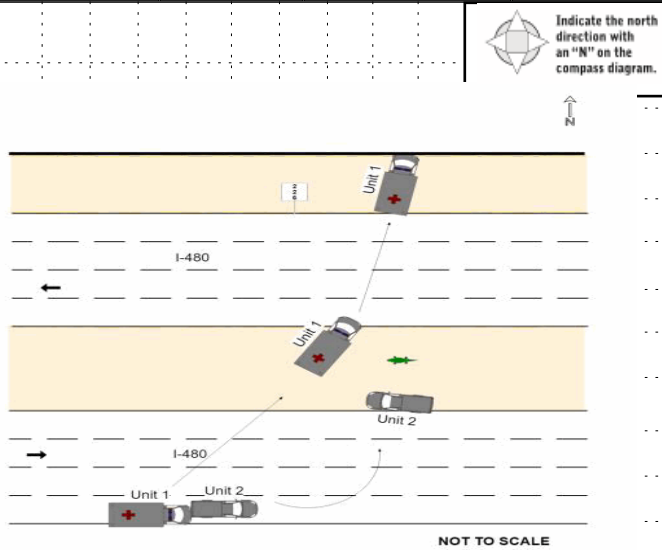


TRAFFIC CRASH REPORT

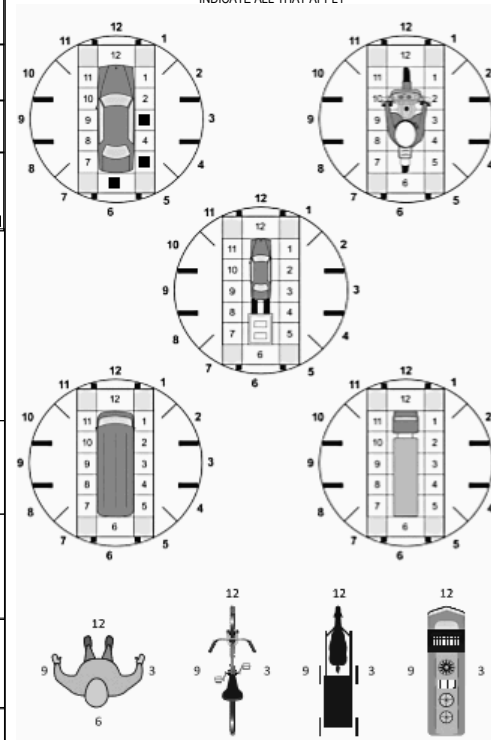
*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

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		2 0 2 5 2 3 3 4		HITSKIP 1 - Solved 2 - Unsolved		NUMBER OF UNITS 0 2		UNIT IN EDDP 98 - ANIMAL 99 - UNKNOWN 0 1	
COUNTY * 1 8		LOCALITY * 1		LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS		CRASH DATE/TIME * 0 9 0 9 2 0 2 5 1 3 0 0				CRASH SEVERITY 5			
ROUTE TYPE 1 R		ROUTE NUMBER 4 8 0		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME INTERSTATE 480		ROAD TYPE H W		LATITUDE DECIMAL DEGREES 4 1 4 1 6 0 3 3			
ROUTE TYPE		ROUTE NUMBER		PREFIX		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 22.6		ROAD TYPE M P		LONGITUDE DECIMAL DEGREES 8 1 6 7 4 0 9 6			
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 2		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 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		INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES					
DISTANCE EDDP DECEASED/INJURED 1 - Miles 2 - Feet 3 - Yards		DISTANCE 1 - Miles 2 - Feet 3 - Yards						ROADWAY <input checked="" type="checkbox"/> ROADWAY DIVIDED					
LOCATION - FIRST UADM III EVENT 0 1		MANNER OF CRASH COLLISION/IMPACT 2		DIRECTION OF TRAVEL 3		MEDIAN TYPE 3							
<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		CONDITIONS 1		SURFACE 2			
LIGHT CONDITION 1		WEATHER 1											
NARRATIVE UNIT 02 WAS TRAVELING EASTBOUND IN THE NUMBER FOUR LANE AND SLOWING DOWN DUE TO TRAFFIC AHEAD. UNIT 01 WAS TRAVELING DIRECTLY BEHIND UNIT 02. UNIT 01 STRUCK UNIT 02. UNIT 01 THEN TRAVELED ACROSS THE GRASS MEDIAN AND ACROSS THE WESTBOUND LANES OF TRAFFIC. UNIT 01 STRUCK THE NOISE BARRIER WALL, WHERE IT CAME TO FINAL REST.													
CRASH REPORTED DATE/TIME 0 9 0 9 2 0 2 5 1 3 0 0		DISPATCH DATE/TIME 0 9 0 9 2 0 2 5 1 3 0 1		ARRIVAL DATE/TIME 0 9 0 9 2 0 2 5 1 3 0 4		SCENE CLEARED DATE/TIME 0 9 0 9 2 0 2 5 1 3 2 5		REPORT TAKEN BY POLICE AGENCY MOTORIST					
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 3 0		TOTAL MINUTES 5 4		OFFICER'S NAME * J. Pietraszkiewicz		CHECKED BY OFFICER'S NAME * D. Bailey		SUPPLEMENT (CORRECTION = ADDITION TO EXISTING REPORT ONLY)			
OFFICER'S BADGE NUMBER * 0 0 7		CHECKED BY OFFICER'S BADGE NUMBER * L 0 7											

