OF PUBLIC SAFETY TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT							LOCAL REPORT NUMBER *					
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION								[2 0 2 4 1 7 1 6				
SECONDARY CRASH OH-1P OTHER REPORTING AGENCY NAME* NCIC+ 10 1 8 2 0								HIT/SKIP 1 - Solved	MIMRED OF LIMITS	0 2 0 0 %-		
COUNTY* LOCALITY	COUNTY* LOCALITY* LOCATION: CITY WE LAGE YOUNGERD:						2 - Unsolved CRASH DA		CRASH SEVERITY			
1 1 8 1 1	1 - CITY * 2 - VILLAGE *	GARFIEL										
ROUTE TYPE	ROUTE NUMBER	PREFIX	IX 1 - NORTH LOCATION ROAD NAME ROAD TYPE 2 - SOUTH					SUSPECTED 1 ATTITUDE OCCURAN DEODECE 3MINOR INJURY SUSPECTED				
Госатіон			3- EAST 4- WEST Rockside				$R_{\perp}D_{\perp}$	4 1 . 4 2	4 - INJURY			
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST	2 - SOUTH REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)			ROAD TYPE	LONGITUDE DECIMAL		ONLY	(TT DAMAGE	
REFERENCE			4 - WEST	Turney			$\lfloor R_{\perp}D_{\perp}$	<u> </u>				
1 - INTERSECTION	DIRECTION 1 - NORTH	IR - INTER	STATE ROUTE (TP)		AL - ALLEY HW		RD - ROAD	INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH				
1 2 - MILE POST 3 - HOUSE #	3 - EAST 4 - WEST	SR - STAT	RAL US ROUTE E ROUTE BERED COUNTY ROU		BL - BOULEVARD MP - CR - CIRCLE OV -	- MILEPOST S - OVAL T	Q - SQUARE T - STREET E - TERRACE	☐ WITHIN INTERCH	NUMBER OF AP	NUMBER OF APPROACHES		
DISTANCE	DISTANCE		BERED TOWNSHIP		DR - DRIVE PI - I		L - TRAIL VA - WAY					
L1 L0 L	2 - Feet 3 - Yards							□ ROADWAY DIVIDED				
	ATION OF EIDET HADMEIII WAY 9 - CROSSOVE				IANNER OF CRASH COLLISIO			DIRECTION OF TRAVEL		MEDIAN TYPE		
0 1 1 2- ON ROADS 2- ON SHOUL 3- IN MEDIAN 4- ON ROADS	N ACCESS ISIDE 11 - RAILWAY	GRADE	6	1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN	4 - REAR-TO-RI 5 - BACKING 6 - ANGLE	EAR		1 - NORTH 2 - SOUTH	(<4 F	DED FLUSH MEDIAN EET) DED FLUSH MEDIAN		
5 - ON GORE 6 - OUTSIDE TRAFFICW	12 - SHARED U VAY OR TRAIL	JSE PATHS S		TRANSPORT 2 - REAR-END	7 - SIDESWIPE 8 - SIDESWIPE 9 - OTHER / UN	, OPPOSITE DIRECTION		3 - EAST 4 - WEST	EET)	T) D, DEPRESSED MEDIAN		
7 - ON RAMP 8 - OFF RAMF		TH		3 - HEAD-ON	9-OTHER/ON	INNOWN			(ANY	TYPE) ER / UNKNOWN		
WORK ZONE RELATED WORKERS PRESENT		WORK ZON LANE CLOSURE LANE SHIFT/CROSS			LOCATION OF (1 - BEFORE WARNIN	CRASH IN WORK ZON THE 1ST WORK ZON IG SIGN	E E	CONTOUR	CONDITIONS	S	SURFACE	
LAW ENFORCEMENT PRESENT	3-	WORK ON SHOULDI OR MEDIAN	ER		2 - ADVANO 3 - TRANSIT 4 - ACTIVIT	E WARNING AREA TION AREA Y AREA		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCR		
ACTIVE SCHOOL ZONE		INTERMITTENT OR N OTHER	IOVING WORK		5 - TERMIN	ATION AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW 4 - ICF	2 - BLACKT BITUMII ASPHAL	TOP, NOUS,	
	CONDITION				WEATHER			4 - CURVE GRADE 9 - OTHER /UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING,	3 - BRICK/E 4 - SLAG, O STONE	BLOCK	
1 - DAYLIGHT 1 - CLEAR 6 - SNOW 2 - DAWN/DUSK 2 - CLOUDY 7 - SEVERE CROSSWINDS 3 - DARK - LIGHT DROADWAY 3 - FOS, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW							MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	5 - DIRT 9 - OTHER /UNKNO	WN			
4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 4 - RAIN 9 - FREEZING RAIN OF FREEZING DRIZZLE 5 - SLEET, HAIL 99 - OTHER / UNKNOWN												
NARRATINE									icate the north			
UNIT # 1 WAS TRAVELING IN A SOUTHEAST DIRECTION direction with an "N" on the compass diagram.												
