OHIO DEPARTMENT TRAFFIC CRASH REPORT  *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER *				
DI DIOTOS TAVEN	□ OH-2 □	OH-3	2   0   2   4   0   6   8   1									
PHOTOS TAKEN  SECONDARY CRASH	l	OTHER	REPORTING AGENC	Y NAME *	. 0 . 1	NCIC*	HIT/SKIP 1 - Solved	NI IMPED OF LINITS	9 9 9 - ANIMAL			
	Private Property  CALITY*		GARFIE	LD HEIG	HTS	0 2 0	2 - Unsolved	2 - Unsolved 0 2 9 9 99 - UNI  CRASH DATE/TIME* CRASH SEVERIT				
11181	1 - CITY * 2 - VILLAGE * 1 3 - TOWNSHIP *	GARFIE					1.0(2).4(9).2(0).2(4)(4).2(3).7(1					
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH	LOCATION R	ROAD NAME	ROAD TYPE	N DECORECE	2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY				
LOCATION			2 - SOUTH 3 - EAST 4 - WEST	DARLI	NGTON	$ _{A_1V_1}$	   4   1   4   1		SUSPECTED 4 - INJURY POSSIBLE			
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH	REFEREN	NCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL	DEGREES	5 - PROPERTY DAMAGE ONLY			
REFERENCE		3	3 - EAST 4 - WEST	122		ST	8 1 1 6 0	5   9   5   8				
REFERENCE PO			ROLLTE TYPE		ROAD TYPE		□ WITHIN INTERSE	INTERSECTION RELATED	)			
2 - MILE POST 3 - HOUSE #	2 - SOUTH 3 - EAST	US - FED	RSTATE ROUTE (TP) DERAL US ROUTE ATE ROUTE		AL - ALLEY	RD - ROAD SQ - SQUARE ST - STREET		CTION OR ON APPROACH				
DISTANCE	DISTANCE	CR - NUI TR - NUI	MBERED COUNTY ROUMBERED TOWNSHIP	ITE	CR - CIRCLE OV - OVAL CT - COURT PK - PARKWAY DR - DRIVE PI - PIKE	TE - TERRACE TL - TRAIL WA - WAY	☐ WITHIN INTERCH	ANGE AREA	NUMBER OF APPROACHES			
EDOM DECEDENCE	1 - Miles 2 - Feet 3 - Yards	ROU	JIE		HE - HEIGHTS PL - PLACE							
	I OCATION or EIDST HADMEIN	EVENT	<u> </u>		MANNER OF CRASH COLLISION/IMPACT		ROADWAY DIVID	ied	MEDIAN TYPE			
U   I   2-ON	ROADWAY 9 - CROSSON SHOULDER 10 - DRIVEW MEDIAN ACCESS	/ER AY / ALLEY		1 - NOT COLLISION BETWEEN			1 - NORTH	1 - DIVID	ED FLUSH MEDIAN			
	ROADSIDE 11 - RAILWA' GORE CROSSII	/ GRADE NG	6	TWO MOTOR VEHICLES IN TRANSPORT	6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION	2 - SOUTH (<4		FEET) IDED FLUSH MEDIAN FEET)				
TRA 7 - ON	AFFICWAY OR TRA	ILS NE		2 - REAR-END 3 - HEAD-ON	8 - SIDESWIPE, OPPOSITE DIRECTIO 9 - OTHER / UNKNOWN	4 - WEST	4 - DIVIDED, R (ANY TYPE					
	99 - OTHER /							9 - OTHE	R / UNKNOWN			
		WORK ZO	INE TYPE		LOCATION OF CRASH IN WORK	ZONE		CONDITIONS	SURFACE			
WORK ZONE RELA WORKERS PRESEI LAW ENFORCEMEI	NT 1	- LANE CLOSURE - LANE SHIFT/CROS - WORK ON SHOULD	SOVER		1 - BEFORE THE 1ST WORK I WARNING SIGN 2 - ADVANCE WARNING ARE	ZONE	CONTOUR 1 1	_ 2 _	_ 2 _			
PRESENT		OR MEDIAN - INTERMITTENT OR			3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE			
☐ ACTIVE SCHOOL Z		- OTHER					2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE	2 - WET 3 - SNOW 4 - ICE	2 - BLACKTOP, BITUMINOUS, ASPHALT			
I - DAYLIGH	LIGHT CONDITION		1 - CLEAR		WEATHER 6 - SNOW		9 - OTHER /UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING)	3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT			
1 2 - DAWN/D 3 - DARK - L		2	2 - CLOUE		7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZ	"LE		7 - SLUSH 9 - OTHER/UNKNOWN	9 - OTHER /UNKNOWN			
	JNKNOWN ROADWAY LIGHTING		5 - SLEET	, HAIL	99 - OTHER / UNKNOWN							
NARRATIVE						: : :		: : :	Indicate the north			
UNIT 1 STA	TES HE WAS N	/B ON E	122 AT D	ARLING	TON				direction with an "N" on the compass diagram.			
