

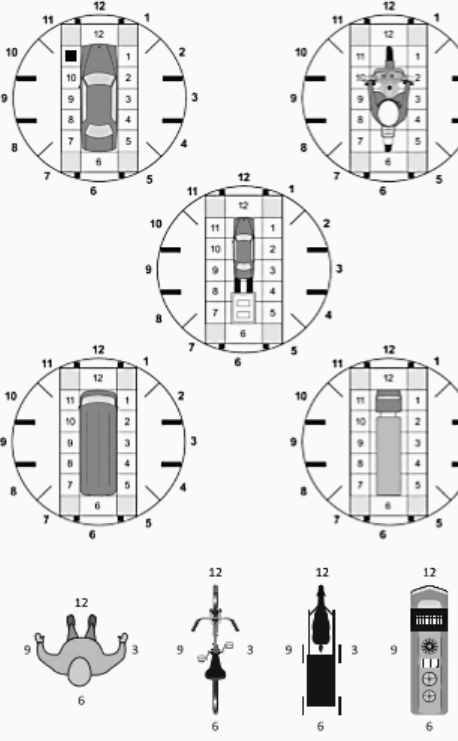
TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

☐ PHOTOS TAKEN ☐ SECONDARY CRASH		☐ OH-2 ☐ OH-1P ☐ Private Property	LOCAL INFORMATION REPORTING AGENCY NAME * GARFIELD HEIGHTS		20261996						
COUNTY * 18		LOCALITY * 1		LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS		CRASH DATE/TIME * 08182026 1747		CRASH SEVERITY 5 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY			
ROUTE TYPE 1		ROUTE NUMBER 1		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME 480		ROAD TYPE H W		LATITUDE DECIMAL DEGREES 41.413142	
ROUTE TYPE 1		ROUTE NUMBER 1		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 21		ROAD TYPE M P		LONGITUDE DECIMAL DEGREES 81.615859	
REFERENCE POINT 2 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #		DIRECTION 4 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		ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE		INTERSECTION RELATED ☐ WITHIN INTERSECTION OR ON APPROACH ☐ WITHIN INTERCHANGE AREA NUMBER OF APPROACHES ROADWAY ☐ ROADWAY DIVIDED	
DISTANCE 500 EDPM DECEASED/MP		DISTANCE 2 1 - Miles 2 - Feet 3 - Yards		MANNER OF CRASH COLLISION/IMPACT 7 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		DIRECTION OF TRAVEL 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (24 FEET) 3 - DIVIDED, DEPRESSION MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN			
☐ WORK ZONE RELATED ☐ WORKERS PRESENT ☐ LAW ENFORCEMENT PRESENT ☐ 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 SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		CONTOUR 2 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER / UNKNOWN		CONDITIONS 1 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN		SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER / UNKNOWN	
LIGHT CONDITION 1 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN		WEATHER 1 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 STATES THEY WERE TRAVELING IN THE RIGHT EXPRESS LANE ON 480 WB, WHILE UNIT 2 STATED THEY WERE ALSO TRAVELING THE SAME DIRECTION BUT IN THE LEFT LANE. UNIT 1 STATES THEY WERE ATTEMPTING TO CHANGE LANES TO THE LEFT. LANE AND UNIT 2 PURPOSELY SPED UP AND STRUCK THEIR VEHICLE. UNIT 2 STATES THEY WERE DRIVING THE SPEED LIMIT AND UNIT 2 FAILED TO YIELD WHILE CHANGING LANES AND WAS STRUCK BY UNIT 1.		Diagram showing the crash location on a road labeled 480, with a mile post 21. The diagram is labeled NOT TO SCALE.		Indicate the north direction with an "N" on the compass diagram.			
CRASH REPORTED DATE/TIME 08182026 1747		DISPATCH DATE/TIME 08182026 1748		ARRIVAL DATE/TIME 08182026 1752		SCENE CLEARED DATE/TIME 08182026 1810		REPORT TAKEN BY ☒ POLICE AGENCY ☐ MOTORIST			
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME		TOTAL MINUTES 22		OFFICER'S NAME * M. Lee		CHECKED BY OFFICER'S NAME * Sp. Sabelli		SUPPLEMENT (CORRECTION = ADDITION TO EXISTING REPORT DATE/TIME)	
OFFICER'S BADGE NUMBER * 002		CHECKED BY OFFICER'S BADGE NUMBER * S21									

