



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL INFORMATION					LOCAL REPORT NUMBER *		
<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> Secondary Crash <input type="checkbox"/> Private Property		REPORTING AGENCY NAME * GARFIELD HEIGHTS NCIC * 0 1 8 2 0			HIT/SKIP 1 - Solved 2 - Unsolved	MIN/MDP AC UNITS 0 2	UNIT IN CDDAO 88-ANIMAL 99-UNKNOWN 0 1
COUNTY * 1 8	LOCALITY * 1	LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS			CRASH DATE/TIME * 0 1 1 5 2 0 2 6 1 1 5 1 9		CRASH SEVERITY 5
LOCATION	ROUTE TYPE I R	ROUTE NUMBER 4 8 0	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME	ROAD TYPE H W	LATITUDE DECIMAL DEGREES 4 1 . 4 1 3 9 9 6	
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 23.0	ROAD TYPE M P	LONGITUDE DECIMAL DEGREES 8 1 . 6 0 3 4 1 3	
REFERENCE POINT 2	DIRECTION 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 4 - WEST	ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	INTERSECTION RELATED			
DISTANCE 0 0 0 0 0 0 0 0 0	DISTANCE UNIT OF MEASURE 1 - Miles 2 - Feet 3 - Yards			<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA			
				NUMBER OF APPROACHES ROADWAY			
				ROADWAY DIVIDED			
LOCATION OF FIRST HARMFUL EVENT 0 1		MANNER OF CRASH COLLISION/IMPACT 6		DIRECTION OF TRAVEL 3	MEDIAN TYPE 9		
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		WORK ZONE TYPE 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	CONTOUR 1	CONDITIONS 3	SURFACE 2	
LIGHT CONDITION 1		WEATHER 6					
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN		1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN					
NARRATIVE							
UNIT#1 WAS TRAVELING EAST ON IR480 NEAR MILEPOST 23.0 IN THE MIDDLE OUTSIDE LANE. UNIT#2 WAS TRAVELING EAST ON IR480 NEAR MILEPOST 23.0 IN THE INSIDE LANE. U#1 FAILED TO MAINTAIN CONTROL. AS A RESULT, U#1 ROTATED COUNTER CLOCKWISE AND THE LEFT FRONT COLLIDED WITH THE RIGHT SIDE OF U#2. BOTH UNITS WERE MOVED FROM FINAL REST AND PARKED ON NORTH SHOULDER. BWC							
 North Not To Scale							
CRASH REPORTED DATE/TIME 0 1 1 5 2 0 2 6 1 1 5 1 9		DISPATCH DATE/TIME 0 1 1 5 2 0 2 6 1 1 5 2 2		ARRIVAL DATE/TIME 0 1 1 5 2 0 2 6 1 1 5 5 2		SCENE CLEARED DATE/TIME 0 1 1 5 2 0 2 6 1 1 6 1 4	REPORT TAKEN BY <input type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODS)
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 2 0		TOTAL MINUTES 7 2		OFFICER'S NAME * R. Cramer	
						CHECKED BY OFFICER'S NAME * R. Dodge	
						OFFICER'S BADGE NUMBER 0 3 7	CHECKED BY OFFICER'S BADGE NUMBER * S 2 2

UNIT # 0 1	OWNER NAME: LAST, FIRST, MIDDLE JEFFERSON DASHAY CHYON	(<input type="checkbox"/> Same As Driver)	OWNER PHONE: INCLUDE AREA CODE	(<input type="checkbox"/> Same As Driver)
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OWNER ADDRESS: STREET, CITY, STATE, ZIP 3953 JO ANN DR 22	(<input type="checkbox"/> Same As Driver)
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CLEVELAND OH 44122

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP	COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
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LP STATE O H	LICENSE PLATE # KQV1623	VEHICLE IDENTIFICATION # 3GNAXUEV3M1302667	VEHICLE YEAR 2 0 2 1	VEHICLE MAKE Chevrolet
■ INSURANCE VERIFIED	INSURANCE COMPANY Allstate	INSURANCE POLICY # 969971441	VEHICLE COLOR BLK	VEHICLE MODEL Other/Unknown
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
INTERLOCK DEVICE EQUIPPED		# OCCUPANTS 0 1	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED CLASS # <input type="checkbox"/> PLACARD <input type="checkbox"/> PLACARD	

