OHIO DEPAR OF PUBLIC S SAPETY SERVICE	TRAFFIC	CRASH	LOCAL REPORT NUMBER *										
☐ PHOTOS TAKEN	OH-2	OH-3	[2]0]2]3]2]3]1]6]										
SECONDARY CRASH		OTHER REI	HIT/SKIP 1 - Solved	NIIMRED OF IINITS	0 1 98 - ANIMAL 99 - UNKNOWN								
COUNTY* LOCA		LOCATION: CITY, VILLAGE	2 - Unsolved  CRASH DA	CRASH SEVERITY									
1 1 8 1 1	1 - CITY *	GARFIELD		<u>  0 8 2 7 2 0 2</u>	4 1- FATAL 2- SERIOUS INJURY								
ROUTE TYPE	ROUTE NUMBER	PREFIX	ROAD TYPE	I ATITITE DECIMA	SUSPECTED 3 - MINOR INJURY								
Госатіон			2-SOUTH 3-EAST 4-WEST 86TH		ST	4 1 1 4 3	SUSPECTED 4 - INJURY POSSIBLE						
ROUTE TYPE	ROUTE NUMBER		2-300 In	RENCE ROAD NAME (ROAD, MILEPOST, HOUSE#)	5 - PROPERTY D  LONGITUDE DECIMAL DEGREES  ONLY								
REFEREN			3-EAST 4-WEST 4743		8 1 6 2								
REFERENCE POI		ID INTERCT	ROLITE TYPE ATE ROUTE (TP)	ROAD TYPE  AL - ALLEY HW - HIGHWAY	RD - ROAD	☐ WITHIN INTERSE	INTERSECTION RELATED						
3 2 - MILE POST 3 - HOUSE #	4 2-SOUTH 3-EAST 4-WEST	US - FEDERAL SR - STATE R	L US ROUTE	AV - AVENUE LA - LANE BL - BOULEVARD MP - MILEPOST	SQ - SQUARE ST - STREET TE - TERRACE	_							
DISTANCE EDOM DECEDENCE	DISTANCE		RED COUNTY ROUTE ED TOWNSHIP	CT - COURT PK - PARKWAY	TL - TRAIL WA - WAY	☐ WITHIN INTERCH	ANGE AREA ROADWAY	NUMBER OF APPROACHES					
	2   2   3 - Yards					ROADWAY DIVIDED							
	OCATION of EIDST HADMEI II			MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE					
0 4 1-ON RG 2-ON SH 3-IN ME	HOULDER 10 - DRIVEWA DIAN ACCESS	Y / ALLEY	1 - NOT COLLISIO	5 - BACKING		1 - NORTH		D FLUSH MEDIAN					
4 - ON RC 5 - ON GC 6 - OUTS	DRE CROSSIN IDE 12 - SHARED	G USE PATHS	VEHICLES IN TRANSPORT 2 - REAR-END	6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION		2 - SOUTH 3 - EAST 4 - WEST	(≥4 FEI	D FLUSH MEDIAN					
7 - ON R/ 8 - OFF R		E OTH	3 - HEAD-ON	9 - OTHER / UNKNOWN			4 - DIVIDE (ANY T	4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN					
	55 OTTER/	DINGIONIN											
☐ WORK ZONE RELATE	ED 1.	WORK ZONE T	YPE	LOCATION OF CRASH IN WORK ZO  1 - BEFORE THE 1ST WORK ZO	NE NE	CONTOUR	CONDITIONS	SURFACE					
WORKERS PRESENT LAW ENFORCEMENT PRESENT	2 -	LANE SHIFT/CROSSOVE WORK ON SHOULDER	ER	WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA	NE	1	_ 1	_ 2					
THESENT	5 -	OR MEDIAN INTERMITTENT OR MOV OTHER	ING WORK	4 - ACTIVITY AREA 5 - TERMINATION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,					
ACTIVE SCHOOL ZON	HE CONDITION			WEATHER		GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER	3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT,	BITUMINOUS, ASPHALT 3 - BRICK/BLOCK					
1 - DAYLIGHT			1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS		/UNKNOWN	OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH	4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER					
3 - DARK - LIG 4 - DARK - RO	HTED ROADWAY ADWAY NOT LIGHTED KNOWN ROADWAY LIGHTING	11	3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL	8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN	Ē		9 - OTHER/UNKNOWN	/UNKNOWN					
9 - OTHER / UI	NKNOWN												
NARRATIVE DRIVER OF	UNIT 1 LEFT T	HE BOAD	\^/^∨   EET \^/⊔	II E				Indicate the north direction with					
								an "N" on the compass diagram.					
