OHIO DEPARTA OF PUBLIC SA SAPETY - SERVICE - PRO	TRAFFIC	CRAS	LOCAL REPORT NUMBER *									
☐ PHOTOS TAKEN	■ OH-2	OH-3	2 0 2 5 2 9 1 3									
SECONDARY CRASH	OH-1P Private Property	OTHER	REPORTING AGENC		0	HIT/SKIP 1 - Solved 2 - Unsolved	NIIMRED OF LIMITS	0 1 98 - ANIMAL 99 - UNKNOWN				
COUNTY* LOCALI	тү•	LOCATION: CITY, VII	GARFIE LAGE, TOWNSHIP*	LD HEI(JHIS L		CRASH DA		CRASH SEVERITY			
1 1 8 1 1	1 - CITY * 2 - VILLAGE * 3 - TOWNSHIP *	GARFIE			 <u> 1 1 0 8 2 0 2</u>	5 2 3 3 0	5 1 - FATAL 2 - SERIOUS INJURY					
ROUTE TYPE	ROUTE NUMBER	PREFIX	I ATITUDE DECIMA	SUSPECTED 3 - MINOR INJURY SUSPECTED								
ГОСАТК			3 - EAST 4 - WEST	Turne	у	4 1 . 4 1	4 1 . 4 1 6 3 9 3					
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST		ENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL	5 - PROPERTY DAMAGE ONLY				
REFER		_ _2_	4 - WEST	5358			8 1 1 . 6 0					
REFERENCE POINT 1 - INTERSECTION			ROLLTE TYPE RSTATE ROUTE (TP)		ROAD TYPE AL - ALLEY HW - HIGHWAY	RD - ROAD	☐ WITHIN INTERSE					
3 - MILE POST 3 - HOUSE #	1 2-SOUTH 3-EAST 4-WEST	SR - STA	ERAL US ROUTE TE ROUTE IBERED COUNTY ROU	175	AV - AVENUE LA - LANE BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL	SQ - SQUARE ST - STREET TE - TERRACE	☐ WITHIN INTERCH	ANGE AREA	NUMBER OF APPROACHES			
DISTANCE EDOM DECEDENCE	DISTANCE		IBERED TOWNSHIP	JIE	CT - COURT PK - PARKWAY DR - DRIVE PI - PIKE HE - HEIGHTS PL - PLACE	TL - TRAIL WA - WAY		ROADWAY				
	2 - Feet 3 - Yards						☐ ROADWAY DIVID	ED				
	ADWAY 9 - CROSSOV				MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE			
0 6 1- ON ROA 2- ON SHO 3- IN MEDI 4- ON ROA	DULDER 10 - DRIVEWA IAN ACCESS	AY / ALLEY	1 1	1 - NOT COLLISIO BETWEEN TWO MOTOR	0N 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE		1 - NORTH 2 - SOUTH	(<4 FE	ED FLUSH MEDIAN			
5 - ON GOR 6 - OUTSIDI TRAFFIC	RE CROSSIN DE 12 - SHARED	IG USE PATHS		VEHICLES IN TRANSPORT 2 - REAR-END	7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIREC	TION	3 - EAST 4 - WEST	2 - DIVID (≥4 FE 3 - DIVID	DED FLUSH MEDIAN EET) DED, DEPRESSED MEDIAN			
7 - ON RAM 8 - OFF RAI	MP 13 - BIKE LAN	IE OTH		3 - HEAD-ON	9 - OTHER / UNKNOWN			(ANY	IIVIDED, RAISED MEDIAN ANY TYPE) ITHER / UNKNOWN			
WORK ZONE RELATED WORKERS PRESENT	1	WORK ZO			LOCATION OF CRASH IN WOR 1 - BEFORE THE 1ST WOR	(ZONE (ZONE	CONTOUR	CONDITIONS	SURFACE			
LAW ENFORCEMENT PRESENT		- LANE SHIFT/CROS - WORK ON SHOULD OR MEDIAN			WARNING SIGN 2 - ADVANCE WARNING AF 3 - TRANSITION AREA	EA		_ 1	1			
☐ ACTIVE SCHOOL ZONE	5	- INTERMITTENT OR - OTHER	MOVING WORK		4 - ACTIVITY AREA 5 - TERMINATION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET 3 - SNOW	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS,			
	IT 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 3 - DARK - LIGHT	TED BOADWAY		1 - CLEAF 2 - CLOUI		6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNO'	N.	/UNKNOWN	6 - WATER (STANDING, MOVING) 7 - SLUSH	STONE 5 - DIRT 9 - OTHER			
4 - DARK - ROAD	DWAY NOT LIGHTED NOWN ROADWAY LIGHTING	11	4 - RAIN 5 - SLEET		9 - FREEZING RAIN OR FREEZING DRI 99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN	/UNKNOWN			
							L					
UNIT #1 ATEN	MPTED TO PA	RK IN A	PARKING	S LOT C	N N				Indicate the north direction with an "N" on the			
PRIVATE PRO	OPERTY AND	STRUC	CTHE NO	RTH SI	DE			<u> </u>	compass diagram.			
