OF PUBLIC SAFETY TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT							LOCAL REPORT NUMBER *				
PHOTOS TAKEN OH-2 OH-3 OH-3 COAL INFORMATION TURNEY RD REPORTING AGENCY NAME *						2 0 2 5 1 8 3 4 1 1 1 1					
☐ SECONDARY CRASH	OTHER	GARFIELD HEIGHTS				HIT/SKIP 1 - Solved 2 - Unsolved	0 2	0 1 98 - ANIMAL 99 - UNKNOWN			
	COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*							CRASH DATE/TIME* CRASH SEVERITY			
1 8 1	3 - TOWNSHIP *		LD HTS	LOCATIONS							
COCATION IN THE COLUMN IN THE	ROUTE TYPE					ATITUDE NORMAL PROSECTED 3- MINOR INJURY SUSPECTED 4- INJURY POSSIBLE 4- INJURY POSSI					
ROUTE TYPE	ROUTE NUMBER	PREFIX	2 - SOUTH REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)				LONGITUDE DECIMAL	DEGREES	5 - PROPERTY DAMAGE ONLY		
REF ERENCE		3-EAST 4-WEST ROCKSIDE R_D_					8 1 . 6 1				
2 - MILE POST			ROLITE TYPE			INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH WITHIN INTERCHANGE AREA NUMBER OF APPROACHES ROADWAY					
[1]0]	2 - Feet 3 - Yards						ROADWAY DIVIDED				
0 1 1 1 - ON ROAD 2 - ON SHOUL 3 - IN MEDIA 5 - ON GORE 6 - OUTSIDE TRAFFICI 7 - ON RAME 8 - OFF RAM	JLDER 10 - DRIVEWA N ACCESS SSIDE 11 - RAILWAY E CROSSIN E 12 - SHARED 1 WAY OR TRAIL D 13 - BIKE LAN	ER AY/ALLEY 'GRADE G USE PATHS LS IE OTH	6	1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON	MANNER or CRASH COLLISION/IMPACT 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	(<4 F 2 - DIVII (≥4 F 3 - DIVII 4 - DIVII (ANY	MEDIAN TYPE DED FLUSH MEDIAN EET) EDEP FLUSH MEDIAN EET) EED, DEPRESSED MEDIAN DED, DAISEE MEDIAN TYPE) TYPE) ER / UNINNOWN		
WORK ZONE RELATED WORKERS PRESENT LAW ENFORCEMENT PRESENT ACTIVE SCHOOL ZONE	2- 3. 4- 5-	WORK ZI - LANE CLOSURE - LANE SHIFT/CROS - WORK ON SHOUL OR MEDIAN - INTERMITTENT OF	LDER		LOCATION OF CRASH IN WO 1. BEFORE THE IST YOU WARNING SIGN 2. ADVANCE WARNING 3. 3. TRANSITION AREA 4. ACTIVITY AREA 5. TERMINATION AREA	RK ZONE	CONTOUR 1. STRAIGHT LEVEL 2- STRAIGHT GRADE 3. CURVE LEVEL 4- CURVE GRADE	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT,	SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK		
LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DIJSK 3 - DARK - LIGHTED POADWAY 4 - DARK - PRADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN WEATHER 1 - CLEAR 2 - CLOUDY 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL DIRT, SNOW 8 - BLOWING SAND, SOIL DIRT, SNOW 9 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN					9 - OTHER /UNKNOWN	OIL, GRAVEL 6- WATER (STANDING, MOVING) 7- SLUSH 9- OTHERUNKNOWN	4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER /UNKNOWN				
NARRATIVE : : : : : : : : : : : : : : : : : : :								Indicate the north			
UNIT # 2 ATTEMPTED TO MAKE A LEFT HAND TURN ONTO ROCKSIDE RD FROM TURNEY RD AND WAS —											
		WITOR	NEY RUAI	ND WAS							
STRUCK BY UNIT # 1.						N					
ROCKSIDE RD (E/B)											
Not To Scale											
CRASH REPORTED DATE/TIME DISPATCH DATE/TIME ARRIVAL DATE/TIME SCENE CLEARED DATE/TIME REPORT TAKEN BY											
10 7 1 8 2 0 2 5 1 9 3 8 10 7 1 8 2 0 2 5 1 9 3 8 10 7 1 8 2 0 2 5 1 9 4 4						0 7 1 8 2 0 2	2 5 2 0 3 0	POLICE AGENCY MOTORIST			
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTE		е	PEDIS DADOE NUMBERS	R. Jarze	embak	mbak Supplement			
