

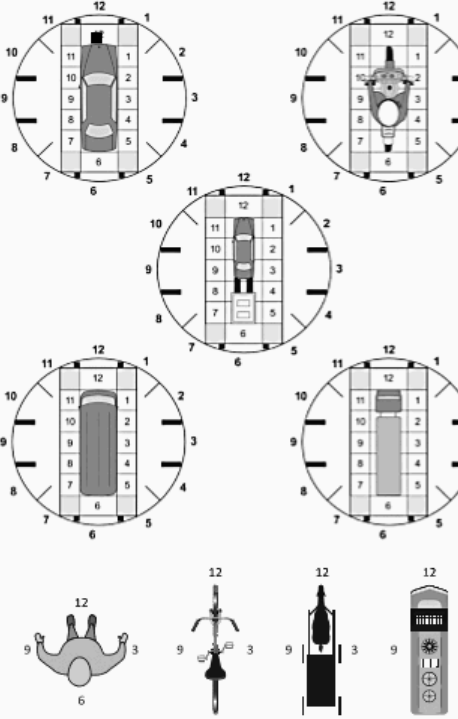
TRAFFIC CRASH REPORT

*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		20251959		HITSKIP 1 - Solved 2 - Unsolved 1		NUMBER OF LISTS 02		UNIT IN EDDP 98 - ANIMAL 99 - UNKNOWN 01	
COUNTY * 18		LOCALITY * 1		LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS		CRASH DATE/TIME * 07312025 0844				CRASH SEVERITY 5 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY			
ROUTE TYPE 1		ROUTE NUMBER 1		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME Turney		ROAD TYPE RD		LATITUDE DECIMAL DEGREES 41.424414		INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA 4 NUMBER OF APPROACHES	
ROUTE TYPE 1		ROUTE NUMBER 1		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Rockside		ROAD TYPE RD		LONGITUDE DECIMAL DEGREES 81.612719			
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 1		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		RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY		ROADWAY <input type="checkbox"/> ROADWAY DIVIDED	
DISTANCE EDP#1 DECIMAL MILE 01		DISTANCE 1 - MILE 2 - FEET 3 - YARDS		MANNER OF CRASH COLLISION/IMPACT 2 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 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		MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (24 FEET) 3 - DIVIDED, DEPRESSION MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN					
<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 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER / UNKNOWN		CONDITIONS 2 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN		SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER / UNKNOWN			
LIGHT CONDITION 1 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN		WEATHER 3 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN or FREEZING DRIZZLE 99 - OTHER / UNKNOWN		NARRATIVE UNIT#1 WAS TRAVELING NORTH ON TURNEY RD IN THE MIDDLE LANE NEAR ROCKSIDE RD. DIRECTLY BEHIND UNIT#2. UNIT#2 WAS STOPPED FOR TRAFFIC/SIGNAL. AS A RESULT, THE FRONT OF UNIT#1 COLLIDED WITH THE BACK OF UNIT#2. BOTH UNITS WERE MOVED FROM FINAL REST. UNIT#1 LEFT THE SCENE AND UNIT #2 WAS IN A PARKING LOT UPON ARRIVAL. BWC NOTE: SEE OH-2		Diagram showing the crash location at the intersection of Rockside Rd and Turney Rd. Unit 1 is shown colliding with Unit 2. A compass rose indicates North.							
CRASH REPORTED DATE/TIME 07312025 0844		DISPATCH DATE/TIME 07312025 0847		ARRIVAL DATE/TIME 07312025 0855		SCENE CLEARED DATE/TIME 07312025 0915		REPORT TAKEN BY POLICE AGENCY MOTORIST					
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 45		TOTAL MINUTES 73		OFFICER'S NAME * R. Cramer		CHECKED BY OFFICER'S NAME * M. Berdysz		SUPPLEMENT (CORRECTION = ADDITION DO NOT WRITE IN THESE SPACES)			
OFFICER'S BADGE NUMBER * 037		CHECKED BY OFFICER'S BADGE NUMBER * L14											

