



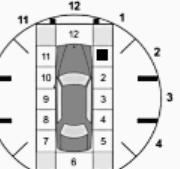
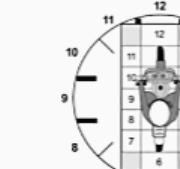
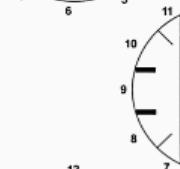
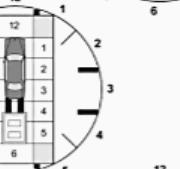
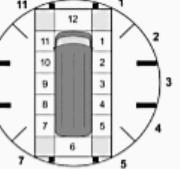
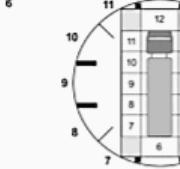
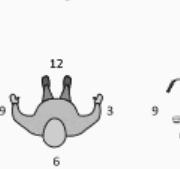
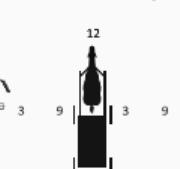
## TRAFFIC CRASH REPORT

\*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 * <b>GARFIELD HEIGHTS</b>			2 0 2 6 0 1 7 2	
COUNTY *	LOCALITY *	LOCATION: CITY, VILLAGE, TOWNSHIP * <b>GARFIELD HTS</b>			HIT/SKIP 1 - Solved 2 - Unsolved	MINIMUM AC LIMITS <b>0 2</b>
1 8	1				CRASH DATE/TIME * <b>01 17 2026 1700</b>	
ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME <b>CANAL</b>	ROAD TYPE <b>R D</b>	LATITUDE DECIMAL DEGREES <b>41.416988</b>	
ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) <b>WARNER</b>	ROAD TYPE <b>R D</b>	LONGITUDE DECIMAL DEGREES <b>81.636273</b>	
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 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 COMM DECIMALS	DISTANCE UNIT OF MEASURE 1 - Miles 2 - Feet 3 - Yards			NUMBER OF APPROACHES		
0 1	2	1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON	4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	ROADWAY	
1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 7 - ON RAMP 8 - OFF RAMP 99 - OTHER / UNKNOWN		MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE
<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  OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER		LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE WARNING ZONE 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (>4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN		LIGHT CONDITION 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL		WEATHER 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN		1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN
NARRATIVE		UNIT 1 WAS NORTHBOUND ON CANAL AT WARNER MAKING A RIGHT HAND ONTO WARNER TO HEAD EAST WHEN STRUCK FROM BEHIND BY UNIT 2 WHICH WAS NORTHBOUND ON CANAL		 CANAL WARNER  NOT TO SCALE		Indicate the north direction with an "N" on the compass diagram.
CRASH REPORTED DATE/TIME <b>01 19 2026 1323</b>		DISPATCH DATE/TIME <b>01 19 2026 1328</b>		ARRIVAL DATE/TIME <b>01 19 2026 1329</b>		SCENE CLEARED DATE/TIME <b>01 19 2026 1358</b>
TOTAL TIME ROADWAY CLOSED <b>0</b>		OTHER INVESTIGATION TIME <b>3 0</b>		OFFICER'S NAME * <b>J. Marks</b>		REPORT TAKEN BY <input type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST
				CHECKED BY OFFICER'S NAME * <b>N. Rossi</b>		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)
				OFFICER'S BADGE NUMBER * <b>R P T 1</b>		
				CHECKED BY OFFICER'S BADGE NUMBER * <b>S 1 3</b>		



OWNER	UNIT # 0   1 OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> Same As Driver) HODGE TRACY BARNETT		OWNER PHONE: INCLUDE AREA CODE ( <input type="checkbox"/> Same As Driver)		DAMAGE	
OWNER ADDRESS: STREET, CITY, STATE, ZIP 3900 PARKDALE RD		( <input type="checkbox"/> Same As Driver)		DAMAGE SCALE		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN		
VEHICLE	LP STATE O   H LICENSE PLATE # JJE1805		VEHICLE IDENTIFICATION # 1 F T F W 1 E F 2 E K F 1 7 4 5 3	VEHICLE YEAR 2 0 1 4	VEHICLE MAKE Ford	
■ INSURANCE VERIFIED ALLSTATE		INSURANCE COMPANY	INSURANCE POLICY # 923884981	VEHICLE COLOR WHI	VEHICLE MODEL F-150	
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME			
INTERLOCK EQUIPPED <input type="checkbox"/> DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		# OCCUPANTS 0   1	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED CLASS # <input type="checkbox"/> PLACARD ID #			
UNIT TYPE 0   4 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		VEHICLE WEIGHT GVWR/GCW 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME			
UNIT TYPE 0   1 1 - NO CARGO BODY TYPE /NOT APPLICABLE 2 - BUS CARGO BODY TYPE		18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP	23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN			
# OF TRAILING UNITS 0   2 1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL 0   0 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	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 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		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	
NON-MOTORIST LOCATION AT IMPACT 0   1 1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		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	
ACTION 0   4 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		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 99 - OTHER / UNKNOWN	
CONTRIBUTING CIRCUMSTANCES 0   1 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	
EVENTS	SEQUENCE OF EVENTS					
1   2   0	EVENTS					
1   2   0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 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 - 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 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	31 - GUARDRAIL END 32 - 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 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POLE, 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	UNIT / NON-MOTORIST DIRECTION					
6	TRAFFIC					
1   2   0	0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	0 - NO DAMAGE 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN				
1   2   0	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				
1   2   0	# OF THROUGH LANES ON ROAD 2	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING				
1   2   0	UNIT SPEED					
1   2   0	5	1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED				
1   2   0	DETECTED SPEED					
1   2   0	3   5	1 - MOST HARMFUL EVENT				
1   2   0	1	1 - FIRST HARMFUL EVENT				

