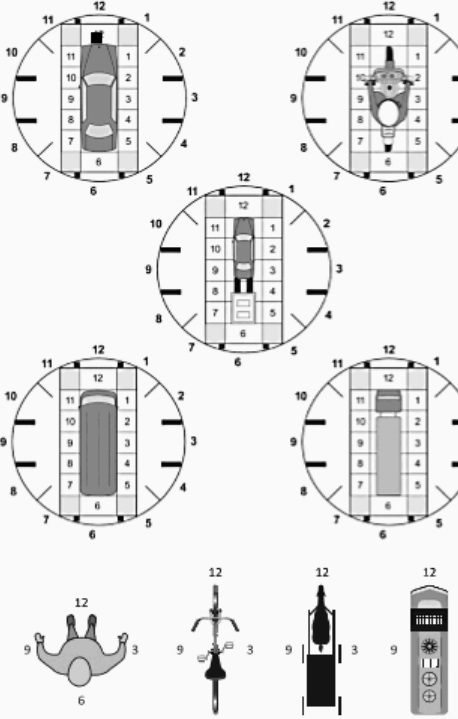




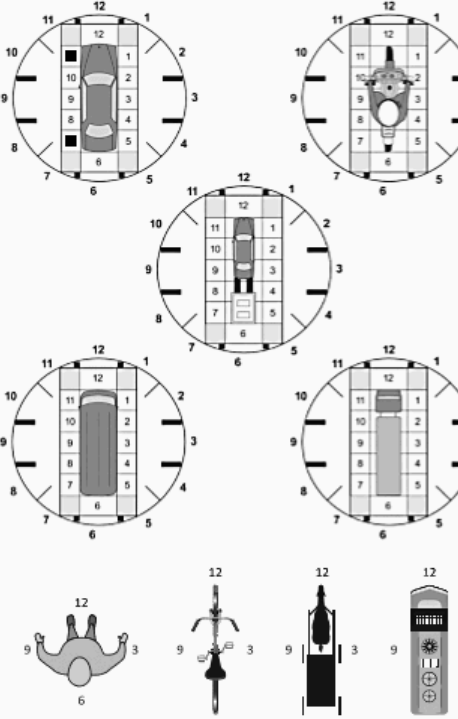
LOCAL REPORT NUMBER \*

HSY7001 OH1 1/19 [760-0820]

|   |  |   |   |   |                         |
|---|--|---|---|---|-------------------------|
| OWNER   | UNIT #<br>01   | OWNER NAME: LAST, FIRST, MIDDLE<br>( Same As Driver)<br>JUNUZI RIDVAN | OWNER PHONE: INCLUDE AREA CODE<br>( Same As Driver) |   |                         |
|   | OWNER ADDRESS: STREET, CITY, STATE, ZIP<br>( Same As Driver)<br>1539 E MARKET ST AKRON OH 44305  |   |   |   |                         |
| COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP |  | COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE                           |   |   |                         |
| VEHICLE   | LP STATE<br>OH   | LICENSE PLATE #<br>U693316  | VEHICLE IDENTIFICATION #<br>1FMCU03709KC85564       | VEHICLE YEAR<br>2009  | VEHICLE MAKE<br>Ford    |
|   | INSURANCE VERIFIED   | INSURANCE COMPANY<br>GAINSCO  | INSURANCE POLICY #<br>OHPAA2749568500C              | VEHICLE COLOR<br>WHI  | VEHICLE MODEL<br>Escape |
|   | TYPE OF USE<br><input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE  |   | US DOT #  | TOWED BY: COMPANY NAME  |                         |
|   | <input type="checkbox"/> INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT  |   | # OCCUPANTS<br>01                                   | HAZARDOUS MATERIAL<br><input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD |                         |
|   | VEHICLE WEIGHT GVWR/GVWR<br>1 - ≤10K LBS.<br>2 - 10,001 - 26K LBS.<br>3 - >26K LBS.  |   |   |   |                         |
|   | UNIT TYPE<br>03<br># of TRAILING UNITS<br>0  |   |   |   |                         |
|   | WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?<br>2<br>1 - YES 2 - NO 9 - OTHER / UNKNOWN<br>AUTONOMOUS MODE LEVEL<br>0   |   |   |   |                         |
|   | SPECIAL FUNCTION<br>01<br>1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS-TRANSIT/COMMUTER<br>6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE<br>11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT<br>16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL<br>21 - MAIL CARRIER 99 - OTHER / UNKNOWN  |   |   |   |                         |
|   | CARGO BODY TYPE<br>01<br>1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS<br>3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING<br>5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL<br>8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP<br>12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN  |   |   |   |                         |
|   | VEHICLE DEFECTS<br>1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS<br>4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT<br>7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE<br>9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT<br>99 - OTHER / UNKNOWN  |   |   |   |                         |
| EVENT(S)  | NON-MOTORIST LOCATION AT IMPACT<br>1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK<br>3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION<br>6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK<br>9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS<br>12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN   |   |   |   |                         |
|   | ACTION<br>3<br>1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN<br>PRE-CRASH ACTION<br>06<br>1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN<br>7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS<br>13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE<br>18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN                        |   |   |   |                         |