OWNER	UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE DEA CAROLYN ANN	(Same As Driver)		OWNER PHONE: INCLUDE AREA CODE _____	(Same As Driver)	
	OWNER ADDRESS: STREET, CITY, STATE, ZIP 2076 ATKINS AVE LAKEWOOD OH 44107						
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP _____						COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE _____	
VEHICLE	LP STATE OH	LICENSE PLATE # KOA4121	VEHICLE IDENTIFICATION # 3VVFB7AX2RM156240		VEHICLE YEAR 2024	VEHICLE MAKE Volkswagen	
	INSURANCE VERIFIED	INSURANCE COMPANY PROGRESSIVE	INSURANCE POLICY # 900966815		VEHICLE COLOR BLK	VEHICLE MODEL Tiguan	
	TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		US DOT # _____		TOWED BY: COMPANY NAME _____		
	☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT		# OCCUPANTS 01		HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ PLACARD		
	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.			HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ PLACARD	
	UNIT TYPE 03		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 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		# of TRAILING UNITS _____		
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		AUTONOMOUS MODE LEVEL 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN		9 - UNKNOWN		
	SPECIAL FUNCTION 01		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		99 - OTHER / UNKNOWN		
	CARGO BODY TYPE 01		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		99 - OTHER / UNKNOWN		
	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		99 - OTHER / UNKNOWN		
EVENT(S)	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/ROADSIDE 8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN		99 - OTHER / UNKNOWN		
	ACTION 5		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		99 - OTHER / UNKNOWN		
	CONTRIBUTING CIRCUMSTANCES 02		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/JACDA 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		99 - OTHER IMPROPER ACTION		
	SEQUENCE OF EVENTS		EVENTS		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 MOVABLE OBJECT		24 - OTHER MOVABLE OBJECT		
	COLLISION WITH FIXED OBJECT - STRUCK		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 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		99 - OTHER / UNKNOWN		
	FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1		PAGE		

LOCAL REPORT NUMBER 20261996	
DAMAGE DAMAGE SCALE 1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN 2	
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 1 1 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 TRAFFIC CONTROL 1 ROUNDABOUT 2 SIGNAL 3 FLASHER 4 STOP SIGN 5 YIELD SIGN 6 NO CONTROL	
# OF THROUGH LANES ON ROAD 2 RAIL GRADE CROSSING 1 NOT INVOLVED 2 INVOLVED - ACTIVE CROSSING 3 INVOLVED - PASSIVE CROSSING	
UNIT / NON-MOTORIST DIRECTION FROM 3 TO 4 1 NORTH 2 SOUTH 3 EAST 4 WEST 5 NORTHEAST 6 NORTHWEST 7 SOUTHEAST 8 SOUTHWEST 9 OTHER / UNKNOWN	
UNIT SPEED 65 DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	
POSTED SPEED 60	

VEHICLE

☐ - NO DAMAGE

☐ - TOP [13]