ONTO THE IN	SIDE LANE O	F ROCK	SIDE RD					**** v. 130 X4.				
APPROXIMATI	ELY 10' EAST	OF TUF	RNEY RD	. UNIT#	2			Rockside Rd	 	6009 Turne	y	
WAS TRAVELING IN A SOUTHEAST DIRECTION ONTO							arking Lot					
THE OUTSIDE LANE OF ROCKSIDE RD.												
APPROXIMATELY 10' EAST OF TURNEY RD AS A												
RESULT, THE RIGHT FRONT OF UNIT # 1-COLLIDED												
WITH THE LEFT SIDE OF UNIT # 2. BOTH UNITS LEFT							7					
SCENE AND REPORTED FOLLOWING DAY.												
NOTE: SEE OH-2 North							h	1				
Not To Scale												
						, ,					, ,.	
CRASH REPORTED		1016121	7 2 0 2 4	e/time 		ARRIVAL DATE/TIME	11 5 0 6	1	P141 111513141	POLICE A	RT TAKEN BY GENCY	
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S	NAME *			CHECKED BY OF					
0.000			R. Cr		R'S BADGE NUMBER*		N. Rossi	CHECKED BY OFFICER'S BADGE NUMBER* CHECKED BY OFFICER'S BADGE NUMBER* (CORRECTION.ADDITION. TO ADDITION.				
	_4 1	$\lfloor 6 \rfloor 9 \rfloor$	_	0 3	7			$[S_1 1_1 3_1]$				

	OH OF MPET	IO DEPARTMENT PUBLIC SAFETY TY - SERVICE - PROTECTION						2,0,2,4,1	LOCAL REPORT NUMBER		
	UNIT# OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) OWNER PHONE: NCLIDE AREA CODE (Same As Driver)						DAMAGE DAMAGE SCALE				
ER	OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver)							1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE		
OW	14319 TABOR AVE MAPLE HEIGHTS OH 44137 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE							2 2-MINOR DAMAGE	9 - UNKNOWN		
	COMMERCIAL CA	RRIER: NAME, ADDRESS, CITT, STATE, ZIP		AREA GODE		DAMAGED AREA(S)					
Ī	LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE O H JME3777							INDICATE ALL THAT APPLY			
	OH	JME3777 INSURANCE COMPANY		ISLI U IMLE U 7 5 9 INSURANCE POLICY#	9 / /	VEHICLE COLOR	Chevrolet VEHICLE MODEL	11 12 1	11 12		
		TYPE of USE			1	WHI	Malibu	10 11 2	2 10 11 1 2		
	☐ COMMERC	COMMERCIAL GOVERNMENT RESPONSE		US DOT #	TOWED	BY: COMPANY NAME		9 9 3), , , , , , , , ,		
	INTERLOCK DEVICE HIT/SKIP UNIT EQUIPPED		# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	MATERIAL RELEASED		MATERIAL CLASS# PLACARD ID#	7 6 5	4 8 7 6 5 5 4		
	Egon i E	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12 - GOLF CART		IVERY VEHICLE)	23 - PEDESTRIAN/SKATER	10 /	11 12 2		
	0 1	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK	20 - OTHER	VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST 26 - BICYCLE	9 (- 10 2 9 3		
	UNIT TYPE	4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME			27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	8 4 7			
/EHICLE			(ATV / UTV)					11 12 1	7 6 5 11 12		
VEHI		# OF TRAILING UNITS						10 12	2 10 11 12		
		WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	MOUS MODE 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	AUTO	OMATION	9 - UNKNOWN	9 10 2			
	2	1-YES 2-NO 9-OTHER/UNKNOW	WN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION		AUTOMATION AUTOMATION		8 7 4 5	4 7 9 7		
	O 1 2 - TAXI 7 - BUS - INTERCITY		11 - FIRE 12 - MILITARY 13 - POLICE	16 - FAF 17 - MO		21 - MAIL CARRIER 99 - OTHER /UNKNOWN	7 6 5	7 5			
