OFF DEBLIC SAFETY TRAFFIC CRASH REPORT OFF DEBLIC SAFETY TRAFFIC CRASH REPORT OFF DEBLIC SAFETY TRAFFIC CRASH REPORT							LOCAL REPORT NUMBER *						
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION								[2 0 2 3 3 0 1 9					
SECONDARY CRASH		REPORTING AGENCY NAME* O 1 1 8 2 0					HIT/SKIP 1 - Solved 2 - Unsolved	NIIMRED OF LINITS	0 1 1 98 - ANIMAL 99 - UNKNOWN				
COUNTY* LOCALITY	OCATION: CITY, VILLAG		_D HEIG	HTS	<u> </u>	- - 0	2 - Unsolved CRASH DA		CRASH SEVERITY				
1 1 8 1 1	1 - CITY * LOGATION. CITY, NILLAGE, LOWISHIP.							11107202	3 1- FATAL 2- SERIOUS INJURY				
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH	LOCATION	ROAD NAME		ROAD TYPE	I ATITIDE DECIMA	SUSPECTED 3 - MINOR INJURY SUSPECTED				
ГОСАТІС			3 - EAST 4 - WEST	107 Th	107 Th S ₁ T ₁				4 1 . 4 2 7 6 4 7				
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST		NCE ROAD NAME (ROAD, MILEPOST,	HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL		5 - PROPERTY DAMAGE ONLY			
REFER			4 - WEST	4882				8 1 1 6 1					
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST	DIRECTION DECEDENCE 1 - NORTH	IR - INTERS					D - ROAD	☐ WITHIN INTERSE	INTERSECTION RELATE CTION OR ON APPROACH	0			
3 - HOUSE#	2 - SOUTH 3 - EAST 4 - WEST	SR - STATE	AL US ROUTE ROUTE RED COUNTY ROU	TE	BL - BOULEVARD MP CR - CIRCLE OV	- MILEPOST S - OVAL T	SQ - SQUARE ST - STREET 'E - TERRACE 'L - TRAIL	☐ WITHIN INTERCH	NUMBER OF APPROACHES				
DISTANCE EDOM DECEDENCE	DISTANCE		RED TOWNSHIP		DR - DRIVE PI -		VA - WAY		ROADWAY				
	2 - Feet 3 - Yards							☐ ROADWAY DIVID	ED				
4 011 0010	PATION OF EIDST HADMEIII I		Τ		MANNER OF CRASH COLLISI			DIRECTION OF TRAVEL		MEDIAN TYPE			
3 - IN MEDIAI 4 - ON ROAD	N ACCESS OSIDE 11 - RAILWAY (GRADE	_ 1_	1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN	4 - REAR-TO-F 5 - BACKING 6 - ANGLE	EAR		1 - NORTH 2 - SOUTH	(<4 Fi	ED FLUSH MEDIAN EET) ED FLUSH MEDIAN			
5 - ON GORE 6 - OUTSIDE TRAFFICV	12 - SHARED U WAY OR TRAILS	SE PATHS		TRANSPORT 2 - REAR-END	1 OIDEOTTII E	, SAME DIRECTION , OPPOSITE DIRECTION		3 - EAST 4 - WEST	(≥4 F 3 - DIVIE				
7 - ON RAMP 8 - OFF RAM		TH		3 - HEAD-ON	9-OTHER/O	ANIOWN			(ANY	TYPE) R / UNKNOWN			
WORK ZONE RELATED WORKERS PRESENT		WORK ZONE ANE CLOSURE ANE SHIFT/CROSSO			1 - BEFORI	CRASH IN WORK ZON E THE 1ST WORK ZON NG SIGN		CONTOUR	CONDITIONS	SURFACE			
LAW ENFORCEMENT PRESENT	3-1	WORK ON SHOULDER OR MEDIAN				CE WARNING AREA TION AREA		2	_1_	2			
4 - INTERMITTENT OR MOVING WORK 5 - TERMINATION AREA 5 - OTHER 5 - OTHER							1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL	1 - DRY 2 - WET 3 - SNOW 4 - ICF	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT				
	CONDITION				WEATHER			4 - CURVE GRADE 9 - OTHER /UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE			
