| OHIO DEPARTM OF PUBLIC SAF SAPETY - SERVICE - PROT | TRAFFIC | CRAS | LOCAL REPORT NUMBER* | | | | | | | | | | | |
|--|---|---|---|---|---|--|--|--|--|---|--|--|--|--|
| PHOTOS TAKEN OH2 OH3 LOCAL INFORMATION I-480E | | | | | | | | 2 0 2 5 2 8 8 8 | | | | | | |
| SECONDARY CRASH | | OTHER | REPORTING AGENC | | LITO | 0 1 1 8 | HIT/SKIP 1 - Solved 2 - Unsolved | NI IMRED OF LIMITS | 9 98 - ANIMAL 9 99 - UNKNOWN | | | | | |
| COUNTY* LOCALIT | COUNTY* LOCALITY* LOCATION OF VINIAGE | | | | | | | | TE/TIME * | CRASH SEVERITY | | | | |
| 1 8 1 | 1-CIY 2-VIII AGE * | | | | | | | | 1-FATAL 2-SERIOUS INJURY SUSPECTED | | | | | |
| ROUTE TYPE | DUTE TYPE ROUTE NUMBER PREFIX 1 · NORTH LOCATION ROAD NAME ROAD TO 2 · SOUTH 3 · EAST | | | | | | | | DECIDEES | 3 - MINOR INJURY SUSPECTED | | | | |
| Госат | | _ 3 | 4 - WEST | I-480 | | | H _I W _I | 4 1 1 4 1 | 0 2 0 4 | 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE | | | | |
| ROUTE TYPE | ROUTE NUMBER | PREFIX | 1 - NORTH 2 - SOUTH 3 - EAST | | NCE ROAD NAME (ROAD, MILEPOST, HOUSE # |) | ROAD TYPE | LONGITUDE DECIMAL | | ONLY | | | | |
| REFE | | | 4 - WEST | BROAI | | | $A_{\downarrow}V_{\downarrow}$ | 8 1 1 6 2 | | | | | | |
| 1 - INTERSECTION 2 - MILE POST | 1 - NORTH | | POLITE TYPE ROAD TYPE ERSTATE ROUTE (TP) AL - ALLEY HW - HICHWAY RO - ROAD DERAL US ROUTE AV - AVENUE LA - LANE SQ - SQUARE ATE ROUTE BL - BOULEVARD MILEPOST ST - STREET CR - CIRCLE OV - OVAL TE - TERRACE CT - COURT PK - PARKWAY TL - TRAIL | | | | | INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH | | | | | | |
| 1 3 - HOUSE # | 2 - SOUTH 3 - EAST 4 - WEST | SR - ST | | | | | | ☐ WITHIN INTERCHANGE AREA NUMBER OF APPROACHES | | | | | | |
| DISTANCE COMM DECEDEMAGE | DISTANCE | TR - NUI | UMBERED TOWNSHIP DR - DRIVE PI - PIKE WA - WAY OUTE HE - HEIGHTS PL - PLACE | | | | ROADWAY | | | | | | | |
| | 2 - Feet 3 - Yards | | | | | | □ ROADWAY DIVIDED | | | | | | | |
| - 4 1 ON DOAD | CATION OF EIDET HADMEI II DWAY 9 - CROSSOVI | | | | MANNER OF CRASH COLLISION/IM | PACT | | DIRECTION OF TRAVEL | | MEDIAN TYPE | | | | |
| 0 1 2-ON SHOUL 3-IN MEDIA 4-ON ROAD | JLDER 10 - DRIVEWA N ACCESS | Y / ALLEY | 1,1, | 1 - NOT COLLISION BETWEEN TWO MOTOR | 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE | | | 1 - NORTH 2 - SOUTH | (<4 F | DED FLUSH MEDIAN EET) | | | | |
| 5 - ON GORE 6 - OUTSIDE TRAFFICI | E CROSSIN 12 - SHARED I | G USE PATHS | VEHICLES IN 5 - ANNOLE TRANSPORT 7 - SIDESWIPE, SAME DIRECTION 2 - REAR-END 8 - SIDESWIPE, OPPOSITE DIRECTION | | | | | 3 - EAST 4 - WEST | D FLUSH MEDIAN ET) D, DEPRESSED MEDIAN | | | | | |
| 7 - ON RAMP 8 - OFF RAM | | OTH | | 3 - HEAD-ON | 9 - OTHER / UNKNOW | /N | | | (ANY | DED, RAISED MEDIAN TYPE) ER / UNKNOWN | | | | |
| | | | | | | | | | | | | | | |
| ☐ WORK ZONE RELATED | | LANE CLOSURE | ONE TYPE | | LOCATION OF CRASH | IST WORK ZONE | | CONTOUR | CONDITIONS | SURFACE | | | | |
| WORKERS PRESENT LAW ENFORCEMENT PRESENT | 3- | LANE SHIFT/CROS WORK ON SHOUL OR MEDIAN | SSOVER DER | | WARNING SIGI 2 - ADVANCE WAI 3 - TRANSITION A | RNING AREA REA | | _2_ | _ 1 | _ 2_ | | | | |