OWNER	UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) TISDEL JERMALE LAMAR	OWNER PHONE: INCLUDE AREA CODE (Same As Driver)			
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver) 3743 E 144TH ST LOWR CLEVELAND OH 44120					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE				
VEHICLE	LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION # 1HGCR2F34EA132018	VEHICLE YEAR 2014	VEHICLE MAKE Honda	
	INSURANCE VERIFIED	INSURANCE COMPANY Allstate	INSURANCE POLICY # 969470236	VEHICLE COLOR BLK	VEHICLE MODEL Other/Unknow	
	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	VEHICLE WEIGHT GVWR/GVWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		
			HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD CLASS # PLACARD ID #			
	UNIT TYPE 01		1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST 4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP			
	# of TRAILING UNITS					
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION			
	SPECIAL FUNCTION 0		1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER/UNKNOWN 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL			
	CARGO BODY TYPE 0		1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER 7 - GRAIN/CHIPS/GRAVEL 10 - FLAT BED 11 - DUMP 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN			
VEHICLE DEFECTS 0		1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 2 - HEAD LAMPS 6 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT 3 - TAIL LAMPS 6 - TIRE BLOWOUT 12 - IMPROPER BACKING				
EVENT(S)	NON-MOTORIST LOCATION AT IMPACT 3		ACTION 01			
	1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER/ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN 5 - TRAVEL LANE-OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS		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			
	CONTRIBUTING CIRCUMSTANCES 08		SEQUENCE OF EVENTS			
	1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE/JACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNABLE 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGING 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/ FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY 4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 12 - IMPROPER BACKING		1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 25 - OTHER FIXED OBJECT 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT 99 - OTHER / UNKNOWN			
	COLLISION WITH FIXED OBJECT - STRUCK		25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORKZONE MAINTENANCE EQUIPMENT 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT/LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING 28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL 29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 49 - FIRE HYDRANT 99 - OTHER / UNKNOWN			
	FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1			

LOCAL REPORT NUMBER 20251959	
DAMAGE DAMAGE SCALE 2 1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
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 12 0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
TRAFFIC TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY TRAFFIC CONTROL 2 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
# OF THROUGH LANES ON ROAD 5 RAIL GRADE CROSSING 1 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING	
UNIT / NON-MOTORIST DIRECTION FROM 2 TO 1 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED 35	DETECTED SPEED 3 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

UNIT # 02	OWNER NAME: LAST, FIRST, MIDDLE WOODSON PAMELA A	OWNER PHONE: INCLUDE AREA CODE () Same As Driver
OWNER ADDRESS: STREET, CITY, STATE, ZIP 15309 TURNEY RD MAPLE HEIGHTS OH 44137		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		
LP STATE OH	LICENSE PLATE # KFS9571	VEHICLE IDENTIFICATION # JF2GUADC4R8306423
INSURANCE VERIFIED	INSURANCE COMPANY State Farm	INSURANCE POLICY # 1819281sfp35
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	US DOT #	VEHICLE YEAR 2024
INTERLOCK DEVICE EQUIPPED	HIT/SKIP UNIT <input type="checkbox"/>	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD
VEHICLE MAKE Subaru	VEHICLE COLOR WHI	VEHICLE MODEL Crosstrek
UNIT TYPE 03	# of TRAILING UNITS	
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		
SPECIAL FUNCTION 01		
CARGO BODY TYPE 01		
VEHICLE DEFECTS		
NON-MOTORIST LOCATION AT IMPACT 4		
ACTION 4		
CONTRIBUTING CIRCUMSTANCES		
SEQUENCE OF EVENTS		
EVENTS		
COLLISION WITH FIXED OBJECT - STRUCK		
FIRST HARMFUL EVENT 1		
MOST HARMFUL EVENT 1		

