OHIO DEPARTMENT TRAFFIC C	RASH R	LOCAL REPORT NUMBER*									
PHOTOS TAKEN OH-2] он-з LC	\[\begin{aligned} alig									
X 0H-1P	SECONDARY CRASH PRIVATE PROPERTY City of Kent Police 0.6.7.0.3						HIT/SKIP NUMBER OF UNITS UNIT IN ERROR				
PRIVATE	6,7,0,3	1 - SOLVED	0 2	2 98 - ANIMAL 99 - UNKNOWN							
T-CITY	CATION: CITY, V	CRASH DATE / 1		RASH SEVERITY							
3-TOWNSHIP	ent				[0.83]0.2]0.2]0	/1.7.5.0.1. 5	1 - FATAL 2 - SERIOUS INJURY				
ROUTE TYPE ROUTE NUMBER PREFIX	2-SOUTH	ICATION ROAD NAME		ROAD TYPE	LATITUDE DE		SUSPECTED				
- 15 N 13 1 2	4-WEST	VATER	ST	41.140	0 8 4	3 - MINOR INJURY SUSPECTED					
ROUTE TYPE ROUTE NUMBER PREFIX	2- SOUTH I	EFERENCE ROAD NAME (R	PAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	1	4 - INJURY POSSIBLE				
	3-EAST 1 4-WEST	510			-8 ₁ 1 ₆ 3 ₅ 6	9,9,0	5 - PROPERTY DAMAGE ONLY				
REFERENCE POINT DIRECTION 1 - INTERSECTION REFERENCE AND AND AND TO SEE THE POINT OF THE P	DTU IR - IN	ROUTE TYPE TERSTATE ROUTE(TP)	ROAD TYPE AL - ALLEY HW- HIGHWAY	RD - ROAD		INTERSECTION RELAT					
3 2-MILE POST 2-SO	JTH US-FE	EDERAL US ROUTE		SQ - SQUARE	WITHIN INTE	RSECTION OR ON APPRO	DACH				
3-HOUSE # 3-EA 4-WE		ATE ROUTE	Control of the Contro	ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES						
DISTANCE DISTANCE UNIT OF MEASU	RE	JMBERED COUNTY ROUTE		TE - TERRACE	ROADWAY						
1 - MI 2 - FE	ET RO	JMBERED TOWNSHIP DUTE	The St. Park County of the Conference of the Con	WA - WAY	ROADWAY DIV	IDED					
1 CC4710N on F7057 1145			HE - HEIGHTS PL - PLACE			200					
LOCATION OF FIRST HAR 1 - ON ROADWAY 9 -	CROSSOVER	1.5	MANNER of CRASH COLLISION/IMP/ NOT COLLISION 4 - REAR-TO-REAR	CT	DIRECTION OF TRAVE		ANTYPE FLUSH MEDIAN				
The state of the s	DRIVEWAY/AL	DE CROSCING 2	BETWEEN 5-BACKING TWO MOTOR 5-BACKING		2-SOUTH	(<4 FEE	ET)				
	SHARED USE		VEHICLES IN 6-ANGLE TRANSPORT 7-SIDESWIPE, SAN	E DIRECTION	3- EAST 4- WEST	2 - DIVIDED (≥4 FEE	ED FLUSH MEDIAN EET)				
5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 13	TRAILS BIKE LANE		REAR-END 8 - SIDESWIPE, OPP HEAD-ON 9 - OTHER / UNKNO		4- WEST		, DEPRESSED MEDIAN				
7 - ON RAMP 14	TOLL BOOTH		TEAD-ON 7-OTHER/UNKNO	VV 14		(ANY TY	PE)				
8 - OFF RAMP 99	OTHER / UNK					9 - OTHER/L	JNKNOWN				
WORK ZONE RELATED		NORK ZONE TYPE NE CLOSURE	LOCATION OF CRASH IN W 1 - BEFORE THE 1ST		CONTOUR	CONDITIONS	SURFACE				
WORKERS PRESENT		NE SHIFT/CROSSOVER	WARNING SIGN 2 - ADVANCE WARNI		2	1	2				
LAW ENFORCEMENT PRESENT		ORK ON SHOULDER MEDIAN	3 -TRANSITION ARE		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE				
ACTIVE SCHOOL ZONE	4 - 1N 5 - OT	TERMITTENT OR MOVING W	/ORK 4 - ACTIVITY AREA 5 - TERMINATION AR	IFA.	3 - CURVE LEVEL	3-SNOW	2 BLACKTOP, BITUMINOUS,				
	3-01			EA	4 - CURVE GRADE	4 - ICE	ASPHALT 3 - BRICK/BLOCK				
LIGHT CONDITION 1 - DAYLIGHT		1 - CLEAR	ATHER 6-SNOW		9 - OTHER/UNKNÖWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL,				
1 2-DAWN/DUSK		. 0 . 1 . 2 - CLOUDY	7 - SEVERE CROSSWINDS			6 - WATER (STANDING,	STONE 5 - DIRT				
3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGH	TED	3-FOG SVIOG, SM 4-RAIN	OKE 8-BLOWING SAND, SOIL DIR 9-FREEZING RAIN OR FREEZ			MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN				
