OHIO DEPARTM OF PUBLIC SAI SAPETY - BENYICE - PRO	TRAFFIC	CRASH	REPORT *DENO	TES MANDATORY FIELD FOR SUPPLEMENT REPORT			LOCAL REPORT NUMBE	₹*
☐ PHOTOS TAKEN	□ OH-2 □		ALINFORMATION  31 SAYBROOK S	STOLEN		[2]0 2 4	2   9   8   7	
SECONDARY CRASH	OH-1P Private Property		ORTING AGENCY NAME	.0.1	NCIC*   8   2   0	HIT/SKIP 1 - Solved 2   2 - Unsolved	NIIMRED OF LIMITS	0 1 1 98 - ANIMAL 99 - UNKNOWN
COUNTY* LOCALIT		LOCATION: CITY, VILLAGE, 1	ARFIELD HEIC	סוחכ שב		CRASH DA		CRASH SEVERITY
1 8 1 1	2 - VILLAGE *	GARFIELD	HTS			1030202	4   0 3 2 1	2 1- FATAL 2- SERIOUS INJURY
ROUTE TYPE	ROUTE NUMBER	2	- SOUTH	N ROAD NAME	ROAD TYPE	I ATITIDE DECIMA		SUSPECTED 3 - MINOR INJURY SUSPECTED
Гося		4	- WEST E 131	ST 	[S <sub> </sub> T <sub>]</sub>	<u>[4]1].[4]3</u>		4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE
ROUTE TYPE	ROUTE NUMBER	2 3	- SOUTH	ENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL		ONLY
# L   L				ROVE	[A <sub>I</sub> V <sub>I</sub>	[8 <sub>1</sub> 1 <sub>]</sub> [5 <sub>1</sub> 9	INTERSECTION RELATED	
1 - INTERSECTION 2 - MILE POST	DIRECTION	IR - INTERSTAT	* /		RD - ROAD SQ - SQUARE	■ WITHIN INTERSE	CTION OR ON APPROACH	. 3
1 3 - HOUSE #	1 3-EAST 4-WEST	US - FEDERAL I SR - STATE RO CR - NUMBERE		BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL	ST - STREET TE - TERRACE TL - TRAIL	■ WITHIN INTERCH.	ANGE AREA	NUMBER OF APPROACHES
DISTANCE EDOM DECEDEMOS	DISTANCE  INSTANCE MEACUIDE  1 - Miles	TR - NUMBERE ROUTE	D TOWNSHIP		WA - WAY		ROADWAY	
2   5	2 - Feet 3 - Yards					☐ ROADWAY DIVID	ED	
0 1 1 1-0N ROAL		R	1 - NOT COLLISIO	MANNER OF CRASH COLLISION/IMPACT  A - REAR-TO-REAR		DIRECTION of TRAVEL		MEDIAN TYPE
2 - ON SHOU 3 - IN MEDIA 4 - ON ROAL 5 - ON GORI	AN ACCESS DSIDE 11 - RAILWAY	GRADE	1 BETWEEN TWO MOTOR VEHICLES IN	5 - BACKING 6 - ANGLE		1 - NORTH 2 - SOUTH	(<4 FEI	D FLUSH MEDIAN ET) D FLUSH MEDIAN
6 - OUTSIDE TRAFFIC 7 - ON RAMI	= 12 - SHARED L WAY OR TRAIL:	JSE PATHS S	TRANSPORT 2 - REAR-END 3 - HEAD-ON	7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN		3 - EAST 4 - WEST	(≥4 FEI 3 - DIVIDE 4 - DIVIDE	ET) D, DEPRESSED MEDIAN D, RAISED MEDIAN
8 - OFF RAN		TH	2				(ANY T 9 - OTHER	YPE) !/UNKNOWN
WORK ZONE RELATED WORKERS PRESENT LAW ENFORCEMENT	2 -	WORK ZONE TY LANE CLOSURE LANE SHIFT/CROSSOVER		LOCATION OF CRASH IN WORK ZO  1 - BEFORE THE 1ST WORK ZO  WARNING SIGN	NE NE	contour 3	conditions	surface
PRESENT		WORK ON SHOULDER OR MEDIAN INTERMITTENT OR MOVIN	IC WORK	2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE
☐ ACTIVE SCHOOL ZONE	5 -	OTHER		5 - TENWINATION AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW 4 - ICE	2 - BLACKTOP, BITUMINOUS, ASPHALT
LIGHT 1 - DAYLIGHT	T CONDITION		1 - CLEAR	WEATHER 6 - SNOW		4 - CURVE GRADE 9 - OTHER /UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING)	3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT
2 - DAWN/DUSK 3 - DARK - LIGHT 4 - DARK - ROAD	WAY NOT LIGHTED		2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE	<u>:</u>		7 - SLUSH 9 - OTHER/UNKNOWN	9 - OTHER /UNKNOWN
5 - DARK - UNKN 9 - OTHER / UNKI	OWN ROADWAY LIGHTING NOWN		5 - SLEET, HAIL	99 - OTHER / UNKNOWN				
NARRATIVE								Indicate the north direction with
UNIT #1 WAS					} }			an "N" on the compass diagram.
