

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER \*

2 | 0 | 2 | 4 | 3 | 4 | 3 | 1 |

- PHOTOS TAKEN     OH-2     OH-3  
 SECONDARY CRASH     OH-1P     OTHER  
 Private Property

LOCAL INFORMATION

REPORTING AGENCY NAME \*

GARFIELD HEIGHTS

NCIC \*  
0 | 1 | 8 | 2 | 0

HITSKIP  
1 - Solved  
2 - Unsolved

NUMBER OF UNITS  
0 | 2

UNIT IN ERROR  
98 - ANIMAL  
99 - UNKNOWN  
0 | 1

COUNTY \*  
1 | 8

LOCALITY \*  
1

LOCATION: CITY, VILLAGE, TOWNSHIP \*  
GARFIELD HTS

CRASH DATE/TIME \*  
1 | 2 | 2 | 1 | 2 | 0 | 2 | 4 | 1 | 7 | 0 | 9

CRASH SEVERITY  
5

1 - FATAL  
2 - SERIOUS INJURY SUSPECTED  
3 - MINOR INJURY SUSPECTED  
4 - INJURY POSSIBLE  
5 - PROPERTY DAMAGE ONLY

ROUTE TYPE  
ROUTE NUMBER

PREFIX  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

LOCATION ROAD NAME  
TURNEY

ROAD TYPE  
R | D

LATITUDE DECIMAL DEGREES  
4 | 1 | 4 | 1 | 3 | 1 | 7 | 7

ROUTE TYPE  
ROUTE NUMBER

PREFIX  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)  
FORDHAM

ROAD TYPE  
R | D

LONGITUDE DECIMAL DEGREES  
8 | 1 | 6 | 0 | 3 | 2 | 6 | 2

REFERENCE POINT  
1 - INTERSECTION  
2 - MILE POST  
3 - HOUSE #  
1

DIRECTION  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST  
4

ROUTE TYPE  
IR - INTERSTATE ROUTE (TP)  
US - FEDERAL US ROUTE  
SR - STATE ROUTE  
CR - NUMBERED COUNTY ROUTE  
TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE  
AL - ALLEY  
AV - AVENUE  
BL - BOULEVARD  
CR - CIRCLE  
CT - COURT  
DR - DRIVE  
HE - HEIGHTS  
HW - HIGHWAY  
LA - LANE  
MP - MILEPOST  
OV - OVAL  
PK - PARKWAY  
PI - PIKE  
PL - PLACE  
RD - ROAD  
SQ - SQUARE  
ST - STREET  
TE - TERRACE  
TL - TRAIL  
WA - WAY

INTERSECTION RELATED  
 WITHIN INTERSECTION OR ON APPROACH  
 WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES  
2

DISTANCE  
1 | 5

DISTANCE  
1 - Miles  
2 - Feet  
3 - Yards  
2

ROADWAY  
 ROADWAY DIVIDED

LOCATION OF CRASH COLLISION/IMPACT EVENT  
0 | 1

1 - ON ROADWAY  
2 - ON SHOULDER  
3 - IN MEDIAN  
4 - ON ROADSIDE  
5 - ON GORE  
6 - OUTSIDE  
7 - ON RAMP  
8 - OFF RAMP  
9 - CROSSOVER  
10 - DRIVEWAY / ALLEY ACCESS  
11 - RAILWAY GRADE CROSSING  
12 - SHARED USE PATHS OR TRAILS  
13 - BIKE LANE  
14 - TOLL BOOTH  
99 - OTHER / UNKNOWN

MANNER OF CRASH COLLISION/IMPACT  
2

1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT  
2 - REAR-END  
3 - HEAD-ON  
4 - REAR-TO-REAR  
5 - BACKING  
6 - ANGLE  
7 - SIDESWIPE, SAME DIRECTION  
8 - SIDESWIPE, OPPOSITE DIRECTION  
9 - OTHER / UNKNOWN

DIRECTION OF TRAVEL  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

MEDIAN TYPE  
1 - DIVIDED FLUSH MEDIAN (<4 FEET)  
2 - DIVIDED FLUSH MEDIAN (24 FEET)  
3 - DIVIDED, DEPRESSED MEDIAN  
4 - DIVIDED, RAISED MEDIAN (ANY TYPE)  
9 - OTHER / UNKNOWN

- WORK ZONE RELATED  
 WORKERS PRESENT  
 LAW ENFORCEMENT PRESENT  
 ACTIVE SCHOOL ZONE

WORK ZONE TYPE  
1 - LANE CLOSURE  
2 - LANE SHIFT/CROSSOVER  
3 - WORK ON SHOULDER  
4 - INTERMITTENT OR MOVING WORK  
5 - OTHER

