OHIO DEPARTM OF PUBLIC SAF SAPETY - SERVICE - PROT	TRAFFIC	CRAS	LOCAL REPORT NUMBER*								
☐ PHOTOS TAKEN	OH-2	OH-3	[2 0 2 5 2 7 8 9								
SECONDARY CRASH		OTHER	REPORTING AGENC			0 1	HIT/SKIP 1 - Solved	0 1 1 98 - ANIMAL			
COUNTY* LOCALIT	Private Property	LOCATION		LD HEIGH	HTS	0 1		2 - Unsolved CRASH DA	0 1 99 - UNKNOWN CRASH SEVERITY		
1 1 8 1 1	1 - CITY * 2 - VILLAGE *	LOCATION: CITY, VI		1101213121012	5 1-FATAL						
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH	LOCATION RO	OAD NAME	1	I ATITIDE DECIMA	2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY			
Госатіон			2 - SOUTH 3 - EAST 4 - WEST	GRANN	IIS		R_1D_1	 4 1 <u>.</u> 4 0	SUSPECTED 4 - INJURY POSSIBLE		
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH	REFERENC	CE ROAD NAME (ROAD, MILEPOST, HO	OUSE#)	ROAD TYPE	LONGITUDE DECIMAL	5 - PROPERTY DAMAGE ONLY		
REFERENCE			3 - EAST 4 - WEST	13016				8 1 5 9			
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST	1 - NORTH	IR - INTE	ROLLTE TYPE RSTATE ROUTE (TP)		AL - ALLEY HW -		D - ROAD	☐ WITHIN INTERSE	INTERSECTION RELATE CTION OR ON APPROACH	D	
3 - HOUSE#	1 2 - SOUTH 3 - EAST 4 - WEST	SR - STA	DERAL US ROUTE TE ROUTE MBERED COUNTY ROU		CR - CIRCLE OV -	MILEPOST S OVAL T	Q - SQUARE T - STREET E - TERRACE	☐ WITHIN INTERCH	ANGE AREA	NUMBER OF APPROACHES	
DISTANCE EDOM DECEDEMOS	DISTANCE		MBERED TOWNSHIP		DR - DRIVE PI - P		L - TRAIL /A - WAY		ROADWAY		
1 0	2 - Feet 3 - Yards							☐ ROADWAY DIVID	ED		
- 4 1 ON DOAD	CATION AS EIDET HADMEI II				IANNER OF CRASH COLLISIO			DIRECTION OF TRAVEL		MEDIAN TYPE	
0 1 1 1- ON ROAE 2- ON SHOUL 3- IN MEDIA	JLDER 10 - DRIVEWA IN ACCESS	AY / ALLEY	1,1,	1 - NOT COLLISION BETWEEN TWO MOTOR	4 - REAR-TO-RE 5 - BACKING	AR		1 - NORTH	1 - DIVIE	DED FLUSH MEDIAN EET)	
4 - ON ROAE 5 - ON GORE 6 - OUTSIDE TRAFFICE	E CROSSIN 12 - SHARED	IG USE PATHS		VEHICLES IN TRANSPORT 2 - REAR-END	6 - ANGLE 7 - SIDESWIPE, 8 - SIDESWIPE,	SAME DIRECTION OPPOSITE DIRECTION		2 - SOUTH 3 - EAST 4 - WEST	D, FLUSH MEDIAN ET) D, DEPRESSED MEDIAN		
7 - ON RAMF 8 - OFF RAM		3 - HEAD-ON	9 - OTHER / UNI				4 - DIVIE (ANY	DED, RAISED MEDIAN TYPE) ER / UNKNOWN			
	99 - OTHER / I	UNKNOWN									
WORK ZONE RELATED		WORK ZO			1 - BEFORE	RASH IN WORK ZONI THE 1ST WORK ZONE		CONTOUR	CONDITIONS	SURFACE	
WORKERS PRESENT LAW ENFORCEMENT PRESENT	3-	 LANE SHIFT/CROS WORK ON SHOULD OR MEDIAN 	SOVER DER		3 - TRANSIT	E WARNING AREA ION AREA		_2_	_ 2	_ 2_	
ACTIVE SCHOOL ZONE		- INTERMITTENT OR - OTHER	MOVING WORK		4 - ACTIVITY 5 - TERMINA			1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET 3 - SNOW	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS,	
	CONDITION				WEATHER			3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER	4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL	ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL,	
