| OHIO DEPARTI<br>OF PUBLIC SA<br>SAPETY - SERVICE - PRO | TRAFFIC                          | CRAS                                  | H REPO                            | RT *DENOTES                           | MANDATORY FIELD FOR SUPPLEMEN   | NT REPORT       |                                  |  | LOCAL REPORT NUMBE                             | :R *  |  |  |
|--|----------------------------------|---------------------------------------|-----------------------------------|---------------------------------------|---|-----------------|----------------------------------|--|--|---|--|--|
| □ PHOTOS TAKEN   | □ OH-2 □                         | OH-3                                  | LOCAL INFORMATIO                  | N                                     |   |                 |                                  | 2   0   2   5   3  | 3   1   4   5                                  |   |  |  |
| SECONDARY CRASH  |                                  | OTHER                                 | REPORTING AGENC                   | Y NAME *                              |   | 0 1 1 8         | n::*                             | HIT/SKIP<br>1 - Solved   | NI IMRED OF LINITS                             | 11NIT 10 EDPOR<br>98 - ANIMAL<br>1 0 1 1 99 - INKNOWN   |  |  |
| COUNTY* LOCALI   | Private Property                 |                                       | _                                 | LD HEIGH                              | ITS   | [0]1]0          | 0   2   0                        | 2 - Unsolved   | 0 3  | CRASH SEVERITY  |  |  |
| .  | 1 - CITY *                       | LOCATION: CITY, VII<br>GARFIF         |                                   |                                       |   |                 |                                  | CRASH DATE/TIME* CRASH SEVERITY    1   2   0   7   2   0   2   5   1   7   1   9   5   2   5   5   5   1   5   6   1   5   1 |  |   |  |  |
| ROUTE TYPE   | ROUTE NUMBER                     | PREFIX                                | 1 - NORTH                         | LOCATION ROA                          | AD NAME   |                 | ROAD TYPE                        | I ATITUDE DECIMAL  |  | 2 - SERIOUS INJURY<br>SUSPECTED<br>3 - MINOR INJURY   |  |  |
| Location   | 1 1 1 1 1                        |                                       | 2 - SOUTH<br>3 - EAST<br>4 - WEST | 2-SOUTH<br>3-EAST                     |   |                 |                                  |  | 8 1 8 1 1                                      | 3 - MINOR INJURY<br>SUSPECTED<br>4 - INJURY POSSIBLE  |  |  |
| ROUTE TYPE   | ROUTE NUMBER                     | PREFIX                                | 1 - NORTH                         | DEEEDENCE                             | E ROAD NAME (ROAD, MILEPOST, HOUSE  |                 | ROAD TYPE                        | LONGITUDE DECIMAL  | 5 - PROPERTY DAMAGE<br>ONLY                    |   |  |  |
| REFERENCE  | 1 1 1 1 1                        |                                       | 2 - SOUTH<br>3 - EAST<br>4 - WEST | EASTW                                 |   | 7               | BLL                              | -<br>  8   1     5   9   | 9,6,0,7,                                       |   |  |  |
| REFERENCE POIN   |                                  |                                       | ROLITE TYPE                       |                                       | RUVL  | YDF             |                                  |  | INTERSECTION RELATED                           | )   |  |  |
| 1 - INTERSECTION<br>2 - MILE POST<br>3 - HOUSE #       | 2 - SOUTH                        |                                       | RSTATE ROUTE (TP)                 | A                                     | L - ALLEY HW - HIGI<br>V - AVENUE LA - LANE                                     | SQ              | - ROAD<br>- SQUARE               | WITHIN INTERSEC  | CTION OR ON APPROACH                           | 3 ,   |  |  |
|  | 3 - EAST<br>4 - WEST             | CR - NUN                              | TE ROUTE MBERED COUNTY ROU        | ITE C                                 | EL - BOULEVARD MP - MILE<br>CR - CIRCLE OV - OVA<br>CT - COURT PK - PAR         | L TE<br>KWAY TL | - STREET<br>- TERRACE<br>- TRAIL | ☐ WITHIN INTERCH   | ANGE AREA                                      | NUMBER OF APPROACHES  |  |  |
| DISTANCE<br>EDOM DECEDENCE                             | DISTANCE                         | ROL                                   | IBERED TOWNSHIP<br>ITE            |                                       | IR - DRIVE PI - PIKE<br>IE - HEIGHTS PL - PLAC                                  |                 | A - WAY                          |  | ROADWAY  |   |  |  |
|  | 2 - Feet<br>3 - Yards            |                                       |                                   |                                       |   |                 |                                  | ROADWAY DIVIDI   | ED   |   |  |  |
| 0 1 1-0N ROA   |                                  | ER                                    |                                   | MA<br>1 - NOT COLLISION               | NNER of CRASH COLLISION/III  4 - REAR-TO-REAR                                   | MPACT           |                                  | DIRECTION OF TRAVEL  |  | MEDIAN TYPE   |  |  |
| 3 - IN MEDI.<br>4 - ON ROA                             | AN ACCESS<br>ADSIDE 11 - RAILWAY | GRADE                                 | _ 2                               | BETWEEN<br>TWO MOTOR<br>VEHICLES IN   | 5 - BACKING<br>6 - ANGLE  |                 |                                  | 1 - NORTH<br>2 - SOUTH   | (<4 FE   | ED FLUSH MEDIAN<br>:ET)<br>ED FLUSH MEDIAN  |  |  |
| 5 - ON GOR<br>6 - OUTSID<br>TRAFFIC                    | E 12 - SHARED I<br>CWAY OR TRAIL | JSE PATHS<br>.S                       |                                   | TRANSPORT<br>2 - REAR-END             | 7 - SIDESWIPE, SAME<br>8 - SIDESWIPE, OPPO                                      | OSITE DIRECTION |                                  | 3 - EAST<br>4 - WEST   | (≥4 FE<br>3 - DIVID                            | 2- DIVIDED FLUSH MEDIAN<br>(≥4 FEET)<br>3- DIVIDED, DEPRESSED MEDIAN<br>4- DIVIDED, RAISED MEDIAN |  |  |
| 7 - ON RAM<br>8 - OFF RAI                              |                                  | TH                                    |                                   | 3 - HEAD-ON                           | 9 - OTHER / UNKNO   | WN              |                                  |  | (ANY   |   |  |  |
|  |                                  |                                       |                                   |                                       |   |                 |                                  |  |  |   |  |  |
| ☐ WORK ZONE RELATED                                    | 1-                               | WORK ZO                               | NE TYPE                           |                                       | LOCATION OF CRAS<br>1 - BEFORE THE  | H IN WORK ZONE  |                                  | CONTOUR  | CONDITIONS                                     | SURFACE   |  |  |
| WORKERS PRESENT LAW ENFORCEMENT PRESENT                |                                  | WORK ON SHOULD                        |                                   |                                       | WARNING SIG<br>2 - ADVANCE WA<br>3 - TRANSITION                                 | ARNING AREA     |                                  | _1_  | 2  | _ 2_  |  |  |
|  | 5 -                              | OR MEDIAN<br>INTERMITTENT OR<br>OTHER | MOVING WORK                       |                                       | 4 - ACTIVITY ARE<br>5 - TERMINATION   |                 |                                  | 1 - STRAIGHT LEVEL<br>2 - STRAIGHT   | 1 - DRY<br>2 - WET                             | 1 - CONCRETE<br>2 - BLACKTOP,   |  |  |
| ACTIVE SCHOOL ZONE                                     | T CONDITION                      | ı                                     |                                   |                                       | WEATHER   |                 |                                  | GRADE<br>3 - CURVE LEVEL<br>4 - CURVE GRADE  | 3 - SNOW<br>4 - ICE<br>5 - SAND, MUD, DIRT,    | BITUMINOUS,<br>ASPHALT<br>3 - BRICK/BLOCK   |  |  |
| 1 - DAYLIGHT   |                                  |                                       | 1 - CLEAR                         |                                       | 6 - SNOW  |                 |                                  | 9 - OTHER<br>/UNKNOWN  | OIL, GRAVEL<br>6 - WATER (STANDING,<br>MOVING) | 4 - SLAG, GRAVEL,<br>STONE<br>5 - DIRT  |  |  |
