OHIO DEPARTMENT OF PUBLIC SAFETY	RAFFIC CR	ASH R	EPORT	*DENOTE	S MANDATORY FI	ELD FOR SUPPLEM	ENT REPORT		OCAL REPORT NU	MBER*		
OH-2 OH-3 LOCAL INFORMATION								2,0,2,1,-,0,0,0,0,0,0,2,4,				
PHOTOSTAKEN OTHER REPORTING AGENCY NAME*					NCIC* HIT/SKIP			NUMBER OF UNITS UNIT IN ERROR				
COUNTY* LOCALITY* LOCALITY* LOCALITY* LOCALITY, VILLAGE, TOWNSHIP*						(0 1)	1- SOLVED 0 3 9			9 9 98 - ANIMAL 99 - UNKNOWN		
1-	CITY VILLAGE · Ker		VILLAGE, TOWNSHI						CRASH DATE / TIME* CRASH SEVE			
ROUTE TYPE ROUTE NU	TOWNSHIP		OCATION ROAD	NAME			ROAD TYPE	0,1,0,1,2,0,2,1,		2 - SERIOUS INJURY SUSPECTED		
2- SOUTH 3- EAST FAIRCHILD							AV	41 1 5 9 4 0 4 3-MINOR INJ				
ROUTE TYPE ROUTE NO	4-WEST TAIRCITIED					OUSE #)	ROAD TYPE	LONGITUDE DE	SUSPECTED 4 - INJURY POSSIBLE			
S R 43	3-	SOUTH EAST	MANTUA				ST	-8.1 _a 3.5.9		5 - PROPERTY DAMAG		
REFERENCE POINT	DIRECTION	WEST	ROUTE TYPE			ROAD TYPE	13 1		INTERSECTION RE	ONLY		
1-INTERSECTION 2-MILE POST	T-MOKI		NTERSTATE ROL		AL - ALLEY	HW-HIGHWAY F	D - ROAD	521	RSECTION OR ON AF			
1 3- HOUSE #	3 2-SOUTH	03-1	EDERAL US ROL	ITE	AV - AVENUE BL - BOULEVARD		SQ - SQUARE ST - STREET TE - TERRACE	MITHIN INTE	RCHANGE AREA	4		
DISTANCE	4 - WEST DISTANCE		TATE ROUTE UMBERED COUN	ITY ROUTE	CR - CIRCLE	OV - OVAL T		E WITHIN INTE		NUMBER OF APPROACHE		
FROM REFERENCE	UNIT OF MEASURE 1 - MILES		IUMBERED TOWI	NSHIP	DR - DRIVE		L -TRAIL VA-WAY	ROADWAY				
4,0,	2 2-FEET 3-YARDS		ROUTE		HE - HEIGHTS	PL - PLACE		ROADWAY DIV	IDED			
LOCATIO 1 - ON ROADWA	N OF FIRST HARMF	UL EVENT OSSOVER				H COLLISION/IMPA	CT	DIRECTION OF TRAVE	L N	EDIANTYPE		
0 1 2-ON SHOULD			LLEY ACCESS	2	DETWEEN	4 - REAR-TO-REAR 5 - BACKING		1 - NORTH		1 - DIVIDED FLUSH MEDIAN (<4 FEET)		
3 - IN MEDIAN 4 - ON ROADSII			ADE CROSSING		VEHICLES IN	6 - ANGLE 7 - Sideswipe, Sam	E DIRECTION	3- EAST		DED FLUSH MEDIAN		
5 - ON GORE	TF	RAILS KE LANE			REAR-END	B - SIDESWIPE, OPPO	- SIDESWIPE, OPPOSITE DIRECTION 4- WEST 3- DIVIDED, I					
6 - OUTSIDE TE 7 - ON RAMP	14-10	LL BOOTH		3-	HEAD-ON	9 - OTHER / UNKNO	NN		(AN	(DED, RAISED MEDIAN Y TYPE)		
8 - OFF RAMP	99-01	THER / UNK	NOWN	L.,,				1 2012	9-0TH	ER/UNKNOWN		
WORK ZONE RELA	TED		WORK ZONE TY ANE CLOSURE	PE		ON OF CRASH IN WO - BEFORE THE 1ST		CONTOUR	CONDITIONS			
WORKERS PRESE	NT	2 - L	ANE SHIFT/CROS			WARNING SIGN		2	4_	_1_		
LAW ENFORCEME	NT PRESENT		/ORK ON SHOULD R MEDIAN	DER	1	- ADVANCE WARNIN -TRANSITION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,		
ACTIVE SCHOOL Z	ONE		NTERMITTENT O THER	R MOVING V		- ACTIVITY AREA - TERMINATION AR	FΔ	3 - CURVE LEVEL 3 - SNOW		BITUMINOUS, ASPHALT		
		3.0	THER	10, 1		- I Elimination an	LA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK		
1 - DAYLIGHT	CONDITION		1-CL		ATHER 6-SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIF OIL, GRAVEL	4 - SLAG, GRAVEL, STONE		
1 2 - DAWN/DUSK	K HTED ROADWAY		(11)	OUDY		CROSSWINDS	CNION		6 - WATER (STAND MOVING)			
4 - DARK - ROA	ADWAY NOT LIGHTE		4 - RA	LIN	9 - FREEZI	NG RAIN OR FREEZ			7 - SLUSH	9 - OTHER/UNKNOW		
5 - DARK - UNK 9 - OTHER / UN	KNOWN ROADWAY L IKNOWN	IGHTING.	5 - SL	EET, HAIL	99 - OTHER	/ UNKNOWN			9 - OTHER/UNKNO	WN		
NARRATIVE				Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, whic				1		Indicate the nort		
JNIT 3 WAS	STOPPED	IN TR	RAFFIC ()N TH	E				<	direction with an "N" on the compass diagram		
FAIRCHILD	AVE. BRI	DGE I	DUE TO	A					1			
SEPERATE	ACCIDEN	T. UN	IT 2 WAS									
APPROACH												
3 DUE TO T				11/2/1/19/2	SUSPECS STORY		S MATLA ET	A NOT	DAVE (BRIDGE)	- Cha		
UNIT 1 WAS					2 AND	74004,87		Pleasered projects.	Unit 3	Unit 1		
SLID INTO BEING ICE	THE BK	IDGE		IS THE MAN TO THE PROPERTY OF								
DEING ICE	DOTER.		-				4	000W				
Marie and the second se					erenterte de la company de la							
	wrish darwin the "terminate description of the second											
CRASH REPORTED	DATE/TIME	ı	DISPATCH DATE	/TIME	AI	RRIVAL DATE / TIMI		SCENE CLEARED	DATE / TIME	REPORT TAKEN BY		
0,1,0,1,2,0,2								0,1,0,1,2,0,2,		X POLICE AGENCY		
TOTAL TIME ROADWAY CLOSED IN	OTHER IVESTIGATION TIME	TOTAL	OFFICER	's NAME* land, I		10	HECKED BY OFF	icer's name*		MOTORIST		
				OFFICER	'S BADGE NUMBE			BY OFFICER'S BADGE	NUMBER*	(GORRECTION OF ADDIT) TO AM EXISTING REPORT SENT TO U		
0 7 7	0 3 0	1 0	7 2	3	8		2 , 5	5				