AND STOP	PED FOR STOP	SIGN. L	JNIT 2 ST	ATES SH	IE.		1 1					
WAS W/B O	N DARLINGTO	N AND S	TOPPED	FOR ST	OP							
SIGN, BOTH	HADVISED THE	Y ARRI	/ED AT S	AME TIM	N <sub>10</sub> ⇒							
BOTH PRO	CEEDED THRO	UGH TH	IE INTER	SECTION	N							
WHEN UNIT	T 1 WAS STRUC	CK ON P	ASSENGI	ER REAF	R.BY	2						
UNIT 2 UNI	IT-2-STATES-UN	IIT 1 HAI	D RIGHT	TURN SI	GNAL······		ſ		VEHICLES MOVED			
ACTIVATED	SO SHE PROC	EEDED	· IF·BOTH	I ARRIVE	<u></u>							
SIMULTANE	EOUSLY THEN	JNIT-1-S	HOULD F	HAVE			SION TO	STOP				
YIELDED TO	O·UNIT 2 · · · · ·						DARLINGTON					
					NOT:	TO SCALE	ă	5				
	2 4   1 2 3 7	0 3 1	DISPATCH DAT		ARRIVAL DATE/TI			RED DATE/TIME 2 4   1 3 0 5	POLICE AGENCY			
TOTAL TIME ROADWAY		TOTAL MINUTE	OFFICER'S	NAME *			FFICER'S NAME*		MOTORIST			
			B. Cv		EER'S BADGE NUMBER*	14. 13055	CHECKED BY OFFICER'S BADGE	NUMBER*	SUPPLEMENT (CORRECTION on ADDITION 10 AN EXCETOR SHAT TO COPE			
	4 5	$\lfloor 7 \rfloor 0 \rfloor$		$\lfloor 0 \rfloor 0$	9		S   1   3					

ĺ	OH OF SAPET	IO DEPARTMENT PUBLIC SAFETY TY - BERVICE - PROTECTION						2,0,2,4,0	LOCAL REPORT NUMBER		
ı	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE	(= 3	ame As Driver)	OWNER P	HONE: INCLUDE AREA CODE	( Same As Driver)		DAMAGE  DAMAGE SCALE		
E		SS: STREET, CITY, STATE, ZIP	( 🖪 Same As	Driver)				1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE		
OWN	199	STORMON	T ST	NEW CON		RD OH	43762	3 2-MINOR DAMAGE	9 - UNKNOWN		
ľ	COMMERCIAL CA	RRIER: NAME, ADDRESS, CITY, STATE, ZIP	•		COMMERC	AL CARRIER PHONE: INCLUDE A	INEA CODE		DAMAGED AREA(S)		
P	LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION #					VEHICLE YEAR	VEHICLE MAKE	DAMAGED AREA(S)  INDICATE ALL THAT APPLY			
H	<u>O H </u>	KFF2506		4   L   F   8   H   H   0   9   0   3 INSURANCE POLICY#	1,9,	2 0 1 7	Hyundai  VEHICLE MODEL	11 12 1	11 12 1		
		RIFIED TREXIS		1134021377586		SIL	Elantra	10 11 1	2 10 11 1		
	☐ COMMERC	TYPE OF USE  CIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED	BY: COMPANY NAME		9 9 3	3 , 3 3		
H	INTERLO	OCK	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS.		HAZARDOUS M MATERIAL RELEASED		7	4 8 7 5 4		
	☐ DEVICE EQUIPPE	HIT/SKIP UNIT	0 2	2 - 10,001 - 26K LBS. 3 - >26K LBS.		PLACARD	CLASS# PLACARD ID#	7 6 5	11 12 7 6 5		
I		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	13 - SNOWMOBILE	19 - BUS (16	+ PASSENGERS) 2	3 - PEDESTRIAN/SKATER 4 - WHEELCHAIR (ANY TYPE)	10_	11 1 2		
	0 1	3 - SPORT UTILITY VEHICLE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	15 - SEMI-TRACTOR		EQUIPMENT 2	5 - OTHER NON- MOTORIST 6 - BICYCLE 7 - TRAIN	9 (	9 9 3		
	UNIT TYPE         5 - CARGO VAN         BICYCLE           6 - VAN (9-15 SEATS)         11 - ALL TERRAIN VEY           (ATV / UTV)         (ATV / UTV)			16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL WITH RIDER OR 27 - TRAIN ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP			s 7 5 74			
/EHICLE	1	# OF TRAILING UNITS						11 12 1	7 6 5 112 1		
×								10 11 1	10 11 1		
	2 .	WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	AUTONOM	0 - NO AUTOMATION  1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	STANCE AUTOMATION 9 9 3 3			3 9 9 3			
L		1 - YES 2 - NO 9 - OTHER / UNKNO	WN MODE LEV	EL		AUTOMATION		8 7 5	3 7 5 74		
	0 1	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE	11 - FIRE 12 - MILITARY 13 - POLICE		WING S DW REMOVAL	21 - MAIL CARRIER 99 - OTHER /UNKNOWN	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 - TO\ 20 - SAF	NING ETY SERVICE PATROL			12 12 12		
