OHIO DE OF PUBL SAPETY - SERV	IC SAFETY TRAFF	IC CRA	SH REF	PORT .DEN	OTES MANDATORY FIELD FOR SUPPL	EMENT REPORT			LOCAL REPORT NUMBE	R*		
PHOTOS TAKEN OH-12 OH-3 CARPIELD HTS SERVICE  OH-19 OH-1P OTHER REPORTING AGENCY NAME *						DEPARTMENT [2,0,2,5,0,7]				8 6		
SECONDARY CRA	OTHER		GARFIELD HEIGHTS					0 1	0 1 98 - ANIMAL 99 - UNKNOWN			
COUNTY*						CRASH DA	TE/TIME *	CRASH SEVERITY				
1   8	2 - VILLAGE * 3 - TOWNSHIP *	GARFI	ELD HT	3				0409202	5   0 8 0 8	5 1- FATAL 2- SERIOUS INJURY		
ROUTE TYPE	ROUTE NUMBER	PREF	FIX 1 - NORTH 2 - SOUTH 3 - EAST		N ROAD NAME		ROAD TYPE	SUSPECTED  I ATITUDE DECREASE DECREES  3 - MINOR INJU SUSPECTED				
LOCATION			4 - WEST					4 1 1 4 2	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE			
ROUTE TYPE	ROUTE NUMBER	PREF		2 - SOUTH 3 - EAST 40700				ONLY  - 8   1   5   8   5   2   4   0				
REFERENCE	E POINT DIREC	TION	ROUTE		1	AN TYPE			INTERSECTION RELATED			
1 - INTERSE 2 - MILE PO	ECTION 1-NO	RTH IR - II	NTERSTATE ROUTE	(TP)	AL - ALLEY HW -	- HIGHWAY F	RD - ROAD GQ - SQUARE	☐ WITHIN INTERSE	CTION OR ON APPROACH			
3 - HOUSE :	# 3 3-E/	ST SR -	STATE ROUTE NUMBERED COUNT	Y ROUTE	BL - BOULEVARD MP - CR - CIRCLE OV - CT - COURT PK -	MILEPOST S OVAL 1 PARKWAY 1	ST - STREET E - TERRACE L - TRAIL	☐ WITHIN INTERCH	NUMBER OF APPROACHES			
DISTANCE EDOM DECEDEMOE	1 - M	e les	NUMBERED TOWNS ROUTE	HIP	DR - DRIVE PI - I HE - HEIGHTS PL -	PIKE V PLACE	VA - WAY		ROADWAY			
[3]0]	2 2-Fi							ROADWAY DIVID	ED			
	ON ROADWAY 9 - CRO	SSOVER		1 - NOT COLLISI	MANNER of CRASH COLLISION 4 - REAR-TO-RI			DIRECTION OF TRAVEL		MEDIAN TYPE		
3-1	IN MEDIAN ACI ON ROADSIDE 11 - RAI	/EWAY / ALLEY CESS .WAY GRADE ISSING	1	BETWEEN	5 - BACKING 6 - ANGLE			1 - NORTH 2 - SOUTH	D FLUSH MEDIAN ET) D FLUSH MEDIAN			
6-6	OUTSIDE 12 - SHA	RED USE PATHS TRAILS		TRANSPORT 2 - REAR-END 3 - HEAD-ON	7 - SIDESWIPE, 8 - SIDESWIPE, 9 - OTHER / UN	OPPOSITE DIRECTION		3 - EAST 4 - WEST	4 - DIVIDE	D, DEPRESSED MEDIAN D, RAISED MEDIAN		
8-4		L BOOTH IER / UNKNOWN							(ANY T 9 - OTHER	YPE) ? / UNKNOWN		
WORK ZONE RE	ESENT	1 - LANE CLOSUR 2 - LANE SHIFT/CF	ROSSOVER		1 - BEFORE WARNIN		<b>E</b> E	CONTOUR	CONDITIONS	SURFACE		
LAW ENFORCE PRESENT	EMENT	3 - WORK ON SHO	OULDER T OR MOVING WORK		3 - TRANSIT 4 - ACTIVIT	Y AREA		2 1-STRAIGHT LEVEL	1- DRY	1 - CONCRETE		
☐ ACTIVE SCHOO	DL ZONE	5 - OTHER	I OR MOVING WORK		5 - TERMINA	ATION AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW 4 - ICE	2 - BLACKTOP, BITUMINOUS, ASPHALT		
	LIGHT CONDITION				WEATHER			4 - CURVE GRADE 9 - OTHER /UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE		
			2 - 1	CLEAR CLOUDY FOG, SMOG, SMOKE	6 - SNOW 7 - SEVERE CROSSWI 8 - BLOWING SAND, SI 9 - FREEZING RAIN OR	OIL, DIRT, SNOW			MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	5 - DIRT 9 - OTHER /UNKNOWN		
5 - DARK	K - UNKNOWN ROADWAY LIGHTING ER / UNKNOWN	-	5-	SLEET, HAIL	99 - OTHER / UNKNOW							
NARRATIVE						: :	: :		<u> </u>	Indicate the north		
UNIT 1 WA	AS TRAVELING	EASTBO	DUND O	N MCCRA	CKEN					direction with an "N" on the compass diagram.		
