| OHIO DEPARTMENT TRAFFIC CRASH REPORT "DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT | | | | | | | | LOCAL REPORT NUMBER* | | | | | |
|---|---|--|---|--|---|---|---------------------------------------|--|---|--|--|--|--|
| □ PHOTOS TAKEN | OH-3 | [2 0 2 4 0 4 0 1 | | | | | | | | | | | |
| SECONDARY CRASH | OTHER REF | HIT/SKIP 1 - Solved | 0 1 1 98-ANIMAL | | | | | | | | | | |
| GARFIELD HEIGHTS | | | | | | | 2 - Unsolved | TE/TIME* | CRASH SEVERITY | | | | |
| . | 1 - CITY * | LOCATION: CITY, VILLAGE | | | | | <u> 0 2 1 7 2 0 2</u> | 5 1- FATAL | | | | | |
| ROUTE TYPE | ROUTE NUMBER | PREFIX | 1-NORTH LO | CATION ROAD NAM | TE . | ROAD TYPE | I ATITUDE DECIMA | 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY | | | | | |
| I R | 4 8 0 | | 2 - SOUTH 3 - EAST 4 - WEST 1-48 | | | I H W | 4 1 1 4 1 | 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE | | | | | |
| ROUTE TYPE | ROUTE NUMBER | | 1 - NORTH | PEEEDENCE POAD | NAME (ROAD, MILEPOST, HOUSE #) | ROAD TYPE | LONGITUDE DECIMAL | | 5 - PROPERTY DAMAGE ONLY | | | | |
| REFERENCE | | | 2 - SOUTH 3 - EAST 4 - WEST 21. | | NAME (ROAD, MILEPOST, HOUSE #) | M_1P_1 | - 8 1 6 1 | 5 8 2 8 | | | | | |
| REFERENCE POINT | | | ROUTE TYPE | | RUAU TABE | | INTERSECTION RELATED | | | | | | |
| 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # | 4 3 - EAST | US - FEDERAL | NTERSTATE ROUTE (TP) AL - ALLEY | | | RD - ROAD SQ - SQUARE ST - STREET | ☐ WITHIN INTERSE | 1 1 | | | | | |
| | 4 - WEST | | ED COUNTY ROUTE | CR - CIR CT - COL | CLE OV - OVAL JRT PK - PARKWAY | TE - TERRACE TL - TRAIL | ☐ WITHIN INTERCH | NUMBER OF APPROACHES | | | | | |
| DISTANCE EDOM DECEDENCE | DISTANCE I MIT OF MEASURE 1 - Miles 2 - Feet | TR - NUMBERI ROUTE | ED TOWNSHIP | DR - DRI HE - HEI | | WA - WAY | | ROADWAY | | | | | |
| [5]0] | 2 3 - Yards | | | | | | ■ ROADWAY DIVIDED | | | | | | |
| 0 1 1-0N ROA | | ER | 1 - NOT CO | | or CRASH COLLISION/IMPACT 4 - REAR-TO-REAR | | DIRECTION OF TRAVEL | | MEDIAN TYPE | | | | |
| 3 - IN MEDI 4 - ON ROA | AN ACCESS DSIDE 11 - RAILWAY | GRADE | 1 BETWE TWO M | EN OTOR | 5 - BACKING 6 - ANGLE | | 4 1- NORTH 2- SOUTH | 4 2-SOLITH (<4 FEET) | | | | | |
| 5 - ON GOR 6 - OUTSIDI TRAFFIC | E 12 - SHARED I CWAY OR TRAIL | JSE PATHS .S | TRANSI 2 - REAR-E | PORT | 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTIO | N . | 3 - EAST 4 - WEST | (≥4 F 3 - DIVIE | ED, DEPRESSED MEDIAN | | | | |
| 7 - ON RAM 8 - OFF RAI | | TH | 3 - HEAD-C | ON | 9 - OTHER / UNKNOWN | | | (ANY | IED, RAISED MEDIAN TYPE) ER / UNKNOWN | | | | |
| | | | | | | | | | | | | | |
| ☐ WORK ZONE RELATED | 1- | WORK ZONE TO | /PE | | LOCATION OF CRASH IN WORK Z | ZONE ZONE | CONTOUR | CONDITIONS | SURFACE | | | | |
| WORKERS PRESENT LAW ENFORCEMENT PRESENT | 2 - | LANE SHIFT/CROSSOVE WORK ON SHOULDER | R | | WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA | | _1_ | 3 | 2 | | | | |