		4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY AL 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT		19 - TO\			•	12 12 12			
		1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMIDIAL CONTAINE CHASSIS CHA		5 - INTERMODAL CONTAINER	9 - CARGO TANK 13 - AUTO TRANSPORTER 15 - DED BOX 10 - FLAT BED 14 - GARBAGE/REFUSE		12	1 1 1			
	0 1						, ,	9 3 9 8 3			
	ТҮРЕ										
	VEURIE			8 - TRAILER EQUIPMENT	10 - DISABLED FROM PRIOR ACCIDENT		99 - OTHER / UNKNOWN		6 6 6		
		1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE	10 - DRI	VEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	☐ - UNDERCARRIAGE [14] ☐ - ALL AREAS [15]		
	LOCATION AT IMPACT	ON-MOTORIST 2 - INTERSECTION - 5 - TRAVEL LANE-OTHER LOCATION UMMARKED 5 - TRAVEL LANE-OTHER LOCATION		6 - SIDEWALK	TRA				IT NOT AT SCENE [16]		
		1 - NON-CONTACT 2 - NON-COLLISION 0 1 6	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	14 - ENT	GOTIATING A CURVE FERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	11	NITIAL POINT OF CONTACT		
	_	3 - STRIKING 4 - STRUCK PRE-CRASH	3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	NNE SPECIFIED LOCATION 20 - OTHER NON-MOTORIST 15 - WALKING, RUNNING, 21 - STANDING OUTSIDE		0 1 0 - NO DAMAGE 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE				
		5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	Dioribes		DISABLED VEHICLE 99 - OTHER / UNKNOWN	1-12 - REFER TO DIAGRAM 13 - TOP	O UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN		
		9 - OTHER / UNKNOWN			11-100	STING VEHICLE		13 - TOP			
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM A PARKED POSITION			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 CHANGING	14 - STOPPED OR PARKED ILLEGALLY	EQL 19 - LOA	JIPMENT AD SHIFTING/	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN		
		5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY		LING/SPILLING ROPER CROSSING	99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES		12 - IMPROPER BACKING					# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING		
IT(S)	SEQUENCE OF	EVENTS						[1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING		
EVEN			6 FOURDMENT FAILURE	EVENTS 11 - CROSS CENTERLINE -	16 - DAII	.WAY VEHICLE	22 - WORK ZONE	5	3 - INVOLVED - PASSIVE CROSSING		
	1 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL	17 - ANI	MAL - FARM MAL - DEFR	MAINTENANCE EQUIPMENT	U	NIT / NON-MOTORIST DIRECTION		
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOTOR VEHICLE IN ANYTHING SET I		SHIFTING CARGO OR ANYTHING SET IN		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST		
		LOSS OR SHIFT	IV - UNUGO MEDIAN	15 - PEDALCYCLE		KED MOTOR VEHICLE	MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE	500M 4	3 - EAST 7 - SOUTHEAST		
	3			COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT	FROM 1 TO	3 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	39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	46 - FEN	CE	51 - WALL 52 - BUILDING 53 - TUNNEL		DETECTED OF LED		
