OHIO DEPARTMENT TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER *				
☐ PHOTOS TAKEN	011.0	OCAL INFORMATION 480 w / N				[2 0 2 5 1 6 5 1						
SECONDARY CRASH OH-1P OTHER  Private Property			EPORTING AGENC	YNAME* LD HEIGH	TS	0   1	HIT/SKIP 1 - Solved 2 - Unsolved	NIIMRED OF IINITS	0 1 98 - ANIMAL 99 - UNKNOWN			
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*				J TIEIGITTS				CRASH DA	CRASH SEVERITY			
1 8 6	1 2- VILLAGE * 3- TOWNSHIP *	SARFIEL	D HTS					0630202	1 - FATAL 2 - SERIOUS INJURY SUSPECTED			
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST	LOCATION ROA	N ROAD NAME ROAD TYPE			I ATITUDE DECIMA	3 - MINOR INJURY SUSPECTED			
ROUTE TYPE	4 8 0 ROUTE NUMBER	PREFIX	4 - WEST 1 - NORTH		ROAD TYPE			4 1 4 1	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY			
REFERENCE		I I I I	2 - SOUTH 3 - EAST 4 - WEST	REFERENCE 22	NCE ROAD NAME (ROAD, MILEPOST, HOUSE #)			-   8   1   6   0				
REFERENCE POIN	REFERENCE POINT DIRECTION POLITE TYPE				ROA	ROAN TYPE			INTERSECTION RELATED			
1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	3 2 - SOUTH 3 - EAST		DERAL US ROUTE AV - AVENUE LA - LAN			ANE S MILEPOST S	D - ROAD Q - SQUARE T - STREET	☐ WITHIN INTERSE	1 1			
DISTANCE	4 - WEST  DISTANCE	CR - NUMBE	RED COUNTY ROLERED TOWNSHIP	ITE C	T - COURT PK - F R - DRIVE PI - PI	RCLE         OV - OVAL         TI           DURT         PK - PARKWAY         TI           RIVE         PI - PIKE         W		☐ WITHIN INTERCH.	NUMBER OF APPROACHES			
3   0   0	2 - Feet 3 - Yards	ROUTE	UTE HE - HEIGHTS PL - PLACE					ROADWAY  ROADWAY DIVIDED				
	OCATION AS EIDET HADMEIN E		T	MA	NNER OF CRASH COLLISIO	N/IMPACT		DIRECTION OF TRAVEL MEDIAN TYPE				
0 4 1- ON ROA 2- ON SHO 3- IN MEDI 4- ON ROA	DULDER 10 - DRIVEWAY IAN ACCESS	/ ALLEY	1 1 1	1 - NOT COLLISION BETWEEN TWO MOTOR	4 - REAR-TO-RE 5 - BACKING 6 - ANGLE	AR		4 1- NORTH	4 1 1- DIVID	ED FLUSH MEDIAN		
5 - ON GOF 6 - OUTSID TRAFFIO	RE CROSSING DE 12 - SHARED US CWAY OR TRAILS	SE PATHS		VEHICLES IN TRANSPORT 2 - REAR-END	7 - SIDESWIPE, 8 - SIDESWIPE,	OPPOSITE DIRECTION		3 - EAST 4 - WEST	2 - DIVID (≥4 FE 3 - DIVID	ED FLUSH MEDIAN ET) ED, DEPRESSED MEDIAN		
7 - ON RAN 8 - OFF RA		'H		3 - HEAD-ON	9 - OTHER / UNK	NOWN			(ANY	ED, RAISED MEDIAN TYPE) R/UNKNOWN		
WORK ZONE RELATED						CONTOUR	CONDITIONS	SURFACE				
LAW ENFORCEMENT 3 - WORK ON SHOULDER 2 - ADVANCE WAR PRESENT					ON AREA AREA		1 - STRAIGHT LEVEL	1 - DRY	1- CONCRETE			
4 - INTERMITTENT OR MOVING WORK 5 - TERMINATION AREA 5 - OTHER							2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW 4 - ICE	2 - BLACKTOP, BITUMINOUS, ASPHALT			
LIGHT CONDITION         WEATHER           1 - DAYLIGHT         1 - CLEAR         6 - SNOW						4 - CURVE GRADE 9 - OTHER /UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING)	3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT				
2 - CLOUDY 7 - SEVERE CROSSWINDS 3 - DARK - LIGHTED ROADWAY 2 - FOR, SMOR, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OF REEZING RORIZZLE								7 - SLUSH 9 - OTHER/UNKNOWN	9 - OTHER /UNKNOWN			
5 - DARK - UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN												
MARRATIVE  LINIT 04 WAS TRAVELING WESTROLING ON LASO (LINIX)									Indicate the north direction with			
UNIT 01 WAS TRAVELING WESTBOUND ON I-480 (UNKN  OWN LANE) NEAR MILE POST 22. UNIT 01 DROVE OFF  —												
THE ROADWAY AND STRUCK A GUARDRAIL. UNIT 01												
THEN TRAVELED ACROSS THE GRASS MEDIAN, DOWN												
AN EMBANKMENT AND STRUCK A TREE								*				
Interstate 480 Westbound												
Guard Raff								Unita				
Unit 0* Tree (Final Rest)  Diagram not									Diagram not to scale			
CRASH REPORTED DATE/TIME DISPATCH DATE/TIME ARRIVAL DATE/TIME   DISPATCH DATE/TIME						SCENE CLEARED DATE/TIME   0 6 3 0 2 0 2 5   0 9 0 5						
TOTAL TIME ROADWAY CLOSED	OFFICER'S NAME * CHECKED BY C				FFICER'S NAME*							
_	7 ME	MINUTES	J. PIETraszkiewicz  OFFICER'S BADGE NUMBER*					CHECKED BY OFFICER'S BADGE NUMBER*  SUPPLEMENT (CORRECTION.ADDITION IN ASSESSMENT OF THE PROPERTY OF THE PROPE				
	2 0	<sub>_</sub> 7 <sub>_</sub> 6 <sub>_</sub>						$\lfloor L \rfloor 0 \rfloor 7 \rfloor \parallel \parallel \parallel$				

ĺ	OH OF SAPET	TIO DEPARTMENT PUBLIC SAFETY UNIT						2,0,2,5,1	LOCAL REPORT NUMBER		
ı	UNIT#	(2 same)						DAMAGE DAMAGE SCALE			
E		WNER ADDRESS: STREET, CITY, STATE, ZIP ( Same As Driver)						1 - NONE 3 - FUNCTIONAL DAMAGE			
OW	13100 LITTLETON RD GARFIELD HEIGHT OH 44125  COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP							4 2 - MINOR DAMAGE	4 - DISABLING DAMAGE 9 - UNKNOWN		
ľ	COMMERCIAL CA	IRRIER: NAME, ADDRESS, CITT, STATE, ZIP		DAMAGED AREA(S)							
ī	LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION #						VEHICLE MAKE	INDICATE ALL THAT APPLY			
H	O   H   JTM8418   3   F   A   6   P   O   H   7   9   F   R   2   5   2			<u> </u>	2 2 0 1 5 Ford  VEHICLE COLOR VEHICLE MODEL			11 12	11 12 1		
L		J VERIFIED			GRY Fusion			10 2	2 10 11 1		
	☐ COMMERC	COMMERCIAL GOVERNMENT RESPONSE		US DOT #	Interstate			9 8 3	3 9 9 3 3		
	INTERLOCK		2 - 10,001 - 26K LBS.	HAZARDOUS MATI		IATERIAL CLASS# PLACARD ID#	8 7 6 5	8 7 6 5			
H	EQUIPPE	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED			IVERY VEHICLE) 2	3 - PEDESTRIAN/SKATER	10 /	12 12 2		
	2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 14 - SINGLE UNIT TR		14 - SINGLE UNIT TRUCK	19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)			9 (	9 3			
	4 - PICK UP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR  BICYCLE 16 - FARM EQUIPMEN			15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP			7.	- 1 1 1		
/EHICLE			(ATV / UTV)					11 12 1	7 6 5 11 12		
VEHI		# OF TRAILING UNITS						10 12	2 10 11 1 2		
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE 0 0 - NO AUTOMATION WHEN CRASH OCCURED? 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE					OMATION	- UNKNOWN	9 10 2 3	3 9 9 3 3		