|   | CONTRIBUTING CIRCUMSTANCES<br>02<br>1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN<br>7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/JACDA 9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING<br>13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY<br>17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER CROSSING<br>21 - LYING IN ROADWAY 22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION   |   |   |   |                         |
|   | SEQUENCE OF EVENTS<br>120<br>1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT<br>6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN<br>11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE<br>16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE<br>22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT                                     |   |   |   |                         |
|   | COLLISION WITH FIXED OBJECT - STRUCK<br>25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE<br>31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER<br>37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT<br>43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT<br>50 - WORKZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN |   |   |   |                         |
|   | FIRST HARMFUL EVENT<br>1<br>MOST HARMFUL EVENT<br>1  |   |   |   |                         |

|  |   |
|--|---|
| LOCAL REPORT NUMBER<br>20260391  |   |
| DAMAGE<br>DAMAGE SCALE<br>4<br>1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE<br>9 - UNKNOWN   |   |
| DAMAGED AREA(S)<br>INDICATE ALL THAT APPLY<br>   |   |
| <input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14]<br><input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15]<br><input type="checkbox"/> - UNIT NOT AT SCENE [16] |   |
| INITIAL POINT OF CONTACT<br>12<br>0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN  |   |
| TRAFFIC<br>TRAFFICWAY FLOW<br>2<br>1 - ONE-WAY 2 - TWO-WAY<br>TRAFFIC CONTROL<br>2<br>1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL  |   |
| # OF THROUGH LANES ON ROAD<br>4<br>RAIL GRADE CROSSING<br>1<br>1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING   |   |
| UNIT / NON-MOTORIST DIRECTION<br>FROM 2 TO 4<br>1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN  |   |
| UNIT SPEED<br>5  | DETECTED SPEED<br>1<br>1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED |
| POSTED SPEED<br>25   |   |

|   |  |  |   |   |   |  |
|---|--|--|---|---|---|--|
| OWNER   | UNIT #<br>0 2  | OWNER NAME: LAST, FIRST, MIDDLE<br>( Same As Driver)<br>GILES LAKIEA MARIE   | OWNER PHONE: INCLUDE AREA CODE<br>( Same As Driver) |   |   |  |
|   | OWNER ADDRESS: STREET, CITY, STATE, ZIP<br>( Same As Driver)<br>16515 THROCKLEY AVE CLEVELAND OH 44128   |  |   |   |   |  |
| COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP |  | COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE  |   |   |   |  |
| VEHICLE   | LP STATE<br>OH   | LICENSE PLATE #<br>KMZ6312   | VEHICLE IDENTIFICATION #<br>WA1EFCFS6FR009752       | VEHICLE YEAR<br>2015  | VEHICLE MAKE<br>Audi  |  |
|   | <input type="checkbox"/> INSURANCE VERIFIED  | INSURANCE COMPANY  | INSURANCE POLICY #                                  | VEHICLE COLOR<br>BLK  | VEHICLE MODEL<br>Q3   |  |
|   | <input type="checkbox"/> COMMERCIAL  | <input type="checkbox"/> GOVERNMENT  | <input type="checkbox"/> IN EMERGENCY RESPONSE      | US DOT #  | TOWED BY: COMPANY NAME  |  |
|   | <input type="checkbox"/> INTERLOCK DEVICE EQUIPPED   | <input type="checkbox"/> HIT/SKIP UNIT   | # OCCUPANTS<br>0 1                                  | VEHICLE WEIGHT GVWR/GCWR<br>1 - ≤10K LBS.<br>2 - 10,001 - 26K LBS.<br>3 - >26K LBS. | HAZARDOUS MATERIAL<br><input type="checkbox"/> MATERIAL RELEASED CLASS #<br><input type="checkbox"/> PLACARD PLACARD ID # |  |
|   | UNIT TYPE<br>0 3   | 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN SKATER<br>2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)<br>3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST<br>4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE<br>5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN<br>6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP |   |   |   |  |