1 - DAYLIGHT 1 - CLEAR 6 - SNOW 2 - DAWNIDUSK 2 - CLOUDY 7 - SEVERE CROSSWINDS 3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW							MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	5 - DIRT 9 - OTHER /UNKNOWN					
4 - DARK - RODOWN NOT LIGHTED 5 - DARK - NONOWN RODOWNY LIGHTING 9 - OTHER / LINKNOWN 9 - OTHER / LINKNOWN 9 - OTHER / LINKNOWN 9 - OTHER / LINKNOWN 9 - OTHER / LINKNOWN													
NARRATI\/F							: :			Indicate the north			
UNIT#1WAS	UNIT # 1 WAS PARKED FACING WEST IN THE									direction with			
DRIVEWAY OF	F 4885 E 107	TH ST. TI	HE DRIV	ER EXI	ΓED			1 1 1					
VEHICLE AND	IT STARTED	TO ROLI	AS TH	IE UNIT	# 1	N	lorth	Drive	7				
TRAVELED IN	.A.WESTBOU	ND DIRE	CTION.1	THE OW	NER/	Not	ত্থা To Scale	484	35				
PRIOR OPERA	ATOR HUNG.	HT.O.TMC	E.DRIVI	ERS DO	OR			_					
THE INDIVIDUAL WAS DRAGGED ACROSS E 107 TH ST													
AND INTO THE	AND INTO THE DRIVEWAY OF 4882 E 107 TH-ST. UNIT #												
1 CONTINUED IN A WESTWARD DIRECTION WHILE THE													
RIGHT FRONT OF UNIT # 1 COLLIDED WITH THE													
GARAGE: UNI	GARAGE: UNIT # 1 LEFT THE SCENE:												
NOTE: SEE O				ORMAT	ION								
									<u> </u>				
CRASH REPORTED		1111017	DISPATCH DATI	E/TIME 3 1 1 5		ARRIVAL DATE/TIME	111210111	SCENE CLEAR 1 1 0 7 2 0 2	P.3. 11.3.0.1.	REPORT TAKEN BY POLICE AGENCY			
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S	NAME *			CHECKED BY OF	FICER'S NAME*	-,-, ,1,0,0,1,	MOTORIST			
			R. Cr		CER'S BADGE NUMBER*		R. Dodge	CHECKED BY OFFICER'S BADGE	NUMBER*	SUPPLEMENT (CORRECTION on ADDITION 10 on EXCERTION STATE OFFICE 1007			
$\begin{bmatrix} 0 \\ \end{bmatrix}$ $\begin{bmatrix} 5 \\ 0 \end{bmatrix}$ $\begin{bmatrix} 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 3 \end{bmatrix}$ $\begin{bmatrix} 7 \\ 1 \end{bmatrix}$					$\lfloor S_{\perp} 2_{\perp} 2_{\perp} \perp \rfloor$								

OF PUBLIC SAFETY MARETY - MERVICE - PROTECTION	LOCAL REPORT NUMBER				
UNIT# OWNER NAME: LAST, FIRST, MIDDLE O 1 1 MURRAY WILLIAM	(Same As Driver)	Same As Driver)		DAMAGE DAMAGE SCALE	
	Same As Driver)		1-NONE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE	
8 14621 PEASE RD COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP	MAPLE HEI	4137		4 - DISABLING DAWAGE. UNKNOWN	
COMMERCIAL CARRIER: NAME, ADDRESS, CITT, STATE, ZIP			DAMAGED AREA(S)		
LP STATE LICENSE PLATE #	VEHICLE IDENTIFICATION#		DICATE ALL THAT APPLY		
INSURANCE INSURANCE COMPANY	F ₁ T ₁ Y ₁ R ₁ 1 ₁ 0 ₁ D ₁ 7 ₁ 7 ₁ P ₁ A ₁ 4 ₁ 8 ₁ 6 ₁ 8 INSURANCE POLICY#	3 0 2 0 0 7 VEHICLE COLOR	Ford VEHICLE MODEL	11 12 1	11 12 1
VERIFIED Progressive	948958559	RED OWED BY: COMPANY NAME	Ranger	10 11 2	10 11 1
□ □ □ □ □ INEN	MERGENCY PONSE L L L L L L L L L L L L L L L L L L L	OWED BY: COMPANY NAME		9 - 3	9 9 3 4 -3
INTERLOCK DEVICE HIT/SKID LIMIT	CCUPANTS 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATE MATERIAL RELEASED PLACARD	ERIAL CLASS# PLACARD ID#	8 7 6 5	7 9 5 4