1 - DAYLIGHT 2 - DAWN/DUSK			1 - CLEAR 2 - CLOUE	Υ	6 - SNOW 7 - SEVERE CROSSWIN	NDS		/UNKNOWN	6 - WATER (STANDING, MOVING) 7 - SLUSH	STONE 5 - DIRT 9 - OTHER	
5 - DARK - UNKNO	WAY NOT LIGHTED OWN ROADWAY LIGHTING	4	3 - FOG, S 4 - RAIN 5 - SLEET	MOG, SMOKE , HAIL	8 - BLOWING SAND, SO 9 - FREEZING RAIN OR 99 - OTHER / UNKNOW	FREEZING DRIZZLE			9 - OTHER/UNKNOWN	/UNKNOWN	
9 - OTHER / UNK	NOWN										
ON THE LISTE	ED TIME AND	DATE	INIIT #1 \A	INC						Indicate the north direction with	
										an "N" on the compass diagram.	
TRAVELING E						NOT TO					
OFF THE ROA	AD RIGHT AN	D STRU	CKAUTII	LITY POL	.E.			l '			
								1 1			
							2				
							GRANNIS RD				
						÷ •	•	UNIT	13016		
								4	\$		
								ı			
CRASH REPORTED			DISPATCH DAT			RRIVAL DATE/TIME	.0.0.0.=		ED DATE/TIME	REPORT TAKEN BY POLICE AGENCY	
1 0 2 3 2 0 2 TOTAL TIME ROADWAY	5 2 1 5 8 OTHER INVESTIGATION	1 0 2 TOTAL	3 2 0 2 5 OFFICER'S		9 10232	2 0 2 5		11023202	2 5 2 2 3 0	MOTORIST	
CLOSED	TIME	MINUTES		alak	Dio Dance :		D. Simia		ANUMED A	SUPPLEMENT (CORRECTION=ADDITION	
_3_0	3 0	[6 1	0					CHECKED BY OFFICER'S BADGE	(CURRECUTION SHADDITION TO AN EXCERTAGE SHAP TO COPE		

	OHI OF I	IO DEPARTMENT PUBLIC SAFETY TY - SERVICE - PROTECTION						2,0,2,5,2	LOCAL REPORT NUMBER			
0	JNIT# . 1 .	OWNER NAME: LAST, FIRST, MIDDLE RODA JENN	(🗷 Sar	ne As Driver)	OWNER P	HONE: INCLUDE AREA CODE	(Same As Driver)	DAMAGE DAMAGE SCALE				
		SS: STREET, CITY, STATE, ZIP	(Same As D	river)				1 - NONE	3 - FUNCTIONAL DAMAGE			
1 m	3417	GRANNIS F	•	GARFIEL	D HE	IGHT OH	44125	4 2 - MINOR DAMAGE	4 - DISABLING DAMAGE 9 - UNKNOWN			
СОММ	IERCIAL CAF	RRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERC	IAL CARRIER PHONE: INCLUDE	AREA CODE					
I P	STATE	LICENSE PLATE #	l v	EHICLE IDENTIFICATION #	ш	VEHICLE YEAR	VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY				
O_H_ KQV8770 L1_C,4,R,D,J,D,G,9,R,C,2,3,						2 0 2 4	Dodge	11 12 1	11 12 1			
		RANCE RIFIED INSURANCE COMPANY		INSURANCE POLICY#		VEHICLE COLOR MAR	VEHICLE MODEL Durango	10	2 10 11 1 2			
		TYPE of USE		US DOT#	TOWED	BY: COMPANY NAME	Burungo	9 10 2	3 9 2 3			
	COMMERC	CIAL GOVERNMENT	IN EMERGENCY RESPONSE	VEHICLE WEIGHT GVWR/GCWR	·			- 3 4 -				
	INTERLO DEVICE EQUIPPEI	☐ HIT/SKIP UNIT	# OCCUPANTS 0 2	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		HAZARDOUS N MATERIAL RELEASED PLACARD	CLASS# PLACARD ID#	8 7 6 5	11 12 7 6 5			
		1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	18 - LIMO (L		3 - PEDESTRIAN/SKATER 4 - WHEELCHAIR (ANY TYPE)	10/	11 1 2			
_0	13	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR	20 - OTHER	VEHICLE 2 EQUIPMENT 2	5 - OTHER NON- MOTORIST 6 - BICYCLE	9 (9 3 3			