RD AT THE	E RAILROAD T	RACKS.	AT THE	TIME THA	T THE							
VEHICLE A	ARRIVED AT TI	HE TRAC	KS, THE	LIGHTS	WERE	e +						
NOT FLAS	SHING AND TH	E STOP A	ARMS.W	ERE NOT				1 1				
DOWN. AS	S.TRAFFIC.ST	P.P.ED, .U	JNIT .1. S	TOPPED :	WIT.H							
IT'S REAR	RAXLE OVER T	HE TRAC	CKS. ON	CE UNIT	1 WAS	111111111		0				
STOPPED	, A TRAIN BEG	AN APP	ROACHI	NG FROM	·THE·····			The Control of the Co				
NORTH.						111111111						
SEELONG	G-NARRATIVE	EOR EITE	RTHER II	AEOBWW1	10N							
J		OIX 1-UF	LI		101 <b>v</b> .							
CRASH REPORTED DATE/TIME DISPATCH DATE/TIME ARRIVAL DATE/TIME  ARRIVAL DATE/TIME  ARRIVAL DATE/TIME  ARRIVAL DATE/TIME  ARRIVAL DATE/TIME							.0.0.4.0	SCENE CLEAF	REPORT TAKEN BY POLICE AGENCY			
TOTAL TIME ROADW							BY OFFICER'S NAME*					
CLOSED	TIME	MINU	M.	Taylor	FICER'S BADGE NUMBER*		N. Rossi	COSSÍ  CHECKED BY OFFICER'S BADGE NUMBER*  CORRECTION #ADDITION  CORRECTION #ADDITION				
6   0						S 1 1 3						

OF PUBLIC SAFETY UNIT	LOCAL REPORT NUMBER						
UNIT# OWNER NAME: LAST, FIRST, MIDDLE (  SCOTT ROSALYN M	DAMAGE  DAMAGE SCALE						
		1 - NONE	3 - FUNCTIONAL DAMAGE				
5575 DALEWOOD AV	4 2 - MINOR DAMAGE	4 - DISABLING DAMAGE 9 - UNKNOWN					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP	CO	DMMERCIAL CARRIER PHONE: INCLUDE AR	EA CODE				
LP STATE LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE		DAMAGED AREA(S)  NDICATE ALL THAT APPLY		
O H KHA2929 1,GN,E	INSURANCE POLICY#		Chevrolet	11 12 1	11 12		
INSURANCE COMPANY VERIFIED	INSURANCE POLICY #	VEHICLE COLOR WHI	VEHICLE MODEL Traverse	10 12 1	10 12 1		
TYPE OF USE	US DOT#	TOWED BY: COMPANY NAME		9 10 2 3	3 9 9 3 3		
COMMERCIAL GOVERNMENT RESPONSE  # OCCUPANTS  # OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	HAZARDOUS MA	TERIAL		8 7 5 4		
INTERLOCK  Device HIT/SKIP UNIT EQUIPPED 0 2	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 1 3 - >26K LBS.	MATERIAL RELEASED PLACARD	CLASS# PLACARD ID#	7 6 5	11 7 6 5		
1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEI	ELED 12 - GOLF CART 18 -	LIMO (LIVERY VEHICLE) 23	- PEDESTRIAN/SKATER	10 /	11 1 2		
2 - PASSENGER VAN (MINIVAN)  3 - SPORT UTILITY VEHICLE  4 - PICK UP  2 - NASSENGER VAN (MINIVAN)  9 - AUTOCYCLE 3-WHEI  10 - MOPED OR MOTORIZ	14 - SINGLE UNIT TRUCK 20 -	OTHER VEHICLE 25	- WHEELCHAIR (ANY TYPE) - OTHER NON- MOTORIST - BICYCLE	9 (	9 3 3		
UNIT TYPE         5 - CARGO VAN         BICYCLE           6 - VAN (9-15 SEATS)         11 - ALL TERRAIN VEHICLI	16 - FARM EQUIPMENT 22 -	ANIMAL WITH NIDEN ON	- TRAIN - UNKNOWN OR HIT/SKIP	7.			
