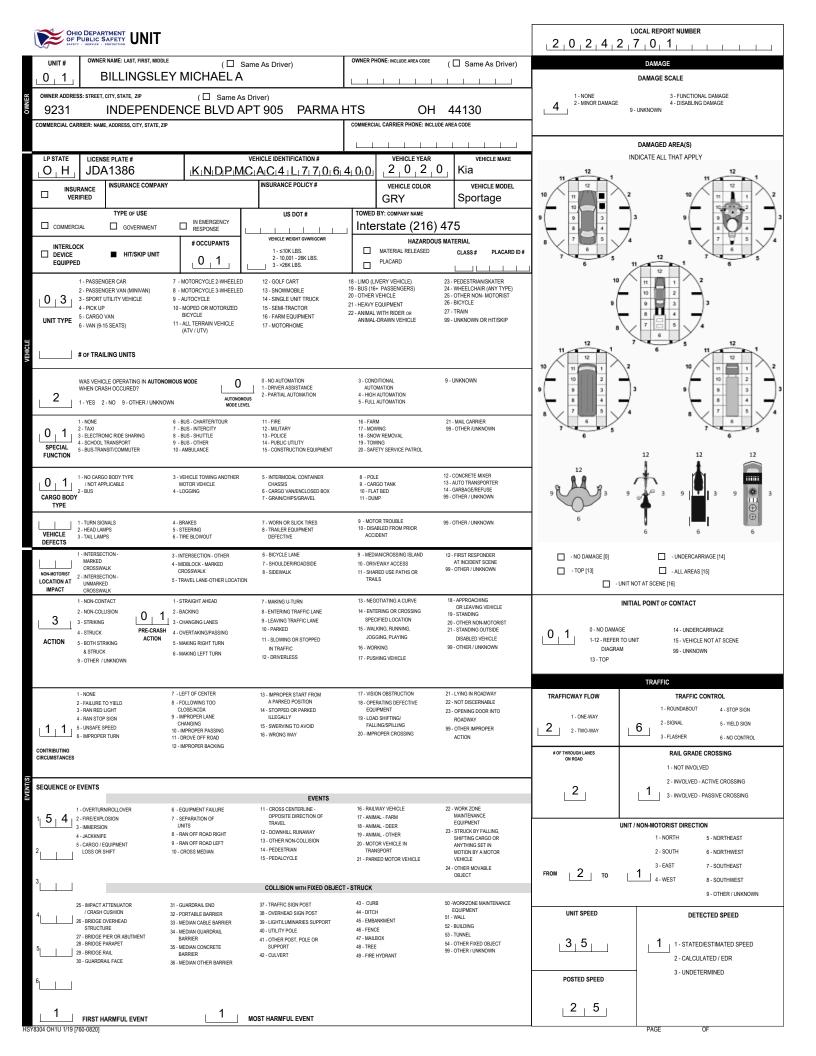
	TRAFFIC	CRASH	LOCAL REPORT NUMBER *									
PHOTOS TAKEN	OH-2		2 0 2 4 2	2 <sub> </sub> 7 <sub> </sub> 0 <sub> </sub> 1 <sub>   </sub>								
SECONDARY CRASH	OH-1P Drivate Property		ORTING AGENCY NAME *	GHTS 0 1	HIT/SKIP 1 - Solved 2 - Unsolved		0 1 98 - ANIMAL 99 - UNKNOWN					
	1 - CITY * 2 - VILLAGE *	LOCATION: CITY, VILLAGE	CRASH DATE/TIME*         CRASH SEVERITY           0 9 3 0 2 0 2 4          0 2 4 0          5           1 - FATAL         2 - SERIOUS INJURY									
ROUTE TYPE	ROUTE NUMBER		PREFIX 1- NORTH 2-SOUTH 3-EAST 4-WEST GARFIELD ROAD TYPE			LATITUDE DECIMAL DECORES 3- MINOR INJUR SUSPECTED		SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE				
ROUTE TYPE	ROUTE NUMBER		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 8409	ENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE			5 - PROPERTY DAMAGE ONLY				
REFERENCE POINT	DIRECTION			ROAD TYPE AL - ALLEY HW - HIGHWAY	RD - ROAD			)				
3 - HOUSE #	2 SOUTH 3 - EAST 4 - WEST	US - FEDERAL SR - STATE R	US ROUTE DUTE ED COUNTY ROUTE	AL - ALLET THE - HIGHWAT AV - AVENUE LA - LANE BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL CT - COURT PK - PARKWAY DR - DRIVE PI - PIKE	ND - KOUADE SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY			NUMBER OF APPROACHES				
	1 - Miles 2 - Feet 3 - Yards	ROUTE	EU TOWNSHIP	HE - HEIGHTS PL - PLACE		ROADWAY						
	CATION of EIDET HADMEIII DWAY 9 - CROSSOVE			MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE				
0       6       1-0N ROADWAY       9- CROSSOVER         2-0N SHOULDER       1-DRIVEWAY / ALLEY       ACCESS         3-N MEDIAN       0-DRIVEWAY / ALLEY         4-ON ROADNIE       1-NALWAY VRODE         5-ON GORE       1-NOT COLLISION         4-ON ROADNIE       1-RALWAY VRODE         6-OUTSDE       12-SHARED USE PATHS         7-ON RAMP       13-BIKE LANE         8-OFF RAMP       14-TOLL BOOTH         9- OTHER / UNKNOWN       3-HEAD-ON						1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	(<4 FE 2 - DIVID (≥4 FE 3 - DIVID 4 - DIVID (ANY)	ED FLUSH MEDIAN ET) ED, DEPRESSED MEDIAN ED, RAISED MEDIAN				
WORK ZONE RELATED     WORKERS PRESENT     LAW ENFORCEMENT     PRESENT     ACTIVE SCHOOL ZONE     LIGHT	2 <sup>2-3-</sup>	WORK ZONE T LANE CLOSURE LANE SHIFT/CROSSOVE WORK ON SHOULDER OR MEDIAN INTERMITTENT OR MOVI OTHER	R	ORK			CONDITIONS	SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICKBLOCK 4 - SLAG, GRAVEL,				
1. DAYLIGHT     1. CLEAR     9       3. DARK - LIGHTED ROADWAY     1. CLEAR     6. SNOW       3. DARK - LIGHTED ROADWAY     2. CLOUPY     7. SEVERE CROSSWINDS       5. DARK - LIGHTED ROADWAY     3. FOO, SMOG, SMOKE     8. BLOWING SAND, SOIL, DIRT, SNOW       9. OTHER / UNKNOWN NOT LIGHTING     5. SLEET, HAIL     99. OTHER / UNKNOWN							6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHERIUNKNOWN	STONE 5-DIRT 9-OTHER /UNKNOWN				
NADRATIVE UNIT 1 WAS FLEEING FROM POLICE N/B ON E. 85 ST.												
