

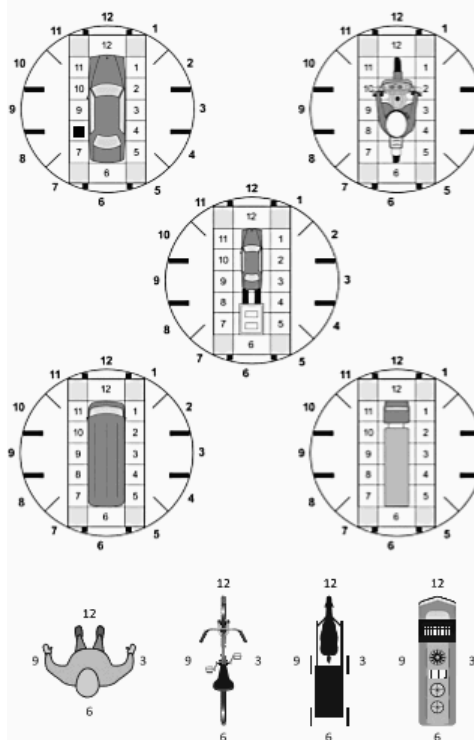
TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH		<input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> Private Property	<input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	LOCAL INFORMATION REPORTING AGENCY NAME * GARFIELD HEIGHTS		2 0 2 5 0 7 1 4		HITS/KIP 1 - Solved 2 - Unsolved		NUMBER OF VEHICLES 0 2		UNIT IN EDDP 98 - ANIMAL 99 - UNKNOWN 9 9	
COUNTY * 1 8		LOCALITY * 1		LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS		CRASH DATE/TIME * 0 4 0 2 2 0 2 5 0 6 4 0				CRASH SEVERITY 5			
ROUTE TYPE C R		ROUTE NUMBER 4 8 0		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME		ROAD TYPE H W		LATITUDE DECIMAL DEGREES 4 1 . 3 9 6 0 6 9			
ROUTE TYPE		ROUTE NUMBER		PREFIX		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 23.2		ROAD TYPE M P		LONGITUDE DECIMAL DEGREES 8 1 . 5 4 1 5 3 5			
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 2		DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		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		ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE		INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA		NUMBER OF APPROACHES	
DISTANCE EDP/MILEPOST/MP 0 1		DISTANCE 1 - MILE 2 - FEET 3 - YARDS		MANNER OF CRASH COLLISION/IMPACT 7		DIRECTION OF TRAVEL 3		MEDIAN TYPE 9		ROADWAY <input checked="" type="checkbox"/> ROADWAY DIVIDED			
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		WORK ZONE TYPE 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER or MEDIAN 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		CONDITIONS 1		SURFACE 2			
LIGHT CONDITION 2		WEATHER 2		WEATHER 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN		DIRECTION OF TRAVEL 3		MEDIAN TYPE 9		SURFACE 2			
NARRATIVE UNIT#1 WAS TRAVELING EAST ON IR 480 IN THE OUTSIDE LANE NEAR MILEPOST 23.2. UNIT#2 WAS TRAVELING EAST ON IR 480 IN THE MIDDLE OUTSIDE LANE NEAR MILEPOST 23.2. AS A RESULT, THE LEFT BACK OF UNIT#1 AND UNKNOWN LOCATION OF UNIT#2 COLLIDED. BOTH VEHICLES WERE PARKED ON THE SOUTH SHOULDER AT FINAL REST UPON ARRIVAL. NOTE: SEE OH-2												Indicate the north direction with an "N" on the compass diagram.	