1-PASSENGER CAR 2-PASSENGER VAN (MINIVAN) 3-SPORT UTILITY VEHICLE 4-PICK UP 5-CARGO VAN 6-VAN (9-16 SEATS)	7-MOTORCYCLE 2-WHEELED 8-MOTORCYCLE 3-WHEELED 9-AUTOCYCLE 10-MOPED OR MOTORIZED 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 (16+ PASSENGERS) 20-OTHER VEHICLE 21-HEAVY EQUIPMENT 22-ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23-PEDESTRIAN/SKATER 24-WHEELCHAIR (ANY TYPE) 25-OTHER NON-MOTORIST 26-BICYCLE 27-TRAIN 99-UNKNOWN OR HIT/SKIP
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# OF TRAILING UNITS				
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WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?	0	0-NO AUTOMATION 1-DRIVER ASSISTANCE 2-PARTIAL AUTOMATION	3-CONDITIONAL AUTONOMOUS MODE LEVEL 4-HIGH AUTOMATION 5-FULL AUTOMATION	9-UNKNOWN
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SPECIAL FUNCTION	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-SNOW REMOVAL 19-TOWING 20-SAFETY SERVICE PATROL	21-MAIL CARRIER 99-OTHER/UNKNOWN
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CARGO BODY TYPE	1-NO CARGO BODY TYPE / NOT APPLICABLE 2-BUS	3-VEHICLE TOWING ANOTHER MOTOR VEHICLE 4-LOGGING	5-INTERMODAL CONTAINER CHASSIS 6-CARGO VAN/ENCLOSED BOX 7-GRAIN/CHIPS/GRAVEL	8-POLE 9-CARGO TANK 10-FLAT BED 11-DUMP	12-CONCRETE MIXER 13-AUTO TRANSPORTER 14-GARBAGE/REFUSE 99-OTHER/UNKNOWN
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VEHICLE DEFECTS	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	9-MOTOR TROUBLE 10-DISABLED FROM PRIOR ACCIDENT	99-OTHER / UNKNOWN
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NON-MOTORIST LOCATION AT IMPACT	1-INTERSECTION - MARKED CROSSWALK 2-INTERSECTION - UNMARKED CROSSWALK	3-INTERSECTION - OTHER 4-MIDBLOCK - MARKED CROSSWALK 5-TRAVEL LANE-OTHER LOCATION	6-BICYCLE LANE 7-SHOULDER/RROADSIDE 8-SIDEWALK	9-MEDIAN/CROSSING ISLAND 10-DRIVeway ACCESS 11-SHARED USE PATHS OR TRAILS	12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER / UNKNOWN
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ACTION	1-NON-CONTACT 2-NON-COLLISION 3-STRIKING 4-STRUCK 5-BOTH STRIKING & STRUCK 9-OTHER / UNKNOWN	0 1 PRE-CRASH ACTION	1-STRAIGHT AHEAD 2-BACKING 3-CHANGING LANES 4-OVERTAKING/PASSING 5-MAKING RIGHT TURN 6-MAKING LEFT TURN	7-MAKING U-TURN 8-ENTERING TRAFFIC LANE 9-LEAVING TRAFFIC LANE 10-PARKED 11-SLOWING OR STOPPED IN TRAFFIC 12-DRIVERLESS	13-NEGOTIATING A CURVE 14-ENTERING OR CROSSING SPECIFIED LOCATION 15-WALKING, RUNNING, JOGGING, PLAYING 16-WORKING 17-PUSHING VEHICLE	18-APPROACHING OR LEAVING VEHICLE 19-STANDING 20-OTHER NON-MOTORIST 21-STANDING OUTSIDE DISABLED VEHICLE 22-OTHER / UNKNOWN
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1-NONE 2-FAILURE TO YIELD 3-RAN RED LIGHT 4-RAN STOP SIGN 5-UNSAFE SPEED 6-IMPROPER TURN	7-LEFT OF CENTER 8-FOLLOWING TOO 9-IMPROPER LANE CHANGING 10-IMPROPER PASSING 11-DOVE OFF ROAD 12-IMPROPER BACKING	13-IMPROPER START FROM A PARKED POSITION CLOSE/ACDA 14-STOPPED OR PARKED ILLEGALLY 15-SWERVING TO AVOID 16-WRONG WAY	17-VISION OBSTRUCTION 18-OPERATING DEFECTIVE EQUIPMENT 19-LOAD SHIFTING/ FALLING/SPILLING 20-IMPROPER CROSSING	21-LYING IN ROADWAY 22-NOT DISCERNABLE 23-OPENING DOOR INTO ROADWAY 99-OTHER IMPROPER ACTION
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CONTRIBUTING CIRCUMSTANCES	1-OVERTURN/ROLLOVER 2-FIRE/EXPLOSION 3-IMMERSION 4-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 - DEER 19-ANIMAL - OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE	22-WORK ZONE MAINTENANCE EQUIPMENT 23-STRIKED BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24-OTHER MOBILE OBJECT
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SEQUENCE OF EVENTS