OF THE STRU	UCTURF (PAF	PA JOH	NS 5358	TURNF	Y RD).							
UNIT #1 THE					11517		1 [1					
	(1).5ED.(()E.(2.9 E/ 1E/.			UNI	Т1	î	i i				
								Tumey Rd				
						5358						
								(N)	Not To Scale			
CRASH REPORTE	ED DATE/TIME		SCENE CLEAR	RED DATE/TIME	REPORT TAKEN BY							
111082012			8 2 0 2 5		3 3 1 1 0 8 2 0 2 5		111019121012	2 5 0 0 0 6	POLICE AGENCY MOTORIST			
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	officer's	NAME* esecker		T. Baon	FFICER'S NAME*		SUPPLEMENT			
	1 1 5 1	 3 0		CHECKED BY OFFICER'S BADGE NUMBER* (CORRECTION = ADDITION								

	OH OF SAPE	HIO DEPARTMENT PUBLIC SAFETY UNIT		2,0,2,5,2	LOCAL REPORT NUMBER 9 1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE ROBINSON	E (☐ Sam RASHAWN REE	ne As Driver) AN	OWNER P	HONE: INCLUDE AREA CODE	(Same As Driver)		DAMAGE DAMAGE SCALE	
OWNER	OWNER ADDRE	ESS: STREET, CITY, STATE, ZIP	(☐ Same As Dr	river)	VND	OH	44105	1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
0		ARRIER: NAME, ADDRESS, CITY, STATE, ZIP		OLLVLL		IAL CARRIER PHONE: INCLUDE A			3- Ondown	
	LP STATE	LICENSE PLATE #	VE	DAMAGED AREA(S) INDICATE ALL THAT APPLY						
	LO H	HSH3103	$_{L}K_{L}N_{L}M_{L}A_{L}T_{L}2$	MV 8 H P 5 2 8	5,6,3,	VEHICLE YEAR 2 0 1 7	VEHICLE MAKE Nissan VEHICLE MODEL	11 12 1	11 12 1	
		UNKNOW!				VEHICLE COLOR WHI	SW SW	10 11 1	2 10 11 1	
	☐ COMMER	TYPE OF USE CIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED	BY: COMPANY NAME		9 9 3 4	3 9 9 3 3	
	INTERLO DEVICE EQUIPPE	■ HIT/SKIP UNIT	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 ->26K LBS.		HAZARDOUS M Material released Placard	IATERIAL CLASS# PLACARD ID#	8 7 6 5	8 7 ¥ 5 4	
ш	O 1	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	19 - BUS (16 20 - OTHER 21 - HEAVY 22 - ANIMAL	6+ PASSENGERS) 2 VEHICLE 2 EQUIPMENT 2 L WITH RIDER OR 2	3 - PEDESTRIANISKATER 4 - WHEELCHAIR (ANY TYPE) 5 - OTHER NON- MOTORIST 6 - BICYCLE 7 - TRAIN 9 - UNKNOWN OR HIT/SKIP	10 9 8	11 1 2 2 9 3 8 1 4 7 5 5 4 4 7 7 5 5 4 4 7 7 5 5 4 4 7 7 5 5 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
VEHICLE		# OF TRAILING UNITS						10 12 1	6 11 12 1	
	_ 2	WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED? 1-YES 2-NO 9-OTHER/UNKNO	WN AUTONOMOUS MODE LEVEL	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTO 4 - HIGH 5 - FULL	OMATION H AUTOMATION L AUTOMATION) - UNKNOWN	9 0 2 3 4 5 5	3 9 9 3 3 3 4 5 4 5	
		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	19 - TO\	WING OW REMOVAL	21 - MAIL CARRIER 99 - OTHER (UNKNOWN	7 6 5	12 12 12	
	O 1 CARGO BODY			5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VANIENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POL 9 - CAF 10 - FL/ 11 - DU	RGO TANK 1: AT BED 1-	2 - Concrete Mixer 3 - Auto Transporter 4 - Garbage/Refuse 9 - Other / Unknown	9	9 - 3 9 3 9 3 9	
		— 2 - HEAD LAMPS 5 - STEERING 8 - TRAI LE 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFE		7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	FOR TROUBLE 9: ABLED FROM PRIOR EIDENT	9 - OTHER / UNKNOWN	6	6 6 6		
	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	10 - DRI	VEWAY ACCESS ARED USE PATHS OR	12 - FIRST RESPONDER AT INCIDENT SCENE 19 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	UNDERCARRIAGE [14] - ALL AREAS [15] NIT NOT AT SCENE [16]	
		1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	14 - ENT	TERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	1	NITIAL POINT OF CONTACT	
		3 - STRIKING	3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	15 - WAI JOG 16 - WO	LKING, RUNNING, GGING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	1 2 0-NO DAMAG 1-12-REFER 1 DIAGRAW 13-TOP	O UNIT 15 - VEHICLE NOT AT SCENE	
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM			21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC TRAFFIC CONTROL	
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE CHANGING	A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	EQL 19 - LOA	JIPMENT AD SHIFTING/	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT	
		5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY		ROPER CROSSING	99 - OTHER IMPROPER ACTION	2 2-TWO-WAY	3 - FLASHER 6 - NO CONTROL	
	CIRCUMSTANCES							# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED	
EVENT(S)	SEQUENCE OF	EVENTS		EVENTS				2	2 - INVOLVED - ACTIVE CROSSING 1 3 - INVOLVED - PASSIVE CROSSING	
	¹ 5 2	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	17 - ANIN 18 - ANIN	MAL - FARM MAL - DEFR	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,		NIT / NON-MOTORIST DIRECTION	
		5 - CARGO / EQUIPMENT LOSS OR SHIFT	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	20 - MOT TRA	FOR VEHICLE IN INSPORT EKED MOTOR VEHICLE	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE	FROM 1 TO	1-NORTH 5-NORTHEAST 2-SOUTH 6-NORTHWEST 3-EAST 7-SOUTHEAST	
	3			COLLISION WITH FIXED OBJECT	r - STRUCK		OBJECT	FROM 1 TO	2 4- WEST 8-SOUTHWEST 9-OTHER/UNKNOWN	
	4, , ,	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	43 - CUF 44 - DITC 45 - EMB 46 - FENI	CH SANKMENT S	0 -WORKZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED	DETECTED SPEED	
	5	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	34 - MEDIAN GUARDRAIL BARRIER 5 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAIL 48 - TREI	BOX 5	i3 - TUNNEL i4 - OTHER FIXED OBJECT i9 - OTHER / UNKNOWN		3 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR	
	6							POSTED SPEED	3 - UNDETERMINED	
HS.	1 Y8304 OH1U 1/19 [FIRST HARMFUL EVENT	_ 1 _ __	OST HARMFUL EVENT				0	PAGE OF	

OHIO DEPARTMENT	LOCAL REPORT NUMBER													
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	MOTORIST / NO	_ 2	DATE OF BIRTH AGE GENDER											
M UNIT# NAME: LAST, F	RST, MIDDLE		DATE OF E	BIRTH			GENDER							
T 0 1 UNK ADDRESS: STREET, CITY, STATE, ZI	NOWN	CONTACT BHOWE APPLICATION												