TOWARDS GARFIELD BLVD.												
UNIT 1 WENT												
LOST CONTROL LEAVING THE ROADWAY.												
UNIT-1 STRUCK A CONCRETE PILLAR IN FRONT OF 8409 ·····												
E #538619)												
CRASH REPORTE	D DATE/TIME		DISPATCH DATE/TIME				ED DATE/TIME	REPORT TAKEN BY POLICE AGENCY				
0 9 3 0 2 0 2	4 0240 OTHER INVESTIGATION	0 9 3 0 total	0FFICER'S NAME *	411 019131012101214		0 9 3 0 2 0 2	2 4   0 4 0 0					
CLOSED	TIME	MINUTES P. Stockhausen V. Walker OFFICER'S BADGE NUMBER' CHECKED BY OFFICER'S BADGE NUMBER'				NUMBER*	CORRECTION or ADDITION					
0         3         0         1         0         0         2         5         1         1         5         1         1         5         1						PAGE OF						



OHIO DEPARTMENT OF PUBLIC SAFETY	MOTORIST / NO	LOCAL REPORT NUMBER					
BAPETY - SERVICE - PROTECTION							
		DATE OF BIRTH AGE GENDER					
ADDRESS: STREET, CITY, STATE, ZIP	OWN				CONTACT PHONE - INCLUDE AREA CODE	<u> </u>	
SUNKNO	WN	CLEVEL	AND OH				
N BY	AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY	(NAME, CITY) SAFETY EQUIPM USED		DOT-COMPLIANT	R BAG USAGE EJECTION TRAPPED	
OL STATE OPERATOR LICEN	SE NUMBER	OFFENSE CHARGED	LOCAL OF				
		OT LIVE OF ANOLD					
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER A DISTRACTED		CONDITION	ALCOHOL TEST TYPE VALUE STATUS	DRUG TEST(S) TYPE RESULT SELECT UP TO 4	
1 S			COHOL MARUUANA				
M UNIT # NAME: LAST, FIRST,	MIDDLE				DATE OF BIRTH	AGE GENDER	
R ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE		
T / INJURIES INJURED EMS TAKEN EMS	SAGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY	Y (NAME, CITY) SAFETY EQUIPM USED			R BAG USAGE EJECTION TRAPPED	
N BY			USED		DOT-COMPLIANT MC HELMET		
OL STATE OPERATOR LICEN	SE NUMBER	OFFENSE CHARGED	LOCAL OFF CODE	ENSE DESCRIPTION	СП	ATION NUMBER	
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER A	LCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST	DRUG TEST(S)	
R SELECT UP TO 2		DISTRACTED BY ALC	OHOL MARUUANA	STATUS	TYPE VALUE STATUS	TYPE RESULT SELECT UP TO 4	
M UNIT # NAME: LAST, FIRST, I		OTH			DATE OF BIRTH		
R ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE		
			SAFETY EQUIPM	ENT			
I INJURIES INJURED TAKEN BY O	SAGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY	(NAME, CITY) USED		SEATING POSITION AII DOT-COMPLIANT MC HELMET	R BAG USAGE EJECTION TRAPPED	
OL STATE     OPERATOR LICEN	SE NUMBER	OFFENSE CHARGED	LOCAL OF	FENSE DESCRIPTION			
			CODE				
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER A DISTRACTED BY ALCI		CONDITION	ALCOHOL TEST TYPE VALUE STATUS	DRUC TIEST(S) TYPE RESULT SELECT UP TO 4	
		ОТН					
INJURIES	SEATING POSITION 1 - FRONT - LEFT SIDE	AIR BAG 1 - NOT DEPLOYED	OL CLASS 1 - CLASS A	OL RESTRICTION 1 - ALCOHOL INTERLOCK	(S) DRIVER DISTRACTION 1 - NOT DISTRACTED	TEST STATUS 1 - NONE GIVEN	
2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B	DEVICE 2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION	2 - TEST REFUSED	