5 - DARK – UNKNOWN ROADWA' 9 - OTHER / UNKNOWN	LIGHTING	5 - SLEET, HAIL	99 - OTHER / UNKNOWN		9 - OTHER/UNKNOWN						
NARRATIVE						1700					
						4	Indicate the north direction with				
UNIT 1 & 2 WERE TR	AVELIN	G IN THE SEC	COND			4	an "N" on the compass diagram.				
LANE N/B IN FRONT	OF 151	0 S. WATER ST	Г.								
UNIT 1 STOPPED FO	R TRAI	FFIC. UNIT 2	7								
FAILED TO STOP FO		*	UCK								
THE REAR OF UNIT						NOT 10 :	SCALE				
					in the second						
VEHICLE MINOR P	ROPERT	TY DAMAGE (ONLY								
CRASH.			1º 10 ti	Trac NA Cital	that?						
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			1990 Million Market State Common and Security and account of the Security State Security State Security State Security Security State Security Secu			T					
a antiquita di Antigordia ting titapisa tingganga tingga gininggang tinggang tinggang tinggang ana ana antigon	Mining and American section of the Control of the C	e thiradillettespring, despuit springer the dissolventure of springer than the charactery encymos	-sylvinia dandarur griss napir substitut pa dalami								
ng dar i dramming allem ein ein drämhiggaglightigg. Admyddi gwyrdymgraedrawrau assann nhych og hisy			Month for American remains and autocommissions								
CRASH REPORTED DATE / TIME		SPATCH DATE / TIME	ARRIVAL DATE / TIM		SCENE CLEARED		REPORT TAKEN BY				
0,8,3,0,2,0,2,0,/,1,7,5,0	0.8.3.0		2 0 8 3 0 2 0 2 0 / 1	7,5,9	0,8,3,0,2,0,2,0	0/1824	POLICE AGENCY				
TOTAL TIME OTHER ROADWAY CLOSED INVESTIGATION TIME	TOTAL MINUTES	officer's NAME* Fuller, Jame		HECKED BY OFF	ICER'S NAME*		MOTORIST				
			S BADGE NUMBER*		OSII BY OFFICER'S BADGE I	IIIMRED*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)				
0 0 0 6 0	0 9			2 3	2		497.48				



2,0,2,0,-,0,0,1,3,9,1,2, OWNER NAME: LAST, FIRST, MIDDLE (SAVE AS ORIVER) OWNED DHONE+ IN THE AREA COME IT SAME AS DRIVER DAMAGE 0 1 BAUMBERGER, ERIC, LEE DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 4127 CHAPMAN DR, Brimfield Twp, OH 44240 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) LP STATE LICENSE PLATE # INDICATE ALL THAT APPLY VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE 1.FMCU0.D7.3.BKC4.9.5.3.4 O H EXM3631 2 0 1 1 Ford INSURANCE COMPANY **INSURANCE POLICY #** INSURANCE VERIFIED COLOR VEHICLE MODEL **PROGRESSIVE** 914279644 RED **ESCAPE** TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY HAZARDOUS MATERIAL **VEHICLE WEIGHT GVWR/GCWR** #OCCUPANTS INTERLOCK MATERIAL RELEASED CLASS # PLACARD ID # 1 - <10K LBS. 2 - 10,001 - 26K LBS. DEVICE HIT/SKIP UNIT 0,2 PLACARD 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) B - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 0 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 19-BUS (16+ PASSENGERS) 24-WHEELCHAIR (ANY TYPE) 14-SINGLE UNITTRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26-BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME ANIMAL-CRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) 00 # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 0 4 - HIGH AUTOMATION 2 J 1-YES 2-NO 9-OTHER/UNXNOWN 2 - PARTIAL AUTOMATION