LOCATION OF CRASH IN WORK ZONE  
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN  
2 - ADVANCE WARNING AREA  
3 - TRANSITION AREA  
4 - ACTIVITY AREA  
5 - TERMINATION AREA

CONTOUR  
1

1 - STRAIGHT LEVEL  
2 - STRAIGHT GRADE  
3 - CURVE LEVEL  
4 - CURVE GRADE  
9 - OTHER / UNKNOWN

CONDITIONS  
3

1 - DRY  
2 - WET  
3 - SNOW  
4 - ICE  
5 - SAND, MUD, DIRT, OIL, GRAVEL  
6 - WATER (STANDING, MOVING)  
7 - SLUSH  
9 - OTHER/UNKNOWN

SURFACE  
1

1 - CONCRETE  
2 - BLACKTOP, BITUMINOUS, ASPHALT  
3 - BRICK/BLOCK  
4 - SLAG, GRAVEL, STONE  
5 - DIRT  
9 - OTHER / UNKNOWN

LIGHT CONDITION  
2

1 - DAYLIGHT  
2 - DAWN/DUSK  
3 - DARK - LIGHTED ROADWAY  
4 - DARK - ROADWAY NOT LIGHTED  
5 - DARK - UNKNOWN ROADWAY LIGHTING  
9 - OTHER / UNKNOWN

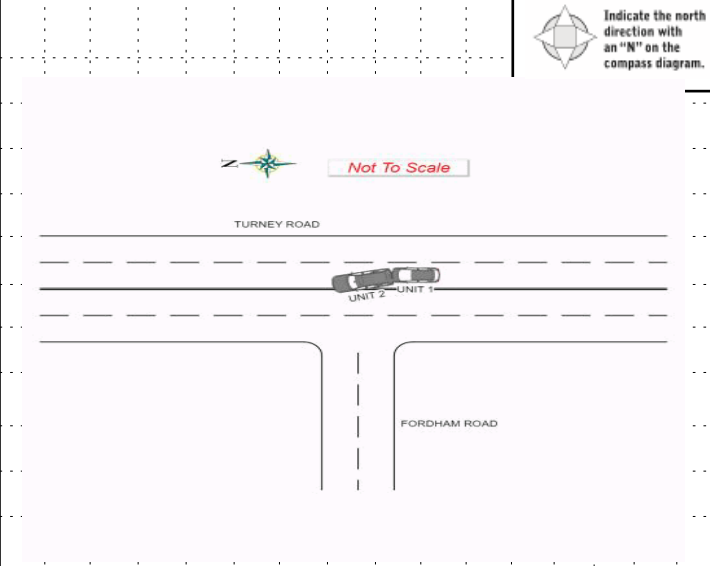
WEATHER  
6

1 - CLEAR  
2 - CLOUDY  
3 - FOG, SMOG, SMOKE  
4 - RAIN  
5 - SLEET, HAIL  
6 - SNOW  
7 - SEVERE CROSSWINDS  
8 - BLOWING SAND, SOIL, DIRT, SNOW  
9 - FREEZING RAIN OR FREEZING DRIZZLE  
99 - OTHER / UNKNOWN

CONTAINS: 1 - STRAIGHT LEVEL, 2 - STRAIGHT GRADE, 3 - CURVE LEVEL, 4 - CURVE GRADE, 9 - OTHER / UNKNOWN

NARRATIVE

UNIT 2 WAS TRAVELING NORTHBOUND ON TURNEY ROAD AND WAS YIELDING TO TRAFFIC TO MAKE A LEFT HAND TURN ONTO FORDHAM ROAD. UNIT 1 WAS TRAVELING NORTHBOUND ON TURNEY ROAD AND DID NOT KEEP ASSURED CLEAR DISTANCE AND STRUCK UNIT 2. UNIT 2 SUFFERED MINOR DAMAGE TO REAR. UNIT 1 HAD FUNCTIONAL DAMAGE ON FRONT END AND FRONT PASSENGER SIDE.