2 - PASSENGER VAN (MINIVAN) 3 - MOTORCY 3 - SPORT UTILITY VEHICLE 4 - PICKU IP 5 - CARGO VAN 6 - VAN (9-15 SEATS) 11 - ALL TERR (ATV / UTV.	12 - GOLF CART	LIMO (LIVERY VEHICLE) 23 - P BIUS (16+ PASSENGERS) 24 - W OTHER VEHICLE 25 - C HEAVY EQUIPMENT 26 - B ANIMAL WITH RIDER OR 27 - T	PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE) JTHER NON- MOTORIST SICYCLE RAIN JNKNOWN OR HIT/SKIP	10 9 8 7	11 12 1 10 10 2 9 5 3 8 4 4 7 5 5 4
# OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL 9 - UI AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	NKNOWN	10 11 12 1 9 9 3 3 8 7 7 5 4	10 11 12 1 2 9 9 3 8 4 4 7 5 4 4
1 NONE 6 - BUS - CHARL 7 - BUS - NTEE 1 NONE 7 - BUS - NTEE 7	SHUTTLE 13 - POLICE 18 - SNOW REMOVAL OTHER 14 - PUBLIC UTILITY 19 - TOWING		MAIL CARRIER OTHER JUNKNOWN	6 5	12 12 12
O 1 1 NO CARGO BODY TYPE 3 - VEHICLE TO MOTOR VEH CARGO BODY TYPE 4 - LOGGING 1 TYPE 4 - LOGGING 1 - TURN SIGNALS 4 - BRAKES	HICLE CHASSIS 6 - CARGO VANENCLOSED BOX 7 - GRAINICHIPSIGRAVEL	CHASSIS 9 - CARGO TANK 13 - AUTO TRANSPORTER 6 - CARGO VANIENCLOSED BOX 10 - FLAT BED 14 - GARBAGE/REFUSE		9 6 3 9	3 9 3 3 9
VEHICLE 2 - HEAD LAMPS 5 - STEERING DEFECTS 5 - TIRE BLOWG	8 - TRAILER EQUIPMENT 1 OUT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6
1 - INTERSECTION - 3 - INTERSECTION MARKED	MARKED 7 - SHOULDER/ROADSIDE 1	10 - DRIVEWAY ACCESS A	FIRST RESPONDER AT INCIDENT SCENE DTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13] - UNIT NO	UNDERCARRIAGE [14] - ALL AREAS [15] DT AT SCENE [16]
ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING 8 STRUCK 9 - OTHER / LINKNOWN 1 - STRUCK 9 - OTHER / LINKNOWN 1 - STRUCK 1 - STRUCK 2 - BACKING 2 - BACKING 3 - CHANGING ILE 6 - MAKING EE	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING 19 - SPECIFIED LOCATION 20 - 15 - WALKING, RUNNING, 21 - JOGGING, PLAYING	APPROACHING OR LEAVING VEHICLE STANDING OTHER NOWMOTORIST STANDING OUTSIDE SIGNALE OVEHICLE OTHER / UNKNOWN	O 1 0 - NO DAMAGE 1.12 - REFER TO UNIDIAGRAM 13 - TOP	AL POINT OF CONTACT 14 - UNDERCARRIAGE IT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
2 - FAILURE TO YIELD 8 - FOLLOWING 3 - RAN RED LIGHT CLOSE/ACDA 4 - RAN STOP SIGN G-MAROPER 1 5 - UNSAFE SPEED 10 - IMPROPER I 6 - IMPROPER TURN 11 - DROVE OFF	JRE TO YIELD 8 - FOLLOWING TOO A PARKED POSITION RED LIGHT CLOSE/RACDA 14 - STOPPED OR PARKED STOP SIGN 9 - IMPROPER LANE ILLEGALLY CHANGING 15 - SWERVING TO AVOID ME SPEED 10 - IMPROPER PASSING		LYING IN ROADWAY NOT DISCERNABLE PERING DOOR INTO ROADWAY JOTHER IMPROPER ACTION	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY # OF THROUGH LANES ON ROAD	TRAFFIC TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING 1 - NOT INVOLVED
SEQUENCE OF EVENTS	EVENTS			2	2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING
1 OVERTURNIROLLOVER 1 2 0 3 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKONIFE 5 - CARGO / EQUIPMENT 2 1 3 CS OR SHIFT 6 - EQUIPMENT 9 - RAN OFF RC 10 - CROSS MED	T FAILURE 11 - CROSS CENTERLINE - 1 N OF OPPOSITE DIRECTION OF 1 TRAVEL 1 1 OAD RIGHT 12 - DOWNHILL RUNAWAY 1 OAD LEFT 13 - OTHER RON-COLLISION 2 DIMN 14 - PEDESTRIAN	17 - ANIMAL - FARM M	NORK ZONE ANNTENANCE CQUIPMENT STRUCK BY FALLING, SHIFTING CARGO OR NOYTHING SET IN NOTION BY A MOTOR CHICLE THER MOVABLE DBJECT	0	NON-MOTORIST DIRECTION
3 5 2	COLLISION WITH FIXED OBJECT - STR				9 - OTHER / UNKNOWN
25 - IMPACT ATTENUATOR 31 - GUARDRAIL	BARRIER 38 - OVERHEAD SIGN POST 4- BLE BARRIER 39 - LIGHTI/LIMINARIES SUPPORT 48 HARDAIL 40 - UTILLITY POLE 44 HARDAIL 41 - OTHER POST, POLE OR 45 MCRETE SUPPORT 44 42 - CULVERT 44 45	4 - DITCH EC 5 - EMBANKMENT 51 - VI 6 - FENCE 52 - B 77 - MAILBOX 53 - T 8 - TDEE 54 - O	ORKZONE MAINTENANCE DUIPMENT VALL UILLDING UNNEL THER FIXED OBJECT THER / UNKNOWN	UNIT SPEED	DETECTED SPEED 3 1-STATEDIESTIMATED SPEED 2-CALCULATED / EDR 3-UNDETERMINED
6	3 MOST HARMFUL EVENT			POSTED SPEED	3 - UNDE FERMINED PAGE OF

OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER						
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	MOTORIST / NO	JN-WIOTORI	3 1				_ 2	0 2 3	3	0 1 9	<u> </u>	
M UNIT # NAME: LAST, FIRST	T, MIDDLE						1					GENDER
MURF	RAY	WILLIAM	D				10 18	3 0 3 1	9	6 0	6 3	L M
R ADDRESS: STREET, CITY, STATE, ZIP I DFASE	DD		A D. E LIEI OLITO	011	44407		CONTACT	PHONE - INCLUDE AREA CODI				
14021 1 LAGE	IS AGENCY (NAME)		APLE HEIGHTS CAL FACILITY (NAME, CITY)	SAFETY EQ				SEATING POS	SITION	AIR BAG USAGE	EJECTION	N TRAPPED
3 9				USED	9 9	1 -	DOT-COMPLIAN MC HELMET		1	1	_ _1	_ 1
- OL STATE OPERATOR LICE	INSE NUMBER	OFFENSE (CHARGED	LOCAL CODE	OFFENSE DESCRIP	TION				CITATION NUMBI	-R	
0 T		331.3	34a		Fail to co	ontrol				G20231	418	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECT		CONDITION	STATUS	ALCOH TYPE	OL TEST VALUE	STAT		RUG TEST(S) RESU	JLT SELECT UP TO 4
s 4 L L		8	ALCOHOL M	IARIJUANA	9	_1_	_1_		_1_	11		
M UNIT # NAME: LAST, FIRS	T, MIDDLE		1					DATE OF BI	RTH	<u> </u>	AGE	GENDER
0										l		
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CODE		,		
S T INJURIES INJURED EI	MS AGENCY (NAME)		CAL FACILITY (NAME, CITY)	SAFETY EQ	IIPMENT	_		SEATING POS	ITION	AIR BAG USAGE	EJECTION	TRAPPED
/ INJURIES INJURED TAKEN BY	WS AGENCT (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	USED	1 1		DOT-COMPLIAN		I	AIN BAG USAGE	EJECTION	INAFFED
OL STATE OPERATOR LICE	INSE NUMBER	OFFENSE C	CHARGED		OFFENSE DESCRIPT	TION				CITATION NUMBE	<u> </u>	
M O				CODE								
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT	TED	CONDITION		ALCOHO				RUG TEST(S)	
	1 11 1 11 1	BY	ALCOHOL MA	ARIJUANA I		STATUS	TYPE	VALUE	STATU	JS TYPE	RESU	LT SELECT UP TO 4