H	0 1	1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POI		2 - CONCRETE MIXER 3 - AUTO TRANSPORTER	12 <b>0</b>			
	CARGO BODY	/ NOT APPLICABLE 2 - BUS Y	MOTOR VEHICLE 4 - LOGGING	CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	9 - CAF 10 - FL/ 11 - DU	AT BED 14	4 - GARBAGE/REFUSE 9 - OTHER / UNKNOWN	, ,	3 9 🗱 3		
H	TYPE	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES		OR TROUBLE 99	3 - OTHER / UNKNOWN	6			
Ļ	\(\( \)	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE		ABLED FROM PRIOR IDENT			6 6 6		
		1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI	VEWAY ACCESS	2 - FIRST RESPONDER AT INCIDENT SCENE 19 - OTHER / UNKNOWN	☐ - NO DAMAGE [0] ☐ - TOP [13]	- UNDERCARRIAGE [14] - ALL AREAS [15]		
	NON-MOTORIST LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE-OTHER LOCATIO		TRA				T NOT AT SCENE [16]		
		1 - NON-CONTACT	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE		EDINO OD ODOGONO	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	INI	ITIAL POINT OF CONTACT		
		3 - STRIKING 4 - STRUCK  PRE-CRASH	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE 10 - PARKED	15 - WAI	CIFIED LOCATION LKING, RUNNING,	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE	0 6 0 NO DAMAGE	14 - UNDERCARRIAGE		
		5 - BOTH STRIKING & STRUCK	ACTION 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC		16 - WORKING 99 - OTHER / UNKNOWN		DISABLED VEHICLE 99 - OTHER / UNKNOWN	1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE DIAGRAM 99 - UNKNOWN			
		9 - OTHER / UNKNOWN		12 - DRIVERLESS	17 - PUS	HING VEHICLE		13 - TOP			
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM	17 - VISI	ON OBSTRUCTION 2	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL		
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE	A PARKED POSITION  14 - STOPPED OR PARKED  ILLEGALLY	EQL		22 - NOT DISCERNABLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN		
	2 2 2	5 - UNSAFE SPEED 6 - IMPROPER TURN	CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	FAL	LINC/CDILLING	ROADWAY 99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES		12 - IMPROPER BACKING		ACTION			# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING		
(g) =								ON NOAD	1 - NOT INVOLVED		
EVENT(	SEQUENCE OF	EVENTS		EVENTS				_2_	2 - INVOLVED - ACTIVE CROSSING  3 - INVOLVED - PASSIVE CROSSING		
		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF		WAY VEHICLE 2	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	UNI	IT / 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	OR VEHICLE IN NSPORT KED MOTOR VEHICLE	ANYTHING SET IN MOTION BY A MOTOR VEHICLE		2 - SOUTH 6 - NORTHWEST		
	3.						24 - OTHER MOVABLE OBJECT	FROM 2 TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST		
		or Minaco Attenua	24 CHADDELL SUB	COLLISION WITH FIXED OBJECT -	STRUCK 43 - CUR	R s	0 -WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN		
	4, , ,	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	44 - DITC	H ANKMENT 5	EQUIPMENT 1 - WALL	UNIT SPEED	DETECTED SPEED		
		STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR	46 - FEN	BOX 5	2 - BUILDING 3 - TUNNEL 4 - OTHER FIXED OBJECT	,5, , ,	1 1-STATED/ESTIMATED SPEED		
	الللا	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	SUPPORT 42 - CULVERT	48 - TREI 49 - FIRE		9 - OTHER / UNKNOWN		2 - CALCULATED / EDR		
	6 1							POSTED SPEED	3 - UNDETERMINED		
								. 2 . 5 .			
