16 20 - OTHER 21 - HEAVY 22 - ANIMAL	## PASSENGERS) 24 VEHICLE 25 EQUIPMENT 26 WITH RIDER OR 27	- PEDESTRIANISKATER - WHEEL CHAIR (ANY TYPE) - OTHER NON- MOTORIST - BICYCLE - TRAIN - UNKNOWN OR HIT/SKIP	9 s	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
VEHICLE		# OF TRAILING UNITS						10 11 12 1	6 11 12 1	
	WHEN CRASH OCCURED?			0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTO 4 - HIGH 5 - FULL	OMATION H AUTOMATION L AUTOMATION	- UNKNOWN	9 10 2 3 3 4 7 5 5		
	0 1	O 1 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 1 - SPECIAL 5 - BUS-TRANST/COMMUTER 10 - AMBULANCE 1		11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	13 - POLICE 18 - SNOW REMOVAL 14 - PUBLIC UTILITY 19 - TOWING		I - MAIL CARRIER 9 - OTHER JUNKNOWN	7 6 5	12 12 12	
	1011	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS Y	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VANIENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POL 9 - CAF 10 - FL/ 11 - DU	RGO TANK 13 AT BED 14	- CONCRETE MIXER - AUTO TRANSPORTER - GARBAGE/REFUSE - OTHER / UNKNOWN	9 3	3 9 3 3	
		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	10 - DIS	FOR TROUBLE 99 ABLED FROM PRIOR IDENT	- OTHER / UNKNOWN	6	6 6	
	NON-MOTORIST LOCATION AT IMPACT	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	10 - DRI	VEWAY ACCESS IRED USE PATHS OR 99	P-FIRST RESPONDER AT INCIDENT SCENE D-OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	UNDERCARRIAGE [14] - ALL AREAS [15]  IT NOT AT SCENE [16]	
		1 - NON-CONTACT 2 - NON-COLLISION 3 - STDIKING 1 1 0	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	14 - ENT	TERING OR CROSSING	8 - APPROACHING OR LEAVING VEHICLE 9 - STANDING	I	NITIAL POINT OF CONTACT	
	ACTION	3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING 8 STRUCK 9 - OTHER / UNKNOWN	T 3-CHANGING PANES	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	15 - WAI JOG 16 - WO	LKING, RUNNING, 2 GGING, PLAYING	0 - OTHER NON-MOTORIST 1 - STANDING OUTSIDE DISABLED VEHICLE 9 - OTHER / UNKNOWN	0 7 0 - NO DAMAGE 1-12 - REFER T DIAGRAM 13 - TOP		
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM			- LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC TRAFFIC CONTROL	
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE CHANGING	A PARKED POSITION  14 - STOPPED OR PARKED  ILLEGALLY	EQL 19 - LOA	JIPMENT 23 AD SHIFTING/	P - NOT DISCERNABLE  B - OPENING DOOR INTO  ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT	
	0 1	5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	15 - SWERVING TO AVOID 16 - WRONG WAY	VING TO AVOID FALLING/SPILLING 99 - OTHE			2 2-TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
	CONTRIBUTING CIRCUMSTANCES							# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED	
EVENT(S)	SEQUENCE OF	EVENTS		FUENTO				2	2 - INVOLVED - ACTIVE CROSSING  1 3 - INVOLVED - PASSIVE CROSSING	
П	1 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	17 - ANIN 18 - ANIN	MAL - FARM MAL - DEFR	P - WORK ZONE MAINTENANCE EQUIPMENT B - STRUCK BY FALLING,	U	NIT / NON-MOTORIST DIRECTION	
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	20 - MOT TRA	TOR VEHICLE IN NSPORT KED MOTOR VEHICLE	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE I - OTHER MOVABLE	2	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST	
	3			COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT	from 2 to	1 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
	4, , ,	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	43 - CUF 44 - DITC 45 - EMB	CH ANKMENT 51	-WORKZONE MAINTENANCE EQUIPMENT - WALL	UNIT SPEED	DETECTED SPEED	