AUTONOMOUS 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 16-FARM 21 - MAIL CARRIER 0,1, 2-TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99-OTHER/UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL FUNCTION 4 - SCHOOLTRANSPORT 9 - BUS -OTHER 14-PUBLIC UTILITY 19. TOWING 5 - BUS - TRANSIT/COMMUTER 10-AMBULANCE 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE B - POLE 12-CONCRETE MIXER 0, 1, I NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTO TRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 13-FLAT BED 14-GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99-OTHER/UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99-OTHER/UNKNOWA VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABI ED EROM PRIOR DEFECTS 3 - TAIL LAMPS DEFECTIVE ACCIDENT 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIANICROSSING ISLAND 12-FIRST RESPONDER CROSS WALK 4 - MIDBLOCK - MARKED AT INCIDENT SCENE 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS TOP | 13 | -ALL AREAS [15] NON-MOTORIST 2 - INTERSECTION - UNMARKED CROSSWALK 99-OTHER/UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS - UNIT NOT AT SCENE [16] 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT 2 - NON-COLLISION OR LEAVING VEHICLE 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 1 1 3 - CHANGING LANES 4 0 - NO DAMAGE 3-STRIKING 14 - UNDERCARRIAGE 19-STANDING 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK 0,6 PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 10-PARKED 20 - OTHER NON-MOTORIST DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 99 - UNKNOWN 11-SLOWING OR STOPPED 21 - STANDING OUTSIDE 16-WORKING 13 - TOP DISABLED VEHICLE & STRUCK IN TRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 9-OTHER/UNKNOWN 12 - DR'VERLESS 99 - DIHER / HINKNOWN 1 - NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL 2 - FAILURE TO YIELD 8-FOLLOWING TOO CLOSE / ACDA PARKED POSITION 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 0 1 3 - MAIN INCO-14-STOPPED OR PARKED EQUIPMENT 9 - IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - TWO-WAY ILLEGALLY 2 - SIGNAL 5 - YIELD SIGN 6 3-FLASHER 10-IMPROPER PASSING 19-LOAD SHIFTING/FALLING/ ROADWAY CONTRIBUTING 4 - RAN STOP SIGN CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID 6 - NO CONTROL SPILLING 11-DROVE DEF ROAD 99-OTHER IMPROPER ACTION 16 - WRONG WAY 20 - IN PROPER CROSSING 6 - IMPROPERTURN 12 - IMPROPER BACKING # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD SEQUENCE OF EVENTS 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 4 EVENTS 2 + 0 1 - OVERTURN/ROLLCVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -OPPOSITE DIRECTION OF 16 - RAILWAY VEHICLE 3 - INVOLVED-PASSIVE CROSSING 22 - WCRK ZONE MAINTENANCE 2 - FIRE/EXP_OSION 7 - SEPARATION OF UNITS EQUIPMENT 17 - ANIMAL - FARM TRAVEL UNIT / NON-MOTORIST DIRECTION 3 - IMMERSION B - RAN OFF ROAD RIGHT 18-ANIMAL - DEFR 23 - STRUCK BY FALLING, 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 13-OTHER NON-COLLISION ANYTHING SET IN MOTION 5 - CARGO / EQUIPMENT 20-MOTOR VEHICLE IN 2 - SOUTH 10-CROSS MEDIAN 6 - VORTHWEST BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 2 TO 1 LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24-OTHER MOVABLE CBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE CRASH CUSHION 32 - PORTABLE RARRIER 38-OVERHEAD SIGN POST **EQUIPMENT** 44 - DETCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVE RHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 51 - WALL STRUCTURE 1 - STATED / ESTIMATED SPEED 34-MEDIAN GUARDRAIL SUPPORT 52-BUILDING 46-FENCE [0,0,0]1 2 - CALCULATED / EDR 27 - BRIDGE PIER OR ABUTMENT BARRIER 40 - UTILITY POLE 47 - MAIL BOX 53-TUNNEL 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OBJECT 49-TREE 3 - UNDETERMINED 29 - BRIDGE RAIL BARRIER OR SUPPORT POSTED SPEED 99 - OTHER / HAKNOWN 49-FIRE HYDRANT 30-GUARDRAIL FACE 36-MEDIAN OTHER BARRIER 42 - CULVERT 2 5 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER



LOCAL REPORT NUMBER

UNIT#	OWNER NAME: LAST, FIRS	T MIDDLE - Plante - Comment		Lauren		2,0,2,0,-,	$0, 0, 0, 1, 3, 9, 1, 2, \dots$	
0 2	TURNER, DE	JA, DENISE					DAMAGE DAMAGE SCALE	
OWNER AT	BROADHURS	ZIP IX SAME AS DRIVER		1 - NONE 3 - FUNCTIONAL DAMAGE				
	TAL CARRIER: NAME, ADDR		JINNAII, OH		PHONE: INC. UDE AREA DOCE	2 - MINOR D	AMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
						1	DAMAGED AREA(S)	
	K909692	3 N1 AB7	E IDENTIFICATION # A.P.9 KY2,6,4	5,0,9, 2,0,1,	9 Nissan		CATE ALL THAT APPLY	
INSURAL VERIFI		ANY	NSURANCE POLICY # 028302294	COLOR	VEHICLE MODEL SENTRA	11 2 1	11 12 1	
COMME	TYPE OF USE RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DCT #	TOWED BY: COMPAN	YNAME	9 9 3	3 9 9 3	
INTERI DEVICE EQUIP	ED HIT/SKIP UNI	#OCCUPANTS VE	HICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS 2 - 10,061 - 26K LBS 3 - >26K LBS	MATERIAL	DUS MATERIAL CLASS # PLACARD ID #	8 7 5 5	8 7 6 5	
UNIT TYPE	2 - PASSENGER VAN (MINIVAN) 3 - SPORT LTILITY VEHICLE 4 - PICK UP 5 - CARGOVAN	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - FLITERRAIN VEHICLE ATV / UTV!	12-GOLF CART 13-SYDWMOBILE 14-SINGLE UNITIALCK 15-SEVI-TRACTOR 16-FARM EQUIPMENT 17-MOTORHOME	18-LIMO (LIVERY VEHICLE) 19-BUS (16+ PASSENSERS) 20-OTHER VEHICLE 21-HEAVY EQUIPMENT 22-ANIMAL WITH RIDER OR ANIMAL-CRAWN VEHICLE	23 - PEDESTRIAN SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NOIL-VOTORIST 26 - BICYCLE 27 - TRAIN 95 - UNKNOWN OR HIT/SKIP	10 9	11 12 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	WAS VEHICLE OPERATING IN AU MODE WHER CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNKN	0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HISH AUTOMATION 5 - FULL AUTOMATION	8 - naknomn	10 12 1 2 1 2 2 3	2 10 n 12 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 1 2 1 1 1 2 1	
0 1	Z - TAXI 3 - ELECTRONIC RIDE SHARING	9 - BUS - OTHER	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPME AT	16-FARY 17-MOWING 18-SNOW REMOVAL 19-TOWING 28-SAFETY SERVICE PATROL	21-MAIL CARRIER 99-OT-ERI LNKNOWN	7 6 5	8 7 5 5	
1 0	NGT APPLICABLE	3 - VEHICLETOWING ANOTHER VOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VANIENCLOSED BÖX 7 - GRAIN/CHIPS/GRAVEL	B - POLE 9 - CARGOTANK 10-FLAT BED 11-DUMP	12-CONCRETE MIXER 13-AUTOTRANSPORTER 14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 3 1	12 12 12	
