OHIO DEPARTI OF PUBLIC SA SAPETY · SERVICE · PRO	TRAFFIC	CRASH	REPORT DEN	IOTES MANDATORY FIELD FOR SUPPLEMENT REPORT			LOCAL REPORT NUMBE	ER *
☐ PHOTOS TAKEN	OH-2	OH-3	CAL INFORMATION			[2]0 2 4	2 0 4 2	
SECONDARY CRASH			PORTING AGENCY NAME *	.0.1	NCIC*	HIT/SKIP 1 - Solved	NIIMRED OF LINITS	0 1 98 - ANIMAL 99 - UNKNOWN
COUNTY* LOCALI		LOCATION: CITY, VILLAGE	SARFIELD HEI	GHTS LVII	2 - Unsolved U Z U I 99 - UNKO CRASH DATE/TIME* CRASH SEVERITY			
1 8 1 1	1 - CITY * 2 - VILLAGE *	GARFIELD				<u> 0 7 3 0 2 0 2</u>		5 1- FATAL 2- SERIOUS INJURY
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH LOCATI	ON ROAD NAME	ROAD TYPE	I ATITUDE DECIMA		SUSPECTED 3 - MINOR INJURY
Госатю			3-EAST 4-WEST Slado	len	$A_{\downarrow}V_{\downarrow}$	4 1 1 4 3	3 7 3 6	SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST	ERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL	DEGREES	ONLY
REFERE			4- WEST 1000	0		8 1 1 6 1	4 9 1 7	
REFERENCE POINT 1 - INTERSECTION	T DIRECTION	IR - INTERST	ROUTE TYPE ATE ROUTE (TP)	ROAD TYPE AL - ALLEY HW - HIGHWAY	RD - ROAD	☐ WITHIN INTERSE	INTERSECTION RELATED CTION OR ON APPROACH)
2 - MILE POST 3 - HOUSE #	2 - SOUTH 3 - EAST 4 - WEST	US - FEDERA SR - STATE R	OUTE	AV - AVENUE	SQ - SQUARE ST - STREET TE - TERRACE	☐ WITHIN INTERCH	ANCE AREA	NUMBER OF APPROACHES
DISTANCE	DISTANCE IIIIT OF MEASURE 1 - Miles		ED COUNTY ROUTE ED TOWNSHIP	CT - COURT PK - PARKWAY DR - DRIVE PI - PIKE HE - HEIGHTS PL - PLACE	TL - TRAIL WA - WAY	- WITHIN INTERCOT	ROADWAY	NUMBER OF APPROACHES
	2 - Feet 3 - Yards					☐ ROADWAY DIVID	ED	
	DWAY 9 - CROSSOVE			MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE
0 1 1 2- ON ROA 2- ON SHO 3- IN MEDI. 4- ON ROA	ULDER 10 - DRIVEWA' AN ACCESS DSIDE 11 - RAILWAY	Y/ALLEY GRADE	1 - NOT COLLIS BETWEEN TWO MOTOR	5 - BACKING		1 - NORTH 2 - SOUTH	(<4 FE	ED FLUSH MEDIAN EET)
5 - ON GOR 6 - OUTSID TRAFFIC	RE CROSSING E 12 - SHARED U CWAY OR TRAIL	3 JSE PATHS S	VEHICLES IN TRANSPORT 2 - REAR-END	7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION		3 - EAST 4 - WEST	(≥4 FE 3 - DIVID	ED FLUSH MEDIAN EET) ED, DEPRESSED MEDIAN ED, RAISED MEDIAN
7 - ON RAM 8 - OFF RAI		TH	3 - HEAD-ON	9 - OTHER / UNKNOWN			(ANY	
WORK ZONE RELATED WORKERS PRESENT	1-	WORK ZONE T LANE CLOSURE LANE SHIFT/CROSSOV		LOCATION OF CRASH IN WORK ZO 1 - BEFORE THE 1ST WORK ZO WARNING SIGN	DNE DNE	CONTOUR	CONDITIONS	SURFACE
LAW ENFORCEMENT PRESENT	4 3-	WORK ON SHOULDER OR MEDIAN		2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA		1	_1_	2
ACTIVE SCHOOL ZONE	5 -	INTERMITTENT OR MOV OTHER	ING WORK	5 - TERMINATION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL	1 - DRY 2 - WET 3 - SNOW 4 - ICE	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT
LIGH	T CONDITION			WEATHER		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 - LIGHT	TED ROADWAY		1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE	6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW			MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	5 - DIRT 9 - OTHER /UNKNOWN
	DWAY NOT LIGHTED NOWN ROADWAY LIGHTING NOWN	2	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZING DRIZZL 99 - OTHER / UNKNOWN	E			
NARRATIVE								Indicate the north
UNIT#1 WAS	BACKING IN A	NORTHE	RN DIRECTION	DN	 			direction with an "N" on the compass diagram.