S T UNIT# NAME: LAST, FIRST	r. MIDDLE		OTHER DROG					DATE OF BI	RTH		AGE AGE	GENDER
O T								1 1 1	1 1	_ , _ ,		
O ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CODE				
S T												
I INJURIES INJURED TAKEN BY	MS AGENCY (NAME)	INJURED TAKEN TO: MEDIC	CAL FACILITY (NAME, CITY)	SAFETY EQU USED	IPMENT		DOT-COMPLIAN	SEATING POS	ITION	AIR BAG USAGE	EJECTION	TRAPPED
0 N							MC HELMET			L		
OL STATE OPERATOR LICE	NSE NUMBER	OFFENSE C	CHARGED	CODE	OFFENSE DESCRIP	TION				CITATION NUMBE	R	
T O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECT	TED	CONDITION		ALCOHO	DL TEST		D	RUG TEST(S)	
R SELECT UP TO 2		DISTRACTED BY		ARIJUANA		STATUS	TYPE	VALUE	STATI			JLT SELECT UP TO 4
S L L L L			OTHER DRUG	L				•				
INJURIES 1 - FATAL	SEATING POSITION 1 - FRONT - LEFT SIDE	AIR BAG 1 - NOT DEPLOYED	1 - CLASS A	CLASS	1 - ALCOHOL	RESTRICTION INTERLOCK	N(S)	DRIVER DIS	TRACTION	1 - NON	TEST ST NE GIVEN	TATUS
2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B		DEVICE 2 - CDL INTRA	ASTATE ONLY		2 - MANUALLY OPERATIF		2 - TES	T REFUSED	
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	3 - DEPLOYED SIDE	3 - CLASS C		3 - CORRECT 4 - FARM WAI			DEVICE (TEXTING, TYP			T GIVEN, CONTAN	
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 C	LASS A BUS		DIALING) 3 - TALKING ON HANDS-	FREE	4 - TES	T GIVEN, RESULT	'S KNOWN
	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL		6 - EXCEPT C & CLASS B			COMMUNICATION DE 4 - TALKING ON HAND-H		5 - TES	T GIVEN, RESULT	'S UNKNOWN
INJURED TAKEN BY 1 - NOT TRANSPORTED	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)				7 - EXCEPT TO 8 - INTERMED	RACTOR-TRA		COMMUNICATION DE	VICE			
/TREATED AT SCENE 2 - EMS	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE				RESTRICT 9 - LEARNER'			5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE				
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	OL ENDO	DRSEMENT	RESTRICT	TIONS		6 - PASSENGER 7 - OTHER DISTRACTION	INSIDE	1 - NOI	ALCOHOL T	TEST TYPE
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER	2 - PARTIALLY EJECTED	M - MOTORCYCLE		ONLY	TO DAYLIGHT		THE VEHICLE		2 - BLC	OOD	
	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	3 - TOTALLY EJECTED	P - PASSENGER		11 - LIMITED 1 12 - LIMITED -	TO EMPLOYM OTHER	ENT	8 - OTHER DISTRACTION THE VEHICLE	IS OUTSIDE	3 - UKI		
SAFETY EQUIPMENT	PICK-UP WITH CAP) 12 - PASSENGER IN	4 - NOT APPLICABLE	N - TANKER Q - MOTOR SCOOTER			ICAL DEVICES BRAKES, HAND		9 - OTHER / UNKNOWN		4 - BRE 5 - OTI		
1 - NONE USED 2 - SHOULDER BELT ONLY USED	UNENCLOSED CARGO AREA	TRAPPED	R - THREE-WHEEL MO			S, OR OTHER						
3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED	13 - TRAILING UNIT 14 - RIDING ON VEHICLE	1 - NOT TRAPPED	S - SCHOOL BUS		14 - MILITARY	VEHICLES O	NLY				DRUG TE	ST TYPE