	UTH BOUND (												
	E FRONT POR			( Ñ		Ĺ	Ĭ Ĭ						
	NG THE BUSH												
	IE DRIVER OF.					st							
INJURIES AN	ND WAS TRAN	SPORTED	TO METRO H	EATH		86th s		4739					
TO BE TREA	TED AND REL	EASED. · ·				ũ		4743					
					Not To	o Scale							
							, J						
00101105555	TED DATE TIME		L corpus comme	DED DATECTIME	DEPOST TAYER DV								
	TED DATE/TIME 2 3   0 3 5 2	0 8 2 7	DISPATCH DATE/TIME  2 0 2 3   0 3	ARRIVAL DATE/TIME 5 2   0 8 2 7 2 0 2 3			RED DATE/TIME 2 3   0 4 3 9	POLICE AGENCY					
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME *			FICER'S NAME*		MOTORIST					
0, , ,	3,0,	16 17 I		FICER'S BADGE NUMBER*	- F. Cab	CHECKED BY OFFICER'S BADGE	SUPPLEMENT (CORRECTION on ADDITION 10 on sozimus subrest start to core						
1 1 7 1 1 1	1 1 2 1 2 1 1	U   I	II IUI	0   3	I	S 2 1	1 1	1					

	OHIO DEPARTMENT OF PUBLIC SAFETE											LOCAL REPORT NUMBER							
	UNIT# OWNER NAME: LAST, FIRST, MIDDLE ( Same As Driver) OWNER PHONE: INCLUDE AREA CODE ( Same As Driver)													DAMAC					
ı	_0 _1	'	GARRETT K	AYL	A SHANIC			DAMAGE	SCALE										
OWNER	OWNER ADDR	ESS: STREET	, CITY, STATE, ZIP SOUTHVIE	W RI	(☐ Same A	s Driv	rer) BEDFOR	D	ОН	Δ	4146	4 1 - NONE 2 - MINO	E OR DAMAGE	9 - UNKNOWN	3 - FUNCTIONAL D 4 - DISABLING DAM				
U		ARRIER: NAI	IE, ADDRESS, CITY, STATE, ZIP				BEBI GIV		AL CARRIER PHONE: INCL										
												DAMAGED AREA(S)							
	LP STATE		SE PLATE # L9017	Π,	1 (C(3)C(C		ICLE IDENTIFICATION#  A B 3 F N 7 2 8 5	VEHICLE YEAR VEHICLE MAKE 8, 5, 7, 7, 1, 2, 0, 1, 5, Chrysler				INDICATE ALL THAT APPLY							
	INSURANCE COMPANY INSURA						INSURANCE POLICY#	=1212121212121212121						\.		12			
VERIFIED TYPE OF USE			US DOT#			US DOT#	TOWED BY: COMPANY NAME			Other/Unknow	7-	2	7,	~ `	10,000,2				
ı	COMMERCIAL GOVERNMENT			IN EMERGENCY RESPONSE				1	INTERSTATE			°	4		_)°	3 0 3 - 3			
	INTERLOCK  DEVICE HIT/SKIP UNIT			# OCCUPANTS  VEHICLE WEIGHT GWWRIGCWR  1 - ≤10K LBS.			1 - ≤10K LBS.	HAZARDOUS MATERIAL  MATERIAL RELEASED CLASS# PLACARD				8 7 6		/4	8 7 9 5				
ı	EQUIPP				0 1		2 - 10,001 - 26K LBS. 3 - >26K LBS.		PLACARD			6	5	11 12	<b>*</b>	6 5			
ı		2 - PASSE	NGER CAR NGER VAN (MINIVAN)	8 - MOT	7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE			19 - BUS (16+ PASSENGERS) 24 - WHEELCHAI			PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE) OTHER NON- MOTORIST		10	11 10	1 2				
	0 1	4 - PICK U		10 - MOF	- AUTOCYCLE			21 - HEAVY I 22 - ANIMAL	EQUIPMENT WITH RIDER OR	26 - 27 -	BICYCLE TRAIN		9	9 8	3 3				
ı	UNIT TYPE		15 SEATS)					ANIMAL	-DRAWN VEHICLE	99 -	UNKNOWN OR HIT/SKIP		8	7 7 6					
EHICLE	_ 0	# OF TRA	ILING UNITS									11 12	1	7 6	5 11	12			
>							A 10 11 TO 1				INIGIONAL	10 11		2	10	1 2			
	, 2 ,	WHEN CR	CLE OPERATING IN AUTONO ASH OCCURED?		S MODE  0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION			3 - CONDITIONAL 9 - UNKNOWN AUTOMATION 4 - HIGH AUTOMATION			JNKNOWN	9 9	3	3	9	9 3			
	1-1ES 2-NO 9-OTHER/UNKNOWN					VEL	A FIRE		AUTOMATION		ALL ALPRIES	8 7	5	74	~_	7.			