CRASH REPORTED DATE/TIME  
1 | 2 | 2 | 1 | 2 | 0 | 2 | 4 | 1 | 7 | 0 | 9

DISPATCH DATE/TIME  
1 | 2 | 2 | 1 | 2 | 0 | 2 | 4 | 1 | 7 | 1 | 0

ARRIVAL DATE/TIME  
1 | 2 | 2 | 1 | 2 | 0 | 2 | 4 | 1 | 7 | 1 | 2

SCENE CLEARED DATE/TIME  
1 | 2 | 2 | 1 | 2 | 0 | 2 | 4 | 1 | 7 | 3 | 5

REPORT TAKEN BY  
 POLICE AGENCY  
 MOTORIST

TOTAL TIME ROADWAY CLOSED  
0

OTHER INVESTIGATION TIME  
1 | 5

TOTAL MINUTES  
4 | 0

OFFICER'S NAME \*  
Se. Sabelli

OFFICER'S BADGE NUMBER \*  
0 | 2 | 6

CHECKED BY OFFICER'S NAME \*  
T. Baon

CHECKED BY OFFICER'S BADGE NUMBER \*  
S | 2 | 0

SUPPLEMENT  
(CORRECTION - ADDITION)

**OWNER**

UNIT # 0 1 OWNER NAME: LAST, FIRST, MIDDLE (☐ Same As Driver)  
**EPSE KONE SALAMATA OUATTARA**

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ Same As Driver)  
**624 TURNEY ROAD BEDFORD OH 44128**

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**

**DAMAGE SCALE**

1 - NONE  
2 - MINOR DAMAGE  
3 - FUNCTIONAL DAMAGE  
4 - DISABLING DAMAGE  
9 - UNKNOWN

3

**VEHICLE**

LP STATE OH LICENSE PLATE # LIONNE VEHICLE IDENTIFICATION # JJTDEPRAE71LJ046245 VEHICLE YEAR 2020 VEHICLE MAKE Toyota

INSURANCE VERIFIED  INSURANCE COMPANY ALLSTATE INSURANCE POLICY # 974664779 VEHICLE COLOR BLK VEHICLE MODEL Corolla

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  # OCCUPANTS 0 1

US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_

HAZARDOUS MATERIAL:  MATERIAL RELEASED CLASS # \_\_\_\_\_ PLACARD ID # \_\_\_\_\_

**DAMAGED AREA(S)**  
INDICATE ALL THAT APPLY

☐ - NO DAMAGE [0]      ☐ - UNDERCARRIAGE [14]  
☐ - TOP [13]      ☐ - ALL AREAS [15]  
☐ - UNIT NOT AT SCENE [16]

UNIT TYPE: 0 1

1 - PASSENGER CAR      7 - MOTORCYCLE 2-WHEELED      12 - GOLF CART      18 - LIMO (LIVERY VEHICLE)      23 - PEDESTRIAN SKATER  
2 - PASSENGER VAN (MINIVAN)      8 - MOTORCYCLE 3-WHEELED      13 - SNOWMOBILE      19 - BUS (16+ PASSENGERS)      24 - WHEELCHAIR (ANY TYPE)  
3 - SPORT UTILITY VEHICLE      9 - AUTOCYCLE      14 - SINGLE UNIT TRUCK      20 - OTHER VEHICLE      25 - OTHER NON-MOTORIST  
4 - PICK UP      10 - MOPED OR MOTORIZED BICYCLE      15 - SEMI-TRACTOR      21 - HEAVY EQUIPMENT      26 - BICYCLE  
5 - CARGO VAN      11 - ALL TERRAIN VEHICLE (ATV / UTV)      16 - FARM EQUIPMENT      22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE      27 - TRAIN  
6 - VAN (9-15 SEATS)

# of TRAILING UNITS \_\_\_\_\_

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

1 - YES    2 - NO    9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL: 0

0 - NO AUTOMATION      1 - DRIVER ASSISTANCE      3 - CONDITIONAL AUTOMATION      9 - UNKNOWN  
1 - PARTIAL AUTOMATION      2 - PARTIAL AUTOMATION      4 - HIGH AUTOMATION      5 - FULL AUTOMATION

SPECIAL FUNCTION: 0 1

1 - NONE      6 - BUS - CHARTER/TOUR      11 - FIRE      16 - FARM      21 - MAIL CARRIER  
2 - TAXI      7 - BUS - INTERCITY      12 - MILITARY      17 - MOWING      99 - OTHER UNKNOWN  
3 - ELECTRONIC RIDE SHARING      8 - BUS - SHUTTLE      13 - POLICE      18 - SNOW REMOVAL  
4 - SCHOOL TRANSPORT      9 - BUS - OTHER      14 - PUBLIC UTILITY      19 - TOWING  
5 - BUS-TRANSIT/COMMUTER      10 - AMBULANCE      15 - CONSTRUCTION EQUIPMENT      20 - SAFETY SERVICE PATROL