SAYBROOK A				N IT		1	\ 1	
LOST CONTR	OL, RAN OFF	THE ROA	D LEFT AND			<u> </u>	Saybr	ook Ave
STRUCK THR	REE UTILITY P	OLES, THI	ERE WERE TH	IREE				
TOTAL OCCU	PANTS, ALL C	DF.WHICH.	FLED THE SC	ENE			1	<u> </u>
ON FOOT.						tr.	} \	
						E 131st St	1	
						_		\
						3		Utility Poles
							WAY A	lvjn Ave
CRASH REPORTE	D DATE/TIME I		DISPATCH DATE/TIME			SCENE CLEAR	PED DATE/TIME	REPORT TAKEN BY
1101310121012			2 0 2 4   0 3 2			1101310121012		POLICE AGENCY  MOTORIST
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	officer's NAME * M. S Malak		CHECKED BY OF	FICER'S NAME*		SUPPLEMENT
6,0,	3,0,,	110121	OFF	CICER'S BADGE NUMBER*		CHECKED BY OFFICER'S BADGE	NUMBER*	(CORRECTION on ADDITION TO AN ADDITION STORM ADDITION TO AN ADDITION SHAPE SHA

	OH OF SAPE	PUBLIC SAFETY UNIT					2,0,2,4,2,	LOCAL REPORT NUMBER  9   8   7
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE	E (□ Sam	ne As Driver)	OWNER PHONE: INCLUDE AREA CODE	( Same As Driver)		DAMAGE
	_0 _1 _							DAMAGE SCALE
WNER	OWNER ADDRE	ESS: STREET, CITY, STATE, ZIP	( Same As Di	river)			1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
٥	COMMERCIAL CA	ARRIER: NAME, ADDRESS, CITY, STATE, ZIF	•		COMMERCIAL CARRIER PHONE: INCL	UDE AREA CODE		o ontioni
								DAMAGED AREA(S)
Ī	LP STATE	LICENSE PLATE # KMG4484		HICLE IDENTIFICATION #	VEHICLE YEAR 5, 5, 8, 2, 0, 2,	VEHICLE MAKE 4 Acura		INDICATE ALL THAT APPLY
	OH	URANCE INSURANCE COMPANY		INSURANCE POLICY#	VEHICLE COLOR	VEHICLE MODEL		11 12 1
		RIFIED			WHI	SW	10 1 2	10 11 1
	☐ COMMER	TYPE OF USE  RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPANY NAME		9 9 3	3 9 9 3 3
	INTERLO		# OCCUPANTS	VEHICLE WEIGHT GWWR/GCWR		US MATERIAL	7 5	7 5 4
	DEVICE EQUIPPE		0 3	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	MATERIAL RELEASED  PLACARD	CLASS# PLACARD ID#	7 6 5	12 7 6
		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12 - GOLF CART 13 - SNOWMOBILE	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS)	23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE)	10/	11 1 2
	0   3	3 - SPORT UTILITY VEHICLE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR	20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON- MOTORIST 26 - BICYCLE	9 (	9 3 3
	UNIT TYPE	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	7.	7 6 5 7
J.			(ATV / UTV)				12 1	7 6 5 12
VEHICLE		# OF TRAILING UNITS					10 12	10 11 12 1
		WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	DMOUS MODE	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 2	10 2
	2	1 - YES 2 - NO 9 - OTHER / UNKNO	WN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - FULL AUTOMATION		9 3 4	8 4 -
		1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FARM 17 - MOWING	21 - MAIL CARRIER 99 - OTHER /UNKNOWN	8 7 6 5	8 7 6 5
	0 1 SPECIAL	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	8 - BUS - SHUTTLE 9 - BUS - OTHER	13 - POLICE 14 - PUBLIC UTILITY	18 - SNOW REMOVAL 19 - TOWING	55 - OTHER/UNKNOWN	6	6
	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	a M a	<b>★ 1</b> ■
	CARGO BOD	Y - 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 8 3
	1 1 1	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6	
	VEHICLE DEFECTS	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6
		1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	- NO DAMAGE [0]	- UNDERCARRIAGE [14]
	NON-MOTORIST LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED	CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	- TOP [13]	ALL AREAS [15]  NOT AT SCENE [16]