HSYR	1 304 OH1U 1/19 [	FIRST HARMFUL EVENT	1	MOST HARMFUL EVENT				2   5	PAGE OF		

	OH OF SAPET	IO DEPARTMENT PUBLIC SAFETY TY - BERVICE - PROTECTION  UNIT						2,0,2,4,0	LOCAL REPORT NUMBER 6   8   1		
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE HAMBRICK	「■ s DUSTI LANE	Same As Driver)	OWNER PHONE: INCLUDE AREA CODE (  Same As Driver)				DAMAGE DAMAGE SCALE		
ER		SS: STREET, CITY, STATE, ZIP	( 🖪 Same As	s Driver)				1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE		
OWN	5711	MERKLE A		PARMA			44129		9 - UNKNOWN		
	COMMERCIAL CA	RRIER: NAME, ADDRESS, CITY, STATE, ZIP	•		COMMERC	IAL CARRIER PHONE: INCLUDE	AREA CODE		DAMAGED AREA(S)		
f	LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION #				VEHICLE YEAR VEHICLE MAKE IND			INDICATE ALL THAT APPLY			
	OH	WHOSAH  INSURANCE COMPANY		14   K C 5   E B B 5 9 2 INSURANCE POLICY#	2,6,7	2 0 1 4	Ford VEHICLE MODEL	11 12	11 12 1		
		STATEFAR	RM	3952335SFP35		WHI	Edge	10 1	10 11 1		
	☐ COMMERC	TYPE OF USE  CIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED	BY: COMPANY NAME		9 9 3	3 9 9 3 3		
	INTERLO		# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS.	·	HAZARDOUS II MATERIAL RELEASED	IATERIAL  CLASS # PLACARD ID #	7 5	7 5 4		
	DEVICE EQUIPPE	HIT/SKIP UNIT	0 5	2 - 10,001 - 26K LBS. 3 - >26K LBS.		PLACARD	CEASS# TEAGRID ID#	7 6 5	11 12 7 6 5		
		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	13 - SNOWMOBILE		S+ PASSENGERS)	23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST	10/	11 1 2 2		
	3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN		9 - AUTOCYCLE  10 - MOPED OR MOTORIZED  BICYCLE	14 - SINGLE UNIT TRUCK	21 - HEAVY 22 - ANIMAL	EQUIPMENT WITH RIDER OR	6 - BICYCLE 17 - TRAIN	9 (	9 3 3		
	UNIT TYPE	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL	-DRAWN VEHICLE	9 - UNKNOWN OR HIT/SKIP	3 7 5 74			
/EHICLE		# OF TRAILING UNITS						11 12 1	6 11 12 1		
		WAS VEHICLE OPERATING IN AUTONO	OMOUS MODE	0 - NO AUTOMATION	3 - CON	DITIONAL	9 - UNKNOWN	10 11 1	10 1 1 2		
	2	WHEN CRASH OCCURED?  1-YES 2-NO 9-OTHER/UNKNO	AUTONOM	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	NCE AUTOMATION			9 9 3	3 9 9 3		
		1-NONE	6 - BUS - CHARTER/TOUR	VEL 11 - FIRE	16 - FAF		21 - MAIL CARRIER	8 7 6	7 5 4		
	0 1	2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER	12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY	17 - MO	WING DW REMOVAL	99 - OTHER /UNKNOWN	7 6 5	7 6 5		
		5 - BUS-TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAF	FETY 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 - POI 9 - CAI	RGO TANK	2 - CONCRETE MIXER 3 - AUTO TRANSPORTER	a M a	* •		
	CARGO BODY	2 - BUS /	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10 - FL		4 - GARBAGE/REFUSE 9 - OTHER / UNKNOWN	, ,	3 9 1 3 9 8 3		
		1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT		TOR TROUBLE SABLED FROM PRIOR	9 - OTHER / UNKNOWN	6			
Ļ	VEHICLE DEFECTS	3 - TAIL LAMPS  1 - INTERSECTION -	6 - TIRE BLOWOUT  3 - INTERSECTION - OTHER	DEFECTIVE  6 - BICYCLE LANE	ACC	IDENT	12 - FIRST RESPONDER		6 6 6		
		MARKED CROSSWALK 2 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI 11 - SHA	VEWAY ACCESS ARED USE PATHS OR	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 LOCATIO		TRA		18 - APPROACHING	- UNIT	NOT AT SCENE [16]		
	_	1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - EN1	GOTIATING A CURVE FERING OR CROSSING CIFIED LOCATION	OR LEAVING VEHICLE 19 - STANDING	INI	TIAL POINT OF CONTACT		