	5	STRUCTURE  27 - BRIDGE PIER OR ABUTMENT  28 - BRIDGE PARAPET  29 - BRIDGE RAIL  30 - GUARDRAIL FACE	34 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	46 - FEN 47 - MAIL 48 - TREI	CE 52 BOX 53	- BUILDING - TUNNEL - OTHER FIXED OBJECT - OTHER / UNKNOWN	0	1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR	
	6							POSTED SPEED	3 - UNDETERMINED	
HS	1 Y8304 OH1U 1/19 [	FIRST HARMFUL EVENT	_ 1 MG	OST HARMFUL EVENT				0	PAGE OF	

	OH OF SAPE	HIO DEPARTMENT PUBLIC SAFETY UNIT					2,0,2,3,2,	LOCAL REPORT NUMBER
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE	(⊔ Sam		DAMAGE			
	0 2		ES THOMAS					DAMAGE SCALE
OWNER		ESS: STREET, CITY, STATE, ZIP  COFFINBE	(☐ Same As Di	1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN			
	COMMERCIAL CA	ARRIER: NAME, ADDRESS, CITY, STATE, ZIP	)					
								DAMAGED AREA(S)
	LP STATE	LICENSE PLATE # JJT9594		EHICLE IDENTIFICATION #   K D 6 M R 2 8 7	8 4 8 2 0 2	1 Chevrolet	12	INDICATE ALL THAT APPLY
		URANCE INSURANCE COMPANY	′ '	INSURANCE POLICY#	VEHICLE COLOR	VEHICLE MODEL	10 12 2	10 12
	_ VE	TYPE of USE		US DOT#	GRY TOWED BY: COMPANY NAME	Trax	10 2	, <i>-</i>
	☐ COMMER	CIAL GOVERNMENT	IN EMERGENCY RESPONSE	VEHICLE WEIGHT GVWR/GCWR	<b></b>			
	INTERLO	■ HIT/SKIP UNIT	# OCCUPANTS	1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	☐ MATERIAL RELEASED	DUS MATERIAL  CLASS# PLACARD ID#	8 7 6 5	8 7 6 5
	EQUIPPE		0 1	3 - >26K LBS.	PLACARD PLACARD	00 DEDECTRUNIONATED	6	11 12 6
	10131	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE	23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST	<u>~</u>	10 2
	UNIT TYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT  22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	• —	8 11 4
		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	DIVINITY FERIOLE	Siri Siringini	8	7 6 5
VEHICLE		# OF TRAILING UNITS					11 12 1	7 6 11 12 1
		WAS VEHICLE OPERATING IN AUTONO	DMOUS MODE 0	0 - NO AUTOMATION	3 - CONDITIONAL	9 - UNKNOWN	10 1 2	10 1 1 2 2
	2	WHEN CRASH OCCURED?  1 - YES 2 - NO 9 - OTHER / UNKNO	AUTONOMOUS	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION		9 9 3	3 9 9 3
	1 - YES 2 - NO 9 - OTHER/ UNKNOWN MODELEVEL  1 - NONE 6 - BUS - CHARTER/TOUR			11 - FIRE				8 7 5 4
		2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER	12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY	17 - MOWING 18 - SNOW REMOVAL 19 - TOWING	99 - OTHER /UNKNOWN	7 6 5	7 6 5
	SPECIAL 5- BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15-FUNCTION			15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12 1 A
	1011	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE 9 - CARGO TANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	a M a	<b>★ ★</b>
	CARGO BODY	Y - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10 - FLAT BED 11 - DUMP	14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	, ,	3 9 7 3 9 8 3
	1 1 1	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR	99 - OTHER / UNKNOWN	6	$\bigoplus_{ \Theta }$
	VEHICLE DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6 6
	NON-MOTORIST	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	- UNDERCARRIAGE [14]  - ALL AREAS [15]
	LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE-OTHER LOCATION		TRAILS		_	NOT AT SCENE [16]
		1-NON-CONTACT 2-NON-COLLISION 0 2	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	INIT	TIAL POINT OF CONTACT
	3	4 - STRUCK PRE-CRASH	1 3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE 10 - PARKED	SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE	9 9 0 - NO DAMAGE	14 - UNDERCARRIAGE
	ACTION	5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN         11 - SLOWING OR STOPPED           6 - MAKING LEFT TURN         IN TRAFFIC           12 - DRIVERLESS		16 - WORKING	DISABLED VEHICLE 99 - OTHER / UNKNOWN	DIAGRAM	JNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