| FRESENI | | OR MEDIAN INTERMITTENT OR MOVI OTHER | NG WORK | | 4 - ACTIVITY AREA 5 - TERMINATION AREA | | 1 - STRAIGHT LEVEL 2 - STRAIGHT | 1 - DRY 2 - WET | 1 - CONCRETE 2 - BLACKTOP, | | | | |
| ACTIVE SCHOOL ZONE | | | | | ruro. | | GRADE 3 - CURVE LEVEL 4 - CURVE GRADE | 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, | BITUMINOUS, ASPHALT 3 - BRICK/BLOCK | | | | |
| LIGHT CONDITION | | | | | | | | | 4 - SLAG, GRAVEL, STONE 5 - DIRT | | | | |
| 2 - DAMMOIDUSK 2 - CLOUDY 7 - SEVERE CROSSWINDS 7 - SLUSH 3 - DARK - LIGHTED ROADWAY 6 - DARK - ROADWAY NOT LIGHTED 6 1 4 - RAIN 9 - REEZING RAIN 0 + REEZING DRIZZLE | | | | | | | | | 9 - OTHER /UNKNOWN | | | | |
| 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 5 - SLEET, HAIL 99 - OTHER / UNKNOWN | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| NARRATIVE | | | | | | : : : | | | Indicate the north | | | | |
| UNIT 01 DRIV | ER WAS NOT | ON SCEN | IE, WITH NO | OTHE | R | <u>.</u> | | | direction with an "N" on the compass diagram. | | | | |
| VEHICLES IN THE AREA. IT APPEARED UNIT 01 RAN OF | | | | | | | | | | | | | |
| ROAD LEFT, WHILE OPERATING WEST BOUND ON I - | | | | | | | | | | | | | |
| 480 WEST AND STRUCK A UTILITY POLE (POLE #J38947 | | | | | | | | | | | | | |
| 4) IN THE AREA OF MP 21.8. | | | | | | | | | | | | | |
| <u> </u> | | | | | | | | | No. To Control | | | | |
| | | | | | | | | I- 480 WEST | Not To Scale | | | | |
| | | | | | | | | | | | | | |
| Unit Off | | | | | | | | , | | | | | |
| #J389474 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | - DATE THE | | D00470: | | | | | DEP DATE TEXT | | | | | |
| CRASH REPORTE | | 0 2 1 7 | 2 0 2 4 0 | _{0 1 4} | ARRIVAL DATE/TII | | | 2 4 0 0 3 3 | POLICE AGENCY | | | | |
| TOTAL TIME ROADWAY OTHER INVESTIGATION TOTAL OFFICER'S NAME * CHECKED BY O | | | | | | OFFICER'S NAME* | | | | | | | |
| SEGULD . | | minotes | Mario Mile | OFFICER'S BAD | GE NUMBER* | CHECKED BY OFFICER'S BADGE | NUMBER* | SUPPLEMENT (CORRECTION or ADDITION 10 de Southe Mildred Start To carle | | | | | |
| 0 | 3 0 | _↓ 4 3 | ا ا | 0 1 3 | | | S 2 2 | | | | | | |

| | OH OF SAPET | HIO DEPARTMENT PUBLIC SAFETY UNIT | | LOCAL REPORT NUMBER | | | | | | | |
|---------|-------------------------------|--|--|--|---|---------------------------|---|---|--|--|--|
| | UNIT# | OWNER NAME: LAST, FIRST, MIDDLE EAN HOLDIN | (L San | ne As Driver) | (Same As Driver) | DAMAGE DAMAGE SCALE | | | | | |
| NER | OWNER ADDRE | ESS: STREET, CITY, STATE, ZIP | (Same As D | river) | | | | 1 - NONE 4 2 - MINOR DAMAGE | 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE | | |
| МО | 301 | South Veter | ans Pkwy | Normal I | COMMERCI | AL CARRIER PHONE: INCLUDE | 61761 AREA CODE | 4 2 - WINTON DAMPOE | 9 - UNKNOWN | | |
| | | | | | DAMAGED AREA(S) | | | | | | |
| | LP STATE | PSTATE | | | | VEHICLE YEAR | VEHICLE MAKE Ford | INDICATE ALL THAT APPLY | | | |
| | | URANCE INSURANCE COMPANY | | INSURANCE POLICY # | VEHICLE COLOR | | VEHICLE MODEL | 10 | 2 10 12 12 | | |