IR 480 E/B													
North Not To Scale													
CRASH REPORTED DATE/TIME 0 4 0 2 2 0 2 5 0 6 4 0		DISPATCH DATE/TIME 0 4 0 2 2 0 2 5 0 6 5 2		ARRIVAL DATE/TIME 0 4 0 2 2 0 2 5 0 6 5 2		SCENE CLEARED DATE/TIME 0 4 0 2 2 0 2 5 0 7 1 7		REPORT TAKEN BY POLICE AGENCY MOTORIST					
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 4 0		TOTAL MINUTES 6 5		OFFICER'S NAME * R. Cramer		CHECKED BY OFFICER'S NAME * R. Dodge		SUPPLEMENT (CORRECTION = ADDITION DO NOT WRITE IN THESE SPACES)			
OFFICER'S BADGE NUMBER * 0 3 7		CHECKED BY OFFICER'S BADGE NUMBER * S 2 2											

OWNER	UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) LOVELL JAMES R	OWNER PHONE: INCLUDE AREA CODE (Same As Driver)		
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver) 41294 BUTTERNUT RDG ELYRIA OH 44035				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
VEHICLE	LP STATE OH	LICENSE PLATE # JME8147	VEHICLE IDENTIFICATION # KNAFU4A25D5734919	VEHICLE YEAR 2013	VEHICLE MAKE Kia
	INSURANCE VERIFIED	INSURANCE COMPANY Erie	INSURANCE POLICY # q116007042	VEHICLE COLOR RED	VEHICLE MODEL Forte
	TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		# OCCUPANTS 01	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.				
	UNIT TYPE 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 18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - PEDESTRIAN SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP				
	# 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 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN				
	SPECIAL FUNCTION 01 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 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL 21 - MAIL CARRIER 99 - OTHER/UNKNOWN				
	CARGO BODY TYPE 01 1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL 8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN				
VEHICLE DEFECTS 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 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER / UNKNOWN					
EVENT(S)	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 9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN				
	ACTION 9 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN PRE-CRASH ACTION 01 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - MAKING U-TURN 8 - ENTERING 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, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN				
	CONTRIBUTING CIRCUMSTANCES 22 1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN 7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/JACDA 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 ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY 17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER CROSSING 21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION				
	SEQUENCE OF EVENTS 1 2 0 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT				
	COLLISION WITH FIXED OBJECT - STRUCK 25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORKZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN				
	FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1				

LOCAL REPORT NUMBER 20250714	
DAMAGE DAMAGE SCALE 1 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE	
DAMAGED AREA(S) INDICATE ALL THAT APPLY 	
<input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14] <input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15] <input type="checkbox"/> - UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT 08 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
TRAFFIC TRAFFICWAY FLOW 1 1 - ONE-WAY 2 - TWO-WAY TRAFFIC CONTROL 6 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 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 4 TO 3 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED 60 POSTED SPEED 60	DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

OWNER		LOCAL REPORT NUMBER	
UNIT # 02		20250714	
OWNER NAME: LAST, FIRST, MIDDLE () Same As Driver BAKER VEHICLE SYSTEM		OWNER PHONE: INCLUDE AREA CODE () Same As Driver	
OWNER ADDRESS: STREET, CITY, STATE, ZIP () Same As Driver 9035 Freeway Dr MACEDONIA OH 44056		COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP Baker Vehicle System 9035 Freeway Dr MACEDONIA OH 44056	
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
LP STATE OH		LICENSE PLATE # PML5946	
VEHICLE IDENTIFICATION # 1GC2Y1LE75MF256923		VEHICLE YEAR 2021	
VEHICLE MAKE Chevrolet			
INSURANCE VERIFIED United Fire & Casual		INSURANCE POLICY # 60543668	
VEHICLE COLOR WHI		VEHICLE MODEL Silverado	
TYPE OF USE COMMERCIAL		US DOT # 093843	
HAZARDOUS MATERIAL MATERIAL RELEASED PLACARD		CLASS # PLACARD ID #	
INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT		# OCCUPANTS 01	
VEHICLE WEIGHT GVWR/GCWR 1- <10K LBS. 2- 10,001 - 26K LBS. 3- >26K LBS.			
