

# 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"/> Private Property	<input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	LOCAL INFORMATION <b>BIBLE BAPTIST CHURCH</b> REPORTING AGENCY NAME * <b>GARFIELD HEIGHTS</b>	NCIC * <b>01820</b>	LOCAL REPORT NUMBER * <b>20241164</b>	HITSKIP <input type="checkbox"/> 1 - Solved <input type="checkbox"/> 2 - Unsolved	NUMBER OF UNITS <b>01</b>	UNIT IN EDDP <input type="checkbox"/> 98 - ANIMAL <input type="checkbox"/> 99 - UNKNOWN
--	---	--	------------------------	--	---	------------------------------	---

COUNTY *	LOCALITY *	LOCATION: CITY, VILLAGE, TOWNSHIP *	CRASH DATE/TIME *	CRASH SEVERITY
<b>18</b>	<b>1</b>	<b>GARFIELD HTS</b>	<b>05052024 1627</b>	<b>3</b>

ROUTE TYPE	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME	ROAD TYPE	LATITUDE (DEGREE, MINUTE, SECOND)
			<b>E 131ST</b>	<b>S T</b>	<b>41.435010</b>
ROUTE TYPE	ROUTE NUMBER	PREFIX	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE (DECIMAL DEGREES)
			<b>4592</b>		<b>-81.592777</b>

REFERENCE POINT	DIRECTION	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED
<b>3</b>		IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA <input type="checkbox"/> ROADWAY DIVIDED

LOCATION - FIRST DAMAGE EVENT	MANNER OF CRASH COLLISION/IMPACT	DIRECTION OF TRAVEL	MEDIAN TYPE
<b>01</b>	<b>1</b>		

WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE
<input type="checkbox"/>	<b>3</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>2</b>

LIGHT CONDITION	WEATHER	ROADWAY
<b>1</b>	<b>2</b>	

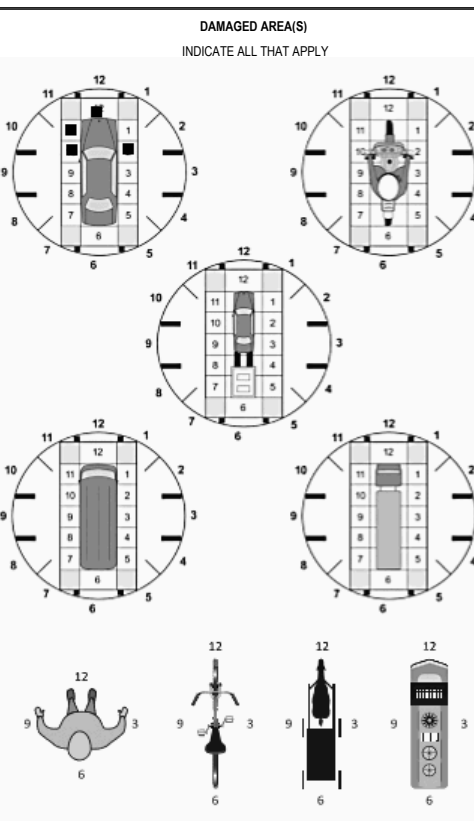
NARRATIVE <b>UNIT 1 WAS TRAVELING NORTHBOUND ON E 131ST ST.</b> <b>UNIT 1 DRIVER FELL ASLEEP CAUSING THE VEHICLE</b> <b>TO DRIVE OFF THE ROADWAY LEFT AND STRIKING A</b> <b>BUILDING.</b>	<p style="text-align: center;">Not To Scale</p>
---	---

CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME	REPORT TAKEN BY
<b>05052024 1627</b>	<b>05052024 1629</b>	<b>05052024 1630</b>	<b>05052024 1649</b>	<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME *	CHECKED BY OFFICER'S NAME *
<b>0</b>	<b>10</b>	<b>29</b>	<b>C. Cramer</b>	<b>M. Berdysz</b>
			OFFICER'S BADGE NUMBER *	CHECKED BY OFFICER'S BADGE NUMBER *
			<b>051</b>	<b>L14</b>

OWNER # 0 1 OWNER NAME: LAST, FIRST, MIDDLE (  Same As Driver )  
**DERISSIN STEVEN**  
 OWNER PHONE: INCLUDE AREA CODE (  Same As Driver )  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (  Same As Driver )  
**1302 Avenue K 3G BROOKLYN NY 11230**  
 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  
4

LP STATE O H LICENSE PLATE # KFR6166 VEHICLE IDENTIFICATION # 1N4A1L31A91FC2911121 VEHICLE YEAR 2015 VEHICLE MAKE Nissan  
 INSURANCE VERIFIED INSURANCE COMPANY \_\_\_\_\_ INSURANCE POLICY # \_\_\_\_\_ VEHICLE COLOR WHI VEHICLE MODEL Altima  
 COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_  
 INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT # OCCUPANTS 0 1 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 0 1  
 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

# 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  
 1 - PARTIAL AUTOMATION 2 - PARTIAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION 0 1  
 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER  
 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 22 - OTHER UNKNOWN  
 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL 23 - 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 0 1  
 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 10 - FLAT BED 14 - GARBAGE/REFUSE 15 - OTHER / UNKNOWN  
 11 - DUMP

VEHICLE DEFECTS 0 1  
 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 0 1  
 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 3  
 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 2  
 0 - NO DAMAGE 14 - UNDERCARRIAGE  
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
 99 - UNKNOWN  
 13 - TOP

CONTRIBUTING CIRCUMSTANCES 9 9  
 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** 2 **TRAFFIC CONTROL** 6  
 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN  
 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN  
 3 - FLASHER 6 - NO CONTROL

**SEQUENCE OF EVENTS**  
 1 0 9  
 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT  
 2 5 2  
 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  
 1 - NOT INVOLVED  
 2 - INVOLVED - ACTIVE CROSSING  
 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 2

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

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

# MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER  
2 0 2 4 1 1 6 4

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE DERISSIN STEVEN		DATE OF BIRTH 0 3 1 2 1 9 8 1		AGE 4 3	GENDER M					
ADDRESS: STREET, CITY, STATE, ZIP 1302 Avenue K 3G BROOKLYN NY 11230				CONTACT PHONE - INCLUDE AREA CODE							
INJURIES 3	INJURED TAKEN BY 1	EMS AGENCY (NAME) Garfield Heights FD	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 2	EJECTION 1	TRAPPED 1		
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER						
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 5	STATUS 1	ALCOHOL TEST TYPE 1	VALUE	STATUS 1	TYPE 1	DRUG TEST(S) 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	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER						
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION	STATUS	ALCOHOL TEST TYPE	VALUE	STATUS	TYPE	DRUG TEST(S) 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	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER						
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION	STATUS	ALCOHOL TEST TYPE	VALUE	STATUS	TYPE	DRUG TEST(S) 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
<b>INJURED TAKEN BY</b>		6 - SECOND - RIGHT SIDE	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	<b>ALCOHOL TEST TYPE</b>
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	7 - THIRD - LEFT SIDE	H - HAZMAT	7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	1 - NONE
2 - EMS	8 - THIRD - MIDDLE	8 - THIRD - MIDDLE	M - MOTORCYCLE	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	9 - THIRD - RIGHT SIDE	9 - THIRD - RIGHT SIDE	P - PASSENGER	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	3 - URINE
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	10 - SLEEPER SECTION OF TRUCK CAB	N - TANKER	10 - LIMITED TO DAYLIGHT ONLY		4 - BREATH
<b>SAFETY EQUIPMENT</b>		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	Q - MOTOR SCOOTER	11 - LIMITED TO EMPLOYMENT		5 - OTHER
1 - NONE USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	12 - PASSENGER IN UNENCLOSED CARGO AREA	R - THREE-WHEEL MOTORCYCLE	12 - LIMITED - OTHER		<b>DRUG TEST TYPE</b>
2 - SHOULDER BELT ONLY USED	13 - TRAILING UNIT	13 - TRAILING UNIT	S - SCHOOL BUS	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		1 - NONE
3 - LAP BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	T - DOUBLE & TRIPLE TRAILERS	14 - MILITARY VEHICLES ONLY		2 - BLOOD
4 - SHOULDER & LAP BELT USED	15 - NON-MOTORIST	15 - NON-MOTORIST	X - TANKER / HAZMAT	15 - MOTOR VEHICLES WITHOUT AIR BRAKES		3 - URINE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	99 - OTHER / UNKNOWN	99 - OTHER / UNKNOWN		16 - OUTSIDE MIRROR		4 - OTHER
6 - CHILD RESTRAINT SYSTEM - REAR FACING				17 - PROSTHETIC AID	<b>CONDITION</b>	<b>DRUG TEST RESULT(S)</b>
7 - BOOSTER SEAT				18 - OTHER	1 - APPARENTLY NORMAL	1 - AMPHETAMINES
8 - HELMET USED					2 - PHYSICAL IMPAIRMENT	2 - BARBITURATES
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)					3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	3 - BENZODIAZEPINES
10 - REFLECTIVE CLOTHING					4 - ILLNESS	4 - CANNABINOIDS
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY					5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	5 - COCAINE
99 - OTHER / UNKNOWN					6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	6 - OPIATES / OPIOIDS
					9 - OTHER / UNKNOWN	7 - OTHER
						8 - NEGATIVE RESULTS

# OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20241164	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 05   D 05   Y 2024
IN COUNTY OF 18	CRASH LOCATION BIBLE BAPTIST CHURCH	
<p>Damage done to Bible Baptist Church appeared to be very minor. Garfield Heights FD checked the building and believed no significant structural damage was done. The extent of the damage appeared to be some chipped bricks on the corner of the building.</p>		
OFFICER'S SIGNATURE <b>X</b>		BADGE NUMBER 051