OF PUBLIC SAFETY TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER *						
☐ PHOTOS TAKEN	OH-2	OH-3	2   0   2   5   1   6   1   1   1											
SECONDARY CRASH		OTHER R	HIT/SKIP 1 - Solved	NIIMRED OF LINITS	98 - ANIMAL 9   9   199 - INKNOWN									
COUNTY* LOC	Private Property  ALITY*	LOCATION: CITY, VILLA	2 - Unsolved U Z 9 9 9 - UNKNOVI  CRASH DATE/TIME*  CRASH SEVERITY											
1 1 8 1 1	1 - CITY * 2 - VILLAGE * 3 - TOWNSHIP *	GARFIEL					0 6 2 6 2 0 2 5   0 9 0 0  4   1-FATAL 2-SERIOUS IN							
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH	LOCATION RO	DAD NAME	ROAD TYPE	I ATITUDE DECIM	SUSPECTED 3 - MINOR INJURY						
Госатіон			3 - EAST 4 - WEST	Saybroo	ok	$A_{\downarrow}V_{\downarrow}$	4 1 1 4 3	SUSPECTED  4 - INJURY POSSIBLE  5 - PROPERTY DAMAGE						
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST	REFERENC	CE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	5 - PROPERTY DAM ONLY							
REFERENCE		_3_	4 - WEST	131		ST	<u> </u>	7 9 3 4						
REFERENCE PO 1 - INTERSECTI			POLITE TYPE TATE ROUTE (TP)		AL - ALLEY HW - HIGHWAY	RD - ROAD	☐ WITHIN INTERSE							
2 - MILE POST 3 - HOUSE #	3 2-SOUTH 3-EAST 4-WEST	SR - STATE	AL US ROUTE ROUTE ERED COUNTY ROU		AV - AVENUE         LA - LANE           BL - BOULEVARD         MP - MILEPOST           CR - CIRCLE         OV - OVAL	SQ - SQUARE ST - STREET TE - TERRACE	☐ WITHIN INTERCH	ANGE AREA	NUMBER OF APPROACHES					
DISTANCE EDOM DECEDEMOS	DISTANCE		RED TOWNSHIP		CT - COURT         PK - PARKWAY           DR - DRIVE         PI - PIKE           HE - HEIGHTS         PL - PLACE	TL - TRAIL WA - WAY		ROADWAY	NUMBER OF AFFROACHES					
4   0	2 - Feet 3 - Yards						☐ ROADWAY DIVID	ED						
	LOCATION of EIDST HADMEIII  ROADWAY 9 - CROSSON		T		ANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE					
2 - ON S	SHOULDER 10 - DRIVEW	AY / ALLEY	6	1 - NOT COLLISION BETWEEN TWO MOTOR	4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE		1 - NORTH 2 - SOUTH	(<4 FE	ED FLUSH MEDIAN ET)					
5 - ON 0 6 - OUT	GORE         CROSSIN           SIDE         12 - SHARED           FFICWAY         OR TRAI	NG LUSE PATHS ILS		VEHICLES IN TRANSPORT 2 - REAR-END	7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION	ON	3 - EAST 4 - WEST	(≥4 FE 3 - DIVIDI	ED, DEPRESSED MEDIAN					
7 - ON F 8 - OFF		OTH		3 - HEAD-ON	9 - OTHER / UNKNOWN			(ANY	ED, RAISED MEDIAN (YPE) R/UNKNOWN					
WORK ZONE RELAT	_ 1	WORK ZONE - LANE CLOSURE - LANE SHIFT/CROSSO			LOCATION OF CRASH IN WORK 1 - BEFORE THE 1ST WORK WARNING SIGN	ZONE ZONE	CONTOUR	CONDITIONS	SURFACE					
LAW ENFORCEMEN  PRESENT		- WORK ON SHOULDER OR MEDIAN			2 - ADVANCE WARNING ARE 3 - TRANSITION AREA 4 - ACTIVITY AREA	A		_1_	_2_					
☐ ACTIVE SCHOOL ZO	5	- INTERMITTENT OR MO - OTHER	IVING WORK		5 - TERMINATION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET 3 - SNOW	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS,					
L	IGHT CONDITION				WEATHER		3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER /UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING,	ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE					
1 - DAYLIGH 2 - DAWN/DL 1 3 - DARK - LI			1 - CLEAR 2 - CLOUE 3 - FOG. S		6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW		JUNIOWN	MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	5 - DIRT 9 - OTHER /UNKNOWN					
4 - DARK - R 5 - DARK - U 9 - OTHER /	OADWAY NOT LIGHTED NKNOWN ROADWAY LIGHTING UNKNOWN	1	4 - RAIN 5 - SLEET	, HAIL	9 - FREEZING RAIN OR FREEZING DRIZ 99 - OTHER / UNKNOWN	ZLE		-						
NARRATIVE						: : :	<u> </u>	· · · ·	Indicate the north					
UNIT#1 WAS	S TRAVELING \	WEST ON	SAYBR	OOK NEA	AR .				direction with an "N" on the					
E131 ST. UN	NIT#2 WAS FIN	ISHING A	RIGHT	TURN AN	D :	: : :		: : : I	compass diagram.					