|   | # of TRAILING UNITS<br>0   | WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?<br>2 0 1 - YES 2 - NO 9 - OTHER / UNKNOWN<br>AUTONOMOUS MODE LEVEL<br>0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN<br>1 - PARTIAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION   |   |   |   |  |
|   | SPECIAL FUNCTION<br>0 1  | 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER<br>2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN<br>3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL<br>4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING<br>5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL  |   |   |   |  |
|   | CARGO BODY TYPE<br>0 1   | 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER<br>2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER<br>7 - GRAIN/CHIPS/GRAVEL 10 - FLAT BED 11 - DUMP 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN   |   |   |   |  |
|   | VEHICLE DEFECTS  | 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN<br>2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT<br>3 - TAIL LAMPS 6 - TIRE BLOWOUT   |   |   |   |  |
|   | NON-MOTORIST LOCATION AT IMPACT  | 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE<br>2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER/ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN<br>5 - TRAVEL LANE-OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS  |   |   |   |  |
| ACTION  | 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE<br>2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING<br>3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 22 - NOT DISCERNABLE 20 - OTHER NON-MOTORIST<br>4 - STRUCK 5 - OVERTAKING/PASSING 10 - PARKED 15 - WALKING, RUNNING, JOGGING, PLAYING 21 - STANDING OUTSIDE<br>5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING 21 - STANDING OUTSIDE<br>9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN              |  |   |   |   |  |
| CONTRIBUTING CIRCUMSTANCES                          | 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY<br>2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE/JACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNABLE<br>3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGING 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/ FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY<br>4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION<br>5 - UNSAFE SPEED 11 - DROVE OFF ROAD 12 - IMPROPER BACKING   |  |   |   |   |  |
| EVENT(S)  | SEQUENCE OF EVENTS   |  |   |   |   |  |
|   | EVENTS   |  |   |   |   |  |
|   | 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT<br>2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE<br>3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT<br>4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 25 - BUILDING<br>5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT 52 - TUNNEL<br>6 - IMPROPER TURN 12 - IMPROPER BACKING |  |   |   |   |  |
|   | COLLISION WITH FIXED OBJECT - STRUCK   |  |   |   |   |  |
|   | 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORKZONE MAINTENANCE EQUIPMENT<br>26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL<br>27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT/LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING<br>28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL<br>29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT<br>30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN<br>49 - FIRE HYDRANT             |  |   |   |   |  |
| FIRST HARMFUL EVENT<br>1                            |  | MOST HARMFUL EVENT<br>1  |   |   |   |  |

|  |  |
|--|--|
| LOCAL REPORT NUMBER<br>2 0 2 6 0 3 9 1   |  |
| DAMAGE   |  |
| DAMAGE SCALE<br>1 - NONE 3 - FUNCTIONAL DAMAGE<br>2 - MINOR DAMAGE 4 - DISABLING DAMAGE<br>9 - UNKNOWN   |  |
| DAMAGED AREA(S)<br>INDICATE ALL THAT APPLY   |  |
|    |  |