CARGO BODY TYPE: 0 1

1 - NO CARGO BODY TYPE / NOT APPLICABLE      3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE      5 - INTERMODAL CONTAINER CHASSIS      8 - POLE      12 - CONCRETE MIXER  
2 - BUS      4 - LOGGING      6 - CARGO VAN/ENCLOSED BOX      9 - CARGO TANK      13 - AUTO TRANSPORTER  
7 - GRAIN/CHIPS/GRAVEL      10 - FLAT BED      11 - DUMP      14 - GARBAGE/REFUSE      99 - OTHER / UNKNOWN

VEHICLE DEFECTS: 0 1

1 - TURN SIGNALS      4 - BRAKES      7 - WORN OR SLICK TIRES      9 - MOTOR TROUBLE      99 - OTHER / UNKNOWN  
2 - HEAD LAMPS      5 - STEERING      8 - TRAILER EQUIPMENT DEFECTIVE      10 - DISABLED FROM PRIOR ACCIDENT

NON-MOTORIST LOCATION AT IMPACT: 0 1

1 - INTERSECTION - MARKED CROSSWALK      3 - INTERSECTION - OTHER      6 - BICYCLE LANE      9 - MEDIAN/CROSSING ISLAND      12 - FIRST RESPONDER AT INCIDENT SCENE  
2 - INTERSECTION - UNMARKED CROSSWALK      4 - MIDBLOCK - MARKED CROSSWALK      7 - SHOULDER/ROADSIDE      10 - DRIVEWAY ACCESS      99 - OTHER / UNKNOWN  
5 - TRAVEL LANE-OTHER LOCATION      8 - SIDEWALK      11 - SHARED USE PATHS OR TRAILS

ACTION: 4

1 - NON-CONTACT      1 - STRAIGHT AHEAD      7 - MAKING U-TURN      13 - NEGOTIATING A CURVE      18 - APPROACHING OR LEAVING VEHICLE  
2 - NON-COLLISION      2 - BACKING      8 - ENTERING TRAFFIC LANE      14 - ENTERING OR CROSSING SPECIFIED LOCATION      19 - STANDING  
3 - STRIKING      3 - CHANGING LANES      9 - LEAVING TRAFFIC LANE      15 - WALKING, RUNNING, JOGGING, PLAYING      20 - OTHER NON-MOTORIST  
4 - STRUCK      4 - OVERTAKING/PASSING      10 - PARKED      16 - WORKING      21 - STANDING OUTSIDE DISABLED VEHICLE  
5 - BOTH STRIKING & STRUCK      5 - MAKING RIGHT TURN      11 - SLOWING OR STOPPED IN TRAFFIC      99 - OTHER / UNKNOWN  
9 - OTHER / UNKNOWN      6 - MAKING LEFT TURN      12 - DRIVERLESS      17 - PUSHING VEHICLE

**INITIAL POINT OF CONTACT**

1 2

0 - NO DAMAGE      14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM      15 - VEHICLE NOT AT SCENE  
13 - TOP      99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 0 8

1 - NONE      7 - LEFT OF CENTER      13 - IMPROPER START FROM A PARKED POSITION      17 - VISION OBSTRUCTION      21 - LYING IN ROADWAY  
2 - FAILURE TO YIELD      8 - FOLLOWING TOO CLOSE/ACDA      14 - STOPPED OR PARKED ILLEGALLY      18 - OPERATING DEFECTIVE EQUIPMENT      22 - NOT DISCERNABLE  
3 - RAN RED LIGHT      9 - IMPROPER LANE CHANGING      15 - SWERVING TO AVOID      19 - LOAD SHIFTING/ FALLING/SPILLING      23 - OPENING DOOR INTO ROADWAY  
4 - RAN STOP SIGN      10 - IMPROPER PASSING      16 - WRONG WAY      20 - IMPROPER CROSSING      99 - OTHER IMPROPER ACTION  
5 - UNSAFE SPEED      11 - DROVE OFF ROAD      12 - IMPROPER BACKING

**TRAFFIC**

**TRAFFICWAY FLOW**      **TRAFFIC CONTROL**

2      1 - ONE-WAY      6      1 - ROUNDABOUT      4 - STOP SIGN  
2 - TWO-WAY      2 - SIGNAL      5 - YIELD SIGN  
3 - FLASHER      6 - NO CONTROL

