

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

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

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 | 2

COUNTY *
 1 | 8

LOCALITY *
 1

LOCATION: CITY, VILLAGE, TOWNSHIP *
GARFIELD HTS

CRASH DATE/TIME *
 1 | 1 | 0 | 9 | 2 | 0 | 2 | 3 | 1 | 5 | 2 | 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
E 135

ROAD TYPE
 S | T

ATTITUDE (NORMAL DEGREE)
 4 | 1 | 4 | 0 | 3 | 2 | 3 | 5

LONGITUDE DECIMAL DEGREES
 8 | 1 | 5 | 8 | 9 | 0 | 7 | 4

ROUTE TYPE
 ROUTE NUMBER

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

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)
5929

ROAD TYPE

INTERSECTION RELATED
 WITHIN INTERSECTION OR ON APPROACH
 WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES

ROADWAY
 ROADWAY DIVIDED

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

ROADWAY
 ROADWAY DIVIDED

DISTANCE
 1 - Miles
 2 - Feet
 3 - Yards

DISTANCE
 1 - Miles
 2 - Feet
 3 - Yards

LOCATION - FIRST AND SECOND EVENT
 0 | 1

1 - ON ROADWAY
 2 - ON SHOULDER
 3 - IN MEDIAN
 4 - ON ROADSIDE
 5 - ON GORE
 6 - OUTSIDE TRAFFICWAY
 7 - ON RAMP
 8 - OFF RAMP

9 - CROSSOVER
 10 - DRIVEWAY / ALLEY ACCESS
 11 - RAILWAY GRADE CROSSING
 12 - SHARED USE PATHS OR TRAILS
 13 - BIKE LANE
 14 - TOLL BOOTH
 99 - OTHER / UNKNOWN

MANNER OF CRASH COLLISION/IMPACT
 5

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
 OR MEDIAN
 4 - INTERMITTENT OR MOVING WORK
 5 - OTHER

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

CONTOUR
 1

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

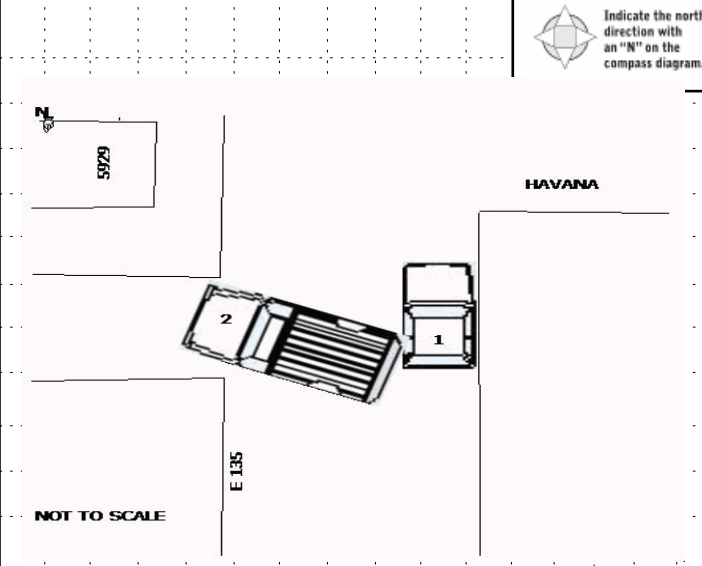
LIGHT CONDITION
 1

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

WEATHER
 1

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

NARRATIVE
 UNIT 1 WAS PARKED S/B ON E 135 AT 5929. UNIT 2 BACKED OUT OF THE DRIVEWAY AT 5929 E 135 AND STRUCK UNIT 1 IN THE DRIVER'S SIDE REAR