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER									
2	0	2	6	1	9	9	6		

MOTORIST / NON-MOTORIST	UNIT # 01	NAME: LAST, FIRST, MIDDLE DEA CAROLYN ANN				DATE OF BIRTH 03111987		AGE 39	GENDER F				
	ADDRESS: STREET, CITY, STATE, ZIP 2076 ATKINS AVE LAKEWOOD OH 44107					CONTACT PHONE - INCLUDE AREA CODE							
	INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 04	☐ DOT-COMPLIANT MC HELMET		SEATING POSITION 01	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	STATUS 1	ALCOHOL TEST TYPE 1 VALUE		DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4	
	UNIT # 02					NAME: LAST, FIRST, MIDDLE PRITSCHAU KENNETH JOHN		DATE OF BIRTH 06071968		AGE	GENDER M		
	ADDRESS: STREET, CITY, STATE, ZIP 2951 MAINE AVE PERRY OH 44081					CONTACT PHONE - INCLUDE AREA CODE							
	INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 04	☐ DOT-COMPLIANT MC HELMET		SEATING POSITION 01	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	STATUS 1	ALCOHOL TEST TYPE 1 VALUE		DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4	
MOTORIST / NON-MOTORIST	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	STATUS	ALCOHOL TEST TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4	
	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	STATUS	ALCOHOL TEST TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4	
INJURIES													
1 - FATAL													
2 - SUSPECTED SERIOUS INJURY													
3 - SUSPECTED MINOR INJURY													
4 - POSSIBLE INJURY													
5 - NO APPARENT INJURY													
INJURED TAKEN BY													
1 - NOT TRANSPORTED /TREATED AT SCENE													
2 - EMS													
3 - POLICE													
9 - OTHER / UNKNOWN													
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, KNEES, ETC.)													
10 - REFLECTIVE CLOTHING													
11 - LIGHTING - PEDESTRIAN /BICYCLE ONLY													
99 - OTHER / UNKNOWN													
SEATING POSITION													
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)													
2 - FRONT - MIDDLE													
3 - FRONT - RIGHT SIDE													
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)													
5 - SECOND - MIDDLE													
6 - SECOND - RIGHT SIDE													
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)													
8 - THIRD - MIDDLE													
9 - THIRD - RIGHT 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													
99 - OTHER / UNKNOWN													
AIR BAG													
1 - NOT DEPLOYED													
2 - DEPLOYED FRONT													
3 - DEPLOYED SIDE													
4 - DEPLOYED BOTH FRONT / SIDE													
5 - NOT APPLICABLE													
9 - DEPLOYMENT UNKNOWN													
EJECTION													
1 - NOT EJECTED													
2 - PARTIALLY EJECTED													
3 - TOTALLY EJECTED													
4 - NOT APPLICABLE													
TRAPPED													
1 - NOT TRAPPED													
2 - EXTRICATED BY MECHANICAL MEANS													
3 - FREED BY NON-MECHANICAL MEANS													
OL CLASS													
1 - CLASS A													
2 - CLASS B													
3 - CLASS C													
4 - REGULAR CLASS (OHIO = D)													
5 - M / C MOPED ONLY													
6 - NO VALID OL													
OL RESTRICTION(S)													
1 - ALCOHOL INTERLOCK DEVICE													
2 - CDL INTRASTATE ONLY													
3 - CORRECTIVE LENSES													
4 - FARM WAIVER													
5 - EXCEPT CLASS A BUS													
6 - EXCEPT CLASS A & CLASS B BUS													
7 - EXCEPT TRACTOR-TRAILER													
8 - INTERMEDIATE LICENSE RESTRICTIONS													
9 - LEARNER'S PERMIT RESTRICTIONS													
10 - LIMITED TO DAYLIGHT ONLY													
11 - LIMITED TO EMPLOYMENT													
12 - LIMITED - OTHER													
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)													
14 - MILITARY VEHICLES ONLY													
15 - MOTOR VEHICLES WITHOUT AIR BRAKES													
16 - OUTSIDE MIRROR													
17 - PROSTHETIC AID													
18 - OTHER													
DRIVER DISTRACTION													
1 - NOT DISTRACTED													
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)													
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE													
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE													
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE													
6 - PASSENGER													
7 - OTHER DISTRACTION INSIDE THE VEHICLE													
8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE													
9 - OTHER / UNKNOWN													
TEST STATUS													
1 - NONE GIVEN													
2 - TEST REFUSED													
3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE													
4 - TEST GIVEN, RESULTS KNOWN													
5 - TEST GIVEN, RESULTS UNKNOWN													
ALCOHOL TEST TYPE													
1 - NONE													
2 - BLOOD													
3 - URINE													
4 - BREATH													
5 - OTHER													
DRUG TEST TYPE													
1 - NONE													
2 - BLOOD													
3 - URINE													
4 - OTHER													
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													
DRUG TEST RESULT(S)													
1 - AMPHETAMINES													
2 - BARBITURATES													
3 - BENZODIAZEPINES													
4 - CANNABINOIDS													
5 - COCAINE													
6 - OPIATES / OPIOIDS													
7 - OTHER													
8 - NEGATIVE RESULTS													