UNIT TYPE 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 18- LIMO (LIVERY VEHICLE) 19- BUS (16+ PASSENGERS) 20- OTHER VEHICLE 21- HEAVY EQUIPMENT 22- ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23- PEDESTRIAN SKATER 24- WHEELCHAIR (ANY TYPE) 25- OTHER NON-MOTORIST 26- BICYCLE 27- TRAIN 99- UNKNOWN OR HIT/SKIP		# of TRAILING UNITS	
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2- YES 1- NO 9- OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL 0- NO AUTOMATION 1- DRIVER ASSISTANCE 2- PARTIAL AUTOMATION 3- CONDITIONAL AUTOMATION 4- HIGH AUTOMATION 5- FULL AUTOMATION 9- UNKNOWN	
SPECIAL FUNCTION 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 16- FARM 17- MOWING 18- SNOW REMOVAL 19- TOWING 20- SAFETY SERVICE PATROL 21- MAIL CARRIER 99- OTHER/UNKNOWN			
CARGO BODY TYPE 1- NO CARGO BODY TYPE / NOT APPLICABLE 2- BUS 3- VEHICLE TOWING ANOTHER MOTOR VEHICLE 4- LOGGING 5- INTERMODAL CONTAINER CHASSIS 6- CARGO VAN/ENCLOSED BOX 7- GRAIN/CHIPS/GRAVEL 8- POLE 9- CARGO TANK 10- FLAT BED 11- DUMP 12- CONCRETE MIXER 13- AUTO TRANSPORTER 14- GARBAGE/REFUSE 99- OTHER / UNKNOWN			
VEHICLE DEFECTS 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 9- MOTOR TROUBLE 10- DISABLED FROM PRIOR ACCIDENT 99- OTHER / UNKNOWN			
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 9- MEDIAN/CROSSING ISLAND 10- DRIVEWAY ACCESS 11- SHARED USE PATHS OR TRAILS 12- FIRST RESPONDER AT INCIDENT SCENE 99- OTHER / UNKNOWN			
ACTION 1- NON-CONTACT 2- NON-COLLISION 3- STRIKING 4- STRUCK 5- BOTH STRIKING & STRUCK 9- OTHER / UNKNOWN 1- STRAIGHT AHEAD 2- BACKING 3- CHANGING LANES 4- OVERTAKING/PASSING 5- MAKING RIGHT TURN 6- MAKING LEFT TURN 7- MAKING U-TURN 8- ENTERING 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, RUNNING, JOGGING, PLAYING 16- WORKING 17- PUSHING VEHICLE 18- APPROACHING OR LEAVING VEHICLE 19- STANDING 20- OTHER NON-MOTORIST 21- STANDING OUTSIDE DISABLED VEHICLE 99- OTHER / UNKNOWN		INITIAL POINT OF CONTACT 0- NO DAMAGE 1-12- REFER TO UNIT DIAGRAM 13- TOP 14- UNDERCARRIAGE 15- VEHICLE NOT AT SCENE 99- UNKNOWN	
CONTRIBUTING CIRCUMSTANCES 1- NONE 2- FAILURE TO YIELD 3- RAN RED LIGHT 4- RAN STOP SIGN 5- UNSAFE SPEED 6- IMPROPER TURN 7- LEFT OF CENTER 8- FOLLOWING TOO CLOSE/JACDA 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 ILLEGALLY 15- SWERVING TO AVOID 16- WRONG WAY 17- VISION OBSTRUCTION 18- OPERATING DEFECTIVE EQUIPMENT 19- LOAD SHIFTING/ FALLING/SPILLING 20- IMPROPER CROSSING 21- LYING IN ROADWAY 22- NOT DISCERNABLE 23- OPENING DOOR INTO ROADWAY 99- OTHER IMPROPER ACTION		TRAFFIC TRAFFICWAY FLOW 1- ONE-WAY 2- TWO-WAY TRAFFIC CONTROL 1- ROUNDABOUT 2- SIGNAL 3- FLASHER 4- STOP SIGN 5- YIELD SIGN 6- NO CONTROL	
SEQUENCE OF EVENTS 1- OVERTURN/ROLLOVER 2- FIRE/EXPLOSION 3- IMMERSION 4- JACKKNIFE 5- CARGO / EQUIPMENT LOSS OR SHIFT 6- EQUIPMENT FAILURE 7- SEPARATION OF UNITS 8- RAN OFF ROAD RIGHT 9- RAN OFF ROAD LEFT 10- CROSS MEDIAN 11- CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12- DOWNHILL RUNAWAY 13- OTHER NON-COLLISION 14- PEDESTRIAN 15- PEDALCYCLE 16- RAILWAY VEHICLE 17- ANIMAL - FARM 18- ANIMAL - DEER 19- ANIMAL - OTHER 20- MOTOR VEHICLE IN TRANSPORT 21- PARKED MOTOR VEHICLE 22- WORK ZONE MAINTENANCE EQUIPMENT 23- STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24- OTHER MOVABLE OBJECT		RAIL GRADE CROSSING 1- NOT INVOLVED 2- INVOLVED - ACTIVE CROSSING 3- INVOLVED - PASSIVE CROSSING	