	2 - HEAD LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 13-DISABLED FROM PRIOR ACCIDENT	99-OTHER UNKNOWN	6	6 6 6	
NON-MOTORIST LOCATION AT IMPACT	CRCSSWALK 2 - INTERSECTION - UNMARKED	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LICATOR	6 - BICYCLE LANE 7 - SHOULDER FROACSIDE 8 - SIDEWALK	9 - MEDIANCHOSSING ISLAND 10-DRIVEWAY ACCESS 11-SHARED USE PATHS OR TRAILS	12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER I UNIXAOWN	☐ -NO DAMAGE ☐ -TOP (13 (- ALL AREAS (15)	
ACTION	2-New-Collision 0,1	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 - DR VERLESS	13 - NEGOTIATING A CURVE 14 - EYTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING LOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18-APPROACHING OR LEAVING VEHICLE 19-STANDING 20-OTHER VOIN-MOTORIST 21-STANDING OUTSIDE DISABLED VEHICLE 99-OTHER / UNKNOWN	0 - NO DAMA	R TO UNIT 15 - VEHICLE NOT AT SCENE	
0 0	2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	7-LEFT OF CENTER 8-FOLLOWINGTOO CLOSE LACE 9-IMPROPER LANE CHANGE 10-IMPROPER PASSING 11-DROVE OFF ROAD	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION CBSTRUCTION 13 - CPERATING DEFECTIVE EQUIPMENT 17 - LOAD SHIFTING/FALLING/ SPILLING 20 - IVPROPER CROSSING	21 - LYING IM ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR IN TO ROADWAY 99 - OTHER IMPROPERACTION	TRAFFICWAY FLOW 1 - 0\E-WAY 2 - TW0-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
SEQUENCE	OF EVENTS	12 - IMPROPER BACKING				# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED	
	1 - OVERTURNIROLLOVER 2 - FIRE/EXP_OSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	EVENTS 11-CROSS CENTERLINE — OPPOSITE DIRECTION OF TRAVEL	16-RAILWAY VEHICLE 17-ANIWAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT	4	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING	
3-1-1	3 - IMMERSION 4 - JACKKNIFE 5 - CARGO LEQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10-CROSS MEDIAN	12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION 14-PEDESTRIAN 15-PEDALCYCLE	18-ANIMAL — DEER 19-ANIMAL — OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 2 TO	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 7 - SOUTHWEST 4 - WEST 8 - SOUTHWEST 8 - SOUTHWEST 9 - SOUTH	
41 3		31-GUARDRA L END	N WITH FIXED OBJEC 37-TRAFFIC SIGN POST	T - STRUCK 43-CURB	5C-WCRK ZONE MAINTENANCE		9 - OTHER / UNKNOWN	
5	26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER	38-OVERHEAD SIGH POST 39-LIGHT/LUMINARIES SUPPORT 40-UTILITY POLE	44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX	EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUYNEL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR	
6	28-BRIDGE PARAPET 29-BRIDGE RATL 50-GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	41-OTHER POST, POLE OR SUPPORT 42-CULVERT	BERT-84 TMARCYH ERIR-84	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED	
1	FIRST HARMFUL EVEN	T MOST	ARMFUL EVENT			2 5		
HSY8304 O	H1U 1/19 (760-0820)						PAGE 3 OF 5	

CHIED DEPARTMENT MOTORIST / NON-MOTORIST					LOCAL REPORT NUMBER											
							2,0,2,0,-,0,0,0,1,3,9,1,2									