OWNER		LOCAL REPORT NUMBER	
UNIT # 01		20252334	
OWNER NAME: LAST, FIRST, MIDDLE DONALD MARTEN & SONS		OWNER PHONE: INCLUDE AREA CODE ()	
OWNER ADDRESS: STREET, CITY, STATE, ZIP 10830 BROOKPARK RD BROOKLYN OH 44130			
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP DONALD MARTENS & SC 10830 BROOKPARK RD CLEVELAND OH		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE ()	
LP STATE OH		LICENSE PLATE # 200ZKP	
VEHICLE IDENTIFICATION # 1FTNE14W28DA65402		VEHICLE YEAR 2008	
VEHICLE MAKE Ford			
INSURANCE VERIFIED <input type="checkbox"/>		INSURANCE COMPANY INSURANCE POLICY #	
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		VEHICLE COLOR WHI	
HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD		VEHICLE MODEL E-150	
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/>		HIT/SKIP UNIT <input type="checkbox"/>	
# OCCUPANTS 01		US DOT # 1	
VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		TOWED BY: COMPANY NAME INTERSTATE TOWING	
UNIT TYPE 05		HAZARDOUS MATERIAL CLASS # PLACARD ID #	
# of TRAILING UNITS 0			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		AUTONOMOUS MODE LEVEL 0	
SPECIAL FUNCTION 10			
CARGO BODY TYPE 01			
VEHICLE DEFECTS 0			
NON-MOTORIST LOCATION AT IMPACT 0			
ACTION 3			
CONTRIBUTING CIRCUMSTANCES 08			
SEQUENCE OF EVENTS 120			
COLLISION WITH FIXED OBJECT - STRUCK 45			
FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 5	
DAMAGE 4		DAMAGED AREA(S) INDICATE ALL THAT APPLY	
INITIAL POINT OF CONTACT 12		TRAFFIC TRAFFICWAY FLOW 1	
RAIL GRADE CROSSING 1		UNIT / NON-MOTORIST DIRECTION FROM 4 TO 3	
UNIT SPEED 60		DETECTED SPEED 1	
POSTED SPEED 60			

OWNER		LOCAL REPORT NUMBER	
UNIT # 02		20252334	
OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) HARVEY DEVIN THOMAS		OWNER PHONE: INCLUDE AREA CODE (Same As Driver)	
OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver) 174 S. MERCER ST. PAINESVILLE PA 16125			
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
LP STATE PA		LICENSE PLATE # ZPC4498	
VEHICLE IDENTIFICATION # 1C6R97T9K566992		VEHICLE YEAR 2019	
VEHICLE MAKE RAM			
INSURANCE VERIFIED <input type="checkbox"/>		INSURANCE COMPANY	
INSURANCE POLICY #		VEHICLE COLOR WHI	
VEHICLE MODEL 1500			
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/>		HIT/SKIP UNIT <input type="checkbox"/>	
# OCCUPANTS 01		VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	
TOWED BY: COMPANY NAME PRIVATE TOW		HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
UNIT TYPE 04		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	
# of TRAILING UNITS			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		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		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 4		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		EVENTS	
1 2 0		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	
COLLISION WITH FIXED OBJECT - STRUCK			
25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORKZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN			
FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1	

DAMAGE	
DAMAGE SCALE	
1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
4	
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	
0 6 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
TRAFFIC	
TRAFFICWAY FLOW	TRAFFIC CONTROL
1 ONE-WAY 2 TWO-WAY	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 NOT INVOLVED 2 INVOLVED - ACTIVE CROSSING 3 INVOLVED - PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION	
1 NORTH 2 SOUTH 3 EAST 4 WEST 5 NORTHEAST 6 NORTHWEST 7 SOUTHEAST 8 SOUTHWEST 9 OTHER / UNKNOWN	
UNIT SPEED 25	DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 60	

[illegible]

OHIO TRAFFIC CRASH REPORT
DIAGRAM / NARRATIVE CONTINUATION

OH-2

LOCAL REPORT NUMBER 20252334	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 09 D 09 Y 2025	
IN COUNTY OF 18	CRASH LOCATION IR 480		
Noise Barrier Wall owner information:			
State of Ohio Department of Transportation			
5500 Transportation Blvd			
Garfield Heights, Ohio 44125			
(216) 581-2100			
OFFICER'S SIGNATURE X		BADGE NUMBER 007	