	2 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTOMOMOUS MODE LEVEL 2 - PARTIAL AUTOMA			2 - FARTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - FULL AUTOMATION			8 7 5			
	0 1	1 - NONE   6 - BUS - CHARTERITOUR   11 - FIRE			16 - FARM 21 - MAIL CARRIER 17 - MOWING 99 - OTHER /UNKNOWN 18 - SNOW REMOVAL			7 6 5	7 6 5		
		4 - SCHOOL TRANSPORT 5 - BUS-TRANSIT/COMMUTER	9 - BUS - OTHER 14 - PUBLIC UTILITY 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT		19 - TOWING 20 - SAFETY SERVICE PATROL			12 12 12			
H	0 1	2 - BUS 4 - LOGGING 6 - CARGO VANENCLOSED BOX 7 - GRAIN/CHPS/GRAVEL  1 1 - TURN SIGNALS 4 - BRAVES 7 - WORN OR SLICK TIRES			8 - POLE 12 - CONCRETE MIXER 9 - CARGO TANK 13 - AUTO TRANSPORTER 10 - FLAT BED 14 - GARBAGEREFUSE 11 - DUMP 99 - OTHER / UNKNOWN  9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 10 - DISABLED FROM PRIOR		12 0 0				
	CARGO BODY			6 - CARGO VAN/ENCLOSED BOX			, ,	9 😅 3 9 🕶 3 9 🏶 3			
H	1 1 1			7 - WORN OR SLICK TIRES			9 - OTHER / UNKNOWN	6			
Ļ	VEHICLE DEFECTS	HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE		DEFECTIVE	ACCIDENT  9 - MEDIANICROSSING ISLAND  12 - FIRST RESPONDER				6 6 6		
		1 - INTERSECTION - 3 - INTERSECTION - OTHER 6 - BICYCLE LANE  MARKED 4 - MIDBLOCK - MARKED 7 - SHOULDERROADSIDE  CROSSWALK CROSSWALK 8 - SIDEWALK  8 - SIDEWALK		7 - SHOULDER/ROADSIDE	10 - DRIVEWAY ACCESS AT INCIDENT SCENE 11 - SHARED USE PATHS OR 99 - OTHER / UNKNOWN		- NO DAMAGE [0] - TOP [13]	☐ - UNDERCARRIAGE [14] ☐ - ALL AREAS [15]			
L	LOCATION AT IMPACT	- INTERSECTION - 5 - TRAVEL LANE-OTHER LOCATION UNMARKED 5 - CROSSWALK			TRAILS  13. NECOTIATING & CHRVE  18. APPROACHING		UN	NIT NOT AT SCENE [16]			
	2	1 - NON-CONTACT 2 - NON-COLLISION 0 1	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	14 - ENT	ERING OR CROSSING	OR LEAVING VEHICLE 19 - STANDING	l II	NITIAL POINT OF CONTACT		
		3 - STRIKING - 3 - CHANGING LANES 9 - LEAVING IRAPHIC LANE 4 - STRUCK PRE-CRASH 4 - OVERTAKING PASSING 10 - PARKED 110 - P			15 - WALKING, RUNNING, 21 - STANDING OUTSIE		20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE	1 2 0 - NO DAMAGE			
		5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS	16 - WORKING 17 - PUSHING VEHICLE		99 - OTHER / UNKNOWN	DIAGRAM 99 - UNKNOWN 13 - TOP			
									TRAFFIC		
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO	13 - IMPROPER START FROM A PARKED POSITION	18 - OPE	RATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL		
		3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	CLOSE/ACDA 9 - IMPROPER LANE CHANGING	14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	EQUIPMENT 23 - OPENING DOOR INTO  19 - LOAD SHIFTING/ ROADWAY FALLING/SPILLING CO. OTHER MADDOORS			1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN  2 - SIGNAL 5 - YIELD SIGN		