UN	UNIT TYPE 5 - CARGO VAN BICYCLE 6 - VAN (9-15 SFATS) 11 - ALL TERRAIN VEHICI		BICYCLE 11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME		. WITH NIDER OR	7 - TRAIN 9 - UNKNOWN OR HIT/SKIP	7.				
(ATV/UTV)								12	7 6 5 12			
# of TRAILING UNITS												
		WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	MOUS MODE	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE		DITIONAL STATEMENT STATEME	9 - UNKNOWN	10 2 -	3 2 2			
	2	1-YES 2-NO 9-OTHER/UNKNOW	NN AUTONOMOUS MODE LEVEL	2. DADTIAL ALITOMATION	4 - HIGH	H AUTOMATION L AUTOMATION		8 4 -	/ 			
	1 - NONE 6 - BUS - CHARTER/TOUR 2 - TAXI 7 - BUS - INTERCITY			11 - FIRE 12 - MILITARY	16 - FAF		21 - MAIL CARRIER 99 - OTHER JUNKNOWN	8 7 6 5	4 8 7 5 4			
	1 1	3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY		13 - POLICE 14 - PUBLIC UTILITY	18 - SNOW REMOVAL 19 - TOWING			6	6			
	SPECIAL 5 - BUS-TRANSITICOMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT FUNCTION				20 - SAFETY SERVICE PATROL				12 12 12			
10	J 1 / NOT APPLICABLE MOTOR VEHICLE CHASSIS			ASSIS 9 - CARGO TANK 13 - AUTO TRANSPORTER			~ M ~	★ 1 ■				
	RGO BODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10 - FL/ 11 - DU		4 - GARBAGE/REFUSE 9 - OTHER / UNKNOWN	,	9 📲 3 9 🖺 3			
	1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES		7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 10 - DISABLED FROM PRIOR			6	$\begin{array}{ c c }\hline \\ \hline \\ \hline \\ \hline \end{array}$				
	HICLE FECTS	2 - HEAD LAMPS 3 - TAIL LAMPS 1 - INTERSECTION -	5 - STEERING 6 - TIRE BLOWOUT 3 - INTERSECTION - OTHER	8 - TRAILER EQUIPMENT DEFECTIVE 6 - BICYCLE LANE	ACC	IDENT	12 - FIRST RESPONDER		6 6 6			
NON-		MARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI	VEWAY ACCESS	AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	■ - UNDERCARRIAGE [14] □ - ALL AREAS [15]			
LOCA	ATION AT	N AT UNMARKED 5 - TRAVEL LANE-OTHER LOCATION			TRA	ILS		UNIT NOT AT SCENE [16]				
		1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE		GOTIATING A CURVE TERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	ı	NITIAL POINT OF CONTACT			
		3 - STRIKING		9 - LEAVING TRAFFIC LANE 10 - PARKED	AVING TRAFFIC LANE SPECIFIED LOCATION 20 - C ARKED 15 - WALKING, RUNNING, 21 - S			1 2 0-NO DAMAGE	E 14 - UNDERCARRIAGE			
AC	CTION 5-BOTH STRIKING ACTION 5-MAKING RIGHT TURN 11-SL		11 - SLOWING OR STOPPED IN TRAFFIC	IN TRAFFIC 16 - WORKING			DIAGRAM 99 - UNKNOWN					
	9 - OTHER / UNKNOWN 12 - DRIVERLESS		12 - DRIVERLESS	17 - PUS	SHING VEHICLE		13 - TOP					
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM	17 - VI91	ION OBSTRUCTION	21 - LYING IN ROADWAY	TDACE/OWAY FLOW	TRAFFIC			
	:	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE/ACDA	A PARKED POSITION 14 - STOPPED OR PARKED	18 - OPE EQL	ERATING DEFECTIVE JIPMENT	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN			
