OHIO DEPARTMENT TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT LOCAL INFORMATION									LOCAL REPORT NUMBER*					
☐ PHOTOS TAKEN	OH-2	OH-3	$\begin{smallmatrix} 2 & 1 & 0 & 1 & 2 & 1 & 3 & 1 & 3 & 1 & 3 & 1 & 1 & 1 & 1$											
SECONDARY CRASH	NAME *			cic*	HIT/SKIP 1 - Solved 2 - Unsolved	NIIMRED OF LINITS	0 1 98 - ANIMAL 99 - UNKNOWN							
	GARFIELD HEIGHTS								TE/TIME*	GRASH SEVERITY				
	1 - CITY *	LOCATION: CITY, VILLAGE, 1 GARFIELD					<u> 1 2 1 1 2 0 2</u>		5 1- FATAL 2- SERIOUS INJURY					
ROUTE TYPE	ROUTE NUMBER		- NORTH	LOCATION ROAD NA	AME		ROAD TYPE	I ATITITUE DECIMA	I DECIDECE	SUSPECTED 3 - MINOR INJURY				
LI R	4 8 0	3	- EAST - WEST					4 1 . 4 1	SUSPECTED 4 - INJURY POSSIBLE					
ROUTE TYPE 평	ROUTE NUMBER	2	- NORTH - SOUTH	REFERENCE ROA	AD NAME (ROAD, MILEPOST, HO	DUSE#)	ROAD TYPE	LONGITUDE DECIMAL	DEGREES	5 - PROPERTY DAMAGE ONLY				
REFEREN			- EAST - WEST	21.8			M_1P_1	8 1 1 6 1						
REFERENCE POINT 1 - INTERSECTION	T DIRECTION	IR - INTERSTAT	POLITE (TP)	AL - Al		I N TYPF HIGHWAY R	D - ROAD	☐ WITHIN INTERSE	D					
2 - MILE POST 3 - HOUSE #	3 2-SOUTH 3-EAST 4-WEST	US - FEDERAL I SR - STATE RO	US ROUTE	AV - A	VENUE LA - L DULEVARD MP -	ANE S MILEPOST S	RD - KUAD SQ - SQUARE ST - STREET TE - TERRACE	_						
DISTANCE	DISTANCE	CR - NUMBERE TR - NUMBEREI ROUTE	D COUNTY ROUT D TOWNSHIP	TE CT - C DR - D	OURT PK - I RIVE PI - P	PARKWAY T	L - TRAIL /A - WAY	☐ WITHIN INTERCH.	NUMBER OF APPROACHES					
1 0 0	1 - Miles 2 - Feet 3 - Yards	ROUTE	DUTE HE-HEIGHTS PL-PLACE					■ ROADWAY DIVID						
	OCATION AS EIDET HADMEI II		MANNER OF CRASH COLLISION/IMPACT					DIRECTION OF TRAVEL		MEDIAN TYPE				
0 1 1-0N ROA 2-0N SHC 3-IN MEDI	DULDER 10 - DRIVEWA' AN ACCESS	Y / ALLEY	111	1 - NOT COLLISION BETWEEN TWO MOTOR	4 - REAR-TO-RE 5 - BACKING	AR		3 1-NORTH	1 - DIVIE	DED FLUSH MEDIAN				
4 - ON ROA 5 - ON GOF 6 - OUTSID	RE CROSSING E 12 - SHARED L	S JSE PATHS		VEHICLES IN TRANSPORT 2 - REAR-END	6 - ANGLE 7 - SIDESWIPE, 8 - SIDESWIPE.	SAME DIRECTION OPPOSITE DIRECTION		2 - SOUTH 3 - EAST 4 - WEST	2 - DIVIE (≥4 F	DED FLUSH MEDIAN				
TRAFFIC 7 - ON RAM 8 - OFF RA	IP 13 - BIKE LANE	E πH			4 - DIVIE (ANY	DED, RAISED MEDIAN TYPE) ER / UNKNOWN								
	33 - OTHER? C	Mutown												
☐ WORK ZONE RELATED	1-	WORK ZONE TY	PE		LOCATION OF C	RASH IN WORK ZONI THE 1ST WORK ZONI	E	CONTOUR	CONDITIONS	SURFACE				
WORKERS PRESENT LAW ENFORCEMENT PRESENT	2-	LANE SHIFT/CROSSOVER WORK ON SHOULDER	?		WARNING	G SIGN E WARNING AREA		_ 2 _	7	2				
	5-	OR MEDIAN INTERMITTENT OR MOVIN OTHER	IG WORK		4 - ACTIVITY 5 - TERMINA	'AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,				
ACTIVE SCHOOL ZONE	T CONDITION			WE	ATHER			GRADE 3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT,	BITUMINOUS, ASPHALT 3 - BRICK/BLOCK				
1 - DAYLIGHT 2 - DAWN/DUSK			1 - CLEAR 2 - CLOUDY		6 - SNOW 7 - SEVERE CROSSWIN	une		9 - OTHER /UNKNOWN	OIL, GRAVEL 6 - WATER (STANDING, MOVING)	4 - SLAG, GRAVEL, STONE 5 - DIRT				
3 - DARK - LIGHT 4 - DARK - ROAL		6		MOG, SMOKE	8 - BLOWING SAND, SC 9 - FREEZING RAIN OR 99 - OTHER / UNKNOW	DIL, DIRT, SNOW FREEZING DRIZZLE			7 - SLUSH 9 - OTHER/UNKNOWN	9 - OTHER /UNKNOWN				
9 - OTHER / UNK			5 - OLLE 1, 1	TIME	33-OTHER/ORIGION	N								
NARRATIVE		/D ON 1490	INI TUE		. [: :				Indicate the north direction with				
UNIT 1 WAS	STATES SHE									an "N" on the compass diagram.				