		9 - OTHER / UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE		13 - TOP	
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE	A PARKED POSITION  14 - STOPPED OR PARKED  ILLEGALLY	18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN
		5 - UNSAFE SPEED 6 - IMPROPER TURN	CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	FALLING/SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
	CONTRIBUTING CIRCUMSTANCES		12 - IMPROPER BACKING				# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
S)								1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING
EVENT(S)	SEQUENCE OF	EVENTS		EVENTS			2	1 3 - INVOLVED - PASSIVE CROSSING
		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		
		3 - IMMERSION 4 - JACKKNIFE	UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	TRAVEL  12 - DOWNHILL RUNAWAY  13 - OTHER NON-COLLISION	18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT	T / NON-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST
	2	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRANSPORT  21 - PARKED MOTOR VEHICLE	ANYTHING SET IN MOTION BY A MOTOR VEHICLE		2 - SOUTH 6 - NORTHWEST
	3,					24 - OTHER MOVABLE OBJECT	FROM 4 TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
		25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	COLLISION WITH FIXED OBJEC  37 - TRAFFIC SIGN POST	T - STRUCK 43 - CURB	50 -WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN
	4, , ,	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED
		STRUCTURE  27 - BRIDGE PIER OR ABUTMENT  28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT	0, ,	1 - STATED/ESTIMATED SPEED
	5, , ,	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	SUPPORT 42 - CULVERT	48 - TREE 49 - FIRE HYDRANT	99 - OTHER / UNKNOWN		2 - CALCULATED / EDR
	6 1 1						POSTED SPEED	3 - UNDETERMINED
							. 0	
HS	1 Y8304 OH1U 1/19	FIRST HARMFUL EVENT	1	OST HARMFUL EVENT				PAGE OF

OHIO DEPARTMENT OF PUBLIC SAFETY	LOCAL REPORT NUMBER									
~	MOTORIST / NO					2	0 2 3 DATE OF BIR	2   3	3   7	
NAME: LAST, FIRST		DATE OF BIRTH AGE GENDER								
R ADDRESS: STREET, CITY, STATE, ZIP	70011					CONTACT PHO	NE - INCLUDE AREA CODE			
S T INJURED INJURED EM	IS AGENCY (NAME)	IN HIDED TAKEN TO MEDI	CAL FACILITY (NAME, CITY)	OH SAFETY EQUI	DMENT		SEATING POSIT	TION AID D	AG USAGE E	EJECTION TRAPPED
N BY	IS AGENCT (NAME)	INJURED TAKEN TO: MEDIT	SAL PACILITY (NAME, CITY)	USED		DOT-COMPLIANT MC HELMET	SEATING POSI	IION AIR B	AG USAGE   E	JECTION TRAPPED
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE (	CHARGED	LOCAL C	OFFENSE DESCRIPTION			CITATI	ION NUMBER	
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECT	TED .	CONDITION	ALCOHOL T	EST		DRUG TES	ST(S)
SELECT UP TO 2		DISTRACTED BY	OTHER PRINC	ARIJUANA	STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4
M UNIT# NAME: LAST, FIRST	T, MIDDLE		OTHER DRUG				DATE OF BIR	ГН ТН	AGE	GENDER
0 0										
R ADDRESS: STREET, CITY, STATE, ZIP S						CONTACT PHO	NE - INCLUDE AREA CODE	1 1	1 1	1 1
Τ	MS AGENCY (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQU USED	PMENT	DOT-COMPLIANT	SEATING POSIT	TION AIR BA	AG USAGE E	JECTION TRAPPED
0 N						MC HELMET				
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE C	HAKGEU	LOCAL O	FFENSE DESCRIPTION			CITATI	ON NUMBER	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT	TED	CONDITION	ALCOHOL TO		0747110	DRUG TES	
		BY	ALCOHOL MA OTHER DRUG	ARIJUANA	STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4
M UNIT # NAME: LAST, FIRST	T, MIDDLE				1		DATE OF BIR	тн	AGE	GENDER
0										<u> </u>
