OHO DEPARTMENT TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT							LOCAL REPORT NUMBER *					
PHOTOS TAKEN OH2 OH3 LOCAL INFORMATION LOCAL INFORMATION												
SECONDARY CRASH	OTHER REPO	HIT/SKIP 1 - Solved 2 - Unsolved	NIIMRED OF LINITS	0 1 98 - ANIMAL 99 - UNKNOWN								
COUNTY* LOCALIT		LOCATION: CITY, VILLAGE,	2 - Unsolved CRASH DA	CRASH SEVERITY								
1 8 1 1	1 - CHY * 2 - VILLAGE *	GARFIELD			<u> 0 5 2 0 2 0 2</u>	5 1- FATAL 2- SERIOUS INJURY						
ROUTE TYPE	ROUTE NUMBER	2	- SOUTH	ION ROAD NAME	ROAD TYPE	I ATITUDE DECIMA	SUSPECTED 3 - MINOR INJURY SUSPECTED					
Госати			- EAST - WEST SAX	ON	$\lfloor D \rfloor R \rfloor$	4 1 1 4 1 0 1 1 0 5 4 1 NIVIY POSS						
ROUTE TYPE	ROUTE NUMBER	2	- 500 In - FAST	ERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL	ONLY					
REFER			- WEST 5589			[8,1],[6,0,7,3,3,8]						
1 - INTERSECTION 2 - MILE POST	1 - NORTH	IR - INTERSTAT	. ,		RD - ROAD	INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH						
3 - HOUSE #	4 2-SOUTH 3-EAST 4-WEST	US - FEDERAL I SR - STATE RO CR - NUMBERE		BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL	SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL	☐ WITHIN INTERCH	NUMBER OF APPROACHES					
DISTANCE EDOM DECEDENCE	DISTANCE	TR - NUMBERE ROUTE			WA - WAY	NUMBER OF APPROACHES ROADWAY						
1 5	2 - Feet 3 - Yards					ROADWAY DIVIDED						
0 1 1 1-0N ROAL	CATION OF EIDST HADMEIN DWAY 9 - CROSSOVE		1 - NOT COLLIS	MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE				
3 - IN MEDIA 4 - ON ROAL	AN ACCESS DSIDE 11 - RAILWAY	GRADE	5 BETWEEN TWO MOTO VEHICLES I	F S ANCIE		1 - NORTH 2 - SOUTH	(<4 FI	ED FLUSH MEDIAN EET) ED FLUSH MEDIAN				
5 - ON GORE 6 - OUTSIDE TRAFFIC 7 - ON RAME	12 - SHARED L WAY OR TRAIL:	JSE PATHS S	TRANSPOR 2 - REAR-END 3 - HEAD-ON			3 - EAST 4 - WEST	(≥4 F 3 - DIVIE					
8 - OFF RAN		TH	3 - READ-ON	o oneth on the			(ANY	TYPE) R / UNKNOWN				
WORK ZONE RELATED WORKERS PRESENT	2 -	WORK ZONE TY LANE CLOSURE LANE SHIFT/CROSSOVER		LOCATION OF CRASH IN WORK ZO 1 - BEFORE THE 1ST WORK ZO WARNING SIGN	ONE ONE	CONTOUR	CONDITIONS	SURFACE				
LAW ENFORCEMENT PRESENT		WORK ON SHOULDER OR MEDIAN		2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE				
☐ ACTIVE SCHOOL ZONE		INTERMITTENT OR MOVIN OTHER	IG WORK	5 - TERMINATION AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW 4 - ICE	2 - BLACKTOP, BITUMINOUS, ASPHALT				
	CONDITION		1 - CLEAR	WEATHER 6 - SNOW		4 - CURVE GRADE 9 - OTHER /UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE				
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTI 4 - DARK - ROADI	.1.	E		MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	5 - DIRT 9 - OTHER /UNKNOWN							
	OWN ROADWAY LIGHTING		=									
NARRATIVE								Indicate the north				
UNIT 1 WAS E	BACKING OUT	OF DRIVE	EWAY LOCAT	ED AT				direction with an "N" on the compass diagram.				