LOCAL REPORT NUMBER 20251959
DAMAGE DAMAGE SCALE 2
DAMAGED AREA(S) INDICATE ALL THAT APPLY
INITIAL POINT OF CONTACT 06
TRAFFIC TRAFFICWAY FLOW 2
TRAFFIC CONTROL 2
OF THROUGH LANES ON ROAD 5
RAIL GRADE CROSSING 1
UNIT / NON-MOTORIST DIRECTION FROM 2 TO 1
UNIT SPEED 0
POSTED SPEED 35
DETECTED SPEED 1



MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER

20251959

MOTORIST / NON-MOTORIST

UNIT #
01

NAME: LAST, FIRST, MIDDLE
TISDEL JERMALE LAMAR

DATE OF BIRTH
05242005

AGE
20

GENDER
M

ADDRESS: STREET, CITY, STATE, ZIP
3743 E 144TH ST LOWR CLEVELAND OH 44120

CONTACT PHONE - INCLUDE AREA CODE

INJURIES
5

INJURED TAKEN BY

EMS AGENCY (NAME)

INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)

SAFETY EQUIPMENT USED
99

☐ DOT-COMPLIANT MC HELMET

SEATING POSITION
01

AIR BAG USAGE
9

EJECTION
1

TRAPPED
1

OL STATE

OPERATOR LICENSE NUMBER

OFFENSE CHARGED
333.03

LOCAL CODE
■

OFFENSE DESCRIPTION
ACDA

CITATION NUMBER
G20251561

OL CLASS
4

ENDORSEMENT SELECT UP TO 2

RESTRICTION SELECT UP TO 3

DRIVER DISTRACTED BY
9

ALCOHOL / DRUG SUSPECTED
☐ ALCOHOL
☐ MARIJUANA
☐ OTHER DRUG

CONDITION
9

STATUS
1

ALCOHOL TEST
TYPE
1
VALUE

STATUS
1

TYPE
1

RESULT SELECT UP TO 4

MOTORIST / NON-MOTORIST

UNIT #
02

NAME: LAST, FIRST, MIDDLE
WOODSON PAMELA A

DATE OF BIRTH
10031969

AGE
55

GENDER
F

ADDRESS: STREET, CITY, STATE, ZIP
15309 TURNEY RD MAPLE HEIGHTS OH 44137

CONTACT PHONE - INCLUDE AREA CODE

INJURIES
5

INJURED TAKEN BY

EMS AGENCY (NAME)

INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)