| | | INTERMITTENT OF OTHER | MOVING WORK | | 4 - ACTIVITY ARE 5 - TERMINATION | | | 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE | 1 - DRY 2 - WET 3 - SNOW | 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, | | | | |
| ACTIVE SCHOOL ZONE | 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 1 - CLEAR 6 - SNOW M. (JUNKNOWN 5 - V. SEVERE CROSSWINDS 7 - SEVERE CROSSWINDS 7 - SE | | | | | | | | | 6 - WATER (STANDING, MOVING) 7 - SLUSH | STONE 5 - DIRT 9 - OTHER | | | | |
| 5 - DARK - UNKNO | WAY NOT LIGHTED OWN ROADWAY LIGHTING | | 3 - FOG, S 4 - RAIN 5 - SLEET | MOG, SMOKE , HAIL | 8 - BLOWING SAND, SOIL, DI 9 - FREEZING RAIN OR FREE 99 - OTHER / UNKNOWN | | | | 9 - OTHER/UNKNOWN | /UNKNOWN | | | | |
| 9 - OTHER / UNK | NOWN | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| UNIT ONE WH | ·III Ε ΤΡΔ\/ΕΙ Ι | NG FAS | STROLING | ON 1-48 | 10 | | | | | Indicate the north direction with | | | | |
| TOWARDS TH | | | | | | | } | | | an "N" on the compass diagram. | | | | |
| | | | | | SILA. | | | i i | | · | | | | |
| DEER THAT R | (AIN ACRUSS | THE K | JAD HEAI | J ON. | | | H | H | | | | | | |
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| | | | | | | | - 1 | UNIT 1 | | | | | | |
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| | | | | | | | i | | | NORTH | | | | |
| | | | | | | | - 1 | | | NOT TO SCALE | | | | |
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| | | | | | | | 1 400 515 | | | | | | | |
| | | | | | | <u>. </u> | I-480 EAST | | <u> </u> | <u>, , ,</u> , | | | | |
| CRASH REPORTED DATE/TIME DISPATCH DATE/TIME ARRIVAL DATE/TIME 1.1.1.1.0.16.12.10.12.15.1.0.13.12.19.1.1.1.0.16.12.10.12.15.1.0.13.12.19.1.1.1.1.0.16.12.10.12.15.1.0.13.13.10.10.13.12.19.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1 | | | | | | | 01313101 | SCENE CLEARED DATE/TIME REPORT TAKEN BY | | | | | | |
| TOTAL TIME ROADWAY OTHER INVESTIGATION TOTAL OFFICER'S NAME * CHECKED BY TIME MINITES AND A MAJOR OF TOTAL OFFICER'S NAME * CHECKED BY TIME MINITES AND A MAJOR OFFICER'S NAME * CHECKED BY TIME OF TOTAL OFFICER'S NAME * CHECKED BY TIME OFFICER'S NAME | | | | | | | | DFFICER'S NAME* | | | | | | |
| CLOSED | IIME | MINUTE | M. S | ulieman _{OFFI} | CER'S BADGE NUMBER* | | V. Walke | CHECKED BY OFFICER'S BADGE NUMBER* USUPPLEMENT (CORRECTIONADDITION (CORRECTIONADDITION) | | | | | | |
| | | | | | | | | L 1 5 | | | | | | |

| | OHI OF I SAFET | IO DEPARTMENT PUBLIC SAFETY TY - SERVICE - PROTECTION | | LOCAL REPORT NUMBER 2 0 2 5 2 8 8 8 | | | | | | | | | | |
|----------|---------------------------------------|--|---|--|--|--|--|--|---|--|--|--|--|--|
| | UNIT# | OWNER NAME: LAST, FIRST, MIDDLE MUKEN YIRI | (🖃 Sar | me As Driver) | OWNER PHON | NE: INCLUDE AREA CODE | (Same As Driver) | DAMAGE DAMAGE SCALE | | | | | | |
| NER | | SS: STREET, CITY, STATE, ZIP | (Same As D | • | | | | 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE | | | | | | |
| MO | 3492 | BLANCHE A | AVE | CLEVELA | | TS OH CARRIER PHONE: INCLUDE | 44118 AREA CODE | 3 2- MINOR DAMAGE | 9 - UNKNOWN | | | | | |