					M					N				
SNOW AND ICE THAT HAD NOT BEEN REMOVED FROM										*				
THE HIGHWAY, UNIT 1 LOST CONTROL AND DROVE OFF. THE ROADWAY TO THE LEFT. AS A RESULT, UNIT														
	DAMAGE TO					_				```				
VEHICLE			1-11-11- <i>F</i> -1/A.l/	AL OF FILES										
A CUIPE							viat D	2014 RT						
										Not To Scale				
										No. 10 Scale				
CRASH REPORTE	ED DATE/TIME		DISPATCH DATE	/TIME		RRIVAL DATE/TIME		SCENE CLEAR	ED DATE/TIME	REPORT TAKEN BY				
\[\begin{array}{c ccccccccccccccccccccccccccccccccccc					[1]2]1]1]	2 0 2 3			1 2 0 2 3 0 3 1 4					
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME					R. Jarzer	FFICER'S NAME*							
4 5	3 0	3 1		OFFICER'S BADDE NUMBER* [S 2 2				CHECKED BY OFFICER'S BADGE NUMBER* L 1 6 Statement of the statement						

	OH OF MPET	IO DEPARTMENT PUBLIC SAFETY TY - BENVICE - PROTECTION UNIT		LOCAL REPORT NUMBER _ 2 _ 0 _ 2 _ 3 _ 3 _ 3 _ 3 _ 1									
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE CHEATHAM	· (■ Sai STEPHENE RE	me As Driver) ENEE	OWNER P	HONE: INCLUDE AREA CODE	(Same As Driver)	DAMAGE DAMAGE SCALE					
NER	OWNER ADDRE	SS: STREET, CITY, STATE, ZIP	(🖪 Same As D	•				1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
МО	5311	DENISON A	AVE	CLEVELA		OH IAL CARRIER PHONE: INCLUDE	44102	4 2- MINON DAMAGE	9 - UNKNOWN				
	COMMERCIAL DA	MALEN. HAME, ADDICESS, STIT, STATE, ZIF						DAMAGED AREA(S)					
	LP STATE	LICENSE PLATE #		/EHICLE IDENTIFICATION #	VEHICLE YEAR VEHICLE MAKE 9, 6, 4, 7, 1, 2, 0, 1, 9, Jeep				INDICATE ALL THAT APPLY				
	O H	JDR4990 INSURANCE COMPANY		INSURANCE POLICY#	9 6 4 7 2 0 1 9 Jeep VEHICLE COLOR VEHICLE MODEL			11 12	11 12 1				
	□ VEF	Founders TYPE OF USE		US DOT #	BLK Compass			10 11 1	2 10 11 1				
	☐ COMMERC		IN EMERGENCY RESPONSE	US DOT #				9 8 4 -	3 9 9 3 3				
	INTERLO DEVICE EQUIPPE	☐ HIT/SKIP UNIT	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATERIAL MATERIAL RELEASED CLASS# PLACARD ID# PLACARD			7 6 5	4 8 7 6 5 4				
	10131	1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE			18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRAINSKATER 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 20 - OTHER VEHICLE 25 - OTHER NON- MOTORIST			10/	11 1 2				
	UNIT TYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 26 - BICYCLE 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP			9 3 3					
щ		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME				12	7 5 5				
VEHICLE		# OF TRAILING UNITS						10 11 12 1	6 11 12 1				
	2	2 WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION MODE LEVEL				IDITIONAL OMATION H AUTOMATION L AUTOMATION	9 - UNKNOWN	9 9 3 4	3 9 9 3 3				
		1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FARM 21 - MAIL CARRIER 17 - MOWING 99 - OTHER/UNKNOWN			8 7 6 5	4				
	0 1	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS-TRANSIT/COMMUTER	8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL			6	12 12 12				
		1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POLE 1		2 - CONCRETE MIXER	12					
	CARGO BODY	/ NOT APPLICABLE 2 - BUS	MOTOR VEHICLE 4 - LOGGING	CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	9 - CAF	RGO TANK AT BED	3 - AUTO TRANSPORTER 4 - GARBAGE/REFUSE 9 - OTHER / UNKNOWN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9 3 9 3 9 8 3				