	5	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAIL 48 - TREI 49 - FIRE	E .	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	_5	1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR		
	6	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER					POSTED SPEED	3 - UNDETERMINED		
	_ 1	FIRST HARMFUL EVENT	1	OST HARMFUL EVENT				3 5			
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SAPETY - SERVICE	ARTMENT C SAFETY UNIT	LOCAL REPORT NUMBER								
UNII #	NER NAME: LAST, FIRST, MIDDLE PIERCE SAMA	(■ Same ANTHA MARIE	DAMAGE DAMAGE SCALE							
Z	OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver) 4924 E 111TH ST GARFIELD OH 44125						1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE								9 - UNKNOWN		
								DAMAGED AREA(S) INDICATE ALL THAT APPLY		
	O_H_J JWM2123 3_K_P_F_2_4_A_D_X_P_E_5_3_0_6_5_3_ 2_0_2_3_ Kia						11 12 1	INDICATE ALL THAT APPLY		
INSURANCE VERIFIED	INSURANCE COMPANY Geico		insurance policy# 6160084767		VEHICLE COLOR BLK	VEHICLE MODEL Forte	10 12	2 10 11 1		
COMMERCIAL	TYPE OF USE US DOT # COMMERCIAL GOVERNMENT RESPONSE			TOWED	BY: COMPANY NAME	-1	9 9 3	3 9 9 3		
INTERLOCK DEVICE HIT/SKIP UNIT		# OCCUPANTS	VEHICLE WEIGHT GWWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	MATERIAL RELEASED		IATERIAL CLASS# PLACARD ID#	8 5 5	8 7 5 5 4 7 5 5 5 5		
1 - PASS	1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE)			VERY VEHICLE)	:3 - PEDESTRIAN/SKATER	10/	1 1 2			
	RT UTILITY VEHICLE 9 -	- MOTORCYCLE 3-WHEELED - AUTOCYCLE - MOPED OR MOTORIZED	14 - SINGLE UNIT TRUCK	0 - OTHER \ 1 - HEAVY E	VEHICLE 2	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST 16 - BICYCLE 27 - TRAIN	9 2 3 3			
UNIT TYPE 5 - CARG 6 - VAN (- ALL TERRAIN VEHICLE (ATV / UTV)	16 - FARM EQUIPMENT 17 - MOTORHOME			:? - TRAIN 19 - UNKNOWN OR HIT/SKIP	7,	8 4 7 5 74		
# OF TR	RAILING UNITS						11 12 1	7 6 5 11 12 1		
WAS VE	HICLE OPERATING IN AUTONOMOU	US MODE 0	0 - NO AUTOMATION	3 - COND	DITIONAL	9 - UNKNOWN	10 11 1	2 10 11 1 2		
2 WHEN C	CRASH OCCURED? 2 - NO 9 - OTHER / UNKNOWN	AUTONOMOUS MODE LEVEL	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTO 4 - HIGH	MATION AUTOMATION AUTOMATION		9 9 3 4 7 5	3 9 9 3 4 7 5 4		
	0 1 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 3 - BUS - SHUTTLE 13 - POLICE		12 - MILITARY 13 - POLICE		/ING W REMOVAL	21 - MAIL CARRIER 99 - OTHER /UNKNOWN	7 6 5	7 6 5		
SPECIAL 5 - BUS-TE	4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING 5 - BUS - TRANSITICOMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL				12 12 12					
0 1 /NOT	O 1 1 - NO CARGO BODY TYPE NOTA APPLICABLE NOTA APPLICABLE SHOULD A CONTAINER CHASSIS 4 - LOGGING 5 - CARGO WANLENCLOSED BOX TYPE 4 - LOGGING 5 - CARGO WANLENCLOSED BOX 7 - GRAINCHIPSGRAVEL		CHASSIS	8 - POLE 12 - CONCRETE MIXER 9 - CARGO TANK 13 - AUTO TRANSPORTER (10 - FLAT BED 14 - CARBAGE/BEFUSE 11 - DUMP 99 - OTHER / UNKNOWN		3 - AUTO TRANSPORTER	A A R.			
