| OFF DEPARTMENT TRAFFIC CRASH   | IC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT |                                  |  |   |  | LOCAL REPORT NUMBER*          |                              |  |  |
|--|--|----------------------------------|--|---|--|-------------------------------|------------------------------|--|--|
| PHOTOS TAKEN OH-2 OH-3   | TOCAL INCODMATION  |                                  |  |   | [2,0,2,2,-0,0,0,1,9,9,0,1,]  |                               |                              |  |  |
| SECONDARY CRASH  | REPORTING AGENCY NAME*  City of Kent Poli                      |                                  | NCIC*  | HIT/SKIP                                | NUMBER OF UNITS  | UNIT IN ERROR                 |                              |  |  |
| PRIVATE PROPERTY   | 0  | $\underline{6,7,0,3}$            | 1 - SOLVED   | <u>_0_2</u> _                           | 0 2 98 - ANIMAL  |                               |                              |  |  |
| COUNTY* LOCALITY* LOCATION: CIT  |  |                                  | CRASH DATE /T  |   | CRASH SEVERITY<br>1 - FATAL  |                               |                              |  |  |
| 6 7 1 2-VILLAGE Kent   |  |                                  | 11128202021  |   | ─ 2 - SERIOUS INJURY   |                               |                              |  |  |
| ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - E-AST   | HORNING  |                                  |  | ROAD TYPE                               | LATITUDE DEC   |                               | SUSPECTED  3 - MINOR INJURY  |  |  |
| ** ************************************  |  | $R_1D_1$                         | 4,1,0,1,4,0,   |   | SUSPECTED  |                               |                              |  |  |
| ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST L - W - WEST                               | USE #)   | ROAD TYPE                        | LONGITUDE DE   |   | 4 - INJURY POSSIBLE<br>5 - PROPERTY DAMAGE   |                               |                              |  |  |
|  | LOOP   |                                  |  | $R_{\perp}D_{\perp}$                    | $-8_{1}$   | $1 \ 2 \ 0$                   | ONLY                         |  |  |
| REFERENCE POINT DIRECTION  1 - INTERSECTION FROM REFERENCE IR  | ROUTE TYPE - INTERSTATE ROUTE(TP)                              | AL - ALLEY I                     | ROAD TYPE<br>HW-HIGHWAY  | RD - ROAD                               | l  | NTERSECTION RE                |                              |  |  |
| 1 2-MILE POST S-SOUTH US   | - FEDERAL US ROUTE   |                                  |  | SQ - SQUARE                             | 1 <u> </u>   |                               |                              |  |  |
| W-WEST SR  | STATE ROUTE  | BL - BOULEVARD I                 | MP-MILEPOST ST - STREET WITHIN INTERCHANGE AREA NUMBER OF APPRO OV - OVAL TE - TERRACE |   |  |                               |                              |  |  |
| FROM REFERENCE   UNIT OF MEASURE   | NUMBERED COUNTY ROUTE  |                                  | PK - PARKWAY TL - TRAIL ROADWAY  |   |  |                               |                              |  |  |
| 2-FEET   | - NUMBERED TOWNSHIP<br>ROUTE                                   |                                  | PI - PIKE<br>PL - PLACE  | WA - WAY                                | ROADWAY DIV  | IDED                          |                              |  |  |
| LOCATION OF FIRST HARMFUL EVEN   | IT   N   | MANNER OF CRASH                  |  | ACT                                     | DIRECTION OF TRAVE   |                               | IEDIAN TYPE                  |  |  |
| 1 - ON ROADWAY 9 - CROSSOVE  | 7 1-1  | NOT COLLISION 4                  | - REAR-TO-REAR   |   | N - NORTH  | 1 - DIVI                      | DED FLUSH MEDIAN             |  |  |
| . () . [   | 7,455,400,000,000  | LWO MOTOR                        | - BACKING<br>- ANGLE   |   | S - SOUTH<br>E - EAST  | 11 1 1                        | FEET ) DED FLUSH MEDIAN      |  |  |
| 4 - ON ROADSIDE 12-SHARED U  | SE PATHS OR  | TRANSPORT 7                      | - SIDESWIPE, SA  |   | W - WEST   | (≥4                           | FEET ) DED, DEPRESSED MEDIAN |  |  |
| 6-OUTSIDE TRAFFIC WAY 13-BIKE LAN  | 3-1  |                                  | - SIDESWIPE, OP<br>- OTHER / UNKNO   |   |  | 4 - DIVI                      | DED, RAISED MEDIAN           |  |  |
| 7 - ON RAMP 14-TOLL BOO'<br>8 - OFF RAMP 99-OTHER / U  | TH   |                                  |  |   |  | Į.                            | YTYPE)<br>ER/UNKNOWN         |  |  |
|  | WORK ZONE TYPE   | LOCATION                         | N OF CRASH IN W  | ORK ZONE                                | CONTOUR  | CONDITIONS                    | SURFACE                      |  |  |
| <del>  </del>  | · LANE CLOSURE   | 1-                               | BEFORE THE 1ST   |   | 1 1  | 2                             | 2 ,                          |  |  |
|  | - LANE SHIFT/CROSSOVER<br>- WORK ON SHOULDER                   | 1                                | WARNING SIGN<br>ADVANCE WARN   | ING AREA                                | 1 - STRAIGHT LEVEL   | 1 - DRY                       | 1 - CONCRETE                 |  |  |