5589 SAXON	DRIVE. UNIT	2 WAS PAF	RKED DIREC	TLY			· · · · · ·					
ACROSS FRO	OM UNIT 1. UN	IIT 1 BACK	ED INTO UN	IT 2								
CAUSING MINOR DAMAGE, UNIT 1 HAD MINOR												
DAMAGE TO BACK DRIVER SIDE PANEL AND BUMPER												
UNIT 2 SUFFERED MINOR DAMAGE TO BACK DRIVER												
SIDE PANEL A	AND TAILGATE	<u>.</u>										
						SAXON DRIVE	UNIT 2					
CRASH REPORTED			DISPATCH DATE/TIME	ARRIVAL DATE/TIME		1	RED DATE/TIME	REPORT TAKEN BY POLICE AGENCY				
TOTAL TIME ROADWAY	OTHER INVESTIGATION	TOTAL	2 U 2 4 1 8 OFFICER'S NAME *		CHECKED BY O							
CLOSED	TIME	MINUTES	Se. Sabelli	DFFICER'S BADGE NUMBER*	D. Bailey	CHECKED BY OFFICER'S BADGE NUMBER' CHECKED BY OFFICER'S BADGE NUMBER' CORRECTION_ADDITION						
0	1,5	3 6		2 6		L O 7						

OHIO DEPARTMENT OF PUBLIC SAFETY UNIT							LOCAL REPORT NUMBER					
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE GROZDANIC	OWNER P	PHONE: INCLUDE AREA CODE (Same As Driver)	DAMAGE DAMAGE SCALE						
NER	OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver)							1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE			
OW	5589	SAXON DR	-	GARFIEL		S OH 4		2 - MINOR DAMAGE	9 - UNKNOWN			
				DAMAGED AREA(S)								
	LP STATE	LICENSE PLATE # DEJ3235		/EHICLE IDENTIFICATION#	2,6,1,	VEHICLE YEAR	VEHICLE MAKE Mitsubishi	INDICATE ALL THAT APPLY				
	_ INSL	URANCE INSURANCE COMPANY	(INSURANCE POLICY#	VEHICLE COLOR VEHICLE MODEL			10 12	10 12 1			
	_ VE	TYPE OF USE		2187326 SFP 3		GRY D BY: COMPANY NAME	Endeavor	10 2				
	COMMER	CIAL GOVERNMENT	IN EMERGENCY RESPONSE	VEHICLE WEIGHT GVWR/GCWR	HAZARDOUS MATERIAL							
	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	7 6 5			
		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12 - GOLF CART 13 - SNOWMOBILE		6+ PASSENGERS) 24 -	PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE) OTHER NON- MOTORIST	10	11 1 2			
	0 1	3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE	14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY 22 - ANIMAI	EQUIPMENT 26 - L WITH RIDER OR 27 -	BICYCLE TRAIN	9 (9 3 3			
	UNIT TYPE	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMA	L-DRAWN VEHICLE 99 -	UNKNOWN OR HIT/SKIP	8	7 6 5 4			
VEHICLE		# OF TRAILING UNITS						11 12	5 11 12			
		WAS VEHICLE OPERATING IN AUTONO	DMOUS MODE 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE		IDITIONAL 9 -	UNKNOWN	10 1 1 2	2 10 11 1 2			
	2	WHEN CRASH OCCURED? 1 - YES 2 - NO 9 - OTHER / UNKNO	AUTONOMOUS	2 - PARTIAL AUTOMATION	4 - HIGH	OMATION H AUTOMATION L AUTOMATION		9 8 4]			
		1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FAI 17 - MO	WING 99	- MAIL CARRIER - OTHER /UNKNOWN	8 7 6 5	8 7 6 5 4			
	O 1 SPECIAL FUNCTION	13 - ELECTRONIC RIDE SHARING		18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL			6	12 12 12				
	FUNCTION			8 - POLE 12 - CONCRETE MIXER			12	<u> </u>				
	O 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS Y	MOTOR VEHICLE 4 - LOGGING	CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	9 - CA	RGO TANK 13 - AT BED 14 -	AUTO TRANSPORTER GARBAGE/REFUSE OTHER / UNKNOWN	, ,	9 3 9 8 3			
	TYPE		4.00.000		9 - MOTOR TROUBLE			6	+			
		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	10 - DIS ACC	SABLED FROM PRIOR CIDENT	OTHER / UNKNOWN		6 6 6			
	NON-MOTORIST	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI	IVEWAY ACCESS	FIRST RESPONDER AT INCIDENT SCENE OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	- UNDERCARRIAGE [14] - ALL AREAS [15]			
	LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE-OTHER LOCATION		TRA				NIT NOT AT SCENE [16]			