| <input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14]<br><input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15]<br><input type="checkbox"/> - UNIT NOT AT SCENE [16] |  |
| INITIAL POINT OF CONTACT<br>0 - NO DAMAGE 14 - UNDERCARRIAGE<br>1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE<br>13 - TOP 99 - UNKNOWN  |  |
| TRAFFIC  |  |
| TRAFFICWAY FLOW<br>2 1 - ONE-WAY<br>2 - TWO-WAY  | TRAFFIC CONTROL<br>1 - ROUNDABOUT 4 - STOP SIGN<br>2 - SIGNAL 5 - YIELD SIGN<br>3 - FLASHER 6 - NO CONTROL   |
| # OF THROUGH LANES ON ROAD<br>4  | RAIL GRADE CROSSING<br>1 - NOT INVOLVED<br>2 - INVOLVED - ACTIVE CROSSING<br>3 - INVOLVED - PASSIVE CROSSING |
| UNIT / NON-MOTORIST DIRECTION<br>FROM 1 TO 2<br>1 - NORTH 5 - NORTHEAST<br>2 - SOUTH 6 - NORTHWEST<br>3 - EAST 7 - SOUTHEAST<br>4 - WEST 8 - SOUTHWEST<br>9 - OTHER / UNKNOWN  |  |
| UNIT SPEED<br>2 5  | DETECTED SPEED<br>1 1 - STATED/ESTIMATED SPEED<br>2 - CALCULATED / EDR<br>3 - UNDETERMINED                   |
| POSTED SPEED<br>2 5  |  |



|  |   |  |   |                                |   |   |   |   |  |  |                              |  |                     |   |   |  |
|--|---|--|---|--------------------------------|---|---|---|---|--|--|------------------------------|--|---------------------|---|---|--|
| MOTORIST / NON-MOTORIST                        | UNIT #<br>01  |  | NAME: LAST, FIRST, MIDDLE<br>JUNUZI RIDVAN      |                                | DATE OF BIRTH<br>10231980                       |   |   |   | AGE<br>  |  | GENDER<br>M                  |  |                     |   |   |  |
|  | ADDRESS: STREET, CITY, STATE, ZIP<br>1539 E MARKET ST AKRON OH 44305        |  |   |                                |   | CONTACT PHONE - INCLUDE AREA CODE<br>           |   |   |  |  |                              |  |                     |   |   |  |
|  | INJURIES<br>5   |  | INJURED TAKEN BY<br>1                           | EMS AGENCY (NAME)              |   | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) |   | SAFETY EQUIPMENT USED<br>04   |  | <input type="checkbox"/> DOT-COMPLIANT MC HELMET                                     | SEATING POSITION<br>01       |  | AIR BAG USAGE<br>1  | EJECTION<br>1                             | TRAPPED<br>1                              |  |
|  | OL STATE<br>  |  | OPERATOR LICENSE NUMBER<br>                     |                                |   | OFFENSE CHARGED<br>                             |   | LOCAL CODE<br><input type="checkbox"/>  | OFFENSE DESCRIPTION<br>                          |  |                              |  | CITATION NUMBER<br> |   |   |  |
|  | OL CLASS<br>4   |  | ENDORSEMENT SELECT UP TO 2<br>                  |                                | RESTRICTION SELECT UP TO 3<br>                  |   | DRIVER DISTRACTED BY<br>1                                   | ALCOHOL / DRUG SUSPECTED<br><input type="checkbox"/> ALCOHOL<br><input type="checkbox"/> OTHER DRUG<br><input type="checkbox"/> MARIJUANA |  | CONDITION<br>1   | STATUS<br>1                  | ALCOHOL TEST<br>TYPE 1 VALUE                   | STATUS<br>1         | TYPE 1                                    | DRUG TEST(S)<br>RESULT SELECT UP TO 4<br> |  |
|  | UNIT #<br>02  |  | NAME: LAST, FIRST, MIDDLE<br>GILES LAKIEA MARIE |                                |   |   |   | DATE OF BIRTH<br>08072002   |  |  |                              | AGE<br>23                                      |                     | GENDER<br>F                               |   |  |
|  | ADDRESS: STREET, CITY, STATE, ZIP<br>16515 THROCKLEY AVE CLEVELAND OH 44128 |  |   |                                |   | CONTACT PHONE - INCLUDE AREA CODE<br>           |   |   |  |  |                              |  |                     |   |   |  |
|  | INJURIES<br>5   |  | INJURED TAKEN BY<br>1                           | EMS AGENCY (NAME)              |   | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) |   | SAFETY EQUIPMENT USED<br>04   |  | <input type="checkbox"/> DOT-COMPLIANT MC HELMET                                     | SEATING POSITION<br>01       |  | AIR BAG USAGE<br>3  | EJECTION<br>1                             | TRAPPED<br>1                              |  |