**EVENT(S)**

SEQUENCE OF EVENTS

1 2 0

1 - OVERTURN/ROLLOVER      6 - EQUIPMENT FAILURE      11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL      16 - RAILWAY VEHICLE      22 - WORK ZONE MAINTENANCE EQUIPMENT  
2 - FIRE/EXPLOSION      7 - SEPARATION OF UNITS      12 - DOWNHILL RUNAWAY      17 - ANIMAL - FARM      23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
3 - IMMERSION      8 - RAN OFF ROAD RIGHT      13 - OTHER NON-COLLISION      18 - ANIMAL - DEER      24 - OTHER MOVABLE OBJECT  
4 - JACKKNIFE      9 - RAN OFF ROAD LEFT      14 - PEDESTRIAN      19 - ANIMAL - OTHER      25 - OTHER FIXED OBJECT  
5 - CARGO / EQUIPMENT LOSS OR SHIFT      10 - CROSS MEDIAN      15 - PEDALCYCLE      20 - MOTOR VEHICLE IN TRANSPORT      99 - OTHER / UNKNOWN

# OF THROUGH LANES ON ROAD: 4

**RAIL GRADE CROSSING**

1

1 - NOT INVOLVED  
2 - INVOLVED - ACTIVE CROSSING  
3 - INVOLVED - PASSIVE CROSSING

**COLLISION WITH FIXED OBJECT - STRUCK**

25 - IMPACT ATTENUATOR / CRASH CUSHION      31 - GUARDRAIL END      37 - TRAFFIC SIGN POST      43 - CURB      50 - WORKZONE MAINTENANCE EQUIPMENT  
26 - BRIDGE OVERHEAD STRUCTURE      32 - PORTABLE BARRIER      38 - OVERHEAD SIGN POST      44 - DITCH      51 - WALL  
27 - BRIDGE PIER OR ABUTMENT      33 - MEDIAN CABLE BARRIER      39 - LIGHT/LUMINARIES SUPPORT      45 - EMBANKMENT      52 - BUILDING  
28 - BRIDGE PARAPET      34 - MEDIAN GUARDRAIL BARRIER      40 - UTILITY POLE      46 - FENCE      53 - TUNNEL  
29 - BRIDGE RAIL      35 - MEDIAN CONCRETE BARRIER      41 - OTHER POST, POLE OR SUPPORT      47 - MAILBOX      54 - OTHER FIXED OBJECT  
30 - GUARDRAIL FACE      36 - MEDIAN OTHER BARRIER      42 - CULVERT      48 - TREE      99 - OTHER / UNKNOWN  
49 - FIRE HYDRANT

FIRST HARMFUL EVENT: 1      MOST HARMFUL EVENT: 1

**UNIT / NON-MOTORIST DIRECTION**

FROM 2 TO 1

1 - NORTH      5 - NORTHEAST  
2 - SOUTH      6 - NORTHWEST  
3 - EAST      7 - SOUTHEAST  
4 - WEST      8 - SOUTHWEST  
9 - OTHER / UNKNOWN

**UNIT SPEED**      **DETECTED SPEED**

1 5      1      1 - STATED/ESTIMATED SPEED  
2 - CALCULATED / EDR  
3 - UNDETERMINED

**POSTED SPEED**      2 5

UNIT # 02 OWNER NAME: LAST, FIRST, MIDDLE (  Same As Driver )  
**DIAS MEGAN RACHELLE**  
 OWNER PHONE: INCLUDE AREA CODE (  Same As Driver )  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (  Same As Driver )  
**9301 GRAND DIVISION GARFIELD HTS OH 44125**  
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE OH LICENSE PLATE # H0H9906 VEHICLE IDENTIFICATION # 1FM5K7D8XHG46285 VEHICLE YEAR 2017 VEHICLE MAKE Ford  
 INSURANCE VERIFIED INSURANCE COMPANY STATE FARM INSURANCE POLICY # 3433906 SFP-35 VEHICLE COLOR BLK VEHICLE MODEL Explorer  
 COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_  
 INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT # OCCUPANTS 01 VEHICLE WEIGHT GVWR/GVWR HAZARDOUS MATERIAL  
 1- <10K LBS. 2- 10,001 - 26K LBS. 3- >26K LBS.  MATERIAL RELEASED CLASS # \_\_\_\_\_ PLACARD ID # \_\_\_\_\_  
 PLACARD

UNIT TYPE 01 # of TRAILING UNITS \_\_\_\_\_  
 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN SKATER  
 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)  
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST  
 4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE  
 5 - CARGO VAN 6 - VAN (9-15 SEATS) 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN  
 99 - UNKNOWN OR HIT/SKIP

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 AUTONOMOUS MODE LEVEL 0  
 1 - YES 2 - NO 9 - OTHER / UNKNOWN  
 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
 1 - PARTIAL AUTOMATION 2 - PARTIAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION 01  
 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER  
 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER UNKNOWN  
 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL  
 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING  
 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

CARGO BODY TYPE 01  
 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER  
 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL 9 - CARGO TANK 10 - FLAT BED 13 - AUTO TRANSPORTER  
 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