| LAW ENFORCEMENT PRESENT  | OR MEDIAN<br>- INTERMITTENT OR MOVING W                        |                                  | TRANSITION ARI<br>ACTIVITY AREA  | ĒΑ                                      | 2 - STRAIGHT GRADE   | 2-WET                         | 2 - BLACKTOP,                |  |  |
| l <del>,                                   </del>  | - INTERMITTENT OR MOVING W<br>- OTHER                          | 1                                | TERMINATION A  | REA                                     | 3 - CURVE LEVEL  | 3 - SNOW                      | BITUMINOUS,<br>ASPHALT       |  |  |
| LIGHT CONDITION  | WE   | I<br>Ather                       |  | *************************************** | 4 - CURVE GRADE 9 - OTHER/UNKNOWN  | 4 - ICE<br>5 - SAND, MUD, DII | 3 - BRICK/BLOCK              |  |  |
| 1 - DAYLIGHT   | 1-CLEAR  | 6 - SNOW                         |  |   | , united the   | OIL, GRAVEL                   | STONE                        |  |  |
| 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY   | 1014 2-CLOUDY<br>3-FOG, SMOG, SM                               | 7 - SEVERE :<br>10KE 8 - BLOWING | CROSSWINDS<br>G SAND, SÕIL, DIE  | RT, SNOW                                |  | 6-WATER (STAND<br>MOVING)     | . 3-0161                     |  |  |
| 4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZI   |  |                                  | G RAIN OR FREE   | IN OR FREEZING DRIZZLE                  |  |                               | 9 - OTHER/UNKNOWN            |  |  |
| 5 - DARK - UNKNOWN ROADWAY LIGHTING<br>9 - OTHER / UNKNOWN   | 5 - SLEET, HAIL  | 99 - OTHER /                     | MINIOWN  |   |  | 9 - OTHER/UNKNO               | WN                           |  |  |
| NARRATIVE  |  |                                  |  | ***:                                    | <u> </u>   |                               | Indicate the north           |  |  |
| UNIT 1 WAS TRAVELING EA  | STROUND ON   |                                  |  |   |  | \ <                           | direction with an "N" on the |  |  |
| HORNING RD. UNIT 2 WAS   |  |                                  |  |   |  | L                             | compass diagram.             |  |  |
|  |  | 10 FF                            |  |   |  |                               | <u> </u>                     |  |  |
| WESTBOUND OFF LOOP R   |  |                                  |  |   |  |                               |                              |  |  |
| UNIT 2 FAILED TO YIELD   |  | Y                                |  | HORNING RD                              |  |                               |                              |  |  |
| TRAFFIC STRIKING UNIT  | 1.   |                                  |  |   | Unit_1   |                               | NOT TO SCALE                 |  |  |
|  |  |                                  |  |   |  | 455                           | _                            |  |  |
|  |  |                                  |  |   |  | P RD                          |                              |  |  |
|  |  |                                  | :  |   |  |                               |                              |  |  |
|  |  |                                  | -  |   |  |                               |                              |  |  |
|  |  |                                  |  |   | ,  |                               |                              |  |  |
|  |  |                                  |  |   |  |                               |                              |  |  |
|  |  |                                  |  |   |  |                               |                              |  |  |
| CRASH REPORTED DATE / TIME   | DISPATCH DATE / TIME   | AR                               | RIVAL DATE /TII  | ME                                      | SCENE CLEARED  | DATE / TIME                   | REPORT TAKEN BY              |  |  |
| 1,1,2,8,2,0,2,2,/,1,0,2,8,1,1,1  |  | 8 1128                           | 2,0,2,2,/  | [1,0,3,3]                               | 1, 1, 2, 8, 2, 0, 2  | 12/110/5/8                    | MOTORIST                     |  |  |
| TOTAL TIME OTHER TOTAL OFFICER'S NAME* ROADWAY CLOSED INVESTIGATION TIME MINUTES Strebel, Tyler Austin |  |                                  |  |   | DFFICER'S NAME*  |                               |                              |  |  |
| MITM   | OFFICER'S BADGE NUMBER*  |                                  |  | ,                                       | TASON M  (ED BY OFFICER'S BADGE NUMBER*  SUPPLEMENT (CORRECTION ON ADDITION OF |                               |                              |  |  |
| 0,0,0,0,1,0,0,4  | 1  |                                  |  |   | 2   8  |                               |                              |  |  |

LOCAL REPORT NUMBER

 $\begin{bmatrix} 2 & 0 & 2 & 2 & -1 & 0 & 0 & 1 & 1 & 9 & 9 & 0 & 1 \end{bmatrix}$ 

| UNIT # OWNER NAME: LAST, FIRST, MIDDLE ( X) SAME AS DRIVER) |   | OWNER PHONE: INCLUDE AREA CODE (TY) SAME AS TIDIVED |  | DAMAGE  |   |                                       |   |  |  |
|---|---|---|--|---|---|---------------------------------------|---|--|--|
| OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) |   |   |  |   | DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE     |                                       |   |  |  |
| 3409 PRANGE DR ,Cuyahoga Falls ,OH 44223                    |   |   |  |   |   | 2 - MINOR DAMAGE 4 - DISABLING DAMAGE |   |  |  |
| COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP         |   |   | COMMERCIAL CARRIER F   | HONE: INCLUDE AREA CODE                           | 9 - UNKNOWN                                     |                                       |   |  |  |
| LP STATE   LICENSE PLATE # VEHICLE IDENTIFICATION #         |   |   | VEHICLE YEAR VEHICLE MAKE  |   | DAMAGED AREA(S) INDICATE ALL THAT APPLY         |                                       |   |  |  |
|   | HVL6126   | 5 NP D H4 A   | $\mathbf{E}_{0}$ , $\mathbf{F}_{1}$ , $\mathbf{H}_{0}$ , $7_{1}$ , $5_{1}$   | 1.9.5 2 0 1 5                                     | Hyundai   | 12                                    | 12  |  |  |
| INSURAN<br>VERIFIE  | INSURANCE COMPA   |   | SURANCE POLICY #   | COLOR   | VEHICLE MODEL                                   | 11 12                                 | 11 12   |  |  |
| LEES VERIFIE  | TYPE OF USE   |   | IC0109958997104<br>US DOT #  | RED TOWED BY: COMPANY                             | ELANTRA   | $\frac{10}{2}$                        | 10 11 1 2   |  |  |
| Соммег  |   | IN EMERGENCY LL                                     | 1 1 1 1  |   |   | 9 3 3                                 | 9 9 3   |  |  |
| INTERL  | .00K NOO.   | #OCCUPANTS VEH                                      | ICLE WEIGHT GVWR/GCWR<br>1 - ≤10K L8S.   |   | JS MATERIAL<br>Lass # Placard ID #              | 8 4 7                                 |   |  |  |
| INTERL DEVICE EQUIPE  | ED HIT/SKIP UNIT  | , <b>0</b> , <b>1</b> ,                             | 2 - 10,001 - 26K LBS.<br>  | RELEASED PLACARD                                  | 41 1 1 1 1                                      | 7 6                                   | 12 7 6  |  |  |
|   | 1 - PASSENGER CAR   |   |  |   | 23 - PEDESTRIAN / SKATER                        | 6 11                                  | 1 6   |  |  |
|   | 2 - PASSENGER VAN (MINIVAN)                               |   |  | 19-BUS (16+ PASSENGERS)                           | 24 - WHEELCHAIR (ANY TYPE)                      | 10                                    | 1 1 2   |  |  |
| UNIT TYPE   | 3 - SPORT UTILITY VEHICLE 4 - PICK UP                     | 9 - AUTOCYCLE<br>10-moped or motorized              |  | 20-OTHER VEHICLE<br>21-Heavy Equipment            | 25 - OTHER NON-MOTORIST<br>26 - BICYCLE         | 9                                     | 3 3   |  |  |
|   | 5 - CARGO VAN   | BICYCLE 11 - ALL TERRAIN VEHICLE                    | 16 - FARM EQUIPMENT<br>17 - MOTORHOME  | 22 - ANIMAL WITH RIDER OR<br>ANIMAL-DRAWN VEHICLE | 27 -TRAIN                                       | <del>/</del> /                        |   |  |  |
| <u> </u>  | 6 - VAN (9-15 SEATS) # oftrailing units                   | (ATV / UTV)   | 17 - MOTOKHOME   | MINNE MARIN TERROLE                               | 99 - UNKNOWN OR HIT/SKIP                        | 8                                     | 6   |  |  |
|   |   | rovotau*  | A NA 107A11477A11  | a adultitati tijaani                              | A HUMANOPU                                      | 11 12                                 | 6 11 12 1   |  |  |
|   | WAS VEHICLE OPERATING IN AUT<br>MODE WHEN CRASH OCCURRED? |   |  | 3 - CONDITIONAL AUTOMATION<br>4 - HIGH AUTOMATION | A - NUKUOMU                                     | 10 1 2                                | 10 1 2  |  |  |
|   | 1-YES 2-NO 9-OTHER/UNKN                                   | OWN AUTONOMOUS                                      | 2 - PARTIAL AUTOMATION   | 5 - FULL AUTOMATION                               |   | 9 10 2 2 3                            | 9 10 2 3  |  |  |
|   | 1 - NONE  | 6 - BUS - CHARTER/TOUR                              | 11 - FIRE  | 16-FARM   | 21 - MAIL CARRIER                               | 8 4 -                                 |   |  |  |
| $\lfloor 0 \rfloor 1$                                       |   | 7 - BUS - INTERCITY                                 |  | 17 - MOWING                                       | 99 - OTHER / UNKNOWN                            | 8 7 6 5 4                             | 8 7 5 4   |  |  |
|   | 3 - ELECTRONIC RIDE SHARING<br>4 - SCHOOL TRANSPORT       | 9 - BUS - OTHER                                     |  | 18-SNOW REMOVAL<br>19-TOWING                      |   | 7 6 5                                 | 7 6 5   |  |  |
|   | 5 - BUS - TRANSIT/COMMUTER                                | 10-AMBULANCE  | 15 - CONSTRUCTION EQUIPMENT  | 20 - SAFETY SERVICE PATROL                        |   |                                       | 12 12 12  |  |  |
| $0_{1}1_{1}$  | 1 - NO CARGO BODYTYPE<br>/NOT APPLICABLE                  | 3 - VEHICLETOWING ANOTHER MOTOR VEHICLE             | ALLANDIN   | 8 - POLE  | 12 - CONCRETE MIXER                             | 12                                    |   |  |  |
| \   |   | 4 - LOGGING   | / 0400014 UCNO 2055 PAV  | 9 - CARGO TANK<br>10-FLAT BED                     | 13 - AUTO TRANSPORTER<br>14 - GARBAGE/REFUSE    | AMR.                                  |   |  |  |
| TYPE  |   |   | T ASSESSMENT AND LOSS OF THE PARTY OF THE PA | 11-DUMP   | 99 - OTHER / UNKNOWN                            |                                       | - 3 9 <b>1 1</b> 3 9 <b>8 3</b> 3 <b>1</b> 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 |  |  |
|   |   | 4 - BRAKES  |  | 9 - MOTOR TROUBLE                                 | 99-OTHER/UNKNOWN                                | 6                                     |   |  |  |