CRASH REPORTED DATE/TIME
 1 | 1 | 0 | 9 | 2 | 0 | 2 | 3 | 1 | 5 | 2 | 4

DISPATCH DATE/TIME
 1 | 1 | 0 | 9 | 2 | 0 | 2 | 3 | 1 | 5 | 2 | 6

ARRIVAL DATE/TIME
 1 | 1 | 0 | 9 | 2 | 0 | 2 | 3 | 1 | 5 | 3 | 0

SCENE CLEARED DATE/TIME
 1 | 1 | 0 | 9 | 2 | 0 | 2 | 3 | 1 | 5 | 4 | 5

REPORT TAKEN BY
 POLICE AGENCY
 MOTORIST

TOTAL TIME ROADWAY CLOSED
 0

OTHER INVESTIGATION TIME
 3 | 0

TOTAL MINUTES
 4 | 5

OFFICER'S NAME *
B. Cwiklinski

OFFICER'S BADGE NUMBER*
 0 | 0 | 9

CHECKED BY OFFICER'S NAME*
N. Rossi

CHECKED BY OFFICER'S BADGE NUMBER*
 S | 1 | 3

SUPPLEMENT
 (CORRECTION - ADDITION)

UNIT # 01 OWNER NAME: LAST, FIRST, MIDDLE () Same As Driver
BAKER ERICA JEAN
 OWNER PHONE: INCLUDE AREA CODE () Same As Driver
 OWNER ADDRESS: STREET, CITY, STATE, ZIP () Same As Driver
5929 E 135 ST GARFIELD HTS OH 44125
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE OH LICENSE PLATE # JKX1914 VEHICLE IDENTIFICATION # 1HGCP3F1871A0010528 VEHICLE YEAR 2010 VEHICLE MAKE Honda
 INSURANCE VERIFIED INSURANCE COMPANY PROGRESSIVE INSURANCE POLICY # 988222793 VEHICLE COLOR GRY VEHICLE MODEL Accord
 COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE US DOT # _____ TOWED BY: COMPANY NAME _____
 INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 00 VEHICLE WEIGHT GVWR/GVWR 1- <10K LBS. 2- 10,001 - 26K LBS. 3- >26K LBS. 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- PEDESTRIAN SKATER
 2- PASSENGER VAN (MINIVAN) 8- MOTORCYCLE 3-WHEELED 13- SNOWMOBILE 19- BUS (16+ PASSENGERS) 24- WHEELCHAIR (ANY TYPE)
 3- SPORT UTILITY VEHICLE 9- AUTOCYCLE 14- SINGLE UNIT TRUCK 20- OTHER VEHICLE 25- OTHER NON-MOTORIST
 4- PICK UP 10- MOPED OR MOTORIZED BICYCLE 15- SEMI-TRACTOR 21- HEAVY EQUIPMENT 26- BICYCLE
 5- CARGO VAN 11- ALL TERRAIN VEHICLE (ATV / UTV) 16- FARM EQUIPMENT 22- ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27- TRAIN
 6- VAN (9-15 SEATS) 17- MOTORHOME 99- UNKNOWN OR HIT/SKIP

of TRAILING UNITS _____
 WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 1- YES 2- NO 9- OTHER / UNKNOWN AUTONOMOUS MODE LEVEL 0 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- STRUCK 4- OVERTAKING/PASSING 10- PARKED 16- WORKING 21- STANDING OUTSIDE DISABLED VEHICLE
 5- BOTH STRIKING & STRUCK 5- MAKING RIGHT TURN IN TRAFFIC 17- PUSHING VEHICLE 99- OTHER / UNKNOWN
 9- OTHER / UNKNOWN 6- MAKING LEFT TURN 12- DRIVERLESS 19- OTHER / UNKNOWN

