	TRAFFIC	CRASH	REPORT *DENO	TES MANDATORY FIELD FOR SUPPLEMENT REPORT			LOCAL REPORT NUMBE	R*
PHOTOS TAKEN	OH-2	он-з С	ADI ROCKSIDE			2 0 2 4 2	2 2 9 6	
SECONDARY CRASH	OH-1P D		ORTING AGENCY NAME*	0 1	8 2 0	HIT/SKIP 1 - Solved 2 - Unsolved		0 1 98 - ANIMAL 99 - UNKNOWN
COUNTY * LOCALIT	1 - CITY *	LOCATION: CITY, VILLAGE	TOWNSHIP *			CRASH DA		CRASH SEVERITY
	3 - TOWNSHIP *				1 pour = ===	0821202		2 - SERIOUS INJURY SUSPECTED
ROUTE TYPE	ROUTE NUMBER		1- NORTH 2- SOUTH 3- EAST 4- WEST ROCK	IROAD NAME				3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE
ROUTE TYPE	ROUTE NUMBER		1 - NORTH 2 - SOUTH REFER	ENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL		5 - PROPERTY DAMAGE ONLY
REFERENCE			3- EAST 4- WEST 13800			- 8_15_8	5 7 0 0	
1 - INTERSECTION 2 - MILE POST	1 - NORTH		ROUTE TYPE TE ROUTE (TP)		RD - ROAD		INTERSECTION RELATED	
3 - HOUSE #	4 2-SOUTH 3-EAST 4-WEST	US - FEDERAL SR - STATE R CR - NUMBER		BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL	SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL	WITHIN INTERCH.	ANGE AREA	
DISTANCE	DISTANCE	TR - NUMBERI ROUTE	ED TOWNSHIP		WA - WAY		ROADWAY	
5 0	2 - Feet 3 - Yards							
		ER	1 - NOT COLLISIO			DIRECTION OF TRAVEL		MEDIAN TYPE
3 - IN MEDIA 4 - ON ROAE 5 - ON GORE	AN ACCESS DSIDE 11 - RAILWAY E CROSSING	GRADE G	1 BETWEEN TWO MOTOR VEHICLES IN TRANSPORT	5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION		1 - NORTH 2 - SOUTH 3 - EAST	(<4 FE	ED FLUSH MEDIAN
6 - OUTSIDE TRAFFIC 7 - ON RAMF 8 - OFF RAM	WAY OR TRAIL P 13 - BIKE LANE	.S E	2 - REAR-END 3 - HEAD-ON	8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN		4 - WEST	3 - DIVIDE	ED, DEPRESSED MEDIAN ED, RAISED MEDIAN
0-011144	99 - OTHER / L						9 - OTHEI	R / UŃKNOWN
WORK ZONE RELATED		WORK ZONE T	ſPE	LOCATION OF CRASH IN WORK ZO		CONTOUR	CONDITIONS	SURFACE
WORKERS PRESENT LAW ENFORCEMENT	2 -	LANE CLOSURE LANE SHIFT/CROSSOVE WORK ON SHOULDER	R	1 - BEFORE THE 1ST WORK ZOI WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA	NE	_ 1	1	_ 2
Theoen		OR MEDIAN INTERMITTENT OR MOVI OTHER	NG WORK	4 - ACTIVITY AREA 5 - TERMINATION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET 3 - SNOW	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS,
ACTIVE SCHOOL ZONE	T CONDITION			WEATHER		3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER	4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL	ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL,
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTI			1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW		JUNKNOWN	6 - WATER (STANDING, MOVING) 7 - SLUSH	STONE 5 - DIRT 9 - OTHER
4 - DARK - ROAD	WAY NOT LIGHTED IOWN ROADWAY LIGHTING		3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL	8 - BLOWING SAND, SOIL, DIRI, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN	E		9 - OTHER/UNKNOWN	/UNKNOWN
NARRATIVE							: : : r	Indicate the north
UNIT #1 WAS	TRAVELING	WEST ON	ROCKSIDE RE).				direction with an "N" on the compass diagram.