CARGO BODY						,609,	9 3 9 7 3 9 8 3			
VEHICLE 2 - HEAD L DEFECTS 1 - TAIL LA	LAMPS 5 -	BRAKES STEERING TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT		9 - OTHER / UNKNOWN	6	6 6 6		
1 - INTERS MARKE CROSS NON-MOTORIST	ED 4-1 SWALK	INTERSECTION - OTHER MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	9 - MEDIANICROSSING ISLAND 12 - FIRST RESPONDER 10 - DRIVEWAY ACCESS AT INCIDENT SCENE 11 - SHARED USE PATHS OR 99 - OTHER / UNKNOWN		AT INCIDENT SCENE	- NO DAMAGE [0] - TOP [13]	☐ - UNDERCARRIAGE [14] ☐ - ALL AREAS [15]		
LOCATION AT UNMAR CROSS	SECTION - 5 -	TRAVEL LANE-OTHER LOCATION	0-SIDEMALK	TRAIL	LS		-	IIT NOT AT SCENE [16]		
1 - NON-CI 2 - NON-CI	COLLISION . O . 3 2-	STRAIGHT AHEAD BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTE	OTIATING A CURVE ERING OR CROSSING IFIED LOCATION	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	II.	NITIAL POINT OF CONTACT		
4 - STRUC ACTION 5 - BOTH S	CK PRE-CRASH 4.	CHANGING LANES OVERTAKING/PASSING MAKING RIGHT TURN	10 - PARKED 11 - SLOWING OR STOPPED	15 - WALKING, RUNNING, 21 - STANDING OUTSIDE JOGGING, PLAYING DISABLED VEHICLE		DISABLED VEHICLE	0 8 0 - NO DAMAGE 14 - UNDERCARRIAGE 1.12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE			
& STRU		MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS		KING HING VEHICLE	99 - OTHER / UNKNOWN	DIAGRAM 99 - UNKNOWN 13 - TOP			
	-	LEET OF CENTED	42 HADDODED OTTOT FOR	42 100.0	ON OBSTRUCTION	24 . I VING IN DOADWAY		TRAFFIC		
3 - RAN RE	RE TO YIELD 8 - ED LIGHT (FOLLOWING TOO CLOSE/ACDA	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED	18 - OPEF EQUI	RATING DEFECTIVE PMENT	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN		
2 2 5 - UNSAFI 6 - IMPROF	E SPEED 10 -	IMPROPER LANE CHANGING - IMPROPER PASSING - DROVE OFF ROAD	ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	FALL	O SHIFTING/ ING/SPILLING OPER CROSSING	ROADWAY 99 - OTHER IMPROPER ACTION	1 - ONE-WAY 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
CONTRIBUTING CIRCUMSTANCES		- IMPROPER BACKING					# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING		
SEQUENCE OF EVENTS	•						_	1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING		
SEQUENCE OF EVENTS		EQUIPMENT FAILURE	EVENTS 11 - CROSS CENTERLINE -	16 - PAII V	NAY VEHICLE	22 - WORK ZONE	5	3 - INVOLVED - PASSIVE CROSSING		
1 2 0 2-FIRE/EX	XPLOSION 7 - SION L	SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	17 - ANIM. 18 - ANIM.	AL - FARM AL - DEER	MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	U	NIT / NON-MOTORIST DIRECTION		
) / EQUIPMENT 9 -	RAN OFF ROAD RIGHT RAN OFF ROAD LEFT - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	19 - ANIMAL - OTHER 23 - STRUCK BY FAL 20 - MOTOR VEHICLE IN ANYTHING SET TRANSPORT MOTION BY A M		SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST		
			15 - PEDALCYCLE	21 - PARK	ED MOTOR VEHICLE	VEHICLE 24 - OTHER MOVABLE OBJECT	from 1 to	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST		