0.1	BAUMBERGER, CARTER, SCOTT							DATE OF BIRTH AGE GENDER								
	STREFT, CITY, STATE, ZIP								0,2,0,6,2,0,1,19 M							
ADDRESS:	CHAPMAN DR ,Brimfield Twp ,OH 44240									CONTACT PHONE - INCLUDE AREA CODE						
	S INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT SEATING POSITION AIR RAG ISAGE EJECTION TRAD											TRAPPED				
<u>5</u>	J BY				USED 0 4					ELMET 0 , 1	1	1 1 1				
OL STATE					OFFENSE CHARGED LOCAL CODE			OFFENSE DES	RIPTION		CITATION	N NUMBER	,			
O, H	ENDORSEMENT	DECEMBER OF THE PROPERTY OF TH														
OL OLASS	SELECT UP TO 2	RESTRICTION SELEC		TRACTED		OHOL / DRUG SUSPI		CONDITION	STATUS	COHOL TEST TYPE VALUE		RUG TEST(S				
_4					1 OTHER DRUG			1	1	1	1	1	a 11 1			
UNIT #		FIRST, MIDDI F	-						DATE OF BIRTH		AGE	GENDER				
0,2	STREET, CITY, S	ER, DEJA, DEN	ISE						0 8 2 4 2 0 0 0 2 0 M							
1953 F		HURST AVE ,CI	NCINI	JATI	ΛU	45240			CONTACT	PHONE - INCLUDE AREA C	ODE					
NJURIES	INJURED	EMS AGENCY (NAME)	ITCINI			: MEDICAL FACILITY	INAME OUTVO	SAFETY EQUIPMENT		CEAVING BAGISTA						
ADDRESS: 1953 I INJURIES 5	TAKEN BY						(1446)2, (111)	USED 0 4	DOT-C	OMPLIANT SEATING POSITION	M AIR BAG USA 1	GE EJECTION	TRAPPED			
	OPERATOR I	ICENSE NUMBER		OFFEN	OFFENSE CHARGED LC			OFFENSE DESC	RIPTION	0 1	CITATION NUMBER					
OL STATE O H			•	333.0	333.03 cor			Maximum Sp	eed Limit	:s	61013					
DL CLASS	SELECT UP TO 2	RESTRICTION SELEC	DIST	/ER Tracted	ALCOHOL / DRUG SUSPECTED			CONDITION	ALCOHOL TEST STATUS TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT					
4	L				=	ALCOHOL MARIJUANA OTHER DRUG		1 1 .	1 1		1 1					
UNIT#	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH		AGE	GENDER			
اــــا																
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE			ODE					
NJURIES	INTURED	EMS AGENCY (NAME)				<u> </u>			LL_							
Z	TAKEN BY	EIIIS AGENOT (MAIME)		INJUKEDI	AKEN TO	: MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT	DOT-CO		AIR BAG USA	SE EJECTION	TRAPPED			
OL STATE	OPERATOR L	ICENSE NUMBER					OFFENSE DESC			CITATION	NUMBER	<u> </u>				
OL STATE							CODE									
OL CLASS	SELEC'UP 02	RESTRICTION		ER RACTED		DHOL / DRUG SUSPE		CONDITION	ALI STATUS T	OHOL TEST		UG TEST(S) PE R SULT				
			BY		=	LCOHOL MAR THER DRUG	LJUANA									
INJU	RIES	SEATING POSITION	Contract of the last	IR BAG		OL CLASS		OL RESTRIC	TION(S)	DRIVER DISTRACT		TEST STA				
1 - FATAL 2 - SUSPECTED S	SERIQUS INJURY	I - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPL 2* DEPLOYE			1 CLASS A 2 CLASS B		1-ALCOHO INTERI 2-CDL INTRASTATE	APAGE - 6 (86)	1 - NOT DISTRACTED		IONE GIVEN				
3 - SUSPECTED A		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3-DEPLOYE	D SIDE		3 CLASS C		3 - CORRECTIVE LEI		2 - MANUALLY OPERATING ELECTRONIC COMMUNI DEVICE (TEXTING, TYP)	CATION 3-TI	EST REFUSED Est given con				
5 - NO APPARENT		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYE 5 - NOT APPL		NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS A	BUS	DIALING)	4 TI	AMPLE/UNUSA Est given resi	NAME OF THE OWNER, OF THE OWNER, OF THE OWNER, OF THE OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER,			
INJURED T	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOYM	YMENT UNKNOWN 5 - M/G MOPED ONLY 6 - NO VALID OL				6-EXCEPT CLASS A & CLASS B BUS		COMMUNICATION DEVICE 5 TEST GIVEN, RES			2010 Edutions			
1 - NOT TRANSPO /TREATED AT		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	51	ECTION				7 - EXCEPT TRACTO	R-TRAILER	4-TALKING ON HAND-HEL COMMUNICATION DEVI	F	COHOL TES	TTVDE			
2 - EMS		(MOTORCYCLE SIDE CAR)	1-NOTEJEC			OL ENDORSEM H-HAZMAT	ENI	8 - INTERMEDIATE T RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE	AN 1-N	THE WOOD AND ADDRESS OF				
3-POLICE 9-OTHER/UNKN	WOWN	8 - THIRD - MIDDLE 9 - Third - Right Side	2 - PARTIALL 3 - TOTALLY E			M MOTORCYCLE P PASSENGER		9 - LEARNER'S PERI RESTRICTIONS	MIT	6 - PASSENGER	2 - Bi 3 - Ui	ALCOHOL: N				
SAFETY EQ		10-SLEEPER SECTION OF TRUCK CAB	4 NOTAPPL			N TANKER		10-LIMITED TO DAY!		7 OTHER DISTRACTION INSIDE THE VEHICLE	4 - 8/	REATH				
1 - NONE USED	OIT MENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	TR	APPED		Q - MOTOR SCOOTER R THREE WHEEL MOT	OUCAGE E	11 - LIMITED TO EMP 12 - LIMITED - OTHEI		8 - OTHER DISTRACTION OF THE VEHICLE	JTSIDE 5 01	HER				
2 - SHOULDER BE 3 - LAP BELT ONL		(NON-TRAILING UNIT BUS, PICK UP WITH CAP)	1 - NOTTRAP			S SCHOOL BUS	UNCTULE	13 - MECHANICAL DE (SPECIAL BRAKE	VICES	9-OTHER/UNKNOWN	1 N	ORUG TEST	TYPE			
4 - SHOULDER & I		12 - PASSENGER IN UNENCLOSED	and the second	CAL MEANS		T DOUBLE & TRIPLET X-TANKER / HAZMAT	RAILERS	CONTROLS, OR OT ADAPTIVE DEVICE	HER	CONDITION	2 BI	The state of the s				
5 - CHILD RESTRA FORWARD FAC		CARGO AREA 13-TRAILING UNIT	3 - FREED BY NON-MECI	HANICAL ME	ANS			14 - MILITARY VEHIC	LES ONLY	1 - APPARENTLY NORMAL 2 PHYSICAL IMPAIRMENT	3-UI 4 01					
6 - CHILD RESTRA		14 RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				GENDER F-FEMALE		15 - MOTOR VEHICLES AIR BRAKES	TUOHTIW	3 - EMOTIONAL (E.G. DEPRE	SED _i	G TEST RE	SIII T(S)			
7 - BOOSTER SEA	ī.	15 - NON-MOTORIST				M - MALE		16 - DUTSIDE MIRROR	b.,	4- ILLNESS	A	MPHETAMINES	3051(3)			
8 - HELMET USED 9 - PROTECTIVE F		99 - OTHER / UNKNOWN				U OTHER/UNKNOWN		17 PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP FAINTED FATIGUED, ETC.		ARBITURATES Enzodiazepine	,			
(ELBOW, KNEE	S, ETC.)									6 UNDER THE INFLUENCE OF MEDICATIONS / DRUG	4 04	INNABINOIDS				
10 - REFLECTIVE C	EDESTRIAN									/ALCOHOL 9-OTHER/UNKNOWN	5-00	ICAINE NATES / OPIOINS				
/ BICYCLE ONL 99 - OTHER / UNKN	NLY						, CONTERT GRANDWA			6 OPIATES/OPIOIDS 7 OTHER						
() () () () () () () () () ()	TO UNION THE										8 NE	GATIVE RESULT	rs			

OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER								
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и.	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
	01 GRADISHER, SOPHIA, KATHERINE							0,3,2	6,2,0	0 , 1 ,	1.9	F		
<u>~</u>	861 MISHLER RD ,Suffield ,OH 44260							CONTACT PHONE - INCLUDE AREA CODE						
861					60			· · · · · · · · · · · · · · · · · · ·			٠	, - ,		
INJUK	IES	INJURED TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FAS	CILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIA	SEATING POSITION	AIR BAG USA	GE EJECTIO	TRAPPED		
5		ВУ					0 4	MC HELME	0 3	1	1	. 1 .		
