

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER\*

2 0 2 3 - 0 0 0 0 7 8 6 9

PHOTOS TAKEN     OH-2     OH-3  
 SECONDARY CRASH     OH-1P     OTHER  
 PRIVATE PROPERTY

LOCAL INFORMATION  
 REPORTING AGENCY NAME\*  
**City of Kent Police**  
 NCIC\*  
**0 6 7 0 3**

HIT/SKIP  
 1 - SOLVED  
 2 - UNSOLVED  
**0 2**

NUMBER OF UNITS  
**0 2**

UNIT IN ERROR  
 98 - ANIMAL  
 99 - UNKNOWN  
**0 1**

COUNTY\*  
**6 7**

LOCALITY\*  
 1 - CITY  
 2 - VILLAGE  
 3 - TOWNSHIP  
**1**

LOCATION: CITY, VILLAGE, TOWNSHIP\*  
**Kent**

CRASH DATE / TIME\*  
**05212023 / 2146**

CRASH SEVERITY  
 1 - FATAL  
 2 - SERIOUS INJURY SUSPECTED  
 3 - MINOR INJURY SUSPECTED  
 4 - INJURY POSSIBLE  
 5 - PROPERTY DAMAGE ONLY  
**3**

ROUTE TYPE  
**S R**

ROUTE NUMBER  
**43**

PREFIX  
**1**

N - NORTH  
 S - SOUTH  
 E - EAST  
 W - WEST

LOCATION ROAD NAME  
**MANTUA**

ROAD TYPE  
**S T**

LATITUDE DECIMAL DEGREES  
**41.164666**

ROUTE TYPE  
**A V**

ROUTE NUMBER

PREFIX

N - NORTH  
 S - SOUTH  
 E - EAST  
 W - WEST

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)  
**PLEASANT**

ROAD TYPE  
**A V**

LONGITUDE DECIMAL DEGREES  
**-81.356478**

REFERENCE POINT  
 1 - INTERSECTION  
 2 - MILE POST  
 3 - HOUSE #  
**1**

DIRECTION FROM REFERENCE  
 N - NORTH  
 S - SOUTH  
 E - EAST  
 W - WEST  
**1**

ROUTE TYPE  
 IR - INTERSTATE ROUTE (TP)  
 US - FEDERAL US ROUTE  
 SR - STATE ROUTE  
 CR - NUMBERED COUNTY ROUTE  
 TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE  
 AL - ALLEY    HW - HIGHWAY    RD - ROAD  
 AV - AVENUE    LA - LANE    SQ - SQUARE  
 BL - BOULEVARD    MP - MILEPOST    ST - STREET  
 CR - CIRCLE    OV - OVAL    TE - TERRACE  
 CT - COURT    PK - PARKWAY    TL - TRAIL  
 DR - DRIVE    PI - PIKE    WA - WAY  
 HE - HEIGHTS    PL - PLACE

INTERSECTION RELATED  
 WITHIN INTERSECTION OR ON APPROACH  
 WITHIN INTERCHANGE AREA    NUMBER OF APPROACHES

ROADWAY  
 ROADWAY DIVIDED

DISTANCE FROM REFERENCE  
**5 0**

DISTANCE UNIT OF MEASURE  
 1 - MILES  
 2 - FEET  
 3 - YARDS  
**2**

LOCATION OF FIRST HARMFUL EVENT  
 1 - ON ROADWAY  
 2 - ON SHOULDER  
 3 - IN MEDIAN  
 4 - ON ROADSIDE  
 5 - ON GORE  
 6 - OUTSIDE TRAFFIC WAY  
 7 - ON RAMP  
 8 - OFF RAMP  
**0 1**

MANNER OF CRASH COLLISION/IMPACT  
 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT  
 2 - REAR-END  
 3 - HEAD-ON  
 4 - REAR-TO-REAR  
 5 - BACKING  
 6 - ANGLE  
 7 - SIDESWIPE, SAME DIRECTION  
 8 - SIDESWIPE, OPPOSITE DIRECTION  
 9 - OTHER / UNKNOWN  
**2**

