

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

☐ PHOTOS TAKEN		☒ OH-2	☐ OH-3
☐ SECONDARY CRASH		☐ OH-1P	☐ OTHER
☐ Private Property			

LOCAL INFORMATION	
GARFIELD HEIGHTS	
REPORTING AGENCY NAME *	
GARFIELD HEIGHTS	

COUNTY *	LOCALITY *	LOCATION: CITY, VILLAGE, TOWNSHIP *	
1 8	1	GARFIELD HTS	

ROUTE TYPE	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME	ROAD TYPE
			MCCRACKEN	R D
ROUTE TYPE	ROUTE NUMBER	PREFIX	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE
			JOHNSTON	P K

REFERENCE POINT	DIRECTION	ROUTE TYPE	ROAD TYPE
1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	1 - NORTH 2 - SOUTH 3 - 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 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

DISTANCE	DISTANCE	INTERSECTION RELATED	
5 0	2	☐ WITHIN INTERSECTION OR ON APPROACH	
		☐ WITHIN INTERCHANGE AREA	
		NUMBER OF APPROACHES	

LOCATION - FIRST UADMEII EVENT		MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE	
0 1		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		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		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	WORK ZONE TYPE	LOCATION OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE
☐ WORKERS PRESENT ☐ LAW ENFORCEMENT ☐ PRESENT	1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	1 - BEFORE THE 1ST WORK ZONE 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER / UNKNOWN	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER / UNKNOWN

LIGHT CONDITION	WEATHER
3	4

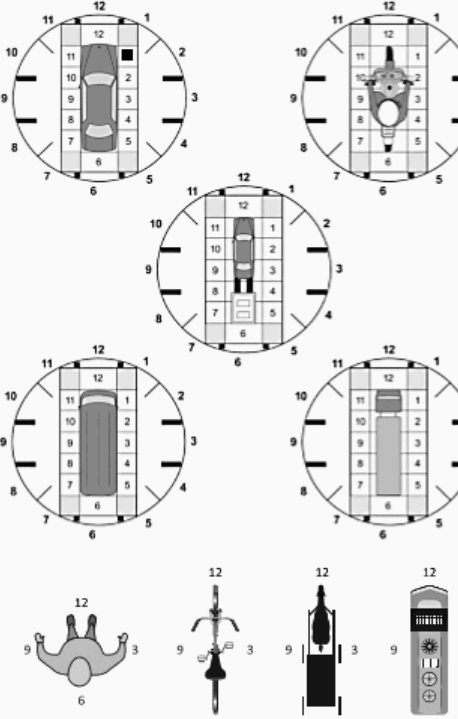
NARRATIVE		SCENE DIAGRAM	
UNIT #01, WHILE TRAVELING WESTBOUND ON MCCRACKEN RD. NEAR JOHNSTON PARKWAY, DROVE INTO A CONSTRUCTION AREA WHERE A SECTION OF THE ROADWAY WAS MISSING. DURING THIS TIME, SEVERAL OTHER VEHICLES DROVE INTO THE SAME PORTION OF ROADWAY CAUSING THE CONSTRUCTION CONES TO BE KNOCKED OVER LEAVING THE CONSTRUCTION AREA UNPROTECTED/UNMARKED.			

CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME	REPORT TAKEN BY
1 0 2 9 2 0 2 5 2 2 3 7	1 0 2 9 2 0 2 5 2 2 3 9	1 0 2 9 2 0 2 5 2 2 4 5	1 0 2 9 2 0 2 5 2 3 4 5	☒ POLICE AGENCY ☐ MOTORIST

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME *	CHECKED BY OFFICER'S NAME *	SUPPLEMENT
6 0	5	7 1	A. Hlywa	T. Baon	☐ (CORRECTION = ADDITION)

OFFICER'S BADGE NUMBER *	CHECKED BY OFFICER'S BADGE NUMBER *
0 2 1	S 2 0

OWNER	UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE TOWING ATS AUTO (Same As Driver)	OWNER PHONE: INCLUDE AREA CODE (Same As Driver)		
	OWNER ADDRESS: STREET, CITY, STATE, ZIP 2419 E 83 ST REAR CLEVELAND OH 44104 (Same As Driver)				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
VEHICLE	LP STATE OH	LICENSE PLATE # 003V2YK	VEHICLE IDENTIFICATION # 1N4AL3AP3FN356517	VEHICLE YEAR 2015	VEHICLE MAKE Nissan
	INSURANCE VERIFIED	INSURANCE COMPANY FOUNDERS	INSURANCE POLICY # OAFR183183	VEHICLE COLOR BLK	VEHICLE MODEL Altima
	TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
	☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT		# OCCUPANTS 01	HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ PLACARD	
	VEHICLE WEIGHT GVWR/GVWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.				
	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 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS MODE LEVEL 0 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					
EVENT(S)	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 PRE-CRASH ACTION 01 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 1 9 9 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 4 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				

LOCAL REPORT NUMBER 20252834	
DAMAGE DAMAGE SCALE 1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN 4	
DAMAGED AREA(S) INDICATE ALL THAT APPLY 	
☐ - NO DAMAGE [0] ☐ - TOP [13] ☐ - UNIT NOT AT SCENE [16] ☐ - UNDERCARRIAGE [14] ☐ - ALL AREAS [15]	
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 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 2 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 30 POSTED SPEED 35	DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED



MOTORIST / NON-MOTORIST	UNIT # 01	NAME: LAST, FIRST, MIDDLE SADDLER ADRAIN TAVARIS										DATE OF BIRTH 11131980					AGE 44		GENDER M					
	ADDRESS: STREET, CITY, STATE, ZIP 3243 E 132 ST CLEVELAND OH 44120												CONTACT PHONE - INCLUDE AREA CODE 											
	INJURIES 5		INJURED TAKEN BY 1		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 								
	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 											
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	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 		☐ 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 		☐ 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		

[illegible]

OHIO TRAFFIC CRASH REPORT
DIAGRAM / NARRATIVE CONTINUATION

OH-2

LOCAL REPORT NUMBER 20252834	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 10 D 29 Y 2025	
IN COUNTY OF 18	CRASH LOCATION GARFIELD HEIGHTS		
At the time of the crash Unit 1 was bearing OH dealer Reg: 003V2YK. A search of Unit 1's VIN through LEADS listed the vehicle I observed as a black Nissan Altima, which is currently registered with OH Reg: KQE7755 to a Villard Bradley with a phone # of 216-501-2509.			
OFFICER'S SIGNATURE X		BADGE NUMBER 021	