LOCAL REPORT NUMBER

	(2,0,2,1,-,0,0,0,0,0,0,2,4,)										
RIVERI			AMAGE								
1	1 - NONE	DAM	3 - FUNCTIONAL DAMAGE								
	2 2- MINOR	DAMA									
DE		9-1	INKNOWN								
	TAID	DAMA	GED AREA(S) ALL THAT APPLY								
(E		LLMIL									
gen EL	11 12 1		11 12 1								
	10 11 1	2	10 11 1 2								
	- 0 2 -	4	10,000,2								
_	9 3 4 _)3	9 9 3 3								
#	a 0 5	4	7 9 6 74								
	7 6 5		12 7 5								
	6	1	Tu 6								
PE)	10/	1	1 2								
7	9	-	3 3								
	+	-									
,	8	X	7 5 4								
	11 12	7	5 11 12								
	10 12	2	12								
	10 2 -	7	10 1 2								
	9 9 3	3	9 3 3								
	7 5	7.	8 4 7								
	7 5										
	6		6 5								
		1	2 12 12								
	12										
	A MA										
	, 60	9 @	· 3 9 1 3 9 1 3								
	6		(e)								
		6	6 6								
	- NO DAMAGE	[0]	- UNDERCARRIAGE [14]								
	□-TOP [13]		-ALL AREAS [15]								
	UNIT NOT AT SCENE [16]										
	INIT	IAL P	OINT OF CONTACT								
	0 - NO DAM		14 - UNDERCARRIAGE								
	1 1 1-12 - REFE	R TO	UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN								
	13-TOP		99 - UNKNUWN								
		TE	RAFFIC								
	TRAFFICWAY FLOW		TRAFFIC CONTROL								
	1 - ONE-WAY		1 - ROUNDABOUT 4 - STOP SIGN								
	2 2 - TWO-WAY		2 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL								
ION	и										
	# OF THROUGH LANES ON ROAD		RAIL GRADE CROSSING 1 - NOT INVOLVED								
	2		2 - INVOLVED-ACTIVE CROSSING								
ANCE			3 - INVOLVED-PASSIVE CROSSING								
	UNIT / N	ON-M	OTORIST DIRECTION								
ION			1 - NORTH 5 - NORTHEAST								
	FROM 3 TO	4	2 - SOUTH 6 - NORTHWEST J 3 - EAST 7 - SOUTHEAST								
CT	THOM LET 10	_	4 - WEST 8 - SOUTHWEST								
ANCE			9 - OTHER / UNKNOWN								
	UNIT SPEED		DETECTED SPEED								
	0,1,5		1 - STATED / ESTIMATED SPEED								
	UILI		2 - CALCULATED / EDR								
1	POSTED SPEED		3 - UNDETERMINED								

