OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTE:	S MANDATORY FI	ELD FOR SUPPLEM	MENT REPORT		LOCAL REPORT NUMBER	*	
DHOTOS TAKEN 0H-2 0H-3	LOCAL INFORMATION				2 0 2 4	0 _ 0 _ 0 _ 0 _ 0	<b>5</b> <sub>1</sub> <b>8</b> <sub>1</sub> <b>8</b> <sub>1</sub> <b>8</b> <sub>1</sub>	
PHOTOS TAKEN X OH-1P OTHER	REPORTING AGENCY NAME				NUMBER OF UNITS	UNIT IN ERROR		
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Pol	0	6,7,0,3	1 - SOLVED L 2 - UNSOLVED	0 2 0	2 98 - ANIMAL 99 - UNKNOWN		
1 - CITY	ry, VILLAGE, TOWNSHIP*			CRASH DATE /	20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ASH SEVERITY - FATAL		
6 7 1 2-VILLAGE Kent			4.	0 5 0 2 2 0 2 4	/1804 4	- SERIOUS INJURY		
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH S - SOUTH S - EAST S - EAST W WEST	LOCATION ROAD NAME			ROAD TYPE	LATITUDE DE	2	SUSPECTED	
S R 59 3 E-EAST W-WEST	MAIN			$S \perp T$	41,15,3	6 6 2	- MINOR INJURY SUSPECTED	
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH	REFERENCE ROAD NAME (RO	OAD, MILEPOST, H	OUSE #)	ROAD TYPE	LONGITUDE D	PERSONAL PROPERTY AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF T	- INJURY POSSIBLE	
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	WILSON			$\mathbf{A}_{\perp}\mathbf{V}_{\perp}$	-8 <sub>1</sub> 1 <sub>0</sub> 3 <sub>4</sub> 6	4 4 1	PROPERTY DAMAGE ONLY	
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE		ROAD TYPE		_	INTERSECTION RELATE	)	
1 2-MILE POST 4 S-SOUTH US	- INTERSTATE ROUTE(TP) - FEDERAL US ROUTE	AL - ALLEY AV - AVENUE		RD - ROAD SQ - SQUARE	X WITHIN INTE	RSECTION OR ON APPROA	. 3	
3-HOUSE #   - E-EAST	- STATE ROUTE	BL - BOULEVARD		ST - STREET	☐ WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES	
DISTANCE DISTANCE CR FROM REFERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE	CR - CIRCLE CT - COURT		TE - TERRACE TL - TRAIL		ROADWAY		
2 5557	- NUMBERED TOWNSHIP ROUTE	DR - DRIVE		WA - WAY	ROADWAY DIV	/IDED		
		HE - HEIGHTS	PL - PLACE			1		
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVE			<b>H COLLISION/IMP/</b> 4 - REAR-TO-REAR	ACT	DIRECTION OF TRAVE N - NORTH		N TYPE LUSH MEDIAN	
	74111 4001133   7	TWO MOTOR	5 - BACKING		S - SOUTH	(<4 FEET	)	
3-IN MEDIAN 11-RAILWAY ( 4-ON ROADSIDE 12-SHARED U	SKADE CROSSING	V LITTOLLS IIV	6 - ANGLE 7 - SIDESWIPE, SAN	ME DIRECTION	E - EAST W - WEST	2 - DIVIDED F (≥4 FEET	LUSH MEDIAN )	
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANG	<b>■</b> 0		8 - SIDESWIPE, OPP 9 - OTHER / UNKNO				DEPRESSED MEDIAN RAISED MEDIAN	
7 - ON RAMP 14-TOLL BOOT	гн	IILAD-ON	7- OTHER 7 ONKNO	74414		(ANY TYP	E)	
8-OFF RAMP 99-OTHER/U	NKNOWN	F					1	
WORK ZONE RELATED	WORK ZONE TYPE - LANE CLOSURE		ON OF CRASH IN W - BEFORE THE 1ST		CONTOUR	CONDITIONS	SURFACE	
WORKERS PRESENT 2.	LANE SHIFT/CROSSOVER	1000	WARNING SIGN  -ADVANCE WARNING AREA  1 - STRAIGHT LEVEL 1 - DRY			1 000	2	
LAW ENFORCEMENT PRESENT	-WORK ON SHOULDER OR MEDIAN	W 7000	-TRANSITION AREA 2 - STRAIGHT GRADE 2 - WET			5965CASS-350A	1 - CONCRETE 2 - BLACKTOP,	
	INTERMITTENT OR MOVING WOTHER		- ACTIVITY AREA - TERMINATION AREA 3 - CURVE LEVEL 3 - SNOW			3 - SNOW	BITUMINOUS, ASPHALT	
LIGHT CONDITION	\$2.5000000000000000000000000000000000000	ATHER	4 - CURVE GRADE 4 - ICE 3				3 - BRICK/BLOCK	
1 - DAYLIGHT	1-CLEAR	6-SNOW	9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL			4 - SLAG, GRAVEL, STONE		
1 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	0 1 2-CLOUDY		CROSSWINDS 6-WATER (STANDING, MOVING) 5-			5 - DIRT		
4 - DARK - ROADWAY NOT LIGHTED	4 - RAIN		NG RAIN OR FREEZING DRIZZLE 7 - SLUSH			9 - OTHER/UNKNOWN		
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER	/ UNKNOWN			9 - OTHER/UNKNOWN		
NARRATIVE							Indicate the north	
UNIT 1 AND 2 WERE TRAVE	LING EASTROLIN	D	-				direction with an "N" on the	
ON E MAIN ST NEAR WILS		100%	1				compass diagram.	