|  | OL STATE<br>  |  | OPERATOR LICENSE NUMBER<br>                     |                                |   | OFFENSE CHARGED<br>                             |   | LOCAL CODE<br><input type="checkbox"/>  | OFFENSE DESCRIPTION<br>                          |  |                              |  | CITATION NUMBER<br> |   |   |  |
|  | OL CLASS<br>  |  | ENDORSEMENT SELECT UP TO 2<br>                  |                                | RESTRICTION SELECT UP TO 3<br>                  |   | DRIVER DISTRACTED BY<br>1                                   | ALCOHOL / DRUG SUSPECTED<br><input type="checkbox"/> ALCOHOL<br><input type="checkbox"/> OTHER DRUG<br><input type="checkbox"/> MARIJUANA |  | CONDITION<br>1   | STATUS<br>1                  | ALCOHOL TEST<br>TYPE 1 VALUE                   | STATUS<br>1         | TYPE 1                                    | DRUG TEST(S)<br>RESULT SELECT UP TO 4<br> |  |
| UNIT #<br>                                     |   | NAME: LAST, FIRST, MIDDLE<br>  |   |                                |   |   | DATE OF BIRTH<br>   |   |  |  | AGE<br>                      |  | GENDER<br>          |   |   |  |
| ADDRESS: STREET, CITY, STATE, ZIP<br>          |   |  |   |                                | CONTACT PHONE - INCLUDE AREA CODE<br>           |   |   |   |  |  |                              |  |                     |   |   |  |
| INJURIES<br>                                   |   | INJURED TAKEN BY<br>   | EMS AGENCY (NAME)                               |                                | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) |   | SAFETY EQUIPMENT USED<br>                                   |   | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | SEATING POSITION<br>   |                              | AIR BAG USAGE<br>                              | EJECTION<br>        | TRAPPED<br>                               |   |  |
| OL STATE<br>                                   |   | OPERATOR LICENSE NUMBER<br>  |   |                                | OFFENSE CHARGED<br>                             |   | LOCAL CODE<br><input type="checkbox"/>                      | OFFENSE DESCRIPTION<br>   |  |  |                              | CITATION NUMBER<br>                            |                     |   |   |  |
| OL CLASS<br>                                   |   | ENDORSEMENT SELECT UP TO 2<br>   |   | RESTRICTION SELECT UP TO 3<br> |   | DRIVER DISTRACTED BY<br>                        | ALCOHOL / DRUG SUSPECTED<br>ALCOHOL MARIJUANA<br>OTHER DRUG |   | CONDITION<br>                                    | STATUS<br>   | ALCOHOL TEST<br>TYPE   VALUE | STATUS<br>                                     | TYPE                | DRUG TEST(S)<br>RESULT SELECT UP TO 4<br> |   |  |
| 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 - TALKING ON HANDS-FREE COMMUNICATION DEVICE                                       |                              | 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 - TALKING ON HAND-HELD COMMUNICATION DEVICE  |                              | 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 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE   |                              | 5 - TEST GIVEN, RESULTS UNKNOWN                |                     |   |   |  |
|  |   | 6 - SECOND - RIGHT SIDE  |   | 9 - DEPLOYMENT UNKNOWN         |   | 6 - NO VALID OL                                 |   | 6 - EXCEPT CLASS A & CLASS B BUS  |  | 6 - PASSENGER  |                              |  |                     |   |   |  |
| INJURED TAKEN BY                               |   | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)  |   |                                |   |   |   | 7 - EXCEPT TRACTOR-TRAILER  |  | 7 - OTHER DISTRACTION INSIDE THE VEHICLE   |                              |  |                     |   |   |  |