UNIT # OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (SAME AS DE 0.1 WELSH, LAURA, A OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 9698 VALLEY RD , MACEDONIA , OH 44056 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA COO 1 1 1 1 1 1 LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAI 3, V, W2, K, 7, A, J, 7, C, MB, 4, 5, 1, 8, 6, O. H. GVN2415 0 1 2 Volkswa INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # COLOR **VEHICLE MOD PROGRESSIVE** 60110588 **BRO JETTA** TYPE OF USE US DOT # TOWED BY: COMPANY NAME GOVERNMENT IN EMERGENCY RESPONSE COMMERCIAL HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK MATERIAL CLASS # PLACARD II 1 - <10K (BS. DEVICE HIT/SKIP UNIT RELEASED - 10,001 - 26K LBS 0,1 PLACARD 3 - >26K LBS 11 1 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) B - MOTORCYCLE 3-WHEELED 0 1 3 - SPORT UTILITY VEHICLE 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TY 9 - AUTOCYCLE 14-SINGLE UNITTRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10-MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 0 4 - HIGH AUTOMATION 1 -YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0 1 2 TAXI 7 - BUS - INTERCETY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13-POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14-PUBLIC UTILITY 19. TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0,1 / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VANVENCLOSED BOX 13-FLAT BED 14-GARRAGE/REFUSE ROOY 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99 - OTHER / UNKNOWN 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLIGKTIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR DEFECTIVE ACCIDENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER 4 - MIDBLOCK - MARKED AT INCIDENT SCENE 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99-OTHER/UNKNOWN B - SIDEWALK 11 - SHARED USE PATHS OR LOCATION 5 - TRAVEL LANE - OTHER LOCATION AT IMPACT TRAILS 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING B - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 0 1 3 - CHANGING LANES 3-STRIKING 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 19-STANDING ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 16-WORKING DISABLED VEHICLE & STRUCK 6 - MAKING LEFTTURN IN TRAFFIC 9-OTHER/UNKNOWN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWA 12 - DRIVERLESS 1-NONE 13 - IMPROPER START FROM A 7 - LEFT OF CENTER 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY PARKED POSITION 2 - FAILURE TO YIELD 8-FOLLOWING TOO CLOSE / ACDA 18 - OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 0 8 3-RAN RED LIGHT 14-STOPPED OR PARKED EQUIPMENT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO ILLEGALLY. 4 - RAN STOP SIGN 10-IMPROPER PASSING 19-LOAD SHIFTING/FALLING/ ROADWAY CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID SPILLING 99 - OTHER IMPROPER ACT 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IN PROPER CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING SEQUENCE OF EVENTS **EVENTS** 1 2 0 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENA OPPOSITE DIRECTION OF 2 - FIRE/EXP_OSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM **EQUIPMENT** TRAVEL 23-STRUCK BY FALLING, 3 - IMMERSION 18-ANIMAL - DEER R - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 19-ANIMAL - OTHER J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION ANYTHING SET IN MOT 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT LOSS OR SHIFT 24-OTHER MOVABLE CBJE 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE COLLISION WITH FIXED OBJECT - STRUCK 25-IMPACT ATTENUATOR 31 - GUARDRAIL FND 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENA / CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH **EQUIPMENT** 26-BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 51 - WALL 39-LIGHT/LUMINARIES 45 - EMBANKMENT