FROM A DRIV	/EWAY AT 100	00 SLADE	EN AVE. UNIT	Г#2		1 1 1		
WAS UNOCC	UPIED AND LI	EGALLY P	ARKED FACIN		orth Ø	τ		
WEST.AT. 100	00 SLADDEN.	AVE. AS A	RESULT, THE	Not 1	To Scale	10000	î î	
LEFT.BACK.C	OF. UNIT#1.CO	LLIDED .W	/ITH.THE.LEF	Г	_	-	<u> </u>	
FRONT SIDE	OF UNIT#2. U	NIT#1 WA	S PARKED IN	.THE		>	A >	
DRIVEWAY O	F-10000 SLAD	DEN AND	UNIT#2 WAS	. А.Т	Sladden A	ve)		
FINAL REST (UPON ARRIVA	۸ <u>۲.</u> ۰۰۰۰۰۰						
CRASH REPORTE		10.7:0:0	DISPATCH DATE/TIME	ARRIVAL DATE/TIM			RED DATE/TIME	REPORT TAKEN BY POLICE AGENCY
10 7 3 0 2 0 2 TOTAL TIME ROADWAY	OTHER INVESTIGATION	TOTAL	0 OFFICER'S NAME *	4 3 0 7 3 0 2 0 2 4		0 7 3 0 2 0 2 FICER'S NAME*	4 0 9 0 3	MOTORIST
CLOSED	TIME	MINUTES	R. Cramer	FFICER'S BADGE NUMBER*	D. Bailey	CHECKED BY OFFICER'S BADGE	NUMBER*	SUPPLEMENT (CORRECTION → ADDITION
0 1 1	1 6 1	3 2		3 7		L O 7		TO MEDICATIVE REPORT SERV TO COPE

	OH OF SAPE	HIO DEPARTMENT PUBLIC SAFETY UNIT						2,0,2,4,2	LOCAL REPORT NUMBER
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE HEJDUK RC	(⊔ Sar	me As Driver)	OWNER P	PHONE: INCLUDE AREA CODE	Same As Driver)		DAMAGE DAMAGE SCALE
OWNER	OWNER ADDRE	ESS: STREET, CITY, STATE, ZIP SLADDEN A	(☐ Same As D	Oriver)	דע ח	-c OH	44125	1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
0		ARRIER: NAME, ADDRESS, CITY, STATE, ZIF		GARFIEI		IAL CARRIER PHONE: INCLUDE A			5 - UNINUWIY
	LP STATE	LICENSE PLATE #		/EHICLE IDENTIFICATION #	Ш	VEHICLE YEAR	VEHICLE MAKE		DAMAGED AREA(S) INDICATE ALL THAT APPLY
	OH	KAX7684	ı5ıFıNıRıLı5	INSURANCE POLICY#	4 7 1	2 0 1 4	Honda	11 12	11 12 1
		RIFIED Nationwide		9234j198197		VEHICLE COLOR RED	Odyssey	10 11 1	2 10 11 1
	☐ COMMER	TYPE OF USE CIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWE	BY: COMPANY NAME		9 9 3 4	3 9 9 3 3
	INTERLO DEVICE EQUIPPE	☐ HIT/SKIP UNIT	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		HAZARDOUS MA MATERIAL RELEASED PLACARD	ATERIAL CLASS# PLACARDID#	8 7 6 5	8 7 \$ 5 4 11 12 1 6 5
	0 2	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	19 - BUS (1) 20 - OTHER 21 - HEAVY 22 - ANIMA	6+ PASSENGERS) 24 R VEHICLE 25 EQUIPMENT 26 L WITH RIDER OR 27	- PEDESTRIAN/SKATER - WHEELCHAIR (ANY TYPE) - OTHER NON- MOTORIST - BICYCLE - TRAIN - UNKNOWN OR HIT/SKIP	9	11 1 1 1 2 2 9 3 3 3 8 4 7 6 5 4
VEHICLE		# OF TRAILING UNITS						11 12 1	2 10 12 1
	2	WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED? 1-YES 2-NO 9-OTHER/UNKNO	WN AUTONOMOUS MODE LEVEL		AUT 4 - HIGI 5 - FULI	OMATION H AUTOMATION L AUTOMATION	- UNKNOWN	9 9 9 3 4 5 5	3 9 9 3 3 3 4 7 5 4
		1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS-TRANSIT/COMMUTER	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	19 - TO	WING 9 OW REMOVAL	1 - MAIL CARRIER 9 - OTHER /UNKNOWN	7 6 5	12 12 12
	O 1 CARGO BODY	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS Y	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VANIENCLOSED BOX 7 - GRAINICHIPS/GRAVEL	10 - FL 11 - DU	RGO TANK 13 AT BED 14 JMP 99	- CONCRETE MIXER - AUTO TRANSPORTER - GARBAGE/REFUSE - OTHER / UNKNOWN	9	9 3 9 3 3
		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	TOR TROUBLE 99 SABLED FROM PRIOR CIDENT	- OTHER / UNKNOWN	ь	6 6 6
	NON-MOTORIST LOCATION AT IMPACT	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI	IVEWAY ACCESS ARED USE PATHS OR	2 - FIRST RESPONDER AT INCIDENT SCENE 9 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	Undercarriage [14] - All areas [15] INIT NOT AT SCENE [16]
