

TRAFFIC CRASH REPORT

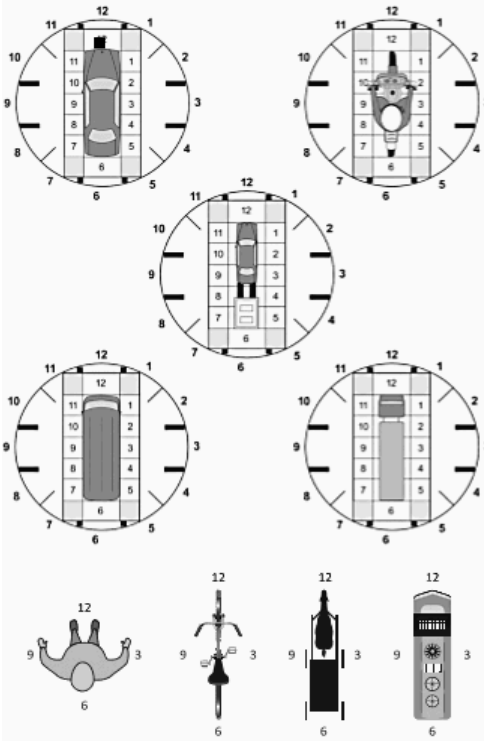
*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

☐ PHOTOS TAKEN ☐ SECONDARY CRASH		☐ OH-2 ☐ OH-1P ☐ Private Property	LOCAL INFORMATION REPORTING AGENCY NAME * GARFIELD HEIGHTS		2 0 2 5 2 5 3 2						
COUNTY * 1 8		LOCALITY * 1		LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS		CRASH DATE/TIME * 0 9 2 6 2 0 2 5 1 5 1 3		CRASH SEVERITY 5 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY			
ROUTE TYPE 1 R		ROUTE NUMBER 4 8 0		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME		ROAD TYPE		LATITUDE DECIMAL DEGREES 4 1 . 4 1 0 2 0 4	
ROUTE TYPE S R		ROUTE NUMBER 1 4		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)		ROAD TYPE		LONGITUDE DECIMAL DEGREES 8 1 . 6 2 4 9 8 7	
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 1		DIRECTION 1 - NORTH 2 - SOUTH 3 - WEST 4		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		INTERSECTION RELATED ☐ WITHIN INTERSECTION OR ON APPROACH ☐ WITHIN INTERCHANGE AREA NUMBER OF APPROACHES	
DISTANCE EDPM DECIMAL MILE 1 0		DISTANCE 1 UNIT PER MILE/1000 FT 1 - Miles 2 - Feet 3 - Yards 2		ROADWAY ☒ ROADWAY DIVIDED							
LOCATION - FIRST MILE/1000 FT EVENT 0 1 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 7 - ON RAMP 8 - OFF RAMP		CROSSOVER 9 - CROSSOVER 10 - DRIVEWAY / ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN		MANNER OF CRASH COLLISION/IMPACT 4 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 3 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		MEDIAN TYPE 4 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			
☐ WORK ZONE RELATED ☐ WORKERS PRESENT ☐ LAW ENFORCEMENT PRESENT ☐ 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 4 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER UNKNOWN		CONDITIONS 1 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 1 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/ UNITS 1 AND 2 STATED THEY WERE TRAVELING E/B ON I480 IN THE LEFT LANE. TRAFFIC WAS HEAVY, WITH SEVERAL SLOW DOWNS. UNIT 2 STATED HE FAILED TO STOP IN TIME BEFORE STRIKING UNIT 1 AT THE REAR.					20252532						
CRASH REPORTED DATE/TIME 0 9 2 6 2 0 2 5 1 5 1 3		DISPATCH DATE/TIME 0 9 2 6 2 0 2 5 1 5 2 2		ARRIVAL DATE/TIME 0 9 2 6 2 0 2 5 1 5 2 8		SCENE CLEARED DATE/TIME 0 9 2 6 2 0 2 5 1 5 4 5		REPORT TAKEN BY POLICE AGENCY ☐ MOTORIST			
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 3 0		TOTAL MINUTES 5 3		OFFICER'S NAME * R. Dodge		CHECKED BY OFFICER'S NAME* D. Bailey		☐ SUPPLEMENT (CORRECTION = ADDITION DO NOT WRITE IN THESE SPACES)	
OFFICER'S BADGE NUMBER* S 2 2		CHECKED BY OFFICER'S BADGE NUMBER* L 0 7									

OWNER		LOCAL REPORT NUMBER	
UNIT # 01		20252532	
OWNER NAME: LAST, FIRST, MIDDLE () Same As Driver SCOTT KIMBERLY JUANITA		OWNER PHONE: INCLUDE AREA CODE () Same As Driver	
OWNER ADDRESS: STREET, CITY, STATE, ZIP () Same As Driver 1500 WESTDALE RD SOUTH EUCLID OH 44121		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
LP STATE OH		LICENSE PLATE # JBH7887	
VEHICLE IDENTIFICATION # 5NPE24AF6HJ511091		VEHICLE YEAR 2017	
VEHICLE MAKE Hyundai		VEHICLE MODEL Sonata	
INSURANCE VERIFIED state farm		INSURANCE POLICY # 2067131-SF8-35	
VEHICLE COLOR COM		VEHICLE MODEL Sonata	
TYPE OF USE COMMERCIAL () GOVERNMENT () IN EMERGENCY RESPONSE ()		US DOT #	
INTERLOCK DEVICE EQUIPPED () HIT/SKIP UNIT ()		# OCCUPANTS 01	
VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		HAZARDOUS MATERIAL MATERIAL RELEASED () PLACARD () CLASS # PLACARD ID #	
UNIT 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		# of TRAILING UNITS	
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 - YES 1 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN	
SPECIAL FUNCTION 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 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		INITIAL POINT OF CONTACT 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - 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 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	
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SEQUENCE OF EVENTS 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		RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING	
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		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 10		DETECTED SPEED 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	
POSTED SPEED 60		PAGE OF	
FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1	

