


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 | <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER | LOCAL INFORMATION REPORTING AGENCY NAME * GARFIELD HEIGHTS | | 2 0 2 5 2 5 7 2 | | HITSKIP 1 - Solved 2 - Unsolved | | NUMBER OF LINES 0 1 | | LIMIT IN EDDP 98 - ANIMAL 99 - UNKNOWN 0 1 | |
| COUNTY * 1 8 | | LOCALITY * 1 | | LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS | | CRASH DATE/TIME * 0 9 3 0 2 0 2 5 1 9 5 5 | | | | CRASH SEVERITY 5 | | | |
| ROUTE TYPE | | ROUTE NUMBER | | PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | | LOCATION ROAD NAME NEO PARKWAY | | ROAD TYPE S Q | | LATITUDE DECIMAL DEGREES 4 1 4 2 6 6 2 5 | | | |
| ROUTE TYPE | | ROUTE NUMBER | | PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | | REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 4914 | | ROAD TYPE R D | | LONGITUDE DECIMAL DEGREES 8 1 5 7 3 8 2 4 | | | |
| REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 1 | | DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 2 | | 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 <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA | | NUMBER OF APPROACHES | |
| DISTANCE EDP# IN DECIMALS 5 0 | | DISTANCE 1 - MILE 2 - FEET 3 - YARDS 2 | | ROADWAY <input type="checkbox"/> ROADWAY DIVIDED | | ROADWAY | | ROADWAY | | | | | |
| LOCATION - FIRST MILE EVENT 0 1 | | LOCATION - FIRST MILE EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE 7 - ON RAMP 8 - OFF RAMP | | LOCATION - FIRST MILE EVENT 9 - CROSOVER 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 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON | | MANNER OF 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 | | 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 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER UNKNOWN 1 | | CONDITIONS 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN 1 | | SURFACE 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER /UNKNOWN 2 | | | |
| LIGHT CONDITION 3 | | 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 1 | | WEATHER 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN | | | | | | | |
| NARRATIVE UNIT 1 (SEMI-TRUCK) WAS MAKING A TURN TO PARK THE TRUCK AT 4914 NEO PARKWAY. UNIT 1 STRUCK A LIGHT POLE (NO POLE NUMBER) WHILE MAKING THE TURN. NO DAMAGE TO UNIT 1. | | | | | |  | | | | | | | |
| CRASH REPORTED DATE/TIME 0 9 3 0 2 0 2 5 1 9 5 5 | | DISPATCH DATE/TIME 0 9 3 0 2 0 2 5 1 9 5 7 | | ARRIVAL DATE/TIME 0 9 3 0 2 0 2 5 2 0 4 | | SCENE CLEARED DATE/TIME 0 9 3 0 2 0 2 5 2 0 4 2 | | REPORT TAKEN BY POLICE AGENCY <input type="checkbox"/> MOTORIST | | | | | |
| TOTAL TIME ROADWAY CLOSED 0 | | OTHER INVESTIGATION TIME | | TOTAL MINUTES | | OFFICER'S NAME * Y. Ihiri | | CHECKED BY OFFICER'S NAME* D. Simia | | SUPPLEMENT (CORRECTION = ADDITION TO EXISTING REPORT DATE/TIME) <input type="checkbox"/> | | | |
| OFFICER'S BADGE NUMBER* 0 3 8 | | OFFICER'S BADGE NUMBER* S 2 3 | | | | | | | | | | | |

| | | |
|---|--|---|
| UNIT # 01 | OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver) TURKDONMEZ AHMET | OWNER PHONE: INCLUDE AREA CODE (Same As Driver) |
| OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver) 1500 TRUMBULL RD GIRARD OH 44420 | | |
| COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP AIM LEASING 1500 TRUMBULL RD GIRARD OH 44420 | | COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE |
| LP STATE OH | LICENSE PLATE # PWU4439 | VEHICLE IDENTIFICATION # 3AKJH HDR2PSNH4962 |
| INSURANCE VERIFIED GEICO | | INSURANCE POLICY # 6154772625 |
| TYPE OF USE COMMERCIAL | | VEHICLE YEAR 2023 |
| HAZARDOUS MATERIAL MATERIAL RELEASED | | VEHICLE MAKE Freightliner |
| US DOT # 0003322 | | VEHICLE MODEL Other/Unknow |
| VEHICLE WEIGHT GVWR/GCWR 1- <10K LBS. 2- 10,001 - 26K LBS. 3- >26K LBS. | | TOWED BY: COMPANY NAME |
| 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 | | |
| # of TRAILING UNITS | | |
| WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 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 99 | | 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 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 | | |
| 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 | | |
| 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 | | |