(ATV/UTV)				12 1	7 6 5 12		
0 # of TRAILING UNITS				10 12	6 11 12 1		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED?	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL 9 - AUTOMATION	UNKNOWN	10 2	3		
AUT	2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - FULL AUTOMATION		0 3 4	8 4 -3		
1 - NONE 6 - BUS - CHARTER/TOUR 2 - TAXI 7 - BUS - INTERCITY 7			- MAIL CARRIER - OTHER /UNKNOWN	8 7 6 6	3 7 6 5 4		
0	13 - POLICE 14 - PUBLIC UTILITY	18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL		6	6		
FUNCTION	10-00NOTHOUTOV EQUIL MENT	20 - GALETT GERWIGE FATROE		17	12 12 12		
0 1 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTH MOTOR VEHICLE - LEUS 4 - LOGGING 4 - LOGGING		9 - CARGO TANK 13 -	CONCRETE MIXER AUTO TRANSPORTER GARBAGE/REFUSE	° M °	<b>↑</b>		
CARGO BODY TYPE	6 - CARGO VANIENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL		OTHER / UNKNOWN	, ,	3 9 3 9		
1 - TURN SIGNALS 4 - BRAKES 2 - HEAD LAMPS 5 - STEERING		10 - DISABLED FROM PRIOR	OTHER / UNKNOWN	6			
VEHICLE 3-TAIL LAMPS 6-TIRE BLOWOUT  DEFECTS  1-INTERSECTION- 3-INTERSECTION-OTHER	DEFECTIVE  6 - BICYCLE LANE	ACCIDENT  9 - MEDIAN/CROSSING ISLAND  12	- FIRST RESPONDER	O DAMAGE [0]	UNDERCARRIAGE [14]		
MARKED 4 - MIDBLOCK - MARKED CROSSWALK CROSSWALK CROSSWALK	7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR 99	AT INCIDENT SCENE - OTHER / UNKNOWN	- TOP [13]	- ONDERCARRIAGE [14]  - ALL AREAS [15]		
LOCATION AT UNMARKED 5 - TRAVEL LANE-OTHER LO MPACT CROSSWALK		TRAILS		- UNIT	NOT AT SCENE [16]		
1 - NON-CONTACT 1 - STRAIGHT AHEAD 2 - NON-COLLISION 1 1 1 2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	B - APPROACHING OR LEAVING VEHICLE 9 - STANDING	INIT	TIAL POINT OF CONTACT		
3 - STRIKING 3 - CHANGING LANES 4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED	20	0 - OTHER NON-MOTORIST 1 - STANDING OUTSIDE DISABLED VEHICLE	0 7 0-NO DAMAGE	14 - UNDERCARRIAGE		
ACTION 5 - BOTH STRIKING 5 - MAKING RIGHT TURN 8 STRUCK 6 - MAKING LEFT TURN 9 - OTHER / UNKNOWN	IN TRAFFIC	16 - WORKING 99 17 - PUSHING VEHICLE	9 - OTHER / UNKNOWN	DIAGRAM 13 - TOP	INIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN		
9 - OTHER TORRIGON					TDATEIO		
1 - NONE 7 - LEFT OF CENTER			- LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC TRAFFIC CONTROL		
2 - FAILURE TO YIELD 8 - FOLLOWING TOO 3 - RAN RED LIGHT CLOSE/ACDA 4 - RAN STOP SIGN 9 - IMPROPER LANE	14 - STOPPED OR PARKED	EQUIPMENT 23 19 - LOAD SHIFTING/	- NOT DISCERNABLE - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN		
2 0 5 - UNSAFE SPEED 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	FALLING/SPILLING 99 20 - IMPROPER CROSSING	- OTHER IMPROPER ACTION	2 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