STRUCTURE

28-BRIDGE PARAPET

30-GUARDRAIL FACE

29-BRIDGE RAIL

27 - BRIDGE PIER OR ABUTMENT

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

36 - MEDIAN OTHER BARRIER

RARRIFR

BARRIER

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

SUPPORT

40 - LITILITY POLF

41 - OTHER POST, POLE

OR SUPPORT

42 - CIII VERT

46 - FENCE

48-TREE

47 - MAILBOX

49-FIRE HYDRANT

52-BUILDING

54-OTHER FIXED OBJECT

2 5

99-OTHER/UNKNOWN

53-TUNNEL



2,0,2,1,-,0,0,0,0,0,0,2,4, OWNER NAME: LAST, FIRST, MIDDLE (SAME AS ORIVER)
GANTOUS, EMILE, JAMES OWNED PHONE: INClUDE AREA CODE (SAME AS DRIVER) DAMAGE 0.2 DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 3163 SAINT MIKALA CT ,TWINSBURG ,OH 44087 ■ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUSE AREA CODE 9 - HNKNOWN DAMAGED AREA(S) LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** INDICATE ALL THAT APPLY VEHICLE YEAR VEHICLE MAKE 5, NP, D8, 4, L, F, 4, J, H3, 7, 1, 0, 8, 5 O H GPN4520 2.0.1.8 Hyundai INSURANCE COMPANY INSURANCE VERIFIED INSURANCE POLICY # COLOR VEHICLE MODEL PROGRESSIVE 940647141 BLU ELANTRA TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED CLASS # PLACARD ID # 1 - <10K LBS HIT/SKIP UNIT DEVICE 2 - 10.001 - 26K LBS PLACARD 13 - >26K LBS 11 1 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18-LTMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 0 1 3 - SPORT LTILITY VEHICLE 9 - AUTOCYCLE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 14-SINGLE UNIT TRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MDPED OR MOTORIZED 15-SEWI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN BICYCLE 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17 - MOTORHOME 99 - UNKYOWN OR HIT/SKIP (ATV / UTV) # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIA! AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0,1, 2-TAXI 7 - BUS - INTERCITY 12-MILITARY 17 - MOWING 99 - DT-FER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13-POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 12 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0.1 INCT APPLICABLE MOTOR VEHICLE CHASSIS. 9 - CARGOTANX 13 - AUTO TRANSPORTER CARGO 2 - BUS 4 - LEGGING 6 - CARGO VANIENCI OSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99-OTHER/UNKNOWN 0.0 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER FOUIPMENT 10-DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT -NO DAMAGE TO T - UNDERCARRIAGE [14] 1-INTERSECTION-MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAWCROSSING ISLAND 12 - FIRST RESPONDER CROSS WAT < 4 - WIDBLOCK - MARKED AT INCIDENT SCENE 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 7-TOP | 13 | -ALL AREAS [15] NON-MOTORIST 2 - INTERSECTION - UNMARKED CROSSWALK 99 - OTHER / UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR CRCSS-WALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS - UNIT NOT AT SCENE [16] AT IMPACT 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 5 0 1 3 - CHANGING LANES SPECIFIED LOCATION 0 - NO DAMAGE 14 - UNDERCARRIAGE __J 3-STRIKING 19-STANDING 9 - LEAVING TRAFFIC LANE 1 2 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN JOGGING, PLAYING 21 - STANDING OUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 13-TOP 16-WORKING & STRUCK DISABLED VEHICLE 6 - MAKING LEFT TURN IN TRAFFIC 17 - PUSHING VEHICLE 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 1-NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION COSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD B-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT EQLIPMENT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 0,8 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19-LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY CONTRIBUTING CIRCUMSTANCES 5 - UNSAFE SPEED 15 - SWERVING TO AVOID 3 - FLASHER 6 - NO CONTROL SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IN PROPER CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING EVENTS 2 1 2 0 1 - OVERTURN/ROLLCVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WCRK ZONE MAINTENANCE OPPOSITE DIRECTION OF 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - AHIMAL - FARM EQUIPMENT TRAVEL 23 - STRUCK BY FALLING, **UNIT / NON-MOTORIST DIRECTION** 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGO CR 19-ANIMAL - OTHER 1 - NORTH 5 - NORTHEAST 1 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13-OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - VORTHWEST 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 3 TO 4 LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24 - OTHER MOVABLE CBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST B - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44 - DITCH EQUIPMENT UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 51 - WALL 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 46-FENCE 0,3,0 27 - BRIDGE PIER OR ABUTMENT RAFRIFR 40-UTILITY POLE 53 - TUNNEL 47 - MAII BOX 2 - CALCULATED / EDR 28-BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 48-TREE 54-OTHER FIXED CRUECT 29-BRIDGE RAIL POSTED SPEED 3 - UNDETERMINED BARRIER OR S. PPORT 99-OTHER JUNKNOWN 49-FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 2 , 5 1 MOST HARMFUL EVENT FIRST HARMFUL EVENT