|   |   | 5 - STEERING<br>6 - TIRE BLOWOUT                    | 8 - TRAILER EQUIPMENT<br>DEFECTIVE   | 10-DISABLED FROM PRIOR<br>ACCIDENT                |   |                                       | 6 6 6   |  |  |
|   |   |   | 6 - BICYCLE LANE   | 9 - MEDIAN/CROSSING ISLAND                        | 12-FIRST RESPONDER                              | - NO DAMAGE [ 0                       | ]   |  |  |
|   | CROSSWALK   | 3 - INTERSECTION - OTHER<br>4 - MIDBLOCK - MARKED   |  | 10-DRIVEWAY ACCESS                                | AT INCIDENT SCENE                               | □-TOP [13]                            | -ALL AREAS [ 15]  |  |  |
| LOCATION  |   | CROSSWALK  5 - TRAVEL LANE - OTHER LOCATION         |  | 11 - SHARED USE PATHS OR<br>TRAILS                | 99-OTHER/UNKNOWN                                | □-unit:                               | IOT AT SCENE [16]   |  |  |
| AT IMPACT   |   | 1 - STRAIGHT AHEAD                                  | 7 - MAKING U-TURN  | 13 - NEGOTIATING A CURVE                          | 18-APPROACHING                                  |                                       |   |  |  |
| A   | 2 - NON-COLLISION 0 1                                     | 2 - BACKING   |  | 14-ENTERING OR CROSSING                           | OR LEAVING VEHICLE                              | INITIAL<br>0 - NO DAMAGE              | POINT OF CONTACT  14 - UNDERCARRIAGE  |  |  |
|   | 3-51KIKING  | 3 - CHANGING LANES<br>4 - Overtaking/passing        | 9 - LEAVING TRAFFIC LANE<br>10 - PARKED  | SPECIFIED LOCATION  15 - WALKING, RUNNING,        | 19 - STANDING<br>20 - Other Non-Motorist        | 0,1, 1-12 - REFER TO                  | UNIT 15-VEHICLE NOT AT SCENE  |  |  |
| 7217014   | 5 - BOTH STRIKING ACTIONS                                 | 5 - MAKING RIGHT TURN                               | 11 - SLOWING OR STOPPED  | JOGGING, PLAYING                                  | 21 - STANDING OUTSIDE                           | DIAGRAN<br>13-TOP                     | 99 - UNKNOWN  |  |  |
|   | & STRUCK<br>9 - OTHER / UNKNOWN                           | 6 - MAKING LEFTTURN                                 | IN TRAFFIC<br>12 - DRIVERLESS  | 16-WORKING<br>17-Pushing Vehicle                  | DISABLED VEHICLE 99 - OTHER / UNKNOWN           |                                       | DAFFIG  |  |  |
|   | 1-NONE  | 7 - LEFT OF CENTER                                  |  | 17 - VISION OBSTRUCTION                           | 21 - LYING IN ROADWAY                           | TRAFFICWAY FLOW                       | RAFFIC TRAFFIC CONTROL  |  |  |
| <b>.</b> .  | 2 - FAILURE TO YIELD                                      | 8 - FOLLOWING TOO CLOSE / ACD                       | NAMED DOCTION  | 18-OPERATING DEFECTIVE                            | 22 - NOT DISCERNIBLE                            | 1 - ONE-WAY                           | 1 - ROUNDABOUT 4 - STOP SIGN  |  |  |
| [0,1]   | 3 - RAN RED LIGHT<br>4 - RAN STOP SIGN                    | 9 - IMPROPER LANE CHANGE<br>10 - IMPROPER PASSING   | ILLEGALLY  | EQUIPMENT<br>19-LOAD SHIFTING/FALLING/            | 23 - OPENING DOOR INTO<br>ROADWAY               | 2 2 - TWO-WAY                         | 4 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL  |  |  |
| CONTRIBUTING CIRCUMSTANCE                                   | G<br>S 5 - UNSAFE SPEED                                   | 11-DROVE OFF ROAD                                   | 15 - SWERVING TO AVOID<br>16 - WRONG WAY   | SPILLING<br>20-IMPROPER CROSSING                  | 99 - OTHER IMPROPER ACTION                      | # or TUDOUOU I AVEC                   |   |  |  |
| Ĭ   | 6-IMPROPERTURN E OF EVENTS                                | 12 - IMPROPER BACKING                               |  | - In the an one of the                            |   | # OF THROUGH LANES ON ROAD            | RAIL GRADE CROSSING 1 - NOT INVOLVED  |  |  |
| D SEUDENCI  |   |   | NON-COLLISION  |   |   | 2                                     | 1 2 - INVOLVED-ACTIVE CROSSING<br>3 - INVOLVED-PASSIVE CROSSING   |  |  |
| 1 2 0   | 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION                  | 6 - EQUIPMENT FAILURE<br>7 - SEPARATION OF UNITS    | 11 - CROSS CENTERLINE<br>Opposite direction of   | 16-RAILWAY VEHICLE<br>17-ANIMAL — FARM            | 22 - WORK ZONE MAINTENANCE<br>EQUIPMENT         |                                       | 3 - IMANTAER-LA92FAE CK022ING   |  |  |
|   | 3 - IMMERSION   | B - RAN OFF ROAD RIGHT                              | TRAVEL<br>12 - DOWNHILL RUNAWAY  | 18-ANIMAL DEER                                    | 23 - STRUCK BY FALLING,<br>SHIFTING CARGO OR    | UNIT / NON-                           | MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST   |  |  |
| 2   | 4 - JACKKNIFE<br>5 - CARGO/EQUIPMENT                      | 9 - RAN OFF ROAD LEFT                               | 13-OTHER NON-COLLISION   | 19-ANIMAL OTHER<br>20-MOTOR VEHICLE IN            | ANYTHING SET IN MOTION<br>By a motor vehicle    |                                       | 2 - SOUTH 6 - NORTHWEST   |  |  |
| 31  | LOSS OR SHIFT   | 10-CROSS MEDIAN                                     | 14 - PEDESTRIAN<br>15 - PEDALCYCLE   | TRANSPORT 21 - PARKED MOTOR VEHICLE               | 24 - OTHER MOVABLE OBJECT                       | FROM 4 TO L                           |   |  |  |
|   |   |   | N WITH FIXED OBJEC   | T - STRUCK  |   |                                       | 4 - WEST 8 - SOUTHWEST<br>9 - OTHER / UNKNOWN   |  |  |