ADDRESS: STREET, CITY, STATE, ZIP S						CONTACT PHO	NE - INCLUDE AREA CODE	1 1	1 1	1 1
T INJURIES INJURED TAKEN BY	MS AGENCY (NAME)	INJURED TAKEN TO: MEDIC	CAL FACILITY (NAME, CITY)	SAFETY EQUII USED	PMENT	DOT-COMPLIANT	SEATING POSIT	TION AIR BA	AG USAGE E	JECTION TRAPPED
O N COL STATE OPERATOR LICE	NSF NIIMRER	OFFENSE O	HARGED	LOCAL	DEFENSE DESCRIPTION	MC HELMET		CITATI	ON NUMBER	
M 0 				CODE	T ENGL DECOME TION					
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECT	TED ARLIJIANA	CONDITION STATUS	ALCOHOL TO	VALUE	STATUS	DRUG TES	RESULT SELECT UP TO 4
s T			ALCOHOL MA OTHER DRUG	ARUUANA		 			L	
INJURIES 1 - FATAL	SEATING POSITION  1 - FRONT - LEFT SIDE	AIR BAG  1 - NOT DEPLOYED	OL C	LASS	OL RESTRICTION  1 - ALCOHOL INTERLOCK		DRIVER DISTR	RACTION	1 - NONE GIVEN	TEST STATUS
2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B		DEVICE 2 - CDL INTRASTATE ONLY		MANUALLY OPERATING		2 - TEST REFUS	
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	3 - DEPLOYED SIDE	3 - CLASS C		3 - CORRECTIVE LENSES 4 - FARM WAIVER		DEVICE (TEXTING, TYPIN		3 - TEST GIVEN, SAMPLE / UN	, CONTAMINATED NUSABLE
5 - NO APPARENT INJURY	(MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE	SIDE 4 - REGULAR CLASS (C 5 - M / C MOPED ONLY	,	5 - EXCEPT CLASS A BUS		DIALING) TALKING ON HANDS-FF	REE	4 - TEST GIVEN,	, RESULTS KNOWN
	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS	4	COMMUNICATION DEVI		5 - TEST GIVEN,	, RESULTS UNKNOWN
INJURED TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)				7 - EXCEPT TRACTOR-TRAI 8 - INTERMEDIATE LICENSE	ILER	COMMUNICATION DEVI			
1 - NOT TRANSPORTED /TREATED AT SCENE	8 - THIRD - MIDDLE				RESTRICTIONS	5 -	OTHER ACTIVITY WITH ELECTRONIC DEVICE	AN		
2 - EMS	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF	EJECTION  1 - NOT EJECTED	OL ENDO	RSEMENT	9 - LEARNER'S PERMIT RESTRICTIONS		PASSENGER		1 - NONE	LCOHOL TEST TYPE
3 - POLICE 9 - OTHER / UNKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER	2 - PARTIALLY EJECTED	M - MOTORCYCLE		10 - LIMITED TO DAYLIGHT ONLY		OTHER DISTRACTION II THE VEHICLE	NSIDE	2 - BLOOD	
	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	3 - TOTALLY EJECTED	P - PASSENGER		11 - LIMITED TO EMPLOYME	ENT 8	OTHER DISTRACTIONS	OUTSIDE	3 - URINE	
SAFETY EQUIPMENT	PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER		12 - LIMITED - OTHER 13 - MECHANICAL DEVICES	9 .	THE VEHICLE OTHER / UNKNOWN		4 - BREATH	
1 - NONE USED	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER		(SPECIAL BRAKES, HAND CONTROLS, OR OTHER	)			5 - OTHER	
2 - SHOULDER BELT ONLY USED	CARGO AREA	1 - NOT TRAPPED	R - THREE-WHEEL MO	TORCYCLE	ADAPTIVE DEVICES)					
3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED	13 - TRAILING UNIT 14 - RIDING ON VEHICLE	2 - EXTRICATED BY	S - SCHOOL BUS		14 - MILITARY VEHICLES OF 15 - MOTOR VEHICLES	NLY			1 - NONE	DRUG TEST TYPE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	EXTERIOR (NON-TRAILING UNIT)	MECHANICAL MEANS	T - DOUBLE & TRIPLE 1		WITHOUT AIR BRAKES				2 - BLOOD	
6 - CHILD RESTRAINT SYSTEM -	15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS	X - TANKER / HAZMAT		16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		CONDITI		3 - URINE	
REAR FACING 7 - BOOSTER SEAT	99 - OTHER / UNKNOWN				18 - OTHER		- APPARENTLY NORMAL - PHYSICAL IMPAIRMEN		4 - OTHER	
8 - HELMET USED							- EMOTIONAL (E.G. DEPR			
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)			GEN	IDER			ANGRY, DISTURBED)			UG TEST RESULT(S)
10 - REFLECTIVE CLOTHING			F - FEMALE				- ILLNESS		1 - AMPHETAMI 2 - BARBITURAT	
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY			M - MALE				- FELL ASLEEP, FAINTED FATIGUED, ETC.	0,	3 - BENZODIAZE	