		6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING		99 - OTHER IMPROPER ACTION	2 - TWO-WAY	3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES	UTING					# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED			
ENT(S)	SEQUENCE OF	EVENTS						4 ,	2 - INVOLVED - ACTIVE CROSSING		
E		1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS  11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE 22 - WORK ZONE				3 - INVOLVED - PASSIVE CROSSING		
		2 - FIRE/EXPLOSION 3 - IMMERSION 4 - IACKKNIEE	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER		MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	U	NIT / NON-MOTORIST DIRECTION		
		4 - JACKNNIE   5 - CARGO / EQUIPMENT 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION  1 1 - LOSS OR SHIFT 10 - CROSS MEDIAN 14 - PEDESTRIAN		14 - PEDESTRIAN	20 - MOTOR VEHICLE IN ANYTHING SET IN TRANSPORT MOTION BY A MOTOR			1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
	15-PEDALCYCLE		19 - PEDALOYULE	21 - PARKED MOTOR VEHICLE VEHICLE  24 - OTHER MOVABLE OBJECT		FROM   3   TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST				
	3 4 5 COLLISION WITH FIXED OBJECT			COLLISION WITH FIXED OBJECT	T - STRUCK				4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN		
	4.4.8.	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	43 - CUF 44 - DITC 45 - EMB	H ANKMENT	60 -WORKZONE MAINTENANCE EQUIPMENT i1 - WALL	UNIT SPEED	DETECTED SPEED		
		STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR	45 - EMBANKMEN I 52 - E 46 - FENCE 53 - I 47 - MAILBOX 53 - I 48 - TDEE 54 - C		2 - BUILDING i3 - TUNNEL i4 - OTHER FIXED OBJECT	.7.0	1 4 074750#07844750 00550		
	الللا	28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	SUPPORT 42 - CULVERT			4 - OTHER FIXED OBJECT 19 - OTHER / UNKNOWN	7 0	1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR		
	6 <sub>   </sub>		A COMPANY OF THE PROPERTY OF T					POSTED SPEED	3 - UNDETERMINED		
								.6.0			
HSYR	2 304 OH1U 1/19 [	FIRST HARMFUL EVENT	4	OST HARMFUL EVENT				6   0	PAGE OF		

OHIO DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER					
SAPETY - SERVICE - PROTECTION	MOTORIST / N	OIN-IVIO I ORI	31			2	0 2 5	1 6	5 1			
NAME: LAS		DATE OF BIRTH AGE GENDER										
CHARON FIGUEROA LEISHA MARIE  ADDRESS: STREET, CITY, STATE, ZIP							0 7 1 4 1 9 8 4 4 4 0 F					
s 13100 LITT												
I INJURIES INJURED TAKEN BY	EMS AGENCY (MAME)  INJURED TAKEN TO: MEDICAL FACILITY (MAME, CITY)  SAFETY EQUIPMENT USED					DOT-comp	SEATING POSI	.	IR BAG USAGE	EJECTION	TRAPPED	
O 3 2 N OL STATE OPERATO	GHFD RICENSE NUMBER	Metro H	<u>'</u>	LIOCAL OF	EENSE DESCRIPTION	☐ MC HELMI	□ <u>0 1</u>		TATION NUMBER	_1	1	
M O	RATOR LICENSE NUMBER  OFFENSE CHARGED  331.34A  LOCAL CODE  ■ Failure to Cont											
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTI		CONDITION		OHOL TEST VALUE	STATUS		TEST(S)	SELECT UP TO 4	
s 4		9	ALCOHOL MA	RUUANA	1	1 1 1	1202	1 1	1 1			
M UNIT# NAME: LAS	T, FIRST, MIDDLE						DATE OF BIR	тн	·	AGE	GENDER	