OWNER	UNIT #	OWNER NAME: LAST, FIRST, MIDDLE <u>MUNTAQUIM MALIK ABDUL</u>		OWNER PHONE: INCLUDE AREA CODE <u>( Same As Driver)</u>	OWNER PHONE: INCLUDE AREA CODE <u>( Same As Driver)</u>	LOCAL REPORT NUMBER <u>2 0 2 6 0 1 7 2</u>		
	OWNER ADDRESS: STREET, CITY, STATE, ZIP <u>8307 VISTA AVE</u>	( Same As Driver)		COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP <u>CLEVELAND OH 44125</u>		DAMAGE		
					COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		DAMAGE SCALE	
							<u>3</u>	1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
							DAMAGED AREA(S) INDICATE ALL THAT APPLY	
							         	
VEHICLE	LP STATE <u>O H</u>	LICENSE PLATE # <u>KOB7458</u>	VEHICLE IDENTIFICATION # <u>1VWMA7A30LC017137</u>	VEHICLE YEAR <u>2020</u>	VEHICLE MAKE <u>Volkswagen</u>			
	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <u>PROGRESSIVE</u>	INSURANCE POLICY # <u>908860683</u>	VEHICLE COLOR <u>RED</u>	VEHICLE MODEL <u>Passat</u>			
	TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME				
			VEHICLE WEIGHT OVR/GCWR					
	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED		# OCCUPANTS <u>0 1</u>	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD				
			1 - 10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.					
			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 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 (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	
			1 - NO AUTOMATION 2 - DRIVER ASSISTANCE 3 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN			
			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	
			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	
		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		
		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/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		
		1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN	0 - STRAIGHT AHEAD 1 - BACKING 2 - CHANGING LANES 3 - OVERTAKING/PASSING 4 - MAKING RIGHT TURN 5 - 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 22 - DISABLED VEHICLE 99 - OTHER / UNKNOWN		
		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		
		CONTRIBUTING CIRCUMSTANCES						
EVENTS	SEQUENCE OF EVENTS							
	EVENTS							
	1	2	0	1	0	1	0	1
	1	2	0	1	0	1	0	1
	2							
	3							
	4							
	5							
	6							
	7							
COLLISION WITH FIXED OBJECT - STRUCK								
1	2	0	1	0	1	0	1	
2	3	4	5	6	7	8	9	
3	4	5	6	7	8	9	10	
4	5	6	7	8	9	10	11	
5	6	7	8	9	10	11	12	
6	7	8	9	10	11	12	13	
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70	71	72	73	74	75	76	77	
71	72	73	74	75	76	77	78	
72	73	74	75	76	77	78	79	
73	74	75	76	77	78	79	80	
74	75	76	77	78	79	80	81	
75	76	77	78	79	80	81	82	
76	77	78	79	80	81	82	83	
77	78	79	80	81	82	83	84	
78	79	80	81	82	83	84	85	
79	80	81	82	83	84	85	86	
80	81	82	83	84	85	86	87	
81	82	83	84	85	86	87	88	
82	83	84	85	86	87	88	89	
83	84	85	86	87	88	89	90	
84	85	86	87	88	89	90	91	
85	86	87	88	89	90	91	92	
86	87	88	89	90	91	92	93	
87	88	89	90	91	92	93	94	
88	89	90	91	92	93	94	95	
89	90	91	92	93	94	95	96	
90	91	92	93	94	95	96	97	
91	92	93	94	95	96	97	98	
92	93	94	95	96	97	98	99	
93	94	95	96	97	98	99	100	
94	95	96	97	98	99	100	101	
95	96	97	98	99	100	101	102	
96	97	98	99	100	101	102	103	
97	98	99	100	101	102	103	104	
98	99	100	101	102	103	104	105	
99	100	101	102	103	104	105	106	
100	101	102	103	104	105	106	107	
101	102	103	104	105	106	107	108	
102	103	104	105	106	107	108	109	
103	104	105	106	107	108	109	110	
104	105	106	107	108	109	110	111	
105	106	107	108	109	110	111	112	
106	107	108	109	110	111	112	113	
107	108	109	110	111	112	113	114	
108	109	110	111	112	113	114	115	
109	110	111	112	113	114	115	116	
110	111	112	113	114	115	116	117	
111	112	113	114	115	116	117	118	
112	113	114	115	116	117	118	119	
113	114	115	116	117	118	119	120	
114	115	116	117	118	119	120	121	
115	116	117	118	119	120	121	122	
116	117	118	119	120	121	122	123	
117	118	119	120	121	122	123	124	
118	119	120	121	122	123	124	125	
119	120	121	122	123	124	125	126	
120	121	122	123	124	125	126	127	
121	122	123	124	125	126	127	128	
122	123	124	125	126	127	128	129	
123	124	125	126	127	128	129	130	
124	125	126	127	128	129	130	131	
125								



## MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER

2 0 2 6 0 1 7 2

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	HODGE TRACY BARNETT						1 1 1 0 1 9 5 9	6 6	M						
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE					
3900 PARKDALE RD CLEVELAND HTS OH 44121																
INJURIES 4		INJURED TAKEN BY 9	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 <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER								
OL CLASS 2		ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> OTHER DRUG	CONDITION 1	STATUS 1	ALCOHOL TEST 1	DRUG TEST(S) 1							
M O T O R I S T / N O N - M O T O R I S T		UNIT # 0 2	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH 0 8 2 4 2 0 0 6	AGE 1 9	GENDER M					
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE					
8307 VISTA AVE CLEVELAND OH 44125																
INJURIES 5		INJURED TAKEN BY <input type="checkbox"/>	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 <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER								
OL CLASS 4		ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> OTHER DRUG	CONDITION 1	STATUS 1	ALCOHOL TEST 1	DRUG TEST(S) 1							
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 <input type="checkbox"/>		INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED <input type="checkbox"/>	DOT-COMPLIANT MC HELMET		SEATING POSITION <input type="checkbox"/>	AIR BAG USAGE <input type="checkbox"/>	EJECTION <input type="checkbox"/>	TRAPPED <input type="checkbox"/>					
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 <input type="checkbox"/>	ALCOHOL / DRUG SUSPECTED ALCOHOL OTHER DRUG	CONDITION <input type="checkbox"/>	STATUS <input type="checkbox"/>	ALCOHOL TEST <input type="checkbox"/>	DRUG TEST(S) <input type="checkbox"/>							
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	ALCOHOL TEST TYPE										
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB			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)			11 - LIMITED TO EMPLOYMENT	8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE											
	12 - PASSENGER IN UNENCLOSED CARGO AREA			12 - LIMITED - OTHER	9 - OTHER / UNKNOWN											
	13 - TRAILING UNIT			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)												
1 - NONE USED	14 - RIDING ON VEHICLE EXTERIOR			14 - MILITARY VEHICLES ONLY	1 - NONE											
2 - SHOULDER BELT ONLY USED	15 - NON-MOTORIST			15 - MOTOR VEHICLES WITHOUT AIR BRAKES	2 - BLOOD											
3 - LAP BELT ONLY USED	99 - OTHER / UNKNOWN			16 - OUTSIDE MIRROR	2 - BLOOD											
4 - SHOULDER & LAP BELT USED				17 - PROSTHETIC AID												
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING				18 - OTHER												
6 - CHILD RESTRAINT SYSTEM - REAR FACING																
7 - BOOSTER SEAT																
8 - HELMET USED																
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)																
10 - REFLECTIVE CLOTHING																
11 - LIGHTING - PEDESTRIAN /BICYCLE ONLY																
99 - OTHER / UNKNOWN																
SAFETY EQUIPMENT											GENDER	DRUG TEST RESULT(S)				
1 - NONE USED	TRAPPED	R - THREE-WHEEL MOTORCYCLE														
2 - SHOULDER BELT ONLY USED	1 - NOT TRAPPED	S - SCHOOL BUS														
3 - LAP BELT ONLY USED	2 - EXTRICATED BY MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS														
4 - SHOULDER & LAP BELT USED	3 - FREED BY NON-MECHANICAL MEANS	X - TANKER / HAZMAT														
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING																
6 - CHILD RESTRAINT SYSTEM - REAR FACING																
7 - BOOSTER SEAT																
8 - HELMET USED																
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)																
10 - REFLECTIVE CLOTHING																
11 - LIGHTING - PEDESTRIAN /BICYCLE ONLY																
99 - OTHER / UNKNOWN																
	F - FEMALE															
	M - MALE															
	U - OTHER/UNKNOWN															
	CONDITION															
	1 - APPARENTLY NORMAL															
	2 - PHYSICAL IMPAIRMENT															
	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)															
	4 - ILLNESS															
	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.															
	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL															
	9 - OTHER / UNKNOWN															