| | | | | | DAMAGED AREA(S) | | | | | | | | | |
| Ī | LP STATE | LICENSE PLATE # KLQ7059 | | PEHICLE IDENTIFICATION # $2 F_1 5_1 4_1 S_1 H_1 5_1 1_1 3_1 3_1$ | VEHICLE YEAR VEHICLE MAKE | | | 12 | INDICATE ALL THAT APPLY | | | | | |
| | INSURANCE OMPANY INSURANCE POLICY# | | | | VEHICLE COLOR VEHICLE MODEL | | | 10 | 2 10 12 12 | | | | | |
| | - VEN | TYPE OF USE COMMERCIAL GOVERNMENT RESPONSE INTERLOCK # OCCUPANTS GARU422/5533 US DOT # VEHICLE WEIGHT GOWINGOWR LOCAL GROWN COMMERCIAN VEHICLE WEIGHT GOWINGOWR VEHICLE WEIGHT | | | 397102 WHI CIVIC | | | 10 2 - | 3 9 3 | | | | | |
| | ☐ COMMERC | | | VEHICLE WEIGHT GVWR/GCWR | | HAZARDOUS I | ΜΑΤΕΡΙΔΙ | 7 5 4 5 | 8 4 7 5 4 | | | | | |
| | □ DEVICE | | | 2 - 10,001 - 26K LBS. | 1 - | MATERIAL RELEASED PLACARD | CLASS# PLACARD ID# | 7 6 5 | 7 6 5 | | | | | |
| | | 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 0 - 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK | | | 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIANISKATER 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 20 - OTHER VEHICLE 25 - OTHER NON- MOTORIST | | | 10/ | 11 1 2 | | | | | |
| | LINIT TYPE | 4 - PICK UP 5 - CARGO VAN | 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE | 16 - FARM EQUIPMENT | 21 - HEAVY EQUIPMENT 26 - BICYCLE 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP | | | , | - 8 1 4 - 3 | | | | | |
| 9 | | 6 - VAN (9-15 SEATS) | (ATV / UTV) | 17 - MOTORHOME | | | | 12 7 5 12 | | | | | | |
| VEHICLE | | # OF TRAILING UNITS | | | | | | 10 12 | 2 10 11 1 2 | | | | | |
| | . 2 | WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? O - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION | | | 3 - CONDITIONAL 9 - UNKNOWN AUTOMATION 4 - HIGH AUTOMATION | | | 9 10 2 3 | 3 9 9 3 | | | | | |
| | | 1 - YES 2 - NO 9 - OTHER / UNKNOW | most terter | | 5 - FULL AUTOMATION | | | 8 7 5 | 7. | | | | | |
| | 0 1 | | | 12 - MILITARY | 16 - FARM 17 - MOWIN 18 - SNOW F 19 - TOWING | G REMOVAL | 21 - MAIL CARRIER 99 - OTHER /UNKNOWN | 7 6 5 | 7 6 5 | | | | | |
| | | L 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT | | | 20 - SAFETY SERVICE PATROL | | | | 12 12 12 | | | | | |
| | 1011 | 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 | 9 - CARGO TANK 1 | | 2 - CONCRETE MIXER 3 - AUTO TRANSPORTER 4 - GARBAGE/REFUSE | a M p. | | | | | | |
| | CARGO BODY TYPE | Z-80S (| 4 - LUGGING 6 - CARGO VANIENCLUSED BUX 7 - GRAINCHIPS/GRAVEL | | 11 - DUMP 99 - OTHER / UNKNOWN | | | ,609, | 9 = 3 9 3 9 3 9 | | | | | |
| | VEHICLE | 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE | | 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE | 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 10 - DISABLED FROM PRIOR ACCIDENT | | | 6 | 6 6 6 | | | | | |
| Ī | DEFECTS | 1 - INTERSECTION - 3 - INTERSECTION - OTHER 6 - BICYCLE LANE | | 6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE | 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER 10 - DRIVEWAY ACCESS AT INCIDENT SCENE | | | - NO DAMAGE [0] | UNDERCARRIAGE [14] | | | | | |