TRAVELING	EAST ON SAY	BROOK N	IEAR E1	31 ST.AS	SA	E	131 St	North						
RESULT, TH	IE RIGHT FROI	NT OF UN	IT#1 AN	ID.LEFT.E	BACK		^1	∯ Not To Scale						
TRAILER OF	.UNIT#2.COLL	IDED. BO	TH VEH	IICLES.W	ERE		Stop Sign	n 						
	EST UPON ARF					*			Saybrook					
NOTE:SEE							P ×		<b>IJ</b> ₹					
	ILER PLATE O	E LINIT#2	. TTD:20/	54. (OU)			7		7					
INOTE., TIVA	IILLINI LAIL O	i Olviii#2	. 11023	J4 (OI1)			, ,	Parking Lot						
						/	/ \							
CRASH REPO	RTED DATE/TIME		DISPATCH DAT		ARRIVAL DATE/T			RED DATE/TIME	REPORT TAKEN BY POLICE AGENCY					
0 6 2 6 2 0	2 5   0 9 0 0  OTHER INVESTIGATION	0 6 2 6	6 2 0 2 5	5   0 9 0  NAME*	1 0 6 2 6 2 0 2 5		0 6 2 6 2 0 2	2 5   0 9 3 0	MOTORIST					
CLOSED	TIME	MINUTES	R. Cr	amer	DIO DADOS IIIMO	R. Dodg	е	WINDER	SUPPLEMENT (CORRECTION on ADDITION					
0	0   3   9   6   8   OFFICER'S BADGE NUMBER'						CHECKED BY OFFICER'S BADGE NUMBER*  [S   2   2							

	OH OF MAPET	IIO DEPARTMENT PUBLIC SAFETY TY - SERVICE - PROTECTION  UNIT		2,0,2,5,1	LOCAL REPORT NUMBER							
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE BUTLER LE	( 🖃 5	ame As Driver)	OWNER PI	HONE: INCLUDE AREA CODE	( Same As Driver)		DAMAGE DAMAGE SCALE			
ER		ESS: STREET, CITY, STATE, ZIP	( 🖪 Same As		1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE						
OWN	14122		AVE	44105 AREA CODE	2 2- MINOR DAMAGE	4 - DISABLING DAMAGE 9 - UNKNOWN						
	COMMERCIAL CA	ARRIER: NAME, ADDRESS, CITY, STATE, ZIP		AREA CODE		DAMAGED AREA(S)						
Ī	LP STATE	LICENSE PLATE #	4.00.00	VEHICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE		INDICATE ALL THAT APPLY			
	_O_H_	KGQ7437		F <sub>1</sub> F <sub>1</sub> G <sub>1</sub> 4 <sub>1</sub> R <sub>1</sub> N <sub>1</sub> 1 <sub>1</sub> 0 <sub>1</sub> 6 <sub>1</sub> 3	3,4,8,	2 0 2 4	RAM VEHICLE MODEL	11 12 1	11 12			
		INSURANCE						10 11 1	2 10 11 1 2			
	☐ COMMERC	TYPE OF USE  CIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPANY NAME			9 9 3	3 9 9 3 3			
	INTERLO		# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.		HAZARDOUS N	MATERIAL  CLASS # PLACARD ID #	8 5 4 8 7 5				
	DEVICE EQUIPPE	HIT/SKIP UNIT	_0 _1	2 - 10,001 - 26K LBS. 3 - >26K LBS.		PLACARD	LIGHT LENGTH IS	7 6	11 12 7 6 5			
		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12 - GOLF CART 13 - SNOWMOBILE		+ PASSENGERS)	23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST	10/	11 1 2			
	0 4	3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN	9 - AUTOCYCLE  10 - MOPED OR MOTORIZED BICYCLE	14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY 22 - ANIMAL	EQUIPMENT WITH RIDER OR	26 - BICYCLE 27 - TRAIN	9 (	9 3 3			
	UNIT TYPE	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL	-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4			
/EHICLE		# OF TRAILING UNITS						11 12 1	5 11 12			
>		WAS VEHICLE OPERATING IN AUTONO	MOUS MODE	0 - NO AUTOMATION	3 . 00***	DITIONAL	9 - UNKNOWN	10 1 1 1 2	2 10 11 1			
	, 2 ,	WHEN CRASH OCCURED?	AUTONOMO	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTO 4 - HIGH	DMATION I AUTOMATION . AUTOMATION	- Galdronn	9 9 3	3 9 9 3			