CONTRIBUTING 12 - IMPROPER BACKING CIRCUMSTANCES				# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING		
<u> </u>					1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING		
SEQUENCE OF EVENTS	EVENTS			_2_	2 3 - INVOLVED - PASSIVE CROSSING		
1 - OVERTURNIROLLOVER 6 - EQUIPMENT FAILURE 1   1   6   2 - FIRE/EXPLOSION 7 - SEPARATION OF	OPPOSITE DIRECTION OF	17 - ANIMAL - FARM	- WORK ZONE MAINTENANCE EQUIPMENT		TAINN MOTORIOT DIDENTION		
3 - IMMERSION UNITS 4 - JACKKNIEE 8 - RAN OFF ROAD RIGHT 5 - CARCO (FOILIDMENT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN	- STRUCK BY FALLING, SHIFTING CARGO OR	UNIT	7 / NON-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST		
5 - CARGO / EQUIPMENT 9 - RAN OFF ROAD LEFT LOSS OR SHIFT 10 - CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT 21 - PARKED MOTOR VEHICLE	ANYTHING SET IN MOTION BY A MOTOR VEHICLE		2 - SOUTH 6 - NORTHWEST		
3,			- OTHER MOVABLE OBJECT	FROM 4 TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST		
25 - IMPACT ATTENUATOR 31 - GUARDRAIL END	COLLISION WITH FIXED OBJECT - STI		-WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN		
4 / CRASH CUSHION 32 - PORTABLE BARRIER 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	44 - DITCH 45 - EMBANKMENT 51	EQUIPMENT - WALL	UNIT SPEED	DETECTED SPEED		
STRUCTURE 34 - MEDIAN GUARDRAIL 27 - BRIDGE PIER OR ABUTMENT BARRIER 28 - BRIDGE FARANCET BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR	47 - MAILBOX 53	- BUILDING - TUNNEL - OTHER FIXED OBJECT	. 0	1 1 - STATED/ESTIMATED SPEED		
29 - BRIDGE RAIL   35 - MEDIAN CONGRETE	42 - CULVERT		- OTHER / UNKNOWN		2 - CALCULATED / EDR		
6				POSTED SPEED	3 - UNDETERMINED		
				2 F			
1 FIRST HARMFUL EVENT 1 HSY8304 OH1U 1/19 [760-0820]	MOST HARMFUL EVENT			2   5	PAGE OF		

OHIO DEPARTMENT OF PUBLIC SAFETY	MOTORIST / NO	N MOTODI	ет							REPORT NUMBE		
SAPETY - SERVICE - PROTECTION	WOTOKIST / NO	JIN-IVIO I OKI	31				_2_	0   2   5	0 _	7   8	6	
M UNIT# NAME: LAST,												GENDER
T O O GON		JEREMY	DAVID	)				PHONE - INCLUDE AREA CODE		8 0	4 4	<u> </u>
1	NTY ROAD 175	CI	YDE	OH 4	43410		I		-	I	1 1	1 1 1
I INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)		CAL FACILITY (NAME, CITY)	SAFETY EQI USED		Τ_	, DOT-COMPLIAN	SEATING POS	SITION	AIR BAG US.	AGE EJECTIO	ON TRAPPED
5 1	N/A	N/A			0 1	<u> </u>	MC HELMET		1	1_	_1_	_ _1_
OL STATE OPERATOR I	ICENSE NUMBER	OFFENSE C	CHARGED	CODE	OFFENSE DESCRIPT	ΓΙΟΝ				CITATION NU	IMBER	
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECTE	ED	CONDITION		ALCOHO	DL TEST			DRUG TEST(S)	
R SELECT UP TO 2		DISTRACTED BY	ALCOHOL MA	RUUANA	1 .	STATUS	1 1 1	VALUE	STATE	us TY	PE RES	SULT SELECT UP TO 4
M UNIT# NAME: LAST,			OTHER DRUG					DATE OF BI			AGE	GENDER