LOCAL REPORT NUMBER



LOCAL REPORT NUMBER

2 | 0 | 2 | 1 | - | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 4 |

	DALZELL, J	ACQUELINE	L, L		THE ABOA PHINE (TY) SAME AS DRIVER)		DAMAGE DAMAGE SCALE			
OWNER A	UNIPER LN,	E, ZIP (SAME AS DRIVER) BRUNSWICK	,ОН 44212			2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
COMMER	CIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIE	PHONE: INCLUDE AREA CODE	9 - UNKNOWN . DAMAGED AREA(S)				
LP STATE O H	HKG1937	1, C 6, RR7, F	IDENTIFICATION #	9,2,7, VEHICLE YE			AMAGEU AREA(5) CATE ALL THAT APPLY			
X INSURA			NSURANCE POLICY # 26182005	GRY	RAM 1500	16 11 12 1	10 11 12			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPAN	US MATERIAL	9 10 2 3	3 9 9 3			
INTER DEVIC	PED —	O 1	HICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS 2 - 10,001 - 26K LBS 3 - >26K LBS	MATERIAL	CLASS# PLACARD ID#	7 0 5	8 7 V 5 4			
O, 1, UNIT TYPE	I - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) # OF TRAILING UNITS	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	10	11 1 2 2 0 3 3 9 4 7 5 5 4 4 7 7 8 5 4 4			
2	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK		1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HISH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN	11 12 1 10 11 12 1 10 0 3	5 11 12 1 1 10 10 10 10 10 10 10 10 10 10 10 10			
0,1, SPECIAL FUNCTION	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER	12 - MILITARY 13 - POLICE	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 23 - SAFETY SERVICE PATROL	21-MAIL CARRIER 99-OTHER/UNKNOWN	8 7 6 5	8 7 5 5			
O 1 CARGO BODY TYPE	1 - NO CARGO BODYTYPE /NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	CHASSIS 6 - CARGO VA-VENCLOSED BOX	B - POLE 9 - CARGOTANK 13-FLAT BED 11-DUMP	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 3 9	12 12 12			
	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT		9 - MOTOR TROUBLE 10-disabled from Prior Accident	99 - OTHER / UNKNOWN	6				
NON-MOTORIST LOCATION AT IMPACT	000001114174	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	7 - SHOULDER / ROADSIDE	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - Shared Use Paths or Trails	12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER/UNKNOWN	□-NO DAMAGE □-TOP [13] □-UNI	(0) - UNDERCARRIAGE (14) - ALL AREAS (15) IT NOT AT SCENE (16)			
4 ACTION	2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING ACTIONS	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFTTURN	B - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10-PARKED 11-SLOWING OR STOPPED IN TRAFFIC	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	0 - NO DAMA	TO UNIT 15 - VEHICLE NOT AT SCENE			
O 1 CONTRIBUTING	2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	10-IMPROPER PASSING 11-DROVE OFF ROAD	PARKED POSITION 14-STOPPED OR PARKED ILLEGALLY 15-SWERVING TO AVOID	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/ SPILLING 20 - IM PROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
7	6-IMPROPERTURN OF EVENTS	12-IMPROPER BACKING		ES THE PROPERTY		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
1 2 0	2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
3	4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	The second secon	12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION 14-PEDESTRIAN 15-PEDALCYCLE WITH FIXED OBJECT		23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24-OTHER MOVABLE CBJECT	FROM 3 TO L	N-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 4 - WEST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
5	/ CRASH CUSHION 26-BRIDGE OVERHEAD STRUCTURE 27-BRIDGE PIER OR ABUTMENT	32 - PORTABLE BARRIER	38-OVERHEAD SIGN POST 39-LIGHT/LUMINARIES SUPPORT 40-UTILITY POLE	43 - CUR8 44 - DITCH 45 - EMBANKNENT 46 - FENCE 47 - MAILBOX	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNEL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR			
1	29-BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT	49 - FIRE HYDRANT	54-OTHER FIXED OBJECT 99-OTHER UNKNOWN	POSTED SPEED	3 - UNDETERMINED			

OHIO DES	CONSTRUCTION MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER					
1000	Man and Matter IAININKTOI / IANN - IAININKTOI									2,0,2,1,-,0,0,0,0,0,0,2,4,				
UNIT#	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER				
0,1	WELSH, CHRISTIAN, MICHEL								1,1,2,0,1,9,9,6,2,4, M					
	STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
0	VALLEY RD ,MACEDONIA ,OH 44056 INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (MAYER CITYO SAFFTY FOILIBMEN													
2	INJURED E	AKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT HAPP								
5 OL STATE						0,4			MC HELMET 0, 1 1 1 1					
=					OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	CRIPTION CITATION NUMBER					
O, H,	ENDORSEMENT	RESTRICTION SELECT U	PTO3 DRIV	(ED T	41.00	HOL / DRUG SUSPE			ALC	OHOL TEST	2010 75070			
DE GERSS	SELECT UP TO 2	RESTRICTION SELECTE		RACTED	_	COHOL MAR		CONDITION	STATUS TY		DRUG TEST(S) TATUS TYPE RESULT	SELECT UP TO 4		
4			_	1	ОТ	HER DRUG		1	1	1	1 1 .			
UNIT #	NAME: LAST, F	IRST, MIDDLE								DATE OF BIRTH	AGE	GENDER		
0,2	GANTO	DUS, BRANDON	TYL	ER					0,6	1,8,1,9,	9 8 2 2	M		
ADDRESS:	STREET, CITY, STA	ATE, ZIP				0.50%				PHONE - INCLUDE AREA COD				
3163 8	SAINT M	IIKALA CT ,TW	INSB	URG .	HO,	44087			L					
Ż	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-Cor	SEATING POSITION	AIR BAG USAGE EJECTION	TRAPPED		
5_5	BY							0,4	MC HE		1 1	1		
OL STATE	OPERATOR LI	ICENSE NUMBER	1	OFFENS	SE CHAR	GED	LOCAL	OFFENSE DESC	RIPTION		CITATION NUMBER			
OH	l ^x													
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT	DIST	/ER TRACTED		HOL / DRUG SUSPE		CONDITION	ALC STATUS TY	OHOL TEST YPE VALUE ST	DRUG TEST(S) TATUS TYPE RESULT			
, 4 ,			BY	1 OTHER DRUG			. 1 .	1 1 1						
UNIT#	NAME: LAST, F				2 Office Drog									
0.3	DALZE	LL, JOEL, EVA	N						DATE OF BIRTH AGE GENDER O 1 3 0 1 9 9 9 2 1 M					
	: STREET, CITY, STA		-		*				CONTACT PHONE - INCLUDE AREA CODE					
608 J	UNIPER	LN ,BRUNSWIC	ck,ol	H 442	12									
INJURIES	INJURED E	EMS AGENCY (NAME)		INJUREDT	AKEN TO:	MEDICAL FACILITY	NAME (IP)	SAFETY EQUIPMENT	nor c-	SEATING POSITION	AIR BAG USAGE EJECTION	TRAPPED		
55	BŶ					USED 0 4			MC HELMET 0 1 1 1					
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAR				CRIPTION CITATION NUMBER					
O , H,														
OL CLASS	SELECT UP TO 2	RESTRICTION SELECTS	DIST	VER TRACTED		HOL / DRUG SUSPI		CONDITION	ALC STATUS TY	OHOL TEST (PE VALUE ST	DRUG TEST(S)			
8.4.			BY	1		COHOL MAI	RLJUANA	. 1 .	1					
INJ	JRIES	SEATING POSITION	A	IR BAG		OL CLAS	S	OL RESTRIC		DRIVER DISTRACTI				
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOT DEP			1-CLASS A		1 - ALCOHOL INTER	The second second	1 - NOT DISTRACTED	1 NONE GIVEN			
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY	2-FRONT-MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT		2 - MANUALLY OPERATING A ELECTRONIC COMMUNIC	ATION			