2 0	2 0	7 2	OFFICER'S BADGE NUMBER* 0 1 0			CHECKED BY OFFICER'S BADGE NUMBER* [L 1 6					

	SAPETY - SERVICE	ARTMENT UNIT						2,0,2,5,1	LOCAL REPORT NUMBER		
UNIT# OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) OWNER PHONE: INCLUDE AREA CODE (Same As Driver)							DAMAGE DAMAGE SCALE				
							1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE			
	5 14616 SUMMITAVE MAPLE HEIGHTS OH 44137 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE										
									DAMAGED AREA(S)		
_	LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE							12	INDICATE ALL THAT APPLY		
	INSURANCE VERIFIED	INSURANCE COMPANY		INSURANCE POLICY#		VEHICLE COLOR	VEHICLE MODEL	10	11 12 1		
	VERIFIED	STATEFAR TYPE OF USE		4150654-SFP-3		BLK BY: COMPANY NAME	Sportage	9 10 2	3 9 9 3		
	COMMERCIAL	GOVERNMENT	IN EMERGENCY RESPONSE #OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	INT	ERSTATE HAZARDOUS M	ATERIAL	8 7 5	8 4 7 5 4		
	INTERLOCK DEVICE EQUIPPED	☐ HIT/SKIP UNIT	0 1	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		MATERIAL RELEASED PLACARD	CLASS# PLACARD ID#	7 6 5	11 12 7 6 5		
0	2 - PASS	SENGER VAN (MINIVAN) RT UTILITY VEHICLE	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	13 - SNOWMOBILE 19 - BUS (16 - PASSENGERS) 24 - WHEELCHAIR (14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON- M 15 - SEMLITEACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE			9 9 3 3				
UNI	IIT TYPE 5 - CARO		BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	16 - FARM EQUIPMENT 17 - MOTORHOME			7 - TRAIN 9 - UNKNOWN OR HIT/SKIP	8	* * * * * * * * * * * * * * * * * * * *		
VEHICLE	# of TR	RAILING UNITS	,,					11 12 1	7 6 5 11 12		
		CHICLE OPERATING IN AUTONON	TOUS MODE 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE		DITIONAL 9	- UNKNOWN	10 1 1 2	10 11 1 2		
	2 1- YES	2 - NO 9 - OTHER / UNKNOW	mode certic	2 - PARTIAL AUTOMATION	4 - HIGH 5 - FULL	AUTOMATION AUTOMATION		8 7 5	5 5 4 7 5 4		
	4 - SCHO	TRONIC RIDE SHARING OL TRANSPORT RANSIT/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	19 - TOV	NING S DW REMOVAL	21 - MAIL CARRIER 19 - OTHER /UNKNOWN	7 6 5	12 12 12		
CAR	CARGO BODY TYPE CARGO BODY TYPE 1-NO CARGO BODY TYPE 1/NOT APPLICABLE 1-LOGGING 1-LOGGING 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 4 - LOGGING 6 - CARGO VANIENCLOSED BOX 7 - GRAIN/CHPS/GRAVEL		CHASSIS 6 - CARGO VAN/ENCLOSED BOX	8 - POLE 12 - CONCRETE MIXER 9 - CARGO TANK 13 - AUTO TRANSPORTER 10 - FLAT BED 14 - GARBAGE/REFUSE 11 - DUMP 99 - OTHER / UNNOWN		9 12 3	9 2 3 9 3 3				
	HICLE 1 - TURN: 2 - HEAD 3 - TAIL LI	LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISA	OR TROUBLE 99 ABLED FROM PRIOR IDENT	9 - OTHER / UNKNOWN	6			
	1 - INTERS MARKE CROSS	ED	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE	10 - DRI\	/EWAY ACCESS	2 - FIRST RESPONDER AT INCIDENT SCENE 19 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	- UNDERCARRIAGE [14]		
LOCA	ATION AT UNMAF	SECTION - RKED	CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	8 - SIDEWALK	11 - SHA TRA	RED USE PATHS UK	o on Exponential		- ALL AREAS [15] NIT NOT AT SCENE [16]		
	1 - NON-C 2 - NON-C		1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	14 - ENT	ERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	I	NITIAL POINT OF CONTACT		