| 3 2 - DAWN/DUSK<br>3 - DARK - LIGHT<br>4 - DARK - ROAD | TED ROADWAY<br>DWAY NOT LIGHTED  | 6                                     | 4 - RAIN                          | MOG, SMOKE                            | 7 - SEVERE CROSSWINDS<br>8 - BLOWING SAND, SOIL, E<br>9 - FREEZING RAIN OR FREI | DIRT, SNOW      |                                  |  | 7 - SLUSH<br>9 - OTHER/UNKNOWN                 | 9 - OTHER<br>/UNKNOWN   |  |  |
| 9 - OTHER / UNK  | NOWN ROADWAY LIGHTING<br>KNOWN   |                                       | 5 - SLEET                         | , HAIL                                | 99 - OTHER / UNKNOWN  |                 |                                  |  |  |   |  |  |
|  |                                  |                                       |                                   |                                       |   |                 |                                  |  |  |   |  |  |
| NARRATIVE  |                                  |                                       |                                   |                                       |   | : :             | : :                              |  |  | Indicate the north  |  |  |
| UNIT 03 WAS  | STOPPED OF                       | N TURNI                               | EY RD W                           | AITING TO                             | )<br>   |                 |                                  |  |  | direction with<br>an "N" on the<br>compass diagram.   |  |  |
| TURN LEFT C  | ONTO EASTW                       | OOD BL                                | VD. UNIT                          | 02 CAME                               | ТО  |                 |                                  |  |  |   |  |  |
| A STOP BEHI  | ND UNIT 03. U                    | JNIT 01                               | WAS TRA                           | WELING                                |   |                 |                                  | ĬĬ   |  |   |  |  |
| BEHIND UNIT  | TS 02 AND 03.                    | UNIT 01                               | I STRUCI                          | K UNIT 02                             | ,   |                 |                                  | 1  | 1  |   |  |  |
| UNIT .02 .WAS  | THEN PUSHE                       | ED. INT.O                             | .UNIT.03                          |                                       |   | Eas             | stwood Blvd                      |  | 1  |   |  |  |
|  |                                  |                                       |                                   |                                       |   |                 |                                  |  |  |   |  |  |
|  |                                  |                                       |                                   |                                       |   | -               |                                  |  | Turney Rd                                      |   |  |  |
|  |                                  |                                       |                                   |                                       |   |                 |                                  |  | jā   |   |  |  |
|  |                                  |                                       |                                   |                                       |   |                 |                                  | ' ह  |  |   |  |  |
|  |                                  |                                       |                                   |                                       |   |                 |                                  |  |  |   |  |  |
|  |                                  |                                       |                                   |                                       |   |                 |                                  |  |  |   |  |  |
|  |                                  |                                       |                                   |                                       |   |                 |                                  | 1 1  |  | Not To Scale  |  |  |
| CRASH REPORTE  | ED DATE/TIME                     |                                       | DISPATCH DAT                      | F/TIME                                | ADDA  | VAL DATE/TIME   |                                  | SCENE CLEAR  | ED DATE/TIME                                   | REPORT TAKEN BY   |  |  |
| 1120172012   |                                  | 1 2 0                                 |                                   | 5   1 7 2  <del> </del>               |   |                 | 1 7 2 8                          | 112 0 7 2 0 2  |  | ■ POLICE AGENCY   |  |  |
| TOTAL TIME ROADWAY CLOSED                              | OTHER INVESTIGATION TIME         | TOTAL<br>MINUTES                      | ;                                 |                                       |   |                 | CHECKED BY OF                    |  | <u> </u>                                       | MOTORIST  |  |  |
|  |                                  |                                       | J. Pie                            |                                       | 'S BADGE NUMBER*  |                 | D. Dalley                        | CHECKED BY OFFICER'S BADGE   | NUMBER*  | SUPPLEMENT (CORRECTION on ADDITION 10 AN EXCENTING SEPTING SERT TO COPPS                          |  |  |
|  | 3 0                              | $\lfloor 6 \rfloor 3 \rfloor$         |                                   | $\begin{bmatrix} 0 & 0 \end{bmatrix}$ | 7   |                 |                                  | $\lfloor L \mid 0 \mid 7 \mid \  $   |  |   |  |  |

|   | SAPETY - SERVICE - PR   | MENT UNIT                       |   |   |  |  |  | 2,0,2,5                                      | LOCAL REPORT NUMBER  3   1   4   5                     |  |
|---|---|---------------------------------|---|---|--|--|--|--|--|--|
| UNIT# OWNER NAME: LAST, FIRST, MIDDLE ( Same As Driver)  OWNER NAME: LAST, FIRST, MIDDLE ( Same As Driver)  WASHINGTON SIDDHARTHA |   |                                 |   |   |  |  |  |  | DAMAGE DAMAGE SCALE                                    |  |
|   | DDRESS: STREET, CI  | TY, STATE, ZIP                  | ( Same A  | ·   |  |  |  | 1 - NONE<br>2 - MINOR DAMAGE                 | 3 - FUNCTIONAL DAMAGE                                  |  |
| OWNER AD  |   | RYBAK AVE                       |   | GARFIE  |  | S OH   | 44125  | 4 2- MINOR DAMAGE                            | 9 - UNKNOWN  |  |
| COMMERCIA   | E OANGER. NAME,   | DDNESS, STIT, STATE, ZIF        |   |   |  |  |  |  | DAMAGED AREA(S)  |  |
| LP STAT   |   | PLATE # 1023                    | .5.U.X.K.B  | VEHICLE IDENTIFICATION#   | 4.9.8.   | VEHICLE YEAR   | VEHICLE MAKE   | 7  | INDICATE ALL THAT APPLY                                |  |
|   | INSURANCE   | NSURANCE COMPANY                |   | INSURANCE POLICY#   | 100  | VEHICLE COLOR  | VEHICLE MODEL  |  | 11 12 1  |  |
|   | VERIFIED  | ALLSTATE<br>TYPE OF USE         |   | 826 854 761<br>us dot #   | TOWED  | BLK<br>BY: COMPANY NAME  | X5   | 10 1 1 2                                     | 10/10/2  |  |
| Сом   | MERCIAL   | GOVERNMENT                      | IN EMERGENCY RESPONSE   | VEHICLE WEIGHT GWWR/GCWR  | JINT   | ERSTATE  |  | 3 4  | 9 8 4 -  |  |
| ☐ DEV   | RLOCK<br>ICE<br>IPPED   | ☐ HIT/SKIP UNIT                 | # OCCUPANTS   | 1 - ≤10K LBS.<br>2 - 10,001 - 26K LBS.<br>3 - >26K LBS.   |  | HAZARDOUS<br>MATERIAL RELEASED<br>PLACARD  | MATERIAL  CLASS # PLACARD ID #   | 8 7 6 5                                      | 11 12 7 6 5  |  |
| UNIT TY   | 1 - PASSENGER CAR   7 - MOTORCYCLE 2-WHEELED   12 - GOLF CART   13 - SNOWMOBILE   13 - SNOWMOBILE   14 - SINGLE UNIT TRUCK   15 - SEMT-RACTOR   16 - FARR EQUIPMENT   16 - FARR EQUIPMENT   17 - MOTORHOME   16 - FARR EQUIPMENT   17 - MOTORHOME   17 - MOTORHOME   18 - MOTORHOME |                                 |   | 13 - SNOWMOBILE<br>14 - SINGLE UNIT TRUCK<br>15 - SEMI-TRACTOR<br>16 - FARM EQUIPMENT   | 18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - PEDESTRIANISKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST 26 - BICYCLE 27 - TRAIN 27 - TRAIN 29 - UNKNOWN OR HIT/SKIP |  |  | 10 11 1 2 2 9 3 3 8 1 4 7 5 6                |  |  |