VEHICLE DEFECTS 01  
 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN  
 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT  
 3 - TAIL LAMPS 6 - TIRE BLOWOUT

NON-MOTORIST LOCATION AT IMPACT 06  
 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER OR LEAVING VEHICLE  
 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER/ROADSIDE 10 - DRIVEWAY ACCESS AT INCIDENT SCENE  
 3 - UNMARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 99 - OTHER / UNKNOWN

ACTION 06  
 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE  
 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING  
 3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST  
 4 - STRUCK 4 - OVERTAKING/PASSING 10 - PARKED 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE  
 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 99 - OTHER / UNKNOWN  
 9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE

CONTRIBUTING CIRCUMSTANCES 01  
 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 22 - LYING IN ROADWAY  
 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE/ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 21 - NOT DISCERNABLE  
 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGING 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/ FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY  
 4 - RAN STOP SIGN 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION  
 5 - UNSAFE SPEED 12 - IMPROPER BACKING

SEQUENCE OF EVENTS  
 1 20 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT  
 2 \_\_\_\_\_ 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
 3 \_\_\_\_\_ 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT  
 4 \_\_\_\_\_ 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 25 - WORKZONE MAINTENANCE EQUIPMENT  
 5 \_\_\_\_\_ 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT 51 - WALL  
 6 \_\_\_\_\_ 26 - BRIDGE OVERHEAD STRUCTURE 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 52 - BUILDING  
 27 - BRIDGE PIER OR ABUTMENT 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 53 - TUNNEL  
 28 - BRIDGE PARAPET 33 - MEDIAN CABLE BARRIER 39 - LIGHT/LUMINARIES SUPPORT 45 - EMBANKMENT 54 - OTHER FIXED OBJECT  
 29 - BRIDGE RAIL 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 99 - OTHER / UNKNOWN  
 30 - GUARDRAIL FACE 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 48 - TREE  
 36 - MEDIAN OTHER BARRIER 42 - CULVERT 49 - FIRE HYDRANT

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

LOCAL REPORT NUMBER  
20243431

DAMAGE  
 DAMAGE SCALE  
 1 - NONE 3 - FUNCTIONAL DAMAGE  
 2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
 9 - UNKNOWN  
2

DAMAGED AREA(S)  
 INDICATE ALL THAT APPLY  
  
 - NO DAMAGE [0]  - UNDERCARRIAGE [14]  
 - TOP [13]  - ALL AREAS [15]  
 - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT  
06  
 0 - NO DAMAGE 14 - UNDERCARRIAGE  
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
 99 - UNKNOWN 13 - TOP

TRAFFIC  
 TRAFFICWAY FLOW 2 TRAFFIC CONTROL 6  
 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN  
 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN  
 3 - FLASHER 6 - NO CONTROL

# OF THROUGH LANES ON ROAD 4 RAIL GRADE CROSSING 1  
 1 - NOT INVOLVED  
 2 - INVOLVED - ACTIVE CROSSING  
 3 - INVOLVED - PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION  
 FROM 2 TO 4  
 1 - NORTH 5 - NORTHEAST  
 2 - SOUTH 6 - NORTHWEST  
 3 - EAST 7 - SOUTHEAST  
 4 - WEST 8 - SOUTHWEST  
 9 - OTHER / UNKNOWN

UNIT SPEED 10 DETECTED SPEED 1  
 1 - STATED/ESTIMATED SPEED  
 2 - CALCULATED / EDR  
 3 - UNDETERMINED  
 POSTED SPEED 25

# MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER  
2 0 2 4 3 4 3 1

|   |  |                            |   |   |  |
|---|--|----------------------------|---|---|--|
| UNIT #<br>0 1   | NAME: LAST, FIRST, MIDDLE<br>EPSE KONE SALAMATA OUATTARA |                            | DATE OF BIRTH<br>1 2 2 6 1 9 9 7                | AGE<br>2 6  | GENDER<br>F                                      |
| ADDRESS: STREET, CITY, STATE, ZIP<br>624 TURNEY ROAD BEDFORD OH 44128 |  |                            | CONTACT PHONE - INCLUDE AREA CODE               |   |  |
| INJURIES<br>5   | INJURED TAKEN BY   | EMS AGENCY (NAME)          | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED<br>0 4  | <input type="checkbox"/> DOT-COMPLIANT MC HELMET |
| OL STATE  | OPERATOR LICENSE NUMBER                                  | OFFENSE CHARGED            | LOCAL CODE<br><input type="checkbox"/>          | OFFENSE DESCRIPTION   | CITATION NUMBER                                  |
| OL CLASS<br>4   | ENDORSEMENT SELECT UP TO 2                               | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY<br>1                       | ALCOHOL / DRUG SUSPECTED<br><input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | CONDITION<br>1                                   |
| ALCOHOL TEST  |  | DRUG TEST(S)               |   |   |  |
| STATUS  | TYPE   | VALUE                      | STATUS  | TYPE  | RESULT SELECT UP TO 4                            |