| | U VE | VERIFIED TYPE OF USE US DOT # | | TOWED | BY: COMPANY NAME | Mustang | 10 2 | | | | |
| | COMMERC | CIAL GOVERNMENT | VEHICLE MEIOUT CAMPIOCARD | | INT | ERSTATE TO | | 8 4 7 | 8 4 7 | | |
| | INTERLO DEVICE EQUIPPE | ■ HIT/SKIP UNIT | # OCCUPANTS 0 1 | 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS. | MATERIAL RELEASED PLACARD | | CLASS# PLACARD ID# | 7 6 5 | 11 12 1 6 5 | | |
| | 19191 | 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 3 - SPORT TUILTY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK | | 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIANISKATER 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 20 - OTHER VEHICLE 25 - OTHER NON- MOTORIST | | | 10 | 11 1 2 2 | | | |
| | | 4 - PICK UP 5 - CARGO VAN | 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE | 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT | | . WITH RIDER OR | 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP | 9 9 3 4 3 | | | |
| 9 | | 6 - VAN (9-15 SEATS) | (ATV / UTV) | 17 - MOTORHOME | | | | 12 | 7 6 5 12 | | |
| VEHICLE | | # OF TRAILING UNITS | | | | | | 10 11 12 | 2 10 11 12 | | |
| | _ | WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED? | MOUS MODE 9 | 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE | AUTO | OMATION | 9 - UNKNOWN | 9 10 2 3 | 3 9 9 3 3 | | |
| | 9 | | | | 4 - HIGH AUTOMATION 5 - FULL AUTOMATION | | | 8 7 5 | 8 7 5 7 | | |
| | 0 0 | 1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING | 6 - BUS - CHARTER/TOUR 11 - FIRE 7 - BUS - MITERCITY 12 - MILITARY 13 - POLICE 13 - POLICE 13 - POLICE 14 - POLICE 14 - POLICE 15 - POLICE 15 - POLICE 15 - POLICE 15 - POLICE 16 - POLICE 16 - POLICE 17 - POLICE 18 - POLICE | | 16 - FARM 21 - MAIL CARRIER 17 - MOWING 99 - OTHER /UNKNOWN 18 - SNOW REMOVAL | | | 7 6 5 | 7 6 5 | | |
| | | 4 - SCHOOL TRANSPORT 5 - BUS-TRANSIT/COMMUTER | 9 - BUS - OTHER 10 - AMBULANCE | 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT | 19 - TOWING 20 - SAFETY SERVICE PATROL | | | | 12 12 12 | | |
| | ,0,1, | 1 - NO CARGO BODY TYPE / NOT APPLICABLE | 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE | 5 - INTERMODAL CONTAINER CHASSIS | 8 - POLE 9 - CARGO TANK | | 2 - CONCRETE MIXER 3 - AUTO TRANSPORTER | 12 R R | | | |
| | | 2 - BUS | 4 - LOGGING | 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL | 10 - FLA 11 - DU | AT BED | 4 - GARBAGE/REFUSE 19 - OTHER / UNKNOWN | , , | 9 😅 3 9 🕶 3 | | |
| | | 1 - TURN SIGNALS 2 - HEAD LAMPS | 4 - BRAKES 7 - WORN OR SLICK TIRES 5 - STEERING 8 - TRAILER EQUIPMENT | | 10 - DISABLED FROM PRIOR | | 9 - OTHER / UNKNOWN | 6 | | | |
| | VEHICLE DEFECTS | 3 - TAIL LAMPS 1 - INTERSECTION - | 6 - TIRE BLOWOUT 3 - INTERSECTION - OTHER | DEFECTIVE 6 - BICYCLE LANE | ACCIDENT 9 - MEDIAN/CROSSING ISLAND | | 12 - FIRST RESPONDER | O DAMAGE [0] | UNDERCARRIAGE [14] | | |