| 1 - NOT TRANSPORTED /TREATED AT SCENE          |   | 8 - THIRD - MIDDLE   |   |                                |   | H - HAZMAT                                      |   | 8 - INTERMEDIATE LICENSE RESTRICTIONS   |  | 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE   |                              |  |                     |   |   |  |
| 2 - EMS  |   | 9 - THIRD - RIGHT SIDE   |   |                                |   | M - MOTORCYCLE                                  |   | 9 - LEARNER'S PERMIT RESTRICTIONS   |  | 9 - OTHER / UNKNOWN  |                              |  |                     |   |   |  |
| 3 - POLICE                                     |   | 10 - SLEEPER SECTION OF TRUCK CAB  |   |                                |   | P - PASSENGER                                   |   | 10 - LIMITED TO DAYLIGHT ONLY   |  |  |                              |  |                     |   |   |  |
| 9 - OTHER / UNKNOWN                            |   | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) |   |                                |   | N - TANKER                                      |   | 11 - LIMITED TO EMPLOYMENT  |  |  |                              |  |                     |   |   |  |
| SAFETY EQUIPMENT                               |   | 12 - PASSENGER IN UNCLOSED CARGO AREA  |   |                                |   | Q - MOTOR SCOOTER                               |   | 12 - LIMITED - OTHER  |  |  |                              |  |                     |   |   |  |
| 1 - NONE USED                                  |   | 13 - TRAILING UNIT   |   |                                |   | R - THREE-WHEEL MOTORCYCLE                      |   | 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)  |  |  |                              |  |                     |   |   |  |
| 2 - SHOULDER BELT ONLY USED                    |   | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)                                    |   |                                |   | S - SCHOOL BUS                                  |   | 14 - MILITARY VEHICLES ONLY   |  |  |                              |  |                     |   |   |  |
| 3 - LAP BELT ONLY USED                         |   | 15 - NON-MOTORIST  |   |                                |   | T - DOUBLE & TRIPLE TRAILERS                    |   | 15 - MOTOR VEHICLES WITHOUT AIR BRAKES  |  |  |                              |  |                     |   |   |  |
| 4 - SHOULDER & LAP BELT USED                   |   | 99 - OTHER / UNKNOWN   |   |                                |   | X - TANKER / HAZMAT                             |   | 16 - OUTSIDE MIRROR   |  |  |                              |  |                     |   |   |  |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING    |   |  |   |                                |   |   |   | 17 - PROSTHETIC AID   |  |  |                              |  |                     |   |   |  |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING       |   |  |   |                                |   |   |   | 18 - OTHER  |  |  |                              |  |                     |   |   |  |
| 7 - BOOSTER SEAT                               |   |  |   |                                |   |   |   |   |  |  |                              |  |                     |   |   |  |
| 8 - HELMET USED                                |   |  |   |                                |   |   |   |   |  |  |                              |  |                     |   |   |  |
| 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) |   |  |   |                                |   |   |   |   |  |  |                              |  |                     |   |   |  |
| 10 - REFLECTIVE CLOTHING                       |   |  |   |                                |   |   |   |   |  |  |                              |  |                     |   |   |  |