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE	3 - CLASS C 4 - REGULAR CLASS (OHIO = D)	3 - CORRECTIVE LENSES 4 - FARM WAIVER	DEVICE (TEXTING, TYPING, DIALING)	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE	
5 - NO APPARENT INJURY	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M / C MOPED ONLY	5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A	3 - TALKING ON HANDS-FREE	4 - TEST GIVEN, RESULTS KNOWN	
	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	& CLASS B BUS 7 - EXCEPT TRACTOR-TRAIL	COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD	5 - TEST GIVEN, RESULTS UNKNOWN	
INJURED TAKEN BY 1 - NOT TRANSPORTED	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE			8 - INTERMEDIATE LICENSE RESTRICTIONS	COMMUNICATION DEVICE		
/TREATED AT SCENE 2 - EMS	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF	EJECTION	OL ENDORSEMENT	9 - LEARNER'S PERMIT RESTRICTIONS	ELECTRONIC DEVICE 6 - PASSENGER	ALCOHOL TEST TYPE	
3 - POLICE 9 - OTHER / UNKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER	1 - NOT EJECTED 2 - PARTIALLY EJECTED	H - HAZMAT M - MOTORCYCLE	10 - LIMITED TO DAYLIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE	1 - NONE 2 - BLOOD	
	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	3 - TOTALLY EJECTED	P - PASSENGER	11 - LIMITED TO EMPLOYMEN		3 - URINE	
SAFETY EQUIPMENT	PICK-UP WITH CAP) 12 - PASSENGER IN	4 - NOT APPLICABLE	N - TANKER Q - MOTOR SCOOTER	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND	9 - OTHER / UNKNOWN	4 - BREATH 5 - OTHER	
1 - NONE USED 2 - SHOULDER BELT ONLY USED	UNENCLOSED CARGO AREA	TRAPPED	R - THREE-WHEEL MOTORCYCLE	CONTROLS, OR OTHER ADAPTIVE DEVICES)			
3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED	13 - TRAILING UNIT 14 - RIDING ON VEHICLE	1 - NOT TRAPPED 2 - EXTRICATED BY	S - SCHOOL BUS	14 - MILITARY VEHICLES ON 15 - MOTOR VEHICLES	LY	DRUG TEST TYPE	
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	EXTERIOR (NON-TRAILING UNIT)	MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT	WITHOUT AIR BRAKES		1 - NONE 2 - BLOOD	
6 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	3 - FREED BY NON-MECHANICAL MEANS		17 - PROSTHETIC AID 18 - OTHER	CONDITION 1 - APPARENTLY NORMAL	3 - URINE	
7 - BOOSTER SEAT 8 - HELMET USED			18 - UTHER		2 - PHYSICAL IMPAIRMENT	4 - OTHER	
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)			GENDER		3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	DRUG TEST RESULT(S)	
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN			F - FEMALE		4 - ILLNESS 5 - FELL ASLEEP, FAINTED,	1 - AMPHETAMINES 2 - BARBITURATES	
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			M - MALE U - OTHER/UNKNOWN		FATIGUED, ETC.	3 - BENZODIAZEPINES 4 - CANNABINOIDS	
					6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	5 - COCAINE 6 - OPIATES / OPIOIDS	
					9 - OTHER / UNKNOWN	7 - OTHER 8 - NEGATIVE RESULTS	
						U HEORINE REOUERO	