|  |  |                            |   |   |  |
|--|--|----------------------------|---|---|--|
| UNIT #<br>0 2  | NAME: LAST, FIRST, MIDDLE<br>DIAS MEGAN RACHELLE |                            | DATE OF BIRTH<br>1 0 1 7 1 9 9 1                | AGE   | GENDER<br>F                                      |
| ADDRESS: STREET, CITY, STATE, ZIP<br>9301 GRAND DIVISION GARFIELD HTS OH 44125 |  |                            | CONTACT PHONE - INCLUDE AREA CODE               |   |  |
| INJURIES<br>5  | INJURED TAKEN BY                                 | EMS AGENCY (NAME)          | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED<br>0 4  | <input type="checkbox"/> DOT-COMPLIANT MC HELMET |
| OL STATE   | OPERATOR LICENSE NUMBER                          | OFFENSE CHARGED            | LOCAL CODE<br><input type="checkbox"/>          | OFFENSE DESCRIPTION   | CITATION NUMBER                                  |
| OL CLASS<br>4  | ENDORSEMENT SELECT UP TO 2                       | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY<br>1                       | ALCOHOL / DRUG SUSPECTED<br><input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | CONDITION<br>1                                   |
| ALCOHOL TEST   |  | DRUG TEST(S)               |   |   |  |
| STATUS   | TYPE   | VALUE                      | STATUS  | TYPE  | RESULT SELECT UP TO 4                            |

|                                   |                            |                            |   |                          |  |
|-----------------------------------|----------------------------|----------------------------|---|--------------------------|--|
| UNIT #                            | NAME: LAST, FIRST, MIDDLE  |                            | DATE OF BIRTH                                   | AGE                      | GENDER   |
| ADDRESS: STREET, 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    | <input type="checkbox"/> DOT-COMPLIANT MC HELMET |
| OL STATE                          | OPERATOR LICENSE NUMBER    | OFFENSE CHARGED            | LOCAL CODE                                      | OFFENSE DESCRIPTION      | CITATION NUMBER                                  |
| OL CLASS                          | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY                            | ALCOHOL / DRUG SUSPECTED | CONDITION  |
| ALCOHOL TEST                      |                            | DRUG TEST(S)               |   |                          |  |
| STATUS                            | TYPE                       | VALUE                      | STATUS  | TYPE                     | RESULT SELECT UP TO 4                            |

| INJURIES                                       | SEATING POSITION   | AIR BAG                            | OL CLASS                     | OL RESTRICTION(S)  | DRIVER DISTRACTION   | TEST STATUS                                   |
|--|--|------------------------------------|------------------------------|--|--|---|
| 1 - FATAL                                      | 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)  | 1 - NOT DEPLOYED                   | 1 - CLASS A                  | 1 - ALCOHOL INTERLOCK DEVICE   | 1 - NOT DISTRACTED   | 1 - NONE GIVEN                                |
| 2 - SUSPECTED SERIOUS INJURY                   | 2 - FRONT - MIDDLE   | 2 - DEPLOYED FRONT                 | 2 - CLASS B                  | 2 - CDL INTRASTATE ONLY  | 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) | 2 - TEST REFUSED                              |
| 3 - SUSPECTED MINOR INJURY                     | 3 - FRONT - RIGHT SIDE   | 3 - DEPLOYED SIDE                  | 3 - CLASS C                  | 3 - CORRECTIVE LENSES  | 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE                                       | 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNSABLE |
| 4 - POSSIBLE INJURY                            | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)  | 4 - DEPLOYED BOTH FRONT / SIDE     | 4 - REGULAR CLASS (OHIO = D) | 4 - FARM WAIVER  | 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE  | 4 - TEST GIVEN, RESULTS KNOWN                 |
| 5 - NO APPARENT INJURY                         | 5 - SECOND - MIDDLE  | 5 - NOT APPLICABLE                 | 5 - M / C MOPED ONLY         | 5 - EXCEPT CLASS A BUS & CLASS B BUS   | 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE   | 5 - TEST GIVEN, RESULTS UNKNOWN               |
| <b>INJURED TAKEN BY</b>                        |  | <b>EJECTION</b>                    |                              | <b>ALCOHOL TEST TYPE</b>   |  |   |
| 1 - NOT TRANSPORTED / TREATED AT SCENE         | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)  | 1 - NOT EJECTED                    | H - HAZMAT                   | 6 - PASSENGER  | 6 - PASSENGER  | 1 - NONE                                      |
| 2 - EMS  | 8 - THIRD - MIDDLE   | 2 - PARTIALLY EJECTED              | M - MOTORCYCLE               | 7 - OTHER DISTRACTION INSIDE THE VEHICLE   | 7 - OTHER DISTRACTION INSIDE THE VEHICLE   | 2 - BLOOD                                     |
| 3 - POLICE                                     | 9 - THIRD - RIGHT SIDE   | 3 - TOTALLY EJECTED                | P - PASSENGER                | 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE   | 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE   | 3 - URINE                                     |
| 9 - OTHER / UNKNOWN                            | 10 - SLEEPER SECTION OF TRUCK CAB  | 4 - NOT APPLICABLE                 | N - TANKER                   | 9 - OTHER / UNKNOWN  | 9 - OTHER / UNKNOWN  | 4 - BREATH                                    |
| <b>SAFETY EQUIPMENT</b>                        |  | <b>TRAPPED</b>                     |                              | <b>CONDITION</b>   |  |   |
| 1 - NONE USED                                  | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 1 - NOT TRAPPED                    | Q - MOTOR SCOOTER            | 10 - LIMITED TO DAYLIGHT ONLY  | 1 - APPARENTLY NORMAL  | 5 - OTHER                                     |
| 2 - SHOULDER BELT ONLY USED                    | 12 - PASSENGER IN UNENCLOSED CARGO AREA  | 2 - EXTRICATED BY MECHANICAL MEANS | R - THREE-WHEEL MOTORCYCLE   | 11 - LIMITED TO EMPLOYMENT   | 2 - PHYSICAL IMPAIRMENT  |   |
| 3 - LAP BELT ONLY USED                         | 13 - TRAILING UNIT   | 3 - FREED BY NON-MECHANICAL MEANS  | S - SCHOOL BUS               | 12 - LIMITED - OTHER   | 3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)                                     |   |
| 4 - SHOULDER & LAP BELT USED                   | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)                                    |                                    | T - DOUBLE & TRIPLE TRAILERS | 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) | 4 - ILLNESS  | 1 - NONE                                      |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING    | 15 - NON-MOTORIST  |                                    | X - TANKER / HAZMAT          | 14 - MILITARY VEHICLES ONLY  | 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.   | 2 - BLOOD                                     |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING       | 99 - OTHER / UNKNOWN   |                                    |                              | 15 - MOTOR VEHICLES WITHOUT AIR BRAKES   | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL                             | 3 - URINE                                     |
| 7 - BOOSTER SEAT                               |  |                                    |                              | 16 - OUTSIDE MIRROR  | 9 - OTHER / UNKNOWN  | 4 - OTHER                                     |
| 8 - HELMET USED                                |  |                                    |                              | 17 - PROSTHETIC AID  |  |   |
| 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) |  |                                    |                              | 18 - OTHER   |  |   |
| 10 - REFLECTIVE CLOTHING                       |  |                                    |                              |  |  |   |
| 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY      |  |                                    |                              |  |  |   |
| 99 - OTHER / UNKNOWN                           |  |                                    |                              |  |  |   |
|  |  | <b>GENDER</b>                      |                              | <b>DRUG TEST TYPE</b>  |  |   |
|  |  | F - FEMALE                         |                              | 1 - NONE   |  |   |
|  |  | M - MALE                           |                              | 2 - BLOOD  |  |   |
|  |  | U - OTHER/UNKNOWN                  |                              | 3 - URINE  |  |   |
|  |  |                                    |                              | 4 - OTHER  |  |   |
|  |  |                                    |                              | <b>DRUG TEST RESULT(S)</b>   |  |   |
|  |  |                                    |                              | 1 - AMPHETAMINES   |  |   |
|  |  |                                    |                              | 2 - BARBITURATES   |  |   |
|  |  |                                    |                              | 3 - BENZODIAZEPINES  |  |   |
|  |  |                                    |                              | 4 - CANNABINOIDS   |  |   |
|  |  |                                    |                              | 5 - COCAINE  |  |   |
|  |  |                                    |                              | 6 - OPIATES / OPIOIDS  |  |   |
|  |  |                                    |                              | 7 - OTHER  |  |   |
|  |  |                                    |                              | 8 - NEGATIVE RESULTS   |  |   |