T										LLL L		
ADDRESS: STREET, CITY, STATE	, ZIP					CONTA	CONTACT PHONE - INCLUDE AREA CODE					
S T I INJURIES INJURED TAKEN	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDI	ICAL FACILITY (NAME, CITY)	SAFETY EQUIP	MENT		SEATING POSIT	TION A	R BAG USAGE	EJECTION	TRAPPED	
N TAREN BY			, ,,,,,	USED		DOT-COMPL MC HELME		ılı			1	
OL STATE OPERATO	R LICENSE NUMBER	OFFENSE (	CHARGED	LOCAL OFF	FENSE DESCRIPTION			CI	TATION NUMBER			
T ENDORSEMENT												
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTE  ALCOHOL MAR	ED (	CONDITION	TATUS TYPE	VALUE	STATUS	DRUG TYPE	TEST(S) RESULT s	ELECT UP TO 4	
s			OTHER DRUG								لــالــالــ	
M UNIT# NAME: LAS	T, FIRST, MIDDLE						DATE OF BIR	TH	, and	AGE	GENDER	
										الللا		
ADDRESS: STREET, CITY, STATE  S	ZIP					CONTA	CT PHONE - INCLUDE AREA CODE	1	1 1	1 1	1 1	
INJURIES INJURED TAKEN	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQUIPM USED	ENT	207	SEATING POSIT	TION A	R BAG USAGE	EJECTION	TRAPPED	
				l		MC HELME		_		ш		
OL STATE OPERATOR	R LICENSE NUMBER	OFFENSE (	CHARGED	LOCAL OF CODE	FENSE DESCRIPTION			CI	TATION NUMBER			
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECTE	ED (	CONDITION	ALCO	DHOL TEST		DRUG	TEST(S)		
R SELECT UP TO 2		DISTRACTED BY	ALCOHOL MAR	RIJUANA	s	TATUS TYPE	VALUE	STATUS	TYPE		SELECT UP TO 4	
T L L			OTHER DRUG									
INJURIES  1 - FATAL	1 - FRONT - LEFT SIDE	1 - NOT DEPLOYED	1 - CLASS A	ASS	1 - ALCOHOL INTER	TRICTION(S) RLOCK	1 - NOT DISTRACTED	RACTION	1 - NONE GI	TEST STATU	JS	
2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B		DEVICE 2 - CDL INTRASTAT	TE ONLY	2 - MANUALLY OPERATING		2 - TEST RE	FUSED		
4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE		3 - CLASS C			LONE	ELECTRONIC COMMUN	NICATION				
5 - NO APPARENT INJURY	4 - SECOND - LEFT SIDE	3 - DEPLOYED SIDE  4 - DEPLOYED BOTH FRONT /	SIDE 4 - REGULAR CLASS (OI	HIO = D)	3 - CORRECTIVE LI 4 - FARM WAIVER		DEVICE (TEXTING, TYPING)		3 - TEST GIV	VEN, CONTAMINA / UNUSABLE	IIED	
	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE		SIDE 4 - REGULAR CLASS (OI 5 - M / C MOPED ONLY	HIO = D)		ENSES A BUS	DEVICE (TEXTING, TYPII DIALING) 3 - TALKING ON HANDS-FR	NG, REE	3 - TEST GIV SAMPLE 4 - TEST GIV	/ UNUSABLE VEN, RESULTS KN	NOWN	
	(MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT /		HIO = D)	4 - FARM WAIVER 5 - EXCEPT CLASS	ENSES A BUS	DEVICE (TEXTING, TYPII DIALING) 3 - TALKING ON HANDS-FI COMMUNICATION DEV 4 - TALKING ON HAND-HEI	ng, REE IICE LD	3 - TEST GIV SAMPLE 4 - TEST GIV	/ UNUSABLE	NOWN	
INJURED TAKEN BY  1 - NOT TRANSPORTED	(MOTORCYCLE PASSENGER)  5 - SECOND - MIDDLE  6 - SECOND - RIGHT SIDE	4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE	5 - M / C MOPED ONLY	HIO = D)	4 - FARM WAIVER 5 - EXCEPT CLASS 6 - EXCEPT CLASS & CLASS B BUS	ENSES A BUS A OR-TRAILER LICENSE	DEVICE (TEXTING, TYPII DIALING) 3 - TALKING ON HANDS-FI COMMUNICATION DEV 4 - TALKING ON HAND-HEI COMMUNICATION DEV 5 - OTHER ACTIVITY WITH	ng, REE IICE LD	3 - TEST GIV SAMPLE 4 - TEST GIV	/ UNUSABLE VEN, RESULTS KN	NOWN	