3	OT ATTEMUATOR	CHADDDAIL END	COLLISION WITH FIXED OBJECT -	STRUCK 43 - CURE	3	50 -WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN		
4 / CRAS 26 - BRIDG	SH CUSHION 32 - GE OVERHEAD 33 -	PORTABLE BARRIER MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	44 - DITCH 45 - EMBA	H NKMENT	EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED	DETECTED SPEED		
27 - BRIDG 28 - BRIDG	GE PIER OR ABUTMENT GE PARAPET 35 -	BARRIER MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	46 - FENC 47 - MAILE 48 - TREE	BOX	53 - TUNNEL 54 - OTHER FIXED OBJECT	5 1	1 1-STATED/ESTIMATED SPEED		
29 - BRIDG 30 - GUARI	GE RAIL		42 - CULVERT	49 - FIRE I		99 - OTHER / UNKNOWN		2 - CALCULATED / EDR 3 - UNDETERMINED		
6							POSTED SPEED			
1 _{FIRST}	THARMFUL EVENT	1 _{1 Mos}	ST HARMFUL EVENT				3 5			
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OHIO DEPARTMENT	MOTODICT / N/	AN MATADI	CT					LOCAL REPORT NU	JMBER			
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	MOTORIST / NO	JN-MOTORI	31			_ 2 _	0 2 4	1 7 1	6			
M UNIT # NAME: LAST, FII	ST, MIDDLE									GENDER		
DAU	DAUGHERTY LINELL THOMAS							0 8 2 3 1 9 8 2 4 1 M				
ADDRESS: STREET, CITY, STATE, ZIP TAROL						CONTACT F	PHONE - INCLUDE AREA CODE					
14319 17001	OR AVE MAPLE HEIGHTS OH 44137 EMS AGENCY (NAME) INJURED TAKEN TO. MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT						SEATING POSITI	ON AIR BAG	G USAGE EJECT	ION TRAPPED		
5 Janear								1	1	1 1		
	CENSE NUMBER	OFFENSE (CHARGED		FENSE DESCRIPTION			CITATIO	N NUMBER			
W				CODE								
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE		CONDITION	ALCOHO S TYPE	L TEST VALUE	STATUS	DRUG TEST(S) TYPE R	ESULT SELECT UP TO 4		
s 4			ALCOHOL MAI	RUUANA	9 1	լ լ 1 .	_	1	1			
M UNIT# NAME: LAST, FI	RST, MIDDLE					1	DATE OF BIRTH	1	AGE	GENDER		
0 2 PIER	CE	SAMANTHA	MARIE	<u> </u>		[0] 1	1 7 2	0 0 1	_ 2 3	」 F		
R ADDRESS: STREET, CITY, STATE, ZIP						CONTACT P	HONE - INCLUDE AREA CODE					
s 4924 E 1117			ARFIELD	OH 44			<u> </u>					
INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDI	ICAL FACILITY (NAME, CITY)	SAFETY EQUIPM USED		DOT-COMPLIANT MC HELMET		ON AIR BAG				
O 5 OPERATOR LI	CENSE NUMBER	OFFENSE O	CHARGED	LOCAL OFF	0 4 FENSE DESCRIPTION	- MC HELMET	0 1	CITATIO	N NUMBER	_ 1		
M O	AND NOMBER			CODE								
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE		CONDITION	ALCOHOL			DRUG TEST(S)			
R		BY 1	ALCOHOL MAR	RIJUANA	9 status	TYPE 1	VALUE		TYPE RE	SULT SELECT UP TO 4		
		_ ' _	OTHER DRUG			<u> </u>	DATE OF BIRTH		AGE	GENDER		
M UNIT# NAME: LAST, FII O	ST, MIDDLE					l	DATE OF BIRT		AGE	GENDER		
R ADDRESS: STREET, CITY, STATE, ZIP						CONTACT P	HONE - INCLUDE AREA CODE					
I S						I		1 1	1 1	1 1 1		
INJURIES INJURED TAKEN	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDIC	CAL FACILITY (NAME, CITY)	SAFETY EQUIPM USED	ENT	DOT-COMPLIANT	SEATING POSITIO	ON AIR BAG	USAGE EJECT	ION TRAPPED		
				l		MC HELMET				_		
OL STATE OPERATOR LIG	CENSE NUMBER	OFFENSE C	CHARGED	LOCAL OF	FENSE DESCRIPTION		<u>.</u>	CITATIO	N NUMBER	,		
O OLCLASS ENDORSEMENT												