0 0 1		DOCALVAL	N.4				.0.4	I 10 16 11		7   0	AGE	F F
R ADDRESS: STREET, CITY, STATE, 2		ROSALYN	M				-	PHONE - INCLUDE AREA CODE		.   0		<u> </u>
5575 DALE	WOOD AV	MA	APLE HTS	OH 4	44137							
INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)		CAL FACILITY (NAME, CITY)	SAFETY EQ USED			DOT-COMPLIAN			AIR BAG USA		
o 5 1	GARFIELD EMS	N/A OFFENSE C	HARGED	LOCAL	0   4		MC HELMET	0	1	CITATION NU	<u>1</u>	_
M O	SOUTH TORIDER	OIT ENGE O		CODE								
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE		CONDITION		ALCOHO		_		DRUG TEST(S)	
		ву 1	ALCOHOL MAR	RIJUANA	1 .	STATUS	TYPE	VALUE	STATU	IS TYP	E RESI	ULT SELECT UP TO 4
s 4 NAME: LAST,	IRST, MIDDLE		OTHER DRUG					DATE OF BI	1		AGE	GENDER
O T								1 1 1	1 1	1 1		
R ADDRESS: STREET, CITY, STATE, 2	P						CONTACT	PHONE - INCLUDE AREA CODE	E			
s T								<u> </u>			<u> </u>	<u> </u>
I INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDIC	AL FACILITY (NAME, CITY)	SAFETY EQU USED	JIPMENT		DOT-COMPLIAN	SEATING POS	SITION	AIR BAG USA	AGE EJECTIO	N TRAPPED
OL STATE OPERATOR I	ICENSE NUMBER	OFFENSE C	HARGED	LOCAL	OFFENSE DESCRIPT		MIC RELIMET		=	CITATION NU	MBER	
M 0				CODE								
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE	āD .	CONDITION	STATUS	ALCOHO TYPE	OL TEST VALUE	STATU	US TYP	DRUG TEST(S)	SULT SELECT UP TO 4
s		I I	ALCOHOL MAR OTHER DRUG	RIJUANA					 الد			. <del></del>
INJURIES	SEATING POSITION	AIR BAG	OL CL	ASS	) OL	RESTRICTION	N(S)	DRIVER DIS	STRACTION		TEST	STATUS
1 - FATAL 2 - SUSPECTED SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED  2 - DEPLOYED FRONT	1 - CLASS A 2 - CLASS B		1 - ALCOHOL I DEVICE	INTERLOCK		1 - NOT DISTRACTED 2 - MANUALLY OPERATION	ING AN		NONE GIVEN TEST REFUSED	
3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C		2 - CDL INTRA 3 - CORRECTI			ELECTRONIC COMMU DEVICE (TEXTING, TYP		3-	TEST GIVEN, CONTA	
4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT /	,	HIO = D)	4 - FARM WAIN 5 - EXCEPT CL			DIALING) 3 - TALKING ON HANDS-I			SAMPLE / UNUSABLI TEST GIVEN, RESUL	
	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	5 - NOT APPLICABLE  9 - DEPLOYMENT UNKNOWN	5 - M / C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CL & CLASS B			COMMUNICATION DE	EVICE	5-	TEST GIVEN, RESUL	TS UNKNOWN
INJURED TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)					RACTOR-TRAIL		4 - TALKING ON HAND-H COMMUNICATION DE	EVICE			
1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE				RESTRICTI 9 - LEARNER'S	TONS	-	5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE				
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	OL ENDOR	RSEMENT	RESTRICT 10 - LIMITED T	TIONS		6 - PASSENGER 7 - OTHER DISTRACTION	N INSIDE	1-	NONE	. TEST TYPE