DIRECTION OF TRAVEL  
 N - NORTH  
 S - SOUTH  
 E - EAST  
 W - WEST

MEDIAN TYPE  
 1 - DIVIDED FLUSH MEDIAN (<4 FEET)  
 2 - DIVIDED FLUSH MEDIAN (≥4 FEET)  
 3 - DIVIDED, DEPRESSED MEDIAN  
 4 - DIVIDED, RAISED MEDIAN (ANY TYPE)  
 9 - OTHER/UNKNOWN

WORK ZONE RELATED  
 WORKERS PRESENT  
 LAW ENFORCEMENT PRESENT  
 ACTIVE SCHOOL ZONE

WORK ZONE TYPE  
 1 - LANE CLOSURE  
 2 - LANE SHIFT/CROSSOVER  
 3 - WORK ON SHOULDER OR MEDIAN  
 4 - INTERMITTENT OR MOVING WORK  
 5 - OTHER

LOCATION OF CRASH IN WORK ZONE  
 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN  
 2 - ADVANCE WARNING AREA  
 3 - TRANSITION AREA  
 4 - ACTIVITY AREA  
 5 - TERMINATION AREA

CONTOUR  
**1**

CONDITIONS  
**1**

SURFACE  
**2**

1 - STRAIGHT LEVEL  
 2 - STRAIGHT GRADE  
 3 - CURVE LEVEL  
 4 - CURVE GRADE  
 9 - OTHER/UNKNOWN

1 - DRY  
 2 - WET  
 3 - SNOW  
 4 - ICE  
 5 - SAND, MUD, DIRT, OIL, GRAVEL  
 6 - WATER (STANDING, MOVING)  
 7 - SLUSH  
 9 - OTHER/UNKNOWN

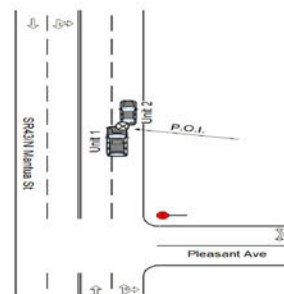
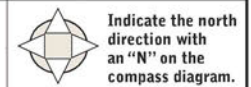
1 - CONCRETE  
 2 - BLACKTOP, BITUMINOUS, ASPHALT  
 3 - BRICK/BLOCK  
 4 - SLAG, GRAVEL, STONE  
 5 - DIRT  
 9 - OTHER/UNKNOWN

LIGHT CONDITION  
 1 - DAYLIGHT  
 2 - DAWN/DUSK  
 3 - DARK - LIGHTED ROADWAY  
 4 - DARK - ROADWAY NOT LIGHTED  
 5 - DARK - UNKNOWN ROADWAY LIGHTING  
 9 - OTHER / UNKNOWN  
**4**

WEATHER  
 1 - CLEAR  
 2 - CLOUDY  
 3 - FOG, SMOG, SMOKE  
 4 - RAIN  
 5 - SLEET, HAIL  
 6 - SNOW  
 7 - SEVERE CROSSWINDS  
 8 - BLOWING SAND, SOIL, DIRT, SNOW  
 9 - FREEZING RAIN OR FREEZING DRIZZLE  
 99 - OTHER / UNKNOWN  
**0 1**

NARRATIVE

**Unit 2 was stopped facing north on SR43/N Mantua St. in the right lane after being struck by a hit skip vehicle. (23-7867) Unit 1 was traveling north on SR43/N Mantua St in the center lane. Unit 1 made a marked lanes violation and crossed over the white line. Unit 1's front right struck the rear left of unit 2. Driver of unit 1 was transported to UH Portage. Driver of unit 1 is suspected of OVI.**