ADDRESS: STREET, CITY, STATE, 21		CONTACT PHONE - INCLUDE AREA CODE												
INJURIES INJURED TAKEN	EMS AGENCY (NAME)	INJURED TAKEN TO: MEI	DICAL FACILITY (NAME, CITY)	SAFETY	EQUIPMENT	\top		SEATING PO	SITION	AIR BAG USA	GE EJECTION	N TRAPPED		
5 BY 1				USED	DOT-COMPLIAN MC HELMET		1	1_	1 1 1					
	CENSE NUMBER	OFFENSI	CHARGED	LOCAL CODE	OFFENSE DESCRIP	TION				CITATION NUM	IBER			
O CL CLASS ENDORSEMENT			1											
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTI	CONDITION	STATUS	TYPE	VALUE	STAT	US TYPE	TYPE RESULT SELECT UP TO 4				
s L L L L L		_	OTHER DRUG						⅃ └─	L				
M UNIT # NAME: LAST, F	RST, MIDDLE							DATE OF B	IRTH		AGE	GENDER		
0														
R ADDRESS: STREET, CITY, STATE, ZII		CONTACT	PHONE - INCLUDE AREA COD	E										
T INJURIES INJURED TAKEN	EMS AGENCY (NAME)	INJURED TAKEN TO: ME	DICAL FACILITY (NAME, CITY)		EQUIPMENT	_		SEATING PO	SITION	AIR BAG USAG	GE EJECTION	N TRAPPED		
N TAKEN BY O			,	USED	1 1		DOT-COMPLIAN MC HELMET	T I	l l	l.				
OL STATE OPERATOR L	CENSE NUMBER	OFFENSE	CHARGED	LOCAL	OFFENSE DESCRIPT	TION			-	CITATION NUMBER				
M 0 T				CODE										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE		CONDITION	STATUS	ALCOHO TYPE	OL TEST VALUE	STATU	US TYPE	DRUG TEST(S)	ULT SELECT UP TO 4		
S			ALCOHOL MAR OTHER DRUG	RIJUANA	1 1			• I I I	1			11 11		
M UNIT # NAME: LAST, FI	RST, MIDDLE							DATE OF B	IRTH		AGE	GENDER		
0 T 0														
R ADDRESS: STREET, CITY, STATE, ZII							CONTACT PHONE - INCLUDE AREA CODE							
s T				Lasery										
I INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MED	ICAL FACILITY (NAME, CITY)	USED	QUIPMENT		DOT-COMPLIAN	SEATING PO	SITION	AIR BAG USAG	R BAG USAGE EJECTION TRAPPED			
N OL STATE OPERATOR LI	CENSE NUMBER	OFFENSE	CHARGED	LOCAL OFFENSE DESCRIPTION						CITATION NUM	TION NUMBER			
M O				CODE										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE	ED	CONDITION	STATUS	ALCOHO TYPE		STAT	US TYPI	DRUG TEST(S) TYPE RESULT SELECT UP TO 4			
s		BY I	ALCOHOL MAR OTHER DRUG	RIJUANA	STATUS			YPE VALUE STATUS			TIPE RESULT SELECT UP 104			
T INJURIES	SEATING POSITION	AIR BAG	OL CL	ASS	OL	RESTRICTIO	DN(S)	DRIVER DIS	STRACTION		TEST S	STATUS		
1 - FATAL	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	1 - CLASS A		1 - ALCOHOL DEVICE			1 - NOT DISTRACTED			IONE GIVEN			
2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE	2 - CLASS B 3 - CLASS C	2 - CLASS B			(2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED			
4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOYED BOTH FRONT		- CLASS C 3 - CORRECTIVE LENSES - REGULAR CLASS (OHIO = D) 4 - FARM WAIVER				DEVICE (TEXTING, TY DIALING)	PING,		SAMPLE / UNUSABLE			
5 - NO APPARENT INJURY	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M / C MOPED ONLY		5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A			3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE			4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN			
