

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Private Property		LOCAL INFORMATION PARK AVENUE MUFFIN REPORTING AGENCY NAME * GARFIELD HEIGHTS		2 0 2 4 0 7 7 4	
COUNTY * 1 8		LOCALITY * 1 - CITY * 2 - VILLAGE * 3 - TOWNSHIP * 1		LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS	
CRASH DATE/TIME * 0 3 2 8 2 0 2 4		CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY 5		HITSKIP 1 - Solved 2 - Unsolved 2	
NUMBER OF UNITS 0 2		UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN 0 1			
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST Garfield		LOCATION ROAD NAME Garfield		ROAD TYPE B L	
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 8525		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 8525		ROAD TYPE 8 1 6 2 5 2 1 4	
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 3		DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		ROAD TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	
DISTANCE 1 - Miles 2 - Feet 3 - Yards		ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS		ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE	
INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA ROADWAY <input type="checkbox"/> ROADWAY DIVIDED		NUMBER OF APPROACHES 1			
LOCATION - FIRST DAMAGE EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 7 - ON RAMP 8 - OFF RAMP		MANNER OF CRASH COLLISION/IMPACT 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	
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 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	
LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN		WEATHER 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		CONTOUR 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER / UNKNOWN	
CONDITIONS 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN		SURFACE 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER / UNKNOWN			
NARRATIVE UNIT # 1 WAS TRAVELING IN UNKNOWN DIRECTION BETWEEN 4:00 A.M. AND THIS TIME OF REPORT AT 8525 GARFIELD BLVD. UNIT #2 WAS UNOCCUPIED AND LEGALLY PARKED IN THE LOT OF 8525 GARFIELD BLVD FACING EAST. REASONS UNKNOWN, UNIT # 1 COLLIDED WITH THE RIGHT FRONT OF UNIT # 2, THEN LEFT THE SCENE. UNIT # 2 WAS AT FINAL REST UPON ARRIVAL.					
CRASH REPORTED DATE/TIME 0 3 2 8 2 0 2 4		DISPATCH DATE/TIME 0 3 2 8 2 0 2 4		ARRIVAL DATE/TIME 0 3 2 8 2 0 2 4	
SCENE CLEARED DATE/TIME 0 3 2 8 2 0 2 4		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST			
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 1 7		OFFICER'S NAME * R. Cramer	
OFFICER'S BADGE NUMBER* 0 3 7		CHECKED BY OFFICER'S NAME* N. Rossi		CHECKED BY OFFICER'S BADGE NUMBER* S 1 3	
SUPPLEMENT (CORRECTION - ADDITION)					

OWNER

UNIT # 0 1 OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) UNKNOWN
 OWNER PHONE: INCLUDE AREA CODE (Same As Driver) _____
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver) _____ OH _____
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP _____ COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE _____

DAMAGE

DAMAGE SCALE

1 - NONE
2 - MINOR DAMAGE
9 - UNKNOWN

3 - FUNCTIONAL DAMAGE
4 - DISABLING DAMAGE

VEHICLE

LP STATE _____ LICENSE PLATE # _____ VEHICLE IDENTIFICATION # _____ VEHICLE YEAR _____ VEHICLE MAKE _____

INSURANCE VERIFIED INSURANCE COMPANY _____ INSURANCE POLICY # _____ VEHICLE COLOR _____ VEHICLE MODEL _____

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE US DOT # _____ TOWED BY: COMPANY NAME _____

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 0 1 VEHICLE WEIGHT GVWR/GCWR HAZARDOUS MATERIAL

1 - ≤10K LBS.
2 - 10,001 - 26K LBS.
3 - >26K LBS.

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 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIANSKATER
 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

of TRAILING UNITS _____

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? AUTONOMOUS MODE LEVEL

0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
 1 - YES 2 - NO 9 - OTHER / UNKNOWN 2 - PARTIAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION

1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER
 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 22 - GARBAGE/REFUSE
 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL 99 - OTHER / UNKNOWN
 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

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 9 - CARGO TANK 13 - AUTO TRANSPORTER
 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

VEHICLE DEFECTS

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

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

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 11 - SLOWING OR STOPPED IN TRAFFIC 99 - OTHER / UNKNOWN
 9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE

INITIAL POINT OF CONTACT

1 5 0 - NO DAMAGE 14 - UNDERCARRIAGE
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
 13 - TOP 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES

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 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION
 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 12 - IMPROPER BACKING