OWNER	UNIT # 0 2	OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) KERTESZ DARYL STEVEN	OWNER PHONE: INCLUDE AREA CODE (Same As Driver)			
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver) 2 COUNTRY LN PEPPER PIKE OH 44124					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE				
VEHICLE	LP STATE O H	LICENSE PLATE # EMOTIVE	VEHICLE IDENTIFICATION # WDBGA57E3SA254842	VEHICLE YEAR 1 9 9 5	VEHICLE MAKE Mercedes-Ben	
	INSURANCE VERIFIED	INSURANCE COMPANY Berkley One	INSURANCE POLICY # OC04358545	VEHICLE COLOR WHI	VEHICLE MODEL S-Class	
	TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME		
	☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT		# OCCUPANTS 0 1	HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ PLACARD		
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SEQUENCE OF EVENTS		EVENTS				
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FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1				

LOCAL REPORT NUMBER 2 0 2 5 2 5 3 2			
DAMAGE DAMAGE SCALE 1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN 2			
DAMAGED AREA(S) INDICATE ALL THAT APPLY 			
☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]			
INITIAL POINT OF CONTACT 1 2 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN			
TRAFFIC TRAFFICWAY FLOW 1 1 - ONE-WAY 2 - TWO-WAY TRAFFIC CONTROL 6 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 FROM 4 TO 3 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
UNIT SPEED 0 1 0		DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	
POSTED SPEED 6 0			

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER									
2	0	2	5	2	5	3	2		

MOTORIST / NON-MOTORIST	UNIT # 01	NAME: LAST, FIRST, MIDDLE SYLVER JUSTIN SCOTT				DATE OF BIRTH 02241998		AGE 27	GENDER M					
	ADDRESS: STREET, CITY, STATE, ZIP 1500 WESTDALE RD SOUTH EUCLID OH 44121					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				
MOTORIST / NON-MOTORIST	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	DRUG TEST(S) RESULT SELECT UP TO 4
	UNIT # 02	NAME: LAST, FIRST, MIDDLE KERTESZ DARYL STEVEN				DATE OF BIRTH 12191981		AGE 43	GENDER M					
	ADDRESS: STREET, CITY, STATE, ZIP 2 COUNTRY LN PEPPER PIKE OH 44124					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		
MOTORIST / NON-MOTORIST	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	DRUG TEST(S) RESULT SELECT UP TO 4
	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER					
	ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE								
MOTORIST / NON-MOTORIST	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	DRUG TEST(S) 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	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	
INJURED TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	
1 - NOT TRANSPORTED /TREATED AT SCENE	8 - THIRD - MIDDLE			8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE	
2 - EMS	9 - THIRD - RIGHT SIDE	EJECTION	OL ENDORSEMENT	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	ALCOHOL TEST TYPE
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT	10 - LIMITED TO DAYLIGHT ONLY		1 - NONE
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - PARTIALLY EJECTED	M - MOTORCYCLE	11 - LIMITED TO EMPLOYMENT		2 - BLOOD
	12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - TOTALLY EJECTED	P - PASSENGER	12 - LIMITED - OTHER		3 - URINE
SAFETY EQUIPMENT	13 - TRAILING UNIT	4 - NOT APPLICABLE	N - TANKER	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		4 - BREATH
1 - NONE USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	TRAPPED	Q - MOTOR SCOOTER	14 - MILITARY VEHICLES ONLY	CONDITION	5 - OTHER
2 - SHOULDER BELT ONLY USED	15 - NON-MOTORIST		R - THREE-WHEEL MOTORCYCLE	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	1 - APPARENTLY NORMAL	
3 - LAP BELT ONLY USED	99 - OTHER / UNKNOWN		S - SCHOOL BUS	16 - OUTSIDE MIRROR	2 - PHYSICAL IMPAIRMENT	
4 - SHOULDER & LAP BELT USED			T - DOUBLE & TRIPLE TRAILERS	17 - PROSTHETIC AID	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	DRUG TEST TYPE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING			X - TANKER / HAZMAT	18 - OTHER	4 - ILLNESS	1 - NONE
6 - CHILD RESTRAINT SYSTEM - REAR FACING					5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	2 - BLOOD
7 - BOOSTER SEAT					6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	3 - URINE
8 - HELMET USED					9 - OTHER / UNKNOWN	4 - OTHER
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)						
10 - REFLECTIVE CLOTHING						DRUG TEST RESULT(S)
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						1 - AMPHETAMINES
99 - OTHER / UNKNOWN						2 - BARBITURATES
						3 - BENZODIAZEPINES
						4 - CANNABINOIDS
						5 - COCAINE
						6 - OPIATES / OPIOIDS
						7 - OTHER
						8 - NEGATIVE RESULTS