COLLISION WITH FIXED OBJECT - STRUCK 25- IMPACT ATTENUATOR / CRASH CUSHION 26- BRIDGE OVERHEAD STRUCTURE 27- BRIDGE PIER OR ABUTMENT 28- BRIDGE PARAPET 29- BRIDGE RAIL 30- GUARDRAIL FACE 31- GUARDRAIL END 32- PORTABLE BARRIER 33- MEDIAN CABLE BARRIER 34- MEDIAN GUARDRAIL BARRIER 35- MEDIAN CONCRETE BARRIER 36- MEDIAN OTHER BARRIER 37- TRAFFIC SIGN POST 38- OVERHEAD SIGN POST 39- LIGHT/LUMINARIES SUPPORT 40- UTILITY POLE 41- OTHER POST, POLE OR SUPPORT 42- CULVERT 43- CURB 44- DITCH 45- EMBANKMENT 46- FENCE 47- MAILBOX 48- TREE 49- FIRE HYDRANT 50- WORKZONE MAINTENANCE EQUIPMENT 51- WALL 52- BUILDING 53- TUNNEL 54- OTHER FIXED OBJECT 99- OTHER / UNKNOWN		UNIT / NON-MOTORIST DIRECTION 1- NORTH 2- SOUTH 3- EAST 4- WEST 5- NORTHEAST 6- NORTHWEST 7- SOUTHEAST 8- SOUTHWEST 9- OTHER / UNKNOWN	
FIRST HARMFUL EVENT 1		DETECTED SPEED 1- STATED/ESTIMATED SPEED 2- CALCULATED / EDR 3- UNDETERMINED	
MOST HARMFUL EVENT 1		PAGE OF	



MOTORIST / NON-MOTORIST	UNIT # 01		NAME: LAST, FIRST, MIDDLE LOVELL JAMES R				DATE OF BIRTH 06041967				AGE 		GENDER M								
	ADDRESS: STREET, CITY, STATE, ZIP 41294 BUTTERNUT RDG ELYRIA OH 44035							CONTACT PHONE - INCLUDE AREA CODE 													
	INJURIES 5		INJURED TAKEN BY 		EMS AGENCY (NAME) 		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) 		SAFETY EQUIPMENT USED 04		<input type="checkbox"/> DOT-COMPLIANT MC HELMET		SEATING POSITION 01		AIR BAG USAGE 1		EJECTION 1		TRAPPED 1		
	OL STATE 		OPERATOR LICENSE NUMBER 			OFFENSE CHARGED 			LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION 					CITATION NUMBER 						
	OL CLASS 4		ENDORSEMENT SELECT UP TO 2 		RESTRICTION SELECT UP TO 3 			DRIVER DISTRACTED BY 1		ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> OTHER DRUG		CONDITION 1	STATUS 1	ALCOHOL TEST TYPE 1 VALUE		STATUS 1	TYPE 1	DRUG TEST(S) RESULT SELECT UP TO 4			
	UNIT # 02		NAME: LAST, FIRST, MIDDLE GILMORE ROBERT W							DATE OF BIRTH 06041966				AGE 58		GENDER M					
	ADDRESS: STREET, CITY, STATE, ZIP 46832 Keyes Rd Titusville PA 16354							CONTACT PHONE - INCLUDE AREA CODE 													
	INJURIES 5		INJURED TAKEN BY 		EMS AGENCY (NAME) 		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) 		SAFETY EQUIPMENT USED 04		<input type="checkbox"/> DOT-COMPLIANT MC HELMET		SEATING POSITION 01		AIR BAG USAGE 1		EJECTION 1		TRAPPED 1		
	OL STATE 		OPERATOR LICENSE NUMBER 			OFFENSE CHARGED 			LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION 					CITATION NUMBER 						
	OL CLASS 3		ENDORSEMENT SELECT UP TO 2 		RESTRICTION SELECT UP TO 3 			DRIVER DISTRACTED BY 1		ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> OTHER DRUG		CONDITION 1	STATUS 1	ALCOHOL TEST TYPE 1 VALUE		STATUS 1	TYPE 1	DRUG TEST(S) RESULT SELECT UP TO 4			
MOTORIST / NON-MOTORIST	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		SEATING POSITION 		AIR BAG USAGE 		EJECTION 		TRAPPED 		
	OL STATE 		OPERATOR LICENSE NUMBER 			OFFENSE CHARGED 			LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION 					CITATION NUMBER 						
	OL CLASS 		ENDORSEMENT SELECT UP TO 2 		RESTRICTION SELECT UP TO 3 			DRIVER DISTRACTED BY 		ALCOHOL / DRUG SUSPECTED ALCOHOL OTHER DRUG		CONDITION 	STATUS 	ALCOHOL TEST TYPE VALUE		STATUS 	TYPE 	DRUG TEST(S) 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		SEATING POSITION 		AIR BAG USAGE 		EJECTION 		TRAPPED 		
	OL STATE 		OPERATOR LICENSE NUMBER 			OFFENSE CHARGED 			LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION 					CITATION NUMBER 						
	OL CLASS 		ENDORSEMENT SELECT UP TO 2 		RESTRICTION SELECT UP TO 3 			DRIVER DISTRACTED BY 		ALCOHOL / DRUG SUSPECTED ALCOHOL OTHER DRUG		CONDITION 	STATUS 	ALCOHOL TEST TYPE VALUE		STATUS 	TYPE 	DRUG TEST(S) RESULT SELECT UP TO 4			
MOTORIST / NON-MOTORIST	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 & CLASS B BUS		3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE								
	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		5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		5 - TEST GIVEN, RESULTS UNKNOWN								
	INJURED TAKEN BY		6 - SECOND - RIGHT SIDE		9 - DEPLOYMENT UNKNOWN		6 - NO VALID OL		7 - EXCEPT TRACTOR-TRAILER		6 - PASSENGER										
	1 - NOT TRANSPORTED /TREATED AT SCENE		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)						8 - INTERMEDIATE LICENSE RESTRICTIONS		7 - OTHER DISTRACTION INSIDE THE VEHICLE										
	2 - EMS		8 - THIRD - MIDDLE		EJECTION		H - HAZMAT		9 - LEARNER'S PERMIT RESTRICTIONS		8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE		ALCOHOL TEST TYPE								
	3 - POLICE		9 - THIRD - RIGHT SIDE		1 - NOT EJECTED		M - MOTORCYCLE		10 - LIMITED TO DAYLIGHT ONLY		9 - OTHER / UNKNOWN		1 - NONE								
9 - OTHER / UNKNOWN		10 - SLEEPER SECTION OF TRUCK CAB		2 - PARTIALLY EJECTED		P - PASSENGER		11 - LIMITED TO EMPLOYMENT				2 - BLOOD									
SAFETY EQUIPMENT		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		3 - TOTALLY EJECTED		N - TANKER		12 - LIMITED - OTHER				3 - URINE									
1 - NONE USED		12 - PASSENGER IN UNCLOSED CARGO AREA		4 - NOT APPLICABLE		Q - MOTOR SCOOTER		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)				4 - BREATH									
2 - SHOULDER BELT ONLY USED		13 - TRAILING UNIT		TRAPPED		R - THREE-WHEEL MOTORCYCLE		14 - MILITARY VEHICLES ONLY				5 - OTHER									
3 - LAP BELT ONLY USED		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				S - SCHOOL BUS		15 -													

OHIO TRAFFIC CRASH REPORT
DIAGRAM / NARRATIVE CONTINUATION

OH-2

LOCAL REPORT NUMBER 20250714	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 04 D 02 Y 2025	
IN COUNTY OF 18	CRASH LOCATION CR 480		
Driver of Unit#1 stated, he was struck was driving in his lane.			
Driver of Unit#2 stated, felt a bump while driving in my lane. I have no damage and pointed out (prior damage).			
This officer did not observe any red paint transfer on Unit#2. Due to conflicting statements and no independent witnesses, no citations were issued on scene BWC			
OFFICER'S SIGNATURE X		BADGE NUMBER 037	