5 - CHILD RESTRAINT SYSTEM -	EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS	T - DOUBLE & TRIPLE		15 - MOTOR \ WITHOUT	AIR BRAKES				1 - NON 2 - BLO		
FORWARD FACING 6 - CHILD RESTRAINT SYSTEM -	15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS	X - TANKER / HAZMAT		16 - OUTSIDE 17 - PROSTHE			COND		3 - URI		
REAR FACING 7 - BOOSTER SEAT	99 - OTHER / UNKNOWN	NOT WEST PATISAL MEANS			18 - OTHER			1 - APPARENTLY NORM 2 - PHYSICAL IMPAIRME		4 - OTH		
8 - HELMET USED								3 - EMOTIONAL (E.G. DE				
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)				IDER				ANGRY, DISTURBED) 4 - ILLNESS		1 - 6145	DRUG TEST	RESULT(S)
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN			F - FEMALE					4 - ILLNESS 5 - FELL ASLEEP, FAINT	ED,	2 - BAF	RBITURATES	
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			M - MALE U - OTHER/UNKNOWN					FATIGUED, ETC.			NZODIAZEPINES NNABINOIDS	
J. J			U - OTHER/UNANOWN					6 - UNDER THE INFLUEN MEDICATIONS / DRUG		5 - CO	CAINE	
								/ALCOHOL		6 - OPL 7 - OTH	ATES / OPIOIDS HER	
								9 - OTHER / UNKNOWN			GATIVE RESULTS	

HSY8306 OH1M 1/19 [760-1500] PAGE OF

Î	OHIO DEPARTMENT OF CUPANT / WITNESS ADDENDUM					LOCAL REPORT NUMBER						
	SAPETY - SI	SERVICE - PROTECTION	000017111171111		(DDLI(DOM		2 0 2 3 3	0 1 9	1 1		1 1 1	
	UNIT #	NAME: LAST, FII	DET MIDDLE				DATE OF BIR	TU .		AGE	GENDER	
		TVAILE. EAST, TH	(C), MIDDLE	I I I I I	 		1 1					
ANT	ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DE				
OCCUPANT		, , , ,					l, , , , ,	1 1	1 1	1	1 1	
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING	POSITION AIR B	AG USAGE	EJECTION	TRAPPED	
		L				USED	MC HELMET					
	UNIT#	NAME: LAST, FII	RST, MIDDLE			•	DATE OF BIR	гн		AGE	GENDER	
								1 1 1	_		J L	
UPANT	ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
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	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	POSITION AIR B	AG USAGE	EJECTION	TRAPPED	
							MC HELMET		<u></u>		Ļ	
	UNIT#	NAME: LAST, FII	RST, MIDDLE				DATE OF BIR	ГН		AGE	GENDER	
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CUPANT	ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DE				
8	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING	DOCUTION AID D	AG USAGE	EJECTION	TRAPPED	
	INJURIES	TAKEN BY	EWS AGENCT (NAME)		INJURED TAKEN TO: MEDICAL PACILITY (NAME, CITY)	USED	DOT-COMPLIANT MC HELMET	POSITION AIR B	AG USAGE		I IIII E	
H	1007.4						DATE OF DID	<u> </u>		AGE	GENDER	
	UNIT#	NAME: LAST, FII	RST, MIDDLE				DATE OF BIR	iH		7.02	GENDER	
N	ADDDESS: expr	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
CCUPANT	ADDRESS. SIRE	EET, CITT, STATE, ZIP										
0	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING	POSITION AIR B	AG USAGE	EJECTION	TRAPPED	
	1	TAKEN BY				USED	DOT-COMPLIANT MC HELMET	, ,	1 1	l	l, ,	