	2	1-NON-CONTACT 2-NON-COLLISION 0 2	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - EN	TERING OR CROSSING	- APPROACHING OR LEAVING VEHICLE - STANDING	ı	INITIAL POINT OF CONTACT			
		3 - STRIKING 4 - STRUCK PRE-CRASH 5 - BOTH STRIKING	1 3 - CHANGING LANES	10 - PARKED 11 - SLOWING OR STOPPED	15 - WA	20	- OTHER NON-MOTORIST - STANDING OUTSIDE DISABLED VEHICLE	0 7 0- NO DAMAG				
	Auton	& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS		RKING 99 SHING VEHICLE	- OTHER / UNKNOWN	DIAGRAN 13 - TOP				
									TRAFFIC			
		1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/ACDA	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED	18 - OPI	ERATING DEFECTIVE 22	LYING IN ROADWAY NOT DISCERNABLE OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN			
	11121	4 - RAN STOP SIGN 5 - UNSAFE SPEED	9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19 - LOA	AD SHIFTING/ LING/SPILLING	ROADWAY OTHER IMPROPER	1 - ONE-WAY	6 2 - SIGNAL 5 - YIELD SIGN			
	CONTRIBUTING	6 - IMPROPER TURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	zu - IMF	PROPER CROSSING	ACTION	# OF THROUGH LANES	3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING			
	CIRCUMSTANCES				_			ON ROAD	1 - NOT INVOLVED			
EVENT(S)	SEQUENCE OF EVENTS 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	17 - ANII	MAL - FARM	WORK ZONE MAINTENANCE EQUIPMENT					
		3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT	UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19 - ANII	MAL - OTHER	STRUCK BY FALLING, SHIFTING CARGO OR		INIT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST			
	2	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRA	INSPORT RKED MOTOR VEHICLE	ANYTHING SET IN MOTION BY A MOTOR VEHICLE		2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST			
	3 1			COLLISION WITH FIXED OBJECT	- STRUCK		OTHER MOVABLE OBJECT	FROM <u>3</u> то	4-WEST 8-SOUTHWEST			
		25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CUF		WORKZONE MAINTENANCE EQUIPMENT	HAUT ODESO	9 - OTHER / UNKNOWN			
		26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE		SANKMENT 51 - SCF 52 -	WALL BUILDING	UNIT SPEED	DETECTED SPEED			
	5	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAII 48 - TRE 49 - FIRE	E 54 -	TUNNEL OTHER FIXED OBJECT OTHER / UNKNOWN	0	1 - STATED/ESTIMATED SPEED			
		30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER		49 - FIRE HYDRANT			DOCTED COSES	2 - CALCULATED / EDR 3 - UNDETERMINED			
	6							POSTED SPEED				
	_ 1	FIRST HARMFUL EVENT	11	MOST HARMFUL EVENT				0				
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OHIO DEPARTMENT OF PUBLIC SAFETY UNIT								LOCAL REPORT NUMBER					
	UNIT#	(Z came to billion)							DAMAGE DAMAGE SCALE				
OWNER ADDRESS: STREET, CITY, STATE, ZIP 4329 DORSET DR BROOKI						TS OH 4		1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
NO		DORSET D	<u> </u>	14131 2027 EA CODE	2 2- MINOR DAMAGE	9 - UNKNOWN							
				DAMAGED AREA(S)									
	LP STATE	LICENSE PLATE # PLB6810		EHICLE IDENTIFICATION # $ 9 C 9 9 2 1 9 9$	9,5,5,	VEHICLE YEAR 2 0 0 9	VEHICLE MAKE GMC	INDICATE ALL THAT APPLY 12 12					
		JRANCE INSURANCE COMPANY RIFIED STATE FAI	•	INSURANCE POLICY# 1950027 SFP 35	VEHICLE COLOR VEHICLE MODEL 35 DGR Full Size Truck			10 12 1	2 10 11 12				
		TYPE of USE	IN EMEDICENCY	US DOT#	TOWED BY: COMPANY NAME			9 10 2 9	3 , 12 2 3				
	COMMERC		RESPONSE # OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	HAZARDOUS MATERIAL				4 8 4 7				