		N	1	(R)				
WAS IN THE CURB LANE A	W 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	17	Not To Scale					
THE CENTER LANE. UNIT 2			- Not to scale					
MAINTAIN THEIR LANE OF			_					
SIDESWIPING UNIT 1 ON T	HE REAR.			_				
			,					
				-	2			
				•		•		
					EMAINS	ST		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	AR	RIVAL DATE / TIME	E	SCENE CLEARED		EPORT TAKEN BY	
0.5.0.2.2.0.2.4./.1.8.0.4.0.5.0	\(\begin{align*} 2 & 2 & 0 & 2 & 4 & / & 1 & 8 & 0 \end{align*} \]	5,0,5,0,2	2,0,2,4,/,1	1,8,2,5,0	5,0,2,2,0,2	4 <sub>1</sub> / <sub>1</sub> 1 <sub>1</sub> 8 <sub>1</sub> 4 <sub>1</sub> 3	POLICE AGENCY MOTORIST	
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINU		r Austin		HECKED BY OFFI		구片	SUPPLEMENT	
	OFFICER'S	BADGE NUMBER		•	SY OFFICER'S BADGE	NUMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)	
0 0 0 0 0 1 0 0 4	8 2 3 5	5		2 1	6			

or Pul	BLIC SAFETY UNIT					arrow action common to the contract	0 0 0 0 0 6 3 8 8			
UNIT # 0 1	OWNER NAME: LAST, FIRS	THONY, LEE		Redacted per	ORC 149.43(A)(1)		DAMAGE DAMAGE SCALE			
7472 (	DIRESS: STREET, CITY, STATE GIDDINGS RI TIAL CARRIER: NAME, ADDR	, Edinburg,	ОН 44272	Commercial Carrier	PHONE: INCLUDE AREA CODE	2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN  DAMAGED APEA(S)				
LP STATE	LICENSE PLATE #	VEHICL	E IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		DAMAGED AREA(S) CATE ALL THAT APPLY			
	JYB1658		0,5,3,1,F,6,5,3,			11 12	11 12 1			
X VERIFIE	INSURANCE COMP TREXIS TYPE OF USE		134018073114 US DOT #	RED TOWED BY: COMPAN	S40	10 11 1	2 10 11 1 2			
COMME		IN EMERGENCY RESPONSE	05001#	1		9 9 3	3 9 9 3			
INTERL DEVICE	OCK HIT/SKIP UNI	#UCCUPANTS	HICLE WEIGHT GVWR/GCWR  1 - <10K LBS. 2 - 10,001 - 26K LBS  3 - >26K LBS.	MATERIAL I	US MATERIAL CLASS # PLACARD ID #	8 7 6 5	4 8 7 6 5			
UNITTYPE	4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPEO OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV/UTV)	14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR	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	9	11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
_00	# of TRAILING UNITS				CET (Limesex - A)	11 12 1	6 11 12			
_2_	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK	? 0	1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN	10 11 1 10 2 9 9 3	2 10 11 1 1 2 3 3 3 9 9 9 3 3			
0.1		6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY		16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 7 5	4 8 7			
SPECIAL	3 - ELECTRONIC RIDE SHARING			18-SNOW REMOVAL	39-UTHER/UNKNOWN	7 6 5	7 6 5			
FUNCTION	TION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY		14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFETY SERVICE PATROL		6	•			
O 1 CARGO BODY TYPE	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	CHASSIS  6 - CARGO VAN/ENCLOSED BOX	8 - POLE 9 - CARGOTANK 10 - FLAT BED 11 - DUNP	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 2 3	12 12 12			
VEHICLE	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				
—	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 -FIRST RESPONDER	- NO DAMAGE	[0] - UNDERCARRIAGE [14]			
.TTT.	CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATIO	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	AT INCIDENT SCENE 99-OTHER / UNKNOWN	□-TOP [13]	- ALL AREAS [15]			