1 2 0	1-OVERTURN/ROLLOVER 2-FIRE/EXPLOSION 3-IMMERSION 4-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 - DEER 19-ANIMAL - OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE	22-WORK ZONE MAINTENANCE EQUIPMENT 23-STRIKED BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24-OTHER MOBILE OBJECT
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COLLISION WITH FIXED OBJECT - STRUCK

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 32-PORTABLE BARRIER 33-MEDIAN CABLE BARRIER 34-MEDIAN GUARDRAIL 35-MEDIAN CONCRETE BARRIER	37-TRAFFIC SIGN POST 38-OVERHEAD SIGN POST 39-LIGHT/ILLUMINARIES SUPPORT 40-UTILITY POLE 41-OTHER POST, POLE OR SUPPORT 42-CULVERT	43-CURB 44-DITCH 45-EMBANKMENT 46-FENCE 47-MAILBOX 48-TREE 49-FIRE HYDRANT	50-WORKZONE MAINTENANCE EQUIPMENT 51-WALL 52-BUILDING 53-TUNNEL 54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN
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1	FIRST HARMFUL EVENT	1	MOST HARMFUL EVENT
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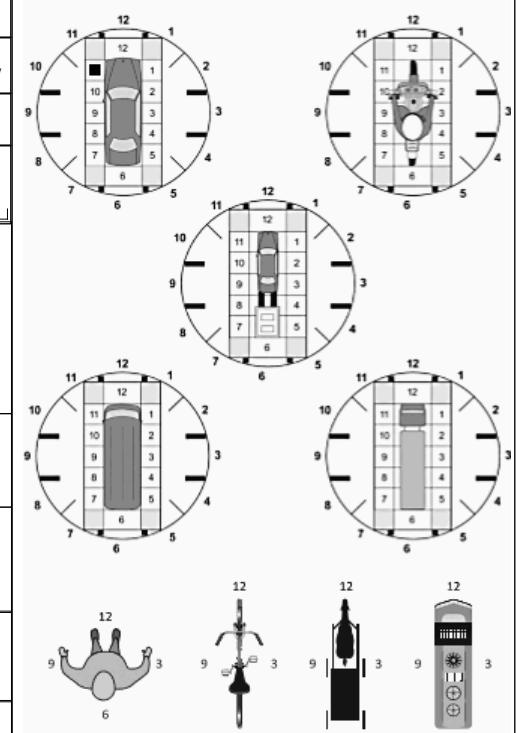
DAMAGE	
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DAMAGE SCALE	
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1 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE
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DAMAGED AREA(S)

INDICATE ALL THAT APPLY



- NO DAMAGE [0] - UNDERCARRIAGE [14]
 - TOP [13] - ALL AREAS [15]
 - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT	
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1 1	0-NO DAMAGE 1-12-REFER TO UNIT DIAGRAM 13-TOP	14-UNDERCARRIAGE 15-VEHICLE NOT AT SCENE 99-UNKNOWN
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TRAFFIC

TRAFFICWAY FLOW 1-ONE WAY 2-TWO WAY	TRAFFIC CONTROL 1-ROUNDABOUT 2-SIGNAL 3-FLASHER 4-STOP SIGN 5-YIELD SIGN 6-NO CONTROL
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# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1-NOT INVOLVED 2-INVOLVED - ACTIVE CROSSING 3-INVOLVED - PASSIVE CROSSING
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UNIT / NON-MOTORIST DIRECTION FROM 4 TO 3	1-NORTH 2-SOUTH 3-EAST 4-WEST 5-NORTHEAST 6-NORTHWEST 7-SOUTHEAST 8-SOUTHWEST 9-OTHER / UNKNOWN
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UNIT SPEED 0	DETECTED SPEED 3
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POSTED SPEED 6 0	1-STATED/ESTIMATED SPEED 2-CALCULATED / EDR 3-UNDETERMINED
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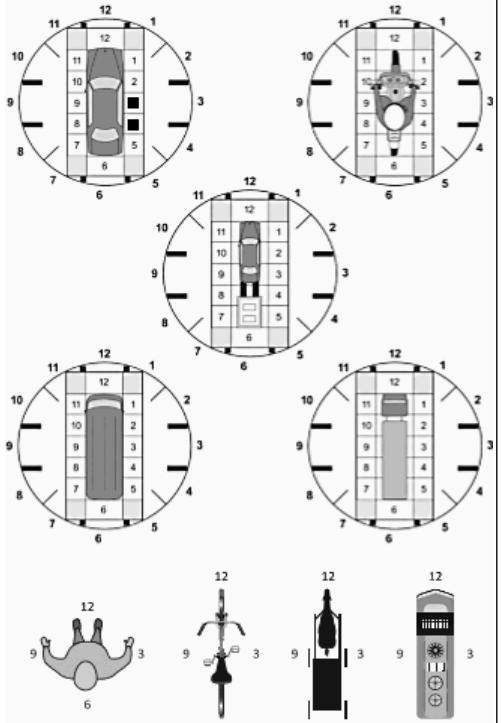
					LOCAL REPORT NUMBER 2 0 2 6 0 1 3 9			
OWNER	UNIT # 0 2	OWNER NAME: LAST, FIRST, MIDDLE GAUDIANI JEAN KIM	(<input type="checkbox"/> Same As Driver)	OWNER PHONE: INCLUDE AREA CODE [REDACTED]	(<input type="checkbox"/> Same As Driver)	DAMAGE		
	OWNER ADDRESS: STREET, CITY, STATE, ZIP 2936 PAXTON ROAD	(<input type="checkbox"/> Same As Driver)			SHAKER HEIGHTS OH 44120	DAMAGE SCALE 3 1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE [REDACTED]					
LP STATE O H	LICENSE PLATE # KUB6724	VEHICLE IDENTIFICATION # WA1EAAGU7S2071277	VEHICLE YEAR 2 0 2 5	VEHICLE MAKE Audi				
■ INSURANCE VERIFIED	INSURANCE COMPANY State Farm	INSURANCE POLICY # 3492656sfp35	VEHICLE COLOR WHI	VEHICLE MODEL Other/Unknown				
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT # [REDACTED]	TOWED BY: COMPANY NAME [REDACTED]					
INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	# OCCUPANTS 0 1	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD					
UNIT TYPE 0 3	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-16 SEATS)		7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED 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 (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP		
# OF TRAILING UNITS [REDACTED]								
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2	0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION AUTONOMOUS MODE LEVEL	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN				
SPECIAL FUNCTION 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 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - OTHER/UNKNOWN			
CARGO BODY TYPE 0 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN			
VEHICLE DEFECTS [REDACTED]	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	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN			
NON-MOTORIST LOCATION AT IMPACT [REDACTED]	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDLIGHT - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER/RROADE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN			
ACTION 4	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN	0 1 PRE-CRASH ACTION	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - OPENING DOOR INTO ROADWAY 24 - OTHER MOBILE OBJECT		
CONTRIBUTING CIRCUMSTANCES [REDACTED]	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION			
SEQUENCE OF EVENTS [REDACTED]	EVENTS							
1 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - 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 - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOBILE OBJECT			
3	COLLISION WITH FIXED OBJECT - STRUCK							
4	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL 35 - MEDIAN CONCRETE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	50 - WORKZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN			
5	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER						
6	1 - FIRST HARMFUL EVENT 1 - MOST HARMFUL EVENT							
POSTED SPEED 6 0								
PAGE 1 OF 1								