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	2 - PARTIALLY EJECTED	M - MOTORCYCLE		ONLY	TO EMPLOYME	=NT	THE VEHICLE  8 - OTHER DISTRACTION	NS OLITSIDE		BLOOD	
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED  4 - NOT APPLICABLE	P - PASSENGER N - TANKER		12 - LIMITED -	- OTHER		THE VEHICLE 9 - OTHER / UNKNOWN		١,	URINE BREATH	
SAFETY EQUIPMENT  1 - NONE USED	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER		(SPECIAL B	ICAL DEVICES BRAKES, HAND S, OR OTHER		9-OTHER/UNKNOWN		5 -	OTHER	
2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED	CARGO AREA 13 - TRAILING UNIT	TRAPPED  1 - NOT TRAPPED	R - THREE-WHEEL MOT	ORCYCLE	ADAPTIVE I		all V					
4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS	S - SCHOOL BUS  T - DOUBLE & TRIPLE TI	RAILERS	15 - MOTOR V		VL1			1-	DRUG T NONE	EST TYPE
FORWARD FACING  6 - CHILD RESTRAINT SYSTEM -	(NON-TRAILING UNIT) 15 - NON-MOTORIST	3 - FREED BY	X - TANKER / HAZMAT		16 - OUTSIDE	MIRROR		COND	DITION		BLOOD	
REAR FACING 7 - BOOSTER SEAT	99 - OTHER / UNKNOWN	NON-MECHANICAL MEANS			17 - PROSTHE 18 - OTHER	ETIC AID		1 - APPARENTLY NORM			URINE OTHER	
8 - HELMET USED								2 - PHYSICAL IMPAIRME 3 - EMOTIONAL (E.G. DEI				
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)			GEND	DER				ANGRY, DISTURBED) 4 - ILLNESS		1.	DRUG TES	T RESULT(S)
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN			F - FEMALE M - MALE					5 - FELL ASLEEP, FAINT	ΓED,	2 -	BARBITURATES	
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			U - OTHER/UNKNOWN					FATIGUED, ETC.  6 - UNDER THE INFLUEN	NCE OF		BENZODIAZEPINES CANNABINOIDS	
								MEDICATIONS / DRUG			COCAINE OPIATES / OPIOIDS	
											OTHER	
								9 - OTHER / UNKNOWN				
								9 - OTHER / UNKNOWN			NEGATIVE RESULTS	\$

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OHIO DEPARTMENT OF PUBLIC SAFETY  OCCUPANT / WITNESS ADDENDUM					LOCAL REPORT NUMBER						
w) =						2   0   2   5   0	7   8   6				
unit#	NAME: LAST, FI		DATE OF BIRT	2 <sub> </sub> 0 <sub> </sub> 1 <sub> </sub> 8 <sub> </sub>	AGE	GENDER F					
ADDRESS: STRE	EET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CO	DE	1	- 1					
		OD AVE MAPLE HTS	S OH 44								
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)  GARFIELD EMS		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  N/A	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT SEATING I	POSITION AIR BAG USAG	E EJECTION	TRAPPED 1		
UNIT#	NAME: LAST, FI	RST, MIDDLE			•	DATE OF BIRT	н	AGE	GENDER		
								ШШ			
ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING I	POSITION AIR BAG USAG	EJECTION	TRAPPED		
	TAKEN BY				USED	MC HELMET					
UNIT#	NAME: LAST, FI	RST, MIDDLE				DATE OF BIRT	TH .	AGE	GENDER		
ADDDESS: oxpo	EET, CITY, STATE, ZIP					CONTACT BHONE, INCLUDE ADEA CO	Dr.				