		1 - NON-CONTACT 2 - NON-COLLISION 4 - OTRUGUE	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	14 - EN	TERING OR CROSSING	8 - APPROACHING OR LEAVING VEHICLE 9 - STANDING		INITIAL POINT OF CONTACT
		3 - STRIKING	3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	15 - WA JOO 16 - WO	CIFIED LOCATION LKING, RUNNING, 2 GGING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 6 0 - NO DAMAG 1-12 - REFER: DIAGRAM 13 - TOP	TO UNIT 15 - VEHICLE NOT AT SCENE
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM			1 - 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	A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY	EQI 19 - LO	UIPMENT 2: AD SHIFTING/	2 - NOT DISCERNABLE 3 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT
	1 2	5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	15 - SWERVING TO AVOID 16 - WRONG WAY		LING/SPILLING 99 PROPER CROSSING	O - OTHER IMPROPER ACTION	2 2 - TWO-WAY	6 3 - FLASHER 6 - NO CONTROL
	CONTRIBUTING CIRCUMSTANCES							# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED
EVENT(S)	SEQUENCE OF	EVENTS						_ 2 _	2 - INVOLVED - ACTIVE CROSSING 1 3 - INVOLVED - PASSIVE CROSSING
ú	¹ 2 1	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	17 - ANII 18 - ANII	MAL - FARM MAL - DEER	2 - WORK ZONE MAINTENANCE EQUIPMENT 3 - STRUCK BY FALLING,		UNIT / 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 15 - PEDALCYCLE	20 - MOT TRA	MAL - OTHER TOR VEHICLE IN INSPORT IKED MOTOR VEHICLE	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 4- OTHER MOVABLE		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST
	3			COLLISION WITH FIXED OBJECT	r - STRUCK	21	OBJECT	FROM 2 TO	1 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 - DITO	CH E	-WORKZONE MAINTENANCE EQUIPMENT - WALL	UNIT SPEED	DETECTED SPEED
	5	26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	46 - FEN 47 - MAII 48 - TRE	52 CE 52 LBOX 53	- BUILDING - TUNNEL - OTHER FIXED OBJECT - OTHER / UNKNOWN	_2	1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR
	6							POSTED SPEED	3 - UNDETERMINED
HS	1 Y8304 OH1U 1/19 [FIRST HARMFUL EVENT	_ 1 _ ,	MOST HARMFUL EVENT				2 5	PAGE OF

	OF OF	HIO DEPARTMENT F PUBLIC SAFETY LETY - BERVICE - PROTECTION						LOCAL REPORT NUMBER
	UNIT#	OWNER NAME: LAST, FIRST, MIDDL	E (□ Sam	ne As Driver)	OWNER PHONE: INCLUDE AREA CODE	(Same As Driver)		DAMAGE
	0 2	Enterprise						DAMAGE SCALE
OWNER	OWNER ADDRE	ESS: STREET, CITY, STATE, ZIP W Main St	(Same As Di	river) HIIIsboro	ОН	45133	1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
•		ARRIER: NAME, ADDRESS, CITY, STATE, ZIF	P	1111102010	COMMERCIAL CARRIER PHONE: INCL			
								DAMAGED AREA(S)
	LP STATE	LICENSE PLATE # MDK1492		EHICLE IDENTIFICATION # A K 7 N U 6 6 8	0 3 5 2 0 2	2 Toyota	12	INDICATE ALL THAT APPLY
	INSU	URANCE INSURANCE COMPANY		INSURANCE POLICY#	VEHICLE COLOR	VEHICLE MODEL	11 12	2 10 12 12
	□ VE	TYPE OF USE		US DOT#	GRY TOWED BY: COMPANY NAME	Camry	10 2	12 2
	☐ COMMER	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE), , , , , , , , , , , , , , , , , , ,
	INTERLO		# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.	HAZARDO MATERIAL RELEASED	US MATERIAL CLASS# PLACARD ID#	8 7 6 5	4 8 7 6 5 4
	EQUIPPE		0 0 _	2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD		6	11 12 6
	0 1	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE	23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST	10/_	11 1 2
	0 1	4 - PICK UP	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - TRAIN	•	8 1 4 3
	UNIT TYPE	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 6 5 4
VEHICLE		# of TRAILING UNITS					11 12 1	6 11 12 1
		WAS VEHICLE OPERATING IN AUTONO	OMOUS MODE O	0 - NO AUTOMATION	3 - CONDITIONAL	9 - UNKNOWN	10 11 1	10 1 1 2
	2	WHEN CRASH OCCURED? 1-YES 2-NO 9-OTHER/UNKNO	AUTONOMOUS	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION		9 9 3	3 9 9 3
		1-YES 2-NO 9-OTHER/UNKNO	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FARM	21 - MAIL CARRIER	8 7 6	4 8 7 5 74
		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 - MOWING 18 - SNOW REMOVAL 19 - TOWING	99 - OTHER /UNKNOWN	7 6 5	7 6 5
	SPECIAL FUNCTION	5 - BUS-TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12
	1011	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE 9 - CARGO TANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12 10	* •
	CARGO BOD	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10 - FLAT BED 11 - DUMP	14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	, , ,	3 9 1 3 9 1 3
	1 1 1	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR	99 - OTHER / UNKNOWN	6	
	VEHICLE DEFECTS	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	ACCIDENT			6 6 6
	NON-MOTORIST	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	UNDERCARRIAGE [14] - ALL AREAS [15]
	LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE-OTHER LOCATION	o obernet	TRAILS		<u> </u>	T NOT AT SCENE [16]
		1-NON-CONTACT 2-NON-COLLISION 1 1 0	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	INI	ITIAL POINT OF CONTACT
	4	4 - STRUCK PRE-CRASH		9 - LEAVING TRAFFIC LANE 10 - PARKED	SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE	1 1 0-NO DAMAGE	14 - UNDERCARRIAGE
	ACTION	5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN	DIAGRAM	UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
		9 - OTHER / UNKNOWN		12 - DAVENCESS	17 - POSHING VEHICLE		13 - TOP	
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC 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	18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN
		5 - UNSAFE SPEED 6 - IMPROPER TURN	CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	FALLING/SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
	CONTRIBUTING CIRCUMSTANCES	s	12 - IMPROPER BACKING				# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
(S)								1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING
EVENT(S)	SEQUENCE OF	F EVENTS		EVENTS			2	1 3 - INVOLVED - PASSIVE CROSSING
		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		IT / NAN MATADIST DIPEATION
		3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT	UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN	UNI	IT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST
	2	LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRANSPORT 21 - PARKED MOTOR VEHICLE	MOTION BY A MOTOR VEHICLE		2 - SOUTH 6 - NORTHWEST
	3, , ,			0011101011	T OTRUCK	24 - OTHER MOVABLE OBJECT	FROM <u>3</u> то	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
		25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	COLLISION WITH FIXED OBJECT 37 - TRAFFIC SIGN POST	T - STRUCK 43 - CURB	50 -WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN
	4, , ,	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED	DETECTED SPEED
		STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	46 - FENCE 47 - MAILBOX 48 - TREE	53 - TUNNEL 54 - OTHER FIXED OBJECT	.0, , ,	1 1-STATED/ESTIMATED SPEED
	اللا	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN		2 - CALCULATED / EDR
	61						POSTED SPEED	3 - UNDETERMINED
			,				_ 2 _ 5 _	
HS	1 Y8304 OH1U 1/19	FIRST HARMFUL EVENT	1	OST HARMFUL EVENT				PAGE OF

OHIO DEPARTMENT	MOTORIST / NO	AN MATADI	СТ						LOCAL	REPORT NUMBER		
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	WOTORIST / NO	JN-WOTORI	31				_ 2	0 2 4	_ 2 _	0 4 2		
M UNIT # NAME: LAST, FIRE												GENDER
T 0 1 HEJC	UK	AMY					-	9 0 8 1		6 [2]	6 1	L F
1	DEN AVE	G	ARFIELD HTS	OH 4	4125		CONTACT	PHONE - INCLUDE AREA CODI	·	1 1		1 1 1
10000	MS AGENCY (NAME)		ICAL FACILITY (NAME, CITY)	SAFETY EQUII USED			, DOT-COMPLIA	SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED
§ 5 L					0 4	_ _	MC HELMET		1	1		<u> </u>
OL STATE OPERATOR LIC	ENSE NUMBER	OFFENSE	CHARGED	CODE	FFENSE DESCRIPT	TION				CITATION NUMBE	R	
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECT	TED .	CONDITION		ALCOH	OL TEST		DF	RUG TEST(S)	
R SELECT UP TO 2		DISTRACTED BY		ARIJUANA .	1 .	STATUS	TYPE . 1	VALUE	STATU	IS TYPE	RESU	ILT SELECT UP TO 4
M UNIT# NAME: LAST, FIRE			OTHER DRUG	ļ L	ı	<u> </u>	1	DATE OF BI	1	_ -	AGE	GENDER
O T O	SI, MIDDLE							DATE OF BI		_ , _ ,] ,	AGE	GENDER
R ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CODE				
S T												
N BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MED	ICAL FACILITY (NAME, CITY)	SAFETY EQUI USED	PMENT		DOT-COMPLIAN	SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED
O OL STATE OPERATOR LIC	FNSF NIIMBER	OFFENSE (CHARGED	LOCAL O	FFENSE DESCRIPT		MC HELMET			CITATION NUMBE	1	<u> </u>
M O	LITOL HOMBLIX			CODE							-	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT	TED	CONDITION		ALCOHO			_	UG TEST(S)	
1	1 11 1 11 1	BY	ALCOHOL MA	ARIJUANA		STATUS	TYPE	VALUE	STATU	S TYPE	RESUL	LT SELECT UP TO 4
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R ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CODE				
s T												
I INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQUIP USED	MENT		DOT-COMPLIAN	SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE	CHARGED	LOCAL O	FFENSE DESCRIPT	TION	MC RELIMET			CITATION NUMBE	\	
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O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT		CONDITION	STATUS	ALCOHO TYPE	OL TEST VALUE	STATU		UG TEST(S)	LT SELECT UP TO 4
s	1 11 1 11 1		ALCOHOL MA OTHER DRUG	ARIJUANA				•				
INJURIES	SEATING POSITION	AIR BAG	OL C	LASS	Į OL	RESTRICTION	V(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		E GIVEN REFUSED	
3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C		2 - CDL INTRA 3 - CORRECTI			ELECTRONIC COMMU		3 - TEST	GIVEN, CONTAM	MINATED
4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT			4 - FARM WAIN 5 - EXCEPT CI			DIALING) 3 - TALKING ON HANDS-			PLE / UNUSABLE GIVEN, RESULTS	S KNOWN
	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	5 - M / C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CI & CLASS B			COMMUNICATION DE	VICE	5 - TEST	GIVEN, RESULTS	S UNKNOWN
INJURED TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)				7 - EXCEPT TF 8 - INTERMED			4 - TALKING ON HAND-H COMMUNICATION DE	VICE			
1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE				RESTRICTI 9 - LEARNER'S	IONS	•	5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE				
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	OL ENDO H - HAZMAT	PRSEMENT	RESTRICT 10 - LIMITED T	IONS		6 - PASSENGER 7 - OTHER DISTRACTION	INSIDE	1 - NON	ALCOHOL T	EST TYPE