	3 - STRIKI 4 - STRUC 2TION 5 - BOTH:	ACTION	2 - BACKING 3 - CHANGING LANES 4 - OVERTAKINGIPASSING 5 - MAKING RIGHT TURN	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED	15 - WAL		20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE	1 2 0- NO DAMAGI			
	& STRI		6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS	16 - WOR	RKING HING VEHICLE	99 - OTHER / UNKNOWN	DIAGRAM 13 - TOP			
									TRAFFIC		
	1 - NONE 2 - FAILUR 3 - RAN RI	RE TO YIELD ED LIGHT	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/ACDA	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED	18 - OPE	RATING DEFECTIVE 2	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN		
₁ 0	4 - RAN ST	TOP SIGN E SPEED	9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	FALI	D SHIFTING/	ROADWAY 9 - OTHER IMPROPER	1 - ONE-WAY 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
	RIBUTING MSTANCES		11 - DROVE OFF ROAD 12 - IMPROPER BACKING				ACTION	# OF THROUGH LANES ON ROAD	3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING		
								JA KONU	1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING		
EVENT(S)	JENCE OF EVENTS	5		EVENTS				4	3 - INVOLVED - PASSIVE CROSSING		
1 2	1 - OVERT	XPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	17 - ANIN	IAL - FARM IAL - DEFR	22 - WORK ZONE MAINTENANCE EQUIPMENT	l	NIT / NON-MOTORIST DIRECTION		
2.	4 - JACKKI 5 - CARGO	NIFE D/EQUIPMENT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN	19 - ANIN 20 - MOT	IAL - OTHER OR VEHICLE IN NSPORT	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST		
	10080		STOCO MEDINI	15 - PEDALCYCLE		KED MOTOR VEHICLE	VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 1 TO	3-EAST 7-SOUTHEAST		
3				COLLISION WITH FIXED OBJECT				. 10	4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN		
4	/ CRAS	SH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	43 - CUR 44 - DITC 45 - EMB	H ANKMENT 5	0 -WORKZONE MAINTENANCE EQUIPMENT 1 - WALL	UNIT SPEED	DETECTED SPEED		
	STRUG 27 - BRIDG	CTURE GE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR	46 - FENO 47 - MAIL	DE 5 BOX	2 - BUILDING 3 - TUNNEL 4 - OTHER FIXED OBJECT	. 0	3 1-STATED/ESTIMATED SPEED		
5	29 - BRIDG	GE RAIL	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	SUPPORT 42 - CULVERT	48 - TREE 49 - FIRE		9 - OTHER / UNKNOWN	<u> </u>	2 - CALCULATED / EDR		
6								POSTED SPEED	3 - UNDETERMINED		
	1	LUADMEIN EVENT	, 1 ,	IOST HARMFUL EVENT				0 2			
HSY8304 OF	FIRST 0H1U 1/19 [760-0820	T HARMFUL EVENT	N	IOSI HAKWIFUL EVENİ					PAGE OF		

OHIO DEPARTMENT UNIT		R PHONE: INCLUDE AREA CODE		2,0,2,5,1,	LOCAL REPORT NUMBER 8 3 4		
UNIT# OWNER NAME: LAST, FIRST, MIDDLE (■ Sam	DAMAGE DAMAGE SCALE						
OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Di		1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE				
S 2386 SPRINGRUN CT DECATUR GA 30032 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE							
	DAMAGED AREA(S)						
LP STATE LICENSE PLATE # VI	VEHICLE MAKE Honda	12	INDICATE ALL THAT APPLY				
INSURANCE COMPANY	INSURANCE POLICY#	VEHICLE COLOR	VEHICLE MODEL	10 12 1	10 1		
TYPE OF USE	0328510 us dot# Tow	SIL ED BY: COMPANY NAME	GL1100/GOLE	10 2			
COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE # OCCUPANTS	VEHICLE WEIGHT GWWR/GCWR	RIVATE TOW HAZARDOUS MATE	PΙΔΙ	7	8 0 4		