NEAR 13800 A	AT A HIGH RA	TE OF SP	EED WHEN IT	RAN			i i i l c i i	· · · ·
OFF THE ROA	AD RIGHT ANI	D STRUC	A TELEPHON		S I NORTH			
POLE. THE SI	UBJECT LIST	ED WAS D	ISCOVERED I		TO SCALE 13800		Ĩ	
THE PASSEN	GER SEAT AT	THETIME	OF OFFICER	S'	0	t T		
ARRIVAL. IT IS	S NOT YET D	ETERMINE	ED IF HE WAS	IN	CE RD	Jan .		
OPERATION (OF THE VEHK	CLE AT TH	E TIME OF TH	E · · · · · · · · · · · · · · · · ·	ROCKSIDE RD		Ĩ	5.es · · ·
CRASH.							l I	
				•••••••••••••••••••••••••••••••••••••••				
				•••••••••••••••••••••••••••••••••••••••			I I	
				•••••••••••••••••				
CRASH REPORTE	D DATE/TIME		DISPATCH DATE/TIME	ARRIVAL DATE/TIME	, I, :	SCENE CLEAR	ED DATE/TIME	REPORT TAKEN BY
0 8 2 1 2 0 2			2024 011	8 8 0 8 2 1 2 0 2 4		<u> 0 8 2 1 2 0 2</u>	2 4 0 2 4 0	POLICE AGENCY MOTORIST
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	officer's NAME * M. Malak		CHECKED BY O			
3 0	3 0	_9 _↓ 1 _↓		icer's badge number* 3 3			NUMBER*	(CORRECTION or ADDITION to waterine Herent server to core
L HSY7001 OH1 1/19 [760-082	0]				-			PAGE OF

							2,0,2,4,2	
UNIT#		RNAME: LAST, FIRST, MIDDLE		Same As Driver)	OWNER PHONE: INCLUDE AREA CODE	(🛛 Same As Driver)		DAMAGE DAMAGE SCALE
		CITY, STATE, ZIP	(🗌 Same A	s Driver)		44400	1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE
S 3995	ARRIER: NAM	E 176TH ST E, ADDRESS, CITY, STATE, ZIP		CLEVEL	AND OH			9 - UNKNOWN
LP STATE	LICEN	SE PLATE #	1	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE		DAMAGED AREA(S) INDICATE ALL THAT APPLY
	URANCE	7468 Insurance company		$\frac{15 2 9 2 S U 8 0 9 }{ \text{INSURANCE POLICY}\#}$	3 6 3 VEHICLE COLOR	5 Cadillac	11 12 1	11 12 1
	ERIFIED	TYPE OF USE		US DOT #	CRM TOWED BY: COMPANY NAME	Deville		
Соммен	-	GOVERNMENT	IN EMERGENCY RESPONSE # OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR		US MATERIAL		
INTERL DEVICE EQUIPP		■ HIT/SKIP UNIT		1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	MATERIAL RELEASED	CLASS# PLACARD ID #		
	3 - SPORT 4 - PICK UF	IGER VAN (MINIVAN) UTILITY VEHICLE , VAN	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)		18 - LIMO (LIVERY VEHICLE) 19 - BUS (16- PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIANISKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NOM MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	10 9 (12	
	WAS VEHIC WHEN CRA	LING UNITS CLE OPERATING IN AUTONO SH OCCURED? - NO 9 - OTHER / UNKNOW			3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN		$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
0 1 SPECIAL FUNCTION	4 - SCHOOL	NIC RIDE SHARING TRANSPORT NSIT/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	16 - FARM 17 - MOWING 18 - SNOV REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	21 - Mail Carrier 99 - Other Junknown	° 7 6 5	
0 1 CARGO BOD TYPE	/ NOT AP 2 - BUS VY	O BODY TYPE PLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VANIENCLOSED BOX 7 - GRAINICHIPS/GRAVEL	8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	· V ,	
VEHICLE DEFECTS	1 - TURN SIG 2 - HEAD LAI 3 - TAIL LAM	/PS	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	0	6 6 6
NON-MOTORIST LOCATION AT IMPACT	1 - INTERSE MARKED CROSSW/ 2 - INTERSE UNMARKE CROSSW/	ALK CTION - ED	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK DN	9 - MEDIANICROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [0]	UNDERCARRIAGE [14] ALL AREAS [15] UNIT NOT AT SCENE [16]