_4_	2-NON-COLLISION 0 1	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED INTRAFFIC	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 DAM/	R TO UNIT 15 - VEHICLE NOT AT SCENE			
	1-NONE	7 - LEFT OF CENTER		17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
0.1	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACD 9 - IMPROPER LANE CHANGE	A PARKED POSITION 14-STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
UI	4 - RAN STOP SIGN	10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY	2 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
CIRCUMSTANCES		11 - DROVE OFF ROAD 12 - IMPROPER BACKING		20 - IMPROPER CROSSING	99-OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS					ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING			
$_{1}$ $_{1}$ $_{1}$ $_{1}$ $_{1}$	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	ADDAGINE DIDEARIAN AR	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE	-	3 - INVOLVED-PASSIVE CROSSING			
	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	17-ANIMAL — FARM 18-ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / N	ON-MOTORIST DIRECTION			
3		9 - RAN OFF ROAD LEFT 10 - Cross Median	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT	FROM 4 TO	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST			
	25 - IMPACT ATTENUATOR	COLLISIO 31 - GUARDRAIL END	N WITH FIXED OBJECT 37-TRAFFIC SIGN POST	- STRUCK 43-CURB	50 - WORK ZONE MAINTENANCE	<u> </u>	9 - OTHER / UNKNOWN			
4	/ CRASH CUSHION	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED			
5	STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL RARRIER	39 - LIGHT / LUMINARIES SUPPORT 40 - LITH ITY POLF	45 - EMBANKMENT 46 - FENCE	51 - WALL 52 - BUILDING 53 - TUNNEL	0 3 5	1 - STATED / ESTIMATED SPEED			
	27- BRIDGE PIER ORABUTMENT BARRIER 40- UTILITY POLE 28- BRIDGE PARAPET 35- MEDIAN CONCRETE 41- OTHER POST, POLE 29- BRIDGE BAIL BARDIER AS SIBBOTO AS SIBB		47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED				

3 5

LOCAL REPORT NUMBER

w	O IVII					$2 \cdot 0 \cdot 2 \cdot 4 \cdot - 0$	$0_{\perp}0_{\perp}0_{\perp}0_{\perp}0_{\perp}6_{\perp}3_{\perp}8_{\perp}8_{\perp}$			
UNIT #	OWNER NAME: LAST, FIR	ARD, ALLEN	ī	Redacted per	ORC 149.43(A)(1)		DAMAGE AMAGE SCALE			
OWNER AL	DDRESS: STREET, CITY, STATE	, ZIP ( SAME AS DRIVER)				1 - NONE 3 - FUNCTIONAL DAMAGE				
	CLEVELAND CIAL CARRIER: NAME, ADD	RD, WOOST	PHONE: INCLUDE AREA CODE	Z-WINOR DAN	MAGE 4 - DISABLING DAMAGE - UNKNOWN					
Johnne	THE CARRIER. HAME, ADD	1200,0111,01012,211		L L L L L		DAI	MAGED AREA(S)			
	HHB7387	1_GCVKRE	$\begin{array}{c} \text{IDENTIFICATION \#} \\ C7 J Z2 14 \end{array}$		8 Chevrolet	INDICA	TE ALL THAT APPLY			
X INSURA	INSURANCE COME THE GENI		SURANCE POLICY # H6965318	GRY	VEHICLE MODEL SILVERAD	0 12 2	10 12 2			
	TYPE OF USE		US DOT#	TOWED BY: COMPANY		10 2	10 2 -			
COMME		IN EMERGENCY RESPONSE VEH	HICLE WEIGHT GVWR/GCWR		US MATERIAL	9 9 3 4	' '			
DEVICE EQUIP	LOCK E HIT/SKIP UNI Ped	T #OCCUPANTS VET	1 - ≤10KLBS. 2 - 10,001 - 26KLBS 3 - >26KLBS.	RELEASED	CLASS # PLACARD ID #	8 7 6 5 5	7 6 5 5			
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12-GOLF CART 13-SNOWMOBILE	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10	12			
0.4	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST	<u></u>	10 2			
UNITTYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - TRAIN	9	9 3 3			
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4			