Not To Scale

CRASH REPORTED DATE / TIME  
**0 5 2 1 2 0 2 3 / 2 1 4 6**

DISPATCH DATE / TIME  
**0 5 2 1 2 0 2 3 / 2 1 4 6**

ARRIVAL DATE / TIME  
**0 5 2 1 2 0 2 3 / 2 1 5 0**

SCENE CLEARED DATE / TIME  
**0 5 2 1 2 0 2 3 / 2 2 3 1**

REPORT TAKEN BY  
 POLICE AGENCY  
 MOTORIST

TOTAL TIME ROADWAY CLOSED  
**0 4 1**

OTHER INVESTIGATION TIME  
**0 6 0**

TOTAL MINUTES  
**1 0 5**

OFFICER'S NAME\*  
**Walker, David Michael**  
 OFFICER'S BADGE NUMBER\*  
**2 4 1**

CHECKED BY OFFICER'S NAME\*  
**Short, Jason M**  
 CHECKED BY OFFICER'S BADGE NUMBER\*  
**2 2 8**

SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO DOPS)

**OWNER**

UNIT # 01 OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) **JUSTUS, DANIELLE, LYNNE**  
 OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER) **Redacted per ORC 149.43(A)(1)**  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) **212 ORCHARD ST, Kent, OH 44240**  
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP \_\_\_\_\_ COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE \_\_\_\_\_

**LOCAL REPORT NUMBER**  
2023-00007869

**DAMAGE**

**DAMAGE SCALE**  
4 1 - NONE 3 - FUNCTIONAL DAMAGE  
 2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
 9 - UNKNOWN

**VEHICLE**

LP STATE OH LICENSE PLATE # HUP5734 VEHICLE IDENTIFICATION # JF2SH6CC7AH913353 VEHICLE YEAR 2010 VEHICLE MAKE Subaru  
 INSURANCE VERIFIED INSURANCE COMPANY GRANGE INSURANCE INSURANCE POLICY # BS06375 COLOR WHI VEHICLE MODEL OUTBACK  
 COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME Bakers Towing  
 INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT #OCCUPANTS 01 VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS. HAZARDOUS MATERIAL  MATERIAL RELEASED CLASS # PLACARD ID #  PLACARD \_\_\_\_\_  
 UNIT TYPE 03 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER  
 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)  
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST  
 4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE  
 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN  
 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP  
 # OF TRAILING UNITS \_\_\_\_\_  
 WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 1 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
 1 - YES 2 - NO 9 - OTHER / UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION  
 SPECIAL FUNCTION 01 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER  
 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN  
 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL  
 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING  
 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL  
 CARGO BODY TYPE 01 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTORVEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER  
 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 9 - CARGO TANK 13 - AUTOTRANSPORTER  
 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN  
 VEHICLE DEFECTS 01 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN  
 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT  
 3 - TAIL LAMPS 6 - TIRE BLOWOUT

**DAMAGED AREA(S)**  
 INDICATE ALL THAT APPLY

- NO DAMAGE [ 0 ]  - UNDERCARRIAGE [ 14 ]  
 - TOP [ 13 ]  - ALL AREAS [ 15 ]  
 - UNIT NOT AT SCENE [ 16 ]

**INITIAL POINT OF CONTACT**  
12 0 - NO DAMAGE 14 - UNDERCARRIAGE  
 1 - 12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
 13 - TOP 99 - UNKNOWN

**EVENT(S)**

NON-MOTORIST LOCATION AT IMPACT 01 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION  
 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 8 - SIDEWALK  
 6 - BICYCLE LANE 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  
 ACTION 03 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN  
 PRE-CRASH ACTIONS 01 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN  
 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS  
 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE  
 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN  
 CONTRIBUTING CIRCUMSTANCES 02 1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN  
 7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING  
 13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY  
 17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING  
 21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION

**TRAFFIC**

TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY

TRAFFIC CONTROL 6 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL

# OF THROUGH LANES ON ROAD 2

RAIL GRADE CROSSING 1 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

SEQUENCE OF EVENTS

1 20 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT  
 6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN  
 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE  
 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTORVEHICLE  
 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT  
 COLLISION WITH FIXED OBJECT - STRUCK  
 25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE  
 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER  
 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT  
 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT  
 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN  
 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