	1 - NON-COL 2 - NON-COL 3 - STRIKING 4 - STRUCK 5 - BOTH STI & STRUCK 9 - OTHER /		1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	7 - MAKING U-TURN 8 - E-NTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUINNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18. APPROACHING OR LEAVING VEHICLE 19. STANDING 20. OTHER KOM MOTORIST 21. STANDING OUTSIDE DISABLED VEHICLE 99. OTHER / UNKNOWN	0 5 0-NO DAMA 1-12-REFER DIAGRA 13-TOP	ITO UNIT 15 - VEHICLE NOT AT SCENE M 99 - UNKNOWN
	1 - NONE 2 - FAILURE 3 - RAN RED 4 - RAN STOF 5 - UNSAFE S 6 - IMPROPE	LIGHT ? SIGN IPEED	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 ILLEGALY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION OBSTRUCTION 18 - OPERATINS DEFECTIVE EQUIPMENT 19 - LOAD SHITTING/ FALLINGSPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	TRAFFICWAY FLOW 1 - ONE-WAY 2 2 - TWO-WAY # OF THROUGH LANES	TRAFFIC TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - VIELD SIGN 3 - FLASHER 6 - NO CONTROL
							ON ROAD	1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING
SEQUENCE O	F EVENTS	N/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS 11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WORK ZONE		3 - INVOLVED - PASSIVE CROSSING
¹ 0 8 ² 40	2 - FIRE/EXPL 3 - IMMERSIC 4 - JACKKNIF 5 - CARGO / E LOSS OR 5	osion N E :QUIPMENT	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	OPPOSITE DIRECTION OF TRAVEL 12 - DOWHILL RUNAWAY 13 - OTHER NOR-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE	MINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 3 TO	UNIT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - 4
3	25 110/07		31. CHARDONI FND	COLLISION WITH FIXED OBJECT 37 - TRAFFIC SIGN POST	43 - CURB	50 -WORKZONE MAINTENANCE		4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
⁴	26 - BRIDGE (STRUCTU 27 - BRIDGE (28 - BRIDGE (CUSHION DVERHEAD JRE PIER OR ABUTMENT PARAPET	 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE 	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	43 - CORB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE	EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT		DETECTED SPEED
6 ₁₁₁	29 - BRIDGE I 30 - GUARDR		BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN	POSTED SPEED	2 - CALCULATED / EDR 3 - UNDETERMINED
1 1 ISY8304 ОН1U 1/19		ARMFUL EVENT	2	MOST HARMFUL EVENT			3 5	PAGE OF

OHIO DEPARTMENT OF PUBLIC SAFETY		AN MATADIAT					LOCA	AL REPORT NUMBER
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	MOTORIST / N	UN-MUTURIST				2	0 2 4 2	2 9 6
N UNIT # NAME: LAST, FIRS	r, MIDDLE						DATE OF BIRTH	AGE GENDER
		-						
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT	FPHONE - INCLUDE AREA CODE	
				OH				
BY	IS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACI	ITY (NAME, CITY)	SAFETY EQU USED			SEATING POSITION	AIR BAG USAGE EJECTION TRAPPED
OL STATE OPERATOR LICE		OFFENSE CHARGED		LOCAL		' <u> </u>		
								UNATION NUMBER
OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECTE		CONDITION	ALCOH	IOL TEST	DRUG TEST(S)
SELECT OF TO 2			ALCOHOL MAR	RJUANA	9	STATUS TYPE	VALUE STA	ATUS TYPE RESULT SELECT UP TO 4
			OTHER DRUG		9		Ì∎└──┘	
UNIT # NAME: LAST, FIRS	r, MIDDLE						DATE OF BIRTH	AGE GENDER
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT	PHONE - INCLUDE AREA CODE	