		1-1ES 2-NO 3-OTHER/ONNNOWN MODELEVEL					21 - MAIL CARRIER	8 7 6 5	7 5 7			
	0 1	2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE		12 - MILITARY	17 - MOV	WING DW REMOVAL	99 - OTHER /UNKNOWN	7 6 5	7 6 5			
		PECIAL 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT			20 - SAFETY SERVICE PATROL				12 12 12			
	1011	2 - BUS			8 - POLE 12 - CONCRETE MIXER 9 - CARGO TANK 13 - AUTO TRANSPORTER		12 N	* •				
				6 - CARGO VAN/ENCLOSED BOX	10 - FLA 11 - DU	AT BED 1	4 - GARBAGE/REFUSE 9 - OTHER / UNKNOWN	9 3 9 3 9 3 9				
	1 1 1			7 - WORN OR SLICK TIRES		OR TROUBLE SABLED FROM PRIOR	9 - OTHER / UNKNOWN	6				
	VEHICLE DEFECTS	CTS 0-1ML BEOMOTI BELLEVING		DEFECTIVE	ACCIDENT  9 - MEDIANICROSSING ISLAND  12 - FIRST RESPONDER				6 6 6			
		1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRIN 11 - SHA	VEWAY ACCESS RED USE PATHS OR	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	UNDERCARRIAGE [14] - ALL AREAS [15]			
	LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE-OTHER LOCATION		TRAILS			UN	IT NOT AT SCENE [16]			
		1-NON-CONTACT 2-NON-COLLISION 1 1 1 1	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	14 - ENT	SOTIATING A CURVE TERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	IN	NITIAL POINT OF CONTACT			
		3 - STRIKING 4 - STRUCK PRE-CRASH ACTION	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED	15 - WAL	FIED LOCATION 20 - OTHER NON-MOTORIST ING, RUNNING, 21 - STANDING OUTSIDE ING, PLAYING DISABLED VEHICLE		0 7 0-NO DAMAGE				
		5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC		RKING SHING VEHICLE	99 - OTHER / UNKNOWN	DIAGRAM 13 - TOP	D UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN			
		5-OTHER / UNKNOWN						10 101	TRAFFIC			
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO	13 - IMPROPER START FROM A PARKED POSITION			21 - LYING IN ROADWAY 22 - NOT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL			
		3 - RAN RED LIGHT 4 - RAN STOP SIGN	CLOSE/ACDA 9 - IMPROPER LANE CHANGING	14 - STOPPED OR PARKED ILLEGALLY	EQU 19 - LOA	JIPMENT D SHIFTING/	23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN			
		5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	15 - SWERVING TO AVOID 16 - WRONG WAY	FALLING/SPILLING 99 - OTHER IMPROPER 20 - IMPROPER CROSSING ACTION			2 2 - TWO-WAY	3 - FLASHER 6 - NO CONTROL			
	CONTRIBUTING CIRCUMSTANCES		12 - IMPROPER BAURING					# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED			
VT(S)	SEQUENCE OF	EVENTS							2 - INVOLVED - ACTIVE CROSSING			
EVE		1-OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS  11 - CROSS CENTERLINE -	16 - RAII	WAY VEHICLE	22 - WORK ZONE	2	3 - INVOLVED - PASSIVE CROSSING			
	1 2 0	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL	17 - ANIN 18 - ANIN	MAL - FARM MAL - DEER	MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	Ur	NIT / NON-MOTORIST DIRECTION			