| | NON-MOTORIST | MARKED CROSSWALK 2 - INTERSECTION - | 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION | 7 - SHOULDER/ROADSIDE 8 - SIDEWALK | 10 - DRIVEWAY ACCESS | | AT INCIDENT SCENE 99 - OTHER / UNKNOWN | - TOP [13] | - ALL AREAS [15] | | |
| | LOCATION AT IMPACT | UNMARKED CROSSWALK 1 - NON-CONTACT | 1 - STRAIGHT AHEAD | 7 - MAKING U-TURN | 13 - NEGOTIATING A CURVE | | 18 - APPROACHING | _ | IT NOT AT SCENE [16] | | |
| | _ | 2 - NON-COLLISION 3 - STRIKING 9 9 | 2 - BACKING 3 - CHANGING LANES | 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE | 14 - ENTERING OR CROSSING SPECIFIED LOCATION | | OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST | | THAL POINT OF GONTAGE | | |
| | | 4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTION | 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN | 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC | 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING | | 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN | 1 2 0 - NO DAMAGE 1-12 - REFER TO DIAGRAM | | | |
| | | & STRUCK 9 - OTHER / UNKNOWN | 6 - MAKING LEFT TURN | 12 - DRIVERLESS | 17 - PUSHING VEHICLE | | | 13 - TOP | 99 - UNKNOWN | | |
| | | 1 - NONE | 7 - LEFT OF CENTER | 13 IMPROPER START EROM | 17 . \//01 | ON OBSTRUCTION | 21 - LYING IN ROADWAY | | TRAFFIC | | |
| | | 2 - FAILURE TO YIELD 3 - RAN RED LIGHT | 8 - FOLLOWING TOO CLOSE/ACDA | 13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED | 18 - OPERATING DEFECTIVE 22 - NOT DISCERNABLE EQUIPMENT 23 - OPENING DOOR INTO | | | TRAFFICWAY FLOW | TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN | | |
| | 19191 | 4 - RAN STOP SIGN 9 - IMPROPER LANE ILLEGALLY CHANKING 15 - SWERPING TO AVOID 5 - IMPROPER TURN 11 - DROVE OFF ROAD 16 - WRONG WAY | | 15 - SWERVING TO AVOID | 19 - LOAD SHIFTING/ ROADWAY FALLING/SPILLING 99 - OTHER IMPROPER 20 - IMPROPER CROSSING ACTION | | | 1 - ONE-WAY | 6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL | | |
| | CONTRIBUTING CIRCUMSTANCES | | 12 - IMPROPER BACKING | | | | | # OF THROUGH LANES ON ROAD | RAIL GRADE CROSSING | | |
| (S) | | | | | | | | | 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING | | |
| EVENT | SEQUENCE OF | | | EVENTS | | | | 4 | 3 - INVOLVED - PASSIVE CROSSING | | |
| | 1 9 9 | 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION | 6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS | 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL | 17 - ANIN | MAL - FARM MAL - DEFR | 22 - WORK ZONE MAINTENANCE EQUIPMENT | UN | IIT / NON-MOTORIST DIRECTION | | |
| | | 4 - JACKKNIFE 5 - CARGO / EQUIPMENT | 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION 10 - CROSS MEDIAN 14 - PEDESTRIAN | | 19 - ANIMAL - OTHER 23 - STRUCK BY FALLING, SHIFTING CARGO OR 20 - MOTOR VEHICLE IN ANYTHING SET IN | | SHIFTING CARGO OR ANYTHING SET IN | | 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST | | |
| | -[0 9 | 0 9 LOSS OR SHIFT 10 - CROSS MEDIAN 14 - PEDESTRIAN 15 - PEDALCYCLE | | 21 - PARKED MOTOR VEHICLE VEHICLE 24 - OTHER MOVABLE | | FROM 3 TO | 3 - EAST 7 - SOUTHEAST | | | | |