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTE ALCOHOL MAR	RIJUANA	CONDITION	ALCOHOL S TYPE	VALUE	STATUS	TYPE RI	ESULT SELECT UP TO 4		
s T			OTHER DRUG				•					
INJURIES 1 - FATAL	SEATING POSITION 1 - FRONT - LEFT SIDE	AIR BAG	OL CL 1 - CLASS A	ASS	OL RESTRICTI		DRIVER DISTRA 1 - NOT DISTRACTED	ACTION	1 - NONE GIVEN	T STATUS		
2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER)	1-NOT BET EOTED	1 02.00%			•	I - NOT DISTRACTED					
3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE		2 - CLASS B		DEVICE		2 - MANUALLY OPERATING		2 - TEST REFUSED			
4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE	2 - CLASS B 3 - CLASS C		DEVICE 2 - CDL INTRASTATE ONL 3 - CORRECTIVE LENSES		2 - MANUALLY OPERATING A ELECTRONIC COMMUNIC DEVICE (TEXTING, TYPING	CATION	2 - TEST REFUSED 3 - TEST GIVEN, CON			
5 - NO APPARENT INJURY			3 - CLASS C 4 - REGULAR CLASS (OF	HIO = D)	2 - CDL INTRASTATE ONL		ELECTRONIC COMMUNIC DEVICE (TEXTING, TYPING DIALING)	CATION G,	2 - TEST REFUSED 3 - TEST GIVEN, CON SAMPLE / UNUSAE	BLE		
5 - NO APPARENT INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE	3 - CLASS C 4 - REGULAR CLASS (OF 5 - M / C MOPED ONLY	HIO = D)	2 - CDL INTRASTATE ONL 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A		ELECTRONIC COMMUNIC DEVICE (TEXTING, TYPING	CATION G,	2 - TEST REFUSED 3 - TEST GIVEN, CON	ULTS KNOWN		
5 - NO APPARENT INJURY INJURED TAKEN BY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCL F ASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT /	3 - CLASS C 4 - REGULAR CLASS (OF	HIO = D)	2 - CDL INTRASTATE ONL 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTOR-TR	S RAILER	ELECTRONIC COMMUNIC DEVICE (TEXTING, TYPING DIALING) 3 - TALKING ON HANDS-FRE	CATION 3, EE E	2 - TEST REFUSED 3 - TEST GIVEN, CON SAMPLE / UNUSAE 4 - TEST GIVEN, RESI	ULTS KNOWN		
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OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20241716	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 06 D 26 Y 2024		
IN COUNTY OF	CRASH LOCATION	W 00 D 20 1 2024		
During the investigation, thi	s officer spoke with both drivers and observed b	oth		
vehicles.				
Unit # 1 was turning left from	m Turney Rd onto eastbound Rockside Rd. in th	e inside		
lane. Unit # 2 was directly b	pehind Unit # 1. Unit # 1 attempted to continue the	rough the		
left turn , into outside lane,	and into the parking lot of 6009 Turney Rd. Unit	# 2 passed		
Unit # 1 on the right and into	o the outside lane to continue east on Rockside	Rd.		
As a result, the right front o	of Unit # 1 collided with the left side of Unit # 2. I	Jnit # 1		
continued into the parking k	ot of 6009 Turney Rd because Unit # 1 went eas	t on		
Rockside.				
Unit # 2 waited in a lot on	Rockside Rd because Unit # 1 pulled into the ga	s station		
lot and left the area concerr	ned for her safety. Drivers did not contact each	other the		
	eported at the station by driver of Unit # 2. Drive			
was contacted at his reside				
was somasted at the reside				
	OFFICER'S SIGNATURE	BADGE NUMBER		