10	5.5	4 - RAN STOP SIGN 5 - UNSAFE SPEED	9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID 16 - MIDONIC WAY	FAL	AD SHIFTING/ LING/SPILLING ROPER CROSSING	ROADWAY 99 - OTHER IMPROPER	1 - ONE-WAY 2 2 - TWO-WAY	6 2-SIGNAL 5-YIELD SIGN			
CONTR	RIBUTING	6 - IMPROPER TURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	zu - IMP	NO. EN UNUGOING	ACTION	# OF THROUGH LANES	3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING			
	IMSTANCES							# OF THROUGH LANES ON ROAD	1 - NOT INVOLVED			
SEQL	UENCE OF	EVENTS						2	2 - INVOLVED - ACTIVE CROSSING			
ā	. 1	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS 11 - CROSS CENTERLINE -			22 - WORK ZONE	-	3 - INVOLVED - PASSIVE CROSSING			
¹ C) 8	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	18 - ANIN	MAL - FARM MAL - DEER	MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	L I	INIT / NON-MOTORIST DIRECTION			
2 4		4 - JACKKNIFE 5 - CARGO / EQUIPMENT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOT	MAL - OTHER FOR VEHICLE IN NSPORT	SHIFTING CARGO OR ANYTHING SET IN		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
<u>' 4</u>	. 0	LOSS OR SHIFT	IO - UNUGO MEDIAN	15 - PEDALCYCLE		KED MOTOR VEHICLE	MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE		3 - EAST 7 - SOUTHEAST			
3				COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT	FROM 4 TO	3 4-WEST 8-SOUTHWEST			
	-	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CUF		0 -WORKZONE MAINTENANCE EQUIPMENT		9 - OTHER / UNKNOWN			
4		/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER 33 - MEDIAN CHARDRAII	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	44 - DITC 45 - EMB 46 - FENI	ANKMENT	i1 - WALL i2 - BUILDING	UNIT SPEED	DETECTED SPEED			
5.		27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	41 - OTHER POST, POLE OR SUPPORT	47 - MAIL 48 - TREI	BOX	3 - TUNNEL 4 - OTHER FIXED OBJECT	6,0,	1 1-STATED/ESTIMATED SPEED			
		29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT		HYDRANT	9 - OTHER / UNKNOWN		2 - CALCULATED / EDR			
6								POSTED SPEED	3 - UNDETERMINED			
			-					2 5				
HSY8304 O	1 0H1U 1/19 [7	FIRST HARMFUL EVENT	2	OST HARMFUL EVENT					PAGE OF			

OHIO DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER									
OF PU	SERVICE - PROTECTION	WICTORIST / NO	VIN-IVIO	IUKIS) [_2	0 2	5 2	7 8	8 9	1	
M UNIT#	0. 1.								2 0 2 5 2 7 8 9 AGE GENDER								
0	L RODA JENNIFER RODRESS: STREET, CITY, STATE, ZIP												4 0 5 1 9 7 7 4 8 F				
1 s 13417	417 GRANNIS RD GARFIEI						D HEIGHT OH 44125					CONTACT PHONE - INCLUDE AREA CODE					1 1
-	INJURED EMS	AGENCY (NAME)	INJURED TA	KEN TO: MEDICAL				EQUIPME		Т	DOT-COMPLI		POSITION	AIR BA	AG USAGE	EJECTION	TRAPPED
<u>5</u>							Щ.	L	0 4		MC HELMET	0_	_ 1	4		_1	11
OL STATE	OPERATOR LICEN	SE NUMBER		OFFENSE CHA			CODE		ENSE DESCRIPT		CONT	201			ON NUMBER	17	