| | ³ 4 0 | COLLISION WITH FIXED OBJECT | | OBJECT | | | FROM 3 TO | 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN | | | |
| | 4, , , | / CRASH CUSHION | 31 - GUARDRAIL END 32 - PORTABLE BARRIER | 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST | 43 - CUR 44 - DITC | н | 50 -WORKZONE MAINTENANCE EQUIPMENT 51 - WALL | UNIT SPEED | DETECTED SPEED | | |
| | | STRUCTURE 27 - BRIDGE PIER OR ABUTMENT | 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER | 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR | 46 - FENO 47 - MAIL | DE BOX | 52 - BUILDING 53 - TUNNEL | 0 | 3 | | |
| | 5 | 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE | 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER | SUPPORT 42 - CULVERT | 48 - TREE 49 - FIRE HYDRANT | | 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN | | 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR | | |
| | 6 I | | | | | | | POSTED SPEED | 3 - UNDETERMINED | | |
| | 2 | | 0 | | | | | 6 0 | | | |
| HSY | 2 /8304 OH1U 1/19 [| FIRST HARMFUL EVENT | 3 _M | OST HARMFUL EVENT | | | | | PAGE OF | | |

| OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST | | | | | | | LOCAL REPORT NUMBER | | | | | |
|--|--|--|---------------------------------------|--|---|---------------------------------------|---|------------|--|--------------------------------------|------------------|--|
| M UNIT# NAME: LAST, FIRE | | | | | | | 0 2 4 | IRTH | 4 0 1 | AGE | GENDER | |
| τ <u>0 1 </u> Unkno | | | | | | | | | | | | |
| R ADDRESS: STREET, CITY, STATE, ZIP I S | | | | ОН | | CONTACT PH | ONE - INCLUDE AREA CODE | E . | 1 1 | 1 1 | 1 1 | |
| T INJURIES INJURED EI TAKEN BY | MS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL | FACILITY (NAME, CITY) | SAFETY EC | | DOT-COMPLIANT | SEATING POS | SITION | AIR BAG USAGE | EJECTION | TRAPPED | |
| 5 | | | | | | DOT-COMPLIANT MC HELMET | 9 | 9 | 1 | 1 | 11 | |
| OL STATE OPERATOR LICE | OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL OFFENSE DESCRIPTION CODE | | | | | | | | CITATION NUMBER | | | |
| O OL CLASS ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED | ALCOHOL / DRUG SUSPECTI | ED | CONDITION | ALCOHOL TYPE | TEST VALUE | STATU | | JG TEST(S) RESULT | T SELECT UP TO 4 | |
| s T | | _l +9 -l | ☐ ALCOHOL ☐ MA ☐ OTHER DRUG | ARIJUANA | 91 | - - | | _1_ | | | | |
| M UNIT # NAME: LAST, FIRS | ST, MIDDLE | | | • | • | | DATE OF BI | RTH | · | AGE | GENDER | |
| T O ADDRESS: STREET, CITY, STATE, ZIP | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | |
| ADDRESS. STREET, CITY, STATE, ZIP | | | | | | CONTROL I HULDIE AREA CADE | | | | | | |
| TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL | FACILITY (NAME, CITY) | SAFETY EG USED | QUIPMENT | DOT-COMPLIANT | SEATING POS | SITION | AIR BAG USAGE | EJECTION | TRAPPED | |