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	2 - PARTIALLY EJECTED	M - MOTORCYCLE		ONLY 11 - LIMITED T		-NT	THE VEHICLE 8 - OTHER DISTRACTION	IS OUTSIDE	2 - BLO		
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED 4 - NOT APPLICABLE	P - PASSENGER N - TANKER		12 - LIMITED -	OTHER		THE VEHICLE 9 - OTHER / UNKNOWN		3 - URI 4 - BRE		
SAFETY EQUIPMENT 1 - NONE USED	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER			BRAKES, HAND S, OR OTHER		5-OTTER/ UNKNOWN		5 - OTH	ER	
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 14 - MILITARY	DEVICES)	al V					
4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS	S - SCHOOL BUS T - DOUBLE & TRIPLE	TRAILERS	15 - MOTOR V		VL1			1 - NON	DRUG TES	ST TYPE
FORWARD FACING 6 - CHILD RESTRAINT SYSTEM -	(NON-TRAILING UNIT) 15 - NON-MOTORIST	3 - FREED BY	X - TANKER / HAZMAT		16 - OUTSIDE	MIRROR		COND	ITION	2 - BLO		
REAR FACING 7 - BOOSTER SEAT	99 - OTHER / UNKNOWN	NON-MECHANICAL MEANS			17 - PROSTHE 18 - OTHER	ETIC AID		1 - APPARENTLY NORM		3 - URIN 4 - OTHI		
8 - HELMET USED								2 - PHYSICAL IMPAIRME 3 - EMOTIONAL (E.G. DEI				
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)				DER				ANGRY, DISTURBED) 4 - ILLNESS		1 - AMD	DRUG TEST I	RESULT(S)
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN			F - FEMALE M - MALE					5 - FELL ASLEEP, FAINT	ED,	2 - BAR	BITURATES	
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			U - OTHER/UNKNOWN					FATIGUED, ETC. 6 - UNDER THE INFLUEN	ICF OF	4 - CAN	ZODIAZEPINES NABINOIDS	
								MEDICATIONS / DRUG		5 - COC 6 - OPIA	AINE TES / OPIOIDS	
								9 - OTHER / UNKNOWN		7 - OTH		
										20		

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w	OFF DIABLE SAFETY OCCUPANT / WITNESS ADDENDUM					LOCAL REPORT NUMBER				
	ENVICE - PROTECTION					2 0 2 4 2	0 4 2			
UNIT#	NAME: LAST, FI	IRST, MIDDLE	Brye	en		DATE OF BIRTH AGE GENDER OF 1 AGE SENDER OF 1				
ADDRESS: STRE	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				
		GARFIELD HTS OH	44125							
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 5	DOT-COMPLIANT MC HELMET 0	POSITION AIR BAG USAGE	EJECTION 1	TRAPPED 1	
UNIT#	NAME: LAST, FI	RST, MIDDLE				DATE OF BIRT	гн	AGE	GENDER	
							1 1 1	1 1		
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CO	DDE			
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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 USAGE	EJECTION	TRAPPED	
UNIT#	UNIT# NAME: LAST, FIRST, MIDDLE					DATE OF BIRT	гн	AGE	GENDER	
ADDRESS: STRE	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DDE			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	POSITION AIR BAG USAGE	EJECTION	TRAPPED	
								AGE.	OFNDED	
UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER				
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE				
ADDRESS: STRE	, 0111, 01212, 211								1	
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING	POSITION AIR BAG USAGE	EJECTION	TRAPPED	
	TAKEN BY				USED	DOT-COMPLIANT MC HELMET				
1 FATAL	IN	JURIES	1 - NONE USED	SAFETY EQUIPMENT USED	SEATI 1 - FRONT - LEFT SIDE (MOTORCYC	ING POSITION	AIR BA	SUSAGE		
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN GENDER F - FEMALE M - MALE		VEHICLE OCCUPANT 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN /BICYCLE ONLY 99 - OTHER / UNKNOWN		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORC' 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	YCLE PASSENGER)	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SID 5 - NOT APPLICABLE	.			
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