		3 - STRIKING 4 - STRUCK PRE-CRASH ACTION	4 012(1)101(0)17001(0	10 - PARKED 11 - SLOWING OR STOPPED	15 - WALKING, RUNNING, JOGGING, PLAYING		20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE	1 2 0 - NO DAMAGE	14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE		
		5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS			99 - OTHER / UNKNOWN	DIAGRAM 99 - UNKNOWN 13 - TOP			
									TRAFFIC		
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO	13 - IMPROPER START FROM A PARKED POSITION	18 - OPE	ERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL		
		3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	CLOSE/ACDA 9 - IMPROPER LANE CHANGING	14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	19 - LOA	AD SHIFTING/	23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN		
	2 2	6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY		ROPER CROSSING	99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES							# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED		
NT(S)	SEQUENCE OF	EVENTS						,	2 - INVOLVED - ACTIVE CROSSING		
EVE		1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS  11 - CROSS CENTERLINE -	16 - RAIL	WAY VEHICLE	22 - WORK ZONE	2	3 - INVOLVED - PASSIVE CROSSING		
	1 2 0	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	17 - ANII 18 - ANII	MAL - FARM MAL - DEER	MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	UNI	T / NON-MOTORIST DIRECTION		
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOT	MAL - OTHER FOR VEHICLE IN NSPORT	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST		
		•		15 - PEDALCYCLE		KED MOTOR VEHICLE	VEHICLE 24 - OTHER MOVABLE	FROM   3   TO	3 - EAST 7 - SOUTHEAST		
	3			COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT	FROM 3 TO	4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN		
	4, , ,	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CUF 44 - DITC	ж	50 -WORKZONE MAINTENANCE EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED		
		26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER	39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMB 46 - FEN 47 - MAIL	CE	51 - WALL 52 - BUILDING 53 - TUNNEL				
	5	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	48 - TRE	=	54 - OTHER FIXED OBJECT 39 - OTHER / UNKNOWN	5	1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR		
	6	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER					POSTED SPEED	3 - UNDETERMINED		
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2 - SUSPECTED SERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B		NTRASTATE ONLY	2 - MANUALLY OPERATI ELECTRONIC COMM	JNICATION	2 - TEST REFUSED	
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C	3 - CORF	RECTIVE LENSES	DEVICE (TEXTING, TY		3 - TEST GIVEN, CONTAM	INATED
5 - NO APPARENT INJURY	4 CECOND LEFT CIDE						riivo,	SAMPLE / UNUSABLE	
	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT /		·	I WAIVER PT CLASS A BUS	DIALING)  3 - TALKING ON HANDS			KNOWN
		4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE	5 - M / C MOPED ONLY	5 - EXCE 6 - EXCE		DIALING) 3 - TALKING ON HANDS: COMMUNICATION DE	FREE	SAMPLE / UNUSABLE	
INJURED TAKEN BY	(MOTORCYCLE PASSENGER)  5 - SECOND - MIDDLE  6 - SECOND - RIGHT SIDE  7 - THIRD - LEFT SIDE	4 - DEPLOYED BOTH FRONT /		5 - EXCE 6 - EXCE & CLA 7 - EXCE	PT CLASS A BUS PT CLASS A ISS B BUS PT TRACTOR-TRAILE	DIALING)  3 - TALKING ON HANDS  COMMUNICATION DE  4 - TALKING ON HAND-F	FREE CVICE IELD	SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS	