INJURED TAKEN BY  1 - NOT TRANSPORTED //TREATED AT SCENE 2 - EMS	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN EJECTION	5 - M / C MOPED ONLY 6 - NO VALID OL OL ENDOR		4 - FARM WAIVER 5 - EXCEPT CLASS 6 - EXCEPT CLASS & CLASS B BUS 7 - EXCEPT TRACT 8 - INTERMEDIATE	ENSES  A BUS  A COR-TRAILER LICENSE	DEVICE (TEXTING, TYPII DIALING) 3 - TALKING ON HANDS-FI COMMUNICATION DEV 4 - TALKING ON HAND-HEI COMMUNICATION DEV 5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE 6 - PASSENGER	NG, REE IICE LD IICE II AN	3 - TEST GI SAMPLE 4 - TEST GI 5 - TEST GI	/ UNUSABLE VEN, RESULTS KN	NOWN	
INJURED TAKEN BY  1 - NOT TRANSPORTED //TREATED AT SCENE 2 - EMS 3 - POLICE	(MOTORCYCLE PASSENGER)  5 - SECOND - MIDDLE  6 - SECOND - RIGHT SIDE  7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)  8 - THIRD - MIDDLE  9 - THIRD - RIGHT SIDE	4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	5 - M / C MOPED ONLY 6 - NO VALID OL		4 - FARM WAIVER 5 - EXCEPT CLASS 6 - EXCEPT CLASS & CLASS B BUS 7 - EXCEPT TRACT 8 - INTERMEDIATE RESTRICTIONS 9 - LEARNER'S PEF	ENSES  A BUS  A  OR-TRAILER  LICENSE	DEVICE (TEXTING, TYPII DIALING) 3 - TALKING ON HANDS-FI COMMUNICATION DEV 4 - TALKING ON HAND-HEI COMMUNICATION DEV 5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE	NG, REE IICE LD IICE II AN	3 - TEST GIV SAMPLE 4 - TEST GIV	/ UNUSABLE VEN, RESULTS KN VEN, RESULTS UN	NOWN	
INJURED TAKEN BY  1 - NOT TRANSPORTED //TREATED AT SCENE 2 - EMS 3 - POLICE	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN  EJECTION 1 - NOT EJECTED	5 - M / C MOPED ONLY 6 - NO VALID OL  OL ENDOR H - HAZMAT M - MOTORCYCLE P - PASSENGER		4 - FARM WAIVER 5 - EXCEPT CLASS 6 - EXCEPT CLASS 8 - CLASS B BUS 7 - EXCEPT TRACE 8 - INTERMEDIATE RESTRICTIONS 9 - LEARNER'S PEF RESTRICTIONS 10 - LIMITED TO DA	ENSES  A BUS  A TOR-TRAILER LICENSE  RMIT  S  S  YYLIGHT	DEVICE (TEXTING, TYPII DIALING) 3 - TALKING ON HANDS-FI COMMUNICATION DEV 4 - TALKING ON HAND-HEI COMMUNICATION DEV 5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION I	NG, REE ICE LD ICE H AN	3 - TEST GI SAMPLE 4 - TEST GI 5 - TEST GI 1 - NONE 2 - BLOOD 3 - URINE	/ UNUSABLE  VEN, RESULTS KI  VEN, RESULTS UI  ALCOHOL TEST	NOWN	
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## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20251651	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 06 D 30 Y 2025							
IN COUNTY OF 18	CRASH LOCATION IR 480 I480 w / MM 22								
Property owner owner for damaged guard rail:									
State of Ohio Donartment of	of Transportation (ODOT District 12)								
	of Transportation (ODOT District 12)								
5500 Transportation Blvd									
Garfield Heights, OH 44125	5								
(216) 581-2100									
	OFFICED'S SIGNATURE	DADCE NUMBER							
	OFFICER'S SIGNATURE	BADGE NUMBER							