Ħ		IN.	JURIES		SAFETY EQUIPMENT USED	SEAT	ING POSITION		AIR BAG I	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			3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST FORWARD F	BELT ONLY USED NLY USED & LAP BELT USED RAINT SYSTEM- ACING RAINT SYSTEM- G EAT ED E PADS USED HEES, ETC.) /*CE CLOTHING PEDESTRIAN NLY	2 - FRONT - MIDDLE 3 - FRONT - RICHT SIDE 4 - SECOND - LEFT SIDE (MOTORC 5 - SECOND - RIGHT SIDE 7 - THIRD - MIDDLE 7 - THIRD - MIDDLE 10 - SLEEPER SECTION OF TRUCH 11 - PASSENGER IN OTHER ENCL 12 - PASSENGER IN UNENCLOSE 13 - TRAILING UNIT; BUS, PICK- 12 - PASSENGER IN UNENCLOSE 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIO (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE					
	F - FEMALE M - MALE U - OTHER/UNKN	IOWN	ENDER					1 - NOT TRAPPED 2 - EXTRICATED BY I 3 - FREED BY NON-M	MECHANICAL M	MEANS IEANS		
ESS	YOUNG		JOHN	I	Н		1 0 3 0 1		4 8		GENDER M	
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP 11911 DARLINGTON AVE Up Fro GARFIELD HTS OH 44125					CONTACT PHONE - INCLUDE AREA CODE						
	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER						
	NAME: LAST, FIRST	r, middle					DATE OF BIRT	"	AGI		OL.IDE.	
ITNESS									I L L		<u> </u>	
WITNESS	NAME: LAST, FIRST						CONTACT PHONE - INCLUDE ARE		AGE			
WITNESS		T, CITY, STATE, ZIP						A CODE	AGE		GENDER	
TIM	ADDRESS: STREET	T, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE ARE	A CODE	1 1			
WITNESS	ADDRESS: STREET	T, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE ARE	A CODE	1 1			

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OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20233019	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 11 D 07 Y 2023
IN COUNTY OF 18	CRASH LOCATION 3 107 Th ST	
The witness stated, the driv	rer of Unit # 1 attempted to take disputed propert	y while
being intoxicated. The drive	er exited the truck and it started to roll. The male	later
identified as Bill Murray, wa	s dragged hanging onto the drivers door. The ve	ehicle
traveled across the street ,	up the driveway, and into the garage. Murray the	en left the
scene.		
Owner of the property at 48	82 E 107 Th St was unknown at time of report. E	Business
card left at residence.		
Garfield Hts officers (Hace /	R Cramer) made contact with Bill Murray at his	registered
	ed his Miranda Rights and made a statement wh	
	c beverage about his person. Murray had a disp	
	o beverage about the person. Warray had a disp	
construction equipment and	d went to leave with it in the truck bed. While leav	ring it was
taken from the truck and he	step out of the truck. Murray grabbed the door a	as the truck
started to move. While han	ging onto the door it dragged him across the stre	eet (scrap
ped right knee). He left the	scene because he was scared. BWC for both of	ficers.
	OFFICER'S SIGNATURE	BADGE NUMBER 037