	IMPACI	CROSSWALK  1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE	INI	TIAL POINT OF CONTACT
	3	2 - NON-COLLISION 3 - STRIKING	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED	14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING,	19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE	0 - NO DAMAGE	14 - UNDERCARRIAGE
	ACTION	4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTION	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED IN TRAFFIC	JOGGING, PLAYING	DISABLED VEHICLE  99 - OTHER / UNKNOWN	1 1 1 1-12 - REFER TO U	JNIT 15 - VEHICLE NOT AT SCENE
		& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	12 - DRIVERLESS	17 - PUSHING VEHICLE		13 - TOP	99 - UNKNOWN
								TRAFFIC
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO	13 - IMPROPER START FROM A PARKED POSITION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN
		3 - RAN RED LIGHT 4 - RAN STOP SIGN	CLOSE/ACDA 9 - IMPROPER LANE CHANGING	14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	EQUIPMENT  19 - LOAD SHIFTING/ FALLING/SPILLING	23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	- 2. SIGNAL E VIELD SIGN
	$\lfloor 0 \rfloor 5$	5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	6 3 - FLASHER 6 - NO CONTROL
	CONTRIBUTING CIRCUMSTANCES		12 - IMPROPER BACKING				# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
T(S)	05015105	- FMENTO						1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING
EVENT(S	SEQUENCE OF			EVENTS			2	1 3 - INVOLVED - PASSIVE CROSSING
		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT	LIMIT	T / NON-MOTORIST DIRECTION
		3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT	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	I	1 - NORTH 5 - NORTHEAST
	<sup>2</sup> 4 0	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 <sub>1</sub> 4 <sub>1</sub> 0 <sub>1</sub>					24 - OTHER MOVABLE OBJECT	FROM 1 TO	3 - EAST 7 - SOUTHEAST  4 - WEST 8 - SOUTHWEST
				COLLISION WITH FIXED OBJEC	T - STRUCK 43 - CURB	50 -WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN
	4.4.0.	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	44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED
		STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	0.0	1
	5	28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER	SUPPORT 42 - CULVERT	48 - TREE 49 - FIRE HYDRANT	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	9,0,	1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR
	6.	GO GORNOLONIC PROC	36 - MEDIAN OTHER BARRIER				POSTED SPEED	3 - UNDETERMINED
							. 55.25 5. 525	
	1	FIRST HARMFUL EVENT	4 <sub>  M</sub>	OST HARMFUL EVENT			2   5	
HS	Y8304 OH1U 1/19		mir				<u> </u>	PAGE OF

OHIO DEPARTMENT OF PUBLIC SAFETY	MOTORIST / NO	N-MOTORI:	ST						REPORT NUMBER		
M UNIT# NAME: LAST, FIRE						2	0 2 4	2	9   8   7	AGE	GENDER
0 0 1	NOWN									AGE	M
R ADDRESS: STREET, CITY, STATE, ZIP						CONTACT F	PHONE - INCLUDE AREA COD	E .			
ī	MS AGENCY (NAME)	INJURED TAKEN TO: MEDIC	AL FACILITY (NAME, CITY)	OH SAFETY EQU			SEATING PO	SITION	AIR BAG USAGE	EJECTION	TRAPPED
N 2 BY 9				USED		DOT-COMPLIANT MC HELMET			4	_1	1
OL STATE OPERATOR LIC	ENSE NUMBER	OFFENSE C	HARGED	LOCAL CODE	OFFENSE DESCRIPTION		•		CITATION NUMBER	₹ .	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT		CONDITION	ALCOHO TYPE	LTEST VALUE	STATU		UG TEST(S)	T SELECT UP TO 4
s T		BY	ALCOHOL MA	ARIJUANA L	9 1		■ L	1	S TIPE	J L L	I SELECT UP 104
M UNIT # NAME: LAST, FIRS	ST, MIDDLE			•	•	1	DATE OF B	RTH		AGE	GENDER