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| LOCAL REPORT NUMBER 20252572 | |
| 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"/> - TOP [13] <input type="checkbox"/> - UNDERCARRIAGE [14] <input type="checkbox"/> - ALL AREAS [15] <input type="checkbox"/> - UNIT NOT AT SCENE [16] | |
| INITIAL POINT OF CONTACT 00 0- NO DAMAGE 1-12- REFER TO UNIT DIAGRAM 13- TOP 14- UNDERCARRIAGE 15- VEHICLE NOT AT SCENE 99- UNKNOWN | |
| TRAFFIC | |
| TRAFFICWAY FLOW 2 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 02 | 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 5 | DETECTED SPEED 1 1- STATED/ESTIMATED SPEED 2- CALCULATED / EDR 3- UNDETERMINED |
| POSTED SPEED 25 | |



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|-----------------------------------|---------------------------|-------------------------------|------------------|----------------------------|--|-----------------|--|---|--|--|--|--------------------------------|-------------------------------|--|--|---------------------------|-----------------------------------|------------------------------|--------|-----------------|--|--------------|--|---------------------------------------|--|--|
| UNIT # | NAME: LAST, FIRST, MIDDLE | | | | | | | | | | | | DATE OF BIRTH | | | | AGE | | GENDER | | | | | | | |
| | 0 | 1 | TURKDONMEZ AHMET | | | | | | | | | | 0 9 2 6 2 0 0 2 | | | | 2 3 | | M | | | | | | | |
| ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | | | | | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | | | |
| 1500 TRUMBULL RD GIRARD OH 44420 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INJURIES 5 | | INJURED TAKEN BY 1 | | EMS AGENCY (NAME) | | | | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | | | | SAFETY EQUIPMENT USED 0 3 | | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | | SEATING POSITION 0 1 | | AIR BAG USAGE 1 | | EJECTION 1 | | TRAPPED 1 | | | | |
| OL STATE | | OPERATOR LICENSE NUMBER | | | | OFFENSE CHARGED | | | | LOCAL CODE <input type="checkbox"/> | | OFFENSE DESCRIPTION | | | | | | | | CITATION NUMBER | | | | | | |
| OL CLASS | | ENDORSEMENT SELECT UP TO 2 | | RESTRICTION SELECT UP TO 3 | | | | DRIVER DISTRACTED BY 1 | | ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> 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 | | | | | | | | | |
| INJURIES | | INJURED TAKEN BY | | EMS AGENCY (NAME) | | | | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | | | | SAFETY EQUIPMENT USED | | <input type="checkbox"/> 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 | | |
| 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 | | <input type="checkbox"/> 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 | | |
| 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 | | <input type="checkbox"/> 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 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY | 1- FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2- FRONT - MIDDLE 3- FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5- SECOND - MIDDLE 6- SECOND - RIGHT SIDE 7- THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8- THIRD - MIDDLE 9- THRID - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11- PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12- PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN | 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN | 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M / C MOPED ONLY 6 - NO VALID OL | 1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE RESTRICTIONS 9 - LEARNER'S PERMIT RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER | 1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION INSIDE THE VEHICLE 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE 9 - OTHER / UNKNOWN | 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNSAMPLEABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN |
| Injured Taken By | | EJECTION | OL ENDORSEMENT | | | ALCOHOL TEST TYPE |
| 1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN | | 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE | H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT | | | 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER |
| Safety Equipment | | TRAPPED | GENDER | | CONDITION | DRUG TEST TYPE |
| 1 - NONE USED 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRRAINT 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 | | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS | F - FEMALE M - MALE U - OTHER/UNKNOWN | | 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 9 - OTHER / UNKNOWN | 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER |
| | | | | | | DRUG TEST RESULT(S) |
| | | | | | | 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS |