OHIO DEPARTMENT TRAFFIC CRASH REPORT  "DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT									LOCAL REPORT NUMB	ER*				
☐ PHOTOS TAKEN	□ OH-2 □	OH-3	$\lfloor 2     0     2     5     3     2     6     0                           $											
SECONDARY CRASH	OH-1P OTHER REPORTING AGENCY NAME*							HIT/SKIP 1 - Solved 2 - Unsolved	NIIMRED OF LINITS	1,0	1 98 - ANIMAL 99 - UNKNOWN			
COUNTY* LOCALITY* LOCATION: CITY VIRIAGE TOWNSUIR?						0 2 0	2 - Unsolved			PASH SEVERITY				
	1 - CITY * LOCK TONE CITY VELLOW, TOWNSHIP *													
ROUTE TYPE	<u> </u>						ROAD TYPE	I ATITIDE DECIMA	SU	SERIOUS INJURY SPECTED MINOR INJURY				
NO ISIRI	1 4 1 1		2-SOUTH 3-EAST 4-MEST BROADWAY   A   V				4 1 1 4 3	SU	SPECTED INJURY POSSIBLE					
ROUTE TYPE				REFERENCE ROAL	NAME (ROAD, MILEPOST, HOUS	F#)	ROAD TYPE	LONGITUDE DECIMAL		5 - PROPERTY DAMAGE ONLY				
REFERENCE	UTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EFFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) ROAD TYPE  **ROAD TYPE**  *					$_{ }P_{ }K_{ }$	-   8   1   6   0							
REFERENCE POINT			ROLLTE TYPE		RU¶U.	TYPF			INTERSECTION RELATE	D				
1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	1 - NORTH 2 - SOUTH 3 - EAST	US - FEDERAL		AL - ALL AV - AVI		NE SC	D - ROAD Q - SQUARE T - STREET	WITHIN INTERSE	CTION OR ON APPROACH	4				
DISTANCE	4-WEST DISTANCE	SR - STATE RO CR - NUMBERI TR - NUMBERI	ED COUNTY ROUTE	CR - CIE	RCLE OV - OV URT PK - PAF	'AL TE RKWAY TL	E - TERRACE L - TRAIL A - WAY	☐ WITHIN INTERCH.	ANGE AREA	NUMBE	R OF APPROACHES			
EDOM DECEDENCE	I Miles 2 - Feet	ROUTE	ED TOWNSHIP	HE - HE			A-11A1		ROADWAY		MEDIAN TYPE			
	3 - Yards							☐ ROADWAY DIVIDED						
0 1 1 1-0N ROAL		R	1-	MANNER NOT COLLISION	OF CRASH COLLISION/ 4 - REAR-TO-REAR			DIRECTION OF TRAVEL		MEDIAN TYPE				
3 - IN MEDIA 4 - ON ROAL 5 - ON GORE	N ACCESS DSIDE 11 - RAILWAY (	GRADE	I   Z	BETWEEN TWO MOTOR VEHICLES IN	5 - BACKING 6 - ANGLE			1 - NORTH 2 - SOUTH	(<4 FI	ED FLUSH MED EET) ED FLUSH MED				
6 - OUTSIDE TRAFFIC 7 - ON RAME	12 - SHARED U WAY OR TRAILS	ISE PATHS S	2 -	TRANSPORT REAR-END HEAD-ON	7 - SIDESWIPE, SAN 8 - SIDESWIPE, OPF 9 - OTHER / UNKNO	POSITE DIRECTION		3 - EAST 4 - WEST	(≥4 F 3 - DIVIE	(≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN				
8 - OFF RAN		TH	3-	HEAD-ON	o onizity on and				(ANY	TYPE) ER / UNKNOWN				
WORK ZONE RELATED WORKERS PRESENT		WORK ZONE TO				E 1ST WORK ZONE		CONTOUR	CONDITIONS		SURFACE			
LAW ENFORCEMENT  PRESENT		LANE SHIFT/CROSSOVE WORK ON SHOULDER OR MEDIAN	ER .		WARNING SI 2 - ADVANCE W 3 - TRANSITION	VARNING AREA N AREA		_1_	_ 1		_ 2			
		INTERMITTENT OR MOVI OTHER	ING WORK		4 - ACTIVITY AF 5 - TERMINATIO			1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET 3 - SNOW	2 -	CONCRETE BLACKTOP, BITUMINOUS,			
ACTIVE SCHOOL ZONE	CONDITION	1		WEA	THER			3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER	4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL	3 -	ASPHALT BRICK/BLOCK SLAG, GRAVEL,			
1 - DAYLIGHT 2 - DAWN/DUSK			1 - CLEAR 2 - CLOUDY		6 - SNOW 7 - SEVERE CROSSWINDS	:		/UNKNOWN	6 - WATER (STANDING, MOVING) 7 - SLUSH	5-	SLAG, GRAVEL, STONE DIRT OTHER			
3 - DARK - LIGHT	ED ROADWAY WAY NOT LIGHTED OWN ROADWAY LIGHTING	2	3 - FOG, SMO 4 - RAIN 5 - SLEET, HA		8 - BLOWING SAND, SOIL, 9 - FREEZING RAIN OR FRI 99 - OTHER / UNKNOWN	DIRT, SNOW			9 - OTHER/UNKNOWN		/UNKNOWN			
9 - OTHER / UNK			0 02221,181	WE	or omen, omnorm									
NARRATIVE											Indicate the nort			
UNIT 02 WAS	STOPPED AT	A RED LIC	GHT ON								an "N" on the compass diagram			
BROADWAY A	VE/ GARFIEL	D PKWY.	UNIT 02	WAS IN					·		-			
THE LEFT LAI	NE. UNIT 01 S	TRUCK U	NIT 02. L	JNIT 01							* ·			
THEN STRUC	K UTILITY PO	LE #2965	4. THE D	RIVER OF										
UNIT.01.THEN	N.GOT.O.U.T. O	F.HIS VEH	IICLE AN	ID.LEF.T.TH	lE	_			n ( )		-			
SCENE OF TH	HE CRASH					G	arfield Pkwy		Unit 02	— Utility P	ole # 2964			
						,	, any		<b>₽</b> 5					
									Broadway Ave		-			
								Is	y Ave					
								į,			-			
								1 1		Not T	o Scale			
CRASH REPORTE	D DATE/TIME		DISPATCH DATE/TI	IME	ARR			SCENE CLEAR	ED DATE/TIME	<u> </u>	REPORT TAKEN BY			
1122012012		1 2 2 0		1 5 1 6	1 2 2 0 2		1 5 2 6	1122012012		<b>-</b> M	OLICE AGENCY OTORIST			
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NA		<u> </u>		CHECKED BY OF			┰╩┈				
	,	<b>-</b>	J. Pietr	aszkiewicz officer's BAI	GE NUMBER*			CHECKED BY OFFICER'S BADGE	NUMBER*	$+$ $^{-}$	SUPPLEMENT (CORRECTION or ADDITION to see Excellent REPORT SHAT TO COPE			
	3 0	7   4	J	$\begin{bmatrix} 0 & 0 & 7 \end{bmatrix}$				$\lfloor L \rfloor 0 \rfloor 7 \rfloor \perp$						

	OH OF SAPET	IO DEPARTMENT PUBLIC SAFETY TY - BERVICE - PROTECTION						2,0,2,5,3	LOCAL REPORT NUMBER		
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE HILL JAMAL	( 🗷 San	ne As Driver)	OWNER PI	HONE: INCLUDE AREA CODE	( Same As Driver)		DAMAGE  DAMAGE SCALE		
ER		SS: STREET, CITY, STATE, ZIP	( Same As D	river)				1 - NONE	3 - FUNCTIONAL DAMAGE		
OWN	1641	PAYNE AVE	<u> </u>	CLEVELA	ELAND OH 44114  Commercial Carrier Phone: include area code			4 2 - MINOR DAMAGE	4 - DISABLING DAMAGE 9 - UNKNOWN		
	COMMERCIAL CA	RRIER: NAME, ADDRESS, CITY, STATE, ZIP		AREA CODE							
F	LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION #					VEHICLE YEAR	VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY			
	OH	KTJ5309		F,B,9,B,D,1,3,5,7	7 <sub>1</sub> 7 <sub>1</sub> 6 <sub>1</sub>	_2_0_1_1	Jeep	11 12	11 12 1		
		IRANCE RIFIED INSURANCE COMPANY		INSURANCE POLICY #		VEHICLE COLOR WHI	VEHICLE MODEL Compass	10	2 10 11 1 2		
	☐ COMMERC	TYPE OF USE	IN EMERGENCY	US DOT#	1	BY: COMPANY NAME ERSTATE TO	NAUNIC	9 9 3	3 9 9 3 3		
	INTERLO		# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	11111	HAZARDOUS N		795	7 5 74		
	DEVICE EQUIPPE	■ HIT/SKIP UNIT	0,1	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		
		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12 - GOLF CART 13 - SNOWMOBILE			3 - PEDESTRIAN/SKATER 4 - WHEELCHAIR (ANY TYPE)	10/	12 1 2		
	0   3	3 - SPORT UTILITY VEHICLE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR	20 - OTHER 21 - HEAVY	EQUIPMENT 2	5 - OTHER NON- MOTORIST 6 - BICYCLE 7 - TRAIN	9	9 2 3		
	UNIT TYPE	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	16 - FARM EQUIPMENT 17 - MOTORHOME			9 - UNKNOWN OR HIT/SKIP				
/EHICLE		# TDAN N.O	v					11 12	7 6 5 11 12 1		
VEH		# OF TRAILING UNITS						10 12	2 10 11 1		
	_	WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	MOUS MODE 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONI	3 9 9 3 3					
	2				4 - HIGH AUTOMATION 5 - FULL AUTOMATION			8 4 7			
	0 1	1 - NONE 6 - BUS - CHAPTERTOUR 11 - FIRE 0 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY		12 - MILITARY	16 - FARM 21 - MAIL CARRIER 17 - MOWING 99 - OTHER JUNKNOWN		7 6 5	7 6			
		4 - SCHOOL TRANSPORT         9 - BUS - OTHER         14 - PUBLIC UTILITY           SPECIAL         5 - BUS-TRANSITICOMMUTER         10 - AMBULANCE         15 - CONSTRUCTION EQUIPME			18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL		6	12 12 12			
						- 1	2 - CONCRETE MIXER	12			
	0 1	2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLO		CHASSIS 6 - CARGO VAN/ENCLOSED BOX	10 - FLA	RGO TANK 1	3 - AUTO TRANSPORTER 4 - GARBAGE/REFUSE	R M Rs			
	CARGO BODY TYPE	<i>'</i>		7 - GRAIN/CHIPS/GRAVEL	11 - DU	MP 9	9 - OTHER / UNKNOWN	03	⊕		
	VEURIE	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISA	OR TROUBLE 9 ABLED FROM PRIOR IDENT	9 - OTHER / UNKNOWN	6	6 6 6		
F	DEFECTS	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE			12 - FIRST RESPONDER	O DAMAGE [0]	UNDERCARRIAGE [14]		
	NON-MOTORIST	CROSSWALK 2 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	7 - SHOULDER/ROADSIDE 8 - SIDEWALK		RED USE PATHS UR	AT INCIDENT SCENE 99 - OTHER / UNKNOWN	TOP [13]	- ALL AREAS [15]		
	IMPACT	UNMARKED CROSSWALK 1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEG	SOTIATING A CURVE	18 - APPROACHING		IT NOT AT SCENE [16]		
	2	2 - NON-COLLISION 3 - STRIKING 0 1	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE		ERING OR CROSSING CIFIED LOCATION	OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST		THAL POINT OF CONTACT		
		4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTION	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	10 - PARKED 11 - SLOWING OR STOPPED	JOG	GING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE	1 2 0 - NO DAMAGE 1-12 - REFER TO	14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE		
		& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS	16 - WOI 17 - PUS	RKING HING VEHICLE	99 - OTHER / UNKNOWN	DIAGRAM 13 - TOP	99 - UNKNOWN		
									TRAFFIC		
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO	13 - IMPROPER START FROM A PARKED POSITION	18 - OPE	RATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL		
		3 - RAN RED LIGHT 4 - RAN STOP SIGN	CLOSE/ACDA 9 - IMPROPER LANE CHANGING	14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	19 - LOA	D SHIFTING/	23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN		
		5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY		ROPER CROSSING	99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	2 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES		12 - IWI NOI EN BACKING					# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED		
IT(S)	SEQUENCE OF	EVENTS							2 - INVOLVED - ACTIVE CROSSING		
EVEN			A FOUNDATE	EVENTS	40 01"	MAY VEHICLE	22 WODK 70MF	4	3 - INVOLVED - PASSIVE CROSSING		
	1 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	17 - ANIN	IAL - FARM IAI - DEFR	22 - WORK ZONE MAINTENANCE EQUIPMENT	UN	IIT / NON-MOTORIST DIRECTION		
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19 - ANIN 20 - MOT	IAL - OTHER OR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN		1 - NORTH 5 - NORTHEAST		
	<sup>2</sup> 4 0	LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE		NSPORT KED MOTOR VEHICLE	MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE	_	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST		
	3			COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT OBJECT	FROM 3 TO	4 - WEST 8 - SOUTHWEST		
		25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CUR		60 -WORKZONE MAINTENANCE EQUIPMENT		9 - OTHER / UNKNOWN		
	4	/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	44 - DITC 45 - EMB 46 - FENC	ANKMENT SE	i1 - WALL i2 - BUILDING	UNIT SPEED	DETECTED SPEED		
	5	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	41 - OTHER POST, POLE OR SUPPORT	47 - MAIL 48 - TREE	BOX	i3 - TUNNEL i4 - OTHER FIXED OBJECT i9 - OTHER / UNKNOWN	0	3 1 - STATED/ESTIMATED SPEED		
		29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE	HYDRANT	STILLY ORNIVOWN		2 - CALCULATED / EDR		
	6							POSTED SPEED	3 - UNDETERMINED		
	1		2					3   5			
HSY	/8304 OH1U 1/19 [	FIRST HARMFUL EVENT		OST HARMFUL EVENT					PAGE OF		

	OHI OF SAPET	IO DEPARTMENT PUBLIC SAFETY TY - BERVICE - PROTECTION  UNIT						2,0,2,5,3	LOCAL REPORT NUMBER		
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE HULLUM NA	( ■ Sa	me As Driver)	OWNER P	HONE: INCLUDE AREA CODE	( Same As Driver)		DAMAGE DAMAGE SCALE		
<b>.</b>		SS: STREET, CITY, STATE, ZIP	( Same As [	Driver)				1 - NONE	3 - FUNCTIONAL DAMAGE		
OWN	4662	E 90TH ST		GARFIEL	ELD HTS OH 44125  COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			3 2-MINOR DAMAGE	4 - DISABLING DAMAGE 9 - UNKNOWN		
	COMMERCIAL CAI	RRIER: NAME, ADDRESS, CITY, STATE, ZIP	1	AREA CODE							
H	LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAK								DAMAGED AREA(S) INDICATE ALL THAT APPLY		
	OH	JYM4319		GE, K, 5, H, 6, 2, 2, 6, 0 INSURANCE POLICY#	) <sub>1</sub> 4 <sub>1</sub> 7 <sub>1</sub>	2,0,1,7	Chevrolet	11 12	11 12		
		IRANCE	CEPTANCE	000005204		VEHICLE COLOR GRY	VEHICLE MODEL Equinox	10 12 1	2 10 11 1 2		
	☐ COMMERC	TYPE OF USE	IN EMERGENCY	US DOT#	TOWED	BY: COMPANY NAME		9 9 3	3 9 9 3		
	INTERLO		RESPONSE L	VEHICLE WEIGHT GVWR/GCWR	·	HAZARDOUS	MATERIAL		7. 7. 5. 7.		
	DEVICE EQUIPPE	☐ HIT/SKIP UNIT	0,1,	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		MATERIAL RELEASED PLACARD	CLASS# PLACARD ID#	7 6 5	12 7 6 5		
		1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (L		23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE)	10/	12 1		
	0   3	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	14 - SINGLE UNIT TRUCK	20 - OTHER 21 - HEAVY	VEHICLE EQUIPMENT	25 - OTHER NON- MOTORIST 26 - BICYCLE	9 (	9 3 3		
	UNIT TYPE	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME			27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	/*	8 4 7		
/EHICLE			(ATV / UTV)					11 12 1	7 6 5 11 12		
VEH		# OF TRAILING UNITS						10 12	2 10 11 1 2		
		WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	MOUS MODE 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	AUTO	DITIONAL DMATION	9 - UNKNOWN	9 10 2 3	3 9 10 2		
	2	1 - YES 2 - NO 9 - OTHER / UNKNO	WN AUTONOMOU MODE LEVEL	S 2 - PARTIAL AUTOMATION		AUTOMATION AUTOMATION		8 4 -			
	- 2 TAYL 7 BUS INTERCIT		6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FAF 17 - MO	WING	21 - MAIL CARRIER 99 - OTHER /UNKNOWN	8 7 6 5	1 1 1 1 1 1		
	SPECIAL 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONST		13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL			6	6			
	FUNCTION						40.000000000000000000000000000000000000	12	12 12 12		
	1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 2- BUS 4 - LOGGING 4		5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX	9 - CARGO TANK 10 - FLAT BED		12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE	, R M R.	9 3 9 1 3 9 8 3			
	CARGO BODY TYPE	<i>'</i>		7 - GRAIN/CHIPS/GRAVEL	11 - DU	MP	99 - OTHER / UNKNOWN		<b>→</b>		
	1/5/110/5	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT	10 - DIS	OR TROUBLE ABLED FROM PRIOR IDENT	99 - OTHER / UNKNOWN	6	6 6 6		
H	DEFECTS	3 - TAIL LAMPS  1 - INTERSECTION -	6 - TIRE BLOWOUT  3 - INTERSECTION - OTHER	DEFECTIVE  6 - BICYCLE LANE		IAN/CROSSING ISLAND	12 - FIRST RESPONDER	O DAMAGE [0]	UNDERCARRIAGE [14]		
	NON-MOTORIST	MARKED CROSSWALK 2 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE 8 - SIDEWALK		VEWAY ACCESS RED USE PATHS OR	AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- TOP [13]	- ALL AREAS [15]		
H	LOCATION AT IMPACT	UNMARKED CROSSWALK 1 - NON-CONTACT	5 - TRAVEL LANE-OTHER LOCATION  1 - STRAIGHT AHEAD	7 - MAKING LI-TURN		GOTIATING A CURVE	18 - APPROACHING		IT NOT AT SCENE [16]		
	4	2 - NON-COLLISION 1 1 1	2 PACKING	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENT	ERING OR CROSSING CIFIED LOCATION	OR LEAVING VEHICLE 19 - STANDING	"	NITIAL POINT OF CONTACT		
		3 - STRIKING 4 - STRUCK PRE-CRASH ACTION	4 - OVERTAKING/PASSING	10 - PARKED 11 - SLOWING OR STOPPED	15 - WAI	LKING, RUNNING, GING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE	0 6 0 - NO DAMAGE			
		5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS	16 - WO	RKING SHING VEHICLE	99 - OTHER / UNKNOWN	DIAGRAM 13 - TOP	99 - UNKNOWN		
									TRAFFIC		
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO	13 - IMPROPER START FROM A PARKED POSITION		ON OBSTRUCTION RATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL		
	:	3 - RAN RED LIGHT 4 - RAN STOP SIGN	CLOSE/ACDA 9 - IMPROPER LANE CHANGING	14 - STOPPED OR PARKED ILLEGALLY	EQL 19 - LOA	JIPMENT D SHIFTING/ LING/SPILLING	23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN		
		5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY		ROPER CROSSING	99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES		12 - IMPROPER BACKING					# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING		
T(S)	SEQUENCE OF	EVENTS							1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING		
EVEN				EVENTS		WAY VEHICLE	00 HODE 702***	4	3 - INVOLVED - PASSIVE CROSSING		
	1 2 0 1	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	17 - ANI	WAY VEHICLE MAL - FARM MAL - DEER	22 - WORK ZONE MAINTENANCE EQUIPMENT	11	NIT / NON-MOTORIST DIRECTION		
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19 - ANIN 20 - MOT	MAL - OTHER OR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN		1 - NORTH 5 - NORTHEAST		
	2	LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE		NSPORT KED MOTOR VEHICLE	MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE		2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST		
	3			COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT OBJECT	FROM 3 TO	4 - WEST 8 - SOUTHWEST		
	:	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CUF		50 -WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN		
	4	/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	44 - DITC 45 - EMB 46 - FEN	ANKMENT	EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED	DETECTED SPEED		
	5	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	47 - MAIL 48 - TREI	BOX	53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	0, , ,	1 1 - STATED/ESTIMATED SPEED		
		29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE	HYDRANT	SS STILLY OWNSTRY		2 - CALCULATED / EDR		
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INJURIES  1 - FATAL  2 - SUSPECTED SERIOUS INJURY  3 - SUSPECTED MINOR INJURY  4 - POSSIBLE INJURY  5 - NO APPARENT INJURY  1 - NOT TRANSPORTED //TREATED AT SCENE  2 - EMS  3 - POLICE  9 - OTHER / UNKNOWN  SAFETY EQUIPMENT  1 - NONE USED  2 - SHOULDER BELT ONLY USED  3 - LAP BELT ONLY USED  4 - SHOULDER & LAP BELT USED  5 - CHILD RESTRAINT SYSTEM - FORWARD FACING  6 - CHILD RESTRAINT SYSTEM - REAR FACING  7 - BOOSTER SEAT  8 - HELMET USED  9 - PROTECTIVE PADS USED (ELBOWS, KWES, ETC.)  10 - REFLECTIVE CLOTHING  11 - LICHTING - PEDESTRIAN /BICYCLE ONLY	SEATING ROSITION  1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - HEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE PASSENGER) 8 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - HIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST	AIR BAG  1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN  EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 4 - NOT APPLICABLE  TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY	ALCOHOL MA OTHER DRUG  OL CI  1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (O 5 - M / C MOPED ONLY 6 - NO VALID OL  OL ENDO H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTORCYCLE R - THREE-WHEEL MOT S - SCHOOL BUS T - DOUBLE & TRIPLE T X - TANKER / HAZMAT  GEN F - FEMALE M - MALE	ASS  HIO = D)  REMENT  TORCYCLE  RAILERS	1 - ALCOHOL IN DEVICE 2 - COL INTRAS 3 - CORRECTIVI 4 - FARM WAIWE 5 - EXCEPT CLA 6 - EXCEPT CLA 6 - EXCEPT TRA 8 - INTERMEDIA 7 - EXCEPT TRA 8 - INTERMEDIA 10 - LEARNER'S I RESTRICTIO 10 - LIMITED TO 11 - LIMITED TO 12 - LIMITED TO 12 - LIMITED TO 13 - MECHANICI (SPECIAL BR CONTROLS, ADAPTIVE DE 14 - MILITARY V 15 - MOTOR VE WITHOUT A 16 - OUTSIDE M 17 - PROSTHETI	LESTRICTIONS TERLOCK TATE ONLY E LENSES ER	TYPE	DRIVER DIS  1 - NOT DISTRACTED  2 - MANUALLY OPERATI ELECTRONIC COMMI DEVICE (TEXTING, TY) DIALING) 3 - TALKING ON HANDS- COMMUNICATION DE  4 - TALKING ON HANDS- COMMUNICATION DE  5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION THE VEHICLE 8 - OTHER DISTRACTION THE VEHICLE 9 - OTHER / UNKNOWN  1 - APPARENTLY NORM 2 - PHYSICAL IMPAIRME 3 - EMOTIONAL (E.G. DE ANGRY, DISTURBED)  4 - ILLNESS 5 - FELL ASLEEP, FAINT FATIGUED, ETC.	STRACTION  NG AN UNICATION  PING,  FREE EVICE  IELD  EVICE  ITH AN  E  NI INSIDE  NI INS	1. 2. 3. 4. 5. 1. 2. 3. 4. 4. 5.	TEST NONE GIVEN TEST REFUSED TEST GIVEN, CONT SAMPLE / UNUSAB TEST GIVEN, RESU TEST GIVEN TEST GIVEN, RESU T	T STATUS  T AMINATED  LE  ULTS KNOWN  ULTS UNKNOWN  DLTEST TYPE  ST RESULT(S)
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Î	OHIO DEPARTMENT OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER						
	SAPETY - SE	RVICE - PROTECTION			2   0   2   5	3   2   6	0						
	UNIT#	NAME: LAST, FII	R\$T, MIDDLE		DATE OF BIRTH AGE GENDER								
IPANT	ADDRESS: STREE	ET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE									
OCCUPANT													
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
							MC HELMET						
	UNIT#	NAME: LAST, FI	RST, MIDDLE	DATE	OF BIRTH		AGE	GENDER					
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CUPANT	ADDRESS: STREE	ET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE	AREA CODE					
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00	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
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			HIDITE		SAFETY EQUIPMENT USED	SEAT	NG POSITION		AID DA	G USAGE			
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MIT	ADDRESS: STREET	r, CITY, STATE, ZIP		CONTACT PHONE - INCI	UDE AREA CODE		-	-					
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WITNESS	ELSTON		MICH	AEL			L   L		_		M		
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ESS	NAME: LAST, FIRST,	MIDDLE					DATE OF BIRTH AGE GENDER						
WITNESS	ADDRESS: STREET	, CITY, STATE, ZIP					CONTACT PHONE - INCL	UDE AREA CODE					

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## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20253260	REPORTING AGENCY  GARFIELD HEIGHTS  DATE OF CRASH  M 12 D 20 Y 2025						
IN COUNTY OF	CRASH LOCATION						
18	SR 14						
Property owner of damaged	d utility pole (#29654):						
First Energy Corp. (CEI)							
6896 Miller Rd							
Brecksville, OH 44141							
(800) 589- 3101							
	OFFICER'S SIGNATURE	BADGE NUMBER					