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOT	MAL - OTHER OR VEHICLE IN NSPORT	SHIFTING CARGO OR ANYTHING SET IN		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
		2000 OK OF HET	10 - ONOGO MEDIAN	15 - PEDALCYCLE		KED MOTOR VEHICLE	MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE	5004 . 2	3 - EAST 7 - SOUTHEAST			
	3			COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT	FROM 3 TO	4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
	4.	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CUR 44 - DITC	н	50 -WORKZONE MAINTENANCE EQUIPMENT	UNIT SPEED	DETECTED SPEED			
	-	26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMB 46 - FENO	ANKMENT CE	51 - WALL 52 - BUILDING 53 - TUNNEL		DETECTED SPEED			
	5	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAILBOX 53 - TUNNEL 48 - TREE 54 - OTHER FIXED OBJECT 49 - FIRE HYDRANT 99 - OTHER / UNKNOWN			0	1 - STATED/ESTIMATED SPEED			
		30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER					POSTED SPEED	2 - CALCULATED / EDR 3 - UNDETERMINED			
	6							LOSIEN SLEEN				
	1	FIRST HARMFUL EVENT	<sub>1</sub> 1 <sub>1</sub>	MOST HARMFUL EVENT				2   5				
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	OH OF MAPET	TIO DEPARTMENT PUBLIC SAFETY TY - BENVICE - PROTECTION  UNIT		2,0,2,5,1	LOCAL REPORT NUMBER				
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE POPE TOMN	(⊔ Sar		DAMAGE DAMAGE SCALE				
OWNER	0WNER ADDRE	SS: STREET, CITY, STATE, ZIP  MARSTON	( Same As D	4105	1 - NONE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN				
O		RRIER: NAME, ADDRESS, CITY, STATE, ZIP	)	EA CODE		9 - UNKNUWN			
L	1007475	T	1	FUID F IDENTIFICATION #	Ш	I VENDE VED	I		DAMAGED AREA(S) INDICATE ALL THAT APPLY
	LP STATE	PNA9978	$1_1F_1T_1S_1X_12$	EHICLE IDENTIFICATION # P <sub>1</sub> 1 <sub>1</sub> 5 <sub>1</sub> 7 <sub>1</sub> 5 <sub>1</sub> E <sub>1</sub> C <sub>1</sub> 1 <sub>1</sub> 8 <sub>1</sub>	6,3,5,	VEHICLE YEAR 2 0 0 5	VEHICLE MAKE Ford	11 12	INDICATE ALL TRAT AFFET
		JRANCE INSURANCE COMPANY PROGRES		insurance policy# 962696118		VEHICLE COLOR TAN	VEHICLE MODEL F-250	10 12	2 10 11 1
	☐ COMMERC	TYPE OF USE  CIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED	BY: COMPANY NAME		9 9 3	3 9 9 3 3
	INTERLO DEVICE EQUIPPE	OCK	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	<u> </u>	HAZARDOUS MATERIAL  MATERIAL RELEASED CLASS# PLACARD ID # PLACARD		8 7 6 5	8 7 5 5 4 5 5
		1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12 - GOLF CART		IVERY VEHICLE) 23 -	PEDESTRIAN/SKATER	6	11 12 1
	0 4	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR	20 - OTHER 21 - HEAVY	VEHICLE 25 - EQUIPMENT 26 -	WHEELCHAIR (ANY TYPE) OTHER NON- MOTORIST BICYCLE TRAIN	9	10 2 3
		5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	16 - FARM EQUIPMENT 17 - MOTORHOME			UNKNOWN OR HIT/SKIP	8	
VEHICLE	1	# OF TRAILING UNITS						11 12 1	7 6 5 11 12
>		WAS VEHICLE OPERATING IN AUTONO	DMOUS MODE O	0 - NO AUTOMATION	3 - CON	DITIONAL 9 -	UNKNOWN	10 11 1	2 10 11 1 2
	2	WHEN CRASH OCCURED?  1-YES 2-NO 9-OTHER/UNKNO	- U	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH	OMATION H AUTOMATION L AUTOMATION		9 3 4	3 9 9 3