TRAFFIC

TRAFFICWAY FLOW

1 - ONE-WAY
2 - TWO-WAY

TRAFFIC CONTROL

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

SEQUENCE OF EVENTS

EVENTS

1 2 1 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

OF THROUGH LANES ON ROAD

2

RAIL GRADE CROSSING

1 3 - INVOLVED - PASSIVE CROSSING

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

UNIT / NON-MOTORIST DIRECTION

FROM 9 TO 9

1 - NORTH 5 - NORTHEAST
 2 - SOUTH 6 - NORTHWEST
 3 - EAST 7 - SOUTHEAST
 4 - WEST 8 - SOUTHWEST
 9 - OTHER / UNKNOWN

UNIT SPEED

DETECTED SPEED

3 1 - STATED/ESTIMATED SPEED
 2 - CALCULATED / EDR
 3 - UNDETERMINED

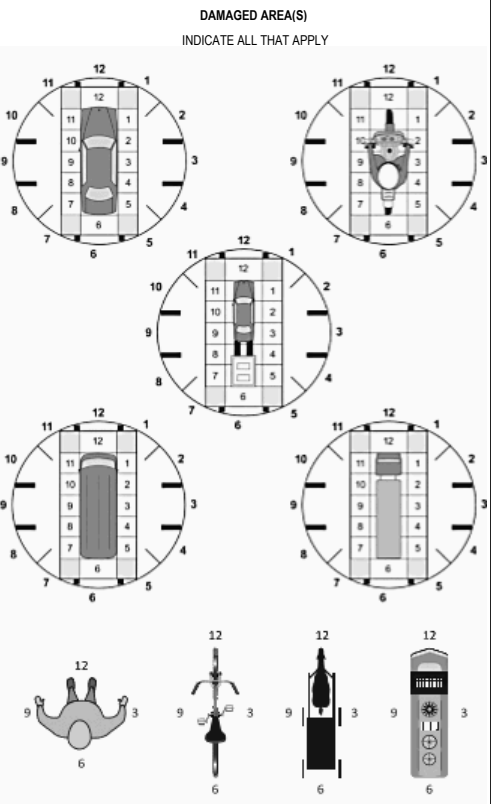
POSTED SPEED

1 5

OWNER INFORMATION: UNIT # 02, OWNER NAME: ORAHSKE MARK A, OWNER ADDRESS: 5089 TURNEY RD GARFIELD HTS OH 44125

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

VEHICLE IDENTIFICATION: LP STATE OH, LICENSE PLATE # JDT1822, VEHICLE IDENTIFICATION # 1GTGG215V571200483, VEHICLE YEAR 2007, VEHICLE MAKE GMC, VEHICLE MODEL Savana



VEHICLE TYPE: 05 PASSENGER CAR, INSURANCE POLICY #, VEHICLE COLOR WHI, HAZARDOUS MATERIAL, US DOT #, TOWED BY: COMPANY NAME

VEHICLE WEIGHT, OCCUPANTS 00, AUTONOMOUS MODE LEVEL 0, SPECIAL FUNCTION 01, CARGO BODY TYPE 01

VEHICLE DEFECTS: 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: 4, INTERSECTION - MARKED CROSSWALK

ACTION: 4, STRUCK, PRE-CRASH ACTION 10, STRAIGHT AHEAD

INITIAL POINT OF CONTACT: 01, 0-NO DAMAGE, 1-12-REFER TO UNIT DIAGRAM, 13-TOP, 14-UNDERCARRIAGE, 15-VEHICLE NOT AT SCENE, 99-UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 01, UNSAFE SPEED, 1-FAILURE TO YIELD, 2-FOLLOWING TOO CLOSE/ACDA, 3-CHANGING LANES, 4-OVERTAKING/PASSING, 5-MAKING RIGHT TURN, 6-MAKING LEFT 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, TRAFFIC CONTROL 6, 1-ROUNDABOUT, 2-SIGNAL, 3-FLASHER, 4-STOP SIGN, 5-YIELD SIGN, 6-NO CONTROL

SEQUENCE OF EVENTS: 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

RAIL GRADE CROSSING: 1, INVOLVED - ACTIVE CROSSING, 2, INVOLVED - PASSIVE CROSSING, 3, INVOLVED - PASSIVE CROSSING

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

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

UNIT SPEED: 0, POSTED SPEED: 15, DETECTED SPEED: 1, 1- STATED/ESTIMATED SPEED, 2- CALCULATED / EDR, 3- UNDETERMINED

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
2 0 2 4 0 7 7 4

UNIT # 0 1		NAME: LAST, FIRST, MIDDLE UNKNOWN			DATE OF BIRTH		AGE	GENDER U	
ADDRESS: STREET, CITY, STATE, ZIP OH					CONTACT PHONE - INCLUDE AREA CODE				
INJURIES 5		INJURED TAKEN BY		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 9 9	
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 9		ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA	
CONDITION		STATUS 1		ALCOHOL TEST TYPE 1		VALUE		STATUS 1	
DRUG TEST(S) 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	
CONDITION		STATUS		ALCOHOL TEST TYPE		VALUE		STATUS	
DRUG TEST(S) TYPE		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	
CONDITION		STATUS		ALCOHOL TEST TYPE		VALUE		STATUS	
DRUG TEST(S) 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 / UNUSABLE
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		1 - NOT EJECTED		1 - NONE		
2 - EMS		2 - PARTIALLY EJECTED		2 - BLOOD		
3 - POLICE		3 - TOTALLY EJECTED		3 - URINE		
9 - OTHER / UNKNOWN		4 - NOT APPLICABLE		4 - BREATH		
SAFETY EQUIPMENT		TRAPPED		5 - OTHER		
1 - NONE USED		1 - NOT TRAPPED		DRUG TEST TYPE		
2 - SHOULDER BELT ONLY USED		2 - EXTRICATED BY MECHANICAL MEANS		1 - NONE		
3 - LAP BELT ONLY USED		3 - FREED BY NON-MECHANICAL MEANS		2 - BLOOD		
4 - SHOULDER & LAP BELT USED				3 - URINE		
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING				4 - OTHER		
6 - CHILD RESTRAINT SYSTEM - REAR FACING				CONDITION		
7 - BOOSTER SEAT				1 - APPARENTLY NORMAL		
8 - HELMET USED				2 - PHYSICAL IMPAIRMENT		
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)				3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)		
10 - REFLECTIVE CLOTHING				4 - ILLNESS		
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY				5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		
99 - OTHER / UNKNOWN				6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL		
				9 - OTHER / UNKNOWN		
				DRUG TEST RESULT(S)		
				1 - AMPHETAMINES		
				2 - BARBITURATES		
				3 - BENZODIAZEPINES		
				4 - CANNABINOIDS		
				5 - COCAINE		
				6 - OPIATES / OPIOIDS		
				7 - OTHER		
				8 - NEGATIVE RESULTS		