	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL		& CLASS B	BUS	III ED	4 - TALKING ON HAND-HELD			5- 1231 GIVEN, RESULTS UNKNOWN			
INJURED TAKEN BY 1 - NOT TRANSPORTED	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE				8 - INTERMED	DIATE LICENS		5 - OTHER ACTIVITY WI						
/TREATED AT SCENE 2 - EMS	9 - THIRD - RIGHT SIDE	EJECTION	OL ENDOR	RSEMENT	9 - LEARNER	'S PERMIT		ELECTRONIC DEVICE 6 - PASSENGER	Ē		ALCOHOL TEST TYPE			
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT		RESTRICT 10 - LIMITED		7 - OTHER DISTRACTION INSIDE			1 - NONE				
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	2 - PARTIALLY EJECTED	M - MOTORCYCLE P - PASSENGER		ONLY 11 - LIMITED	TO EMPLOYM	IENT	THE VEHICLE 8 - OTHER DISTRACTIONS OUTSIDE			2 - BLOOD 3 - URINE			
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED 4 - NOT APPLICABLE	N - TANKER	12 - LIMITED - OTHER				THE VEHICLE 9 - OTHER / UNKNOWN			4 - BREATH			
SAFETY EQUIPMENT 1 - NONE USED	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER			9 - OTHER / UNKNOWN			5-OTHER			
2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED	CARGO AREA 13 - TRAILING UNIT	TRAPPED 1 - NOT TRAPPED	R - THREE-WHEEL MOT	TORCYCLE	CYCLE ADAPTIVE DEVICES)									
4 - SHOULDER & LAP BELT USED	14 - RIDING ON VEHICLE	2 - EXTRICATED BY	S - SCHOOL BUS	14 - MILITARY VEHICLES ON 15 - MOTOR VEHICLES WITHOUT AIR BRAKES						1 - N	DRUG TEST TYPE 1 - NONE			
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	EXTERIOR (NON-TRAILING UNIT)	MECHANICAL MEANS 3 - FREED BY	X - TANKER / HAZMAT	T - DOUBLE & TRIPLE TRAILERS			5			2 - B	2 - BLOOD			
6 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	NON-MECHANICAL MEAN	3	17 - PROSTHETIC AID				1 - APPARENTLY NORM	MAL	3 - U	3 - URINE			
7 - BOOSTER SEAT 8 - HELMET USED					18 - OTHER			2 - PHYSICAL IMPAIRME	ΞNT	4-0	4 - OTHER			
9 - PROTECTIVE PADS USED							3 - EMOTIONAL (E.G. DE ANGRY, DISTURBED)	PRESSED,		DRUG TEST RESULT(S)				
(ELBOWS, KNEES, ETC.) 10 - REFLECTIVE CLOTHING			F - FEMALE	DER				4 - ILLNESS			AMPHETAMINES	2002. (0)		
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY			M - MALE					5 - FELL ASLEEP, FAINT FATIGUED, ETC.	ED,		BARBITURATES BENZODIAZEPINES			
99 - OTHER / UNKNOWN			U - OTHER/UNKNOWN					6 - UNDER THE INFLUE	NCE OF	4 - 0	CANNABINOIDS			
								MEDICATIONS / DRUG			OPIATES / OPIOIDS			
								/ ALCOHOL 9 - OTHER / UNKNOWN						
								9 - OTHER / UNKNOWN			7 - OTHER 8 - NEGATIVE RESULTS			
								9 - OTHER / UNKNOWN						

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OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

								EPORTING AGENCY GARFIELD HEIGHTS											DATE OF CRASH M 11 D 08 Y 202				
	UNTY O						CRASH LOCATION PAPA JOHNS PIZZA																
		oa Jo	ohns	535	8 Tu	irney						4412	5 (2	16)	663-	1919	. Mi	nor					
dan	nage	to r	north	side	e wa	II.																	
						1	1	1				OFFICEF	R'S SIG	NATUF	RE					DGE N	NUMBE	:R	