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unit#	NAME: LAST, FIRST, MIDDLE HOLMES	COF	REY		DATE OF BIRT		AGE 1 2 4	GENDER		
1	EET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
	146 CLEVELAND OH	I 44105	1							
INJURIES 5	INJURED EMS AGENCY (NAME) TAKEN BY		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT MC HELMET 0	POSITION AIR BAG USAGE	EJECTION 1	TRAPPED		
UNIT#	NAME: LAST, FIRST, MIDDLE	OLI\	/I A		DATE OF BIRT		AGE	GENDER		
ADDRESS: STREET	TORRUELLAS  et, city, state, zip	OLIV		O   9   1   7	2   0   1   3	1 0	<sub> </sub> F			
	IERKLE PARMA OH 44	4128				INCLUDE AREA CODE				
INJURIES	INJURED EMS AGENCY (NAME) TAKEN BY		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	SEATING I	POSITION AIR BAG USAGE	EJECTION	TRAPPED		
5				0 4	mc HELMET 0	3 1		1		
UNIT#	NAME: LAST, FIRST, MIDDLE PERSON		DATE OF BIRT		AGE 6	GENDER F				
4	et, city, state, zip 1ERKLE PARMA OH 44	/128			CONTACT PHONE - INCLUDE AREA CO	DDE		•		
INJURIES	INJURED EMS AGENCY (NAME)	4120	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING I	POSITION AIR BAG USAGE	EJECTION	TRAPPED		
5	TAKEN BY			USED 0 4	DOT-COMPLIANT MC HELMET	4	1 1	1		
UNIT#	NAME: LAST, FIRST, MIDDLE MORALES	IED	EMIAH		DATE OF BIRT	гн	AGE	GENDER		
	ET. CITY. STATE. ZIP	JEN	CONTACT PHONE - INCLUDE AREA CODE							
	IERKLE PARMA OH 44	4128								
INJURIES	INJURED EMS AGENCY (NAME) TAKEN BY		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING I	POSITION AIR BAG USAGE	EJECTION	TRAPPED		
5				_ 0 _ 6 _	MC HELMET 0	6		1		
1 - FATAL 2 - SUSPECTED SE 3 - SUSPECTED M 4 - POSSIBLE INJU 5 - NO APPARENT	IINOR INJURY JRY	3 - LAP BELT OF 4 - SHOULDER	CUPANT BELT ONLY USED NLY USED & LAP BELT USED RAINT SYSTEM-	1 - FRONT - LEFT SIDE (MOTORCYC 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCY 5 - SECOND - MIDDLE 6 - SECOND - MIDDLE 7 - THIRD - LEFT SIDE (MOTORCYCI	CLE PASSENGER)	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE				
1 - NOT TRANSPO TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKO F - FEMALE M - MALE U - OTHER UNKOK	SCENE NOWN GENDER OWN	6 - CHILD REST REAR FACIN 7 - BOOSTERS 18 8 - HELMET USI 9 - PROTECTIVI (ELBOWS, KN 10 - REFLECTIVI 11 - LIGHTING - / BICYCLE ON 99 - OTHER / UN	RAINT SYSTEM- G EAT ED EPADS USED HEES, ETC.) // CE (LOTHING /PEDESTRIAN NLY	8 - THIRD - MIDDLE 9 - THIRD - MIDDLE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENDLE (NON-TRAILING UNIT) 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT) 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	CAB SSED CARGO AREA P WITH CAP CARGO AREA R	9 - DEPLOYMENT UNKNOWN  ENERGY 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRA 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL 3 - FREED BY NON-MECHANICAL	PPEO MEANS MEANS	OEWINER		
TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKN F - FEMALE M - MALE	ORTED / SCENE NOWN GENDER OWN	REAR FACIN 7 - BOOSTER SI 8 - HELMET USI 9 - PROTECTIVI (ELBOWS, Ko 10 - REFLECTIV 11 - LIGHTING / BICYCLE ON	RAINT SYSTEM- G EAT ED EPADS USED HEES, ETC.) // CE (LOTHING /PEDESTRIAN NLY	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLE (NON-TRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST	CAB ISED CARGO AREA P WITH CAP) CARGO AREA	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRA 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL 3 - FREED BY NON-MECHANICAL	PPED.	GENDER		
TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKS F - FEMALE M - MALE U - OTHER/UNKNO	ORTED / SCENE NOWN GENDER OWN	REAR FACIN 7 - BOOSTER SI 8 - HELMET USI 9 - PROTECTIVI (ELBOWS, Ko 10 - REFLECTIV 11 - LIGHTING / BICYCLE ON	RAINT SYSTEM- G EAT ED EPADS USED HEES, ETC.) // CE (LOTHING /PEDESTRIAN NLY	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLE (NON-TRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST	CAB SSED CARGO AREA P WITH CAP CARGO AREA R	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL 3 - FREED BY NON-MECHANICAL	PPEO MEANS MEANS	GENDER		
TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKO  F - FEMALE M - MALE U - OTHER UNKOK	ORTED / SCENE  NOWN  GENDER  OWN  , MIDDLE  T, CITY, STATE, ZIP	REAR FACIN 7 - BOOSTER SI 8 - HELMET USI 9 - PROTECTIVI (ELBOWS, Ko 10 - REFLECTIV 11 - LIGHTING / BICYCLE ON	RAINT SYSTEM- G EAT ED EPADS USED HEES, ETC.) // CE (LOTHING /PEDESTRIAN NLY	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLE (NON-TRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST	CAB SSED CARGO AREA P WITH CAP) CARGO AREA R  DATE OF BIRT	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRA 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL 3 - FREED BY NON-MECHANICAL	PPEO MEANS MEANS	GENDER		
TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKN F - FEMALE M - MALE U - OTHER/UNKN NAME: LAST, FIRST,	ORTED / SCENE  NOWN  GENDER  OWN  , MIDDLE  , MIDDLE	REAR FACIN 7 - BOOSTER SI 8 - HELMET USI 9 - PROTECTIVI (ELBOWS, Ko 10 - REFLECTIV 11 - LIGHTING / BICYCLE ON	RAINT SYSTEM- G EAT ED EPADS USED HEES, ETC.) // CE (LOTHING /PEDESTRIAN NLY	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLE (NON-TRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST	CAB SSED CARGO AREA PWINT CAP) CARGO AREA   DATE OF BIRT  CONTACT PHONE - INCLUDE AREA	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRA 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL 3 - FREED BY NON-MECHANICAL	PPED  MEANS MEANS  MEANS  GE			
TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKN F - FEMALE M - MALE U - OTHERUNKNO  NAME: LAST, FIRST, ADDRESS: STREET	ORTED / SCENE  NOWN  GENDER  OWN  T, CITY, STATE, ZIP  MIDDLE  T, CITY, STATE, ZIP	REAR FACIN 7 - BOOSTER SI 8 - HELMET USI 9 - PROTECTIVI (ELBOWS, Ko 10 - REFLECTIV 11 - LIGHTING / BICYCLE ON	RAINT SYSTEM- G EAT ED EPADS USED HEES, ETC.) // CE (LOTHING /PEDESTRIAN NLY	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLE (NON-TRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST	CAB SED CARGO AREA PWITH CAP) CARGO AREA  CONTACT PHONE - INCLUDE AREA  CONTACT PHONE - INCLUDE AREA	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRA 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL 3 - FREED BY NON-MECHANICAL  TH A CODE	DE L	GENDER		
TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKN F - FEMALE M - MALE U - OTHER/UNKN  NAME: LAST, FIRST,  ADDRESS: STREET	ORTED / SCENE  NOWN  GENDER  OWN  T, CITY, STATE, ZIP  MIDDLE  T, CITY, STATE, ZIP	REAR FACIN 7 - BOOSTER SI 8 - HELMET USI 9 - PROTECTIVI (ELBOWS, Ko 10 - REFLECTIV 11 - LIGHTING / BICYCLE ON	RAINT SYSTEM- G EAT ED EPADS USED HEES, ETC.) // CE (LOTHING /PEDESTRIAN NLY	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLE (NON-TRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST	CAB SSED CARGO AREA PWINT CAP) CARGO AREA   DATE OF BIRT  CONTACT PHONE - INCLUDE AREA  DATE OF BIRT	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRA 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL 3 - FREED BY NON-MECHANICAL  TH A CODE	DE L			
TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKN F - FEMALE M - MALE U - OTHERUNKNC  NAME: LAST, FIRST, ADDRESS: STREET	ORTED / SCENE  NOWN  GENDER  OWN  , MIDDLE  T, CITY, STATE, ZIP  , MIDDLE	REAR FACIN 7 - BOOSTER SI 8 - HELMET USI 9 - PROTECTIVI (ELBOWS, Ko 10 - REFLECTIV 11 - LIGHTING / BICYCLE ON	raint system- G EAT ED EPADS USED HEES, ETC.) VIEC LOTHING PEDESTRIAN NLY	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLE (NON-TRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST	CAB SED CARGO AREA PWITH CAP) CARGO AREA  CONTACT PHONE - INCLUDE AREA  CONTACT PHONE - INCLUDE AREA	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRA 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL 3 - FREED BY NON-MECHANICAL  TH A CODE  TH A CODE	DE L	GENDER		

1P 1/19 [760· 1500]

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	SERVICE PROTECTION					$\begin{smallmatrix}2&&0&&2&&4&&0\\&&&&&&&&&&&&&&&&&&&&&&&&&&$	6   8   1				
unit#	NAME: LAST, FI		ANI	AYAH		DATE OF BIRT	2 <sub>1</sub> 0 <sub>1</sub> 1 <sub>1</sub> 9 <sub>1</sub>	AGE	GENDER		
ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DE		<u> </u>		
-		PARMA OH 44128									
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 7	DOT-COMPLIANT MC HELMET 0	POSITION AIR BAG USAN	E EJECTION	TRAPPED 1		
UNIT#	NAME: LAST, FI	RST, MIDDLE		1		DATE OF BIRT	Н	AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CO	CONTACT PHONE - INCLUDE AREA CODE				
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING	POSITION AIR BAG USAG	E EJECTION	TRAPPED		
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INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	POSITION AIR BAG USAG	E EJECTION	TRAPPED		
UNIT#	NAME: LAST, FI	RST, MIDDLE			<u> </u>	DATE OF BIRT	TH .	AGE	GENDER		
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ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DE I I	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 BAG USAG	E EJECTION	TRAPPED		
	L				L	MC HELMET					
1-FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY  1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN  GENDER  F - FEMALE M - MALE U - 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  EPADS USED  HEES, ETC.)  // CE (LOTHING  // PEDESTRIAN  NLY	2 - FRONT - NIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORC' 5 - SECOND - RIGHT SIDE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYC) 8 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLY (NON-TRAILING UNIT) BLOOK (NON-TRAILING UNIT) 13 - TRAILING UNIT) 14 - RIDING ON VEHICLE EXTERIO (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNIKNOWN	LE SIDE CAR)  CAB  SED CARGO AREA P WITH CAP)  CARGO AREA	NOT EJECTED     PARTIALLY EJECTED     TOTALLY EJECTED     NOT APPLICABLE	RAPPED CAL MEANS				
NAME: LAST, FIRST	T, MIDDLE					DATE OF BIRT	<b>H</b>	AGE	GENDER		
ADDRESS: STREE	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE ARE	A CODE				
NAME: LAST, FIRST	r, MIDDLE					DATE OF BIRT	H	AGE	GENDER		
ADDRESS AND	T CITY CTATE TO					CONTACT PHONE - INCLUDE AREA					
ADDRESS: STREE	i, GIIT, SIAIE, ZIP							1 1			
NAME: LAST, FIRST	r, MIDDLE					DATE OF BIRTH AGE GENDER					
							CONTACT PHONE - INCLUDE AREA CODE				
ADDRESS: STREET	T, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA	A CODE				

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