ADDRESS: STRE	EET, CITT, 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	POSITION AIR BAG USAG	EJECTION	TRAPPED		
						MC HELMET					
UNIT#	NAME: LAST, FI	RST, MIDDLE				DATE OF BIRT	TH .	AGE	GENDER		
ADDRESS: STRE	FET CITY STATE ZIP					CONTACT PHONE - INCLUDE AREA CO	DE		11		
ADDRESS: STRE	ADDRESS: STREET, CITY, STATE, ZIP										
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	SEATING I	POSITION AIR BAG USAG	EJECTION	TRAPPED		
			1			MC HELMET			L		
2 - SUSPECTED S 3 - SUSPECTED M 4 - POSSIBLE INJU 5 - NO APPARENT  1 - NOT TRANSP TREATED AT: 2 - EMS 3 - POLICE 9 - OTHER / UNKI  F - FEMALE M - MALE U - OTHER/UNKIN	MINOR INJURY URY INJURY INJURY  INJURE PORTED / SCENE	ED TAKEN BY ENDER	3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST FORWARD F	BELT ONLY USED  NLY USED  & LAP BELT USED  RAINT SYSTEM -  ACING  RAINT SYSTEM -  G  EAT  ED  EPADS USED  HEES, ETC.)  // CE (LOTHING  /PEDESTRIAN  NLY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORC' 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - MIDDLE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLY (MONTRAILING UNIT, US. PASSENGER IN UNENCLOSED 13 - TRAILING UNIT) 14 - RIDING ON VEHICLE EXTERIO (MONTRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	E SIDE CAR)  CAB  SIED CARGO AREA P WITH CAP)  CARGO AREA	NOT EJECTED     PARTIALLY EJECTED     TOTALLY EJECTED     NOT APPLICABLE	APPED ALMEANS			
NAME: LAST, FIRST,	T, MIDDLE					DATE OF BIRT	H	AGE	GENDER		
ADDRESS: STREET	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA	A CODE				
ADDRESS: STREET						1		AGE	GENDER		
						CONTACT PHONE - INCLUDE AREA		AGE	GENDER		
	Γ, MIDDLE					1	H	AGE	GENDER		
NAME: LAST, FIRST,	T, MIDDLE ST, CITY, STATE, ZIP					DATE OF BIRT	H L CODE	AGE	GENDER		
NAME: LAST, FIRST, ADDRESS: STREET	T, MIDDLE  TT, CITY, STATE, ZIP  T, MIDDLE					DATE OF BIRT	H L L L L L L L L L L L L L L L L L L L				

HSY 8355 0HIP 1/19 [760-1500]



## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20250786	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 04 D 09 Y 2025
IN COUNTY OF 18	CRASH LOCATION GARFIELD HTS SERVICE DEPARTMENT	
THE TRAIN WAS TRAVELI	ING AT APPROXIMATELY 18 MPH AS STATED I	BY THE
CONDUCTOR. THE COND	DUCTOR STATED THAT HE HAD ACTIVATED H	IS HORN
MULTIPLE TIMES IN AN E	FFORT TO ALERT UNIT 1 OF HIS PRESENCE	AND TO
ALLOW TIME FOR THEM	TO MOVE THEIR VEHICLE OFF OF THE TRAC	KS.
UNIT 1 DID NOT MOVE, A	ND WAS STRUCK BY THE TRAIN. UPON ARRI	VAL,
BOTH OCCUPANTS OF U	NIT 1 COMPLAINED OF MINOR DISCOMFORT	AND
WERE CLEARED AND RE	LEASED ON SCENE BY GARFIELD HTS EMS.	THE
TRAIN WAS IDENTIFIED A	AS NORFOLK SOUTHERN ENGINE 4229 L15 A	C44C6M
. THE CONDUCTOR STAT	ED THAT HE FIRST OBSERVED THE VEHICLE	AND
BEGAN APPLYING HIS EM	MERGENCY BRAKE AT APPROXIMATELY 3000	FT
BEFORE THE CROSSING		
DISPOSITION:		
BWC AVAILABLE.		
	OFFICER'S SIGNATURE	BADGE NUMBER 017