| O OL STATE OPERATOR LICE | ENSE NUMBER | OFFENSE CHAI | RGED | LOCAL | OFFENSE DESCRIPTION | MC RELMET | | | CITATION NUMBER | | | |
| M 0 T | | | | CODE | | | | | | | | |
| O OL CLASS ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY | ALCOHOL / DRUG SUSPECTE ALCOHOL MAP | ED RIJUANA | CONDITION | TYPE | VALUE | STATUS | | IG TEST(S) RESULT | SELECT UP TO 4 | |
| S T | | | OTHER DRUG | l | | - | | | | ا ا | | |
| M UNIT# NAME: LAST, FIRS O T | ST, MIDDLE | | | | | ļ | DATE OF BI | RTH | | AGE | GENDER | |
| ADDRESS: STREET, CITY, STATE, ZIP | | | | | | CONTACT PH | ONE - INCLUDE AREA CODE | <u> </u> | | | | |
| S T | | | | | | | <u> </u> | | | | | |
| / INJURIES INJURED TAKEN BY | MS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL | FACILITY (NAME, CITY) | SAFETY EQ USED | UIPMENT | DOT-COMPLIANT MC HELMET | SEATING POS | SITION | AIR BAG USAGE | EJECTION | TRAPPED | |
| OL STATE OPERATOR LICI | ENSE NUMBER | OFFENSE CHAI | RGED | LOCAL CODE | OFFENSE DESCRIPTION | | | | CITATION NUMBER | | | |
| O OL CLASS ENDORSEMENT | RESTRICTION SELECT UP TO 3 | DRIVER | ALCOHOL / DRUG SUSPECTE | ED. | CONDITION | ALCOHOL. | reet | | DDI | IG TEST(S) | | |
| SELECT UP TO 2 | NEOTHOR SELECTION OF | DISTRACTED BY | ALCOHOL MAP | RUUANA . | STATUS | TYPE | VALUE | STATUS | | | SELECT UP TO 4 | |
| INJURIES | SEATING POSITION | AIR BAG | OTHER DRUG | LASS | OL RESTRICTIO | IN(S) | DRIVER DIS | TRACTION | | TEST STA | TUS | |
| 1 - FATAL | 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) | 1 - NOT DEPLOYED | 1 - CLASS A | | 1 - ALCOHOL INTERLOCK DEVICE | | - NOT DISTRACTED | | 1 - NONE | | | |
| 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY | 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE | 2 - DEPLOYED FRONT 2 - CLASS B 3 - DEPLOYED SIDE 3 - CLASS C | | 2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES | | | ELECTRONIC COMMUNICATION DEVICE (TEXTING TYPING | | | GIVEN, CONTAMIN | NATED | |
| 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 4 - DEPLOYED BOTH FRONT / SIDE 4 - REGULAR CLASS (| | HIO = D) | | | DIALING) | | SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN | | | |
| 3-NO AFFARENT INJUNT | 5 - SECOND - MIDDLE | 5 - NOT APPLICABLE 5 - 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 BUS 7 - EXCEPT TRACTOR-TRA | ILER | - TALKING ON HAND-HI COMMUNICATION DE | | | | | |
| 1 - NOT TRANSPORTED | (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE | | | | 8 - INTERMEDIATE LICENS RESTRICTIONS | E (| - OTHER ACTIVITY WIT | H AN | | | | |
| 2 - EMS | - EMS 9 - THIRD - RIGHT SIDE | | OL ENDOR | RSEMENT | 9 - LEARNER'S PERMIT RESTRICTIONS | 6 | ELECTRONIC DEVICE 6 - PASSENGER | | | ALCOHOL TEST TYPE | | |
| 3 - POLICE | TRUCK CAB | | H - HAZMAT M - MOTORCYCLE | 10 - LIMITED TO DAYLIGHT | | | 7 - OTHER DISTRACTION INSIDE THE VEHICLE | | 1 - NONE | 1 - NONE 2 - BLOOD | | |