CONTRIBUTING CIRCUMSTANCES 01 1- NONE 7- LEFT OF CENTER 13- IMPROPER START FROM A PARKED POSITION 17- VISION OBSTRUCTION 21- LYING IN ROADWAY
 2- FAILURE TO YIELD 8- FOLLOWING TOO CLOSE/ACDA 14- STOPPED OR PARKED ILLEGALLY 18- OPERATING DEFECTIVE EQUIPMENT 22- NOT DISCERNABLE
 3- RAN RED LIGHT 9- IMPROPER LANE CHANGING 15- SWERVING TO AVOID 19- LOAD SHIFTING/ FALLING/SPILLING 23- OPENING DOOR INTO ROADWAY
 4- RAN STOP SIGN 10- IMPROPER PASSING 11- DROVE OFF ROAD 20- IMPROPER CROSSING 99- OTHER IMPROPER ACTION
 5- UNSAFE SPEED 12- IMPROPER BACKING 16- WRONG WAY

SEQUENCE OF EVENTS

EVENTS	EVENTS	EVENTS	EVENTS	EVENTS
1- OVERTURN/ROLLOVER	6- EQUIPMENT FAILURE	11- CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16- RAILWAY VEHICLE	22- WORK ZONE MAINTENANCE EQUIPMENT
2- FIRE/EXPLOSION	7- SEPARATION OF UNITS	12- DOWNHILL RUNAWAY	17- ANIMAL - FARM	23- STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
3- IMMERSION	8- RAN OFF ROAD RIGHT	13- OTHER NON-COLLISION	18- ANIMAL - DEER	24- OTHER MOVABLE OBJECT
4- JACKKNIFE	9- RAN OFF ROAD LEFT	14- PEDESTRIAN	19- ANIMAL - OTHER	
5- CARGO / EQUIPMENT LOSS OR SHIFT	10- CROSS MEDIAN	15- PEDALCYCLE	20- MOTOR VEHICLE IN TRANSPORT	
			21- PARKED MOTOR VEHICLE	

COLLISION WITH FIXED OBJECT - STRUCK

25- IMPACT ATTENUATOR / CRASH CUSHION	31- GUARDRAIL END	37- TRAFFIC SIGN POST	43- CURB	50- WORKZONE MAINTENANCE EQUIPMENT
26- BRIDGE OVERHEAD STRUCTURE	32- PORTABLE BARRIER	38- OVERHEAD SIGN POST	44- DITCH	51- WALL
27- BRIDGE PIER OR ABUTMENT	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	

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

LOCAL REPORT NUMBER
20233042

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

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

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

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

UNIT SPEED 0
 POSTED SPEED 25
 DETECTED SPEED
 1- STATED/ESTIMATED SPEED
 2- CALCULATED / EDR
 3- UNDETERMINED

UNIT # 02 OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver)
STEMPLE TIM C
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver)
5905 WOOLMAN CT 41 PARMA OH 44130
 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 # JXY5648 VEHICLE IDENTIFICATION # 1FTEJ1E1P5J1F1E42008 VEHICLE YEAR 2018 VEHICLE MAKE Ford
 INSURANCE VERIFIED INSURANCE COMPANY GEICO INSURANCE POLICY # 4408031161 VEHICLE COLOR BLU VEHICLE MODEL F-150
 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

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY

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

UNIT TYPE: 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: 01
 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: 01
 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: 01
 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: 01
 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: 3
 1 - NON-CONTACT, 2 - NON-COLLISION, 3 - STRIKING, 4 - STRUCK, 5 - BOTH STRIKING & STRUCK, 9 - OTHER / UNKNOWN, 1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - 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
05
 0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 12
 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 21
 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
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

RAIL GRADE CROSSING
2
 1 - NOT INVOLVED, 2 - INVOLVED - ACTIVE CROSSING, 3 - INVOLVED - PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION
 FROM 3 TO 4
 1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER / UNKNOWN