| 4   | 25 - IMPACT ATTENUATOR  / CRASH CUSHION                   | 31 - GUARDRAIL END<br>32 - PORTABLE BARRIER         | 37 - TRAFFIC SIGN POST<br>38 - OVERHEAD SIGN POST  | 43 - CURB<br>44 - DITCH                           | 50 - WORK ZONE MAINTENANCE<br>EQUIPMENT         | UNIT SPEED                            | DETECTED SPEED  |  |  |
|   | 26 - BRIDGE OVERHEAD<br>STRUCTURE                         | 33 - MEDIAN CABLE BARRIER                           | 39 - LIGHT / LUMINARIES<br>SUPPORT   | 45 - EMBANKMENT                                   | 51 - WALL                                       |                                       | 1 - STATED / ESTIMATED SPEED  |  |  |
| 5   | 27 - BRIDGE PIER OR ABUTMENT                              | Dittillen   | 40 - UTILITY POLE  | 46-FENCE<br>47-MAILBOX                            | 52 - BUILDING<br>53 - Tunnel                    | 0,2,5                                 | 2 - CALCULATED/EDR  |  |  |
| 6] [  | 28-BRIDGE PARAPET<br>29-BRIDGE RAIL                       | 35 - MEDIAN CONCRETE<br>Barrier                     | 41 - OTHER POST, POLE<br>OR SUPPORT  | 48-TREE   | 54 - OTHER FIXED OBJECT<br>99 - OTHER / UNKNOWN | POSTED SPEED                          | 3 - UNDETERMINED  |  |  |
|   | 30 - GUARDRAIL FACE                                       | 36 - MEDIAN OTHER BARRIER                           | 42 - CULVERT   | 49-FIRE HYDRANT                                   | 27 STIBLE VALUE OF                              | 2 5                                   |   |  |  |
| 1   | FIRST HARMFIII EVER                                       | NT   1   MOST                                       | ARMFUL EVENT   |   |   | 2 5                                   | 1   |  |  |

LOCAL REPORT NUMBER

 $2 \cdot 0 \cdot 2 \cdot 2 \cdot 2 \cdot - 0 \cdot 0 \cdot 0 \cdot 1 \cdot 9 \cdot 9 \cdot 0 \cdot 1$ 

| UNIT # OWNER NAME: LAST, FIRST, MIDDLE (X)SAME AS DRIVER) 10   2   TAYLOR, HAYLIE, ELIZABETH |  | OWNER PHONE: MOLUDE AREA CODE (X SAME AS DRIVER)  |   |  |   |   |   |  |
|--|--|---|---|--|---|---|---|--|
|  | DRESS: STREET, CITY, STATE, 7  |   | BETH  |  | DAMAGE SCALE  1 - NONE 3 - FUNCTIONAL DAI   |   |   |  |
| 1800 RHODES RD 719 ,Kent ,OH 44240   |  |   |   |  |   | 2 - MINOR DAMAGE 4 - DISABLING DAMAGE                           |   |  |
| COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  |  | COMMERCIAL CARRIER I  | PHONE: INCLUDE AREA CODE  | 9 - UNKNOWN  DAMAGED AREA(S)   |   |   |   |  |
| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$                                       |  |   |   | VEHICLE YEA  |   |   | E ALL THAT APPLY  |  |
|  | CE INSURANCE COMPA   | NY IN   | SURANCE POLICY#   | COLOR  | VEHICLE MODEL   | 11 12   | 11 12 1   |  |
| X INSURAN<br>VERIFIE   |  | SIVE 91   | 9904868   | GLD  | CRUZE   | 10 10 2   | 10 11 2   |  |
| COMMER   | TYPE OF USE  | IN EMERGENCY LLL  | US DOT #  | TOWED BY: COMPANY  |   | $9 \qquad \begin{array}{ c c c c c c c c c c c c c c c c c c c$ | $9 \overline{) \begin{array}{c} 10.3 \\ \hline 9 \\ \hline \end{array} \begin{array}{c} 2 \\ \hline 3 \\ \hline \end{array} \begin{array}{c} 3 \\ \hline \end{array}$ |  |
| INTERL<br>DEVICE<br>EQUIPP   | OCK HIT/SKIP UNIT  | #OCCUPANTS VEH  | ICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS. 2 - 10,001 - 26K LBS.  |  | US MATERIAL<br>CLASS # PLACARD ID #   | 8 7 6 6 4   | 8 7 5 4   |  |
| $\lfloor 0 \rfloor 1$<br>Unit type   | 2 - PASSENGER VAN (MINIVAN)<br>3 - SPORT UTILITY VEHICLE<br>4 - PICK UP<br>5 - CARGO VAN |   | 12 - GOLF CART<br>13 - SNOWMOBILE<br>14 - SINGLE UNIT TRUCK<br>15 - SEMI-TRACTOR  | 18 - LIMO (LIVERY VEHICLE)<br>19 - BUS (16+ PASSENGERS)<br>20 - OTHER VEHICLE<br>21 - HEAVY EQUIPMENT<br>22 - ANIMAL WITH RIDER OR<br>ANIMAL-DRAWN VEHICLE | 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - Train 99 - Unknown or hit/skip          | 10 10 8   | 11 10 1 2 2 3 3 8 4 4 7 1 1 5 6 5 12  |  |
|  | WAS VEHICLE OPERATING IN AUT   |   | 0 - NO AUTOMATION   | 3 - CONDITIONAL AUTOMATION   | 9 - UNKNOWN   | 11 12 1   | 6 11 12   |  |
| 1 2  | MODE WHEN CRASH OCCURRED?<br>1-YES 2-NO 9-OTHER/UNKN                                     | 1 0 1   |   | 4 - RIGH AUTOMATION<br>5 - FULL AUTOMATION   |   | 10 11 2   | 10 11 1 2   |  |
| 01<br>SPECIAL<br>FUNCTION  | 2 - TAXI<br>3 - ELECTRONIC RIDE SHARING  | MODE LEVEL 6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER                           | 12 - MILITARY<br>13 - Police  | 16 - FARM<br>17 - MOWING<br>18 - SNOW REMOVAL<br>19 - TOWING<br>20 - SAFETY SERVICE PATROL   | 21 - MAIL CARRIER<br>99 - OTHER / UNKNOWN   | 9 9 3 4 7 6 5 6 5   | 9 9 3 4 7 6 5 6   |  |
| $10_11_1$  |  | 3 - VEHICLE TOWING ANOTHER  | A11 LAA1A   | 8 - POLE   | 12 - CONCRETE MIXER   | 12  | 12 12 12  |  |
| CARGO  | /NOT APPLICABLE 2 - BUS  | MOTOR VEHICLE 4 - LOGGING   | C. ALBAAUA HIRMAI BARB DAV  | 9 - CARGOTANK<br>10-FLAT BED   | 13-AUTOTRANSPORTER<br>14-GARBAGE/REFUSE   |   |   |  |
| BODY<br>Type   |  |   | 7 - GRAIN/CHIPS/GRAVEL  | 11-DUMP  | 99-OTHER/UNKNOWN  |   | 4 3 9 <b>3 9 8 3</b> 3 <b>0 0 3 1 1 1 1 1 1 1 1 1 1</b>   |  |
| VEHICLE  | 2 - HEAD LAMPS   | 4 - BRAKES<br>5 - STEERING<br>6 - TIRE BLOWOUT  |   | 9 - MOTOR TROUBLE<br>10-disabled from Prior<br>Accident  | 99-OTHER/UNKNOWN  | 6   |   |  |
|  | 1 - INTERSECTION - MARKED  | 3 - INTERSECTION - OTHER  | 6 - BICYCLE LANE  | 9 - MEDIAN/CROSSING ISLAND   | 12-FIRST RESPONDER  | - NO DAMAGE [ (   | ] UNDERCARRIAGE [14]  |  |
| NON-MOTORIST   | CROSSWALK 2 - INTERSECTION - UNMARKED  | 4 - MIDBLOCK - MARKED<br>CROSSWALK  | 7 - SHOULDER / ROADSIDE<br>8 - SIDEWALK   | 10-DRIVEWAY ACCESS<br>11-SHARED USE PATHS OR   | AT INCIDENT SCENE 99-OTHER / UNKNOWN  | □-TOP [13]  | -ALL AREAS [15]   |  |
| LOCATION<br>AT IMPACT  |  | 5 - TRAVEL LANE - OTHER LOCATION  |   | TRAILS   | 77 71112117 211111121111  | ☐ - UNIT  | NOT AT SCENE [16]   |  |
| 3  | 2-NON-COLLISION 0 6  | 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN | 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 | 0 - NO DAMAGI<br>1-12 - REFERT<br>DIAGRA<br>13 - TOP            | O UNIT 15-VEHICLE NOT AT SCENE  |  |
|  | 1 - NONE   | 7 - LEFT OF CENTER  | 13 - IMPROPER START FROM A PARKED POSITION  | 17 - VISION OBSTRUCTION  | 21 - LYING IN ROADWAY   | TRAFFICWAY FLOW   | TRAFFIC CONTROL   |  |
| $_{\perp}0_{\perp}2_{\perp}$   | 2 - FAILURE TO YIELD<br>3 - RAN RED LIGHT  | 8-FOLLOWING TOO CLOSE / ACD<br>9-IMPROPER LANE CHANGE   | A PARKED POSITION  14 - STOPPED OR PARKED  ILLEGALLY  | 18-OPERATING DEFECTIVE<br>EQUIPMENT  | 22 - NOT DISCERNIBLE<br>23 - Opening Door Into  | 1 - ONE-WAY<br>2 - TWO-WAY                                      | 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN  |  |
|  | 4 - RAN STOP SIGN<br>5 - Unsafe speed  | 10-IMPROPER PASSING<br>11-Drove OFF ROAD  | 15 - SWERVING TO AVOID  | 19-LOAD SHIFTING/FALLING/<br>SPILLING  | ROADWAY  99-OTHER IMPROPER ACTION   | 2 2 1 WO-WAY  | 3 - FLASHER 6 - NO CONTROL  |  |
| GIRCUMSTANCES  | 6 - IMPROPERTURN   | 12 - IMPROPER BACKING   | 16 - WRONG WAY  | 20-IMPROPER CROSSING   |   | # of THROUGH LANES<br>ON ROAD                                   | RAIL GRADE CROSSING   |  |
|  | OF EVENTS  | · · · · · · · · · · · · · · · · · · ·   | NAU ACCURACY  |  | ALTERNATION AND AND AND AND AND AND AND AND AND AN  |   | 1 - NOT INVOLVED  2 - INVOLVED-ACTIVE CROSSING  |  |
| $1_{1}, 2_{1}, 0_{1}$  | 1 - OVERTURN/ROLLOVER  | 6 - EQUIPMENT FAILURE   | NON-COLLISION<br>11-CROSS CENTERLINE —  | 16-RAILWAY VEHICLE   | 22 - WORK ZONE MAINTENANCE  |   | 3 - INVOLVED-PASSIVE CROSSING   |  |
| 1 3  | 2 - FERE/EXPLOSION 3 - IMMERSION   | 7 - SEPARATION OF UNITS<br>8 - RAN OFF ROAD RIGHT   | OPPOSITE DIRECTION OF<br>Travel   | 17 - ANIMAL — FARM<br>18 - ANIMAL — DEER   | EQUIPMENT<br>23-STRUCK BY FALLING,  | UNIT / NOM  | I-MOTORIST DIRECTION  |  |
| 2  | 4 - JACKKNIFE  | 9 - RAN OFF ROAD LEFT   | 12 - DOWNHILL RUNAWAY<br>13 - Other Non-Collision   | 19-ANIMAL OTHER  | SHIFTING CARGO OR<br>Anything set in motion   |   | 1 - NORTH 5 - NORTHEAST<br>2 - SOUTH 6 - NORTHWEST  |  |
|  | 5 - CARGO / EQUIPMENT<br>LOSS OR SHIFT   | 10 - CROSS MEDIAN   | 14-PEÖESTRIAN<br>15-PEOALCYCLE  | 20 - MOTOR VEHICLE IN<br>TRANSPORT   | BY A MOTOR VEHICLE<br>24-OTHER MOVABLE OBJECT   | FROM 2 TO L   | 4 3 - EAST 7 - SOUTHEAST  |  |
| 31   |  | COLLISIO  | N WITH FIXED OBJEC  | 21 - PARKED MOTOR VEHICLE  T - STRUCK  |   |   | 4 - WEST 8 - SOUTHWEST<br>9 - OTHER / UNKNOWN   |  |
| 4  | 25 - IMPACT ATTENUATOR<br>/ CRASH CUSHION  | 31 - GUARDRAIL END<br>32 - PORTABLE BARRIER   | 37 - TRAFFIC SIGN POST<br>38 - OVERHEAD SIGN POST   | 43 - CURB<br>44 - DITCH  | 50 - WORK ZONE MAINTENANCE<br>EQUIPMENT   | UNIT SPEED  | DETECTED SPEED  |  |
|  | 26 - BRIDGE OVERHEAD<br>STRUCTURE  | 33 - MEDIAN CABLE BARRIER   | 39-LIGHT / LUMINARIES<br>SUPPORT  | 45 - EMBANKMENT  | 51 - WALL<br>52 - BUILDING  |   | 1 - STATED / ESTIMATED SPEED  |  |
| 5  | 27 - BRIDGE PIER OR ABUTMENT   | Britation   | 40 - UTILITY POLE   | 46 - FENCE<br>47 - Mailbox   | 53 - TUNNEL   | $\begin{bmatrix} 0_1 & 0_1 & 5_1 \end{bmatrix}$                 | 2 - CALCULATED / EDR  |  |
| 6 🗀  | 28 - BRIDGE PARAPET<br>29 - BRIDGE RAIL  | 35 - MEDIAN CONCRETE<br>Barrier   | 41 - OTHER POST, POLE<br>OR SUPPORT   | 48-TREE<br>49-FIRE HYDRANT   | 54 - OTHER FIXED OBJECT<br>99 - OTHER / UNKNOWN   | POSTED SPEED  | 3 - UNDETERMINED  |  |
| 1  | 30-GUARDRAIL FACE  | 36-MEDIAN OTHER BARRIER   | 42-CULVERT  |  |   | 2 5   |   |  |

| OHIO DEPARTMENT  | STOT / NION NA   | LATABICT                    | •   |                                    | LOCALI                                 | REPORT NUMB                                    | BER   |  |  |  |
|--|--|-----------------------------|---|------------------------------------|--|--|---|--|--|--|
| STATE - MATTER MOTOR   | \[ \begin{array}{c ccccccccccccccccccccccccccccccccccc |                             |   |                                    |  |  |   |  |  |  |
| UNIT # NAME: LAST, FIRST, MIDD                                     |  |                             |   |                                    | DATE OF BIRTH                          | 4  | AGE GENDER  |  |  |  |
| 0,1 LOUISE, LII  | 1 LOUISE, LILLIAN, LEIGH                               |                             |   |                                    |  |  | 0 4 2 9 2 0 0 0 2 2 F                                   |  |  |  |
| DDRESS: STREET, CITY, STATE, ZIP                                   | C I TI   | OTT 44002                   |   |                                    | CONTACT PHONE - INCLUDE AR             | EA CODE  |   |  |  |  |
| 409 PRANGE DR  |  |                             |   | Tal result salumberur              | OTATINO DOG                            | veraul   |   |  |  |  |