T O OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER	331.34 		COHOL / DRUG SUSPECTE	D I		AILURE ONDITION		ALCO	IOL TEST	_)25210 DRUG	TEST(S)	
R 1 s 4	SELECTOFICE		DISTRACTED	1	ALCOH	-	RUUANA		1 .	STATUS	TYPE 1	VALUE	STA	TUS	TYPE 1	RESUL	T SELECT UP TO 4
M UNIT#	NAME: LAST, FIRST,	MIDDLE		<u>'</u>	OTHER	RDRUG			•	ļ <u>'</u>	1	DATE	OF BIRTH		<u> </u>	IGE .	GENDER
О Т											l, ,	1 1 1	 I	1 1			1 1
R ADDRESS	S: STREET, CITY, STATE, ZIP										CONTAC	PHONE - INCLUDE AREA	CODE				
s T																	
/ INJURIES N	INJURED EM: TAKEN BY	S AGENCY (NAME)	INJURED TA	AKEN TO: MEDICAL	L FACILITY (NAME, CITY)	USED	EQUIPME	NI I		DOT-COMPLIA		POSITION	AIR BA	IG USAGE	EJECTION	TRAPPED
N OL STATE	OPERATOR LICEN	SE NUMBER		OFFENSE CHA	RGED		LOCAL	OFFE	NSE DESCRIPT	TION				CITATIO	ON NUMBER		I L
M 0 T							CODE										
O OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY			COHOL / DRUG SUSPECTE		cc	ONDITION	STATUS	ALCOH TYPE	OL TEST VALUE	STAT	us	DRUG TYPE	TEST(S) RESULT	SELECT UP TO 4
S					ALCOH OTHER		RJUANA				ا ا	-					
M UNIT#	NAME: LAST, FIRST,	MIDDLE	1				-					DATE	OF BIRTH		A	AGE .	GENDER
T O											Ш						
R ADDRESS	S: STREET, CITY, STATE, ZIP										CONTAC	F PHONE - INCLUDE AREA	CODE				
T / INJURIES	INJURED EMS	S AGENCY (NAME)	INJURED TA	KEN TO: MEDICAL	FACILITY (N	IAME, CITY)	SAFETY	EQUIPMEN	ıT	1		SEATING	POSITION	AIR BA	G USAGE	EJECTION	TRAPPED
N O N	ВУ						0025	L			MC HELMET	INT L					
OL STATE	OPERATOR LICEN	SE NUMBER		OFFENSE CHA	RGED		LOCAL CODE	OFFE	ENSE DESCRIPT	TION		<u>'</u>		CITATIO	ON NUMBER		,
O OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER		ALC:	COHOL / DRUG SUSPECTE	.n		ONDITION		AI COL	IOL TEST			DRUG	TEST(S)	
R I	SELECT UP TO 2	RESTRICTION SELECT UP 103	DISTRACTED BY		ALCOH		RJUANA		JADITION	STATUS		VALUE	STAT	rus	TYPE		T SELECT UP TO 4
S T					OTHER	DRUG						• 📖					
1 - FATAL	IURIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT DEPLOYE	AIR BAG ED		1 - CLASS A	ASS		1 - ALCOHOL	INTERLOCK	ON(S)	1 - NOT DISTRACTE	R DISTRACTION D		1 - NONE GI	TEST STA	ITUS
2 - SUSPECTED SERIO		(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FF			2 - CLASS B			2 - CDL INTRA	STATE ONL	Y	2 - MANUALLY OPE ELECTRONIC CO			2 - TEST RE		
3 - SUSPECTED MINOR 4 - POSSIBLE INJURY	KINJUKT	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE						3 - CORRECTIVE LENSES 4 - FARM WAIVER			DEVICE (TEXTING, TYPING, DIALING)			3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		
5 - NO APPARENT INJU	URY	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE				5 - M / C MOPED ONLY	5 - FXCEPT CLASS A BUS				3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE			4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN			