		1 - NONE 6 - BUS - CHARTER/TOUR 11 2 - 7474 7 - BUS - INTER/TYY 12			16 - FAF 17 - MO		- MAIL CARRIER - OTHER /UNKNOWN	8 7 6 5	4 8 7 6 5
		3 - ELECTRONIC RIDE SHARING		18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL			6	12 12 12	
		O 1 1 1-NO CARGO BODY TYPE NOTAPPLICABLE 3-VEHICLE TOWNS ANOTHER CHASSIS 6-CARGO VANIENCIOSED BOX 7- GRAINCHIPSIGRAVEL 4-LOGGING 7- GRAINCHIPSIGRAVEL 4-BRAKES 7-WORN OR SLICK TIRES		5 - INTERMODAL CONTAINER	8 - POLE 12 - CONCRETE MIXER 9 - CARGO TANK 13 - AUTO TRANSPORTER 10 - FLAT BED 14 - CARBAGEREFUSE 11 - DUMP 99 - OTHER / UNKNOWN			12	
	CARGO BODY			6 - CARGO VAN/ENCLOSED BOX				9 3 9 3 9 3 9	
	1 1 1					TOR TROUBLE 99 ABLED FROM PRIOR	OTHER / UNKNOWN	6	
L	VEHICLE DEFECTS	EHÍCLE 3-TRAILAMPS 5-STEERING 8-TRAILER EQUIPMENT EHÍCLE 3-TAILLAMPS 6-TIRE BLOWOUT DEFECTIVE FFECTS			ACCIDENT  9 - MEDIANICROSSING ISLAND  12 - FIRST RESPONDER		D NO DAMACE (0)	6 6 6	
		MARKED CROSSWALK 2 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI	VEWAY ACCESS RED USE PATHS OR 99 -	AT INCIDENT SCENE OTHER / UNKNOWN	- NO DAMAGE [0]	- ALL AREAS [15]
	IMPACT	UNMARKED CROSSWALK 1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN			- APPROACHING	_	INIT NOT AT SCENE [16]  INITIAL POINT OF CONTACT
	_ 9	2 - NON-COLLISION 3 - STRIKING 0 5	2 - BACKING  3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED	SPE	CIFIED LOCATION 20	OR LEAVING VEHICLE - STANDING - OTHER NON-MOTORIST - STANDING OUTSIDE	O 7 0 - NO DAMAG	
		4 - STRUCK PRE-CRASH 5 - BOTH STRIKING & STRUCK	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED IN TRAFFIC	11 - SLOWING OR STOPPED         JOGGING, PLAYING         I           IN TRAFFIC         16 - WORKING         99 - 0			0 7	TO UNIT 15 - VEHICLE NOT AT SCENE
		9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	12 - DRIVERLESS	17 - PUS	SHING VEHICLE		13 - TOP	
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM			LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC TRAFFIC CONTROL
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE CHANGING	A PARKED POSITION  14 - STOPPED OR PARKED  ILLEGALLY	EQL 19 - LOA	JIPMENT 23 - AD SHIFTING/	NOT DISCERNABLE OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT
	2 2	5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	15 - SWERVING TO AVOID 16 - WRONG WAY		LING/SPILLING 99- ROPER CROSSING	OTHER IMPROPER ACTION	2 2 - TWO-WAY	6 3 - FLASHER 6 - NO CONTROL
	CONTRIBUTING CIRCUMSTANCES							# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED
EVENT(S)	SEQUENCE OF	EVENTS						_ 2 _	2 - INVOLVED - ACTIVE CROSSING  1 3 - INVOLVED - PASSIVE CROSSING
ú		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF	EVENTS  11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF			WORK ZONE MAINTENANCE		5- INVOLVED - FASSIVE UKUSSING
		3 - IMMERSION 4 - JACKKNIFE	UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	TRAVEL  12 - DOWNHILL RUNAWAY  13 - OTHER NON-COLLISION	18 - ANII 19 - ANII	MAL - DEER MAL - OTHER 23 -	EQUIPMENT STRUCK BY FALLING, SHIFTING CARGO OR	'	UNIT / NON-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST
	2	5 - CARGO / EQUIPMENT LOSS OR SHIFT	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRA	NSPORT KED MOTOR VEHICLE	ANYTHING SET IN MOTION BY A MOTOR VEHICLE		2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST
	3			COLLISION WITH FIXED OBJECT	T - STRUCK		OTHER MOVABLE OBJECT	FROM 2 то	3 4- WEST 8- SOUTHWEST
	4.	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CUF 44 - DITC	SH .	WORKZONE MAINTENANCE EQUIPMENT	UNIT SPEED	9 - OTHER / UNKNOWN  DETECTED SPEED
		26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMB 46 - FEN	ANKMENT 51 - CE 52 -	WALL BUILDING TUNNEL	OMIT OF LED	DETECTED SPEED
	5	28 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAIL 48 - TRE 49 - FIRE	.BUX E 54 -	OTHER FIXED OBJECT OTHER / UNKNOWN	2	1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR
	6, ,	JU - GUARUKAIL FAÜE	36 - MEDIAN OTHER BARRIER					POSTED SPEED	3 - UNDETERMINED
								. 2 . 5	
HS	1 Y8304 OH1U 1/19 [	FIRST HARMFUL EVENT	1	OST HARMFUL EVENT				2   5	PAGE OF

OHIO DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	MOTORIST / NO	JN-WOTORI	<b>5</b> 1				_2	0   2   5	<sub>1</sub> 1 <sub>1</sub>	6   1	1			
M UNIT # NAME: LAST, FIRS	T, MIDDLE											GENDER		
BUTLER LEONARD C								0   9   0   7   1   9   6   4   6   0   M						
	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
14122 CHRO	0111110							SEATING POS	SITION	AIR BAG US	AGE EJECTIO	ON TRAPPED		
5   BY				USED	0   4		DOT-COMPLIAN MC HELMET	п	1	1		1 1		
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE	CHARGED		OFFENSE DESCRIPT					CITATION NU	MBER			
M O T				CODE										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT		CONDITION	STATUS	ALCOH: TYPE	OL TEST Value	STAT	US TYF	DRUG TEST(S) E RES	SULT SELECT UP TO 4		
s 4			ALCOHOL MA	RUUANA	1	1 1	1 <sub> </sub>	_	1	1				
M UNIT# NAME: LAST, FIRS	T, MIDDLE		Ш					DATE OF BI	RTH		AGE	GENDER		
O 2 POPE	:	LAMAR					0   6	S   0   3   1	9	5   9	6 <sub> </sub> 6 <sub>   </sub>	. I ⊢ М		
R ADDRESS: STREET, CITY, STATE, ZIP	-	L/ UVI/ U C					CONTACT	PHONE - INCLUDE AREA CODE						
0000	FIELD RD APT 513	BE BE	EACHWOOD		4122									
N BY	MS AGENCY (NAME)	INJURED TAKEN TO: MED	CAL FACILITY (NAME, CITY)	SAFETY EQU USED		1 .	DOT-COMPLIAN		SITION	AIR BAG USA				
<u>5</u>		OFFENSE :	CHARCED	LOCAL O	0   4		MC HELMET	0	1	CITATION NU		_		
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE	CHARGED	CODE	IFFENSE DESCRIPTI	ION				CHAHON NU	IBEK			
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECTI		CONDITION		ALCOHO	DL TEST			DRUG TEST(S)			
R SELECT UP TO 2		DISTRACTED BY	ALCOHOL MA			STATUS	TYPE	VALUE	STATU			ULT SELECT UP TO 4		
		1	OTHER DRUG	L			1	•		_1				
M UNIT # NAME: LAST, FIRS	T, MIDDLE							DATE OF BI	RTH		AGE	GENDER		
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R ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CODE	!					