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<u>a</u>		STREET, CITY							NE - INCLUDE AREA CO			لــــــــــــــــــــــــــــــــــــــ		
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INJUR	1	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECT				ON TRAPPED		
5		ВҮ					0.4	MC HELME		1	1	1 1 .		
UNIT	#	NAME: LAS	ST, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER						
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ADDRI	ESS:	STREET, CITY	STATE ZIP		A STATE OF THE STA			CONTACT PHONE - INCLUDE AREA CODE						
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INJUR		INJURED TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	- POT C	SEATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED		
		ВҮ					USED	DOT-COMPLIA	INT					
UNIT	#	NAME: LAS	T, FIRST, MIDDLE					1	ATE OF BIRTH		AGE	GENDER		
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		BY					USED	MC HELME	NT I		Coconton	INALLED		
		INJU	IRIES	SAFET	EQUIPMENT USED	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SEATING POS	ITION		AIR BAG	USAGE			
1 - F.	ATA	L		1 - NONE US			T - LEFT SIDE		1 - NOT DE		3,1718.01			
2 - S	USP	ECTED SE	RIOUS INJURY		OCCUPANT		ORCYCLE DRIV T – MIDDLE	ER)	2 - DEPLO	YED FRON	Т			
B-164	3- 3031 COTED WINOK INJOKT			ER BELT ONLY USED	3 - DEPLOYED SIDE									
(F)40h	4 - POSSIBLE INJURY 3 - LAP BELT				ER & LAP BELT USED	4 - DEPLOYED BOTH								
5 - N	IO A I	PPARENT	INJURY		ESTRAINT SYSTEM -	ENGER) FRONT/SIDE								
-	100	INJURED	TAKEN BY	FORWAR			ND – MIDDLE ND – RIGHT SII	5 - NOT APPLICABLE DE 9 - DEPLOYMENT UNKNOWN						
		RANSPOR			ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE			040)						
2 E		AILD AI S	CEME	REAR FA			D - MIDDLE	CAR)		EJECT	ION			
3 - P		CE		8 - HELMET		9 - THIRI	D - RIGHT SIDE		1 NOT EJ			ED.		
E 15 12		R / UNKNO	OWN		IVE PADS USED		PER SECTION (
			NDER		KNEES, ETC.)		ENGER IN OTH		ATI THE UNIT					
F-FE	MAI	SECTION OF			IVE CLOTHING	BUS, P	ICK UP WITH CAP	P)						
M - M	ALE			11 - LIGHTING	G – PEDESTRIAN F ONLY		ENGER IN UNE O AREA	NCLOSED	1 MATTE	TRAPI	'E D	CONTRACTOR OF THE PARTY OF THE		
U - 0T	THEF	R/UNKNO	WN	99 - OTHER /			LING UNIT	1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL						
							IG ON VEHICLE TRAILING UNIT)	EXTERIOR MEANS						
						15 - NON-I			3 - FREED		ECHANIC	AL		
				reliant en		99 - OTHE	R/UNKNOWN		MEANS					
-	: LAS	FIRST MIDD	l			285		D	ATE OF BIRTH		AGE	GENDER		
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ESS									WIE OL RIK!H		AGE	GENDER		
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