IN II IDEC	D TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	9 - DEPLOYMENT UNKNOWN 6 - NO VALID OL				& CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER			AILER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE			o reor orear, resource situations			
1 - NOT TRANSPORTED /TREATED AT SCENE	D	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE							8 - INTERMED		SE	5 - OTHER ACTIVITY	WITH AN				
2 - EMS	_	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF		EJECTION		OL ENDOR	SEMENT		9 - LEARNER'S RESTRICT			6 - PASSENGER	VICE		1 - NONE	ALCOHOL TE	ST TYPE
3 - POLICE 9 - OTHER / UNKNOWN	- POLICE TRUCK CAB		1 - NOT EJECTED 2 - PARTIALLY EJECTED						10 - LIMITED T	10 - LIMITED TO DAYLIGHT ONLY		7 - OTHER DISTRACTION INSIDE THE VEHICLE			2 - BLOOD		
	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,		3 - TOTALLY EJECTED			P - PASSENGER 11 - 12 -			11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER		8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE			3 - URINE			
SAFETY 1 - NONE USED	EQUIPMENT	PICK-UP WITH CAP) 12 - PASSENGER IN	4 - NOT APPLICA	BLE		N - TANKER Q - MOTOR SCOOTER			13 - MECHANI (SPECIAL E	ICAL DEVICE BRAKES, HAN		9 - OTHER / UNKNO	WN		4 - BREATH 5 - OTHER		
2 - SHOULDER BELT O		UNENCLOSED CARGO AREA		TRAPPED		R - THREE-WHEEL MOT	ORCYCLE		CONTROLS ADAPTIVE	S, OR OTHER DEVICES)							
3 - LAP BELT ONLY US 4 - SHOULDER & LAP E	BELT USED	14 - RIDING ON VEHICLE	1 - NOT TRAPPED 2 - EXTRICATED E			S - SCHOOL BUS	DAIL EDG		14 - MILITARY 15 - MOTOR V		ONLY				1 - NONE	DRUG TEST	ГТҮРЕ
5 - CHILD RESTRAINT FORWARD FACING	;	EXTERIOR (NON-TRAILING UNIT)	MECHANICAL MEANS			T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT		WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR					2 - BLOOD				
6 - CHILD RESTRAINT REAR FACING	SYSTEM -	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	3 - FREED BY NON-MECHANICAL MEANS					17 - PROSTHETIC AID 18 - OTHER		CONDITION 1 - APPARENTLY NORMAL			3 - URINE				
7 - BOOSTER SEAT 8 - HELMET USED												2 - PHYSICAL IMPA 3 - EMOTIONAL (E.			4 - OTHER		
9 - PROTECTIVE PADS (ELBOWS, KNEES, ET	TC.)					GEND	ER					ANGRY, DISTURBE				DRUG TEST R	ESULT(S)
10 - REFLECTIVE CLO						F - FEMALE M - MALE						4 - ILLNESS 5 - FELL ASLEEP, F	AINTED,		1 - AMPHET 2 - BARBITU	JRATES	
/ BICYCLE ONLY 99 - OTHER / UNKNOW	VN					U - OTHER/UNKNOWN						FATIGUED, ETC. 6 - UNDER THE INF	LUENCE OF		3 - BENZOD 4 - CANNAB		
												MEDICATIONS / E			5 - COCAINE 6 - OPIATES		
												9 - OTHER / UNKNO	WN		7 - OTHER 8 - NEGATIV	/E RESULTS	

HSY8306 OH1M 1/19 [760-1500] PAGE OF

OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER						
w =						2 0 2 5 2 7 8 9						
unit#	NAME: LAST, FI	RST, MIDDLE	DAV	'ID JOSEI	РН	DATE OF BIRT	1 9 9 6	AGE 2 9	GENDER M			
ADDRESS: STRE	EESS: STREET, CITY, STATE, ZIP						DE					