	TYPE	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES		FOR TROUBLE 6	9 - OTHER / UNKNOWN	6					
	VEHICLE DEFECTS	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	ACC	ABLED FROM PRIOR CIDENT			6 6 6				
		1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION -	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI ¹ 11 - SHA	VEWAY ACCESS ARED USE PATHS OR	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	■ - UNDERCARRIAGE [14] □ - ALL AREAS [15]				
	LOCATION AT IMPACT	UNMARKED CROSSWALK	5 - TRAVEL LANE-OTHER LOCATION			TRAILS		Ur	NIT NOT AT SCENE [16]				
	_	1 - NON-CONTACT 2 - NON-COLLISION 0 1 1	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION		18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	'	NITIAL POINT OF CONTACT				
		3 - STRIKING 4 - STRUCK PRE-CRASH ACTION	4 012(1)14(1)(1)10(1)	10 - PARKED 11 - SLOWING OR STOPPED	15 - WAI	LKING, RUNNING, GGING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE	1 4 0 - NO DAMAGI					
		& STRUCK 9 - OTHER / UNKNOWN	5 - MAKING RIGHT TURN 11 - SLOTHING OR STOFFED 12 - DRIVERLESS		16 - WORKING 99 - OTHER / UNKNOWN 17 - PUSHING VEHICLE			DIAGRAM 13 - TOP					
									TRAFFIC				
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/ACDA	LLOWING TOO A PARKED POSITION		ERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN				
	1,1,1,	3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	STOP SIGN 9 - IMPROPER LANE ILLEGALLY		19 - LOA FAL	AD SHIFTING/ LING/SPILLING	23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER	1 - ONE-WAY	4-STOP SIGN 2-SIGNAL 5-YIELD SIGN				
	CONTRIBUTING	6 - IMPROPER TURN			20 - IMPROPER CROSSING ACTION			# OF THROUGH LANES	3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING				
	CIRCUMSTANCES							ON ROAD	1 - NOT INVOLVED				
VENT(S)	SEQUENCE OF	EVENTS						4	2 - INVOLVED - ACTIVE CROSSING 1 3 - INVOLVED - PASSIVE CROSSING				
ш		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF	EVENTS 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF		LWAY VEHICLE MAL - FARM	22 - WORK ZONE MAINTENANCE						
		3 - IMMERSION 4 - JACKKNIFE	UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19 - ANIN	MAL - OTHER	EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR	U	INIT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST				
	2	5 - CARGO / EQUIPMENT LOSS OR SHIFT	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRA	FOR VEHICLE IN INSPORT IKED MOTOR VEHICLE	ANYTHING SET IN MOTION BY A MOTOR VEHICLE		2 - SOUTH 6 - NORTHWEST				
	3, , ,						24 - OTHER MOVABLE OBJECT	FROM 4 то	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST				
		25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	COLLISION WITH FIXED OBJECTUARDRAIL END 37 - TRAFFIC SIGN POST		43 - CURB 50 -WORKZONE MAINTENANC			9 - OTHER / UNKNOWN				
	4, , ,	/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT		ANKMENT	EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED	DETECTED SPEED				
	5	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	46 - FEN 47 - MAIL 48 - TREI	BOX	53 - TUNNEL 54 - OTHER FIXED OBJECT	7,0,	1 1 - STATED/ESTIMATED SPEED				
		29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 42 - CULVERT			HYDRANT	99 - OTHER / UNKNOWN		2 - CALCULATED / EDR				
	6							POSTED SPEED	3 - UNDETERMINED				
	1 . 1 .							6 0					
HS	Y8304 OH1U 1/19 [FIRST HARMFUL EVENT 760-0820]	N	MOST HARMFUL EVENT					PAGE OF				

OHIO DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER						
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	MOTORIST / NO	JN-MOTORIS	5 1				2	0 2 3	3 3	3 3 1			
M UNIT # NAME: LAST, FIRE	ST, MIDDLE										AGE	GENDER	
CHEATHAM STEPHENE RENEE							1 0 2 7 1 9 9 2 3 1 F						
ADDRESS: STREET, CITY, STATE, ZIP S 5311 DENIS	ON 41/F						CONTACT P	HONE - INCLUDE AREA CODI					
T JOTT BEITIE	ON AVE MS AGENCY (NAME)	CL INJURED TAKEN TO: MEDICA	EVELAND AL FACILITY (NAME, CITY)	OH 4		$\overline{}$		SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED	
5 SAPEN				USED	0 4		OOT-COMPLIANT		1	1	1 1	1 1	
OL STATE OPERATOR LIC	ENSE NUMBER	OFFENSE CH	HARGED		OFFENSE DESCRIPTION	-1			<u> </u>	CITATION NUMBER			
M O T				CODE									
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPEC		CONDITION	STATUS	ALCOHO TYPE	L TEST VALUE	STATUS		JG TEST(S) RESULT:	SELECT UP TO 4	
s 4		1	OTHER DRUG	MARIJUANA	1	1	1	-1 1 1	1	1	1	11 11 1	
M UNIT# NAME: LAST, FIR	ST, MIDDLE		Ц					DATE OF BI	RTH		AGE	GENDER	
0 1 0							ll	1 1 1	1 1		1111		
R ADDRESS: STREET, CITY, STATE, ZIP								HONE - INCLUDE AREA CODE					
S T													
T / INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICA	AL FACILITY (NAME, CITY)	SAFETY EQU USED	IPMENT		OT-COMPLIANT	SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED	
N OL STATE OPERATOR LIC	ENSE NIIMRED	OFFENSE CH	IARGED	LOCAL C	FFENSE DESCRIPTION	4	IC HELMET			CITATION NUMBER			
М	ENSE NUMBER	GIT ENGE ON	MOLD	CODE	TENOL DESCRIPTION	J.1				OTATION HOMBEN			
O OL CLASS ENDORSEMENT SELECTUP TO 2	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPEC	TED	CONDITION		ALCOHOL	. TEST		DRI	IG TEST(S)		
R SELECTOR 102		DISTRACTED BY	ALCOHOL N	MARIJUANA		STATUS	TYPE	VALUE	STATUS	TYPE	RESULT s	SELECT UP TO 4	
s T			OTHER DRUG	L			·			<u> </u>		<u> </u>	
M UNIT # NAME: LAST, FIRE	ST, MIDDLE							DATE OF BI	RIH		AGE	GENDER	
O R ADDRESS: STREET, CITY, STATE, ZIP						l	CONTACT D	HONE - INCLUDE AREA CODE					
I S							CONTACT P	HONE - INCLUDE AREA CODE	: 	1 1	1 1	1 1	
T INJURIES INJURED TAKEN BY	MS AGENCY (NAME)	INJURED TAKEN TO: MEDICA	AL FACILITY (NAME, CITY)	SAFETY EQUI	PMENT			SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED	
N							OT-COMPLIANT						
OL STATE OPERATOR LIC	ENSE NUMBER	OFFENSE CH	HARGED	LOCAL (OFFENSE DESCRIPTION	ON		'		CITATION NUMBER			
O OLCLASS ENDORSEMENT													
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPEC	MARUUANA	CONDITION	STATUS	TYPE	VALUE	STATUS		IG TEST(S) RESULT 9	SELECT UP TO 4	
S L L L L L			OTHER DRUG	L			<u> </u>	•					
INJURIES	SEATING POSITION 1 - FRONT - LEFT SIDE	AIR BAG	OL 1 - CLASS A	CLASS	1 - ALCOHOL IN	RESTRICTION(S	5)	DRIVER DIS	TRACTION	1 - NONE	TEST STATI	JS	
1 - FATAL 2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	1 - NOT DEPLOYED 2 - DEPLOYED FRONT	2 - CLASS B		DEVICE 2 - CDL INTRAS			1 - NOT DISTRACTED 2 - MANUALLY OPERATION	NG AN	2 - TEST			