S T / INJURIES INJURED E		Luciose vicenzo MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQUI	PMENT			SEATING POS	UTION	AIR BAG USA	GE EJECTIO	IN TRAPPED		
N BY	MS AGENCY (NAME)	INJURED TAKEN TO: WIED!	GAL PACILITY (NAME, CITY)	USED			DOT-COMPLIAN		illon	AIK BAG USA	GE EJECTIO	IN I IRAPPED		
OL STATE OPERATOR LICE	INSE NUMBER	OFFENSE (	CHARGED	LOCAL C	OFFENSE DESCRIPT	_	IIIO IIEEIIEI		=	CITATION NU	MBER			
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O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTI	ED	CONDITION		ALCOHO				DRUG TEST(S)			
R I		BY		RIJUANA		STATUS	TYPE	VALUE	STATI	US TYP	E RES	SULT SELECT UP TO 4		
Ţ			OTHER DRUG											
INJURIES 1 - FATAL	1 - FRONT - LEFT SIDE	1 - NOT DEPLOYED	1 - CLASS A	ASS	1 - ALCOHOL I	RESTRICTION INTERLOCK	I(S)	1 - NOT DISTRACTED	TRACTION	1-	NONE GIVEN	STATUS		
2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B		DEVICE 2 - CDL INTRA	STATE ONLY		2 - MANUALLY OPERATIF		2 -	TEST REFUSED			
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C		3 - CORRECTI			DEVICE (TEXTING, TYP			TEST GIVEN, CONTA			
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-	FREE		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		5 -	TEST GIVEN, RESUL	LTS UNKNOWN		
INJURED TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	5 DEI ESTIMENT STRINGTT			7 - EXCEPT TR	RACTOR-TRAIL		4 - TALKING ON HAND-H COMMUNICATION DE						
1 - NOT TRANSPORTED /TREATED AT SCENE	8 - THIRD - MIDDLE				8 - INTERMEDI RESTRICTION			5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE						
2 - EMS	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF	EJECTION	OL ENDOI	RSEMENT	9 - LEARNER'S RESTRICTI			6 - PASSENGER			ALCOHOL NONE	TEST TYPE		
3 - POLICE 9 - OTHER / UNKNOWN	TRUCK CAB	1 - NOT EJECTED  2 - PARTIALLY EJECTED	H - HAZMAT M - MOTORCYCLE		10 - LIMITED T ONLY	TO DAYLIGHT		7 - OTHER DISTRACTION THE VEHICLE	INSIDE		BLOOD			
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	3 - TOTALLY EJECTED	P - PASSENGER		11 - LIMITED T	TO EMPLOYME	ENT	8 - OTHER DISTRACTION	IS OUTSIDE		URINE			
SAFETY EQUIPMENT	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER		12 - LIMITED - 13 - MECHANIO			THE VEHICLE 9 - OTHER / UNKNOWN		4-	BREATH			
1 - NONE USED	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER			BRAKES, HAND S, OR OTHER				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	TORCYCLE	ADAPTIVE [	DEVICES)								
4 - SHOULDER & LAP BELT USED	14 - RIDING ON VEHICLE	2 - EXTRICATED BY	S - SCHOOL BUS  T - DOUBLE & TRIPLE T	DAII EDC	14 - MILITARY 15 - MOTOR VI		ILY			1-1	DRUG T	EST TYPE		
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	EXTERIOR (NON-TRAILING UNIT)	MECHANICAL MEANS	X - TANKER / HAZMAT	NAILENO	WITHOUT 16 - OUTSIDE	AIR BRAKES MIRROR				2-	BLOOD			
6 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	3 - FREED BY NON-MECHANICAL MEANS			17 - PROSTHE			1 - APPARENTLY NORM		3 -	JRINE			
7 - BOOSTER SEAT	SO CITIZAT CHILICOTT				18 - OTHER			2 - PHYSICAL IMPAIRME	NT	4 - 1	OTHER			
8 - HELMET USED 9 - PROTECTIVE PADS USED								3 - EMOTIONAL (E.G. DEI ANGRY, DISTURBED)	PRESSED,					
(ELBOWS, KNEES, ETC.) 10 - REFLECTIVE CLOTHING			GENI	DER				4 - ILLNESS		1-	DRUG TES AMPHETAMINES	T RESULT(S)		
11 - LIGHTING - PEDESTRIAN			F - FEMALE M - MALE					5 - FELL ASLEEP, FAINT	ED,	2 -	BARBITURATES			
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			U - OTHER/UNKNOWN					FATIGUED, ETC.	ICE CE		BENZODIAZEPINES CANNABINOIDS			
								6 - UNDER THE INFLUEN MEDICATIONS / DRUG			COCAINE			
								/ ALCOHOL 9 - OTHER / UNKNOWN			OPIATES / OPIOIDS OTHER			
								J-OTHER/ UNKNOWN		8-	NEGATIVE RESULTS	S		

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OCCUPANT / WITNESS ADDENDUM					LOCAL REPORT NUMBER					
MATTY - MENVES - PROTECTION					2   0   2   5   1   6   1   1					