| NJURIES INJURED EMS AGE  | NCY (NAME)   | INJURED TAKEN TO: I         | MEDICAL FACILITY (NAME, CIT                 | USED                               | DOI-COMPLIANT                          | 1 1  | SAGE EJECTION TRAPPED                                   |  |  |  |
| L STATE OPERATOR LICENSE N   | NUMBER   | OFFENSE CHARG               | GED LOCA                                    | OFFENSE DESC                       | L_V_L                                  |  | ON NUMBER   |  |  |  |
| О. Н.  |  | 1                           | CODE  |                                    |  |  |   |  |  |  |
| L CLASS ENDORSEMENT  |  | IVER ALCOI                  | HOL / DRUG SUSPECTED                        | CONDITION                          | ALCOHOL TEST STATUS TYPE VALUE         |  | DRUG TEST(S) TYPE   RESULT SELECTUPTO 4                 |  |  |  |
| SELECT UPTO 2  | BY   | 4  =                        | COHOL MARIJUAN                              |                                    |  |  | 1   |  |  |  |
|  |  | OTI                         | HER DRUG                                    |                                    | DATE OF BIRT                           | _ <u>                                     </u> | AGE GENDER  |  |  |  |
| 1 NAME: LAST, FIRST, MIDI<br>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | AYLIE, ELIZAB  | FTH                         |   |                                    |  |  | 1   |  |  |  |
| ADDRESS: STREET, CITY, STATE, ZIP                                  | ALDIE, EDIZAD  | 12.1.11                     | CONTACT PHONE - INCLUDE AREA COD            |                                    |  |  |   |  |  |  |
| 1800 RHODES RD   | 719 .Kent .OH 44                                       | 1240                        |   |                                    | 1.                                     | NEW GOOD                                       |   |  |  |  |
| INJURIES INJURED EMS AGE   | ENCY (NAME)  |                             | MEDICAL FACILITY (NAME, CI                  |                                    | DOT-COMPLIANT SEATING POS              | SITION AIR BAG (                               | JSAGE   EJECTION   TRAPPED                              |  |  |  |
| 5 TAKEN  |  |                             |   | USED 0,4                           | 11 1 1 0                               | 1 1  | 1 1   |  |  |  |
| OL STATE OPERATOR LICENSE  | NUMBER   | OFFENSE CHAR                | GED LOCA                                    |                                    | CRIPTION                               |  | ON NUMBER   |  |  |  |
| <u>O, H</u> ,  |  | 313.02                      | X   | Through Str                        | • •                                    | 2189   |   |  |  |  |
| DL CLASS ENDORSEMENT SELECT UP TO 2                                | ַזַם   | STRACTED                    | HOL / DRUG SUSPECTED COHOL MARIJUAN         | CONDITION                          | ALCOHOL TEST<br>STATUS TYPE VALUE      |  | DRUG TEST(S) TYPE RESULT SELECTUPTO                     |  |  |  |
| 4  | BY   |                             | HER DRUG                                    | 1                                  | 1 1 1                                  | 1 1  | 1   |  |  |  |
| UNIT # NAME: LAST, FIRST, MID                                      | DLE  |                             |   |                                    | DATE OF BIRT                           | rH   | AGE GENDER  |  |  |  |
|  |  |                             |   |                                    |  | <u> </u>                                       |   |  |  |  |
| ADDRESS: STREET, CITY, STATE, ZIP                                  |  |                             |   |                                    | CONTACT PHONE - INCLUDE A              | AREA CODE                                      |   |  |  |  |
|  |  |                             |   |                                    |  |  |   |  |  |  |
| INJURIES INJURED EMS AGE<br>TAKEN<br>BY                            | ENCY (NAME)  | INJURED TAKEN TO:           | MEDICAL FACILITY (NAME, CI                  | SAFETY EQUIPMEN<br>USED            | DOT-COMPLIANT SEATING PO               | JSITION AIR BAG                                | USAGE EJECTION TRAPPED                                  |  |  |  |
| OL STATE   OPERATOR LICENSE  | NUMBER   | OFFENSE CHAR                | IGED LOCA                                   | L OFFENSE DES                      | <u> </u>                               | CITAT  | L L<br>ION NUMBER                                       |  |  |  |
| DE OTTAL   |  |                             | COD   |                                    |  |  |   |  |  |  |
| OL CLASS ENDORSEMENT SELECT UP TO 2                                |  | RIVER ALCO                  | HOL / DRUG SUSPECTED                        | CONDITION                          | ALCOHOL TEST<br>STATUS TYPE VALUE      | STATUS   | DRUG TEST(S) TYPE   RESULT SELECT UP TO                 |  |  |  |
| SELECT OF 102  | B  | Y 】 凵 Al                    | _COHOL MARIJUA                              | А                                  |  |  | THE THE SECTION OF                                      |  |  |  |
| INJURIES SEA   | TING POSITION  | AIR BAG                     | THER DRUG<br>OL CLASS                       | OL RESTRI                          | CTION(S) DRIVER DIST                   | TRACTION.                                      | TEST STATUS   |  |  |  |