| 9 - OTHER / UNKNOWN | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA | 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED | P - PASSENGER | | 11 - LIMITED TO EMPLOYN | IENT 8 | - OTHER DISTRACTION | IS OUTSIDE | 3 - URINI | | | |
| OAFFTY FOLUDATION | (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 4 - NOT APPLICABLE | N - TANKER | | 12 - LIMITED - OTHER 13 - MECHANICAL DEVICE | s | THE VEHICLE OTHER / UNKNOWN | | 4 - BREA | тн | | |
| SAFETY EQUIPMENT 1 - NONE USED | 12 - PASSENGER IN UNENCLOSED | | Q - MOTOR SCOOTER | | (SPECIAL BRAKES, HANI CONTROLS, OR OTHER | | | | 5 - OTHE | R | | |
| 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED | CARGO AREA 13 - TRAILING UNIT | TRAPPED 1 - NOT TRAPPED | R - THREE-WHEEL MOT | FORCYCLE | ADAPTIVE DEVICES) | | | | | | | |
| 4 - SHOULDER & LAP BELT USED | 14 - RIDING ON VEHICLE | 2 - EXTRICATED BY | S - SCHOOL BUS T - DOUBLE & TRIPLE TO | -DAII FD0 | 14 - MILITARY VEHICLES C 15 - MOTOR VEHICLES | INLY | | | 1 - NONE | DRUG TEST | TYPE | |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | EXTERIOR (NON-TRAILING UNIT) | MECHANICAL MEANS | X - TANKER / HAZMAT | KAILERS | WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR | · | | | 2 - BLOOI | | | |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING | 15 - NON-MOTORIST | 3 - FREED BY NON-MECHANICAL MEANS | | | 17 - PROSTHETIC AID | | COND 1 - APPARENTLY NORMA | | 3 - URINE | | | |
| BOOSTER SEAT | | | | 18 - OTHER | | 2 - PHYSICAL IMPAIRMENT | | 4 - OTHER | | | | |
| 8 - HELMET USED 9 - PROTECTIVE PADS USED | | | | | | | 3 - EMOTIONAL (E.G. DEF | PRESSED, | | | | |
| (ELBOWS, KNEES, ETC.) | | | GENE | DER | | | ANGRY, DISTURBED) | | 1 - AMPH | DRUG TEST RE | ESULT(S) | |
| 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN | | | F - FEMALE | | | 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, | | 2 - BARB | 1 - AMPHETAMINES 2 - BARBITURATES | | | |
| / BICYCLE ONLY 99 - OTHER / UNKNOWN | | | M - MALE | | | | FATIGUED, ETC. | | | 3 - BENZODIAZEPINES 4 - CANNARINOIDS | | |
| 33 - OTHER / UNKNOWN | | | U - OTHER/UNKNOWN | | | | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS | | | 4 - CANNABINOIDS 5 - COCAINE | | |
| | | | | | | | /ALCOHOL | | | 6 - OPIATES / OPIOIDS 7 - OTHER | | |
| | | | | | | | 9 - OTHER / UNKNOWN | | | K TIVE RESULTS | | |
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HSY8306 OH1M 1/19 [760-1500] PAGE OF



OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

| ~ | | | | | | | | |
|------------------------------|---|-----------------------------------|--|--|--|--|--|--|
| LOCAL REPORT NUMBER 20240401 | REPORTING AGENCY GARFIELD HEIGHTS | DATE OF CRASH M 02 D 17 Y 2024 | | | | | | |
| IN COUNTY OF 18 | CRASH LOCATION IR 480 | | | | | | | |
| Ohio Department of Transp | ortation (5500 Transportation Blvd. Garfield OH | I 44125, PH | | | | | | |
| #216-581-2100) pole dama | ged during this incident (#J389474). | | | | | | | |
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| | OFFICER'S SIGNATURE | BADGE NUMBER 013 | | | | | | |