R ADDRESS: STREET, CITY, STATE, ZIP						CONTACT P	HONE - INCLUDE AREA CODE	<u> </u>			
S T							1 1 1				
N TAKEN BY	MS AGENCY (NAME)	INJURED TAKEN TO: MEDIC	AL FACILITY (NAME, CITY)	SAFETY EQU USED	JIPMENT	DOT-COMPLIANT MC HELMET	SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED
- OL STATE OPERATOR LIC	ENSE NUMBER	OFFENSE C	HARGED	LOCAL (	DFFENSE DESCRIPTION				CITATION NUMBER	l L	Ц
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECTE	En .	CONDITION	ALCOHOL	TEST		ng	UG TEST(S)	
R SELECT UP TO 2	RESTRICTION SELECT OF 103	DISTRACTED BY		RIJUANA	STATUS	TYPE	VALUE	STATUS	_		SELECT UP TO 4
S UNIT# NAME: LAST, FIRS	ST. MIDDLE		OTHER DRUG	L		<u>                                     </u>	DATE OF B	IRTH	╝	AGE	GENDER
,											
R ADDRESS: STREET, CITY, STATE, ZIP						CONTACT P	HONE - INCLUDE AREA CODE				
S T / INJURIES INJURED TAKEN E	MS AGENCY (NAME)	INJURED TAKEN TO: MEDIC	AL FACILITY (NAME, CITY)	SAFETY EQU USED	PMENT		SEATING POS	SITION	AIR BAG USAGE	EJECTION	TRAPPED
N						DOT-COMPLIANT MC HELMET					
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE C	HARGED	CODE	OFFENSE DESCRIPTION				CITATION NUMBER	1	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE	ED	CONDITION	ALCOHOL TYPE	VALUE	STATUS		UG TEST(S)	T SELECT UP TO 4
s L		BY	ALCOHOL MAI OTHER DRUG	RIJUANA L			- L	J L	_	اللا	I SELECT OF 104
INJURIES	SEATING POSITION  1 - FRONT - LEFT SIDE	AIR BAG	OL CL 1 - CLASS A	LASS	OL RESTRICTION  1 - ALCOHOL INTERLOCK		DRIVER DIS	TRACTION	1 - NONE	TEST STA	ATUS
1 - FATAL 2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER)  2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B		DEVICE 2 - CDL INTRASTATE ONL		1 - NOT DISTRACTED 2 - MANUALLY OPERATION			REFUSED	
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C		3 - CORRECTIVE LENSES		DEVICE (TEXTING, TYPE			GIVEN, CONTAMII	NATED
5 - NO APPARENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / S	,	HIO = D)	4 - FARM WAIVER 5 - EXCEPT CLASS A BUS		DIALING) 3 - TALKING ON HANDS-	FRFF		GIVEN, RESULTS	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 CLASS A & CLASS B BUS		COMMUNICATION DE	VICE	5 - TEST	GIVEN, RESULTS	UNKNOWN
INJURED TAKEN BY	7 - THIRD - LEFT SIDE	9-DEPLOTMENT UNKNOWN	0 - NO VALID OL		7 - EXCEPT TRACTOR-TR	AILER	4 - TALKING ON HAND-H COMMUNICATION DE				
1 - NOT TRANSPORTED /TREATED AT SCENE	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE				8 - INTERMEDIATE LICENS RESTRICTIONS	SE	5 - OTHER ACTIVITY WIT				
2 - EMS	9 - THIRD - RIGHT SIDE	EJECTION	OL ENDOR	RSEMENT	9 - LEARNER'S PERMIT		6 - PASSENGER			ALCOHOL TE	ST TYPE
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT		RESTRICTIONS  10 - LIMITED TO DAYLIGH	т	7 - OTHER DISTRACTION	NINSIDE	1 - NONI		
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	2 - PARTIALLY EJECTED	M - MOTORCYCLE		ONLY  11 - LIMITED TO EMPLOYI	MENT	THE VEHICLE  8 - OTHER DISTRACTION	IS OUTSIDE	2 - BLOO 3 - URIN		
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED  4 - NOT APPLICABLE	P - PASSENGER N - TANKER		12 - LIMITED - OTHER		THE VEHICLE		4 - BREA		
SAFETY EQUIPMENT	12 - PASSENGER IN	4-NOT AFFEIGABLE	Q - MOTOR SCOOTER		13 - MECHANICAL DEVICE (SPECIAL BRAKES, HAN		9 - OTHER / UNKNOWN		5 - OTHE		
1 - NONE USED 2 - SHOULDER BELT ONLY USED	UNENCLOSED CARGO AREA	TRAPPED	R - THREE-WHEEL MOT	FORCYCLE	CONTROLS, OR OTHER ADAPTIVE DEVICES)						
3 - LAP BELT ONLY USED	13 - TRAILING UNIT	1 - NOT TRAPPED	S - SCHOOL BUS		14 - MILITARY VEHICLES	ONLY				DRUG TEST	T TYPE