	0 1 1 3-NONE 6-BUS-CHARTER/TOUR 7-BUS-INTERCITY 8-BUS-INTERCITY 8-BUS-INTERCITY 8-BUS-SHUTTLE					11 - FIRE 12 - MILITARY 13 - POLICE	16 - FARM 17 - MOWING 18 - SNOW REMOVAL			MAIL CARRIER OTHER JUNKNOWN	7 6	5		7	6				
	SPECIAL 5 - SCHOOL TRANSPORT 9 - BUS - OTHER 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE					14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	19 - TOW 20 - SAFI	- TOWING - SAFETY SERVICE PATROL					12	12	12				
	0 4 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER					5 - INTERMODAL CONTAINER 8 - POLE CHASSIS 9 - CARGO TANK				CONCRETE MIXER	12		4	<b>1</b>					
	O 1 / NOT APPLICABLE MOTOR VEHICLE 2 - BUS 4 - LOGGING			CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	9 - CAR 10 - FLA 11 - DUN	T BED	NK 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN			J) 3	9 🔑 🕫 3	9	3 9						
	TYPE			F0		T. WOODLOD GLIGH TIDES	9 - MOT	OR TROUBLE	00. (	OTHER / UNKNOWN	o o		Ť	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>⊕</b>				
ı	VEHICLE DEFECTS	2 - HEAD LA 3 - TAIL LAN	TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE  DEFECTIVE  TOTAL TRAINED TO THE STEERING				8 - TRAILER EQUIPMENT	10 - DISABLED FROM PRIOR ACCIDENT						6	6	6			
Ī				6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE	HOULDER/ROADSIDE 10 - DRIVEWAY ACCESS AT INCIDENT SCENE				- NO DAM	AGE [0]		- UNDERCARRIAG	SE [14]						
ı	NON-MOTORIST LOCATION AT	CROSSWALK 4 - MIDDELOCK - MARKED 7 - SHOULD RIST 2 - INTERSECTION -		SIDEWALK 11 - SHARED USE PATHS OR TRAILS  TRAILS  99 - OTHER / UNKNOWN				- TOP [13]											
ı	IMPACT	1 - NON-CO			IGHT AHEAD						18 - APPROACHING OR LEAVING VEHICLE			INITIAL POINT O					
ı	3	2 - NON-CO 3 - STRIKIN	, <u>[0 9</u>		2 - BACKING 8 - ENTERING TRAFFIC LANE 3 - CHANGING LANES 9 - LEXVING TRAFFIC LANE 4 - OVERTAKING/PASSING 10 - PARKED 5 - MAKING RIGHT TURN IN TRAFFIC IN TRAFFIC			ING TRAFFIC LANE         14 - ENTERING OR CROSSING         19 - ST           G FRAFFIC LANE         SPECIFIED LOCATION         20 - O'           ED         15 - WALKING, RUNNING,         21 - ST           ING OR STOPPED         JOGGING, PLAYING         D			- STANDING - OTHER NON-MOTORIST		- NO DAMAG		14 - UNDERCARE				
ı	ACTION	4 - STRUCK 5 - BOTH ST									- STANDING OUTSIDE DISABLED VEHICLE - OTHER / UNKNOWN	1 /	-12 - REFER DIAGRAM	TO UNIT					
ı		& STRUC 9 - OTHER		6 - MAKIN	NG LEFT TURN		12 - DRIVERLESS		HING VEHICLE			1	3 - TOP		99 - UNKNOWN				
														TRAFF					
		1 - NONE 2 - FAILURE 3 - RAN RED			OF CENTER DWING TOO E/ACDA		13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED	A PARKED POSITION 18 - OPERATING DEFECTIVE 22 - NOT DISCERNABLE						1	TRAFFIC CON ROUNDABOUT	TROL 4 - STOP SIGN			
ı	 	4 - RAN STO 5 - UNSAFE	P SIGN SPEED	CHANG	OPER LANE GING OPER PASSING		ILLEGALLY 15 - SWERVING TO AVOID	ILLEGALLY				1 - ONE-W		16 1 <sup>2</sup>	- SIGNAL	5 - YIELD SIGN			