SAFETY EQUIPMENT USED
04

☐ DOT-COMPLIANT MC HELMET

SEATING POSITION
01

AIR BAG USAGE
1

EJECTION
1

TRAPPED
1

OL STATE

OPERATOR LICENSE NUMBER

OFFENSE CHARGED

LOCAL CODE
☐

OFFENSE DESCRIPTION

CITATION NUMBER

OL CLASS
4

ENDORSEMENT SELECT UP TO 2

RESTRICTION SELECT UP TO 3

DRIVER DISTRACTED BY
1

ALCOHOL / DRUG SUSPECTED
☐ ALCOHOL
☐ MARIJUANA
☐ OTHER DRUG

CONDITION
1

STATUS
1

ALCOHOL TEST
TYPE
1
VALUE

STATUS
1

TYPE
1

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

☐ DOT-COMPLIANT MC HELMET

SEATING POSITION

AIR BAG USAGE

EJECTION

TRAPPED

OL STATE

OPERATOR LICENSE NUMBER

OFFENSE CHARGED

LOCAL CODE

OFFENSE DESCRIPTION

CITATION NUMBER

OL CLASS

ENDORSEMENT SELECT UP TO 2

RESTRICTION SELECT UP TO 3

DRIVER DISTRACTED BY

ALCOHOL / DRUG SUSPECTED
ALCOHOL MARIJUANA
OTHER DRUG

CONDITION

STATUS

ALCOHOL TEST
TYPE
VALUE

STATUS

TYPE

RESULT SELECT UP TO 4

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	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 & CLASS B 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 RESTRICTIONS	6 - PASSENGER	ALCOHOL TEST TYPE
	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION	OL ENDORSEMENT	9 - LEARNER'S PERMIT RESTRICTIONS	7 - OTHER DISTRACTION INSIDE THE VEHICLE	
	8 - THIRD - MIDDLE			10 - LIMITED TO DAYLIGHT ONLY	8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE	
	9 - THIRD - RIGHT SIDE			11 - LIMITED TO EMPLOYMENT	9 - OTHER / UNKNOWN	
1 - NOT TRANSPORTED /TREATED AT SCENE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT	12 - LIMITED - OTHER	CONDITION	DRUG TEST TYPE
2 - EMS	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - PARTIALLY EJECTED	M - MOTORCYCLE	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		
3 - POLICE	12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - TOTALLY EJECTED	P - PASSENGER	14 - MILITARY VEHICLES ONLY		
9 - OTHER / UNKNOWN	13 - TRAILING UNIT	4 - NOT APPLICABLE	N - TANKER	15 - MOTOR VEHICLES WITHOUT AIR BRAKES		
SAFETY EQUIPMENT	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	TRAPPED	Q - MOTOR SCOOTER	16 - OUTSIDE MIRROR	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	DRUG TEST RESULT(S)
	15 - NON-MOTORIST		R - THREE-WHEEL MOTORCYCLE	17 - PROSTHETIC AID		
	99 - OTHER / UNKNOWN		S - SCHOOL BUS	18 - OTHER		
		1 - NOT TRAPPED	T - DOUBLE & TRIPLE TRAILERS			
		2 - EXTRICATED BY MECHANICAL MEANS	X - TANKER / HAZMAT		4 - ILLNESS	1 - AMPHETAMINES
		3 - FREED BY NON-MECHANICAL MEANS			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	2 - BARBITURATES
					6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	3 - BENZODIAZEPINES
					9 - OTHER / UNKNOWN	4 - CANNABINOIDS
1 - NONE USED						5 - COCAINE
2 - SHOULDER BELT ONLY USED						6 - OPIATES / OPIOIDS
3 - LAP BELT ONLY USED						7 - OTHER
4 - SHOULDER & LAP BELT USED						8 - NEGATIVE RESULTS
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING						
6 - CHILD RESTRAINT SYSTEM - REAR FACING						
7 - BOOSTER SEAT						
8 - HELMET USED						
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)						
10 - REFLECTIVE CLOTHING						
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						
99 - OTHER / UNKNOWN						
			GENDER			
			F - FEMALE			
			M - MALE			
			U - OTHER/UNKNOWN			



2 | 0 | 2 | 5 | 1 | 9 | 5 | 9

WITNESS	NAME: LAST, FIRST, MIDDLE CARSTARPHEN	MARTINEZ	DATE OF BIRTH 1 1 2 0 1 9 9 3					AGE 3 1		GENDER M	
	ADDRESS: STREET, CITY, STATE, ZIP 4496 MERRYGOLD BLVD 3009 WARRENSVL HTS OH 44128		CONTACT PHONE - INCLUDE AREA CODE 								
WITNESS	NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH 					AGE 		GENDER 	
	ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE 								
WITNESS	NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH 					AGE 		GENDER 	
	ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE 								



OH-2

LOCAL REPORT NUMBER
20251959

20251959

18

REPORTING AGENCY
GARFIELD HEIGHTS

CRASH LOCATION

DATE OF CRASH		
M 07	D 31	Y 2025

M	07	D	31	Y	2025
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Unit#1 was located with the city camera system. The driver/owner was contacted and will be coming to GHPD. Any information will be added in additional supplements.

OFFICER'S SIGNATURE

X

BADGE NUMBER

037



OH-2

LOCAL REPORT NUMBER
20251959

20251959

18

REPORTING AGENCY
GARFIELD HEIGHTS

CRASH LOCATION

DATE OF CRASH					
M	07	D	31	Y	2025

M 07

D 31

Y 2025

Driver of Unit#1. Jermale Tisdell Jr., came the station on this date/time of supplement.

Tisdell Jr. was advised Miranda Warnings and provided a statement for the crash.

Citation issued a citation and OH-1 updated along with supplement.

OFFICER'S SIGNATURE

X

BADGE NUMBER

037