INJURIES INJURED EI	IS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACI	LITY (NAME, CITY)	SAFETY EQ USED	UIPMENT		SEATING POSITION	AIR BAG USAGE EJECTION TRAPPED
BY				USED		DOT-COMPLIA MC HELMET	NT	
OL STATE OPERATOR LICE	NSE NUMBER	OFFENSE CHARGED		LOCAL	OFFENSE DESCRIPTIC	N		
				GODE				
OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED RY	ALCOHOL / DRUG SUSPECTE		CONDITION	ALCOH STATUS TYPE	OLTEST VALUE STA	DRUG TEST(S) TUS TYPE RESULT SELECT UP TO 4
			ALCOHOL MAR	JUANA				
UNIT # NAME: LAST, FIRST	, MIDDLE						DATE OF BIRTH	
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT	PHONE - INCLUDE AREA CODE	
INJURIES INJURED EI TAKEN BY	IS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQU USED	IIPMENT	DOT-COMPLIA	SEATING POSITION	AIR BAG USAGE EJECTION TRAPPED
						MC HELMET		
OL STATE OPERATOR LICE	NSE NUMBER	OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION	N		CITATION NUMBER
OL CLASS ENDORSEMENT		DRIVER			CONDITION		OL TEST	
SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DISTRACTED	ALCOHOL / DRUG SUSPECTE	D	CONDITION	STATUS TYPE	VALUE STA	ITUS TYPE RESULT SELECT UP TO 4
			OTHER DRUG	L]		• <u> </u>	
INJURIES	SEATING POSITION 1 - FRONT - LEFT SIDE	AIR BAG	OL CLASS A	ASS	OL R 1 - ALCOHOL IN	ESTRICTION(S)		1 - NONE GIVEN
I - FATAL 2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOYED FRONT	2 - CLASS A		DEVICE		1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN	2 - TEST REFUSED
- SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C		2 - CDL INTRAS 3 - CORRECTIV		ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,	3 - TEST GIVEN, CONTAMINATED
- POSSIBLE INJURY - NO APPARENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	4 - REGULAR CLASS (OH	IIO = D)	4 - FARM WAIVE	R	DIALING)	SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN
- NO AFFANENT INJURT	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M / C MOPED ONLY		5 - EXCEPT CLA 6 - EXCEPT CLA	SS A	3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE	4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL		& CLASS B B 7 - EXCEPT TRA		4 - TALKING ON HAND-HELD	
- NOT TRANSPORTED /TREATED AT SCENE	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE				8 - INTERMEDIA RESTRICTIO	TE LICENSE	COMMUNICATION DEVICE 5 - OTHER ACTIVITY WITH AN	
- EMS	9 - THIRD - RIGHT SIDE	EJECTION	OL ENDOR:	SEMENT	9 - LEARNER'S RESTRICTIO	PERMIT	ELECTRONIC DEVICE 6 - PASSENGER	ALCOHOL TEST TYPE
- POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT		10 - LIMITED TO		7 - OTHER DISTRACTION INSIDE	1 - NONE
- OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED	M - MOTORCYCLE P - PASSENGER		ONLY 11 - LIMITED TO	EMPLOYMENT	THE VEHICLE 8 - OTHER DISTRACTIONS OUTSID	2 - BLOOD 3 - URINE
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER		12 - LIMITED - C 13 - MECHANIC		THE VEHICLE 9 - OTHER / UNKNOWN	4 - BREATH
SAFETY EQUIPMENT	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER		(SPECIAL BR CONTROLS,	AKES, HAND		5 - OTHER
- SHOULDER BELT ONLY USED	CARGO AREA 13 - TRAILING UNIT	TRAPPED 1 - NOT TRAPPED	R - THREE-WHEEL MOTO	ORCYCLE	ADAPTIVE D	VICES)		
- LAP BELT ONLY USED - SHOULDER & LAP BELT USED	14 - RIDING ON VEHICLE	2 - EXTRICATED BY	S - SCHOOL BUS		14 - MILITARY V 15 - MOTOR VE			DRUG TEST TYPE 1 - NONE
	EXTERIOR (NON-TRAILING UNIT)	MECHANICAL MEANS	T - DOUBLE & TRIPLE TR X - TANKER / HAZMAT	MILEKS	WITHOUT A 16 - OUTSIDE M	IR BRAKES		2 - BLOOD
- CHILD RESTRAINT SYSTEM - FORWARD FACING		3 - FREED BY NON-MECHANICAL MEANS			17 - PROSTHET		CONDITION 1 - APPARENTLY NORMAL	3 - URINE
FORWARD FACING	(NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	NON-WEGHANIGAE MEANS			18 - OTHER		2 - PHYSICAL IMPAIRMENT	4 - OTHER
FORWARD FACING 5 - CHILD RESTRAINT SYSTEM - REAR FACING - BOOSTER SEAT	15 - NON-MOTORIST	NON-MECHANICAL MEANS						
FORWARD FACING - CHILD RESTRAINT SYSTEM - REAR FACING - BOOSTER SEAT - HELMET USED - PROTECTIVE PADS USED	15 - NON-MOTORIST						3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	
FORWARD FACING - CHLID RESTRAINT SYSTEM - REAR FACING - BOOSTER SEAT - HELMET USED - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)	15 - NON-MOTORIST		GEND F - FEMALE	ER				DRUG TEST RESULT(S) 1 - AMPHETAMINES
FORWARD FACING 5 - CHILD RESTRAINT SYSTEM - REAR FACING - BOOSTER SEAT 3 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN	15 - NON-MOTORIST		GEND F - FEMALE M - MALE	ER			ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED,	1 - AMPHETAMINES 2 - BARBITURATES
FORWARD FACING 5. CHLID RESTRAINT SYSTEM - REAR FACING 4. BOOSTER SEAT 3. HELMET USED 9. PROTECTIVE PADS USED (ELBOWS, KINES, ETC.) 10. REFLECTIVE CLOTHING 11. LIGHTING - PEDESTRIAN / BICYCLE ONLY	15 - NON-MOTORIST		F - FEMALE	ER			ANGRY, DISTURBED) 4 - ILLNESS	1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS
FORWARD FACING 6- CHILD RESTRAINT SYSTEM - REAR FACING 7- BOOSTER SEAT 8- HELMET USED 9- PROTECTIVE PADS USED (ELBOWS, KIVES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	15 - NON-MOTORIST		F - FEMALE M - MALE	ER			ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS	1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES
6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KIVEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN	15 - NON-MOTORIST		F - FEMALE M - MALE	ER			ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF	1 - AMPHETAMINES 2. BARBITURATES 3. BENZODIAZEPINES 4 - CANNABINOIDS 5. COCAINE 6. OPIATES / OPIOIDS 7 - OTHER
FORWARD FACING 5. CHLID RESTRAINT SYSTEM - REAR FACING 7. BOOSTER SEAT 3. HELMET USED 9. PROTECTIVE PADS USED (ELBOWS, KINES, ETC.) 10. REFLECTIVE CLOTHING 11. LUGHTING -PEDESTRIAN / BICYCLE ONLY	15 - NON-MOTORIST		F - FEMALE M - MALE	ER			ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS
FORWARD FACING 6- CHILD RESTRAINT SYSTEM - REAR FACING 7- 800STER SEAT 8- HELMET USED 9- PROTECTIVE PADS USED (ELBOWS, KINES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	15 - NON-MOTORIST		F - FEMALE M - MALE	ER			ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	1 - AMPHETAMINES 2. BARBITURATES 3. BENZODIAZEPINES 4 - CANNABINOIDS 5. COCAINE 6. OPIATES / OPIOIDS 7 - OTHER

OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER									
5								2 0 2 4 2 2 9 6							
	UNIT#	NAME: LAST, FI		KIM	LAMO	DATE OF BIRTH						GENDER			
F						LAMONTE			0 2 1 8 2 0 0 1 2 3 M						
OCCUPANT		ET, CITY, STATE, ZIP	ARFIELD HTS OH 4	4125 13	62		CONTACT PHONE - INCLUDE AREA CODE								
8	INJURIES		EMS AGENCY (NAME)	11120 10	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POS		AIR BAG USAG	E E	JECTION	TRAPPED		
	2		,			DOT-COMPLIANT MC HELMET	. 0 .	3	2		1	. 1 .			
	UNIT #	NAME: LAST, FI					DAT	E OF BIRTH				AGE	GENDER		
		NAME: LAST, FI	KSI, MIDDLE												
ANT	ADDRESS: STRE	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUD	E AREA CODE	1 1						
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							MC HELMET								
	1 - FATAL	IN	JURIES	1 - NONE USED	SAFETY EQUIPMENT USED	1 - FRONT - LEFT SIDE (MOTORCYCI	E DRIVER)		1 - NOT DEPLO	AIR B	AG USA	GE			
					VEHICLE OCCUPANT 2 - FRONT - MIDDLE 2 - SHOULDER BELT ONLY USED 3 - FRONT - RIGHT SIDE										
	2 - SUSPECTED S 3 - SUSPECTED M					3 - FRONT - RIGHT SIDE			2 - DEPLOYED 3 - DEPLOYED						
	3 - SUSPECTED M 4 - POSSIBLE INJU	IINOR INJURY JRY		2 - SHOULDER 3 - LAP BELT O	BELT ONLY USED	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCY 5 - SECOND - MIDDLE	CLE PASSENGER)		3 - DEPLOYED 4 - DEPLOYED) SIDE) BOTH FRONT/SI	IDE				
	3 - SUSPECTED M	IINOR INJURY JRY		2 - SHOULDER 3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST	BELT ONLY USED NLY USED & LAP BELT USED RAINT SYSTEM -	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCY 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLI			3 - DEPLOYED 4 - DEPLOYED 5 - NOT APPLI) SIDE) BOTH FRONT/SI	IDE				
	3 - SUSPECTED M 4 - POSSIBLE INJU	IINOR INJURY JRY		2 - SHOULDER 3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST FORWARD F 6 - CHILD REST	BELT ONLY USED NLY USED & LAP BELT USED RAINT SYSTEM - CAING RAINT SYSTEM -	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCY 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLI 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	E SIDE CAR)		3 - DEPLOYED 4 - DEPLOYED 5 - NOT APPLI) SIDE) BOTH FRONT/SI CABLE	IDE				
	3 - SUSPECTED M 4 - POSSIBLE INJU	ninor injury Jry • injury	ED TAKEN BY	2 - SHOULDER 3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST FORWARD F 6 - CHILD REST REAR FACIN 7 - BOOSTER S	BELT ONLY USED NY USED & LAP BELT USED RANIT SYSTEM - ACING G G EAT	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCY 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCL) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENLOD (NON-TRALING UNT), BUS, PICK-UF	E SIDE CAR) CAB SED CARGO AREA WITH CAP)		3 - DEPLOYED 4 - DEPLOYED 5 - NOT APPLI) SIDE) BOTH FRONT/SI CABLE	IDE				
	3 - SUSPECTED M 4 - POSSIBLE INJU	IINOR INJURY JRY I INJURY INJURE ORTED /	ED TAKEN BY	2 - SHOULDER 3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST FORWARD F 6 - CHILD REST REAR FACIN 7 - BOOSTER S 8 - HELMET US 9 - PROTECTIV	BELT ONLY USED NLY USED & LAP BELT USED RAINT SYSTEM - G RAINT SYSTEM - G EAT ED E PADS USED	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCY 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCL) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLO (NON-TRALING UNIT 12 - PASSENGER IN UNENCLOSED 13 - TRALING UNIT	e side car) Cab Sed cargo area With cap) Cargo area		3 - DEPLOYED 4 - DEPLOYED 5 - NOT APPLI) SIDE (CABLE ENT UNKNOWN					
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