LOCAL REPORT NUMBER
2 0 2 6 0 1 3 9

DAMAGE

DAMAGE SCALE
3
1 - NONE
2 - MINOR DAMAGE
3 - FUNCTIONAL DAMAGE
4 - DISABLING DAMAGE
9 - UNKNOWN

DAMAGED AREA(S)
INDICATE ALL THAT APPLY



- NO DAMAGE [0] - UNDERCARRIAGE [14]
 - TOP [13] - ALL AREAS [15]
 - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT

0 3
0 - NO DAMAGE
1-12 - REFER TO UNIT
DIAGRAM
13 - TOP
14 - UNDERCARRIAGE
15 - VEHICLE NOT AT SCENE
99 - UNKNOWN

TRAFFIC

TRAFFICWAY FLOW
1 - ONE-WAY
2 - TWO-WAY
6
1 - ROUNDABOUT
2 - SIGNAL
3 - FLASHER
4 - STOP SIGN
5 - YIELD SIGN
6 - NO CONTROL

OF THROUGH LANES
ON ROAD
4
1 - NOT INVOLVED
2 - INVOLVED - ACTIVE CROSSING
3 - INVOLVED - PASSIVE CROSSING
1
1 - RAIL GRADE CROSSING
2 - INVOLVED - ACTIVE CROSSING
3 - INVOLVED - PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION
1 - NORTH
2 - SOUTH
3 - EAST
4 - WEST
5 - NORTHEAST
6 - NORTHWEST
7 - SOUTHEAST
8 - SOUTHWEST
9 - OTHER / UNKNOWN
FROM 4 TO 3

UNIT SPEED
4 0
1 - STATED/ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED

DETECTED SPEED
1
1 - STATED/ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED

POSTED SPEED
6 0



MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER

2 0 2 6 0 1 3 9

M O T O R I S T / N O N - M O T O R I S T	UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH	AGE	GENDER						
	0 1	JEFFERSON DASHAY CHYON						0 1 0 3 1 9 9 3	3 3	F						
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE					
3953 JO ANN DR 22 CLEVELAND OH 44122																
INJURIES 5		INJURED TAKEN BY []		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 0 4		DOT-COMPLIANT MC HELMET []		SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1	
OL STATE []		OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE []		OFFENSE DESCRIPTION		CITATION NUMBER					
OL CLASS 4		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY 1		ALCOHOL / DRUG SUSPECTED [] ALCOHOL [] MARIJUANA [] OTHER DRUG		CONDITION 1		ALCOHOL TEST STATUS 1 TYPE 1 VALUE []		DRUG TEST(S) RESULT SELECT UP TO 4		
M O T O R I S T / N O N - M O T O R I S T		UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH	AGE	GENDER					
0 2		GAUDIANI JEAN KIM						0 8 1 5 1 9 6 4	3 3	F						
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE					
2936 PAXTON ROAD SHAKER HEIGHTS OH 44120																
INJURIES 5		INJURED TAKEN BY []		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 0 4		DOT-COMPLIANT MC HELMET []		SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1	
OL STATE []		OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE []		OFFENSE DESCRIPTION		CITATION NUMBER					
OL CLASS 4		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY 1		ALCOHOL / DRUG SUSPECTED [] ALCOHOL [] MARIJUANA [] OTHER DRUG		CONDITION 1		ALCOHOL TEST STATUS 1 TYPE 1 VALUE []		DRUG TEST(S) RESULT SELECT UP TO 4		
M O T O R I S T / N O N - M O T O R I S T		UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH	AGE	GENDER					
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE					
INJURIES []		INJURED TAKEN BY []		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED []		DOT-COMPLIANT MC HELMET []		SEATING POSITION []	AIR BAG USAGE []	EJECTION []	TRAPPED []	
OL STATE []		OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE		OFFENSE DESCRIPTION		CITATION NUMBER					
OL CLASS []		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY []		ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA OTHER DRUG		CONDITION []		ALCOHOL TEST STATUS [] TYPE [] VALUE []		DRUG TEST(S) RESULT SELECT UP TO 4		
INJURIES											SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1 - FATAL	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN										
2 - SUSPECTED SERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2 - TEST REFUSED										
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE											
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	4 - REGULAR CLASS (OHIO - D)	4 - FARM WAIVER	4 - TEST GIVEN, RESULTS KNOWN											
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M / C MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - EXCEPT CLASS A & CLASS B BUS											
	6 - SECOND - RIGHT SIDE	6 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - COMMUNICATION DEVICE											
	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAILER	7 - TALKING ON HAND-HELD COMMUNICATION DEVICE											
1 - NOT TRANSPORTED /TREATED AT SCENE	8 - THIRD - MIDDLE			8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE											
2 - EMS	9 - THIRD - RIGHT SIDE			9 - LEARNER'S PERMIT RESTRICTIONS	9 - PASSENGER											
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT	10 - LIMITED TO DAYLIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE											
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - PARTIALLY EJECTED	M - MOTORCYCLE	11 - LIMITED TO EMPLOYMENT	8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE											
	3 - TOTALLY EJECTED	P - PASSENGER		12 - LIMITED - OTHER	9 - OTHER / UNKNOWN											
	4 - NOT APPLICABLE	N - TANKER		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)												
	12 - PASSENGER IN UNENCLOSED CARGO AREA	Q - MOTOR SCOOTER		14 - MILITARY VEHICLES ONLY												
	13 - TRAILING UNIT	R - THREE-WHEEL MOTORCYCLE		15 - MOTOR VEHICLES WITHOUT AIR BRAKES												
	14 - RIDING ON VEHICLE EXTERIOR	S - SCHOOL BUS		16 - OUTSIDE MIRROR												
	15 - NON-MOTORIST	T - DOUBLE & TRIPLE TRAILERS		17 - PROSTHETIC AID												
	99 - OTHER / UNKNOWN	X - TANKER / HAZMAT		18 - OTHER												
SAFETY EQUIPMENT											CONDITION	TEST STATUS				
1 - NONE USED	TRAPPED			1 - APPARENTLY NORMAL	3 - URINE											
2 - SHOULDER BELT ONLY USED				2 - PHYSICAL IMPAIRMENT	4 - OTHER											
3 - LAP BELT ONLY USED				3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)												
4 - SHOULDER & LAP BELT USED				4 - ILLNESS												
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING				5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.												
6 - CHILD RESTRAINT SYSTEM - REAR FACING				6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL												
7 - BOOSTER SEAT				9 - OTHER / UNKNOWN												
8 - HELMET USED																
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)																
10 - REFLECTIVE CLOTHING																
11 - LIGHTING - PEDESTRIAN /BICYCLE ONLY																
99 - OTHER / UNKNOWN																
INJURIES											GENDER	DRUG TEST RESULT(S)				
F - FEMALE												1 - AMPHETAMINES				
M - MALE												2 - BARBITURATES				
U - OTHER/UNKNOWN												3 - BENZODIAZEPINES				
												4 - CANNABINOIDS				
												5 - COCAINE				
												6 - OPIATES / OPIOIDS				
												7 - OTHER				
												8 - NEGATIVE RESULTS				