ı	CONTRIBUTING	6 - IMPROPE	R TURN	11 - DROV	VE OFF ROAD OPER BACKING		16 - WRONG WAY	20 - IMPF	ROPER CROSSING		ACTION	# OF THROUGH LANE		3 - FLASHER 6 - NO CONTROL  RAIL GRADE CROSSING					
	CIRCUMSTANCES	3										ON ROAD	.		1 - NOT INVOLVED	COSING			
ENT(S)	SEQUENCE OF	F EVENTS							, 2 ,		. 1 .	2 - INVOLVED - ACT							
Ü			RN/ROLLOVER		PMENT FAILURE		11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF		WAY VEHICLE		WORK ZONE MAINTENANCE				J - INVULVED - PAS	oive urussing			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 - FIRE/EXP 3 - IMMERSI	ON	UNITS	RATION OF OFF ROAD RIGHT		TRAVEL  12 - DOWNHILL RUNAWAY	18 - ANIM	IAL - FARM IAL - DEER IAL - OTHER	23 -	EQUIPMENT STRUCK BY FALLING,			UNIT / NON-MOTO					
	<sup>2</sup> <sub>1</sub> 0 <sub>1</sub> 9 <sub>1</sub>	4 - JACKKNII 5 - CARGO / LOSS OR	EQUIPMENT	9 - RAN C	OFF ROAD LEFT SS MEDIAN		13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOTO TRAN	OR VEHICLE IN ISPORT		SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR					NORTHEAST			
							15 - PEDALCYCLE	21 - PAR	KED MOTOR VEHICLE	24 -	VEHICLE OTHER MOVABLE OBJECT	FROM   1	то	1 2 1		SOUTHEAST			
	<sup>3</sup> 5 2						COLLISION WITH FIXED OBJECT	- STRUCK					-	4-V	-	OTHER / UNKNOWN			
	4 5 4 1	/ CRASH	ATTENUATOR CUSHION	32 - PORT	DRAIL END ABLE BARRIER		37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CURI 44 - DITCI	н	E	WORKZONE MAINTENANCE EQUIPMENT WALL	UNIT SPEE	 :D		DETECTI	ED SPEED			
		26 - BRIDGE STRUCT 27 - BRIDGE			AN CABLE BARRIER AN GUARDRAIL IFR		39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMBA 46 - FENC 47 - MAII I	Œ	52 -	BUILDING TUNNEL	_							
	5	28 - BRIDGE 29 - BRIDGE	PARAPET RAIL	35 - MEDIA BARRI	AN CONCRETE IER		41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT			OTHER FIXED OBJECT OTHER / UNKNOWN	0		3	1 - STATED/ES 2 - CALCULATE	TIMATED SPEED			
	6	30 - GUARDI	AIL FACE	36 - MEDIA	AN OTHER BARRIER							POSTED SP	PEED		3 - UNDETERM				
	°L											F031ED 8P	LLD						
	_ 3	FIRST	IARMFUL EVENT		4	MOS	ST HARMFUL EVENT					2	5						
HS	/8304 OH1U 1/19													PAGE	OF				

OHIO DEPARTMENT OF PUBLIC SAFETY	MOTORIST / NO	LOCAL REPORT NUMBER												
SAPETY - SERVICE - PROTECTION	MOTORIST / NO	2 0 2 3 2 3 1 6												
M UNIT# NAME: LAST,	FIRST, MIDDLE													
N ADDRESS: STREET, CITY, STATE, 2	_		0   4   0   7   2   0   0   0     2   3     M											
1	" (SIDE RD APT 748	DI	EDFORD HTS	OH 4	CONTACT	1	1 1 1							
INJURIES INJURED TAKEN	EMS AGENCY (NAME)		ICAL FACILITY (NAME, CITY)	SAFETY EQUIP	Т		SEATING POS	SITION	AIR BAG USAGE	R BAG USAGE EJECTION TRAPPED				
N 4 BY 2	GHFD	METRO	) HEALTH		0 1	┚	MC HELMET		1	<u>      4                              </u>	4   1   1			
- OL STATE OPERATOR	LICENSE NUMBER	OFFENSE	CHARGED	LOCAL O	FFENSE DESCRIPTI	ON		•		CITATION NUMBE	TION NUMBER			