UNIT SPEED
2
POSTED SPEED
25
DETECTED SPEED
1
 1 - STATED/ESTIMATED SPEED, 2 - CALCULATED / EDR, 3 - UNDETERMINED

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
2 0 2 3 3 0 4 2

UNIT # 0 2	NAME: LAST, FIRST, MIDDLE STEMPLE TIM C	DATE OF BIRTH 0 1 2 3 1 9 5 6	AGE 1 2 3	GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 5905 WOOLMAN CT 41 PARMA OH 44130		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA OTHER DRUG
ALCOHOL TEST		DRUG TEST(S)		
STATUS 1		TYPE 1	VALUE 1	STATUS 1
TYPE 1		VALUE 1	STATUS 1	TYPE 1
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
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA OTHER DRUG
ALCOHOL TEST		DRUG TEST(S)		
STATUS		TYPE	VALUE	STATUS
TYPE		VALUE	STATUS	TYPE
RESULT SELECT UP TO 4				

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ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
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ALCOHOL TEST		DRUG TEST(S)		
STATUS		TYPE	VALUE	STATUS
TYPE		VALUE	STATUS	TYPE
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 / UNSABLE
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
INJURED TAKEN BY		EJECTION		ALCOHOL TEST TYPE		
1 - NOT TRANSPORTED / TREATED AT SCENE	6 - SECOND - RIGHT SIDE	1 - NOT EJECTED	H - HAZMAT	6 - INTERMEDIATE LICENSE RESTRICTIONS	6 - PASSENGER	1 - NONE
2 - EMS	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	2 - PARTIALLY EJECTED	M - MOTORCYCLE	7 - EXCEPT TRACTOR-TRAILER RESTRICTIONS	7 - OTHER DISTRACTION INSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	8 - THIRD - MIDDLE	3 - TOTALLY EJECTED	P - PASSENGER	8 - LEARNER'S PERMIT RESTRICTIONS	8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE	3 - URINE
9 - OTHER / UNKNOWN	9 - THIRD - RIGHT SIDE	4 - NOT APPLICABLE	N - TANKER	9 - LIMITED TO DAYLIGHT ONLY	9 - OTHER / UNKNOWN	4 - BREATH
SAFETY EQUIPMENT		TRAPPED		CONDITION		
1 - NONE USED	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT TRAPPED	Q - MOTOR SCOOTER	10 - LIMITED TO EMPLOYMENT	1 - APPARENTLY NORMAL	5 - OTHER
2 - SHOULDER BELT ONLY USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - EXTRICATED BY MECHANICAL MEANS	R - THREE-WHEEL MOTORCYCLE	11 - LIMITED TO EMPLOYMENT	2 - PHYSICAL IMPAIRMENT	
3 - LAP BELT ONLY USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - FREED BY NON-MECHANICAL MEANS	S - SCHOOL BUS	12 - LIMITED - OTHER	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	
4 - SHOULDER & LAP BELT USED	13 - TRAILING UNIT		T - DOUBLE & TRIPLE TRAILERS	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	4 - ILLNESS	
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		X - TANKER / HAZMAT	14 - MILITARY VEHICLES ONLY	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	
6 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - NON-MOTORIST			15 - MOTOR VEHICLES WITHOUT AIR BRAKES	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	
7 - BOOSTER SEAT	99 - OTHER / UNKNOWN			16 - OUTSIDE MIRROR	9 - OTHER / UNKNOWN	
8 - HELMET USED				17 - PROSTHETIC AID		
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)				18 - OTHER		
10 - REFLECTIVE CLOTHING						
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						
99 - OTHER / UNKNOWN						
		GENDER		DRUG TEST TYPE		
		F - FEMALE		1 - NONE		
		M - MALE		2 - BLOOD		
		U - OTHER/UNKNOWN		3 - URINE		
				4 - OTHER		
				DRUG TEST RESULT(S)		
				1 - AMPHETAMINES		
				2 - BARBITURATES		
				3 - BENZODIAZEPINES		
				4 - CANNABINOIDS		
				5 - COCAINE		
				6 - OPIATES / OPIOIDS		
				7 - OTHER		
				8 - NEGATIVE RESULTS		