**UNIT / NON-MOTORIST DIRECTION**  
 FROM 2 TO 1

1 - NORTH 5 - NORTHEAST  
 2 - SOUTH 6 - NORTHWEST  
 3 - EAST 7 - SOUTHEAST  
 4 - WEST 8 - SOUTHWEST  
 9 - OTHER / UNKNOWN

UNIT SPEED 030

POSTED SPEED 35

DETECTED SPEED 1 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

OWNER

VEHICLE

EVENT(S)

<b>UNIT #</b>	<b>OWNER NAME:</b> LAST, FIRST, MIDDLE (☑ SAME AS DRIVER) <b>0 2</b> <b>TUCEK, PAUL, ANDREW</b>	<b>OWNER PHONE:</b> INCLUDE AREA CODE (☑ SAME AS DRIVER) Redacted per ORC 149.43(A)(1)
<b>OWNER ADDRESS:</b> STREET, CITY, STATE, ZIP (☑ SAME AS DRIVER) <b>435 SCHOOL ST, Kent, OH 44240</b>	<b>COMMERCIAL CARRIER:</b> NAME, ADDRESS, CITY, STATE, ZIP	
<b>LP STATE</b>	<b>LICENSE PLATE #</b>	<b>VEHICLE IDENTIFICATION #</b>
<b>O H</b>	<b>HZE5686</b>	<b>1 HGC M5 5 8 5 6 A 1 5 0 0 0 8</b>
<b>INSURANCE VERIFIED</b>	<b>INSURANCE COMPANY</b>	<b>INSURANCE POLICY #</b>
<input checked="" type="checkbox"/>	<b>PROGRESSIVE</b>	<b>80157132</b>
<b>TYPE OF USE</b>	<b>US DOT #</b>	<b>VEHICLE YEAR</b>
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		<b>2 0 0 6</b>
<b>INTERLOCK DEVICE EQUIPPED</b>	<b>HIT/SKIP UNIT</b>	<b>VEHICLE MAKE</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>Honda</b>
<b>#OCCUPANTS</b>	<b>VEHICLE WEIGHT GVWR/GCWR</b>	<b>VEHICLE MODEL</b>
<b>0 1</b>	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	<b>CIVIC</b>
<b>UNIT TYPE</b>	<b>TOWED BY: COMPANY NAME</b>	<b>HAZARDOUS MATERIAL</b>
<b>0</b>	<b>City Service</b>	<input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD
<b>1 - PASSENGER CAR</b>	<b>7 - MOTORCYCLE 2-WHEELED</b>	<b>12 - GOLF CART</b>
<b>2 - PASSENGER VAN (MINIVAN)</b>	<b>8 - MOTORCYCLE 3-WHEELED</b>	<b>13 - SNOWMOBILE</b>
<b>3 - SPORT UTILITY VEHICLE</b>	<b>9 - AUTOCYCLE</b>	<b>14 - SINGLE UNIT TRUCK</b>
<b>4 - PICK UP</b>	<b>10 - MOPED OR MOTORIZED BICYCLE</b>	<b>15 - SEMI-TRACTOR</b>
<b>5 - CARGO VAN</b>	<b>11 - ALL TERRAIN VEHICLE (ATV / UTV)</b>	<b>16 - FARM EQUIPMENT</b>
<b>6 - VAN (9-15 SEATS)</b>		<b>17 - MOTORHOME</b>
<b># OF TRAILING UNITS</b>	<b>0 - NO AUTOMATION</b>	<b>18 - LIMO (LIVERY VEHICLE)</b>
<b>0</b>	<b>1 - DRIVER ASSISTANCE</b>	<b>19 - BUS (16+ PASSENGERS)</b>
<b>2</b>	<b>2 - PARTIAL AUTOMATION</b>	<b>20 - OTHER VEHICLE</b>
	<b>3 - CONDITIONAL AUTOMATION</b>	<b>21 - HEAVY EQUIPMENT</b>
	<b>4 - HIGH AUTOMATION</b>	<b>22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE</b>
	<b>5 - FULL AUTOMATION</b>	<b>23 - PEDESTRIAN / SKATER</b>
<b>1 - NONE</b>	<b>6 - BUS - CHARTER/TOUR</b>	<b>24 - WHEELCHAIR (ANY TYPE)</b>
<b>2 - TAXI</b>	<b>7 - BUS - INTERCITY</b>	<b>25 - OTHER NON-MOTORIST</b>
<b>3 - ELECTRONIC RIDE SHARING</b>	<b>8 - BUS - SHUTTLE</b>	<b>26 - BICYCLE</b>
<b>4 - SCHOOL TRANSPORT</b>	<b>9 - BUS - OTHER</b>	<b>27 - TRAIN</b>
<b>5 - BUS - TRANSIT/COMMUTER</b>	<b>10 - AMBULANCE</b>	<b>99 - UNKNOWN OR HIT/SKIP</b>
<b>1 - NO CARGO BODY TYPE / NOT APPLICABLE</b>	<b>3 - VEHICLE TOWING ANOTHER MOTORVEHICLE</b>	<b>5 - INTERMODAL CONTAINER CHASSIS</b>
<b>2 - BUS</b>	<b>4 - LOGGING</b>	<b>6 - CARGO VAN/ENCLOSED BOX</b>
	<b>7 - GRAIN/CHIPS/GRAVEL</b>	<b>8 - POLE</b>
<b>1 - TURN SIGNALS</b>	<b>4 - BRAKES</b>	<b>9 - CARGO TANK</b>
<b>2 - HEAD LAMPS</b>	<b>5 - STEERING</b>	<b>10 - FLAT BED</b>
<b>3 - TAIL LAMPS</b>	<b>6 - TIRE BLOWOUT</b>	<b>11 - DUMP</b>
	<b>7 - WORN OR SLICK TIRES</b>	<b>12 - CONCRETE MIXER</b>
	<b>8 - TRAILER EQUIPMENT DEFECTIVE</b>	<b>13 - AUTOTRANSPORTER</b>
		<b>14 - GARBAGE/REFUSE</b>
		<b>99 - OTHER / UNKNOWN</b>
<b>1 - INTERSECTION - MARKED CROSSWALK</b>	<b>3 - INTERSECTION - OTHER</b>	<b>6 - BICYCLE LANE</b>
<b>2 - INTERSECTION - UNMARKED CROSSWALK</b>	<b>4 - MIDBLOCK - MARKED CROSSWALK</b>	<b>7 - SHOULDER / ROADSIDE</b>