| | NON-MOTORIST LOCATION AT IMPACT | RIST CROSSWALK CROSSWALK 8 - SIDEWALK 1AT 2 - INTERSECTION - 5 - TRAVEL LANE-OTHER LOCATION UMMARKED 5 - TRAVEL LANE-OTHER LOCATION | | 11 - SHARED USE PATHS OR 99 - OTHER / UNKNOWN TRAILS | | | ☐ - TOP [13] ☐ - UN | - ALL AREAS [15] IT NOT AT SCENE [16] | | | | | | |
| | | 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 5 - BOTH STRIKING 5 - MAKING LEFT URN 6 - MAKING LIFTURN 1 - STRUCK 2 - STRUCK 2 - STRUCK 3 - STRUCK 1 - STRUCK 2 - STRUCK 2 - STRUCK 3 - STRUCK 1 - STRUCK 1 - STRUCK 1 - STRUCK 2 - STRUCK 3 - STRUCK 3 - STRUCK 1 - STRUCK 1 - STRUCK 1 - STRUCK 2 - STRUCK 3 - STRUCK 5 - ST | | 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE 14 - ENTERING OR CROSSING 19 - STANDING | | | II. | NITIAL POINT OF CONTACT | | | | | | |
| | | | | 10 - PARKED | 15 - WALKIN | ED LOCATION IG, RUNNING, IG, PLAYING | 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE | 1 2 0-NO DAMAGE | 14 - UNDERCARRIAGE | | | | | |
| | | | | IN TRAFFIC | 16 - WORKIN 17 - PUSHIN | NG | DISABLED VEHICLE 99 - OTHER / UNKNOWN | 1-12 - REFER TO DIAGRAM 13 - TOP | D UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN | | | | | |
| | | 9 - OTHER / UNKNOWN | | | 17 - 1 GOTING TELLICEE | | | 15-10F | TRAFFIC | | | | | |
| | : | 1 - NONE 2 - FAILURE TO YIELD | | | 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY 18 - OPERATING DEFECTIVE 22 - NOT DISCERNABLE | | | TRAFFICWAY FLOW | TRAFFIC CONTROL | | | | | |
| | | 3 - RAN RED LIGHT CLOSE/ACDA 14 - STOPPED OR PARKED 4 - RAN STOP SIGN 9 - IMPROPER LANE ILLEGALLY CHANGING 45 - CHARGING 45 - CH | | | | HIFTING/ G/SPILLING | 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER | 1 - ONE-WAY | 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN | | | | | |
| | | 6 - IMPROPER TURN 11 - DROVE OFF ROAD 16 - WRONG WAY | | 16 - WRONG WAY | 20 - IMPROP | PER CROSSING | ACTION | # OF THROUGH LANES | 3 - FLASHER 6 - NO CONTROL | | | | | |
| | CIRCUMSTANCES | is . | | | | | | ON ROAD | RAIL GRADE CROSSING 1 - NOT INVOLVED | | | | | |
| EVENT(S) | SEQUENCE OF | EVENTS | | | | | | 4 | 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING | | | | | |
| ш | | 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION | ON 7 - SEPARATION OF OPPOSITE DIRECTION OF | | 16 - RAILWAY VEHICLE 22 - WORK ZONE 17 - ANIMAL - FARM MAINTENANCE | | | | | | | | | |
| | | 3 - IMMERSION 4 - JACKKNIFE | UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT | TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION | 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN | | EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN | Ut | NIT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST | | | | | |
| | 2 | CARGO / EQUIPMENT 9 - RAN OFF ROAD LEFT 10 - OFF ROAD LEFT LOSS OR SHIFT 10 - CROSS MEDIAN 14 - PEDESTRIAN 15 - PEDALCYCLE 15 - PEDALCYCLE | | | TRANSP | ORT MOTOR VEHICLE | MOTION BY A MOTOR VEHICLE | | 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST | | | | | |
| | 3 | | COLLISION WITH FIXED OBJECT | | 24 - OTHER MOVABLE OBJECT | | | FROM 4 TO | 3 4- WEST 8-SOUTHWEST | | | | | |
| | 4. | 25 - IMPACT ATTENUATOR / CRASH CUSHION | ICT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST | | 43 - CURB 50 -WORKZONE MAINTENANCE 44 - DITCH EQUIPMENT | | | UNIT SPEED | 9 - OTHER / UNKNOWN DETECTED SPEED | | | | | |
| | | 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT | 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL | 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE | 45 - EMBANK 46 - FENCE | MENI | 51 - WALL 52 - BUILDING 53 - TUNNEL | | DETECTED OFFED | | | | | |
| | 5 | 28 - BRIDGE PARAPET 29 - BRIDGE RAIL | BARRIER 35 - MEDIAN CONCRETE BARRIER | 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT | 47 - MAILBOX 48 - TREE 49 - FIRE HYI | | 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN | 6 5 | 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR | | | | | |
| | 6, , , | 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 6. | | | | | | POSTED SPEED | 3 - UNDETERMINED | | | | | |
| | | | | | | | | 6 0 | | | | | | |
| HSW | 1 78304 OH1U 1/19 [7 | FIRST HARMFUL EVENT | 1 | MOST HARMFUL EVENT | | | | 6 0 | PAGE OF | | | | | |

| OHIO DEPARTMENT MOTORIST / NON-MOTORIST | | | | | | | | LOCAL REPORT NUMBER | | | | | | |
|--|---|---|---|---|--|---|---|---|--------------------------------|---|--|---------------------|--|--|
| OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION | MOTORIST / NO | JN-WOTORI | 51 | | | | _2 | 0 2 5 | _⊥ 2 _⊥ | 8 8 8 | <u>' </u> | | | |
| M UNIT # NAME: LAST, FIRS | | 2 0 2 5 2 8 8 8 8 GENDER | | | | | | | | | | | | |
| O 1 MUKEN YIRMIAH CHAIM | | | | | | | 1 2 2 7 1 9 9 8 2 6 M | | | | | | | |
| _, ,,,, | ADDRESS: STREET, CITY, STATE, ZIP | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | |
| 1 349Z DE/ (110 | SHE AVE IS AGENCY (NAME) | | LEVELAND HTS CAL FACILITY (NAME, CITY) | SAFETY EQUI | | _ | | SEATING POS | SITION | AIR BAG USAGE | EJECTION | N TRAPPED | | |
| 5 BY | | | | USED | 0 4 | - | DOT-COMPLIA MC HELMET | NT | 1 | 1 1 | | $ \cdot _{\perp}$ 1 | | |
| OL STATE OPERATOR LICE | ENSE NUMBER | OFFENSE | CHARGED | | FFENSE DESCRIPT | | | | = | CITATION NUMBE | iR | - - | | |
| 0 T | | | | CODE | | | | | | | | | | |
| O OL CLASS ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED | ALCOHOL / DRUG SUSPECT | | CONDITION | STATUS | ALCOH TYPE | OL TEST VALUE | STATU | | RUG TEST(S) RESU | JLT SELECT UP TO 4 | | |
| s 4 | | 1 | ALCOHOL M | ARIJUANA | 1 | 1 | 1 1 | | 1 | 1 | 1 | II II | | |
| M UNIT# NAME: LAST, FIRS | T, MIDDLE | | Ц | | | | | DATE OF BIRTH AGE GENI | | | | | | |
| 0 0 | | | | | | | | | 1 1 | | 1 1 1 | 1 | | |
| R ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | | PHONE - INCLUDE AREA CODE | | | | | | |
| s T | | | | | | | | | | | | | | |
| TAKEN BY | MS AGENCY (NAME) | INJURED TAKEN TO: MEDI | CAL FACILITY (NAME, CITY) | | | | SEATING POSITION DOT-COMPLIANT | | | AIR BAG USAGE | AIR BAG USAGE EJECTION TRAPPED | | | |
