OHIO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT									LOCAL REPORT NUMBER*					
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION								2.0.2.10.0.0.1.7.9.0.5						
OH-1P OTHER REPORTING AGENCY NAME*							NCIC* HIT/SKIP NUMBER			NUMBER OF UNI				
PRIVATE PROPERTY City of Kent Police							0 6	5 7 0 3	1 - SOLVED	0 3	0	1 98-ANIMAL 1 99-UNKNOWN		
COUNTY* LOCALITY				CRASH DATE /	TIME*		ASH SEVERITY							
6 7 1 3		$\lfloor 1 \rfloor 0 \rfloor 2 \rfloor 8 \rfloor 2 \rfloor 0 \rfloor 2 \rfloor 1 \rfloor / \lfloor 1 \rfloor 2 \rfloor 2 \rfloor 3 \rfloor$					- FATAL - SERIOUS INJURY							
ROUTE TYPE ROUTE N	S	- NORTH L - SOUTH C	OCATION ROAD	NAME			ROAD TYPE	LATITUDE DE	CIMAL DEGREES		SUSPECTED			
		 t	$\mathbf{R}_{\perp}\mathbf{D}_{\perp}$	411 1 3 9	3-MINORIN SUSPECT									
ROUTE TYPE ROUTE N	OUSE #)		ROAD TYPE	LONGITUDE of	- INJURY POSSIBLE									
		L	CT	- 8 ₁ 1 ₁₀ 3 ₁ 2 ₁ 9	2 3 8	5	- PROPERTY DAMAGE ONLY							
REFERENCE POINT 1 - INTERSECTION	DIRECTION FROM REFERENCE	10 10	ROUTE TYPE		ROAD TYPE				INTERSECTION F	ELATE	D			
2 - MILE POST	4 5-500	TH US-F	TERSTATE ROU EDERAL US ROU		HW-HIGHWAY		- ROAD - SQUARE	WITHIN INTE	RSECTION OR ON	APPROA	VCH .			
3-HOUSE #	E-EAS W-WE	T	TATE ROUTE	В		MP-MILEPOST ST - STREET WITHIN INTERCHANGE AREA NUMBER OF						IBER OF APPROACHES		
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASUR 1 - MIL	E	UMBERED COUN	ITY ROUTE I	R - CIRCLE T - COURT	OV - OVAL TE - TERRACE PK - PARKWAY TL - TRAIL ROADWAY								
2,0,0,	ROADWAY DIV	ROADWAY DIVIDED												
	DS													
1 - ON ROADW	ON of FIRST HARM /AY 9 - C	ROSSOVER				H COLLISION/IN 4 - Rear-to-re/		Т	DIRECTION OF TRAVE	· ·		NTYPE		
0 1 2-ON SHOUL			LEY ACCESS	BE	TWEEN O MOTOR	5 - BACKING	- BACKING N - NORTH					1 - DIVIDED FLUSH MEDIAN (< 4 FEET)		
4 - ON ROADS	IDE 12-5	SHARED USE	DE CROSSING PATHS OR	VE	THORES IN	6-ANGLE 2- DIVIDED FLUSH								
5 - ON GORE 6 - OUTSIDE T		FRAILS BIKE LANE				B - SIDESWIPE,			W-WEST			DEPRESSED MEDIAN		
7 - ON RAMP	14-1	TOLL BOOTH		3 * NE.	AD-ON	9 - OTHER / UNK	NUWN	V		(A	NY TYP			
8 - OFF RAMP	99-1	OTHER / UNK	NOWN							9-01	HER/UN	KNOWN		
WORK ZONE RELA	ATED		NORK ZONE TYP NE CLOSURE	PΕ	1	N OF CRASH IN - BEFORE THE 1			CONTOUR	CONDITIO	IS	SURFACE		
WORKERS PRESE	ENT	2 - LA	NE SHIFT/CROS			WARNING SIGN				1		_2_		
LAW ENFORCEME	ENT PRESENT L		ORK ON SHOULD MEDIAN	ER	1 27 1 1 1 1 1 1	ADVANCE WARNING AREA 1 - STRAIGHT LEVEL 1 - DRY TRANSITION AREA 2 - STRAIGHT GRADE 2 - WET				1 - DRY		1 - CONCRETE 2 - BLACKTOP,		
ACTIVE SCHOOL 2	ZONE	4 - IN 5 - OT	TERMITTENT OR	MOVING WOR		- ACTIVITY ARE - TERMINATION			3 - CURVE LEVEL	3 - SNOW		BITUMINOUS, ASPHALT		
		- 1				TERMINATION	AREA	-	4 - CURVE GRADE	4 - ICE		3 - BRICK/BLOCK		
1 - DAYLIGHT	CONDITION		1-CLE	WEATI EAR	1ER 6 - SNOW				9 - OTHER/UNKNOWN	5 - SAND, MUD, D OIL, GRAVEL	RT,	4- SLAG, GRAVEL,		
1 2 - DAWN/DUSI		0	0 1 2-CLC	YOU	7 - SEVERE	CROSSWINDS				6 - WATER (STAN	DING,	STONE 5 - DIRT		
74747	HTED ROADWAY ADWAY NOT LIGHT	ED	3 - F00 4 - RAI			G SAND, SOIL, D IG RAIN OR FRE				MOVING) 7 - SLUSH		9 - OTHER/UNKNOWN		
5 - DARK – UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER 9 - OTHER / UNKNOWN										9 - OTHER/UNKNO	WN			
NARRATIVE														
Unit 1 was	.14.							Indicate the north direction with an "N" on the						
	u 10						V	compass diagram.						
stop for Unit														
traffic. Unit	1 struck U	nit 2 an	d pushed	l it into										
the rear of U	nit 3 which	ı was al	so stoppe	d in										
traffic.	*******			***************************************		1						Ì		
	ESUMMENT													
	CERTIFICATION OF THE PERSON OF													
							Pigots or							
							Net Fo calls							
							10%							
			7///		10000									
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARI							ME		SCENE CLEARED D	ATE/TIME	Ri	EPORT TAKEN BY		
$ \begin{bmatrix} 1 & 0 & 1 & 2 & 1 & 2 & 1 & 2 & 1 & 1 & 1 & 1$						W 201102					POLICE AGENCY			
TOTALTIME	TOTAL TIME OTHER TOTAL OFFICER'S NAME*						CHECKED BY OFFICER'S NAME*					MOTORIST		
ROADWAY CLOSED INV	Darran, Benjamin							ort, Jas	Jason M SUPPLEMENT					
0 0 0 0 0 6 0 0 8 5 2 2 6						^	_ 2		BY OFFICER'S BADGE NUMBER* TO AN EXISTING REPORT SENT					
								- 1 4	1 0		1			

HSY8304 OH1U 1/19 [760-0820]

HSY8304 OH1U 1/19 [760-0820]

LOCAL REPORT NUMBER

	T						0,0,1,7,9,0,5			
UNIT #		ST, MIDDLE (SAME AS DRIVER))	OWNER PHONE	: INCLUME AFEA CODE (X SAME AS DRIVER		DAMAGE			
	ADDRESS: STREET, CITY, STATE					DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE				
≥ 1163 BF	RANDI DR SW ,STR.		3 2 - MINOR DAMAGE 4 - DISABLING DAMAGE							
COMMER	ICIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		COMMERCIAL CAI	RIER PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
	1			المسلسا	1111	DAMAGED AREA(S)				
LP STATE		VEHICL	INDIC	ATE ALL THAT APPLY						
	HHS1704		D E 4 A B 0 9 4 Insurance policy #	8,6,1,2,0, COL		11 12	11 12 1			
INSUR VERIE	TED AMERICAN SE	1 7	WNP9612845	GRN	AVEO	10 12	12			
	TYPE OF USE		US DOT #	PANY NAME	10 2	10 11 1				
СОММ	ERCIAL GOVERNMENT	IN EMERGENCY RESPONSE				9 9 3	3 9 9 3			
INTER	RLOCK	#UCCUPANIS	HICLE WEIGHT GVWR/GCWR 1 - <10K LBS.	MATERIAL	RDOUS MATERIAL - CLASS # PLACARD ID #		8 4			
EQUII	E HIT/SKIP UNI	T 0 1 1	2 - 10,001 - 26K LB	RELEASEI PLACARD)	8 6 4	8 7 5 4			
-	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS.	18-LIMO (LIVERY VEHICLE	3 0000000000000000000000000000000000000	7 6 5	12 7 6			
	2 - PASSENGER VAN (MINIVAN)		13-SNOWMOBILE	19-BUS (16+ PASSENGERS		10	12			
	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST		10 2			
OKITTIF	4 - PICK UP 10 - MOPED OR MOTORIZES 5 - CARGO VAN BICYCLE		15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26-BICYCLE	9 (9 = 3			
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT 17-MOTORHOME	22 - ANIMAL WITH RIDER OF ANIMAL-DRAWN VEHIC		7.	8 4 7			
₽ , 00,	# OFTRAILING UNITS	(ATV / UTV)			77 - SHANDON BON HEITSKIF	8	8			
VEHICA 		TONOMOUS	A HARITANA			11 12	6 11 12			
> _	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMAT 4 - HIGH AUTOMATION	TON 9 - UNKNOWN	10 11 12 1	10 12 2			
2	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		10 2	10 2			
	1 - NONE	MODE LEVEL	11 CIDE	77 61817		9 9 3	3 9 9 3			
0,1,	0 7434	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11-FIRE 12-MILITARY	16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 5 7	8 4 7			
SPECIAL	2 C) COTRONIC DIOC CHARING		13-POLICE	18 - SNOW REMOVAL	77-01 TER/ UNKNOWN		6			
FUNCTIO	N 4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19-TOWING		6	6 5			
	5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATR	DL		12 12 12			
10:1:	1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOT /NOT APPLICABLE MOTOR VEHICLE		5 - INTERMODAL CONTAINER CHASSIS	B - POLE	12 - CONCRETE MIXER	12				
CARGO	2 - BUS	4 - LOGGING	/ CLOCOULLIEND COED DOV	9 - CARGOTANK 10 - FLAT BED	13-AUTOTRANSPORTER 14-GARBAGE/REFUSE	288.0				
BODY TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99-OTHER/UNKNOWN		g = 3 9 T 3 9 ⊕ 3			
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTORTROUBLE	99-OTHER / UNKNOWN		00			
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10-DISABLED FROM PRIOR		6				
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6			
		3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLA	ND 12-FIRST RESPONDER	☐ - NO DAMAGE [01 - UNDERCARRIAGE [14]			
NON-MOTORIS	CROSSWALK T 2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	DACCHIAI V		AT INCIDENT SCENE	TOP [13]	- ALL AREAS [15]			
LOCATION AT IMPACT	CROSSWALK	5 -TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99-OTHER/UNKNOWN	П-имп	NOT AT SCENE [16]			
		1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13-NEGOTIATING A CURVE	18-APPROACHING		200			
4	2 - NON-COLLISION 2 - BACKING		B - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR A FAMILIA AMELIAN M		L POINT OF CONTACT			
4	3-STRIKING	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	0 - NO DAMAGE 14 - UNDERCARRIAGE 0 - 0 - 6 - 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCE				
ACTION	ACTION 4- STRUCK PRE-CRASH 4 - OVERTA 5- BOTH STRIKING ACTIONS 5 - MAKIN		10 - PARKED 11 - SLOWING OR STOPPED	15 - WALKING, RUNNING, JOGGING, PLAYING	20-OTHER NON-MOTORIST 21-Standing Outside	DIAGRA				
	& STRUCK 6 - MAKING LEFTTURN		IN TRAFFIC	16 - WORKING	DISABLED VEHICLE	13-TOP				
9-OTHER/UNKNOWN			12-DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC			
		7 - LEFT OF CENTER	BABUSE ASSESSED	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
Λ.		8 - FOLLOWING TOO CLOSE / ACD/ 9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
O 1	4 - RAN STOP SIGN	10-IMPROPER PASSING	!LLEGALLY 15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLIN	G/ ROADWAY	2 2 - TW0-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
G CIRCUMSTANCE	a .	11 - DROVE OFF ROAD	74 100001041111	SPILLING 20 - IM PROPER CROSSING	99 - OTHER IMPROPER ACTION	# TUD				
SEUIIENO	6-IMPROPERTURN E OF EVENTS	12-IMPROPER BACKING			S. SENSON MA	# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
SEQUENCE SEQUENCE	FOL EACULD		NON-COLLISION			2	2 - INVOLVED-ACTIVE CROSSING			
1 2 0		6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
		7 - SEPARATION OF UNITS B - RAN OFF ROAD RIGHT	TRAVEI	17 - ANIMAL — FARM 18 - ANIMAL — DEER	EQUIPMENT 23-STRUCK BY FALLING,	UNIT / NON	-MOTORIST DIRECTION			
2		9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL - OTHER	SHIFTING CARGO OR	, 110	1 - NORTH 5 - NORTHEAST			
	5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN	13-OTHER NON-COLLISION 14-PEDESTRIAN	23 - MOTOR VEHICLE IN TRANSPORT	ANYTHING SET IN MOTION By a motor vehicle	A	2 - SOUTH 6 - NORTHWEST			
3	LOSS OR SHIFT		15 DC2 11 01/01 5	21 - PARKED MOTOR VEHICL	24-OTHER MOVABLE OBJECT	FROM 4 TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST			
X	25 - IMPACT ATTENUATOR	COLLISION 31 - GUARDRAIL END	N WITH FIXED OBJECT		En LUNBY TOUR ALL THE		9 - OTHER / UNKNOWN			
4	/ CRASH CUSHION	32 - PORTABLE BARRIER		43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	HAIT COPES				
	STRICTURE	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED			
5	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	40 UTO ITY BOLD	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	0 0 0	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR			
	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE	48 - TREE	54-OTHER FIXED OBJECT	DOCTED COLED	3 - UNDETERMINED			
0		36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99-OTHER/UNKNOWN	POSTED SPEED	2 - DUART FUNDINGS			
1	FIRST HARMFUL EVEN	1	ARMFUL EVENT			2 5				
HSY8304 O	H1U 1/19 [760-0820]	musi n	MAN OF EACH				DACE 4			

CHIO DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER									
										12,0,2,1,-,0,0,0,1,7,9,0,5,							
		NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER							
	1	AKAINYAH, LAUREN, NELLY							<u> </u>	0 9 / 2 6 / 2 0 0 1 2 0 F							
484	ADDRESS: STREET, CITY, STATE, ZIP 4840 RIDGERUN DR, COLUMBUS, OH 43229									CONTACT	PHONE - INCLUDE AREA (CODE					
S IMIU		TAKEN	EMS AGENCY (NAME)		INJURED TA	KEN TO	MEDICAL FACILITY	(NAME, CITY	SAFETY EQUIPMENT	T DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED							
	TATE	BY	TOTALE NUMBER	<u> </u>	0.4					MC HE	LMET 0 1	11	1 1 1				
ä		UPERATORI	LICENSE NUMBER		OFFENSE CHARGED LOCAL OFFENSE DES								CITATION NUMBER				
OF C	H	ENDORSEMENT	RESTRICTION SELECTION	TUD TO A BRID				Maximu	-	d Limits	23707						
02.0	LAGG	SELECT UP TO 2	RESTRICTION SELEC		TRACTED			CONDITION	STATUS T		STATUS TY	PE RESULT	SELECT UP TO 4				
4	<u> </u>				1 OTHER DRUG			1	1	1	. 1 1	L , "					
UNI	Π#	NAME: LAST,	•								DATE OF BIRTH		AGE	GENDER			
0	_2	CRAIC	G, ANTHONY, B	RIAR						0 8 / 0 8 / 1 9 9 4 2 7 M							
≓		STREET, CITY, ST	·							CONTACT	PHONE - INCLUDE AREA O						
-			PECT ST ,Rootst	own ,O	H 442	42											
Ź	- 1	TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPM					DOT-Co	MPLIANTI	AIR BAG USAGE EJECTION TRAPPED					
N		ВУ							0_4	☐ MC HE	LMET 0 1						
OF 21		OPERATOR L	ICENSE NUMBER		OFFENSE	CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITATION	NUMBER				
OL C	H	ENDORSEMENT	DECEMBER OF THE PROPERTY OF TH														
- OL G	LASS	SELECT UP TO 2	RESTRICTION SELECT		VER ALCOHOL / DRUG SUSPECTED CONDITION TRACTED ALCOHOL MARLIUANA					ALCOHOL TEST DRUG TEST(S) STATUS TYPE VALUE STATUS TYPE RESULT SELECT UPTO 4							
4					1 OTHER DRUG												
UNI	Τ#	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER						
_0	<u>_3</u>	3 DOWNIN, ASHLEY, KAITLYN									1 2 / 1 3 / 2 0 0 1 1 9 F						
ADDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE								
	63 B	RANDI	DR SW ,STRAS	BURG	OH 4	4468	80										
Z	- 1	TAKEN	EMS AGENCY (NAME)	_	INJURED TAI	KEN TO	MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED							
-		BY			USED 0 4					MC HELMET 0, 1 1 1 1							
OL ST		OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL OFFENSE DESCRIPTION CODE					RIPTION CITATION NUMBER							
S OF CF	.A55	SELECT UP TO 2	RESTRICTION SELECT		RACTED [_	DHOL / DRUG SUSPE	CTED RIJUANA	CONDITION	STATUS TY	OHOL TEST PE VALUE :	DRI STATUS TYP	UG TEST(S) PE RESULT	SELECT UP IO 4			
4					1 . [_	THER DRUG		1 ,	1	1	1 1					
Mark Control	INJU	RIES	SEATING POSITION	А	IR BAG		OL CLASS		OL RESTRIC		DRIVER DISTRACT		TEST STA				
1 - FATAL 2 - SUSP		ERIOUS INJURY	1-FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPL 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER	ES FORMULE P. C.	1 - NOT DISTRACTED		ONE GIVEN				
D1025440		AINOR INJURY	2 - FRONT - MIDDLE	3 - DEPLOYE					2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATING ELECTRONIC COMMUNI	ICATION 3 TE	EST REFUSED EST GIVEN, CON	TAMINATED			
4 - POSSI			3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		ED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)			4 - FARM WAIVER		DEVICE (TEXTING, TYP DIALING)	21	SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN					
10876	(MOTORCYCLE PASSENGER) 9-DEPLOY				MENT UNKNOWN 5 - M/C MOPED ONLY				5 - EXCEPT CLASS / 6 - EXCEPT CLASS /		3 -TALKING ON HANDS-FR COMMUNICATION DEVI	££.	5 - TEST GIVEN, RESULTS				
AND DESCRIPTION OF THE PARTY OF	OTTRANSPORTED 6-SECOND -RIGHT SIDE				6 - NO VALID OL & CL				& CLASS B BUS 7 - EXCEPT TRACTO	D TOAN CO	4 - TALKING ON HAND-HEL COMMUNICATION DEVI	EVICE					
/TRE/ 2 - EMS	TED AT SCENE 7-THIRD - LEFT SIDE (MOTOPCYCLE SIDE CAR)			Exercise manner	JECTION OLENDORSEMENT 8.				8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	COHOL TES	TTYPE				
3 - POLIC	ICE 8-THIRD - MIDDLE 2 - PARTIA		1 - NOT EJEC 2 - PARTIALL					RESTRICTIONS 9 - LEARNER'S PER	MIT	6 - PASSENGER		1 - NONE 2 - BLOOD					
9-OTHE	9-OTHER/UNKNOWN 9-THIRD - RIGHT SIDE 3-TOTALLY						RESTRICTIONS		7 - OTHER DISTRACTION		3 - URINE						
SAFE	SAFETY EQUIPMENT OF TRUCK CAB 4-NOT APPL			II - IMINER			10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT		INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE		4 - BREATH E 5 - OTHER						
LOCATION OF	2 CHOLD DED BELL CHINA HELD			RAPPED R-THREE-WHEEL MOTORCYCLE 12-				12 - LIMITEO - OTHER		THE VEHICLE 9 - OTHER / UNKNOWN		DRUG TEST TYPE					
PROBLÉGICO	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOTTRA 3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA			TEU BA				13 - MECHANICAL DE (SPECIAL BRAKE	S, HAND	ND .		I - NONE					
12012-1-10	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA		MECHANICAL MEANS			T DOUBLE & TRIPLE TRAILERS X-TANKER / HAZMAT		ADAPTIVE DEVI			E-HT IN STATE	2 - BLOOD 3 - URINE					
FORW	FORWARD FACING 13-TRAILING UNIT		3 - FREED BY NON-MEC	HANICAL MEAN	NS	GENDER		14 - MILITARY VEHIC	ES ONLY 2 - PHYSICAL IMPAIRMENT		4-OTHER						
	RESTRA FACING	ESTRAINT SYSTEM - 14 RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	WITHOUT 3 - EMOTIONAL (E.G., DEPRES ANGRY DISTURBED)		DRUG TEST RESULT(S)						
7 - B00S1	TER SEA	R SEAT 15 - NON-MOTORIST				M - MALE U - OTHER / UNKNOWN		16 - OUTSIDE MIRRO 17 - PROSTHETIC AID	4 - ILLNESS		1 - AN	1 - AMPHETAMINES					
8 - HELM 9 - PROTE	IET USED 99 - OTHER / UNKNOWN ECTIVE PADS USED					O -VINCK/UNKNUWN	THER / UNKNOWN 1			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		2 - BARBITURATES 3 - BENZODIAZEPINES					
(ELBO	BOW, KNEES, ETC.)									6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUG	4.04	4 - CANNABINOIDS					
PARTY NAMED IN	LECTIVE CLOTHING HTING – PEDESTRIAN									/ALCOHOL 5-COCAINE			CAINE TATES / OPIOIDS				
/ BICY	CYCLE ONLY IER / UNKNOWN										OTHER / DHRIND WIT	7-0T					
33-01E	VI DIALI	IV MIN										B - NE	GATIVE RESUL	TS			