	# of TRAILING UNITS	SINWARD EVY	2-H-10-00-00-00-00-00-00-00-00-00-00-00-00-			11 12 7	6 11 12			
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED		D - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	9 - UNKNOWN	10 11 1	10 11 1			
2	1-YES 2-NO 9-OTHER/UNK		2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 10 2 3	9 10 2			
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARM	21 - MAIL CARRIER	8 4 —	8 4 7			
0,1	2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY 8 - BUS - SHITTLE	12 - MILITARY 13 - POLICE	17 - MOWING 18 - SNOW REMOVAL	99 - OTHER / UNKNOWN	8 7 6	8 7 5			
SPECIAL FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14-PUBLIC UTILITY	19-TOWING		6	6 5			
	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT	461 2747, 5012 375 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10 ANNOUNT HIVEN	9	12 12 12			
0_1	1 - NO CARGO BODYTYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	CHASSIS	8 - POLE 9 - CARGO TANK	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER	12 0 0				
CARGO BODY TYPE	2 - BUS 4 - LOGGING		6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10-FLAT BED 11-DUMP	14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 ( )	3 9 7 3 9 8 3			
1172	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN					
	2 - HEAD LAMPS	5 - STEERING	B - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT		<u>.</u>	6 6 6			
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	USSE 68: 20 (1996)	a Carallet Colors	N	- NO DAMAGE [	0] - UNDERCARRIAGE [14]			
	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	□-TOP [13]	- ALL AREAS [ 15 ]			
LOCATION	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK  5 -TRAVEL LANE - OTHER LOCATION	B - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99-OTHER/UNKNOWN	□-UNIT	NOTAT SCENE [16]			
AT IMPACT	1-NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	0				
3	2-NON-COLLISION 0 3	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14-ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19-STANDING	0 - NO DAMAG	POINT OF CONTACT  14 - UNDERCARRIAGE			
ACTION	4 - STRUCK FRE-UNASI	4 - UVERTAKING/PASSING	10-PARKED	15 - WALKING, RUNNING, JOGGING, PLAYING	20-OTHER NON-MOTORIST	0 1 1-12 - REFERT	TO UNIT 15 - VEHICLE NOT AT SCENE  M 99 - UNKNOWN			
	5 - BOTH STRIKING ACTIONS & STRUCK	ACTIONS 5 - MAKING RIGHTTURN 11 - SLOWING OR STOPPED INTRAFFIC		16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13-TOP	77 - OWNINOWN			
	9-OTHER/UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC			
	1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA	PARKED POSITION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN			
0 9	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED ILLEGALLY	EQUIPMENT  19 - LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING	4 - RAN STOP SIGN 5 - UNSAFE SPEED	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
	6-IMPROPERTURN	12 - IMPROPER BACKING	10- Intolia IIA	20 - IMPROPER CROSSING		# of THROUGH LANES on ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED			
	OF EVENTS		NON-COLLISION	Un Tangang in the Are		4	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
$_{1}$ $_{2}$ $_{1}$ $_{0}$	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT	,				
21 1 1	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	TRAVEL 12 - DOWNHILL RUNAWAY	18-ANIMAL — DEER 19-ANIMAL — OTHER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NON	I-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST			
2	4 - JACKKNIFE 5 - CARGO / EQUIPMENT	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	ANYTHING SET IN MOTION BY A MOTOR VEHICLE	<sub>FR0М</sub> ∟4 то ∟	3 2 - SOUTH 6 - NORTHWEST 7 - SOUTHEAST			
3	LOSS OR SHIFT		15 - PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	FROM L TO L	4 - WEST 8 - SOUTHWEST			
4	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	N WITH FIXED OBJECT 37-TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN			
7	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES	44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED			
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	SUPPORT 40 - UTILITY POLE	46-FENCE 47-MAILBOX	52 - BUILDING 53 - TUNNEL	$\begin{bmatrix} 0 & 4 & 5 \end{bmatrix}$	1 - STATED / ESTIMATED SPEED			
	28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	48-TREE	54-OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
6	30-GUARDRAIL FACE	BARRIER OR SUPPORT  36 - MEDIAN OTHER BARRIER 42 - CULVERT		49-FIRE HYDRANT	99-OTHER/UNKNOWN					
_1_	FIRST HARMFUL EVEN	T MOST H	ARMFUL EVENT			3 5				
H\$Y8304 OF	H1U 1/19 [760-0820]						PAGE 3 OF 5			

OFF PUBLIC BAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
SAFETY - MERVI	ICE - PROTECTION	010K131 / 140	)	1010	K12	ı			2 0	2 4 - 0	$0_{\perp}0_{\perp}$	0 _ 6	3 8	8
UNIT#	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
		NS, BAILEY, ME	ELEIG	HA					0,7,2,4,2,0,0,4,1,9, F					
	MAHO	NING AVE ,LAK	E MII	TON	,ОН	1 44429			Redacted per ORC 149.43(A)(1)					
INJURIES		EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	NT SEATING POSITION AIR BAG USAGE EJECTION TRAPP					TRAPPED
0 <u>2</u> 4	BY 1	<b>Kent Fire</b>						USED 0 4	DOT-COMPLIANT 0 1			1	_1_	_1_
OL STATE	OPERATOR LICENSE NUMBER REDACTED PER ORC 4501:1-12				E CHAI	RGED	ED LOCAL OFFENSE DESCRIPTION			TION			JMBER	
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	AL(	COHOL TEST YPE VALUE	STATUS	DRUG	RESULT	SELECTUPTO4
. 4 .			BY	1 OTHER DRUG			. 1 .	1	1	1 1	1			
UNIT #	NAME: LAST	FIRST, MIDDLE								DATE OF BIRTH	1	$\vdash$	AGE	GENDER
. 0 . 2 .	HALL	, CHASE, ALEXA	ANDE	R					0 2	2 3 2 0	0   0	6 1	8	M
	STREET, CITY, S	•							200	PHONE - INCLUDE ARE			1-1-1	
2314 I	DEERF	IELD DR ,Deerfie	ld ,OH	I 4441	1				Reda	acted per	ORC	149	9.43(	A)(1)
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	MPLIANT	TON AIR BA	AIR BAG USAGE EJECTION TRAPPED		
<u> 5</u>	BY							0,4	<b>Ш</b> мс не	LMET 0 1		1 1 1		
OLSTATE		LICENSE NUMBER CTED PER ORC 450	11-1_12	OFFENS		RGED	LOCAL	OFFENSE DESC			Marie 1 (1)	CITATION NUMBER		
O H	ENDORSEMEN			331.0		/	X	Driving in Ma		OHOL TEST	276		TEST(S	1
OL CLASS	SELECT UP TO 2			TRACTED				CONDITION	STATUS TYPE VALUE S			STATUS TYPE RESULT SELECT UP TO		
4				1		THER DRUG		1	_1	1	_1_	_ 1	ا ا ا	أسال
UNIT#	NAME: LAST	, FIRST, MIDDLE							DATE OF BIRTH AGE GEND					
											1 1			نـــــا
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTACT	PHONE - INCLUDE ARE	A CODE			
0										<u> </u>	-	ш		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	□ ВОТ-С		TON AIR BA	G USAGE	EJECTION	TRAPPED
OL STATE		LICENSE NUMBER		OFFENS	OFFENSE CHARGED LOCAL OFFENSE DES						ITATION NUMBER			
ORIS	OF ERATOR	LIGENSE NOMBER		CODE CHARGED CODE										
OL CLASS	ENDORSEMEN	T RESTRICTION SELECT	UPTO3 DRIV	VER	ALC	OHOL / DRUG SUSPE	ECTED	CONDITION		OHOL TEST			TEST(S	
	SELECT UP TO 2		DIST	TRACTED	□ A	LCOHOL MAF	RIJUANA		STATUS T	YPE VALUE	STATUS	TYPE	RESULI	SELECTOP 104
					0	THER DRUG	44				بسال		عات ا	لالالا
1 - FATAL	RIES	1-FRONT-LEFT SIDE	1- NOT DEP	IR BAG	1 311	OL CLASS 1-CLASS A	5	OL RESTRIC 1-ALCOHOL INTER		1 - NOT DISTRACTED	CTION	1 - NONE	EST STA	TUS
2 - SUSPECTED	SERIOUS INJURY		2- DEPLOYE			2 - CLASS B		2 - CDL INTRASTAT		2 - MANUALLY OPERAT		2 - TEST	REFUSED	
3 - SUSPECTED 4 - POSSIBLE IN		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYE	ED SIDE ED BOTH FRO	MT / SIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE LE 4 - FARM WAIVER	NSES	DEVICE (TEXTING,			GIVEN, CON PLE / UNU SA	ITAMINATED ABLE
5 - NO APPAREN		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5-NOTAPP		WIT SIDE	(OHI0 = D)		5 - EXCEPT CLASS	BUS	DIALING)  3 - TALKING ON HANDS	-FREE			ULTS KNOWN
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9- DEPLOYI	MENT UNKNO	WN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS	1	COMMUNICATION D 4 - TALKING ON HAND-			GIVEN, RES NOWN	SULTS
1 - NOT TRANSP	ORTED	6 - SECOND - RIGHT SIDE		ECTION	3 10		MENT	7 - EXCEPT TRACTO		COMMUNICATION D	EVICE	ALCO	HOL TES	ST TYPE
/TREATED AT 2 - EMS	I SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	1 NOTEJE			OL ENDORSEM H - HAZMAT	HEN I	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY W ELECTRONIC DEVICE		1 - NONE		
3 - POLICE		8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE		LY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER 7 - OTHER DISTRACTION	M	2 - BL00 3 - URIN		
9 - OTHER / UNK	(NO WN	10 - SLEEPER SECTION	3-TOTALLY 4-NOTAPP			P - PASSENGER N - TANKER		10 - LIMITED TO DAY	LIGHT ONLY	INSIDE THE VEHICL	E	4 - BRE		
SAFETY E 1 - NONE USED	QUIPMENT	OF TRUCK CAB  11 - PASSENGER IN OTHER	70	RAPPED	and the	Q - MOTOR SCOOTER		11 - LIMITED TO EMP		8 - OTHER DISTRACTION THE VEHICLE	N OUTSIDE	5 - OTHE	R	
2 - SHOULDER B	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1- NOTTRA		JE JU	R - THREE-WHEEL MO S - SCHOOL BUS	TORCYCLE	13 - MECHANICAL DE	VICES	9 - OTHER / UNKNOWN		DR 1 - NONE	UG TEST	TYPE
3 - LAP BELT ON		PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	TED BY		T - DOUBLE & TRIPLE	TRAILERS	CONTROLS, OR O	THER	CONDITIO	N	2 - BL00		
	RAINT SYSTEM -	CARGO AREA	3- FREED B	Υ		X - TANKER / HAZMAT		ADAPTIVE DEVI		1 - APPARENTLY NORN 2 - PHYSICAL IMPAIRM		3 - URIN		
FORWARD FA	ACING RAINT SYSTEM –	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	NUN-ME(	CHANICAL MI	ANS	GENDER		15 - MOTOR VEHICLE		3 - EMOTIONAL (E.G., DE		4 - OTHE		
REAR FACING	G	(NON-TRAILING UNIT)				F - FEMALE M - MALE		AIR BRAKES 16-OUTSIDE MIRRO	R	ANGRY, DISTURBED) 4 - ILLNESS		DO-FRANCISCO	TEST RE	ESULT(S)
7 - BOOSTER SE 8 - HELMET US		15 - NON-MOTORIST 99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AID	)	5 - FELL ASLEEP, FAINT	TED,	2 - BARE	BITURATES	
9 - PROTECTIVE	PADSUSED							18-OTHER		FATIGUED, ETC. 6 - UNDERTHE INFLUE			ZODIAZEPINI NABINOIDS	ES
(ELBOW, KNE 10 - REFLECTIVE										OF MEDICATIONS / E /ALCOHOL	RUGS	5 - COCA		
11 - LIGHTING - F	PEDESTRIAN									9 - OTHER/UNKNOWN			TES / OPIOID	S
99 - OTHER / UNK												7 - OTHE 8 - NEG/	:K ATIVE RESUI	LTS

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C	OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER  2						
	UNIT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH   AGE   GENDER					
	02 DITTMER, MICHAEL								1 0 0 5 2 0 0 8 1 5 M					
PAN	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
$\simeq$	3100-3134 0-655-		AN RD ,Deerfi											
ı	NJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED 1		
T	UNIT#	NAME: LAS	T, FIRST, MIDDLE		•			DAT	E OF BIRTH		AGE	GENDER		
	DITTMER, SUZY, J								0,5,0,2,2,0,0,6,1,8,F					
•	ADDRESS: STREET, CITY, STATE, ZIP  1771 NOTMAN RD ,Deerfield ,OH 44111								Redacted per ORC 149.43(A)(1)					
	NJURIES 5	INJURED TAKEN BY	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED MC HELMET 0 4 1 1 1						
-	UNIT#	NAME-1AS	T, FIRST, MIDDLE				<b>U T</b>	DAT	E OF BIRTH		AGE	GENDER		
	02	Christian del Contra	MER, BRIAN,	G				0 5 0	999 OHO 1989	0 7	1,6	M		
PANT	ADDRESS:	STREET, CITY,	STATE, ZIP	ender brekesser vita	5 ****************			CONTACT PHONE						
$\circ$			N RD ,Deerfie	eld ,OH 44			_	Redacte	_					
I	NJURIES 1	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED 1		
-1	UNIT#		T, FIRST, MIDDLE				0,4	2650402000000000000000000000000000000000	E OF BIRTH		AGE	GENDER		
	ONII #	NAME: LAS	I, FIRST, MIDDLE					DATE	E OF BIKIN		AGE	GENDER		
ANT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN														
ō	NJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
ı		ВУ				_		MC HELMET			نـــــا د			
P	3 5174		JRIES		Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG L	SAGE			
	1 - FATA		RIOUS INJURY	1 - NONE US VEHICLE	SED - 1 - FRONT – LEFT SIDE E OCCUPANT (MOTORCYCLE DRIV									
			NOR INJURY	2 - SHOULDI	DER BELT ONLY USED 2 - FRONT - MIDDLE			3 DEPLOYED SIDE						
	4 - POSS	SIBLE INJU	RY	3 - LAP BEL	LT ONLY USED 3 - FRONT - RIGHT SID 4 - SECOND - LEFT SID			DE 4 - DEPLOYED BOTH						
п	5 - NO A	PPARENT	INJURY		DER & LAP BELT USED (MOTORCYCLE PA			ENGER)	SIDE					
		INJURED	TAKEN BY	**	RESTRAINT SYSTEM – 5 - SECOND – MIDDLE RD FACING 6 - SECOND – RIGHT SII			5 - NOT APPLICABLE  1DE 9 - DEPLOYMENT UNKNOWN						
		TRANSPOR		6 - CHILD RI	RESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE									
	2 - EMS		CEINE	7 - BOOSTER	O THIRD MIDNE				1 - NOT EJ	AVAILED A	UN	#SULVER		
	3 - POLI			8 - HELMET	9 - THIRD - RIGHT SID			DE 2 - PARTIALLY FIECT			ED			
	9- OTH	ER / UNKNO	OWN		CTIVE PADS USED 11 - PASSENGER IN OT			O TOTALLY FIED			TED			
		GEN	NDER		KNEES, ETC.) TIVE CLOTHING		O AREA (NON-TE	4-NOTALL CICABLE						
	F - FEMA				G – PEDESTRIAN	12 - PASS	ENGER IN UNE							
	M - MALI U - OTHE	E R/UNKNO	WN	/ BICYCL			O AREA LING UNIT		1 - NOT TR					
	99 - OTHER / UN				VUNKNOWN 14 - RIDING ON VEHICLE			E EXTERIOR 2 - EXTRICATED BY MEANS			Y MECHANICAL			
۱						15 - NON-	MOTORIST		3 - FREED BY NON-MECHAN MEANS		ECHANIC	IICAL		
	NAME: LAS	ST, FIRST, MIDD	LE			77-01112	IN 7 CIVICIO VIIV	DAT	E OF BIRTH		AGE	GENDER		
WITNESS									1 1 1					
MIT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		2411 84		
	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
ESS														
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE	- INCLUDE AREA CO	DE					
١,	NAME	ST, FIRST, MIDD	I.E.					DAT:	E OF BIRTH	<del></del>	AGE	GENDER		
	HAME: LAS	oi, FIKSI, MIDD	LE							, ,	AGE	GENDEK		
WITNESS	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE		DE DE	1 1 1	<u>je d</u>		
>														

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