	<b>5 - TRAVEL LANE - OTHER LOCATION</b>	<b>8 - SIDEWALK</b>
<b>1 - NON-CONTACT</b>	<b>1 - STRAIGHT AHEAD</b>	<b>9 - MEDIAN/CROSSING ISLAND</b>
<b>2 - NON-COLLISION</b>	<b>2 - BACKING</b>	<b>10 - DRIVEWAY ACCESS</b>
<b>3 - STRIKING</b>	<b>3 - CHANGING LANES</b>	<b>11 - SHARED USE PATHS OR TRAILS</b>
<b>4 - STRUCK</b>	<b>4 - OVERTAKING/PASSING</b>	<b>12 - FIRST RESPONDER AT INCIDENT SCENE</b>
<b>5 - BOTH STRIKING &amp; STRUCK</b>	<b>5 - MAKING RIGHT TURN</b>	<b>99 - OTHER / UNKNOWN</b>
<b>9 - OTHER / UNKNOWN</b>	<b>6 - MAKING LEFT TURN</b>	
	<b>7 - MAKING U-TURN</b>	<b>13 - NEGOTIATING A CURVE</b>
	<b>8 - ENTERING TRAFFIC LANE</b>	<b>14 - ENTERING OR CROSSING SPECIFIED LOCATION</b>
	<b>9 - LEAVING TRAFFIC LANE</b>	<b>15 - WALKING, RUNNING, JOGGING, PLAYING</b>
	<b>10 - PARKED</b>	<b>16 - WORKING</b>
	<b>11 - SLOWING OR STOPPED IN TRAFFIC</b>	<b>17 - PUSHING VEHICLE</b>
	<b>12 - DRIVERLESS</b>	<b>18 - APPROACHING OR LEAVING VEHICLE</b>
		<b>19 - STANDING</b>
		<b>20 - OTHER NON-MOTORIST</b>
		<b>21 - STANDING OUTSIDE DISABLED VEHICLE</b>
		<b>99 - OTHER / UNKNOWN</b>
<b>1 - NONE</b>	<b>7 - LEFT OF CENTER</b>	<b>13 - IMPROPER START FROM A PARKED POSITION</b>
<b>2 - FAILURE TO YIELD</b>	<b>8 - FOLLOWING TOO CLOSE / ACDA</b>	<b>14 - STOPPED OR PARKED ILLEGALLY</b>
<b>3 - RAN RED LIGHT</b>	<b>9 - IMPROPER LANE CHANGE</b>	<b>15 - SWERVING TO AVOID</b>
<b>4 - RAN STOP SIGN</b>	<b>10 - IMPROPER PASSING</b>	<b>16 - WRONG WAY</b>
<b>5 - UNSAFE SPEED</b>	<b>11 - DROVE OFF ROAD</b>	<b>17 - VISION OBSTRUCTION</b>
<b>6 - IMPROPER TURN</b>	<b>12 - IMPROPER BACKING</b>	<b>18 - OPERATING DEFECTIVE EQUIPMENT</b>
		<b>19 - LOAD SHIFTING/FALLING/ SPILLING</b>
		<b>20 - IMPROPER CROSSING</b>
		<b>21 - LYING IN ROADWAY</b>
		<b>22 - NOT DISCERNIBLE</b>
		<b>23 - OPENING DOOR INTO ROADWAY</b>
		<b>99 - OTHER IMPROPER ACTION</b>
<b>1 - OVERTURN/ROLLOVER</b>	<b>6 - EQUIPMENT FAILURE</b>	<b>11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL</b>
<b>2 - FIRE/EXPLOSION</b>	<b>7 - SEPARATION OF UNITS</b>	<b>12 - DOWNHILL RUNAWAY</b>
<b>3 - IMMERSION</b>	<b>8 - RAN OFF ROAD RIGHT</b>	<b>13 - OTHER NON-COLLISION</b>
<b>4 - JACKKNIFE</b>	<b>9 - RAN OFF ROAD LEFT</b>	<b>14 - PEDESTRIAN</b>
<b>5 - CARGO / EQUIPMENT LOSS OR SHIFT</b>	<b>10 - CROSS MEDIAN</b>	<b>15 - PEDALCYCLE</b>
		<b>16 - RAILWAY VEHICLE</b>
		<b>17 - ANIMAL - FARM</b>
		<b>18 - ANIMAL - DEER</b>
		<b>19 - ANIMAL - OTHER</b>
		<b>20 - MOTOR VEHICLE IN TRANSPORT</b>
		<b>21 - PARKED MOTORVEHICLE</b>
		<b>22 - WORK ZONE MAINTENANCE EQUIPMENT</b>
		<b>23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE</b>
		<b>24 - OTHER MOVABLE OBJECT</b>
<b>25 - IMPACT ATTENUATOR / CRASH CUSHION</b>	<b>31 - GUARDRAIL END</b>	<b>37 - TRAFFIC SIGN POST</b>
<b>26 - BRIDGE OVERHEAD STRUCTURE</b>	<b>32 - PORTABLE BARRIER</b>	<b>38 - OVERHEAD SIGN POST</b>
<b>27 - BRIDGE PIER OR ABUTMENT</b>	<b>33 - MEDIAN CABLE BARRIER</b>	<b>39 - LIGHT / LUMINARIES SUPPORT</b>
<b>28 - BRIDGE PARAPET</b>	<b>34 - MEDIAN GUARDRAIL BARRIER</b>	<b>40 - UTILITY POLE</b>
<b>29 - BRIDGE RAIL</b>	<b>35 - MEDIAN CONCRETE BARRIER</b>	<b>41 - OTHER POST, POLE OR SUPPORT</b>
<b>30 - GUARDRAIL FACE</b>	<b>36 - MEDIAN OTHER BARRIER</b>	<b>42 - CULVERT</b>
		<b>43 - CURB</b>
		<b>44 - DITCH</b>
		<b>45 - EMBANKMENT</b>
		<b>46 - FENCE</b>
		<b>47 - MAILBOX</b>
		<b>48 - TREE</b>
		<b>49 - FIRE HYDRANT</b>
		<b>50 - WORK ZONE MAINTENANCE EQUIPMENT</b>
		<b>51 - WALL</b>
		<b>52 - BUILDING</b>
		<b>53 - TUNNEL</b>
		<b>54 - OTHER FIXED OBJECT</b>
		<b>99 - OTHER / UNKNOWN</b>
<b>1</b>	<b>FIRST HARMFUL EVENT</b>	<b>1</b>
	<b>MOST HARMFUL EVENT</b>	