| VЕНІСІЕ   | # of TRAILI   | NG UNITS                        |   |   |  |  |  | 10 11 12 1                                   | 7 6 5 11 12 1  |  |
| 2   | 1-1ES 2-NO 9-OTREK/UNNNOWN MODELEVEL  |                                 |   |   |  | DITIONAL<br>OMATION<br>I AUTOMATION<br>AUTOMATION                                  | 9 - UNKNOWN  | 9 10 2 3 8 4 7 5                             | 3 9 5 2 9 5 8 7 5 5                                    |  |
| O 1<br>SPECIA<br>FUNCTIO  |   |                                 | 12 - MILITARY<br>13 - POLICE  | 16 - FARM 21 - MAIL CARRIER 17 - MOWING 99 - OTHER (JUNKNOWN 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL               |  | 7 6 5  | 12 12 12 A   |  |  |  |
| CARGO E   |   | CABLE                           | 3 - VEHICLE TOWING ANOTHER<br>MOTOR VEHICLE<br>4 - LOGGING  | 5 - INTERMODAL CONTAINER<br>CHASSIS<br>6 - CARGO VANIENCLOSED BOX<br>7 - GRAINICHIPS/GRAVEL   | 8 - POL<br>9 - CAF<br>10 - FL/<br>11 - DU  | RGO TANK<br>AT BED   | 12 - CONCRETE MIXER<br>13 - AUTO TRANSPORTER<br>14 - GARBAGEIREFUSE<br>99 - OTHER / UNKNOWN          | 9 3  | 9 3 9 3 3  |  |
| VEHICLE<br>DEFECTS  |   |                                 | 4 - BRAKES<br>5 - STEERING<br>6 - TIRE BLOWOUT  | 7 - WORN OR SLICK TIRES<br>8 - TRAILER EQUIPMENT<br>DEFECTIVE   | 10 - DIS   | OR TROUBLE<br>ABLED FROM PRIOR<br>IDENT  | 99 - OTHER / UNKNOWN   | 6  | 6 6 6  |  |
| NON-MOTOR   | 1 - INTERSECTI<br>MARKED<br>CROSSWALE   |                                 | - INTERSECTION - OTHER<br>- MIDBLOCK - MARKED<br>CROSSWALK  | 6 - BICYCLE LANE<br>7 - SHOULDER/ROADSIDE<br>8 - SIDEWALK   | 10 - DRI   | IAN/CROSSING ISLAND<br>VEWAY ACCESS<br>RED USE PATHS OR                            | 12 - FIRST RESPONDER<br>AT INCIDENT SCENE<br>99 - OTHER / UNKNOWN                                    | - NO DAMAGE [0] - TOP [13]                   | - UNDERCARRIAGE [14] - ALL AREAS [15]                  |  |
| LOCATION<br>IMPACT  | AT UNMARKED<br>CROSSWALE  | :                               | - TRAVEL LANE-OTHER LOCATION  | ИС  | TRA  |  |  | _ ·  | UNIT NOT AT SCENE [16]                                 |  |
| 3   | 1 - NON-CONTA 2 - NON-COLLIS 3 - STRIKING 4 - STRUCK 5 - BOTH STRIK & STRUCK 9 - OTHER / UN   | PRE-CRASH ACTION                | 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKINGIPASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN       | 7 - MAKING L-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS | AFFIC LANE   |  | 19 - STANDING<br>20 - OTHER NON-MOTORIST<br>21 - STANDING OUTSIDE<br>DISABLED VEHICLE                | 1 2 0 - NO DAMA 1-12 - REFER DIAGRA 13 - TOP | R TO UNIT 15 - VEHICLE NOT AT SCENE                    |  |
|   |   |                                 |   |   |  |  |  |  | TRAFFIC  |  |
| 0   0   | 1 - NONE 2 - FAILURE TO 3 - RAN RED LIG 4 - RAN STOP S 5 - UNSAFE SPE 6 - IMPROPER T  | YIELD 8 HT GN 9                 | - LEFT OF CENTER  - FOLLOWING TOO CLOSE/ACDA  - IMPROPER LANE CHANGING  0 - IMPROPER PASSING  1- DROVE OFF ROAD           | 13 - IMPROPER START FROM<br>A PARKED POSITION<br>14 - STOPPED OR PARKED<br>ILLEGALLY<br>15 - SWERVING TO AVOID<br>16 - WRONG WAY    | 18 - OPE<br>EQL<br>19 - LOA<br>FAL   | ON OBSTRUCTION ERATING DEFECTIVE IIPMENT ID SHIFTING/ LING/SPILLING ROPER CROSSING | 21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION | 1 - ONE-WAY 2 2 - TWO-WAY                    | ### TRAFFIC CONTROL  1 - ROUNDABOUT                    |  |
| CONTRIBUTION  |   | 1                               | 2 - IMPROPER BACKING  |   | PIUT FUIT  |  |  | # OF THROUGH LANES<br>ON ROAD                | RAIL GRADE CROSSING                                    |  |
| (S)   | E OF EVENTO   |                                 |   |   |  |  |  | -  | 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING        |  |
| SEQUENC   | E OF EVENTS   | OLLOVED                         | EQUIDMENT CANADO  | EVENTS  11 - CROSS CENTERLINE -   | 16 . DAII  | WAY VEHICLE  | 22 - WORK ZONE   | 4  | 3 - INVOLVED - PASSIVE CROSSING                        |  |
| 1 2 0   | 3 - IMMERSION<br>4 - JACKKNIFE  | ION 7                           | - EQUIPMENT FAILURE  - SEPARATION OF UNITS  - RAN OFF ROAD RIGHT  | 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL  12 - DOWNHILL RUNAWAY  13 - OTHER NON-COLLISION                               | 17 - ANIN<br>18 - ANIN<br>19 - ANIN  | MAL - FARM<br>MAL - DEER<br>MAL - OTHER  | MAINTENANCE<br>EQUIPMENT<br>23 - STRUCK BY FALLING,<br>SHIFTING CARGO OR                             |  | UNIT / NON-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST |  |
| 2   | 5 - CARGO / EQL<br>LOSS OR SHI  | iii iiiiLitti                   | - RAN OFF ROAD LEFT<br>0 - CROSS MEDIAN   | 14 - PEDESTRIAN<br>15 - PEDALCYCLE  | TRA  | OR VEHICLE IN<br>NSPORT<br>KED MOTOR VEHICLE                                       | ANYTHING SET IN<br>MOTION BY A MOTOR<br>VEHICLE<br>24 - OTHER MOVABLE<br>OBJECT                      | FROM   1   TO                                | 2-SOUTH 6-NORTHWEST 3-EAST 7-SOUTHEAST                 |  |
| 3   |   |                                 |   | COLLISION WITH FIXED OBJECT   | r - STRUCK   |  | ODULOT   | FROM I TO                                    | 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN             |  |
| 4 <sub>1</sub> 1  | 25 - IMPACT ATT<br>/ CRASH CU<br>26 - BRIDGE OV   | SHION 3                         | 1 - GUARDRAIL END<br>2 - PORTABLE BARRIER   | 37 - TRAFFIC SIGN POST<br>38 - OVERHEAD SIGN POST   | 43 - CUF<br>44 - DITC<br>45 - FMR  |  | 50 -WORKZONE MAINTENANCE<br>EQUIPMENT<br>51 - WALL   | UNIT SPEED                                   | DETECTED SPEED   |  |
| 5   | STRUCTURE   | : 3<br>R OR ABUTMENT<br>TAPET 3 | 3 - MEDIAN CABLE BARRIER<br>4 - MEDIAN GUARDRAIL<br>BARRIER<br>5 - MEDIAN CONCRETE<br>BARRIER<br>5 - MEDIAN OTHER BARRIER | 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT                                       | 46 - FEN<br>47 - MAIL<br>48 - TREI   | DE<br>BOX  | 52 - BUILDING<br>53 - TUNNEL<br>54 - OTHER FIXED OBJECT<br>99 - OTHER / UNKNOWN                      | 0  | 3 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR      |  |
| 6   |   |                                 |   |   |  |  |  | POSTED SPEED                                 | 3 - UNDETERMINED                                       |  |
| 1<br>HSY8304 OH1U 1   |   | RMFUL EVENT                     | _ 1   | MOST HARMFUL EVENT  |  |  |  | 2   5  | PAGE OF  |  |

|                           | OHIO DEPARTMENT<br>OF PUBLIC SAFETY<br>MAPETY - SERVICE - PROTECTION   |  |  |   |   |  | 2,0,2,5,3                                      | LOCAL REPORT NUMBER   |  |
|---------------------------|--|--|--|---|---|--|--|---|--|
| UNIT#                     | OWNER NAME: LAST, FIRST, MIDDL  EATMON LA  | (■ Sa  | me As Driver)  | OWNER PI  | HONE: INCLUDE AREA CODE   | ( Same As Driver)  |  | DAMAGE DAMAGE SCALE   |  |
|                           | DRESS: STREET, CITY, STATE, ZIP  | ( Same As [  | Oriver)  |   |   |  | 1 - NONE<br>2 - MINOR DAMAGE                   | 3 - FUNCTIONAL DAMAGE<br>4 - DISABLING DAMAGE   |  |
| 854                       | BROADWA  | Y AVE APT 101  | BEDFOR   |   | OH  | 44146  | 4  | 9 - UNKNOWN   |  |
| ommerco u                 |  |  |  |   |   |  |  | DAMAGED AREA(S)   |  |
| LP STAT                   |  |  | VEHICLE IDENTIFICATION # 1, 3, D, 7, 8, H, 1, 5, 5, 9  | 2.5.  | VEHICLE YEAR  | VEHICLE MAKE<br>Hyundai  | 42   | INDICATE ALL THAT APPLY   |  |
| _                         | INSURANCE COMPANY  |  | INSURANCE POLICY#  | J Z O   | VEHICLE COLOR   | VEHICLE MODEL  | " " 1  | 11 12 1   |  |
| <u> </u>                  | VERIFIED GEICO TYPE OF USE   |  | 6205987750<br>us dot #   | TOWED   | GRY BY: COMPANY NAME  | Santa Fe   | 10 1 2   |   |  |
| Сом                       | BERCIAL GOVERNMENT   | ☐ IN EMERGENCY RESPONSE  | VEHICLE WEIGHT GVWR/GCWR   | INT   | ERSTATE   |  | <b>*</b>                                       |   |  |
| INTEI<br>DEVI<br>EQUI     |  | # OCCUPANTS  0 2   | 1 - ≤10K LBS.<br>2 - 10,001 - 26K LBS.<br>3 - >26K LBS.  |   | HAZARDOUS M<br>MATERIAL RELEASED<br>PLACARD                               | ATERIAL  CLASS# PLACARD ID#  | 8 7 6 5  | 12 7 6 5  |  |
| UNIT TYP                  | 1 - PASSENGER CAR   7 - MOTORCYCLE 2-WHEELED   12 - GOLF CART   3 - SNOWMOBILE   3 - SNOWMOBILE   4 - PICK LIP   4 - PICK LIP   5 - CARGO VAN   6 - VAN (9-15 SEATS)   11 - ALL TERRAIN VEHICLE   (ATV / UTV)   17 - MOTORCYCLE 2-WHEELED   12 - GOLF CART   13 - SNOWMOBILE   14 - SINGLE UNIT TRUCK   15 - SEMI-TRACTOR   15 - SEMI-TRACTOR   16 - FARIM EQUIPMENT   17 - MOTORHOME   18 |  |  | 18 - LIMO (LIVERY VEHICLE) 19 - BUS (16 - PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - PEDESTRIANISKATER 24 - WHEELCHAIR (ANY TYPE) 26 - BICYCLE 27 - TRAIN 39 - UNKNOWN OR HIT/SKIP |   |  | 10 11 1 2 9 3 3 8 4 7 5 6                      |   |  |
| VEHICLE                   | # of trailing units  |  |  |   |   |  | 11 12 1  | 5 11 12 1 1 1 2 1 1 2 1 1 2 1 1 2 1 1 1 2 1 1 1 2 1 |  |
| 2                         | WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?  1-YES 2-NO 9-OTHER/UNKNO  | WN AUTONOMOU MODE LEVEL  |  | - DRIVER ASSISTANCE AUTOMATION  |   |  | 9 10 2 3 4 7 5                                 | 3 9 9 3 3 3 4 7 5 4   |  |
| 0 1<br>SPECIAL<br>FUNCTIO | 4 - SCHOOL TRANSPORT<br>5 - BUS-TRANSIT/COMMUTER   | 6 - BUS - CHARTER/TOUR<br>7 - BUS - INTERCITY<br>8 - BUS - SHUTTLE<br>9 - BUS - OTHER<br>10 - AMBULANCE          | 11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT  | 19 - TOV  | WING S<br>DW REMOVAL  | 21 - MAIL CARRIER<br>19 - OTHER JUNKNOWN   | 7 6 5  | 12 12 12  |  |
| O 1                       | 1 - NO CARGO BODY TYPE //NOT APPLICABLE 2 - BUS  | 3 - VEHICLE TOWING ANOTHER<br>MOTOR VEHICLE<br>4 - LOGGING   | 5 - INTERMODAL CONTAINER<br>CHASSIS<br>6 - CARGO VANIENCLOSED BOX<br>7 - GRAINICHIPSIGRAVEL  | 8 - POL<br>9 - CAP<br>10 - FLA<br>11 - DUI  | RGO TANK 13<br>AT BED 14  | 2 - CONCRETE MIXER<br>3 - AUTO TRANSPORTER<br>4 - GARBAGE/REFUSE<br>3 - OTHER / UNKNOWN                              | 9 3  | 9 3 9 3 9   |  |
| VEHICLE DEFECTS           | 1 - TURN SIGNALS<br>2 - HEAD LAMPS<br>3 - TAIL LAMPS   | 4 - BRAKES<br>5 - STEERING<br>6 - TIRE BLOWOUT   | 7 - WORN OR SLICK TIRES<br>8 - TRAILER EQUIPMENT<br>DEFECTIVE  | 10 - DISA   | OR TROUBLE 99<br>ABLED FROM PRIOR<br>IDENT                                | 9 - OTHER / UNKNOWN  | 6  | 6 6 6   |  |
| NON-MOTORIS               | 1 - INTERSECTION - MARKED CROSSWALK T 2 - INTERSECTION -   | 3 - INTERSECTION - OTHER<br>4 - MIDBLOCK - MARKED<br>CROSSWALK   | 6 - BICYCLE LANE<br>7 - SHOULDER/ROADSIDE<br>8 - SIDEWALK  | 10 - DRIN<br>11 - SHA   | VEWAY ACCESS<br>RED USE PATHS OR  | 2 - FIRST RESPONDER<br>AT INCIDENT SCENE<br>19 - OTHER / UNKNOWN   | - NO DAMAGE [0] - TOP [13]                     | UNDERCARRIAGE [14] - ALL AREAS [15]   |  |
| LOCATION A<br>IMPACT      | UNMARKED CROSSWALK  1 - NON-CONTACT  | 5 - TRAVEL LANE-OTHER LOCATION  1 - STRAIGHT AHEAD   |  | TRA   |   | 18 - APPROACHING   |  | JIT NOT AT SCENE [16]   |  |
| 5                         |  | 2 - BACKING<br>3 - CHANGING LANES  | 7 - MANING LTURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS | 14 - ENT<br>SPEC<br>15 - WAL<br>JOG<br>16 - WOI   | ERING OR CROSSING<br>CIFIED LOCATION<br>LKING, RUNNING,<br>IGING, PLAYING | OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN | 0 - NO DAMAGE 1.12 - REFER TO DIAGRAM 13 - TOP |   |  |
|                           | 1 - NONE   | 7 - LEFT OF CENTER   | 13 - IMPROPER START FROM   | 17 - VIQI   | ON OBSTRUCTION 2  | 21 - LYING IN ROADWAY  | TDAFFICIUM                                     | TRAFFIC   |  |
| LO 1                      | 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN  | 8 - FOLLOWING TOO<br>CLOSE/ACDA<br>9 - IMPROPER LANE<br>CHANGING<br>10 - IMPROPER PASSING<br>11 - DROVE OFF ROAD | A PARKED POSITION  14 - STOPPED OR PARKED  ILLEGALLY  15 - SWERVING TO AVOID  16 - WRONG WAY                                       | 18 - OPE<br>EQU<br>19 - LOA<br>FALI   | RATING DEFECTIVE 2 IIPMENT 2 D SHIFTING/                                  | 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION                                       | 1 - ONE-WAY 2 2 - TWO-WAY                      | TRAFFIC CONTROL   |  |
| CONTRIBUTIN               |  | 12 - IMPROPER BACKING  |  |   |   |  | # OF THROUGH LANES<br>ON ROAD                  | RAIL GRADE CROSSING   |  |
| (S)                       | or EVENTS  |  |  |   |   |  |  | 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING   |  |
| SEQUENCE                  | OF EVENTS  | 6 - EQUIPMENT FAILURE  | EVENTS  11 - CROSS CENTERLINE -  | 16 . DAII   | WAY VEHICLE 2   | 12 - WORK ZONE   | 4  | 3 - INVOLVED - PASSIVE CROSSING   |  |
| 1 2 0                     | 3 - IMMERSION<br>4 - JACKKNIFE   | 7 - SEPARATION OF<br>UNITS<br>8 - RAN OFF ROAD RIGHT   | 11 - CRUSS CENT ERLINE - OPPOSITE DIRECTION OF TRAVEL  12 - DOWNHILL RUNAWAY  13 - OTHER NON-COLLISION                             | 17 - ANIN<br>18 - ANIN<br>19 - ANIN   | MAL - FARM<br>MAL - DEER<br>MAL - OTHER                                   | MAINTENANCE<br>EQUIPMENT<br>23 - STRUCK BY FALLING,<br>SHIFTING CARGO OR   | U  | NIT / NON-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST                                     |  |
| <sup>2</sup> 2 1 0        | 5 - CARGO / EQUIPMENT<br>LOSS OR SHIFT   | 9 - RAN OFF ROAD LEFT<br>10 - CROSS MEDIAN   | 14 - PEDESTRIAN<br>15 - PEDALCYCLE   | TRAI  | OR VEHICLE IN<br>NSPORT<br>KED MOTOR VEHICLE                              | ANYTHING SET IN<br>MOTION BY A MOTOR<br>VEHICLE<br>24 - OTHER MOVABLE  | rnou 4   | 2 - SOUTH 6 - NORTHWEST  3 - EAST 7 - SOUTHEAST   |  |
| 3                         |  |  | COLLISION WITH FIXED OBJECT  | - STRUCK  |   | OBJECT   | FROM 1 TO                                      | 2 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN  |  |
| <sup>4</sup>              | 25 - IMPACT ATTENUATOR / CRASH CUSHION  26 - BRIDGE OVERHEAD   | 31 - GUARDRAIL END<br>32 - PORTABLE BARRIER<br>33 - MEDIAN CABLE BARRIER   | 37 - TRAFFIC SIGN POST<br>38 - OVERHEAD SIGN POST<br>39 - LIGHT/LUMINARIES SUPPORT   | 43 - CUR<br>44 - DITC<br>45 - EMB   | H<br>ANKMENT 5  | 0 -WORKZONE MAINTENANCE<br>EQUIPMENT<br>1 - WALL   | UNIT SPEED                                     | DETECTED SPEED  |  |
| 5                         | STRUCTURE  27 - BRIDGE PIER OR ABUTMENT  28 - BRIDGE PARAPET  29 - BRIDGE RAIL  30 - GUARDRAIL FACE  | 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER   | 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT  | 46 - FENO<br>47 - MAIL<br>48 - TREE   | DE 5<br>BOX 5   | 2 - BUILDING<br>3 - TUNNEL<br>4 - OTHER FIXED OBJECT<br>9 - OTHER / UNKNOWN  | 0  | 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR   |  |
| 6                         |  |  |  |   |   |  | POSTED SPEED                                   | 3 - UNDETERMINED  |  |
| 1<br>HSY8304 OH1U 1       | FIRST HARMFUL EVENT  | _ 2  | MOST HARMFUL EVENT   |   |   |  | 2   5  | PAGE OF   |  |

|         | OH<br>OF<br>SAPET             | IO DEPARTMENT PUBLIC SAFETY Y - BERVICE - PROTECTION                            |  |  |  |   |  | 2,0,2,5,3                      | LOCAL REPORT NUMBER                                    |  |
|---------|-------------------------------|---|--|--|--|---|--|--------------------------------|--|--|
|         | UNIT#                         | OWNER NAME: LAST, FIRST, MIDDLE HOWELL DO                                       | ·                     ( ■    Sam<br>DN QUENTIN                   | ne As Driver)  | OWNER PI                                 | HONE: INCLUDE AREA CODE                                   | ( Same As Driver)  |                                | DAMAGE DAMAGE SCALE                                    |  |
| ER      |                               | SS: STREET, CITY, STATE, ZIP  | ( Same As Di   | river)   |  |   |  | 1 - NONE 3 - FUNCTIONAL DAMAGE |  |  |
| OWN     | 13516                         |   | D BLVD   | GARFIEL  |  |   | 44125  | 3 2- MINOR DAMAGE              | 4 - DISABLING DAMAGE<br>9 - UNKNOWN                    |  |
|         | COMMERCIAL CA                 | RRIER: NAME, ADDRESS, CITY, STATE, ZIP  |  |  | COMMERCI                                 | AL CARRIER PHONE: INCLUDE                                 | AREA CODE  |                                |  |  |
|         | LP STATE                      | LICENSE PLATE #   |  | EHICLE IDENTIFICATION #  |  | VEHICLE YEAR  | VEHICLE MAKE   |                                | DAMAGED AREA(S) INDICATE ALL THAT APPLY                |  |
|         | OH                            | 495ZVL  |  | C   S   2   F   W   5   6   6   5                                  | 5,5,0                                    | _2_0_1_5  | Jeep   | 11 12                          | 11 12 1  |  |
|         |                               | IRANCE RIFIED INSURANCE COMPANY   |  | INSURANCE POLICY #   |  | VEHICLE COLOR<br>GRY                                      | Cherokee   | 10 12                          | 2 10 11 1 2  |  |