| 0 0107177 007504700400 | THE WINDER | OFFENSE (| PHARGER | LOCAL O | FFENSE DESCRIPT | | MC HELMET | | | CITATION NI IMPE | <u> </u> | | | |
| OL STATE OPERATOR LICE | INSE NUMBER | OFFENSE | JARGED | CODE | FFENSE DESCRIPTI | ION | CITATION NUMBER | | | | | | | |
| O OL CLASS ENDORSEMENT | RESTRICTION SELECT UP TO 3 | DRIVER | ALCOHOL / DRUG SUSPECT | ED | CONDITION | | ALCOH | DL TEST | | DF | RUG TEST(S) | | | |
| R SELECT UP TO 2 | | DISTRACTED BY | | ARIJUANA | | STATUS | TYPE | VALUE | STATU | | | LT SELECT UP TO 4 | | |
| S L L L | | | OTHER DRUG | L | | | | • | 1 | | <u> </u> | | | |
| M UNIT # NAME: LAST, FIRS | T, MIDDLE | | | | | | | DATE OF BI | RTH | | AGE | GENDER | | |
| 0 | | | | | | | | | | | لللل | | | |
| R ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | CONTACT | PHONE - INCLUDE AREA CODE | ÷ | | | | | |
| S T I INJURIES INJURED E | MS AGENCY (NAME) | IN HIDED TAKEN TO MEDI | CAL FACILITY (NAME, CITY) | SAFETY EQUIP | PMENT | | | SEATING POS | LITION T | AIR BAG USAGE | EJECTION | TRAPPED | | |
| N BY | MS AGENCY (NAME) | INJUNED TAKEN TO: MEDIN | SAL PAGILITY (NAME, CITY) | USED | | | DOT-COMPLIAN | | IIION . | AIR BAG USAGE | EJECTION | IRAPPED | | |
| OL STATE OPERATOR LICE | INSE NUMBER | OFFENSE (| CHARGED | LOCAL O | FFENSE DESCRIPT | TION | mo neemer | | \dashv | CITATION NUMBE | iR . | | | |
| M O | | | | CODE | . I ENGE BEGONII I | | | | | | | | | |
| O OL CLASS ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED | ALCOHOL / DRUG SUSPECT | HOL / DRUG SUSPECTED CONDITION | | | ALCOHOL TEST | | | | DRUG TEST(S) | | | |
| | | BY | | ARIJUANA | | STATUS | TYPE | VALUE | STATU | IS TYPE | RESU | JLT SELECT UP TO 4 | | |
| | | | OTHER DRUG | | | | | | | | | | | |
| INJURIES 1 - FATAL | SEATING POSITION 1 - FRONT - LEFT SIDE | 1 - NOT DEPLOYED | 1 - CLASS A | LASS | 1 - ALCOHOL I DEVICE | RESTRICTION INTERLOCK | N(S) | 1 - NOT DISTRACTED | TRACTION | 1 - NON | TEST ST IE GIVEN | TATUS | | |
| 2 - SUSPECTED SERIOUS INJURY | (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE | 2 - DEPLOYED FRONT | 2 - CLASS B | 2 - CLASS B | | | | 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION | | 2 - TEST REFUSED | | | | |
| 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY | 3 - FRONT - RIGHT SIDE | 3 - DEPLOYED SIDE | 3 - CLASS C | | | | | DEVICE (TEXTING, TYPING, | | 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE | | | | |
| 5 - NO APPARENT INJURY | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE | SIDE 4 - REGULAR CLASS (O 5 - M / C MOPED ONLY | |) 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS | | | DIALING) 3 - TALKING ON HANDS-FREE | | | 4 - TEST GIVEN, RESULTS KNOWN | | | |
| 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE | | 9 - DEPLOYMENT UNKNOWN | | 6 - EXCEPT CLASS A & CLASS B BUS | | | COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD | | 5 - TES | 5 - TEST GIVEN, RESULTS UNKNOWN | | | | |
| 7 - THIRD - LEFT SIDE | | 9 - DEPLOYMENT UNKNOWN 6 - NO VALID OL | | | 7 - EXCEPT TRACTOR-TRAILER | | | 4 - TALKING ON HAND-H COMMUNICATION DE | | | | | | |