4 - POSSIBLE II		3 - FRONT - RIGHT SIDE		ED BOTH FRO	NT/SIDE	4 - REGULAR CLASS		4 - FARM WAIVER	Maca	DEVICE (TEXTING, TYPIN DIALING)				
5 - NO APPARE	NT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP			(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 TALKING ON HANDS-FREE				
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOYI	MENT UNKNO	OWN	6 - NO VALID OL		6-EXCEPT CLASS & BUS		COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD	IINKWIWA	NFLZ		
1 - NOT TRANSE /TREATED A		6-SECOND - RIGHT SIDE 7-THIRD - LEFT SIDE	F	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO	R-TRAILER	COMMUNICATION DEVICE	ALCOHOL TES	TTYPE		
2-EMS		(MOTORCYCLE SIDE CAR)	1-NOTEJE	THE RESERVE AND ADDRESS OF THE PARTY OF THE		H - HAZMAT	MENI	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY WITH A ELECTRONIC DEVICE	N 1-NONE			
3 - POLICE		8-THIRD - MIDDLE 9-THIRD - RIGHT SIDE	2 - PARTIAL	LY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PER	MIT	6 - PASSENGER	2 - BL00D			
9-OTHER/UN	KNOWN	10 - SLEEPER SECTION	3-TOTALLY			P - PASSENGER		RESTRICTIONS 10 - LIMITED TO DAY	I ICHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE	3 - URINE 4 - BREATH			
Control of the second	QUIPMENT	OF TRUCK CAB	4 NOT APP	LRABLE		N - TANKER Q - MOTOR SCOOTER		11 - LIMITED TO EMI		8 - OTHER DISTRACTION OUT				
1 - NONE USED	BELT ONLY USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		RAPPED	to the same	R-THREE-WHEEL MC	TORCYCLE	12 - LIMITED - OTHE		7-OTHER/UNKNOWN	DRUG TEST	TYPE		
3 - LAP BELT 0		(NON-TRAILING UNIT, BUS, PICK UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS	TDAIL TRE	13 - MECHANICAL DI (SPECIAL BRAK	ES HAND		1 - NONE	SHOWN IN		
	- SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED		MECHANICAL MEANS 3- FREED BY			T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT		CONTROLS, OR O ADAPTIVE DEVI	THER CONDITION		2 BLOOD 3 URINE			
5 - CHILD REST FORWARD F	:21KMIN1 2X21FM -			TY Chanical M	EANS			14 - MĬLITARY VEHI		2 PHYSICAL IMPAIRMENT	4-OTHER			
6 - CHILD REST	TRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	z without	3 - EMOTIONAL (E	DRUG TEST RE	SULT(S)		
7 - BOOSTER S		15 - NON-MOTORIST				M - MALE		16-OUTSIDE MIRRO		4-ILLNESS	1 AMPHETAMINES	Contract on the last		
8 - HELMET U		99-OTHER UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AN	5 - FELL ASLEEP FAINTED FATIGUED ETC		2 BARBITURATES			
9 - PROTECTIV (ELBOW, KA								Ze : UtilLit		6- UNDER THE INFLUENCE	3 BENZODIAZEPIN 4 CANNABINOIDS	£5		
10 - REFLECTIV	E CLOTHING	lest and the second				A PROPERTY.	States.	E SUR SENSE	100 PA 100	OF MEDICATIONS DRUGS	5 COCAINE	List resident		
11 - LIGHTING - / BICYCLE (9-OTHER UNKNOWN	6 PIATES/OPIOID	IS.		
99 - OTHER / UN	99 - OTHER / UNKNOWN										7 OTHER 8 NEGATIVE RESUI	LTS		