O OLCLASS ENDORSEMENT		331.3		CONDITION	TO C	ONTR	ROL		2023122	31222				
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY					TYPE	VALUE	US TYPE		ULT SELECT UP TO 4			
			OTHER DRUG	L	1	_1_		• 📖	_1	_1				
M UNIT # NAME: LAST,	FIRST, MIDDLE							DATE OF BI	RTH		AGE	GENDER		
T ADDRESS ASSESSED							$\Box$							
ADDRESS: STREET, CITY, STATE, 2	DP .						CONTACT	PHONE - INCLUDE AREA CODE	!	1 1	ĺ			
INJURIES INJURED	EMS AGENCY (NAME)	INJURED TAKEN TO: MED	ICAL FACILITY (NAME, CITY)	SAFETY EQUIF	PMENT	1		SEATING POS	ITION	AIR BAG USAGE	EJECTION	TRAPPED		
N BY				USED			DOT-COMPLIAN MC HELMET	T						
OL STATE OPERATOR I	LICENSE NUMBER	OFFENSE	CHARGED	LOCAL OF	FENSE DESCRIPTION	ON				CITATION NUMBE	ON NUMBER			
O L L L L L L L L L L L L L L L L L L L	1				_									
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECT	TED ARUUANA	CONDITION	STATUS	ALCOHO TYPE	VALUE	STATU	DRUG TEST(S) ATUS TYPE RESULT SELECT UP TO				
s L L			OTHER DRUG	L		$\Box$					J ∟∟∟			
M UNIT # NAME: LAST,	FIRST, MIDDLE	•		•	•			DATE OF BI	RTH		AGE	GENDER		
T														
R ADDRESS: STREET, CITY, STATE, 2 I S	IP						CONTACT PHONE - INCLUDE AREA CODE							
T INJURIES INJURED TAKEN	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQUIP	MENT	_		SEATING POS	ITION	AIR BAG USAGE	AIR BAG USAGE EJECTION TRAPPED			
N BY				USED	1 1		DOT-COMPLIANT MC HELMET	T	1	ı	ılı.	$\mathbf{J}_{\mathbf{L}}$		
OL STATE OPERATOR I	LICENSE NUMBER	OFFENSE	CHARGED	LOCAL OFFENSE DESCRIPTION CODE					CITATION NUMBE	R	-1			
0 T				CODE										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	DISTRACTED				ALCOHO TYPE	VALUE	DRUG TEST(S)  S TYPE RESULT SELECT UP TO 4					
s T			ALCOHOL M OTHER DRUG	MARUUANA L										
INJURIES	SEATING POSITION	AIR BAG		CLASS	1 - ALCOHOL II	RESTRICTION	(S)	DRIVER DIS	TRACTION		TEST S1	TATUS		
1 - FATAL 2 - SUSPECTED SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED  2 - DEPLOYED FRONT	1 - CLASS A 2 - CLASS B	1 - CLASS A 2 - CLASS B				1 - NOT DISTRACTED 2 - MANUALLY OPERATION	1 - NONE GIVEN 2 - TEST REFUSED					
3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C					ELECTRONIC COMMU DEVICE (TEXTING, TYPE	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE					
4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT		4 - REGULAR CLASS (OHIO = D)				DIALING) 3 - TALKING ON HANDS-	4 - TEST GIVEN, RESULTS KNOWN					
	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	5 - NOT APPLICABLE  9 - DEPLOYMENT UNKNOWN	5 - M / C MOPED ONLY 6 - NO VALID OL	6 - EXCEPT CLASS A				COMMUNICATION DE	VICE	5 - TEST GIVEN, RESULTS UNKNOWN				
INJURED TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAI 8 - INTERMEDIATE LICENSE				4 - TALKING ON HAND-H COMMUNICATION DE	VICE					
1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE				RESTRICTIO	ONS		5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE		ALCOHOL TEST TYPE				
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT	OL ENDORSEMENT  H - HAZMAT  9 - LEARNER'S PER RESTRICTIONS  10 - LIMITED TO DA				6 - PASSENGER 7 - OTHER DISTRACTION	INSIDE	1 - NO	ALCOHOL TEST TYPE  1 - NONE			
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	2 - PARTIALLY EJECTED	M - MOTORCYCLE	M - MOTORCYCLE			NT	THE VEHICLE  8 - OTHER DISTRACTION	IS OUTSIDE		2 - BLOOD			
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED  4 - NOT APPLICABLE	P - PASSENGER N - TANKER	P - PASSENGER 11 - LIMIT 12 - LIMIT N - TANKER 13 - MEG				THE VEHICLE	3-0Ki	3 - URINE 4 - BREATH				
SAFETY EQUIPMENT  1 - NONE USED	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER		CAL DEVICES RAKES, HAND OR OTHER		9 - OTHER / UNKNOWN		5 - OTH					
2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED	CARGO AREA  13 - TRAILING UNIT	TRAPPED  1 - NOT TRAPPED		R - THREE-WHEEL MOTORCYCLE			IV.							
4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS		S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS			LY			1 - NON	DRUG TEST TYPE 1 - NONE			
FORWARD FACING	(NON-TRAILING UNIT) 15 - NON-MOTORIST	3 - FREED BY	X - TANKER / HAZMAT	T - DOUBLE & TRIPLE TRAILERS  X - TANKER / HAZMAT				COND	ITION		2 - BLOOD			
6 - CHILD RESTRAINT SYSTEM - REAR FACING	99 - OTHER / UNKNOWN	NON-MECHANICAL MEANS						CONDITION 1 - APPARENTLY NORMAL			3 - URINE			
7 - BOOSTER SEAT 8 - HELMET USED					18 - OTHER			2 - PHYSICAL IMPAIRME 3 - EMOTIONAL (E.G. DEI		4.011	4 - OTHER			
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)			GEN	GENDER				ANGRY, DISTURBED)	,	4	DRUG TEST RESULT(S)			
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN			F - FEMALE					4 - ILLNESS 5 - FELL ASLEEP, FAINT	ED,	2 - BAR	1 - AMPHETAMINES 2 - BARBITURATES			
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			M - MALE U - OTHER/UNKNOWN	1				FATIGUED, ETC.			IZODIAZEPINES INABINOIDS			
								6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS			CAINE ATES / OPIOIDS			
							/ ALCOHOL 9 - OTHER / UNKNOWN			7 - OTH	HER			
						J-Oillen/U				8 - NEGATIVE RESULTS				

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## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

	<del></del>	REPORTING AGENCY DATE OF CRASH																	
LOCAL REPORT NUMBER 20232316		GARFIELD HEIGHTS M 08 D													Y 202	23			
IN COUNTY OF 18			CRASH LOCATION 3 86TH ST																
The owner of th	ie res	ice a	at 4739 is Carl Nash (216-883-3923). The own											er of the					
residence at 47	43 is	San	drell	Wh	eele	r (21	6-20	0-18	60).	Bot	h we	ere p	rovi	ded 1	the				
number for this	repo	rt. P	hotc	grap	ohs v	vere	take	n of	the o	dama	age 1	to bo	oth re	eside	ence	S			
and attached to	this	repo	rt.																
								С	OFFICER	R'S SIG	NATUR	Œ				BA	ADGE N	IUMBER	₹