	INTERLO DEVICE EQUIPPE	☐ HIT/SKIP UNIT	0,0	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		MATERIAL RELEASED PLACARD	CLASS# PLACARD ID#	7 6 5	11 12 7 6 5				
	0 1	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK		S+ PASSENGERS) 24 -	PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE) OTHER NON- MOTORIST	10/	11 1 2				
	UNIT TYPE	3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR	22 - ANIMAL	. WITH RIDER OR 27 -	BICYCLE TRAIN UNKNOWN OR HIT/SKIP	9 9 3 3					
щ		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL	-BIANN VEHICLE 33	ON THE OWNER OF THE OWNER	12	7 6 5 4				
VEHICLE		# OF TRAILING UNITS						11 12	2 10 12				
		WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	DMOUS MODE 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE		DITIONAL 9 - DMATION	UNKNOWN	10 1 2	10 11 1 2				
	2	1-YES 2-NO 9-OTHER/UNKNO	AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION		AUTOMATION AUTOMATION		8 4 -					
	0 1	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FAF	WING 99	- MAIL CARRIER - OTHER /UNKNOWN	8 7 6 5					
		3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 5 - BUS-TRANSITI/COMMUTER 10 - AMBULANCE 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 - POI		CONCRETE MIXER	12	★ ♠ ≘				
	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 -	AUTO TRANSPORTER GARBAGE/REFUSE OTHER / UNKNOWN	, ,	9 3 9 3 9 3				
		1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES		OR TROUBLE 99 -	OTHER / UNKNOWN	6					
		2 - HEAD LAMPS 3 - TAIL LAMPS 1 - INTERSECTION -	5 - STEERING 6 - TIRE BLOWOUT 3 - INTERSECTION - OTHER	8 - TRAILER EQUIPMENT DEFECTIVE 6 - BICYCLE LANE	ACC	ABLED FROM PRIOR IDENT IANI/CROSSING ISLAND 12	FIRST RESPONDER	D NO DAMAGE IN	6 6 6				
	NON-MOTORIST	MARKED CROSSWALK 2 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI	VEWAY ACCESS RED USE PATHS OR 99	AT INCIDENT SCENE OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	- ALL AREAS [15]				
	IMPACT	UNMARKED CROSSWALK 1 - NON-CONTACT	5 - TRAVEL LANE-OTHER LOCATION 1 - STRAIGHT AHEAD	7 - MAKING U-TURN			- APPROACHING		IT NOT AT SCENE [16] NITIAL POINT OF CONTACT				
	4	2 - NON-COLLISION 3 - STRIKING		8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENT SPE	TERING OR CROSSING 19 CIFIED LOCATION 20	OR LEAVING VEHICLE - STANDING - OTHER NON-MOTORIST						
		4 - STRUCK PRE-CRASH ACTION 5 - BOTH STRIKING	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	10 - PARKED 11 - SLOWING OR STOPPED		GGING, PLAYING	- STANDING OUTSIDE DISABLED VEHICLE - OTHER / UNKNOWN	0 7 0 - NO DAMAGE	O UNIT 15 - VEHICLE NOT AT SCENE				
		& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN 12 - DRIVERLESS			SHING VEHICLE	On Eth Guide	DIAGRAM 13 - TOP	99 - UNKNOWN				
	1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM 17 - VISION					ION OBSTRUCTION 21	- LYING IN ROADWAY	TDAFFICIUMV	TRAFFIC				
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY	18 - OPE EQL	ERATING DEFECTIVE 22 JIPMENT 23	NOT DISCERNABLE OPENING DOOR INTO	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN				
	1011	4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	FAL	ID SHIFTING/ LING/SPILLING 99- ROPER CROSSING	ROADWAY - OTHER IMPROPER ACTION	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL				
	CONTRIBUTING CIRCUMSTANCES	IBUTING 12 - IMPROPER BACKING					#OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING					
<u>e</u>								_	1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING				