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
								2.0.2.10.0.0.0.0.0.2.4.						
ı	UNIT #	100	T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER						
<u>.</u> [02		RTS, JACOB	, MATTH	£ W			0,8,3,0,1,9,9,7,2,3,M						
۵ ا		STREET, CITY,	ST DR, TWIN			CONTACT PHONE - INCLUDE AREA CODE								
=_			EMS AGENCY (NAME)	isbuku,		Tegazina naerrian	T at a sea trace	Тентент	I					
1	5 ,	INJURED TAKEN BY			INJURED TAKEN TO: MEDICAL FA	CICIT TRAME, CITY	SAFETY EQUIPMENT	DOT-COMPLIANT						
	UNIT #	NAME: LAS	T, FIRST, MIDDLE			1790	0,4							
				DATE OF BIRTH AGE GENDER										
ADDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE					
° 1	NJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION					
Ŀ		ВУ						MC HELMET	سيب		بار			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE		THE STATE OF THE S			DAT	E OF BIRTH		AGE	GENDER		
	INDRESS.	STREET, CITY,	CTATE 710											
M '	ADDRESS:	STREET, GITT,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
Ī	NJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FA	CILITY (NAME: CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR RAG HEADE	FIERTION	TRAPPED		
ı.		TAKEN BY				and it the may do it?	USED	DOT-COMPLIANT	SEATING POSITION	AIN BAG USAGE	EJECTION	TRAPPED		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
								, , , ,	GENDER					
A I	ADDRESS:	STREET, CITY,	STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE								
I		INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO. MEDICAL FA	CILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
ı	ON HAND VALUE	ВУ	RIES	CAPPEN	EQUIPMENT HORS			MC HELMET		L				
Г	1 - FATA		KIES	1 - NONE US	EQUIPMENT USED	to the second	SEATING POS T – LEFT SIDE	ITION	Value of the last	AIR BAG U	SAGE	STATE OF THE PARTY		
	2 - SUSF	ECTED SE	RIOUS INJURY		VEHICLE OCCUPANT (MOTORCYCLE									
	3 - SUSF	ECTED MI	NOR INJURY	THE PROPERTY AND ADDRESS.	R BELT ONLY USED	FRONT - MIDDLE			3 - DEPLOYED SIDE					
		IBLE INJU		The second second	4 - SECOND - LEFT			E 4- DEPLOYED BOTH						
	5 - NO A	PPARENT I	NJURY		[10] [10] [10] [10] [10] [10] [10] [10]			(MOTORCYCLE PASSENGER) - SECOND – MIDDLE			FRONT/SIDE 5 - NOT APPLICABLE			
	No. of London	INJURED		FORWARD		6 - SECO	6 - SECOND - RIGHT SIDE			MENT UNK	Nown			
		TRANSPOR ATED AT S	the state of the s	6 - CHILD RE	STRAINT SYSTEM –	Colon Colon Barrier Colon Colo	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)			EJECTION				
	2 - EMS			, BOOSTER SEAT			O - MIDDLE		1 - NOT EJ	PRODUCE AND ADDRESS.				
	3 - POLI	CE		8 - HELMET	USED		D – RIGHT SIDE PER SECTION (AB 2 - PARTIALLY EJECTED					
	9 - OTHE	R / UNKNO	WN	9 - PROTECT (ELBOW, I	11 - PASS	11 - PASSENGER IN OTHER ENCLOSES CARGO AREA (NON-TRAILING UNIT,			3 - TOTALLY EJECTED					
		SAME STREET	DER	THE CONTRACT DO	IVE CLOTHING	BUS, P	ICK-UP WITH CAS	(AP)						
140	-FEMA 1-MALE				- PEDESTRIAN		12 - PASSENGER IN UNENCLOSED CARGO AREA			TRAPPED				
Ų	J - OTHE	R/UNKNOV	VN	/ BICYCLE 99 - OTHER / U	INKNOWN 13 - TRAILING UNIT				1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL					
					14 KIDING ON			G ON VEHICLE EXTERIOR RAILING UNIT)		MEANS				
ı						15 - NON-I			3 - FREED MEANS	BY NON-ME	CHANIC	AL		
	IAME: LAS	T, FIRST, MIDDI	resource de la lema de la compa. Le	I subject to		99 - 01 HE	R / UNKNOWN	DAT			405	OF HOED		
2.25								DAI	E OF BIRTH		AGE	GENDER		
1	DDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	INCLUDE AREA CO	DE J				
					a de la companya de l				1 1					
NAME: LAST, FIRST, MIDDLE							DAT	E OF BIRTH		AGE	GENDER			
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PROFE	1 1						
								CONTACT PHONE - INCLUDE AREA CODE						
NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDE				GENDER		
202														
/	DDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COI	DE 3				
									J 1		1	, ,		