| - FATAL 1 - FROI   | NT-LEFT SIDE 1-NOT D                                   | EPLOYED                     | 1 - CLASS A                                 | 1 - ALCOHOL INT                    | RLOCK DEVICE 1 - NOT DISTRACTE         | ED 7   | 1 - NONE GIVEN  |  |  |  |
| - 20 OLEGIED SEVIOUS HARAKI  | OF THEORY SALES  | OYED FRONT<br>Oyed side     | 2 - CLASS B<br>3 - CLASS C                  | 2 - CDL INTRAST.<br>3 - CORRECTIVE | ENSES ELECTRONIC CO                    | OMMUNICATION :                                 | 2 - TEST REFUSED<br>3 - Test given, contaminated        |  |  |  |
| - POSSIBLE INJURY 3 - FROI   | NT – RIGHT SIDE 4 - DEPL                               | OYED BOTH FRONT / SIDE      | 4 - REGULAR CLASS                           | 4 - FARM WAIVE                     | UEVIGE (TEXT)                          | NG,TYPING,                                     | SAMPLE / UNUSABLE                                       |  |  |  |
|  | TORCYCLE PASSENGER)                                    | PPLICABLE<br>Oyment unknown | (OHIO = D)<br>5 - M/C MOPED ONLY            | 5 - EXCEPT CLAS<br>6 - EXCEPT CLAS |  |  | 4 - TEST GIVEN, RESULTS KNOV<br>5 - TEST GIVEN, RESULTS |  |  |  |
| TROOKED TAKEN DE   | OND – MIDDLE<br>OND – RIGHT SIDE                       | V) INC. IV CIRCUS III       | 6 - NO VALID OL                             | & CLASS B BU                       | S 4 - TALKING ON HA                    |  | UNKNOWN   |  |  |  |
| TREATED AT SCENE 7-THIS  | RD – LEFT SIDE   | EJECTION                    | OLENDORSEMENT                               | 7 - EXCEPT TRAC                    | TE LICENSE 5 - OTHER ACTIVIT           | TY WITH AN                                     | ALCOHOL TEST TYPE 1-NONE                                |  |  |  |
| FEMO 1   | TORCYCLE SIDE CAR) 1 - NOT E<br>RD - MIDDLE 2 - PART   | JECTED<br>IALLY EJECTED     | H - HAZMAT<br>M - MOTORCYCLE                | RESTRICTION<br>9-LEARNER'S P       | ~ 040 4 7 EC 14 - 04 TEA 11 EE 11 EE 1 | FAICE  | 2 - BL00D   |  |  |  |
| - OTHER / UNKNOWN 9-THIS   | RD – RIGHT SIDE 3-TOTA                                 | LLY EJECTED                 | P - PASSENGER                               | RESTRICTION                        | S 7 - OTHER DISTRA                     |  | 3 - URINE<br>4 - Breath                                 |  |  |  |
| SAFETY EQUIPMENT OF I  | RUCK CAB   | APPLICABLE                  | N - TANKER<br>Q - Motor Scooter             | 10 - LIMITED TO C                  | MPLOYMENT 8 - OTHER DISTRA             | ACTION OUTSIDE                                 | 5-OTHER   |  |  |  |
| ENC  | SENGER IN OTHER<br>CLOSED CARGO AREA                   | TRAPPED                     | R - THREE-WHEEL MOTORCYC                    |                                    | 9.OTHER/UNKN                           |  | DRUG TEST TYPE  |  |  |  |
|  | K-UP WITH CAP) 2 - EXTR                                | RAPPED<br>Ricated by        | \$ - SCHOOL BUS<br>T Double & Triple traile | 13 - MECHANICAI<br>(SPECIAL BR     | AKES, HAND                             | TION   | 1 - NONE<br>2 - BLOOD                                   |  |  |  |
| I - SHOULDER & LAP BELT USED 12 - PAS                              | SENGER IN UNENCLOSED MEC<br>RGO Area 3 - Free          | HANICAL MEANS<br>D by       | X - TANKER / HAZMAT                         | ADAPTIVE DI                        | VICES) 1 - APPARENTLY I                | NORMAL   | 3 - URINE   |  |  |  |
| - CHILD RESTRAINT SYSTEM -<br>FORWARD FACING 13-TRA                | NILING UNIT NON-                                       | MECHANICAL MEANS            | GENDER                                      | 14 - MILITARY VE                   |  | The second of the second                       | 4 - OTHER   |  |  |  |
|  | ING ON VEHICLE EXTERIOR<br>N-trailing unit)            |                             | F-FEMALE                                    | AIR BRAKES<br>16 - Outside Mi      | ANGRY, DISTURBE                        |  | DRUG TEST RESULT(                                       |  |  |  |
| 7 - BOOSTER SEAT   | N-MOTORIST<br>Her/unknown                              |                             | M - MALE<br>U - OTHER / UNKNOWN             | 17 - PROSTHETIC                    | AID 5-FELL ASLEEP,                     |  | 1 - AMPHETAMINES<br>2 - Barbiturates                    |  |  |  |
| 8 - HELMET USED 99-018<br>9 - Protective pads USED                 | IEN / UNKNOWN  |                             |   | 18-OTHER                           | FATIGUED, ETC<br>6 - Under the in      | C.<br>Ifluence                                 | 3 - BENZODIAZEPINES                                     |  |  |  |
| (ELBOW, KNEES, ETC.)  O - REFLECTIVE CLOTHING                      |  |                             |   |                                    | OF MEDICATIO<br>/ALCOHOL               | NS/DRUGS                                       | 4 - CANNABINOIDS<br>5 - COCAINE                         |  |  |  |
| 1-LIGHTING-PEDESTRIAN  |  |                             |   |                                    | 9- OTHER / UNKN                        | IOWN   | 6-OPIATES/OPIOIDS                                       |  |  |  |
| / BICYCLE ONLY<br>9 - OTHER / UNKNOWN                              |  |                             |   |                                    |  |  | 7 - OTHER<br>8 - NEGATIVE RESULTS                       |  |  |  |