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C					ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING.			3 - TEST GIVEN, CONTAMINATED		
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SI	IDE 4 - REGULAR CLASS (- REGULAR CLASS (OHIO = D) 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS			DIALING)				SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN		
3-NO ALL PARENT INSORT	5 - NO APPARENT INJURY (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE		5 - M / C MOPED ONLY	M / C MOPED ONLY 6 - EXCEPT CLASS A			3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE				5 - TEST GIVEN, RESULTS UNKNOWN		
INJURED TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL		& CLASS B E 7 - EXCEPT TRA		R	4 - TALKING ON HAND-H					
1 - NOT TRANSPORTED	(MOTORCYCLE SIDE CAR)				8 - INTERMEDIA	ATE LICENSE		COMMUNICATION DE 5 - OTHER ACTIVITY WIT					
/TREATED AT SCENE 8 - THIRD - MIDDLE 2 - EMS 9 - THIRD - RIGHT SIDE		EJECTION	OI END	RESTRICTIONS 9 - LEARNER'S PERMIT RESTRICTIONS			ELECTRONIC DEVICE			ALCOHOL TEST TYPE			
3 - POLICE 10 - SLEEPER SECTION OF TRUCK CAB		1 - NOT EJECTED	H - HAZMAT					6 - PASSENGER 7 - OTHER DISTRACTION INSIDE		1 - NONE	1 - NONE		
9 - OTHER / UNKNOWN 11 - PASSENGER IN OTHER		2 - PARTIALLY EJECTED	M - MOTORCYCLE	M - MOTORCYCLE				THE VEHICLE		2 - BLOO	2 - BLOOD		
	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	3 - TOTALLY EJECTED	P - PASSENGER		11 - LIMITED TO 12 - LIMITED - O	EMPLOYMENT OTHER	Г	8 - OTHER DISTRACTION THE VEHICLE	IS OUTSIDE	3 - URINI			
SAFETY EQUIPMENT	PICK-UP WITH CAP) 12 - PASSENGER IN	4 - NOT APPLICABLE	N - TANKER		13 - MECHANIC			9 - OTHER / UNKNOWN		4 - BREA			
1 - NONE USED 2 - SHOULDER BELT ONLY USED	UNENCLOSED	TRAPPED	Q - MOTOR SCOOTER		CONTROLS,					5 - OTHE	R		
3 - LAP BELT ONLY USED	CARGO AREA 13 - TRAILING UNIT	1 - NOT TRAPPED	S - SCHOOL BUS	UTURCYCLE	ADAPTIVE D 14 - MII ITARY \	EVICES) /EHICLES ONLY	,						
4 - SHOULDER & LAP BELT USED 14 - RIDING ON VEHICLE 5 - CHILD RESTRAINT SYSTEM - EXTERIOR		2 - EXTRICATED BY		T - DOUBLE & TRIPLE TRAILERS						1 - NONE	DRUG TEST TYPE 1 - NONE		
FORWARD FACING (NON-TRAILING UNIT)		MECHANICAL MEANS 3 - FREED BY	X - TANKER / HAZMAT	X - TANKER / HAZMAT		WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR		001111111		2 - BLOOI	2 - BLOOD		
6 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	NON-MECHANICAL MEANS				17 - PROSTHETIC AID		CONDITION 1 - APPARENTLY NORMAL		3 - URINE	3 - URINE		
7 - BOOSTER SEAT	SO OTHER, SHAROW					18 - OTHER		2 - PHYSICAL IMPAIRMENT		4 - OTHE	4 - OTHER		
8 - HELMET USED 9 - PROTECTIVE PADS USED								3 - EMOTIONAL (E.G. DEI	PRESSED,				
(ELBOWS, KNEES, ETC.)				NDER				ANGRY, DISTURBED) 4 - ILLNESS		1 - AMPH	DRUG TEST RES ETAMINES	ULT(S)	
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN			F - FEMALE					5 - FELL ASLEEP, FAINT	ED.		TURATES		
/ BICYCLE ONLY			M - MALE					FATIGUED, ETC.			ODIAZEPINES		
99 - OTHER / UNKNOWN			U - OTHER/UNKNOWI	N				6 - UNDER THE INFLUEN		4 - CANN 5 - COCA	ABINOIDS INE		
								MEDICATIONS / DRUGS / ALCOHOL			6 - OPIATES / OPIOIDS		
								9 - OTHER / UNKNOWN			7 - OTHER 8 - NEGATIVE RESULTS		
										3 1,201			

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