4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS	T - DOUBLE & TRIPLE T	RAILERS	15 - MOTOR VEHICLES WITHOUT AIR BRAKE	s			1 - NONE		
FORWARD FACING	(NON-TRAILING UNIT)  15 - NON-MOTORIST	3 - FREED BY	X - TANKER / HAZMAT		16 - OUTSIDE MIRROR		COND	ITION	2 - BLOO	D	
6 - CHILD RESTRAINT SYSTEM - REAR FACING	99 - OTHER / UNKNOWN	NON-MECHANICAL MEANS			17 - PROSTHETIC AID 18 - OTHER		1 - APPARENTLY NORM		3 - URINE		
7 - BOOSTER SEAT 8 - HELMET USED							2 - PHYSICAL IMPAIRME	NT	4 - OTHE	R	
9 - PROTECTIVE PADS USED							3 - EMOTIONAL (E.G. DE ANGRY, DISTURBED)	PRESSED,		DDUC TOTAL	EQUIT(e)
(ELBOWS, KNEES, ETC.)  10 - REFLECTIVE CLOTHING			GENI	DER			4 - ILLNESS		1 - AMPI	DRUG TEST R HETAMINES	ESOLI(S)
11 - LIGHTING - PEDESTRIAN			F - FEMALE				5 - FELL ASLEEP, FAINT	ED,	2 - BARE	BITURATES	
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			M - MALE U - OTHER/UNKNOWN				FATIGUED, ETC.			ODIAZEPINES NABINOIDS	
onen samom			U - OTHER/UNKNOWN				6 - UNDER THE INFLUEN MEDICATIONS / DRUG		5 - COC/		
							/ ALCOHOL			TES / OPIOIDS	
							9 - OTHER / UNKNOWN		7 - OTHE 8 - NEGA	RATIVE RESULTS	

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OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM					LOCAL REPORT NUMBER					
						2 0 2 4 2	9   8   7			
UNIT#	NAME: LAST, FI					DATE OF BIR	тн	AGE	GENDER	
ADDRESS: STREET, CITY, STATE, ZIP OH						CONTACT PHONE - INCLUDE AREA CODE				
INJURIES	INJURED EMS AGENCY (NAME) TAKEN BY			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	POSITION AIR BAG USAGI	EJECTION	TRAPPED	
UNIT#	NAME: LAST, FI	IRST, MIDDLE			'	DATE OF BIR	тн	AGE	GENDER	
_ 1	UNKNO	NWN								
ADDRESS: STREE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT		POSITION AIR BAG USAGE	EJECTION	TRAPPED	
	TAKEN BY				USED	DOT-COMPLIANT MC HELMET				
UNIT#	NAME: LAST, FI	IRST, MIDDLE				DATE OF BIR	тн	AGE	GENDER	
						CONTACT PURISH WAS USED AND A				
ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING	POSITION AIR BAG USAGE	EJECTION	TRAPPED	
						MC HELMET				
UNIT#	NAME: LAST, FI	IRST, MIDDLE				DATE OF BIR	тн	AGE	GENDER	
ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	ODE.		4	
ADDRESS: STRE	LE1, 0111, 01A12, 211							1 1	1	
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING	POSITION AIR BAG USAGE	EJECTION	TRAPPED	
						MC HELMET				
INJURIES  1 - FATAL  2 - SUSPECTED SERIOUS INJURY  3 - SUSPECTED MINOR INJURY  4 - POSSIBLE INJURY  5 - NO APPARENT INJURY  1 - NOT TRANSPORTED / TRADED AT SCENE  2 - EMIS 3 - POLICE 9 - OTHER / UNKNOWN  GENDER  F - FEMALE M - MALE U - OTHER/UNKNOWN		3 - LAP BELT O	BELT ONLY USED NLY USED	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORC'	YCLE PASSENGER)	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SI				
TREATED AT S 2 - EMS 3 - POLICE 9 - OTHER / UNKS F - FEMALE M - MALE U - OTHER/UNKNS	INJURE  PORTED / SCENE  GNOWN  GOWN		5 - CHILD REST FORWARD FA	raint system- G EAT ED EPADS USED HEES, ETC.) VIEC LOTHING PEDESTRIAN NLY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - MIDDLE 8 - THIRD - MIDDLE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCL (NON-TRAILING UNIT) 12 - PASSENGER IN UNENCLOSE 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIO (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	C CAB OSED CARGO AREA JP WITH CAP) O CARGO AREA	5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN  1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  1 - NOT TRAPPED 2 - EXTRICATED BY MECHANIC 3 - FREED BY NON-MECHANIC	APPED AL MEANS		
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