<b>LOCAL REPORT NUMBER</b>	
<b>2 0 2 3 - 0 0 0 0 7 8 6 9</b>	
<b>DAMAGE</b>	
<b>DAMAGE SCALE</b>	
<b>4</b>	1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
<b>DAMAGED AREA(S)</b> INDICATE ALL THAT APPLY	
<input type="checkbox"/> - NO DAMAGE [ 0 ] <input type="checkbox"/> - UNDERCARRIAGE [ 14 ] <input type="checkbox"/> - TOP [ 13 ] <input type="checkbox"/> - ALL AREAS [ 15 ] <input type="checkbox"/> - UNIT NOT AT SCENE [ 16 ]	
<b>INITIAL POINT OF CONTACT</b>	
<b>0 6</b> 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
<b>TRAFFIC</b>	
<b>TRAFFICWAY FLOW</b>	<b>TRAFFIC CONTROL</b>
1 - ONE-WAY <b>2</b> 2 - TWO-WAY	1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL
<b># OF THROUGH LANES ON ROAD</b>	<b>RAIL GRADE CROSSING</b>
<b>2</b>	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
<b>UNIT / NON-MOTORIST DIRECTION</b>	
FROM <b>2</b> TO <b>1</b> 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
<b>UNIT SPEED</b>	<b>DETECTED SPEED</b>
<b>0 0 0</b>	<b>1</b> 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
<b>POSTED SPEED</b>	
<b>3 5</b>	

# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
**2 0 2 3 - 0 0 0 0 7 8 6 9**

<b>UNIT #</b> 0 1	<b>NAME: LAST, FIRST, MIDDLE</b> JUSTUS, DANIELLE, LYNNE		<b>DATE OF BIRTH</b> 0 7 1 4 1 9 7 3		<b>AGE</b> 4 9	<b>GENDER</b> F					
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 212 ORCHARD ST ,Kent ,OH 44240				<b>CONTACT PHONE - INCLUDE AREA CODE</b> Redacted per ORC 149.43(A)(1)							
<b>INJURIES</b> 3	<b>INJURED TAKEN BY</b> 2	<b>EMS AGENCY (NAME)</b> Kent Fire	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> UHPMC	<b>SAFETY EQUIPMENT USED</b> 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	<b>SEATING POSITION</b> 0 1	<b>AIR BAG USAGE</b> 2	<b>EJECTION</b> 1	<b>TRAPPED</b> 1		
<b>OL STATE</b> O H	<b>OPERATOR LICENSE NUMBER</b> Redacted per ORC 4501:1-12		<b>OFFENSE CHARGED</b> 331.08	<b>LOCAL CODE</b> <input checked="" type="checkbox"/>	<b>OFFENSE DESCRIPTION</b> Failure to operate M		<b>CITATION NUMBER</b> 26070				
<b>OL CLASS</b> 4	<b>ENDORSEMENT</b> SELECT UP TO 2	<b>RESTRICTION</b> SELECT UP TO 3	<b>DRIVER DISTRACTED BY</b> 1	<b>ALCOHOL / DRUG SUSPECTED</b> <input checked="" type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b> 6	<b>ALCOHOL TEST</b>		<b>DRUG TEST(S)</b>		
						<b>STATUS</b>	<b>TYPE</b>	<b>VALUE</b>	<b>STATUS</b>	<b>TYPE</b>	<b>RESULT</b> SELECT UP TO 4
						1	1	.	1	1	

