

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER \*

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

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

LOCAL INFORMATION

REPORTING AGENCY NAME \*

GARFIELD HEIGHTS

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

HITSKIP  
1 - Solved  
2 - Unsolved

NUMBER OF UNITS  
0 | 2

UNIT IN EDDP  
98 - ANIMAL  
99 - UNKNOWN  
0 | 1

COUNTY \*  
1 | 8

LOCALITY \*  
1

LOCATION: CITY, VILLAGE, TOWNSHIP \*  
GARFIELD HTS

CRASH DATE/TIME \*  
09 | 08 | 20 | 23 | 11 | 32 | 4

CRASH SEVERITY  
5

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

ROUTE TYPE  
ROUTE NUMBER

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

LOCATION ROAD NAME  
McCracken

ROAD TYPE  
R | D

LATITUDE DECIMAL DEGREES  
4 | 1 | . | 4 | 2 | 3 | 2 | 1 | 0

ROUTE TYPE  
ROUTE NUMBER

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

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)  
13600

ROAD TYPE

LONGITUDE DECIMAL DEGREES  
8 | 1 | . | 5 | 8 | 5 | 2 | 4 | 0

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

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

ROADWAY  
 ROADWAY DIVIDED

LOCATION - FIRST DAMAGE EVENT  
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  
2

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

MEDIAN TYPE  
1 - DIVIDED FLUSH MEDIAN (<4 FEET)  
2 - DIVIDED FLUSH MEDIAN (24 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  
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  
2

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

CONTOUR  
2

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

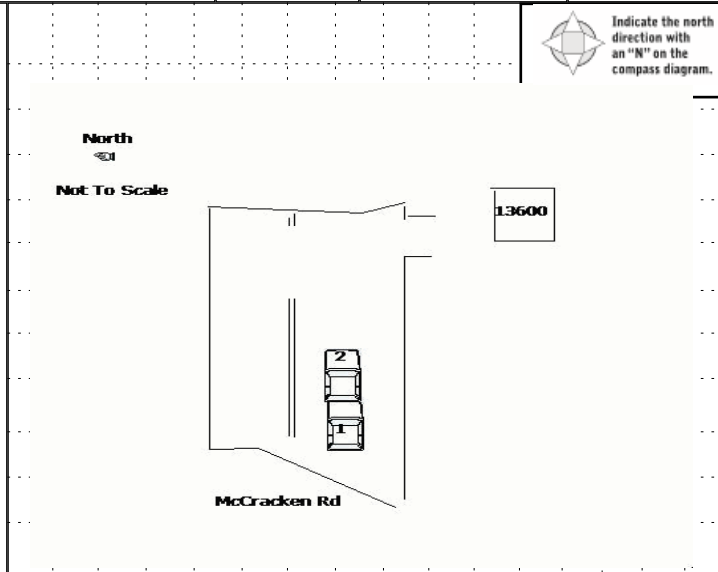
CONDITIONS  
1

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

11/13/2023 11:32 AM  
 UNIT # 1 WAS TRAVELING EAST NEAR 13600 MCCRACKEN RD. DIRECTLY BEHIND UNIT # 2. UNIT # 2 WAS STOPPED FOR TRAFFIC. AS A RESULT, THE FRONT OF UNIT # 1 COLLIDED WITH THE BACK OF UNIT # 2. BOTH UNITS WERE MOVED FROM FINAL REST AND WERE PARKED AT 13700 MCCRACKEN UPON ARRIVAL.  
 NOTE: DRIVER OF UNIT # 1 STATED, I LOOKED AWAY FOR A MINUTE. BWC



CRASH REPORTED DATE/TIME  
09 | 08 | 20 | 23 | 11 | 32 | 4

DISPATCH DATE/TIME  
09 | 08 | 20 | 23 | 11 | 32 | 7

ARRIVAL DATE/TIME  
09 | 08 | 20 | 23 | 11 | 32 | 9

SCENE CLEARED DATE/TIME  
09 | 08 | 20 | 23 | 11 | 35 | 7

REPORT TAKEN BY  
 POLICE AGENCY  
 MOTORIST

TOTAL TIME ROADWAY CLOSED  
0

OTHER INVESTIGATION TIME

TOTAL MINUTES  
2 | 8

OFFICER'S NAME \*  
R. Cramer

OFFICER'S BADGE NUMBER \*  
0 | 3 | 7

CHECKED BY OFFICER'S NAME \*  
M. Berdysz

CHECKED BY OFFICER'S BADGE NUMBER \*  
L | 1 | 4

SUPPLEMENT  
(CORRECTION - ADDITION)

UNIT # 0 1 OWNER NAME: LAST, FIRST, MIDDLE (  Same As Driver ) CROXTON BETTY A  
 OWNER PHONE: INCLUDE AREA CODE (  Same As Driver )  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (  Same As Driver )  
 10200 GRANGER RD APT 407 GARFIELD HTS OH 44125  
 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  
2

LP STATE OH LICENSE PLATE # EDG2728 VEHICLE IDENTIFICATION # 1N1XB1U4E1A1Z3171123 VEHICLE YEAR 2010 VEHICLE MAKE Toyota  
 INSURANCE VERIFIED  INSURANCE COMPANY State Farm INSURANCE POLICY # 2140382sfp35 VEHICLE COLOR WHI VEHICLE MODEL Corolla  
 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 # \_\_\_\_\_  
 PLACARD

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

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

UNIT TYPE: 0 1  
 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 - PEDESTRIAN SKATER 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  
 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 1 3  
 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN  
 PRE-CRASH ACTION: 0 1  
 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

**INITIAL POINT OF CONTACT**  
1 2  
 0 - NO DAMAGE 1:12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 0 8  
 1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN 7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING 13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY 17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER CROSSING 21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION

**TRAFFIC**  
**TRAFFICWAY FLOW**  
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**  
 1 2 0  
 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 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: 2  
**RAIL GRADE CROSSING**  
1  
 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 4 TO 3  
 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN

**UNIT SPEED**  
2 0  
**POSTED SPEED**  
3 5  
**DETECTED SPEED**  
1  
 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

UNIT # 02 OWNER NAME: LAST, FIRST, MIDDLE (  Same As Driver ) MAJOR ERIC BRIAN  
 OWNER PHONE: INCLUDE AREA CODE (  Same As Driver )  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (  Same As Driver )  
 1801 E 12TH ST APT CLEVELAND OH 44114  
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE PA LICENSE PLATE # LRW6127 VEHICLE IDENTIFICATION # 5X1XGM4A7X1D G1719223 VEHICLE YEAR 2013 VEHICLE MAKE Kia  
 INSURANCE VERIFIED  INSURANCE COMPANY Root INSURANCE POLICY # jrmql2 VEHICLE COLOR WHI VEHICLE MODEL Optima  
 TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE  
 INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  # OCCUPANTS 01 US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_  
 HAZARDOUS MATERIAL:  MATERIAL RELEASED CLASS # \_\_\_\_\_ PLACARD ID # \_\_\_\_\_  
 PLACARD

UNIT TYPE: 01 1-PASSENGER CAR 7-MOTORCYCLE 2-WHEELED 12-GOLF CART 18-LIMO (LIVERY VEHICLE) 23-PEDESTRIANSKATER  
 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 16-FARM EQUIPMENT 99-UNKNOWN OR HIT/SKIP

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 3-CONDITIONAL AUTOMATION 9-UNKNOWN  
 2-PARTIAL AUTOMATION 4-HIGH AUTOMATION 5-FULL AUTOMATION

SPECIAL FUNCTION: 01 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: 01 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 7-GRAIN/CHIPS/GRAVEL 9-CARGO TANK 10-FLAT BED 13-AUTO TRANSPORTER  
 14-GARBAGE/REFUSE 99-OTHER / UNKNOWN

VEHICLE DEFECTS: 01 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: 01 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: 4 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-STUCK 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

CONTRIBUTING CIRCUMSTANCES: 01 1-NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A PARKED POSITION 17-VISION OBSTRUCTION 22-LYING IN ROADWAY  
 2-FAILURE TO YIELD 8-FOLLOWING TOO CLOSE/ACDA 14-STOPPED OR PARKED ILLEGALLY 18-OPERATING DEFECTIVE EQUIPMENT 21-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
 3-RAN RED LIGHT 9-IMPROPER LANE CHANGING 15-SWERVING TO AVOID 19-LOAD SHIFTING/ FALLING/SPILLING 99-OTHER IMPROPER ACTION  
 4-RAN STOP SIGN 10-IMPROPER PASSING 11-DROVE OFF ROAD 12-IMPROPER CROSSING  
 5-UNSAFE SPEED 11-DROVE OFF ROAD 12-IMPROPER BACKING  
 6-IMPROPER TURN 12-IMPROPER BACKING

SEQUENCE OF 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 17-ANIMAL - FARM 18-ANIMAL - DEER 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
 3-IMMERSION 8-RAN OFF ROAD RIGHT 12-DOWNHILL RUNAWAY 19-ANIMAL - OTHER 24-OTHER MOVABLE OBJECT  
 4-JACKKNIFE 9-RAN OFF ROAD LEFT 14-PEDESTRIAN 20-MOTOR VEHICLE IN TRANSPORT  
 5-CARGO / EQUIPMENT LOSS OR SHIFT 10-CROSS MEDIAN 15-PEDALCYCLE 21-PARKED MOTOR VEHICLE  
 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  
 1 \_\_\_\_\_ FIRST HARMFUL EVENT 1 \_\_\_\_\_ MOST HARMFUL EVENT

LOCAL REPORT NUMBER: 20232443  
 DAMAGE: 2 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: 06 0-NO DAMAGE 14-UNDERCARRIAGE  
 1-12-REFER TO UNIT DIAGRAM 15-VEHICLE NOT AT SCENE  
 99-UNKNOWN 13-TOP

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

# OF THROUGH LANES ON ROAD: 2  
 RAIL GRADE CROSSING: 1 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: 0  
 POSTED SPEED: 35  
 DETECTED SPEED: 1 1- STATED/ESTIMATED SPEED 2-CALCULATED / EDR 3-UNDETERMINED

# MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER  
2 0 2 3 2 4 4 3

|   |  |                            |   |   |                                   |                         |                           |               |              |           |                                       |
|---|--|----------------------------|---|---|-----------------------------------|-------------------------|---------------------------|---------------|--------------|-----------|---------------------------------------|
| UNIT #<br>0 1   | NAME: LAST, FIRST, MIDDLE<br>CROXTON BETTY A |                            | DATE OF BIRTH<br>0 7 1 8 1 9 4 6                |   | AGE<br>7 7                        | GENDER<br>F             |                           |               |              |           |                                       |
| ADDRESS: STREET, CITY, STATE, ZIP<br>10200 GRANGER RD APT 407 GARFIELD HTS OH 44125 |  |                            |   |   | 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 2  | NAME: LAST, FIRST, MIDDLE<br>MAJOR ERIC BRIAN |                            | DATE OF BIRTH<br>0 2 2 0 1 9 9 5                |   | AGE<br>2 8                        | GENDER<br>M             |                           |               |              |           |                                       |
| ADDRESS: STREET, CITY, STATE, ZIP<br>1801 E 12TH ST APT CLEVELAND OH 44114 |   |                            |   |   | 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>                        |   | 6 - SECOND - RIGHT SIDE  | 6 - NO VALID OL              | 6 - EXCEPT CLASS A & CLASS B BUS   | 6 - PASSENGER  | <b>ALCOHOL TEST TYPE</b>                       |
| 1 - NOT TRANSPORTED / TREATED AT SCENE         | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)         | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)  | H - HAZMAT                   | 7 - EXCEPT TRACTOR-TRAILER   | 7 - OTHER DISTRACTION INSIDE THE VEHICLE   | 1 - NONE                                       |
| 2 - EMS  | 8 - THIRD - MIDDLE                                  | 8 - THIRD - MIDDLE   | M - MOTORCYCLE               | 8 - INTERMEDIATE LICENSE RESTRICTIONS  | 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE   | 2 - BLOOD                                      |
| 3 - POLICE                                     | 9 - THIRD - RIGHT SIDE                              | 9 - THIRD - RIGHT SIDE   | P - PASSENGER                | 9 - LEARNER'S PERMIT RESTRICTIONS  | 9 - OTHER / UNKNOWN  | 3 - URINE                                      |
| 9 - OTHER / UNKNOWN                            | 10 - SLEEPER SECTION OF TRUCK CAB                   | 10 - SLEEPER SECTION OF TRUCK CAB  | N - TANKER                   | 10 - LIMITED TO DAYLIGHT ONLY  |  | 4 - BREATH                                     |
| <b>SAFETY EQUIPMENT</b>                        |   | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | Q - MOTOR SCOOTER            | 11 - LIMITED TO EMPLOYMENT   |  | 5 - OTHER                                      |
| 1 - NONE USED                                  | 12 - PASSENGER IN UNENCLOSED CARGO AREA             | 12 - PASSENGER IN UNENCLOSED CARGO AREA  | R - THREE-WHEEL MOTORCYCLE   | 12 - LIMITED - OTHER   |  | <b>DRUG TEST TYPE</b>                          |
| 2 - SHOULDER BELT ONLY USED                    | 13 - TRAILING UNIT                                  | 13 - TRAILING UNIT   | S - SCHOOL BUS               | 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) |  | 1 - NONE                                       |
| 3 - LAP BELT ONLY USED                         | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)                                    | T - DOUBLE & TRIPLE TRAILERS | 14 - MILITARY VEHICLES ONLY  |  | 2 - BLOOD                                      |
| 4 - SHOULDER & LAP BELT USED                   | 15 - NON-MOTORIST                                   | 15 - NON-MOTORIST  | X - TANKER / HAZMAT          | 15 - MOTOR VEHICLES WITHOUT AIR BRAKES   |  | 3 - URINE                                      |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING    | 99 - OTHER / UNKNOWN                                | 99 - OTHER / UNKNOWN   |                              | 16 - OUTSIDE MIRROR  |  | 4 - OTHER                                      |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING       |   |  |                              | 17 - PROSTHETIC AID  |  | <b>DRUG TEST RESULT(S)</b>                     |
| 7 - BOOSTER SEAT                               |   |  |                              | 18 - OTHER   |  | 1 - AMPHETAMINES                               |
| 8 - HELMET USED                                |   |  |                              |  |  | 2 - BARBITURATES                               |
| 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) |   |  |                              |  |  | 3 - BENZODIAZEPINES                            |
| 10 - REFLECTIVE CLOTHING                       |   |  |                              |  |  | 4 - CANNABINOIDS                               |
| 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY      |   |  |                              |  |  | 5 - COCAINE                                    |
| 99 - OTHER / UNKNOWN                           |   |  |                              |  |  | 6 - OPIATES / OPIOIDS                          |
|  |   |  |                              |  |  | 7 - OTHER                                      |
|  |   |  |                              |  |  | 8 - NEGATIVE RESULTS                           |