ADDRESS: STRE	GRANNI	S RD GARFIELD HT										
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, GITY)	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT SEATING I	POSITION AIR BAG USAG	E EJECTION	TRAPPED 1			
UNIT#	NAME: LAST, FI	RST, MIDDLE			'	DATE OF BIRT	TH .	AGE	GENDER			
								ШШ				
ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING I	POSITION AIR BAG USAG	EJECTION	TRAPPED			
	TAKEN BY				USED	MC HELMET						
UNIT#	NAME: LAST, FI	RST, MIDDLE				DATE OF BIRT	TH .	AGE	GENDER			
						CONTACT BUONE						
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CO	DE	1 1	1			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING I	POSITION AIR BAG USAG	EJECTION	TRAPPED			
						MC HELMET						
UNIT#	NAME: LAST, FI	RST, MIDDLE			DATE OF BIRT	Н	AGE	GENDER				
ADDDESS, ares					CONTACT PHONE - INCLUDE AREA CO							
ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CO	DE I I	1 1	1			
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING I	POSITION AIR BAG USAG	EJECTION	TRAPPED			
	TAKEN BY				USED	DOT-COMPLIANT MC HELMET						
1 - FATAL		JURIES	1 - NONE USED VEHICLE OC		SEATI 1 - FRONT - LEFT SIDE (MOTORCYC 2 - FRONT - MIDDLE	NG POSITION LE DRIVER)	AIR B	AG USAGE				
2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN			2 - SHOULDER 3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST FORWARD F	BELT ONLY USED NLY USED & LAP BELT USED RAINT SYSTEM - ACING RAINT SYSTEM - G EAT ED EPADS USED HEES, ETC.) // CE (LOTHING /PEDESTRIAN NLY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORC) 5 - SECOND - MIDDLE 6 - SECOND - MIDDLE 6 - SECOND - MIDDLE 7 - THIRD - LEFT SIDE (MOTORCYCL 8 - THIRD - NIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCLC (NON-TRALING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRALING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRALING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	E SIDE CAR) CAB SED CARGO AREA WITH CAP) CARGO AREA	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE					
F - FEMALE M - MALE U - OTHER/UNKN	IOWN	ENDER					TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS					
NAME: LAST, FIRST	T, MIDDLE					DATE OF BIRT	н	AGE	GENDER			
1												
ADDRESS: STREET	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA	A CODE					
						1		AGE I	GENDED			
ADDRESS: STREE						CONTACT PHONE - INCLUDE ARE:		AGE	GENDER			
	Γ, MIDDLE					1	H	AGE	GENDER			
NAME: LAST, FIRST	T, MIDDLE ST, CITY, STATE, ZIP					DATE OF BIRT	H A CODE	AGE	GENDER GENDER			
NAME: LAST, FIRST ADDRESS: STREET	T, MIDDLE TT, CITY, STATE, ZIP T, MIDDLE					DATE OF BIRT CONTACT PHONE - INCLUDE AREA DATE OF BIRT	H A CODE					
NAME: LAST, FIRST ADDRESS: STREET	T, MIDDLE TT, CITY, STATE, ZIP T, MIDDLE					DATE OF BIRT	H A CODE					

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