INTERLOCK DEVICE HIT/SKIP UNIT EQUIPPED HIT/SKIP UNIT	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	MATERIAL RELEASED	CLASS# PLACARD ID#	7 6 5	11 12 7 6 5		
1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE	13 - SNOWMOBILE 19 - BUS 14 - SINGLE UNIT TRUCK 20 - OTHI	(16+ PASSENGERS) 24-W ER VEHICLE 25-0	EDESTRIAN/SKATER HEELCHAIR (ANY TYPE) THER NON- MOTORIST ICYCLE	10 11 1 2 2 3 3			
4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE BICYCLE SCARGO VAN 6 - VAN (9-15 SEATS) 11 - ALL TERRAIN VEHICLE	15 - SEMI-TRACTOR 21 - TIECN' LEGUMENT 27 - TRAIN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER or 27 - TRAIN 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP			7.	\$ 10 4 7 6 5		
(ATV/UTV)				11 12	7 6 5 11 12 1		
# of TRAILING UNITS				10 12 1	10 12 1		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS MODE LEVEL	WHEN CRASH OCCURED? 1 - DRIVER ASSISTANCE AUTOMATION 2 - PARTIAL AUTOMATION 4 - HIGH AUTOMATION 5 - FILL AUTOMATION 5 - FILL AUTOMATION 5 - FILL AUTOMATION 5 - FILL AUTOMATION						
1 - NONE	12 - MILITARY 17 - II 13 - POLICE 18 - S 14 - PUBLIC UTILITY 19 - T		IAIL CARRIER ITHER /UNKNOWN	7 6 5	12 12 12		
O 1 1 1-NO CARGO BODY TYPE 3-VEHICLE TOWING ANOTHER MOTOR VEHICLE CARGO BODY TYPE 4-LOGGING 4-LOGGING	CHASSIS 9 - 0 6 - CARGO VAN/ENCLOSED BOX 10 -	8 - POLE 12 - CONCRETE MIXER 9 - CARGO TANK 13 - AUTO TRANSPORTIER 10 - FLAT BED 14 - GARBAGEREFUSE 11 - DUMP 99 - OTHER / UNKNOWN		9 3 9	3 9 3 3		
1. TURN SIGNALS	8 - TRAILER EQUIPMENT 10 - E	NOTOR TROUBLE 99 - OT DISABLED FROM PRIOR CCIDENT	HER / UNKNOWN	6	6 6		
1 - INTERSECTION - 3 - INTERSECTION - OTHER MARKED 4 - MIDBLOCK - MARKED CROSSWALK CROSSWALK	7 - SHOULDER/ROADSIDE 10 - E	DRIVEWAY ACCESS A	RST RESPONDER T INCIDENT SCENE THER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	- UNDERCARRIAGE [14] - ALL AREAS [15]		
NON-MOTORIST 2-INTERSECTION- LOCATION AT UNMARKED 5-TRAVEL LANE-OTHER LOCATION UNMARKED MPACT CROSSWALK		SHARED USE PATHS OR 99 - 0 'RAILS			NOT AT SCENE [16]		
1 - NON-CONTACT 1 - STRAIGHT AHEAD 2 - NON-COLLISION 0 6 2 - BACKING	8 - ENTERING TRAFFIC LANE 14 - E	ENTERING OR CROSSING 19-5	APPROACHING OR LEAVING VEHICLE STANDING	INIT	TIAL POINT OF CONTACT		
4 - STRIKING 2 - 3 - CHANGING LANES PRE-CRASH 4 - OVERTAKING/PASSING	10 - PARKED 15 - V	WALKING, RUNNING, 21 - 8	OTHER NON-MOTORIST STANDING OUTSIDE DISABLED VEHICLE	1 2 0- NO DAMAGE	14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE		
ACTION 5 - BOTH STRIKING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 9 - OTHER / UNKNOWN	IN TRAFFIC 16 - V		OTHER / UNKNOWN	DIAGRAM 13 - TOP	99 - UNKNOWN		
					TRAFFIC		
1 - NONE 7 - LEFT OF CENTER 2 - FAILURE TO YIELD 8 - FOLLOWING TOO	A PARKED POSITION 18 - 0	OPERATING DEFECTIVE 22 - N	YING IN ROADWAY OT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL 1-ROUNDABOUT 4-STOP SIGN		
3 - RAN RED LIGHT CLOSEACOA 4 - RAN STOP SIGN 9 - IMPROPER LANE CHANGING 10 - 11 5 - UNSAFE SPEED 10 - IMPROPER PASSING	ILLEGALLY 19 - L 15 - SWERVING TO AVOID F	OAD SHIFTING/ R FALLING/SPILLING 99 - O	PENING DOOR INTO OADWAY THER IMPROPER	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN		
6 - IMPROPER TURN 10 - IMPROPER FOAD CONTRIBUTING 12 - IMPROPER BACKING	16 - WRONG WAY 20 - II		CTION	# OF THROUGH LANES	3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING		
CIRCUMSTANCES				ON ROAD	1 - NOT INVOLVED		
SEQUENCE OF EVENTS	EVENTS			4	1 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING		
1 - OVERTURNROLLOVER 6 - EQUIPMENT FAILURE 1	11 - CROSS CENTERLINE - 16 - R OPPOSITE DIRECTION OF 17 - A	NIMAL - FARM M	ORK ZONE AINTENANCE				
3 - IMMERSION UNITS 4 - JACKKNIFE 8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY 19 - A	INIMAL - DEER UNIMAL - OTHER SI	QUIPMENT TRUCK BY FALLING, HIFTING CARGO OR	UNIT	T / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST		
5 - CARGO / EQUIPMENT 9 - RAN OFF ROAD LEFT LOSS OR SHIFT 10 - CROSS MEDIAN	14 - PEDESTRIAN TI	RANSPORT M PARKED MOTOR VEHICLE V	NYTHING SET IN OTION BY A MOTOR EHICLE		2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST		
3	COLLISION WITH FIXED OBJECT - STRUC	0	THER MOVABLE BJECT	FROM 2 TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST		
25 - IMPACT ATTENUATOR 31 - GUARDRAIL END	37 - TRAFFIC SIGN POST 43 - C	CURB 50 -W	ORKZONE MAINTENANCE JUIPMENT		9 - OTHER / UNKNOWN		
4 / CRASH CUSHION 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER STRUCTURE 34 - MEDIAN GUARDRAIL	38 - OVERHEAD SIGN POST 44 - DI 39 - LIGHT/LUMINARIES SUPPORT 45 - EI 40 - UTILITY POLE 46 - FI	MBANKMENT 51 - W FNCF 52 - BI	ALL JILDING	UNIT SPEED	DETECTED SPEED		
27 - BRIDGE PIER OR ABUTMENT BARRIER 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 39 - BRIDGE RAIL BARRIER 40 - BRIDGE RAIL BARRIER	41 - OTHER POST, POLE OR 47 - M SUPPORT 48 - TI		JNNEL THER FIXED OBJECT THER / UNKNOWN	1 0	1 - STATED/ESTIMATED SPEED		
30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER			-	POSTED SPEED	2 - CALCULATED / EDR 3 - UNDETERMINED		
°							
1 FIRST HARMFUL EVENT 1 M	OST HARMFUL EVENT			2 5	PAGE OF		

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST					LOCAL REPORT NUMBER				
OF PUBLIC SAFETY SAPETY - SERVICE - PROTECTION	MOTORIST / NO	JN-MOTORIS)			2 0 2 5	1 8 3	4	
M UNIT # NAME: LAST, F	IRST, MIDDLE					-			GENDER
LINCOLN DERRICKA RICKY						0 5 2 6 1 9 9 4 3 1 M			
R ADDRESS: STREET, CITY, STATE, ZI			D. E. LIEIGUITO	011 444	\ _	CONTACT PHONE - INCLUDE AREA CODE			
14010 COMM	/IIT AVE EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICA	APLE HEIGHTS AL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	37	SEATING POS	TION AIR BAG U	ISAGE EJECTION	TRAPPED
5 1				USED O		DOT-COMPLIANT MC HELMET 0			1 1
	ICENSE NUMBER	OFFENSE CH	IARGED		DESCRIPTION		CITATION	NUMBER	
м 0 т		313.01	1	© OTC	CD		G202	51470	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTED		ITION STATUS	ALCOHOL TEST TYPE VALUE	STATUS T	DRUG TEST(S) YPE RESULT S	ELECT UP TO 4
s 4			ALCOHOL MARU OTHER DRUG	JUANA 1	1	1	1 1 1		II II
M UNIT# NAME: LAST, F	IRST, MIDDLE		Ц			DATE OF BIR	тн	AGE	GENDER
0 0 2 ADA									M
R ADDRESS: STREET, CITY, STATE, ZI		1121111				CONTACT PHONE - INCLUDE AREA CODE			
	NGRUN CT			GA 3003	32				
INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICA		SAFETY EQUIPMENT USED		DOT-COMPLIANT MC HELMET			TRAPPED
N	GARFIELD HEIGHT:	S MARY M OFFENSE CH			DESCRIPTION	MC HELMET 0	CITATION N	UMBER 1	1
M O	ICENSE NUMBER	OFFERSE OF	ANGED	CODE	DESCRIPTION		CHARION	NOMBER	
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECTED) CONDI	TION	ALCOHOL TEST		DRUG TEST(S)	
R SELECT UP TO 2		DISTRACTED BY	ALCOHOL MARUI		STATUS 4	TYPE VALUE		PE RESULT SE	LECT UP TO 4
s M M			OTHER DRUG	1		<u> </u>	_11		
M UNIT # NAME: LAST, F	IRST, MIDDLE					DATE OF BIR	тн	AGE	GENDER
T									
R ADDRESS: STREET, CITY, STATE, ZI S	P					CONTACT PHONE - INCLUDE AREA CODE	1 1		
INJURIES INJURED TAKEN	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICA	AL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED		SEATING POSI	TION AIR BAG U	SAGE EJECTION	TRAPPED
N BY				USED		DOT-COMPLIANT MC HELMET			ı
- OL STATE OPERATOR L	ICENSE NUMBER	OFFENSE CH	ARGED	LOCAL OFFENSE	DESCRIPTION		CITATION	IUMBER	
0 T				CODE					
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTED		TION STATUS	ALCOHOL TEST TYPE VALUE	STATUS T	DRUG TEST(S) YPE RESULT SE	ELECT UP TO 4
1 S			ALCOHOL MARUI OTHER DRUG	IUANA					
INJURIES	SEATING POSITION	AIR BAG	OL CLA	ss	OL RESTRICTION	(S) DRIVER DIST	RACTION	TEST STATU	\$
1 - FATAL	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	1 - CLASS A		ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED		I - NONE GIVEN	
2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B	2 -	CDL INTRASTATE ONLY	2 - MANUALLY OPERATIN ELECTRONIC COMMUN	IICATION	2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINAT	ren
4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SI	3 - CLASS C IDE 4 - REGULAR CLASS (OHIO		CORRECTIVE LENSES FARM WAIVER	DEVICE (TEXTING, TYPI DIALING)		SAMPLE / UNUSABLE	ieu
5 - NO APPARENT INJURY	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M / C MOPED ONLY	5-	EXCEPT CLASS A BUS EXCEPT CLASS A	3 - TALKING ON HANDS-F	REF 4		OWN
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL					4 - TEST GIVEN, RESULTS KN	
INJURED TAKEN BY			6 - NO VALID OL		& CLASS B BUS	COMMUNICATION DEV 4 - TALKING ON HAND-HE	ICE 5	4 - TEST GIVEN, RESULTS KN 5 - TEST GIVEN, RESULTS UN	KNOWN
1 - NOT TRANSPORTED	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		6 - NO VALID OL	7 -		4 - TALKING ON HAND-HE COMMUNICATION DEV	ICE 5		KNOWN
1 - NOT TRANSPORTED /TREATED AT SCENE	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE			7-8-	& CLASS B BUS EXCEPT TRACTOR-TRAIL INTERMEDIATE LICENSE RESTRICTIONS	4 - TALKING ON HAND-HE	ICE 5	5 - TEST GIVEN, RESULTS UN	
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OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20251834	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 07 D 18 Y 2025							
IN COUNTY OF 18	CRASH LOCATION TURNEY RD	W 07 15 10 1 2020							
After further investigation and reviewing the city camera footage that is located at the									
intersection of Turney Rd and Rockside Rd.									
It was observed that, Unit # 2 had the green arrow to make a left hand turn from									
Turney Rd (north) onto Rockside Rd (west) approaching the signal light at the									
intersection. While Unit # 2	2 attempting to turn left, Unit # 1 continued to t	ravel s/b on							
Turney Rd approaching the	intersection and struck Unit # 2. Causing dis	abling							
damage to Unit # 2 (motorc	cycle) and the driver (Mr. Adams) having to be	e transported							
to Mary Mount Hospital for	a severe left-leg injury. The driver of Unit # 1	(Mr. Lincoln)							
was issued a citation and s	ummons to appear in the Garfield Heights May	yor's Court on							
Wednesday, July 30, 2025, at 0830 hrs.									
OFFICER'S SIGNATURE BADGE NUMBER 010									