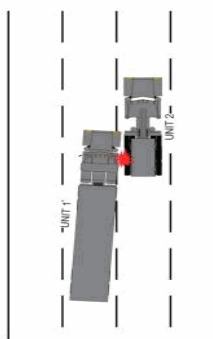


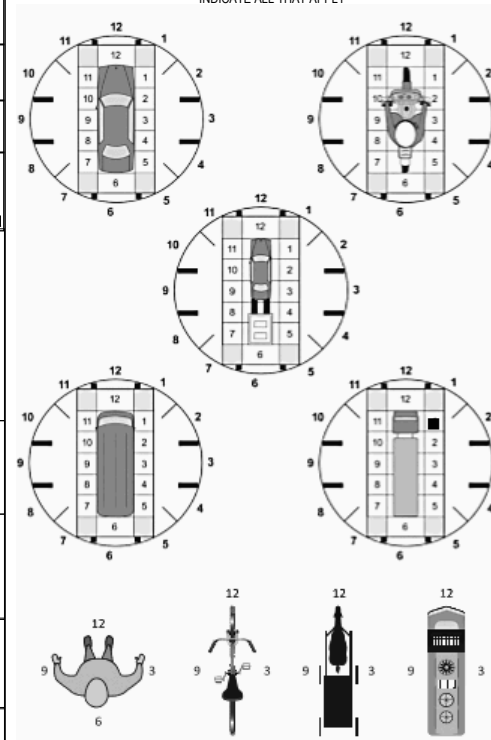
TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH		<input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> Private Property	LOCAL INFORMATION REPORTING AGENCY NAME * GARFIELD HEIGHTS		2 0 2 5 2 0 0 5	
COUNTY *	LOCALITY *	LOCATION: CITY, VILLAGE, TOWNSHIP *			CRASH DATE/TIME *	
1 8	1	GARFIELD HTS			0 8 0 6 2 0 2 5 1 4 1 2	
ROUTE TYPE	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES	
I R	4 8 0	4	IR 480	H W	4 1 . 3 9 6 0 6 9	
ROUTE TYPE	ROUTE NUMBER	PREFIX	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES	
			BROADWAY EXIT		- 8 1 . 5 4 1 5 3 5	
REFERENCE POINT	DIRECTION	ROUTE TYPE		ROAD TYPE		INTERSECTION RELATED
1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE		AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS		<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA
DISTANCE	DISTANCE					NUMBER OF APPROACHES
1 0 0	2					
LOCATION - FIRST ROAD/MILE EVENT		MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE
0 1		7		4		2
1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE 7 - ON RAMP 8 - OFF RAMP		1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (24 FEET) 3 - DIVIDED, DEPRESSIONED 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
LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN		WEATHER 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL		CONDITIONS 1		SURFACE 2
NARRATIVE/ UNIT 1 WAS TRAVELING WB ON IR 480 IN THE THIRD LANE AND HE STATED A VEHICLE CUT HIM OFF WHICH CAUSED HIM TO SWERVE INTO THE SECOND LANE WHICH RESULTED HIM IN STRIKING UNIT 2'S TRAILER (OH PLATE TZ033200).						
CRASH REPORTED DATE/TIME		DISPATCH DATE/TIME		ARRIVAL DATE/TIME		SCENE CLEARED DATE/TIME
0 8 0 6 2 0 2 5 1 4 1 2		0 8 0 6 2 0 2 5 1 4 3 7		0 8 0 6 2 0 2 5 1 4 4 0		0 8 0 6 2 0 2 5 1 4 4 6
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME *		CHECKED BY OFFICER'S NAME *	
0	1 5	2 4	A. Pietraszkiewicz		M. Kaye	
		OFFICER'S BADGE NUMBER *		CHECKED BY OFFICER'S BADGE NUMBER *		REPORT TAKEN BY POLICE AGENCY <input type="checkbox"/> MOTORIST
		0 4 7		C H 1		<input type="checkbox"/> SUPPLEMENT (CORRECTION = ADDITION TO ORIGINAL REPORT DATE/TIME)