<b>UNIT #</b> 0 2	<b>NAME: LAST, FIRST, MIDDLE</b> TUCEK, PAUL, ANDREW		<b>DATE OF BIRTH</b> 0 6 1 6 1 9 6 5		<b>AGE</b> 5 7	<b>GENDER</b> M					
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 435 E SCHOOL ST ,Kent ,OH 44240				<b>CONTACT PHONE - INCLUDE AREA CODE</b> Redacted per ORC 149.43(A)(1)							
<b>INJURIES</b> 5	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>	<b>SAFETY EQUIPMENT USED</b> 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	<b>SEATING POSITION</b> 0 1	<b>AIR BAG USAGE</b> 3	<b>EJECTION</b> 1	<b>TRAPPED</b> 1		
<b>OL STATE</b> O H	<b>OPERATOR LICENSE NUMBER</b> Redacted per ORC 4501:1-12		<b>OFFENSE CHARGED</b>	<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b>		<b>CITATION NUMBER</b>				
<b>OL CLASS</b> 4	<b>ENDORSEMENT</b> SELECT UP TO 2	<b>RESTRICTION</b> SELECT UP TO 3	<b>DRIVER DISTRACTED BY</b> 1	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b> 1	<b>ALCOHOL TEST</b>		<b>DRUG TEST(S)</b>		
						<b>STATUS</b>	<b>TYPE</b>	<b>VALUE</b>	<b>STATUS</b>	<b>TYPE</b>	<b>RESULT</b> SELECT UP TO 4
						1	1	.	1	1	

<b>UNIT #</b>	<b>NAME: LAST, FIRST, MIDDLE</b>		<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>					
<b>ADDRESS: STREET, CITY, STATE, ZIP</b>				<b>CONTACT PHONE - INCLUDE AREA CODE</b>							
<b>INJURIES</b>	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>	<b>SAFETY EQUIPMENT USED</b>	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>		
<b>OL STATE</b>	<b>OPERATOR LICENSE NUMBER</b>		<b>OFFENSE CHARGED</b>	<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b>		<b>CITATION NUMBER</b>				
<b>OL CLASS</b>	<b>ENDORSEMENT</b> SELECT UP TO 2	<b>RESTRICTION</b> SELECT UP TO 3	<b>DRIVER DISTRACTED BY</b>	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b>	<b>ALCOHOL TEST</b>		<b>DRUG TEST(S)</b>		
						<b>STATUS</b>	<b>TYPE</b>	<b>VALUE</b>	<b>STATUS</b>	<b>TYPE</b>	<b>RESULT</b> SELECT UP TO 4
								.			

INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHID = D) 5 - MC MOPED ONLY 6 - NO VALID OL	1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE RESTRICTIONS 9 - LEARNER'S PERMIT RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE 9 - OTHER / UNKNOWN	1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN
<b>INJURED TAKEN BY</b>	<b>EJECTION</b>		<b>OL ENDORSEMENT</b>		<b>ALCOHOL TEST TYPE</b>	
1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE		H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT		1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	
<b>SAFETY EQUIPMENT</b>	<b>TRAPPED</b>		<b>GENDER</b>		<b>DRUG TEST TYPE</b>	
1 - NONE USED 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN	1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS		F - FEMALE M - MALE U - OTHER / UNKNOWN		1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	
				<b>CONDITION</b>		<b>DRUG TEST RESULT(S)</b>
				1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 9 - OTHER / UNKNOWN		1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS