OHIO DEPARTMENT TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT LOCAL INFORMATION									LOCAL REPORT NUMBER *					
☐ PHOTOS TAKEN	□ OH-2 □	OH-3	[2 0 2 5 3 1 6 5											
SECONDARY CRASH			PORTING AGENC				NCIC *	HIT/SKIP 1 - Solved	NIIMRED OF LINITS	0 1 98 - ANIMAL 99 - UNKNOWN				
COUNTY* LOCALITY		LOCATION: CITY, VILLAG		_D HEIG	HTS	<u> </u>	2 - Unsolved CRASH DA	CRASH SEVERITY						
1 1 8 1	1 - CHY * 2 - VILLAGE *	GARFIELI					<u> 1 2 1 0 2 0 2</u>	5 1 - FATAL 2 - SERIOUS INJURY						
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH	LOCATION	ROAD NAME		ROAD TYPE	I ATITITIE DECIM	SUSPECTED 3 - MINOR INJURY SUSPECTED					
LOCATI			3 - EAST 4 - WEST	Garfield	d		$\lfloor B \rfloor L \rfloor$	4 1 1 4 3	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE					
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST		NCE ROAD NAME (ROAD, MILEPOST, I	HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL	ONLY					
REFE			4 - WEST	Birchw			A _I V _I	8 1 1 6 2						
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST	DIRECTION DECEDEMPE 1 - NORTH		ATE ROUTE (TP)		AL - ALLEY HW		RD - ROAD	■ WITHIN INTERSE	INTERSECTION RELATE CTION OR ON APPROACH					
1 3-HOUSE#	2 - SOUTH 3 - EAST 4 - WEST	US - FEDERA SR - STATE F		TF	BL - BOULEVARD MP CR - CIRCLE OV	- MILEPOST - OVAL	SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL	■ WITHIN INTERCH	ANGE AREA	NUMBER OF APPROACHES				
DISTANCE COMM DECEDEMME	DISTANCE		RED TOWNSHIP		DR - DRIVE PI -		WA - WAY		ROADWAY					
	2 - Feet 3 - Yards							☐ ROADWAY DIVID	ED					
	PATION OF EIDET HADMEIII WAY 9 - CROSSOVE				MANNER OF CRASH COLLISION			DIRECTION OF TRAVEL		MEDIAN TYPE				
0 1 2-ON ROAD 2-ON SHOU 3-IN MEDIAL 4-ON ROAD	JLDER 10 - DRIVEWA' N ACCESS	Y / ALLEY	6	1 - NOT COLLISION BETWEEN TWO MOTOR	4 - REAR-TO-R 5 - BACKING 6 - ANGLE	REAR		1 - NORTH 2 - SOUTH	(<4 F	DED FLUSH MEDIAN EET)				
5 - ON GORE 6 - OUTSIDE TRAFFICY	12 - SHARED L WAY OR TRAIL	JSE PATHS S		VEHICLES IN TRANSPORT 2 - REAR-END	8 - SIDESWIPE	, SAME DIRECTION , OPPOSITE DIRECTION		3 - EAST 4 - WEST	(≥4 F 3 - DIVIE	DED FLUSH MEDIAN EET) DED, DEPRESSED MEDIAN DED, RAISED MEDIAN				
7 - ON RAMP 8 - OFF RAM		TH		3 - HEAD-ON	9 - OTHER / UN	NKNOWN		(ANY	TYPE) ER / UNKNOWN					
WORK ZONE RELATED WORKERS PRESENT		WORK ZONE			1 - BEFORE	CRASH IN WORK ZON		CONTOUR	CONDITIONS	SURFACE				
LAW ENFORCEMENT PRESENT		LANE SHIFT/CROSSOV WORK ON SHOULDER OR MEDIAN	EK		WARNIN 2 - ADVANO 3 - TRANSI 4 - ACTIVIT	CE WARNING AREA TION AREA			_ 2	_2_				
☐ ACTIVE SCHOOL ZONE		INTERMITTENT OR MOV OTHER	/ING WORK			IATION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET 3 - SNOW	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS,				
LIGHT CONDITION WEATHER								3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER /UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING,	ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE				
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTE	FD ROADWAY		1 - CLEAR 2 - CLOUD 3 - FOG. S		6 - SNOW 7 - SEVERE CROSSW 8 - BLOWING SAND, S			JUNANOWN	MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	51 DIRT 5 - DIRT 9 - OTHER /UNKNOWN				
4 - DARK - ROADV	WAY NOT LIGHTED OWN ROADWAY LIGHTING	2_	4 - RAIN 5 - SLEET,		9 - FREEZING RAIN OF 99 - OTHER / UNKNOW	R FREEZING DRIZZLE			5-OTHERONKNOWN	IDIANAOWIA				
S-CARA UNMONIN														
								<u> </u>						
UNIT#1 WAS	TRAVELING S	O HTUO	N BIRCH	WOOD.	AT					Indicate the north direction with an "N" on the				
GARFIELD BL										compass diagram.				
GARFIELD BL	VD AT BIRCH	WOOD UI	NIT#1 A	TTFMPT	FD				North					
								Birchwood	₫					
TO CROSS GARFIELD BLVD.AS A RESULT, THE RIGHT Stop Signs Not To Scale														
FRONT. OF.U#2.COLLIDED WITH THE LEFT FRONT. SIDE.														
OF U#1.BOTH UNITS WERE MOVED FROM FINAL REST.														
AND PARKED ON BIRCHWOOD UPON ARRIVAL.BWC							id Blvd							
NOTE:DRIVER OF UNIT#1-STATED; I-STOPPED AT THE														
STOP SIGN AI	ND LOOKED I	BOTH WA	YS. NO	T MY FA	ULT:		F-	3 <u>—</u> 3						
									<u> </u>					
							└		l;					
CRASH REPORTED	D DATE/TIME		DISPATCH DATI	E/TIME		ARRIVAL DATE/TIME		SCENE CLEAF	RED DATE/TIME	REPORT TAKEN BY				
1121101210121		1 2 1 0		5 1 2 1			1 2 1 6	11211012012		POLICE AGENCY MOTORIST				
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S				CHECKED BY OF D. Bailey	FICER'S NAME*		SUPPLEMENT				
	2 5	7 2	1 31		ER'S BADGE NUMBER*		<u> </u>	CHECKED BY OFFICER'S BADGE	NUMBER*	(CORRECTION on ADDITION TO ON EXCEIDED REPORT SHAT TO COPE				
			J	0 0	1 - 1 - 1 - 1		1	0 1						

	OH OF SAPE	IIO DEPARTMENT PUBLIC SAFETY TY - SERVICE - PROTECTION UNIT						2,0,2,5,3	LOCAL REPORT NUMBER		
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE RICHARDSC	(L Sam	ne As Driver)	OWNER P	HONE: INCLUDE AREA CODE	(Same As Driver)		DAMAGE DAMAGE SCALE		
OWNER	OWNER ADDRE	ESS: STREET, CITY, STATE, ZIP	(Same As Di		5.117	-0 011	44405	1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE		
ò		GARFIELD ARRIER: NAME, ADDRESS, CITY, STATE, ZIP		GARFIEI		S OH IAL CARRIER PHONE: INCLUDE A	44125 IREA CODE	<u> </u>	9 - UNKNOWN		
					DAMAGED AREA(S)						
	LP STATE	LICENSE PLATE # HZQ8688		HICLE IDENTIFICATION # $_{1}4_{1}E_{1}1_{1}9_{1}R_{1}5_{1}7_{1}1_{1}$	8 ₁ 7 ₁ 1 ₁	VEHICLE YEAR	VEHICLE MAKE Chrysler	12	INDICATE ALL THAT APPLY		
		JRANCE INSURANCE COMPANY	(INSURANCE POLICY#		VEHICLE COLOR	VEHICLE MODEL Town & Countr	10 12	2 10 11 12		
		TYPE of USE	IN EMERGENCY	US DOT#	TOWED	BY: COMPANY NAME	Town & Count	9 9 3	3 , 2 3		
	COMMER		RESPONSE # OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	-	HAZARDOUS M	ATERIAL	8 7 6 5	4 8 7 5 4		
	INTERLO DEVICE EQUIPPE	☐ HIT/SKIP UNIT	0_2	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		MATERIAL RELEASED PLACARD	CLASS# PLACARD ID#	7 6 5	11 12 7 6 5		
	0 0	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12 - GOLF CART 13 - SNOWMOBILE		6+ PASSENGERS) 2	3 - PEDESTRIAN/SKATER 4 - WHEELCHAIR (ANY TYPE) 5 - OTHER NON- MOTORIST	10/	11 1 2		
	0 2	3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE	14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	22 - ANIMAL	WITH RIDER OR 2	6 - BICYCLE 7 - TRAIN 9 - UNKNOWN OR HIT/SKIP	9 9 3 3			
щ		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ZHINDS	E-BIOWIN VEHICLE 3	3 - Oldidowie Old Illifoldi	12	7 6 5 4		
VEHICLE		# OF TRAILING UNITS						10 12	6 5 11 12 1		
		WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	OMOUS MODE 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE		IDITIONAL 9	- UNKNOWN	11 1 2	10 1 2		
	WIEN CRASH OCCURED?			2 - PARTIAL AUTOMATION		H AUTOMATION L AUTOMATION		0 4 5			
		1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE	11 - FIRE 12 - MILITARY 13 - POLICE	16 - FARM 17 - MOWING		21 - MAIL CARRIER 99 - OTHER /UNKNOWN	7 6 5	7 5 5		
		3 - ELECTRONIC RIDE SHARRING 8 - BUS: SHUTTLE 13 - POLICE 4 - SCHOOL TRANSPORT 9 - BUS: OTHER 14 - PUBLIC UTILITY 5 - BUS:TRANSITICOMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT		14 - PUBLIC UTILITY	18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL			•	12 12 12		
	0 1				8 - POLE 12 - CONCRETE MIXER			12 0 0			
	CARGO BODY			6 - CARGO VAN/ENCLOSED BOX	9 - CARGO TANK 13 - AUTO TRANSPORTER 10 - FLAT BED 14 - GARBAGE/REFUSE 11 - DUMP 99 - OTHER / UNKNOWN			, ,	9 3 9 7 3 9 8 3		
	TYPE	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES		FOR TROUBLE 96 ABLED FROM PRIOR	3 - OTHER / UNKNOWN	6			
		2 - HEAD LAMPS 3 - TAIL LAMPS 1 - INTERSECTION -	5 - STEERING 6 - TIRE BLOWOUT 3 - INTERSECTION - OTHER	8 - TRAILER EQUIPMENT DEFECTIVE 6 - BICYCLE LANE	ACCIDENT		2 - FIRST RESPONDER	- NO DAMAGE [0]	6 6 6 6 □ - UNDERCARRIAGE [14]		
	NON-MOTORIST	MARKED CROSSWALK 2 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRI	VEWAY ACCESS ARED USE PATHS OR	AT INCIDENT SCENE 19 - OTHER / UNKNOWN	- TOP [13]	- ALL AREAS [15]		
	LOCATION AT IMPACT	UNMARKED CROSSWALK 1 - NON-CONTACT	5 - TRAVEL LANE-OTHER LOCATION 1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE		18 - APPROACHING	_	NIT NOT AT SCENE [16] NITIAL POINT OF CONTACT		
	4	2 - NON-COLLISION 3 - STRIKING	NON-COLLISION 1. 2 - BACKING 8 - ENTERING TRAFFIC LANE		14 - ENTERING OR CROSSING OR LEAVING VEHICLE 19 - STANDING SPECIFIED LOCATION 20 - OTHER NON-MOTORIST						
	ACTION	5 - BOTH STRIKING	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC	15 - WALKING, RUNNING, 21 - STANDING OUTSIDE JOGGING, PLAYING DISABLED VEHICLE 16 - WORKING 99 - OTHER / UNKNOWN			1			
		& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	12 - DRIVERLESS		SHING VEHICLE	SS CHERTOMAN	13 - TOP	99 - UNKNOWN		
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM	17 - VIIS	ION OBSTRUCTION 2	21 - LYING IN ROADWAY	TDAFF/AWAY 51	TRAFFIC		
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE	A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY	18 - OPE EQU	ERATING DEFECTIVE 2	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN		
	10.2	4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	FAL	AD SHIFTING/ LING/SPILLING PROPER CROSSING	ROADWAY 99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES		12 - IMPROPER BACKING		AUTOR			# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING		
T(S)	SEQUENCE OF	- FVFAITO						_	1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING		
EVENT(S)			6 - EQUIPMENT FAILURE	EVENTS 11 - CROSS CENTERLINE -	16 - RAII	LWAY VEHICLE 2	22 - WORK ZONE	2	3 - INVOLVED - PASSIVE CROSSING		
	¹ 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY	17 - ANII 18 - ANII	MAL - FARM MAL - DEER	MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	L L	INIT / NON-MOTORIST DIRECTION		
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOT TRA	MAL - OTHER FOR VEHICLE IN NSPORT	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST		
				15 - PEDALCYCLE	21 - PAR	KED MOTOR VEHICLE	VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 1 TO	3 - EAST 7 - SOUTHEAST		
	3			COLLISION WITH FIXED OBJECT		-			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN		
	4, , ,	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	43 - CUF 44 - DITC 45 - EMB	CH IANKMENT 5	0 -WORKZONE MAINTENANCE EQUIPMENT 1 - WALL	UNIT SPEED	DETECTED SPEED		
		STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR	46 - FEN 47 - MAIL	CE 5	2 - BUILDING 3 - TUNNEL 4 - OTHER FIXED OBJECT	, 2, , ,	1 1-STATED/ESTIMATED SPEED		
	5	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	SUPPORT 42 - CULVERT	48 - TRE 49 - FIRE	E 9 E HYDRANT	9 - OTHER / UNKNOWN		2 - CALCULATED / EDR		
	6							POSTED SPEED	3 - UNDETERMINED		
	. 1		1					_ 2 _ 5 _			
HS	Y8304 OH1U 1/19 [FIRST HARMFUL EVENT [760-0820]	I M	OST HARMFUL EVENT					PAGE OF		

	OH OF SAPET	IO DEPARTMENT PUBLIC SAFETY TY - BERVICE - PROTECTION UNIT				HONE: INCLUDE AREA CODE		2,0,2,5,3	LOCAL REPORT NUMBER
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE BODOSSIAN	「■ st N DAVID MICH	(Same As Driver)		DAMAGE DAMAGE SCALE			
ER		SS: STREET, CITY, STATE, ZIP	(Same A					1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE
OWN	6614	GREENBRI	ER DR	BRECKS		AL CARRIER PHONE: INCLUDE A	44141	3 2- MINOR DAMAGE	9 - UNKNOWN
	COMMERCIAL CA	RRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERC	AL CARRIER PHONE: INCLUDE A	REA CODE		DAMAGED AREA(S)
Ē	LP STATE	LICENSE PLATE #	0.7004	VEHICLE IDENTIFICATION #	4 0 4	VEHICLE YEAR	VEHICLE MAKE		INDICATE ALL THAT APPLY
	OH	KBA1292 INSURANCE COMPANY		$ R_1F_1V_16_1P_1W_13_16_17_1 $ INSURANCE POLICY#	7 4 2 4 2 0 2 3 Toyota VEHICLE COLOR			11 12 1	11 12 1
		Progressive Progressive	e	946174423		WHI	RAV4	10 11 2	2 10 11 1
	☐ COMMERC	TYPE OF USE CIAL GOVERNMENT	☐ IN EMERGENCY RESPONSE	US DOT #	_ TOWED	ED BY: COMPANY NAME		9 9 3	3 9 9 3 3
	INTERLO DEVICE EQUIPPE	☐ HIT/SKIP UNIT	#OCCUPANTS	VEHICLE WEIGHT GWWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 ->26K LBS. [] 3 ->26K LBS. []		HAZARDOUS M MATERIAL RELEASED PLACARD	ATERIAL CLASS# PLACARD ID#	8 7 6 5	7 9 5 4 11 12 1 6 5
31	2 - PASSENGER VAN (MINIVAN) 8 3 - SPORT UTILITY VEHICLE 9 4 - PICK UIP 10 10 11 TYPE 5 - CARGO VAN 6 - VAN (9-15 SEATS) 11		7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	18 - LIMO (LIVERY VEHICLE) 19 - BUS (LIVERY VEHICLE) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE		3 - PEDESTRIANISKATER 4 - WHEELCHAIR (ANY TYPE) 5 - OTHER NON- MOTORIST 6 - BICYCLE 7 - TRAIN 9 - UNKNOWN OR HIT/SKIP	9	7 6 5 12
VEHICLE	# of TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONO	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION VEL	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION		- UNKNOWN	11 12 1 10 11 12 1 9 9 3 4 8 7 7 6	2 10 11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	0 1	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS-TRANSIT/COMMUTER	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	16 - FARM 17 - MOWING 18 - SNOWI REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL		21 - MAIL CARRIER 19 - OTHER JUNKNOWN	7 6 5	12 12 12
	CARGO BODY TYPE	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 1 - TURN SIGNALS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 4 - BRAKES	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VANIENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL 7 - WORN OR SLICK TIRES	10 - FL/ 11 - DU	GO TANK 13 KT BED 14 MP 99	- CONCRETE MIXER - AUTO TRANSPORTER - GARBAGEIREFUSE - OTHER / UNKNOWN - OTHER / UNKNOWN	9 6 3	9 3 9 3 3
	VEHICLE DEFECTS	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DIS ACC	ABLED FROM PRIOR IDENT			6 6 6
		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 N			2 - FIRST RESPONDER AT INCIDENT SCENE 9 - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	- UNDERCARRIAGE [14] - ALL AREAS [15] IT NOT AT SCENE [16]
	3	4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 10 - PARKED		8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING SPECIFICATION 21 - STANDING OUTSIDE DISABLED VEHICLE 16 - WORKING 17 - PUSHING VEHICLE			1 2 0-NO DAMAGE 1-12-REFER TO DIAGRAM 13-TOP	
(9	.0.1.	1- NONE 2 - FAILURE TO YIELD 3 - RAIN RED LIGHT 4 - RAIN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	LIGHT CLOSE/ACDA 14 - STOPPED OR PARKED 'SIGN 9 - IMPROPER LANE ILLEGALLY CHANGING 15 - SWERVING TO AVOID 10 - IMPROPER PASSING 15 - SWERVING TO AVOID		17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY 18 - OPERATING DEFECTIVE 22 - NOT DISCERNABLE EQUIPMENT 23 - OPENING DOOR INTO 19 - LOAD SHIFTING/ ROADWAY FALLINGSPILLING 99 - OTHER IMPROPER ACTION		2 - NOT DISCERNABLE 3 - OPENING DOOR INTO ROADWAY 9 - OTHER IMPROPER	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY # OF THROUGH LANES ON ROAD	TRAFFIC
EVENT(SEQUENCE OF	EVENTS		EVENTS				_ 3 _	2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING
	1 2 0	1 - OVERTURNIROLLOVER 2 - FIREEERLOSION 3 - IMMERSION 4 - JACKKNIPE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - OBER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE		2 - WORK ZONE MAINTENANCE EQUIPMENT 3 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 4 - OTHER MOVABLE OBJECT	UN FROM 3 TO	1 - NON-MOTORIST DIRECTION
			04 0UUDD ::: -::-	COLLISION WITH FIXED OBJECT	43 - CUF	R .	0 -WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN
	⁴	25. IMPACT ATTENUATOR / CRASH CUSHION 26. BRIDGE OVERHEAD STRUCTURE 27. BRIDGE PIER OR ABUTMENT 28. BRIDGE PARAPET 29. BRIDGE RAIL 30. GUARDRAIL FACE	31 - GUARDRAIL END 22 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHTILLMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	44 - DITC 45 - EMB 46 - FEN 47 - MAIL 48 - TREI	H ANKMENT 5 DE 5 BOX 5	0-WORKZONE MAINTENANCE EQUIPMENT 1-WALL 2 - BUILDING 3 - TUNNEL 4 - OTHER FIXED OBJECT 9 - OTHER / UNKNOWN	UNIT SPEED	DETECTED SPEED 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
	6 		. 1					POSTED SPEED	3 - UNIDE LEKMINEU
HSY	/8304 OH1U 1/19 [FIRST HARMFUL EVENT 760-08201		MOST HARMFUL EVENT					PAGE OF

OHIO DEPARTMENT OF PUBLIC SAFETY	MOTODICT / NO	N MOTOD	CT						LOCAL	REPORT NUMBE	R		
OF PUBLIC SAFETY	MOTORIST / NO	N-MOTOR	51				_ 2 _	0 2 5	3	1 6	5		
M UNIT # NAME: LAST, FIRS	ST, MIDDLE							DATE OF B	RTH		AGE	GENDER	
TYSC	ON .	JANAN	K					1 0 1		8 1	4 4	<u> </u>	
	ELD BLVD UP	C	ARFIELD HTS	ОΠ	44125		CONTACT PI	HONE - INCLUDE AREA CODE	!	1	1 1	1 1 1	
6302 OAKT	MS AGENCY (NAME)		CAL FACILITY (NAME, CITY)	OH SAFETY E		$\overline{}$		SEATING POS	SITION	AIR BAG USA	AGE EJECTIO	N TRAPPED	
5					0 4	╝╸	DOT-COMPLIANT MC HELMET	0 _	1	1_	_1_	_	
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE	CHARGED	LOCAL	OFFENSE DESCRIPT	TION		•		CITATION NU	MBER		
O T ENDORSEMENT	RESTRICTION SELECT UP TO 3	31.19	ALCOHOL / DRUG SUSPECT		Stop Sigi	n	ALCOHOL	TEST		G2025	02465		
R SELECT UP TO 2	RESTRICTION SELECT UP 10 3	DISTRACTED BY		ARIJUANA		STATUS	TYPE	VALUE	STAT			SULT SELECT UP TO 4	
			OTHER DRUG		1	1_1_	1		1				
M UNIT# NAME: LAST, FIRS							0 6	DATE OF BI		7 7	AGE	GENDER B. 4	
T 0 2 BODO R ADDRESS: STREET, CITY, STATE, ZIP	OSSIAN I	DAVID	MICH	AEL				1 7 1		1 1		M	
S 6614 CDEEN	NBRIER DR	BI	RECKSVILLE	ОН	44141				1	ĺ	1 1	1 1 1	
-	EMS AGENCY (NAME)		ICAL FACILITY (NAME, CITY)		QUIPMENT		DOT-COMPLIANT	SEATING POS	ITION	AIR BAG USA	GE EJECTION	N TRAPPED	
<u>5</u>					0 4	<u> </u>	MC HELMET	0	1	1_	_1_	_ _1	
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE	CHARGED	CODE	OFFENSE DESCRIPT	TION				CITATION NUI	MBER		
T O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECT		CONDITION		ALCOHOL	TEST			DRUG TEST(S)		
R SELECT UP TO 2		DISTRACTED BY		ARIJUANA		STATUS	TYPE 4	VALUE	STATU			ULT SELECT UP TO 4	
		_ _1	OTHER DRUG		1	1	<u> </u>		_1	_ _1_			
M UNIT # NAME: LAST, FIRS	ST, MIDDLE							DATE OF BI	RTH		AGE	GENDER	
T O R ADDRESS: STREET, CITY, STATE, ZIP							CONTACT D	HONE - INCLUDE AREA CODE					
I s									1	1	1 1	1 1 1	
I INJURIES INJURED EI	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	SAFETY E	QUIPMENT		DOT-COMPLIANT	SEATING POS	ITION	AIR BAG USA	GE EJECTION	N TRAPPED	
0 L L L							MC HELMET					_	
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE	CHARGED	CODE	OFFENSE DESCRIPT	TION				CITATION NUI	MBER		
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECT	ED	CONDITION		ALCOHOL	TEST			DRUG TEST(S)		
R SELECT UP TO 2		DISTRACTED BY		ARIJUANA		STATUS	TYPE	VALUE	STATI	US TYP		ULT SELECT UP TO 4	
S L L L			OTHER DRUG			Ш							
INJURIES 1 - FATAL	SEATING POSITION 1 - FRONT - LEFT SIDE	AIR BAG 1 - NOT DEPLOYED	OL C	LASS	1 - ALCOHOL	RESTRICTION INTERLOCK		DRIVER DIS 1 - NOT DISTRACTED	TRACTION	1-1	NONE GIVEN	STATUS	
2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B		DEVICE 2 - CDL INTRA	STATE ONLY		2 - MANUALLY OPERATIN ELECTRONIC COMMU		2-	TEST REFUSED		
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	3 - DEPLOYED SIDE	3 - CLASS C					DEVICE (TEXTING, TYPING,			3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		
5 - NO APPARENT INJURY	(MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT 5 - NOT APPLICABLE		4 - REGULAR CLASS (OHIO = D)				DIALING) 3 - TALKING ON HANDS-F	REE	4 - '	4 - TEST GIVEN, RESULTS KNOWN		
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	& CLASS B BUS				COMMUNICATION DE 4 - TALKING ON HAND-HI		5 - 1	5 - TEST GIVEN, RESULTS UNKNOWN		
INJURED TAKEN BY 1 - NOT TRANSPORTED	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)					RACTOR-TRAIL DIATE LICENSE	ER	COMMUNICATION DE	VICE				
/TREATED AT SCENE 2 - EMS	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE				RESTRICTI 9 - LEARNER'S			5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE					
3 - POLICE	10 - SI FEDER SECTION OF	1 - NOT EJECTED	OL ENDO	RSEMENT	RESTRICT	IONS		6 - PASSENGER 7 - OTHER DISTRACTION	INSIDE	1-	NONE	TEST TYPE	
9 - OTHER / UNKNOWN	9 - OTHER / UNKNOWN 11 - PASSENGER IN OTHER 2 -		M - MOTORCYCLE				THE		THE VEHICLE 3 - OTHER DISTRACTIONS OUTSIDE		2 - BLOOD		
	(NON-TRAILING UNIT, BUS,	3 - TOTALLY EJECTED	P - PASSENGER		11 - LIMITED I 12 - LIMITED -	OTHER	NI	THE VEHICLE	IS OUTSIDE	3-	URINE BREATH		
SAFETY EQUIPMENT	12 - PASSENGER IN	4 - NOT APPLICABLE	N - TANKER Q - MOTOR SCOOTER			ICAL DEVICES BRAKES, HAND		9 - OTHER / UNKNOWN			OTHER		
1 - NONE USED 2 - SHOULDER BELT ONLY USED	UNENCLOSED CARGO AREA	TRAPPED	R - THREE-WHEEL MO	TORCYCLE	CONTROLS	S, OR OTHER DEVICES)							
3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED	44 BIRING ONL/EUROLE	1 - NOT TRAPPED	S - SCHOOL BUS		14 - MILITARY	VEHICLES ON	LY				DRUG TE	EST TYPE	
5 - CHILD RESTRAINT SYSTEM -	EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS	T - DOUBLE & TRIPLE	TRAILERS	15 - MOTOR V WITHOUT	'EHICLES 'AIR BRAKES					NONE		
FORWARD FACING 6 - CHILD RESTRAINT SYSTEM -	(NON-TRAILING UNIT) 15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS	X - TANKER / HAZMAT		16 - OUTSIDE 17 - PROSTHE			CONDI			JRINE		
REAR FACING 7 - BOOSTER SEAT	99 - OTHER / UNKNOWN	NON-WEGI ANIGAE MEANS			18 - OTHER			1 - APPARENTLY NORMA 2 - PHYSICAL IMPAIRME			OTHER		
8 - HELMET USED								3 - EMOTIONAL (E.G. DEF					
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)			GEN	DER				ANGRY, DISTURBED)				T RESULT(S)	
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN			F - FEMALE					4 - ILLNESS 5 - FELL ASLEEP, FAINTI	ED.		AMPHETAMINES BARBITURATES		
/ BICYCLE ONLY			M - MALE					FATIGUED, ETC.	_5,		BENZODIAZEPINES CANNABINOIDS		
99 - OTHER / UNKNOWN			U - OTHER/UNKNOWN					6 - UNDER THE INFLUEN MEDICATIONS / DRUG			COCAINE		
								/ ALCOHOL			OPIATES / OPIOIDS OTHER		
								9 - OTHER / UNKNOWN			NEGATIVE RESULTS		

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

OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER					
w) =				-		2 0 2 5 3	1 6 5				
unit#	NAME: LAST, FIR	RST, MIDDLE	RILE	ΞΥ		DATE OF BIRTH AGE GENDER O 6 2 4 1 9 5 4 7 1 M					
	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
		TAVE CLEVELAND	OH 44								
INJURIES 5	INJURED 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 USAG	E EJECTION	TRAPPED 1		
UNIT#	NAME: LAST, FIF		05/	2005		DATE OF BIRT		AGE	GENDER		
2	NEGRIC EET, CITY, STATE, ZIP	Ж	GEC	DRGE ALLEI	N	O 1 1 4 CONTACT PHONE - INCLUDE AREA CO		6 8	<u> </u>		
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INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	POSITION AIR BAG USAG	EJECTION	TRAPPED		
_ 5					0 4	MC HELMET 0	3 1	_	1		
UNIT#	NAME: LAST, FIF					DATE OF BIRT		AGE	GENDER		
2	WOLBE	KI ————————————————————————————————————	DAN	l F			1 9 5 7	6 8	<u> </u>		
-	EET, CITY, STATE, ZIP	AFT RD GARFIELD	HTS OF	l 44125		CONTACT PHONE - INCLUDE AREA CO	DE I	1 1	1		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING I	POSITION AIR BAG USAG	EJECTION	TRAPPED		
5	IAKEN BY					MC HELMET 0	4	_ _1_	1		
UNIT#	NAME: LAST, FIF	RST, MIDDLE				DATE OF BIRT	TH .	AGE	GENDER		
ADDRESS: STRE	EET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES				INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING I	POSITION AIR BAG USAG	EJECTION	TRAPPED		
	TAKEN BY				USED	DOT-COMPLIANT MC HELMET					
1 - FATAL	IN-	JURIES	1 - NONE USED	SAFETY EQUIPMENT USED	SEATI 1 - FRONT - LEFT SIDE (MOTORCYC	NG POSITION	AIR B.	AG USAGE			
2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN			3 - LAP BELT O 4 - SHOULDER 5 - CHILD REST 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 - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCY 5 - SECOND - RIGHT SIDE 7 - THIRD - RIGHT SIDE 8 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK 11 - PASSENGER IN OTHER ENDLC (NONTRAILING UNIT, BUS, PICK-U 12 - PASSENGER IN UNENCLOSED 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NONTRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNIKNOWN	E SIDE CAR) CAB SED CARGO AREA WITH CAP) CARGO AREA	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE				
F - FEMALE M - MALE U - OTHER/UNKNO							1 - NOT TRAPPED 2 - EXTRICATED BY MECHANIC 3 - FREED BY NON-MECHANIC	AL MEANS			
NAME: LAST, FIRST,	F, MIDDLE					DATE OF BIRT	н	AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA	A CODE				
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NAME: LAST, FIRST,	r, MIDDLE		DATE OF BIRT	н	AGE	GENDER					
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE					
AUUNESS: STREET, CITY, STATE, ZIP						GOTTAGT FROME - INCLUDE AREA CODE					
	T, CITY, STATE, ZIP						<u> </u>	<u> </u>			
NAME: LAST, FIRST,						DATE OF BIRT		AGE	GENDER		
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1P 1/19 [760· 1500]