OWNER		LOCAL REPORT NUMBER	
UNIT # 01		20252005	
OWNER NAME: LAST, FIRST, MIDDLE () Same As Driver KANG TRANSPORT		OWNER PHONE: INCLUDE AREA CODE () Same As Driver	
OWNER ADDRESS: STREET, CITY, STATE, ZIP () Same As Driver 50179 TAHOE WAY CANTON MI 48187		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP KANG TRANSPORTATION 50179 TAHOE WAY CANTON MI 48187			
LP STATE MI		LICENSE PLATE # RB95763	
VEHICLE IDENTIFICATION # 3AKJH HDR3MSMU2146		VEHICLE YEAR 2021	
VEHICLE MAKE Freightliner			
INSURANCE VERIFIED GREAT WEST CASUALTY		INSURANCE POLICY # MCP762830	
VEHICLE COLOR Other/Unknow			
TYPE OF USE COMMERCIAL () GOVERNMENT () IN EMERGENCY RESPONSE ()		US DOT # 3	
INTERLOCK DEVICE EQUIPPED () HIT/SKIP UNIT () # OCCUPANTS 01		HAZARDOUS MATERIAL MATERIAL RELEASED () PLACARD () CLASS # PLACARD ID #	
UNIT TYPE 1		# of TRAILING UNITS 1	
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		AUTONOMOUS MODE LEVEL 0	
SPECIAL FUNCTION 01		CARGO BODY TYPE 01	
VEHICLE DEFECTS 1		VEHICLE WEIGHT GVWR/GCWR 1- <10K LBS. 2- 10,001 - 26K LBS. 3- >26K LBS.	
NON-MOTORIST LOCATION AT IMPACT 4		ACTION 03	
CONTRIBUTING CIRCUMSTANCES 15		SEQUENCE OF EVENTS 120	
EVENT(S) 1		COLLISION WITH FIXED OBJECT - STRUCK 1	
FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1	

DAMAGE	
DAMAGE SCALE 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 01 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
TRAFFIC TRAFFICWAY FLOW 1 ONE-WAY 2 TWO-WAY 6 TRAFFIC CONTROL 1 ROUNDABOUT 2 SIGNAL 3 FLASHER 4 STOP SIGN 5 YIELD SIGN 6 NO CONTROL	
# OF THROUGH LANES ON ROAD 4 RAIL GRADE CROSSING 1 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING	
UNIT / NON-MOTORIST DIRECTION FROM 3 TO 4 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED 60 POSTED SPEED 60 DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	

OWNER		LOCAL REPORT NUMBER	
UNIT # 02		20252005	
OWNER NAME: LAST, FIRST, MIDDLE () Same As Driver RICH'S TOWING AND SERVICE		DAMAGE	
OWNER ADDRESS: STREET, CITY, STATE, ZIP () Same As Driver 20529 FIRST AVE CLEVELAND OH 44130		DAMAGE SCALE	
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP RICH'S TOWING AND SE 20527 FIRST AVE CLEVELAND OH 4413		1 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE	
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		DAMAGED AREA(S) INDICATE ALL THAT APPLY	
LP STATE OH		VEHICLE IDENTIFICATION # 1XPXP4EX2AD111830	
LICENSE PLATE # PVN3215		VEHICLE YEAR 2010	
VEHICLE MAKE Peterbilt		VEHICLE MODEL Other/Unknow	
INSURANCE VERIFIED CENTRAL MUTUAL		INSURANCE POLICY # 9924637	
TYPE OF USE COMMERCIAL () GOVERNMENT () IN EMERGENCY RESPONSE ()		VEHICLE COLOR	
US DOT # TSC4758		TOWED BY: COMPANY NAME	
HAZARDOUS MATERIAL () MATERIAL RELEASED () PLACARD		CLASS #	
PLACARD ID #			
INTERLOCK DEVICE EQUIPPED () HIT/SKIP UNIT () # OCCUPANTS 01		VEHICLE WEIGHT GVWR/GCWR 3	
VEHICLE TYPE 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) 7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV) 12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME 18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP		UNIT TYPE 1 # of TRAILING UNITS	
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2		AUTONOMOUS MODE LEVEL 0	
1 - YES 2 - NO 9 - OTHER / UNKNOWN		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN	
SPECIAL FUNCTION 01		1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS-TRANSIT/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 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL 21 - MAIL CARRIER 99 - OTHER / UNKNOWN	
CARGO BODY TYPE 01		1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL 8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	
VEHICLE DEFECTS 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER / UNKNOWN			
NON-MOTORIST LOCATION AT IMPACT 3		1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK 3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION 6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	
ACTION 3		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 01		1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN 7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/JACDA 9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING 13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY 17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER CROSSING 21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	
SEQUENCE OF EVENTS		INITIAL POINT OF CONTACT 08	
EVENTS		0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
1 2 0		TRAFFIC	
2		TRAFFICWAY FLOW	
3		1 - ONE-WAY 2 - TWO-WAY	
4		TRAFFIC CONTROL	
5		1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL	
6		# OF THROUGH LANES ON ROAD	
1		4	
2		RAIL GRADE CROSSING	
3		1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING	
4		UNIT / NON-MOTORIST DIRECTION	
5		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
6		UNIT SPEED	
1		60	
2		DETECTED SPEED	
3		1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	
4		POSTED SPEED	
5		60	
6		FIRST HARMFUL EVENT	
1		MOST HARMFUL EVENT	
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