99 - OTHER / UNKNOWN			U - OTHER/UNKNOWN			6	- UNDER THE INFLUENC		4 - CANNABINO 5 - COCAINE	IDS
							MEDICATIONS / DRUGS / ALCOHOL		6 - OPIATES / O	PIOIDS
							- OTHER / UNKNOWN		7 - OTHER	
									8 - NEGATIVE R	ESULTS

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OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER				
RAPETY - 81	ERVICE - PROTECTION		00.			2   0   2   3   2	3   3   7			
UNIT#	NAME: LAST, FI	RST, MIDDLE	DATE OF BIRT	гн	AGE	GENDER				
						CONTACT PHONE - INCLUDE AREA CO				
ADDRESS: STRE	ET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CO	DE I I	1 1	ı				
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING	POSITION AIR BAG USA	GE EJECTION	TRAPPED	
	TAKEN BY				USED	DOT-COMPLIANT MC HELMET				
UNIT#	NAME: LAST, FI	RST, MIDDLE				DATE OF BIRT	TH	AGE	GENDER	
									J	
ADDRESS: STRE	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DE			
		T		1	1					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	POSITION AIR BAG USA	GE EJECTION	TRAPPED	
								AGE	GENDER	
UNIT#	NAME: LAST, FII	RST, MIDDLE				DATE OF BIRT	I <b>H</b>		J SEMBER	
ADDRESS: STRE	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DE		11	
ADDRESS: STRE										
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING	POSITION AIR BAG USA	GE EJECTION	TRAPPED	
						MC HELMET				
UNIT#	NAME: LAST, FI	RST, MIDDLE				DATE OF BIRT	ГН	AGE	GENDER	
									1	
ADDRESS: STRE	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DE			
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING	POSITION AIR BAG USA	GE EJECTION	TRAPPED	
	TAKEN BY				USED	DOT-COMPLIANT MC HELMET				
	IN LIN	JURIES	1 - NONE USED	SAFETY EQUIPMENT USED	SEATI  1 - FRONT - LEFT SIDE (MOTORCYC	NG POSITION	AIR 1 - NOT DEPLOYED	BAG USAGE		
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY  INJURED TAKEN BY  1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN  GENDER F - FEMALE M - MALE			3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST FORWARD F	BELT ONLY USED  NLY USED  LAP BELT USED  RAINT SYSTEM-  COING  RAINT SYSTEM-  G  EAT  ED  EPADS USED  HEES, ETC.)  E CLOTHING  PEDESTRIAN  NLY  NLY  NLY  NLY  NLY  NLY  NLY  N	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORC' 5 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORC' 8 - THIRD - LEFT SIDE) 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCL (NON-TRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN OTHER CHOL 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIO (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	LE SIDE CAR)  CAB  SED CARGO AREA P WITH CAP)  CARGO AREA	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN  EUJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRAPPED 1 - NOT TRAPPED			
NAME: LAST, FIRST		TONY	,			DATE OF BIRT	2 - EXTRICATED BY MECHAN 3 - FREED BY NON-MECHANI		GENDER M	
	ADDRESS: STREET, CITY, STATE, ZIP 9407 PRATT CLEVELAND OH 44105						A CODE			
NAME: LAST, FIRST	NAME: LAST, FIRST, MIDDLE						H I I I I I	AGE	GENDER	
ADDRESS: STREET	ADDRESS: STREET, CITY, STATE, ZIP						A CODE			
									1 1	
								1	AFNE	
NAME: LAST, FIRST,						DATE OF BIRT	H	AGE	GENDER	
NAME: LAST, FIRST, ADDRESS: STREET	, MIDDLE					DATE OF BIRT		AGE	GENDER	

1P 1/19 [760· 1500]



## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20232337	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 08 D 26 Y 2023		
IN COUNTY OF 18	CRASH LOCATION	65		
	WITH WITNESS TONY PRATT WHO STATED T	HE		
DRIVER OF UNIT 2 WAS A	A YOUNG BLACK FEMALE BETWEEN 90-105			
POUNDS.				
THE WITNESS STATED U	NIT 2 QUICKLY BACKED OUT OF THE DRIVEW	AY		
AND STRUCK UNIT 1 AND	D FLED THE AREA .			
	OFFICER'S SIGNATURE	BADGE NUMBER		
	V	RPT1		