| I - NOT TRANSPORTED (MOTORCYCLE SIDE CAR) /TREATED AT SCENE 8 - THIRD - MIDDLE | | | | 8 - INTERMEDIATE LICENSE RESTRICTIONS | | | 5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE | | | | | | | |
| 2 - EMS | 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF | SLEEPER SECTION OF 1 NOT EJECTED | | | OL ENDORSEMENT H - HAZMAT 9 - LEARNER'S PERMIT RESTRICTIONS | | | 6 - PASSENGER | | 1. NO | ALCOHOL TEST TYPE 1 - NONE | | | |
| 3 - POLICE 9 - OTHER / UNKNOWN | TRUCK CAB 11 - PASSENGER IN OTHER | 1 - NOT EJECTED 2 - PARTIALLY EJECTED | | M - MOTORCYCLE | | | | 7 - OTHER DISTRACTION INSIDE THE VEHICLE | | 2 - BLOOD | | | | |
| 3-OHER/ DIRROTT | ENCLOSED CARGO AREA | 3 - TOTALLY EJECTED | P - PASSENGER | | | | ENT | 8 - OTHER DISTRACTIONS OUTSIDE | | 3 - URII | 3 - URINE | | | |
| (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) SAFETY EQUIPMENT | | 4 - NOT APPLICABLE | N - TANKER | 13 - MECHANIC | | | | THE VEHICLE 9 - OTHER / UNKNOWN | | 4 - BRE | 4 - BREATH | | | |
| 12 - PASSENGER IN UNENCLOSED 12 - PASSENGER IN UNENCLOSED | | | Q - MOTOR SCOOTER | CONTROLS, OR OTHER | | | | | | | 5 - OTHER | | | |
| 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED | CARGO AREA 13 - TRAILING UNIT | 1 - NOT TRAPPED | R - THREE-WHEEL MO | TORCYCLE | ADAPTIVE I | DEVICES) | | | | | | | | |
| 4 - SHOULDER & LAP BELT USED | 14 - RIDING ON VEHICLE EXTERIOR | 2 - EXTRICATED BY | | S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS | | 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES | | | | 1 - NON | DRUG TEST TYPE 1 - NONE | | | |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | (NON-TRAILING UNIT) | MECHANICAL MEANS 3 - FREED BY | X - TANKER / HAZMAT | | | WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR | | | | 2 - BLO | 2 - BLOOD | | | |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING | 15 - NON-MOTORIST 99 - OTHER / UNKNOWN | NON-MECHANICAL MEANS | | | | 17 - PROSTHETIC AID | | CONDITION 1 - APPARENTLY NORMAL | | 3 - URIN | 3 - URINE | | | |
| 7 - BOOSTER SEAT | | | | | | 18 - OTHER | | 2 - PHYSICAL IMPAIRMENT | | 4 - OTHER | | | | |
| 8 - HELMET USED 9 - PROTECTIVE PADS USED | | | | | | | 3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED) | | | DRIIC TEST RECHI T/S | | | | |
| (ELBOWS, KNEES, ETC.) 10 - REFLECTIVE CLOTHING | | | | GENDER F - FFMAI F | | | | 4 - ILLNESS | | | DRUG TEST RESULT(S) 1 - AMPHETAMINES | | | |
| 11 - LIGHTING - PEDESTRIAN | | | | F - FEMALE M - MALE | | | | 5 - FELL ASLEEP, FAINTED, | | | 2 - BARBITURATES 3 - BENZODIAZEPINES | | | |
| / BICYCLE ONLY 99 - OTHER / UNKNOWN | | | U - OTHER/UNKNOWN | | | | | FATIGUED, ETC. | NCE OF | | IZODIAZEPINES INABINOIDS | | | |
| | | | | O - OTHER/OWN/VOWN | | | | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS | | | 5 - COCAINE | | | |
| | | | | | | | | | / ALCOHOL 9 - OTHER / UNKNOWN | | 6 - OPIATES / OPIOIDS 7 - OTHER | | | |
| | | | | | | | | J JIIZIN JAKNOWN | | 8 - NEG | SATIVE RESULTS | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |

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