EVENT(S)	SEQUENCE OF		6 - EQUIPMENT FAILURE	EVENTS 11 - CROSS CENTERLINE -	16 . DAII	.WAY VEHICLE 22	- WORK ZONE	2	3 - INVOLVED - PASSIVE CROSSING				
	1 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	17 - ANIN 18 - ANIN	MAL - FARM MAL - DEER	MAINTENANCE EQUIPMENT - STRUCK BY FALLING,	U	NIT / 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 TRA	IOR VEHICLE IN NSPORT	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
				15 - PEDALCYCLE	21 - PAR	KED MOTOR VEHICLE 24	VEHICLE OTHER MOVABLE OBJECT	FROM 1 TO	3-EAST 7-SOUTHEAST				
	3			COLLISION WITH FIXED OBJECT					4 - WEST 8 - SOUTHWEST 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	43 - CUF 44 - DITC 45 - EMB	CH ANKMENT 51 -	WORKZONE MAINTENANCE EQUIPMENT 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	CE 52- BOX 53-	BUILDING TUNNEL OTHER FIXED OBJECT	. 0	1 - STATED/ESTIMATED SPEED				
	5	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	SUPPORT 42 - CULVERT	48 - TREI 49 - FIRE		OTHER / UNKNOWN		2 - CALCULATED / EDR				
	6							POSTED SPEED	3 - UNDETERMINED				
	. 1		1					, 0 , ,					
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OHIO DEPARTMENT	MOTORIST / NO	AN MOTODI	ст						LOCAL	REPORT NUMBER			
OF PUBLIC SAFETY SAPETY · SERVICE · PROTECTION	WOTORIST / NO	JN-WOTORI	31				_2	0 2 4	1	3 1 2	<u> </u>		
M UNIT # NAME: LAST, FIF	ST, MIDDLE											GENDER	
T 0 1 GRO	ZDANIC	RADMILA					0 9 1 9 1 9 1 9 5 4 6 9 F						
5 5589 SAXO	OH 4	4125	CONTACT	PHONE - INCLUDE AREA COD	NCLUDE AREA CODE								
5589 SAXON DR GARFIEL INJURIES INJURIES TAKEN TO: MEDICAL FACILITY (NAME) INJURIES TAKEN TO: MEDICAL FACILITY (NAME)				SAFETY EQU USED		Т	DOT-COMPLIAN	SEATING PO	SITION	AIR BAG USAGE	AG USAGE EJECTION TRAPPED		
<u>5</u>					0 4	_	MC HELMET	T 0 1 1 1 1			1 _1 _1		
OL STATE OPERATOR LIG	ENSE NUMBER	OFFENSE	CHARGED	CODE	OFFENSE DESCRIPT	TION				CITATION NUMB	ER		
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECT	TED .	CONDITION		ALCOH	OL TEST		D	RUG TEST(S)		
R SELECTUP TO 2		DISTRACTED BY	ALCOHOL M	ARIJUANA	1 .	STATUS 1	TYPE . 1	VALUE	STATI	JS TYPE	RESU	JLT SELECT UP TO 4	
			OTHER DRUG	Į L	ı	_1_	1_	DATE OF B	1 1	<u> </u>			
M UNIT# NAME: LAST, FIR	ST, MIDDLE							DATE OF BI	IKIH	l.	AGE	GENDER	
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CODE	<u> </u>				
I S													
TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MED	ICAL FACILITY (NAME, CITY)	SAFETY EQU USED	IIPMENT		DOT-COMPLIAN	SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED	
OL STATE OPERATOR LIG	ENCE NUMBER	OFFENSE (CHARGED	LOCAL	OFFENSE DESCRIPT		MC HELMET			CITATION NUMBI			
M O	ENSE NUMBER	OT ENGE	STANGED	CODE	T ENGE DEGORAL TO	ION				OTATION NOMBI			
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT	ED	CONDITION		ALCOHO				RUG TEST(S)		
R	1 11 1 11 1	BY		ARIJUANA		STATUS	TYPE	VALUE	STATU	S TYPE	RESUL	LT SELECT UP TO 4	
UNIT# NAME: LAST, FIR	ST. MIDDLE		OTHER DRUG	L				DATE OF B	IRTH		AGE	GENDER	
O								1 1 1	1 1	_ , _ , ,	1.1.1		
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CODE	=				
S T								1, 1, 1					
I INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQUI USED	PMENT		DOT-COMPLIAN	SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED	
OL STATE OPERATOR LIG	ENSE NUMBER	OFFENSE (CHARGED	LOCAL	OFFENSE DESCRIPT	TION	MC HELMET			CITATION NUMBI	ir		
M O				CODE	51 1 E110E DE001111 1								
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT	ED	CONDITION	STATUS	ALCOHO TYPE	DL TEST VALUE	STATU		RUG TEST(S)	JLT SELECT UP TO 4	
	1 11 1 11 1	BY	ALCOHOL MA OTHER DRUG	ARIJUANA	1		1 1	<u>-</u>					
INJURIES	SEATING POSITION	AIR BAG	OL C	LASS	l OL	RESTRICTION	N(S)	DRIVER DIS	TRACTION		TEST ST	TATUS	
1 - FATAL 2 - SUSPECTED SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED 2 - DEPLOYED FRONT	1 - CLASS A 2 - CLASS B		1 - ALCOHOL I DEVICE	INTERLOCK		1 - NOT DISTRACTED 2 - MANUALLY OPERATION	NG AN		T REFUSED		
3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C			2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES		ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING.		3 - TES	3 - TEST GIVEN, CONTAMINATED		
4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT	SIDE 4 - REGULAR CLASS (C	HIO = D) 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS				DIALING) 3 - TALKING ON HANDS-FREE			SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN		
	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	5 - NOT APPLICABLE 5 - M / C MOPED ONLY 9 - DEPLOYMENT UNKNOWN 6 - NO VALID OL			6 - EXCEPT CL & CLASS B		COMMUNICATION DEVICE			5 - TEST GIVEN, RESULTS UNKNOWN			
INJURED TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	- Controller			7 - EXCEPT TE 8 - INTERMED	RACTOR-TRAI		4 - TALKING ON HAND-H COMMUNICATION DE	VICE				
1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE					IONS		5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE					
2 - EMS 3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT	9 - LEARNER'S PERMIT RESTRICTIONS 10 - LIMITED TO DAYLIGHT				6 - PASSENGER 7 - OTHER DISTRACTION INSIDE			ALCOHOL TEST TYPE 1 - NONE		
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	2 - PARTIALLY EJECTED	M - MOTORCYCLE	OTORCYCLE ONLY				THE VEHICLE 8 - OTHER DISTRACTIONS OUTSIDE			2 - BLOOD		
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED 4 - NOT APPLICABLE	P - PASSENGER N - TANKER	12 - LIMITED - OTHER				THE VEHICLE			3 - URINE 4 - BREATH		
SAFETY EQUIPMENT 1 - NONE USED	12 - PASSENGER IN UNENCLOSED	A LLONDEL	Q - MOTOR SCOOTER		(SPECIAL B	CAL DEVICES BRAKES, HAND S, OR OTHER		9 - OTHER / UNKNOWN		5 - OT			
2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED	CARGO AREA 13 - TRAILING UNIT	TRAPPED 1 - NOT TRAPPED	R - THREE-WHEEL MO	TORCYCLE	ADAPTIVE I	DEVICES)	MIV						
F- SHOULDER & LAP BELT USED 14 - RIDING ON VEHICLE 5 - CHILD RESTRAINT SYSTEM - EXTERIOR		2 - EXTRICATED BY	S - SCHOOL BUS T - DOUBLE & TRIPLE 1	DOUBLE & TRIPLE TRAILERS							DRUG TEST TYPE 1 - NONE		
FORWARD FACING		MECHANICAL MEANS 3 - FREED BY	X - TANKER / HAZMAT	X - TANKER / HAZMAT 16 - OUT		WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR		CONDITION			2 - BLOOD		
REAR FACING	99 - OTHER / UNKNOWN	NON-MECHANICAL MEANS			17 - PROSTHE 18 - OTHER	TIC AID		1 - APPARENTLY NORM	AL	3 - URI 4 - OTH			
7 - BOOSTER SEAT 8 - HELMET USED								2 - PHYSICAL IMPAIRME 3 - EMOTIONAL (E.G. DE		. 311			
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)			GEN	DER				ANGRY, DISTURBED)		1.00	DRUG TEST	RESULT(S)	
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN			F - FEMALE M - MALE					4 - ILLNESS 5 - FELL ASLEEP, FAINT	ED,	2 - BAI	RBITURATES		
/ BICYCLE ONLY			M - MALE U - OTHER/UNKNOWN					FATIGUED, ETC.	105.05		NABINOIDS		
99 - OTHER / UNKNOWN								6 - LINDED THE INCLUSE					
99 - OTHER / UNKNOWN								6 - UNDER THE INFLUEN MEDICATIONS / DRUG /ALCOHOL		5 - CO 6 - OPI	CAINE ATES / OPIOIDS		
99 - OTHER / UNKNOWN										6 - OPI 7 - OTI	ATES / OPIOIDS HER		
99 - OTHER / UNKNOWN								MEDICATIONS / DRUG / ALCOHOL		6 - OPI 7 - OTI	ATES / OPIOIDS		

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