|         |                               | TYPE OF USE   | IN EMERGENCY   | US DOT#  | TOWED                                    | BY: COMPANY NAME  |  | 9 9 3                          | 3 , 2 3  |  |
|         | COMMERC                       |   | # OCCUPANTS  | VEHICLE WEIGHT GVWR/GCWR   | -  | HAZARDOUS I   | MATERIAL   | 7 5 5                          | 7.   |  |
|         | INTERLO DEVICE EQUIPPE        | ☐ HIT/SKIP UNIT   | 0,1,   | 1 - ≤10K LBS.<br>2 - 10,001 - 26K LBS.<br>3 - >26K LBS.            |  | MATERIAL RELEASED<br>PLACARD                              | CLASS# PLACARD ID #  | 7 6 5                          | 11 12 7 6 5  |  |
|         |                               | 1 - PASSENGER CAR   | 7 - MOTORCYCLE 2-WHEELED   | 12 - GOLF CART   | 18 - LIMO (L                             |   | 23 - PEDESTRIAN/SKATER   | 10 /                           | 12 1 2   |  |
|         | 0   3                         | 2 - PASSENGER VAN (MINIVAN)<br>3 - SPORT UTILITY VEHICLE<br>4 - PICK UP         | 8 - MOTORCYCLE 3-WHEELED<br>9 - AUTOCYCLE                        | 14 - SINGLE UNIT TRUCK   | 19 - BUS (16<br>20 - OTHER<br>21 - HEAVY | VEHICLE   | 24 - WHEELCHAIR (ANY TYPE)<br>25 - OTHER NON- MOTORIST<br>26 - BICYCLE | 9                              | 9 3 3  |  |
|         | UNIT TYPE                     | 5 - CARGO VAN<br>6 - VAN (9-15 SEATS)   | 10 - MOPED OR MOTORIZED<br>BICYCLE<br>11 - ALL TERRAIN VEHICLE   | 15 - SEMI-TRACTOR<br>16 - FARM EQUIPMENT<br>17 - MOTORHOME         |  | WITHINDLING   | 27 - TRAIN<br>99 - UNKNOWN OR HIT/SKIP                                 | 7.                             | - 8 4 7  |  |
| SLE     |                               | •   | (ATV / UTV)  |  |  |   |  | 12 1                           | 7 6 5 112  |  |
| VEHICLE |                               | # OF TRAILING UNITS   |  |  |  |   |  | 10 12                          | 2 10 11 12   |  |
|         |                               | WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?                             | MOUS MODE 0  | 0 - NO AUTOMATION<br>1 - DRIVER ASSISTANCE                         |  | DITIONAL<br>DMATION                                       | 9 - UNKNOWN  | 10 2 -                         | 10 2   |  |
|         | 2                             | 1-YES 2-NO 9-OTHER/UNKNO  | WN AUTONOMOUS MODE LEVEL   | 2 - PARTIAL AUTOMATION   | 4 - HIGH                                 | AUTOMATION<br>AUTOMATION                                  |  | 8 4 -                          | /  |  |
|         |                               | 1 - NONE<br>2 - TAXI  | 6 - BUS - CHARTER/TOUR<br>7 - BUS - INTERCITY                    | 11 - FIRE<br>12 - MILITARY   | 16 - FAR                                 |   | 21 - MAIL CARRIER<br>99 - OTHER /UNKNOWN                               | 8 7 6 5                        | 4  |  |
|         | 0 1                           | 3 - ELECTRONIC RIDE SHARING<br>4 - SCHOOL TRANSPORT<br>5 - BUS-TRANSIT/COMMUTER | 8 - BUS - SHUTTLE<br>9 - BUS - OTHER<br>10 - AMBULANCE           | 13 - POLICE<br>14 - PUBLIC UTILITY<br>15 - CONSTRUCTION EQUIPMENT  | 18 - SNO<br>19 - TOV                     | DW REMOVAL  |  | 6                              | 6  |  |
|         | FUNCTION                      | 0 300 1100011100111110121   | 10 THIS DE WILL  | io solonisti Eggii iii.  | 20 011                                   | ETT GERVIGE TATIOE  |  | 17                             | 12 12 12   |  |
|         | 1011                          | 1 - NO CARGO BODY TYPE<br>/ NOT APPLICABLE<br>2 - BUS                           | 3 - VEHICLE TOWING ANOTHER<br>MOTOR VEHICLE<br>4 - LOGGING       | 5 - INTERMODAL CONTAINER<br>CHASSIS<br>6 - CARGO VAN/ENCLOSED BOX  | 8 - POL<br>9 - CAF<br>10 - FLA           | RGO TANK  | 2 - CONCRETE MIXER<br>3 - AUTO TRANSPORTER<br>4 - GARBAGE/REFUSE       | a M a                          |  |  |
|         | CARGO BODY<br>TYPE            | 7   | 4 - LOGGING  | 7 - GRAIN/CHIPS/GRAVEL   | 11 - DU                                  | NI DED  | 9 - OTHER / UNKNOWN  | ,609,                          | 9 3 9 3 9  |  |
|         |                               | 1 - TURN SIGNALS<br>2 - HEAD LAMPS  | 4 - BRAKES<br>5 - STEERING                                       | 7 - WORN OR SLICK TIRES<br>8 - TRAILER EQUIPMENT                   | 10 - DISA                                | ABLED FROM PRIOR  | 9 - OTHER / UNKNOWN  | 6                              | 6 6  |  |
| Ę       | DEFECTS                       | 3 - TAIL LAMPS  1 - INTERSECTION -  | 6 - TIRE BLOWOUT  3 - INTERSECTION - OTHER                       | DEFECTIVE  6 - BICYCLE LANE  |  | IDENT IAN/CROSSING ISLAND                                 | 12 - FIRST RESPONDER   | - NO DAMAGE [0]                | UNDERCARRIAGE [14]                                     |  |
|         | NON-MOTORIST                  | MARKED<br>CROSSWALK<br>2 - INTERSECTION -                                       | 4 - MIDBLOCK - MARKED<br>CROSSWALK                               | 7 - SHOULDER/ROADSIDE<br>8 - SIDEWALK                              | 10 - DRIN<br>11 - SHA                    | /EWAY ACCESS<br>RED USE PATHS OR                          | AT INCIDENT SCENE<br>99 - OTHER / UNKNOWN                              | - TOP [13]                     | - ALL AREAS [15]                                       |  |
|         | IMPACT                        | UNMARKED<br>CROSSWALK   | 5 - TRAVEL LANE-OTHER LOCATION                                   |  | TRA                                      |   |  | UN                             | IIT NOT AT SCENE [16]                                  |  |
|         | 4                             | 1 - NON-CONTACT 2 - NON-COLLISION 1 1 1   | 1 - STRAIGHT AHEAD<br>2 - BACKING                                | 7 - MAKING U-TURN<br>8 - ENTERING TRAFFIC LANE                     | 14 - ENT                                 | ECTIATING A CURVE<br>ERING OR CROSSING<br>CIFIED LOCATION | 18 - APPROACHING<br>OR LEAVING VEHICLE<br>19 - STANDING                | l II                           | NITIAL POINT OF CONTACT                                |  |
|         |                               | 3 - STRIKING 4 - STRUCK PRE-CRASH ACTION  | 4 - OVERTAKING/PASSING   | 9 - LEAVING TRAFFIC LANE<br>10 - PARKED<br>11 - SLOWING OR STOPPED | 15 - WAL                                 | KING, RUNNING,<br>GING, PLAYING                           | 20 - OTHER NON-MOTORIST<br>21 - STANDING OUTSIDE<br>DISABLED VEHICLE   | 0 6 0- NO DAMAGE               |  |  |
|         |                               | 5 - BOTH STRIKING<br>& STRUCK<br>9 - OTHER / UNKNOWN                            | 5 - MAKING RIGHT TURN<br>6 - MAKING LEFT TURN                    | IN TRAFFIC<br>12 - DRIVERLESS                                      | 16 - WO                                  | RKING<br>HING VEHICLE                                     | 99 - OTHER / UNKNOWN   | DIAGRAM<br>13 - TOP            | 99 - UNKNOWN   |  |
|         |                               | 3-OHEK / SHINOWN  |  |  |  |   |  |                                | TRAFFIC  |  |
|         |                               | 1 - NONE<br>2 - FAILURE TO YIELD  | 7 - LEFT OF CENTER<br>8 - FOLLOWING TOO                          | 13 - IMPROPER START FROM<br>A PARKED POSITION                      |  |   | 21 - LYING IN ROADWAY<br>22 - NOT DISCERNABLE                          | TRAFFICWAY FLOW                | TRAFFIC CONTROL  |  |
|         |                               | 3 - RAN RED LIGHT<br>4 - RAN STOP SIGN  | 8 - FOLLOWING TOO<br>CLOSE/ACDA<br>9 - IMPROPER LANE<br>CHANGING | 14 - STOPPED OR PARKED<br>ILLEGALLY                                | EQU<br>19 - LOA                          | IIPMENT<br>D SHIFTING/                                    | 23 - OPENING DOOR INTO<br>ROADWAY                                      | 1 - ONE-WAY                    | 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN |  |
|         |                               | 5 - UNSAFE SPEED<br>6 - IMPROPER TURN   | 10 - IMPROPER PASSING<br>11 - DROVE OFF ROAD                     | 15 - SWERVING TO AVOID<br>16 - WRONG WAY                           |  | LING/SPILLING<br>ROPER CROSSING                           | 99 - OTHER IMPROPER<br>ACTION  | 2 2 - TWO-WAY                  | 6 - NO CONTROL   |  |
|         | CONTRIBUTING<br>CIRCUMSTANCES |   | 12 - IMPROPER BACKING  |  |  |   |  | # OF THROUGH LANES<br>ON ROAD  | RAIL GRADE CROSSING                                    |  |
| T(S)    | PEOUENOE :-                   | FUENTS  |  |  |  |   |  |                                | 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING        |  |
| EVEN    | SEQUENCE OF                   |   |  | EVENTS   |  |   |  | _4_                            | 1 3 - INVOLVED - PASSIVE CROSSING                      |  |
|         | 1 2 0                         | 1 - OVERTURN/ROLLOVER<br>2 - FIRE/EXPLOSION                                     | 6 - EQUIPMENT FAILURE<br>7 - SEPARATION OF<br>UNITS              | 11 - CROSS CENTERLINE -<br>OPPOSITE DIRECTION OF<br>TRAVEL         | 17 - ANIN                                | WAY VEHICLE<br>NAL - FARM<br>NAL - DEER                   | 22 - WORK ZONE<br>MAINTENANCE<br>EQUIPMENT                             |                                | NIT / NON-MOTORIST DIRECTION                           |  |
|         |                               | 3 - IMMERSION<br>4 - JACKKNIFE<br>5 - CARGO / EQUIPMENT                         | 8 - RAN OFF ROAD RIGHT<br>9 - RAN OFF ROAD LEFT                  | 12 - DOWNHILL RUNAWAY<br>13 - OTHER NON-COLLISION                  | 19 - ANIN<br>20 - MOT                    | IAL - OTHER<br>OR VEHICLE IN                              | 23 - STRUCK BY FALLING,<br>SHIFTING CARGO OR<br>ANYTHING SET IN        |                                | 1 - NORTH 5 - NORTHEAST                                |  |
|         | 2                             | LOSS OR SHIFT   | 10 - CROSS MEDIAN  | 14 - PEDESTRIAN<br>15 - PEDALCYCLE                                 |  | NSPORT<br>KED MOTOR VEHICLE                               | MOTION BY A MOTOR<br>VEHICLE   |                                | 2 - SOUTH 6 - NORTHWEST  3 - EAST 7 - SOUTHEAST        |  |
|         | 3   1                         |   |  | COLLISION WITH FIXED OBJECT  | - STRIICK                                |   | 24 - OTHER MOVABLE<br>OBJECT   | FROM 1 TO                      | 2 4- WEST 8-SOUTHWEST                                  |  |
|         |                               | 25 - IMPACT ATTENUATOR  | 31 - GUARDRAIL END   | 37 - TRAFFIC SIGN POST   | 43 - CUR                                 |   | 50 -WORKZONE MAINTENANCE   |                                | 9 - OTHER / UNKNOWN                                    |  |
|         | 4                             | / CRASH CUSHION<br>26 - BRIDGE OVERHEAD<br>STRUCTURE                            | 32 - PORTABLE BARRIER<br>33 - MEDIAN CABLE BARRIER               | 38 - OVERHEAD SIGN POST<br>39 - LIGHT/LUMINARIES SUPPORT           | 44 - DITC<br>45 - EMB<br>46 - FENC       | ANKMENT   | EQUIPMENT<br>51 - WALL<br>52 - BUILDING                                | UNIT SPEED                     | DETECTED SPEED   |  |
|         | 5                             | 27 - BRIDGE PIER OR ABUTMENT<br>28 - BRIDGE PARAPET                             | 34 - MEDIAN GUARDRAIL<br>BARRIER<br>35 - MEDIAN CONCRETE         | 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT                 | 46 - FENO<br>47 - MAIL<br>48 - TREE      | BOX   | 53 - TUNNEL<br>54 - OTHER FIXED OBJECT                                 | 0, , ,                         | 1 1 - STATED/ESTIMATED SPEED                           |  |
|         |                               | 29 - BRIDGE RAIL<br>30 - GUARDRAIL FACE   | BARRIER<br>36 - MEDIAN OTHER BARRIER                             | 42 - CULVERT   |  | HYDRANT   | 99 - OTHER / UNKNOWN   |                                | 2 - CALCULATED / EDR                                   |  |
|         | 6                             |   |  |  |  |   |  | POSTED SPEED                   | 3 - UNDETERMINED                                       |  |
|         | 4                             |   | ,  |  |  |   |  | 2   5                          |  |  |
| HSY     | 1<br>8304 OH1U 1/19 [         | FIRST HARMFUL EVENT   | 1  | OST HARMFUL EVENT  |  |   |  |                                | PAGE OF  |  |

| OHIO DEPARTMENT  | MOTORIST / NO  | ON MOTORI                                  | eT.                                     |                              |   |  |   | LOCAL REPORT N   |  |                    |
|--|--|--|---|------------------------------|---|--|---|--|--|--------------------|
| OF PUBLIC SAFETY SAFETY · SERVICE · PROTECTION         | WOTORIST / NO  | JIN-IVIO I ORI                             | 31                                      |                              |   | _2_  | 0 2 5 DATE OF BIRT  | 3   1   4  | 1   5                                    |                    |
| M UNIT# NAME: LAST, FIR                                | ST, MIDDLE   |  |   |                              |   |  |   |  |  | GENDER             |
| WAS  ADDRESS: STREET, CITY, STATE, ZIP                 | HINGTON  | SIDDHARTHA                                 | 4                                       |                              |   |  | 0 6 0 8 1 9 7 0 M   |  |  |                    |
| 1<br>13746 RYBA  | (AVF   | GA   | ARFIELD HTS                             | LD HTS OH 44125              |   |  | HONE - INCLUDE AREA CODE                                    | 1 1  | 1 1                                      | 1 1 1              |
| 10110  | MS AGENCY (NAME)   |  | CAL FACILITY (NAME, CITY)               | NAME, CITY) SAFETY EQUIPMENT |   |  | SEATING POSITI  | ON AIR BA  | G USAGE EJECTION                         | N TRAPPED          |
| 5  |  |  |   | l                            | 0 4 6   | DOT-COMPLIANT MC HELMET                      | 0 1   | 4  |  |                    |
| OL STATE OPERATOR LIG                                  | ENSE NUMBER  | OFFENSE C                                  |   | CODE                         | ENSE DESCRIPTION                                  |  |   |  | ON NUMBER                                |                    |
| O OL CLASS ENDORSEMENT                                 | RESTRICTION SELECT UP TO 3                                     | 333.0                                      | ALCOHOL / DRUG SUSPECTE                 |                              | CDA   | ALCOHOL                                      | TEST  | G20  | )252444<br>DRUG TEST(S)                  |                    |
| R SELECT UP TO 2                                       |  | DISTRACTED<br>BY                           | ALCOHOL MAR                             |                              | STATUS  | 1.1  | VALUE   | STATUS   |  | ULT SELECT UP TO 4 |
|  |  | _1   | OTHER DRUG                              |                              | 1   1   | 1  | DATE OF BIRTI   |  | 1  |                    |
| 0  |  | L ATO)/A                                   |   |                              |   | .0.1   | 2   4   1   |  | AGE<br>2   4 3                           | GENDER             |
| O 2 EATN  ADDRESS: STREET, CITY, STATE, ZIP            | <u>ION</u>   | LATOYA                                     | M                                       |                              |   |  | ONE - INCLUDE AREA CODE                                     | 0 0 2  |  |                    |
| \$ 854 BROAL   | DWAY AVE APT 101   | BE   | DFORD                                   | OH 44                        | 146   |  |   |  |  |                    |
| I INJURIES INJURED TAKEN BY                            | MS AGENCY (NAME)   | INJURED TAKEN TO: MEDIC                    | CAL FACILITY (NAME, CITY)               | SAFETY EQUIPME<br>USED       |   | DOT-COMPLIANT                                | SEATING POSITION  | ON AIR BAG   | G USAGE EJECTION                         | l .                |
| O 5 OPERATOR LIG                                       | ENCE NUMBER  | OFFENSE CI                                 | HARGED                                  | LOCAL OFFE                   | 0   4   L   | MC HELMET                                    | 0 1   | 1  | N NUMBER                                 | _                  |
| M O  | ENSE NUMBER  | OT LINE OF                                 | INNOLD                                  | CODE                         | ENGE DESCRIPTION                                  |  |   | GIANO  | N NOMBER                                 |                    |
| O OL CLASS ENDORSEMENT SELECT UP TO 2                  | RESTRICTION SELECT UP TO 3                                     | DRIVER<br>DISTRACTED                       | ALCOHOL / DRUG SUSPECTED                |                              | ONDITION  | ALCOHOL                                      |   |  | DRUG TEST(S)                             |                    |
| R SELECT UP 102  | 1 11 1 11 1  | BY 1                                       | ALCOHOL MARI                            | JUANA                        | 1 status  | TYPE 1                                       | VALUE   | STATUS 1   | TYPE RESU                                | JLT SELECT UP TO 4 |
| M UNIT# NAME: LAST, FIR                                | ST. MIDDLE   |  | OTHER DRUG                              |                              | ·     ·   | <u>                                     </u> | DATE OF BIRTI   |  | AGE                                      | GENDER             |
| 0 3  |  | DON  | QUEN <sup>-</sup>                       | TINI                         |   | 1 1 0  | 1 1 9 1 1   | 9   5   8  |  | l M                |
| R ADDRESS: STREET, CITY, STATE, ZIP                    |  | DON  | QUEIN                                   | 1111                         |   | CONTACT PH                                   | ONE - INCLUDE AREA CODE                                     |  |  |                    |
| 10010  | VOOD BLVD  |  | ARFIELD HTS                             | -                            | 125   |  |   |  |  | <u> </u>           |
| N BY   | EMS AGENCY (NAME)  | INJURED TAKEN TO: MEDIC                    | AL FACILITY (NAME, CITY)                | SAFETY EQUIPME<br>USED       |   | DOT-COMPLIANT                                | SEATING POSITIO   | ON AIR BAG   | G USAGE EJECTION                         | TRAPPED 1          |
| O 5<br>N OD STATE OPERATOR LIC                         | ENSE NUMBER  | OFFENSE CI                                 | HARGED                                  | LOCAL OFF                    | 0 4 L   | - MC HELMET                                  | 0 1   | CITATIO  | N NUMBER                                 | <u> </u>           |
| M<br>O   |  |  |   | CODE                         | ENGE DECOMM NON                                   |  |   |  |  |                    |
| O OL CLASS ENDORSEMENT SELECT UP TO 2                  | RESTRICTION SELECT UP TO 3                                     | DRIVER<br>DISTRACTED                       | ALCOHOL / DRUG SUSPECTED                | D C                          | CONDITION   | ALCOHOL<br>TYPE                              | TEST<br>VALUE   | STATUS   | DRUG TEST(S) TYPE RESU                   | ULT SELECT UP TO 4 |
| i 4  | 1 11 1 11 1  | BY   1                                     | ☐ ALCOHOL ☐ MARI. ☐ OTHER DRUG          | JUANA                        | 1 1 1   | 1  | VALUE   | 1  | 1  | ULT SELECT UP TO 4 |
| INJURIES   | SEATING POSITION   | AIR BAG                                    | OL CLA                                  | ASS                          | OL RESTRICTION                                    | DN(S)  | DRIVER DISTRA   | ACTION   | TEST S                                   |                    |
| 1 - FATAL<br>2 - SUSPECTED SERIOUS INJURY              | 1 - FRONT - LEFT SIDE<br>(MOTORCYCLE DRIVER)                   | 1 - NOT DEPLOYED                           | 1 - CLASS A<br>2 - CLASS B              |                              | 1 - ALCOHOL INTERLOCK<br>DEVICE                   |  | 1 - NOT DISTRACTED<br>2 - MANUALLY OPERATING                | AN   | 1 - NONE GIVEN 2 - TEST REFUSED          |                    |
| 3 - SUSPECTED MINOR INJURY                             | 2 - FRONT - MIDDLE<br>3 - FRONT - RIGHT SIDE                   | 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE       | 3 - CLASS C                             |                              | 2 - CDL INTRASTATE ONLY<br>3 - CORRECTIVE LENSES  |  | ELECTRONIC COMMUNIC   | CATION   | 3 - TEST GIVEN, CONTAI                   | MINATED            |
| 4 - POSSIBLE INJURY<br>5 - NO APPARENT INJURY          | 4 - SECOND - LEFT SIDE<br>(MOTORCYCLE PASSENGER)               | 4 - DEPLOYED BOTH FRONT / S                | SIDE 4 - REGULAR CLASS (OH              | HO = D)                      | 4 - FARM WAIVER<br>5 - EXCEPT CLASS A BUS         |  | DEVICE (TEXTING, TYPING<br>DIALING)                         |  | SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULT |                    |
|  | 5 - SECOND - MIDDLE<br>6 - SECOND - RIGHT SIDE                 | 5 - NOT APPLICABLE  9 - DEPLOYMENT UNKNOWN | 5 - M / C MOPED ONLY<br>6 - NO VALID OL |                              | 6 - EXCEPT CLASS A<br>& CLASS B BUS               |  | 3 - TALKING ON HANDS-FRE<br>COMMUNICATION DEVICE            | E  | 5 - TEST GIVEN, RESULT                   |                    |
| INJURED TAKEN BY                                       | 7 - THIRD - LEFT SIDE<br>(MOTORCYCLE SIDE CAR)                 | 3-bel corment on drown                     | 0 110 W.E.B 02                          |                              | 7 - EXCEPT TRACTOR-TRA<br>8 - INTERMEDIATE LICENS | AILER  | 4 - TALKING ON HAND-HELD<br>COMMUNICATION DEVICE            |  |  |                    |
| 1 - NOT TRANSPORTED /TREATED AT SCENE                  | 8 - THIRD - MIDDLE   |  |   |                              | RESTRICTIONS                                      | E  | 5 - OTHER ACTIVITY WITH A<br>ELECTRONIC DEVICE              | IN   |  |                    |
| 2 - EMS<br>3 - POLICE                                  | 9 - THIRD - RIGHT SIDE  10 - SLEEPER SECTION OF TRUCK CAB      | EJECTION  1 - NOT EJECTED                  | OL ENDORS H - HAZMAT                    | SEMENT                       | 9 - LEARNER'S PERMIT<br>RESTRICTIONS              |  | 6 - PASSENGER<br>7 - OTHER DISTRACTION IN                   | SIDE   | ALCOHOL 1<br>1 - NONE                    | TEST TYPE          |
| 9 - OTHER / UNKNOWN                                    | 11 - PASSENGER IN OTHER  | 2 - PARTIALLY EJECTED                      | M - MOTORCYCLE                          |                              | 10 - LIMITED TO DAYLIGHT<br>ONLY                  |  | THE VEHICLE   |  | 2 - BLOOD                                |                    |
|  | ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 3 - TOTALLY EJECTED  4 - NOT APPLICABLE    | P - PASSENGER<br>N - TANKER             |                              | 11 - LIMITED TO EMPLOYN<br>12 - LIMITED - OTHER   |  | 8 - OTHER DISTRACTIONS O<br>THE VEHICLE                     | DUTSIDE  | 3 - URINE<br>4 - BREATH                  |                    |
| SAFETY EQUIPMENT  1 - NONE USED                        | 12 - PASSENGER IN<br>UNENCLOSED                                | 4-NOT AFFEIGABLE                           | Q - MOTOR SCOOTER                       |                              | 13 - MECHANICAL DEVICE:<br>(SPECIAL BRAKES, HAND  |  | 9 - OTHER / UNKNOWN   |  | 5 - OTHER                                |                    |
| 2 - SHOULDER BELT ONLY USED<br>3 - LAP BELT ONLY USED  | CARGO AREA  13 - TRAILING UNIT                                 | TRAPPED  1 - NOT TRAPPED                   | R - THREE-WHEEL MOTO                    | ORCYCLE                      | CONTROLS, OR OTHER<br>ADAPTIVE DEVICES)           |  |   |  |  |                    |
| 4 - SHOULDER & LAP BELT USED                           | 14 - RIDING ON VEHICLE EXTERIOR                                | 2 - EXTRICATED BY                          | S - SCHOOL BUS  T - DOUBLE & TRIPLE TR  | All FRS                      | 14 - MILITARY VEHICLES C<br>15 - MOTOR VEHICLES   |  |   |  | DRUG TE<br>1 - NONE                      | EST TYPE           |
| 5 - CHILD RESTRAINT SYSTEM -<br>FORWARD FACING         | (NON-TRAILING UNIT)  | MECHANICAL MEANS  3 - FREED BY             | X - TANKER / HAZMAT                     |                              | WITHOUT AIR BRAKES<br>16 - OUTSIDE MIRROR         | 5  | CONDITIO  | NA CONTRACTOR OF THE CONTRACTO | 2 - BLOOD                                |                    |
| 6 - CHILD RESTRAINT SYSTEM -<br>REAR FACING            | 15 - NON-MOTORIST<br>99 - OTHER / UNKNOWN                      | NON-MECHANICAL MEANS                       |   |                              | 17 - PROSTHETIC AID<br>18 - OTHER                 |  | 1 - APPARENTLY NORMAL                                       | ,  | 3 - URINE<br>4 - OTHER                   |                    |
| 7 - BOOSTER SEAT<br>8 - HELMET USED                    |  |  |   |                              |   |  | 2 - PHYSICAL IMPAIRMENT<br>3 - EMOTIONAL (E.G. DEPRE        | SSED,  | V- OTHER                                 |                    |
| 9 - PROTECTIVE PADS USED<br>(ELBOWS, KNEES, ETC.)      |  |  | GENDE                                   | ER                           |   |  | ANGRY, DISTURBED)   |  | DRUG TEST                                | RESULT(S)          |
| 10 - REFLECTIVE CLOTHING<br>11 - LIGHTING - PEDESTRIAN |  |  | F - FEMALE                              |                              |   |  | 4 - ILLNESS<br>5 - FELL ASLEEP, FAINTED,                    |  | 1 - AMPHETAMINES<br>2 - BARBITURATES     |                    |
| / BICYCLE ONLY   |  |  | M - MALE U - OTHER/UNKNOWN              |                              |   |  | FATIGUED, ETC.  |  | 3 - BENZODIAZEPINES<br>4 - CANNABINOIDS  |                    |
| 99 - OTHER / UNKNOWN                                   |  |  |   |                              |   |  |   |  |  |                    |
| 99 - OTHER / UNKNOWN                                   |  |  |   |                              |   |  | 6 - UNDER THE INFLUENCE<br>MEDICATIONS / DRUGS<br>/ ALCOHOL | : OF   | 5 - COCAINE<br>6 - OPIATES / OPIOIDS     |                    |
| 99 - OTHER / UNKNOWN                                   |  |  | o ometomatem                            |                              |   |  |   | : OF   | 6 - OPIATES / OPIOIDS<br>7 - OTHER       |                    |
| 99 - OTHER / UNKNOWN                                   |  |  | 0 0.12.00.00.00.00                      |                              |   |  | MEDICATIONS / DRUGS<br>/ ALCOHOL                            | OF   | 6 - OPIATES / OPIOIDS                    |                    |

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

| OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM   |   |                   |   |  | LOCAL REPORT NUMBER   |   |  |                        |           |  |
|--|---|-------------------|---|--|---|---|--|------------------------|-----------|--|
|  |   |                   |   |  |   | 2   0   2   5   3   | 1   4   5  |                        |           |  |
| unit#  | NAME: LAST, FI  |                   | ETH   | IAN OLIVE  | ER .  | DATE OF BIRT  | гн<br>2 <sub> </sub> 0 <sub> </sub> 1 <sub> </sub> 3 <sub> </sub>  | AGE 1 2                | GENDER M  |  |
| ADDRESS: STRE  | EET, CITY, STATE, ZIP   |                   |   |  |   | CONTACT PHONE - INCLUDE AREA CO                           | DE   |                        |           |  |
| ADDRESS: STRE<br>854 BF  | ROADWA  | Y AVE 101 BEDFORI | OH 44   | 146  |   |   |  |                        |           |  |
| INJURIES 5   | INJURED<br>TAKEN BY   | EMS AGENCY (NAME) |   | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  | SAFETY EQUIPMENT USED 0 4   | DOT-COMPLIANT MC HELMET 0                                 | POSITION AIR BAG USAGE   | EJECTION 1             | TRAPPED 1 |  |
| UNIT#  | NAME: LAST, FI  | RST, MIDDLE       |   |  | •   | DATE OF BIRT  | гн   | AGE                    | GENDER    |  |
|  |   |                   |   |  |   |   |  | Ш                      |           |  |
| 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 USAGE   | EJECTION               | TRAPPED   |  |
|  | TAKEN BY  |                   |   |  | USED  | DOT-COMPLIANT MC HELMET                                   |  |                        |           |  |
| UNIT#  | NAME: LAST, FI  | RST, MIDDLE       |   |  |   | DATE OF BIRT  | гн   | AGE                    | GENDER    |  |
|  |   |                   |   |  |   |   |  |                        |           |  |
| ADDRESS: STRE  | EET, CITY, STATE, ZIP   |                   |   |  |   | CONTACT PHONE - INCLUDE AREA CO                           | DE   |                        | 1         |  |
| INJURIES   | INJURED   | EMS AGENCY (NAME) |   | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  | SAFETY EQUIPMENT  | SEATING I   | POSITION AIR BAG USAGE   | EJECTION               | TRAPPED   |  |
|  | TAKEN BY  |                   |   |  | USED  | DOT-COMPLIANT MC HELMET                                   |  |                        |           |  |
| UNIT#  | NAME: LAST, FI  | RST, MIDDLE       |   |  | •   | DATE OF BIRT  | гн   | AGE                    | GENDER    |  |
|  |   |                   |   |  |   | <u> </u>  |  |                        | I L       |  |
| ADDRESS: STRE  | EET, CITY, STATE, ZIP   |                   |   |  |   | CONTACT PHONE - INCLUDE AREA CO                           | DE   |                        | 1         |  |
| INJURIES   | INJURED   | EMS AGENCY (NAME) |   | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  | SAFETY EQUIPMENT  | SEATING I   | POSITION AIR BAG USAGE   | EJECTION               | TRAPPED   |  |
|  | TAKEN BY  |                   |   |  | USED  | DOT-COMPLIANT MC HELMET                                   |  |                        |           |  |
| 1 - FATAL  | IN  | JURIES            | 1 - NONE USED   | SAFETY EQUIPMENT USED  | SEATI<br>1 - FRONT - LEFT SIDE (MOTORCYC  | NG POSITION   | AIR BA   | G USAGE                |           |  |
| 1 - FAIAL 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 |   |                   | 3 - LAP BELT O<br>4 - SHOULDER<br>5 - CHILD REST<br>FORWARD F | BELT ONLY USED  NLY USED  & LAP BELT USED  RAINT SYSTEM-  ACKNING  RAINT SYSTEM-  G  EAT  ED  EPADS USED  HEES, ETC.)  TE CLOTHING  PEDESTRIAN  NLY  NLY  NLY  NLY  NLY  NLY  NLY  N | 2 - FRONT - NIDDLE 3 - FRONT - NIDDLE 4 - SECOND - LEFT SIDE (MOTORCY 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - MIDDLE 8 - THIRD - MIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENCL (NON-TRAILING UNIT) BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN | E SIDE CAR)  CAB  SIED CARGO AREA P WITH CAP)  CARGO AREA | 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN  EULOTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 4 - NOT APPLICABLE |                        |           |  |
| F - FFMALF   | G   | SENDER            |   |  |   |   |  |                        |           |  |
| F - FEMALE<br>M - MALE<br>U - OTHER/UNKN   | IOWN  | BENDER            |   |  |   |   | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANIC 3 - FREED BY NON-MECHANICA  | L MEANS                |           |  |
| M - MALE   | IOWN  | BENDER            |   |  |   | DATE OF BIRT  | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANIC 3 - FREED BY NON-MECHANICA  | AL MEANS               | GENDER    |  |
| M - MALE<br>U - OTHER/UNKN   | T, MIDDLE   | DENDER            |   |  |   | DATE OF BIRT  | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANIC 3 - FREED BY NON-MECHANICA  | AL MEANS<br>L MEANS    | GENDER    |  |
| M - MALE U - OTHERUNKN  NAME: LAST, FIRST,  ADDRESS: STREET  | T, MIDDLE   | BENDER            |   |  |   | CONTACT PHONE - INCLUDE AREA                              | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICA 3 - FREED BY NON-MECHANICA  H A CODE   | AL MEANS L MEANS AGE   |           |  |
| M - MALE<br>U - OTHERUNKN<br>NAME: LAST, FIRST.  | T, MIDDLE   | HENDER            |   |  |   |   | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICA 3 - FREED BY NON-MECHANICA  H A CODE   | AL MEANS<br>L MEANS    | GENDER    |  |
| M - MALE U - OTHERUNKN  NAME: LAST, FIRST,  ADDRESS: STREET  | T, MIDDLE ET, CITY, STATE, ZIP T, MIDDLE                      | HENDER            |   |  |   | CONTACT PHONE - INCLUDE AREA                              | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICA 3 - FREED BY NON-MECHANICA  H A CODE   | AL MEANS L MEANS AGE   |           |  |
| M - MALE U - OTHER/UNKN  NAME: LAST, FIRST,  ADDRESS: STREET   | T, MIDDLE TT, CITY, STATE, ZIP T, MIDDLE TT, CITY, STATE, ZIP | BENDER            |   |  |   | CONTACT PHONE - INCLUDE ARE/                              | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICA 3 - FREED BY NON-MECHANICA  H A CODE   | AL MEANS L MEANS AGE   |           |  |
| M - MALE U - OTHER/UNKN  NAME: LAST, FIRST,  ADDRESS: STREET   | T, MIDDLE TT, CITY, STATE, ZIP T, MIDDLE TT, CITY, STATE, ZIP | HENDER            |   |  |   | CONTACT PHONE - INCLUDE AREA                              | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICA 3 - FREED BY NON-MECHANICA  H A CODE   | AL MEANS  L MEANS  AGE | GENDER    |  |
| M-MALE U-OTHERUNKN  NAME: LAST, FIRST,  ADDRESS: STREET  | T, MIDDLE TT, CITY, STATE, ZIP T, MIDDLE TT, CITY, STATE, ZIP | BENDER            |   |  |   | CONTACT PHONE - INCLUDE ARE/                              | 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICA 3 - FREED BY NON-MECHANICA  H A CODE H A CODE  | AL MEANS  L MEANS  AGE | GENDER    |  |

1P 1/19 [760· 1500]