UNIT#	NAME: LAST, F		TRE	EVON		DATE OF BIR	тн 2 <sub> </sub> 0 <sub> </sub> 0 <sub> </sub>		AGE	GENDER
ADDRESS: STRE	EET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
ADDRESS: STRE	Marshal	CLEVELAND OH 44								
INJURIES 4	INJURED TAKEN BY 9	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 3	DOT-COMPLIANT SEATING O	POSITION AIR BA	IG USAGE E	EJECTION 1	TRAPPED 1
UNIT#	NAME: LAST, F	RST, MIDDLE		DATE OF BIR			AGE	GENDER		
	GLASS		JOS	EPH D				9 4	6	<u> </u>
3	eet, city, state, zip Marshal	CLEVELAND OH 44	105 543 <sup>-</sup>	1		CONTACT PHONE - INCLUDE AREA CO	DDE	1	1	1
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING	POSITION AIR BA	G USAGE E	JECTION	TRAPPED
4	TAKEN BY 9				USED 0 4	MC HELMET 0	311	L L	1_	1
UNIT#	NAME: LAST, FI	- /	RAS	SHAUN MAUR	ICE	DATE OF BIR		8    2	age	GENDER M
1	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DDE			
8208 🛭	Dennsion	CLEVELAND OH 44	102							
INJURIES 4	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0   4	DOT-COMPLIANT SEATING O	POSITION AIR BA	IG USAGE	1	TRAPPED 1
UNIT#	NAME: LAST, F	NAME: LAST, FIRST, MIDDLE				DATE OF BIR	тн		AGE	GENDER
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		POSITION AIR BA	G USAGE E	JECTION	TRAPPED
	TAKEN BY				USED	DOT-COMPLIANT MC HELMET		L		
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY  1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN  GENDER  F - FEMALE M - MALE U - OTHER/UNKNOWN			3 - LAP BELT OF 4 - SHOULDER 5 - CHILD REST FORWARD FA	BELT ONLY USED  NLY USED  & LAP BELT USED  RAINT SYSTEM -  ACKNOS  RAINT SYSTEM -  G  EAT  ED  EPADS USED  HEES, ETC.)  FE CLOTHING  PEDESTRIAN  NLY  NLY  NLY  NLY  NLY  NLY  NLY  SED  LO  LO  LO  LO  LO  LO  LO  LO  LO  L	2 - FRONT - MIDDLE 3 - FRONT - RICHT SIDE 4 - SECOND - MEDILE 5 - SECOND - MIDDLE 6 - SECOND - RICHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE 8 - THIRD - LEFT SIDE (MOTORCYCLE 8 - THIRD - MIDDLE 10 - SLEEPER SECTION OF TRUCK C (NON-TRAILING UNIT, BUS, PICK-UP 12 - PASSENGER IN OTHER ENCLOS (NON-TRAILING UNIT, BUS, PICK-UP 13 - TRAILING UNIT) 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	: Side Car) Cab Sed Cargo Area With Cap)	2 - DEPLOYED FROM: 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH F 5 - NOT APPLICABLE 9 - DEPLOYMENT UNK  1 - NOT EJECTED 2 - PARTIALLY EJECTE 3 - TOTALLY EJECTEE 4 - NOT APPLICABLE  1 - NOT TRAPPED 2 - EXTRICATED BY M 3 - FREED BY NON-ME	RONT/SIDE  NOWN  EJECTION  ED  TRAPPED  ECHANICAL MEAI	) NS	
NAME: LAST, FIRST ADDRESS: STREE						DATE OF BIRT		AGE		GENDER
NAME: LAST, FIRST, MIDDLE						DATE OF BIRT	TH I	AGE	$\overline{\top}$	GENDER
ADDRESS: STREE	ET, CITY, STATE, ZIP			CONTACT PHONE - INCLUDE ARE	A CODE					
NAME: LAST, FIRST	T, MIDDLE					DATE OF BIRT	<u>     </u>	AGE	+	GENDER
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## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20251611	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 06 D 26 Y 2025
IN COUNTY OF 18	CRASH LOCATION	
Driver of Unit#1 stated, he v	was stopped, has not moved his vehicle, and the	other
vehicle had made a wide riç	ght turn. The trailer(yellow) clipped the left front(	paint
transfer)BWC. ( Unit#1 was	s stopped at the stop sign)	
Driver of Unit#2 stated, com	npleting a right turn and about to turn right into th	ne parking
lot. The vehicle has not bee	en moved, and the other vehicle was creeping up	slowly
and hit his trailer. Does not	believe any damage to the trailer.(old damage of	on trailer)B
WC (Unit#2 was approxima	ately 40' east of E131 St)	
Passenger of Unit#2 stated	l, the left back of trailer was bent.BWC	
At time of report, conflicting	statements and no independent witnesses. No	citations
were issued.		
	OFFICER'S SIGNATURE	BADGE NUMBER 037