OHIO DEPARTMENT TO SPETY SERVICE PARTICIPAL TO	RAFFIC CR	LOCAL REPORT NUMBER*								
PHOTOS TAKEN	DH-3		2 0 2 1 - 0 0 0 1 3 5 0 2							
SECONDARY CRASH	*	1 5017/50			NUMBER OF UNI					
	PRIVATE PRO		ity of Kent Pol	ice	0 6 7 0 3 2- UNSOLVED U 2			0 1 99 - UNKNOWN		
2.1	CLIY		LAGE, TOWNSHIP*					CRASH DATE / TIME*		
LO / / L 3-1	OWNSHIP						0 8 2 0 2 0 2 1		5 1 - FATAL 2 - SERIOUS INJURY	
ROUTE TYPE ROUTE NU		SOUTH	CATION ROAD NAME			ROAD TYPE	LATITUDE DE	SUSPECTED  3 - MINOR INJURY		
	4-1	WEST T	AIRCHILD			(A, V)	411.15.8	SUSPECTED		
ROUTE TYPE ROUTE NU	2-5	SOUTH	FERENCE ROAD NAME (R	OAD, MILEPOST, H	OUSE #)	ROAD TYPE	LONGITUDE of	CIMAL DEGREES	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE	
	4-1	WEST 41		1			-8 <sub>1</sub> 1 <sub>10</sub> 3 <sub>1</sub> 6 <sub>1</sub> 0	7   2   3	ONLY	
REFERENCE POINT 1 - INTERSECTION	DIRECTION FROM REFERENCE 1 - NORTH	IR - INT	ROUTE TYPE ERSTATE ROUTE(TP)	AL - ALLEY	ROAD TYPE HW-HIGHWAY R	D - ROAD		INTERSECTION		
3 2-MILE POST 3-HOUSE #	2-SOUTH		ERAL US ROUTE	AV - AVENUE	LA - LANE S	Q - SQUARE	WITHIN INTE	RSECTION OR ON	APPROACH	
	4 - WEST	SR - STA	TE ROUTE	BL - BOULEVARD CR - CIRCLE		T - STREET E - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES			
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE 1 - MILES		MBERED COUNTY ROUTE MBERED TOWNSHIP	CT - COURT		L -TRAIL		ROADWA	lΥ	
	2-FEET	ROL		DR - DRIVE	PI - PIKE V	/A - WAY	ROADWAY DIVIDED			
LOCATION	OF FIRST HARMFU				H COLLISION/IMPA	PT .	DIRECTION OF TRAVE	.	ALERIANITYON	
1 - ON ROADWA	Y 9-CR	OSSOVER .	1-	NOT COLLISION 4	- REAR-TO-REAR		1 - NORTH	1	WEDIAN TYPE VIDED FLUSH MEDIAN	
0 1 2-ON SHOULDI		IVEWAY/ALL	5 22	TWO MOTOR	5 - BACKING 5 - ANGLE		2-SOUTH	<4 FEET ) VIDED FLUSH MEDIAN		
4 - ON ROADSID 5 - ON GORE		ARED USE P		TRANSPORT 7	SIDESWIPE, SAME		3- EAST 4- WEST	(	≥4 FEET )	
6 - OUTSIDE TR	AFFIC WAY 13-BII	KE LANE	1		3 - SIDESWIPE, OPPO 9 - OTHER / UNKNOV			4 - DI	VIDED, DEPRESSED MEDIAN VIDED, RAISED MEDIAN	
7 - ON RAMP 8 - OFF RAMP		LL BOOTH HER / UNKNO	IWN					1	(NY TYPE) CHER/UNKNOWN	
WORK ZONE RELAT	TED.	W	DRK ZONE TYPE	LOCATIO	N OF CRASH IN WORK ZONE CONTOUR CONDITIONS			NS SURFACE		
	-	1-LAN	E CLOSURE		BEFORE THE 1ST		_	1 1 1 1 1 1		
WORKERS PRESEN			E SHIFT/CROSSOVER	2-	WARNING SIGN - ADVANCE WARNIN	G AREA	1 - STRAIGHT LEVEL	1-DRY	1 - CONCRETE	
LAW ENFORCEMEN	IT PRESENT L	OR N	EDIAN  ERMITTENT OR MOVING V		TRANSITION AREA		2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP,	
ACTIVE SCHOOL ZO	INE	5 - OTH			- ACTIVITY AREA - TERMINATION ARE	ĒΑ	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT	
LIGHT C	NOITIONO		WE	ATHER	4 - CURVE GRADE 4 - ICE 9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT,			3 - BRICK/BLOCK		
1 - DAYLIGHT			1-CLEAR	6 - SNOW			4-01HER/UNKNOWN	OIL, GRAVEL		
1 2- DAWN/DUSK 3- DARK - LIGH	TED ROADWAY	Ľ	0 1 2-CLOUDY		CROSSWINDS G SAND, SOIL, DIRT,	SNOW	]	6 - WATER (STAI MOVING)	NDING, 5 - DIRT	
	WAY NOT LIGHTED		4 - RAIN	9-FREEZIN	IG RAIN OR FREEZI			7 - SLUSH	9 - OTHER/UNKNOWN	
9 - OTHER / UNK	NOWN ROADWAY LI NOWN	GHIING	5 - SLEET, HAIL	99 - OTHER	/ UNKNOWN			9 - OTHER/UNKN	own	
NARRATIVE		1							Indicate the north	
UNIT 2 WAS I	FASTROID	NID ON	EAIDCHH D	AX/E					direction with an "N" on the	
									compass diagram.	
UNIT 1 WAS	ENTERIN	G THE	ROADWAY I	ROM A						
PARKING L	OT AND FA	AILED	TO YIELD TI	HE						
RIGHT OF V	VAY TO UN	NIT 2 C	AUSING UNI	Γ1						
AND UNIT 2	TO COLL	IDE. U	NIT 1 WAS							
			ELD ENTERII	VC					5	
		10 111	ELD ENTENI		Uni 1					
THE ROADV	VAY.				Unit 2 FAIRCHILD AVE.					
					416	FAIRCHILD A	VE.	NOT TO	BEALE	
,										
									_	
CRASH REPORTED D	DATE / TIME	Die	PATCH DATE / TIME	ADI	RIVAL DATE / TIME		CPENE OF FARES	DATE /TIME	DEDON'T TAVEN BY	
							SCENE CLEARED		REPORT TAKEN BY    X   POLICE AGENCY	
0   8   2   0   2   0   2   1   /   1   6   4   2   0   8   2   0   2   0   2   1   /   1   6   4   4   0   8   2   0   2   0   2   1   /   1   7   2    TOTAL TIME   OTHER									MOTORIST	
ROADWAY CLOSED INVI		TOTAL MINUTES	Auckland, K	yle	Bowen, Jared				SUPPLEMENT	
0 0 0 0	0 6 0		BY OFFICER'S BADGE N	IUMBER*	(CORRECTION OF ADDITION					
UUUUUU	, J U	$\mathbf{v}_1 \mathbf{o}_1 \mathbf{y}$	2 3	<b>0</b>	1 (1)	2   1	. 4	1	.1	



LOCAL REPORT NUMBER

2 0 2 1 - 0 0 0 1 3 5 0 2

	UNIT#		T, MIDDLE (X SAME AS DRIVER)		OWNER PHONE: IN	HOF AREA COOF FINE SAME AS ORIVERS	DAMAGE				
띰		CARMEN, BRAND DDRESS: STREET, CITY, STATE		<del></del>	نــا	-	DAMAGE SCALE				
NMO		KELEY ST .Kent .O					3 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
2		CIAL CARRIER: NAME, ADDR			Caumencial Cappie	R PHONE: INCLUDE AREA CODE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN				
			,		I I I I	I I I I I I	DAMAGED AREA(S)				
	LP STATE	LICENSE PLATE #	VEHICL	E IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		ATE ALL THAT APPLY			
	O H	JGP5170		B, B, 6, 4, U, 3, 7, 4,			12	40			
	INSURAL VERIFI	NCE INSURANCE COMP		NSURANCE POLICY #	COLOR	VEHICLE MODEL	11	11 12 1			
	X VERIFI	TREXIS ONE II	NSURANCE 1	434006369937	BLU	AVALON	10 11 1 2	10			
		TYPE OF USE	THE CHEROCALON	US DOT #	TOWED BY: COMPAN	IY NAME	10 2	15,5000,2			
	COMME	RCIAL GOVERNMENT	IN EMERGENCY L		J		9 9 3	3 9 9			
ĺ	INTER	LOCK	#OCCUPANTS VE	HICLE WEIGHT GVWR/GCWR	MATERIAL	OUS MATERIAL CLASS # PLACARD ID #					
	DEVICE	E I I HIT/SKIP UNI		1 - ≤10K LBS 2 - 10,001 - 26K LBS	RELEASED	anno ii - manito 18 ii	8 / 4 3 / 6	8 7 9 5 4			
			0 3	3 - >26K LBS	PLACARD	<u></u>	7 6 5	12 7 5			
		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER		12			
	0 1	3 - SPORT LITH ITY VEHICLE	9 - AUTOCYCLE		19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/_	11 2			
	UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED		21 - HEAVY EQUIPMENT	26-BICYCLE	9	9 3 3			
		5 - CARGO VAN	BICYCLE	16-FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR	27 - TRAIN	<del>-</del>	• N • —			
ш		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4			
CF	$\Box$	# OF TRAILING UNITS					12	5 12			
VEHICL		WAS VEHICLE OPERATING IN AU	TONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12	6 11 12			
>	2	MODE WHEN CRASH OCCURRED	. 0	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION		10 11 1 2	10 11 1 2			
		1-YES 2-NO 9-OTHER/UNK	MOTOTION	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		10 2	10 2			
ı		1 - NONE	MODE LEVEL  6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	9 9 3	9 9 3			
	0 1 1		7 - EUS - INTERCITY		17 - MOWING	99-OTHER/UNKNOWN	B 7 5 74	7 5 74			
	SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SKUTTLE		18-SNOW REMOVAL	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		6			
	FUNCTION		9 - BUS - OTHER		19-TOWING		6	6			
		5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12			
	0 1 1 1	1 - NO CARGO BODY TYPE /NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	CHAPPIP	8 - POLE	12 - CONCRETE MIXER	12				
	CARGO		4 - LOGGING	/ ALBCOMENICHO DOCD DOM	9 - CARGOTANK	13-AUTOTRANSPORTER	. 8.8				
	BODY TYPE			7 CDAINICHIDEICDANEI	10 - FLAT BED 11 - DUMP	14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 ( ) 3 9	3 9 7 3 9 8 3			
ŀ		1 - TURN SIGNALS	4 - BRAKES				0	000			
			5 - STEERING		9 - MOTOR TROUBLE 10 - Disabled from Prior	99 - OTHER / UNKNOWN	6				
	DEFECTS		6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT	i		6 6 6			
2		1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 FIRST RESPONDED	- NO DAMAGE (	0] - UNDERCARRIAGE [14]			
		CROSSWALK	4 - MIDBLOCK - MARKED		10 - DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	□-TOP [13]	□-ALL AREAS [15]			
	NON-MOTORIST LOCATION	2 - INTERSECTION – UNMARKED CROSSWALK	CROSSWALK	B - SIDEWALK	11 - SHARED USE PATHS OR	99 - OTHER / UNKNOWN	- The Case of the				
	AT IMPACT	CRUSSWALK	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		UNIT NOT AT SCENE [16]				
			1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18-APPROACHING	ATTIMI	L POINT OF CONTACT			
	, 5	2-NON-COLLISION 3-STRIKING LO 8	2 - BACKING 3 - Changing Lanes	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19-Standing	0 - NO DAMAG				
	ACTION	4- STRIKING PRE-CRASH	4 - OVERTAKING/PASSING		15 - WALKING, RUNNING	20 - OTHER NON-MOTORIST	0 4 1-12 - REFER	TO UNIT 15 - VEHICLE NOT AT SCENE			
		5- BOTH STRIKING ACTIONS	5 - MAKING RIGHTTURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGRA	M 99 - UNKNOWN			
		& STRUCK	6 - MAKING LEFT TURN	IN TARRET IS	16 - WORKING 17 - Pushing Vehicle	DISABLED VEHICLE 99 - OTHER / UNKNOWN	13 - TOP				
ŀ		9 - OTHER / UNKNOWN		TE - DIL TERELLO	17 - FUSINING VEHICLE	77-UIDEK/UNKNUWN		TRAFFIC			
			7 - LEFT OF CENTER	DARWER BROITING	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
	0. 3		B - FOLLOWING TOO CLOSE / ACD/ 9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
	0 2	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/	ROADWAY	2 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
s)	CONTRIBUTING CIRCUNSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	24 1119414 11111	SPILLING 20 - IN PROPER CROSSING	99 - OTHER IMPROPER ACTION		3-FEASHER 6-NO CONTROL			
빍		6 - IMPROPER TURN	12-IMPROPER BACKING		20 - 14 7 NOT EN GROSSING		# OF THROUGH LANES	RAIL GRADE CROSSING			
EVE	SEQUENÇE	OF EVENTS		EVENTO			2	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING			
ш	1 2 1 0 1	1 - OVERTURN/ROLLCVER	6 - EQUIPMENT FAILURE	EVENTS 11-CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
		2 - FIRE/EXP_OSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17 - ANIMAL — FARM	EQUIPMENT		I MOTODIOT DISCOURS			
			B - RAN OFF ROAD RIGHT	12_DOWNHILL DINAWAY	18-ANIMAL — DEER 19-ANIMAL — OTHER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NOI	N-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST			
	2[]		9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	13-OTHER NON-COLLISION	20 - MOTOR VEHICLE IN	ANYTHING SET IN MOTION By a motor vehicle		2 - SOUTH 6 - YORTHWEST			
	21 : 1	LOSS OR SHIFT	TO DUDGE INCREME	14-PEDESTRIAN	TRANSPORT	24 - OTHER MOVABLE CBJECT	FROM 1 TO				
	3[]		COLLISIO	N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE - STRUCK			4 - WEST 8 - SOUTHWEST			
	411_1	A COACH CHOUSE	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN			
		2/ PRIDGE OUEDUEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER		44 - DITCH	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED			
	511_1	STRUCTURE	34 - MEDIAN GUARDRAIL	CHARGET	45 - EMBANKMENT 46 - FENCE	52 - BUILDING	0 1 0	1 - STATED / ESTIMATED SPEED			
		27 - BRIDGE PIER OR ABUTMENT	BARRIER	40 - UTILITY POLE	47 - MAILBOX	53 - TUNNEL	<u> </u>	2 - CALCULATED / EDR			
	61	29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	OR SUPPORT	48 - TREE	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
		30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	49-FIRE HYDRANT	ST STREET BUILDING	2 -				
	1	FIRST HARMFUL EVEN	т 💶 мостн	ARMFUL EVENT			2 5				



LOCAL REPORT NUMBER  $2 \cdot 0 \cdot 2 \cdot 1 \cdot - 0 \cdot 0 \cdot 0 \cdot 1 \cdot 3 \cdot 5 \cdot 0 \cdot 2$ OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER) NUMBER BURNE, The DE ARTS PROF TEAME AS DRIVE DAMAGE 0 | 2 | METRO, SHERI, A DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP ( SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 2429 ROYALWOOD RD , BROADVIEW HTS ,OH 44147 → 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 # VEHICLE IDENTIFICATION # INDICATE ALL THAT APPLY VEHICLE YEAR **VEHICLE MAKE**  $_{1}1_{1}J_{1}4_{1}G_{1}A_{1}3_{1}9_{1}1_{1}9_{1}7_{1}L_{1}1_{1}0_{1}1_{1}1_{1}3_{1}1$ OH TAYSJEP  $2 \cdot 0 \cdot 0 \cdot 7$ Jeep **INSURANCE COMPANY** INSURANCE POLICY # INSURANCE VERIFIED COLOR VEHICLE MODEL **GEICO** 4416342923 **BLK** WRANGLER TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED INTERLOCK CLASS # PLACARD ID # 1 - ≤10K LBS HIT/SKIP UNIT DEVICE 2 - 10,001 - 26K LBS PLACARD 0 1 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEFLED 13. SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 0 1 3 - SPORT LTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNIT TRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) # OFTRAILING UNITS WAS VEHICLE OPERATING IN ALLTONOMOUS 0 - NO AUTOMATION 12 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-OTHER/HINKNOWN 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - EUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0 1 2 - TAXI 7 - BUS - INTERCITY 12-MILITARY 17 - MOWING 99-OT-LER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13-POLICE 18 - SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14-PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTO TRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-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/UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10-DISABLED FROM 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 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [ 15 ] HON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99-OTHER/UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS AT IMPACT - 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 OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 5 3-STRIKING LO 1 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 19-STANDING 1-12 - REFERTO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 99 - UNKNOWN 21 - STANDING OUTSIDE 11-SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK 6 - MAKING LEFT TURN IN TRAFFIC 9 - OTHER / UNKNOWN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 12 - DRIVERLESS TRAFFIC 1 - NONE 7-LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT EQUIPMENT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 0 1 1 2 - TW0-WAY 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 2 4 - RAN STOP SIGN 10-IMPROPER PASSING 19-LOAD SHIFTING/FALLING/ ROADWAY CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID 3 - FLASHER 6 - NO CONTROL SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING 6 - IMPROPERTURN 12 - IMPROPER BACKING # of THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS \_2 , 2 - INVOLVED-ACTIVE CROSSING **EVENTS** 1 2 0 1 - OVERTURN/ROLLCVER 2 - FIRE/EXP\_OSION 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -3 - INVOLVED-PASSIVE CROSSING 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE 7 - SEPARATION OF UNITS OPPOSITE DIRECTION OF EQUIPMENT 17 - AHIMAL - FARM TRAVEL 23 - STRUCK BY FALLING, UNIT / NON-MOTORIST DIRECTION 3 - IMMERSION 18-ANIMAL - DEER B - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - VORTHEAST 19-ANIMAL - OTHER ↓ 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13-OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - VORTHWEST 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT \_ то ∟3\_ г LOSS OR SHIFT 7 - SOUTHEAST 3 - EAST 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 BARRIER 38-OVERHEAD SIGN POST 44 - DITCH **EQUIPMENT** UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51 - WALL 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED SUPPORT 34 - MEDIAN GUARDRAIL 52-BUILDING 46-FENCE 27 - BRIDGE PIER OR ABUTMENT [0] 2 | 5 | BARRIER 40 - UTILITY POLE J 2 - CALCULATED / EDR 53-TUNNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41-OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE POSTED SPEED 3 - UNDETERMINED 29 - BRIDGE RAIL RARRIFR OR SUPPORT 99 OTHER/UNKNOWN 49 - FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT , 2 , 5 , 1 MOST HARMFUL EVENT J FIRST HARMFUL EVENT

OHIO DEP	CHIO DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER						
sainti alam								2,0,2,1,-,0,0,0,1,3,5,0,2,						
UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
0.1	CARMEN, BRANDON, MICHAEL								0 4 / 0 2 / 1 9 9 6 2 5 M					
	STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
Ö	ERKELEY ST ,Kent ,OH 44240										<del>-</del>			
Ż	TAKEN					MEDICAL FACILITY	MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED				
OL STATE	BY	TOTALE MUMBER		OFFERN	T OLLAR		1	0,4	MC HELMET 0 1					
i i				OFFENS		GED	LOCAL		E DESCRIPTION			NUMBER		
O, H,	ENDORSEMENT	NDORSEMENT RESTRICTION SELECT UP TO 3 DRIV							Driving onto Roadway 148			RUG TEST(S		
UL CLX33	SELECT UPTO 2	RESTRICTION SELECT		TRACTED	_	COHOL MAI		CONDITION	STATUS T				T SELECT UP TO 4	
4	L	J		1	ОТ	HER DRUG		1	_1	1	1	1 , , , ,		
UNIT #	NAME: LAST,	FIRST, MIDDLE							DATE OF BIRTH AGE GENDE				GENDER	
0,2	BOOT	HE, TAYLOR, RI	ENEE						0 6	/ <b>0 9</b> / <b>1</b>	9 9 9	2 2	F	
	STREET, CITY, S	TATE, ZIP							CONTACT	PHONE - INCLUDE AREA C	ODE.			
2429 I	ROYAL	WOOD RD ,BRO	<b>ADVI</b>	EW H	TS,	OH 44147			L				1	
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION				TRAPPED	
	BY							0.4	MC HE	LMET 0 1	<u>. 1</u>	_ _1_	11	
OL STATE	OPERATOR I	LICENSE NUMBER		OFFENS	E CHAR	GED	LOCAL	OFFENSE DESC	RIPTION		CITATION	NUMBER		
5				<u> </u>										
2 OL CLASS	SELECT UP TO 2	RESTRICTION SELECT	DIST	VER TRACTED		COHOL MAI	ECTED Rijuana	CONDITION	STATUS T	YPE VALUE		RUG TEST(S	T SELECTUPTO 4	
4			BY	1	=	HER DRUG	KWUMNA	. 1 .	1	1	1	1		
UNIT #	NAME: LAST,	FIRST, MIDDLE										GENDER		
	STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
TOR														
INJURIES INJURIES		EMS AGENCY (NAME)		INJURED T	AKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	MENT DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED					
ON /	TAKEN BY				USED			MC HELMET						
OL STATE	OPERATOR	LICENSE NUMBER		OFFENSE CHARGED LOCAL OFFEN			OFFENSE DESC	SCRIPTION CITATION NUMBER						
50														
≥ OL CLASS	SELECT UP 10 2	RESTRICTION SELECT	DIST	VER TRACTED		COHOL MAI		CONDITION	ALC STATUS IN	YPE VALUE		RUG TEST(S PE   RESULT	T SELECTOPIOA	
			BY		=	HER DRUG	RLJUANA		<u> </u>					
INJU	IRIES	SEATING POSITION	A	IR BAG		OL CLAS	S	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST STA	TUS	
1 - FATAL	CONTOUR IN COM	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP			1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTED		NONE GIVEN		
3- SUSPECTED	SERIOUS INJURY MINOR INJURY	2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATING ELECTRONIC COMMUN	ICATION 3.1	TEST REFUSED Test given, con	TAMINATED	
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOYE	ED BOTH FRO	NT/SIDE	4 - REGULAR CLASS		4 - FARM WAIVER		DEVICE (TEXTING, TYP DIALING)	'ING,	SAMPLE / UNUSA	ABLE	
5 - NO APPAREN	IT INJURY	(MOTORCYCLE PASSENGER)	5 - NOT APP	LICABLE Ment unkno	WN	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HANDS-FF	(CL	FEST GIVEN, RES FEST GIVEN, RES		
	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	, screen	VIRIO		6 - NO VALID OL		& CLASS B BUS		4 -TALKING ON HAND-HE	.D l	UNKNOWN		
1 - NOT TRANSP /TREATED AT		7-THIRD - LEFT SIDE	ΕJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	AN AL	LCOHOL TES	ST TYPE	
2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 8-THIRD - MIDDLE	1 - NOT EJE			H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVICE		NONE Blood		
9-OTHER/UNK	(NOWN	9-THIRD - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY			M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	mli	6 - PASSENGER 7 - OTHER DISTRACTION	3-1	URINE		
SAFETY	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP			N - TANKER		10 - LIMITED TO DAY 11 - LIMITED TO EMI		INSIDE THE VEHICLE 8 - OTHER DISTRACTION OF		BREATH OTHER		
1 - NONE USED	WENT WENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		Q - MOTOR SCOOTER  R - THREE WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		THE VEHICLE		Bill Hard	TVPE	
2 - SHOULDER B		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA			S - SCHOOL BUS	one I VLL	13 - MECHANICAL DI (SPECIAL BRAK	EVICES	9 - OTHER / UNKNOWN	Annual Sections	DRUG TEST None	TYPE	
3 - LAP BELT ON 4 - SHOULDER &	LY USED LAP BELT USED	12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	ITED BY IICAL MEANS		T - DOUBLE & TRIPLE		CONTROLS, OR O	THER	CONDITION	2 - 8	BLOOD		
5 - CHILD REST	RAINT SYSTEM -	CARGO AREA 13 - TRAILING UNIT	3 - FREED B	Y Chanical Mi	FANS	X - TANKER / HAZMAT		14 - MILITARY VEHI		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN		URINE OTHER		
FORWARD FA	RAINT SYSTEM –	14 - RIDING ON VEHICLE EXTERIOR				GENDER		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G., DEPRE	SSED		CCIU Too	
REAR FACING	G	(NON-TRAILING UNIT) 15 - NON-MOTORIST				F - FEMALE M - MALE		16 - OUTSIDE MIRRO	R	ANCRY, DISTURBED) 4 - ILLNESS	And in case of	UG TEST RE	THE RESERVE AND ADDRESS.	
8 - HELMET US		99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC ALL	)	5 - FELL ASLEEP, FAINTED		BARBITURATES		
9 - PROTECTIVE (ELBOW, KNI	PADS USED							18-OTHER		FATIGUED, ETC.  6- UNDER THE INFLUENCE	E 40	BENZODIAZEPIN Cannabinoids	IES	
10 - REFLECTIVE										OF MEDICATIONS / DRU / ALCOHOL	63	COCAINE		
11 - LIGHTING - I										9- OTHER / UNKNOWN		OPIATES/OPIOI	DS	
99 - OTHER / UNK												OTHER NEGATIVE RESU	LTS	

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER						
_								2,0,2,1,-,0,0,1,3,5,0,2,						
	UNIT # NAME: LAST, FIRST, MIDDLE  O1 PADDONI I ADISSA III I ANIA								TE OF BIRTH		AGE	GENDER		
Ę	01 BARRON, LARISSA, ULIANA ADDRESS: STREET, CHY, STATE, ZIP								2 / 2 (		2 0	_F_		
OCCUPANT	1546 S WATER ST ,Kent ,OH 44240								- INCLUDE AREA CO	DDE				
000	INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT								Legazino Bocivion			len coope		
	. 5 .	TAKEN USED USED 0, 4,						DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
H	UNIT #								E OF BIRTH		AGE			
	01							1	1, / ,2 (	0.3	17	GENDER		
PANT	ADDRESS:	STREET, CITY	STATE, ZIP			CONTACT PHONE			1 /					
OCCUPAN	48 OA	KHUF	RST DR ,Munr	oe Falls ,O	H 44262			<u></u>						
0	INJURIES	TAKEN	EMS AGENCY (NAME)	<u> </u>	INJURED TAKEN 10: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
	5	ВҮ					0.4	MC HELMET	0,4	1 1	_1_	1		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE			_		DAT	E OF BIRTH		AGE	GENDER		
ļ.	ADDRESS	STREET, CITY,	CTATE TIP											
OCCUPANT	ADDRESS:	: 31 KEE1, CITT,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
000	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT			SEATING POSITION AIR BAG USA			E EJECTION	TRAPPED		
	1 1	TAKEN BY				USED	DOT-COMPLIANT	SERTING PUSITION	AIR BAG USAG	E ESECTION	IKAPPED			
T	UNIT#	NAME: LAS	T, FIRST, MIDDLE	-				DAT	E OF BIRTH		AGE	GENDER		
										GENDER				
PANI	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN														
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO. MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
L			JRIES	CAFETY	COULDMENT HOED		بيا	MC HELMET		<u></u>	1			
	1 - FATA		RIES	1 - NONE US	EQUIPMENT USED	Notice and the second	T - LEFT SIDE	ITION		AIR BAG L	JSAGE			
	2 - SUSI	PECTED SE	RIOUS INJURY		OCCUPANT (MOTORCYCLE			ER)	1 - NOT DE 2 - DEPLO					
	3 - SUSI	PECTED MI	NOR INJURY		R BELT ONLY USED	T – MIDDLE T – RIGHT SIDE	2 DEBLOYED CO							
		SIBLE INJU		3 - LAP BELT	R & LAP BELT USED	4 - SEC0	ND - LEFT SID							
	5 - NO A	PPARENT	INJURY		STRAINT SYSTEM -		ORCYCLE PASS ND – MIDDLE	ENGER)	PLICABLE					
ı			TAKEN BY	FORWARD			ND – RIGHT SI	DE	9 - DEPLOY		KNOWN			
		TRANSPOR ATED AT S		6 - CHILD RE	STRAINT SYSTEM – CING		D – LEFT SIDE ORCYCLE SIDE	CAR)	EJECTION  1 - NOT EJECTED  2 - PARTIALLY EJECTED  3 - TOTALLY EJECTED  4 - NOT APPLICABLE					
	2 - EMS			7 - BOOSTER	SEAT		O - MIDDLE							
	3 - POLI			8 - HELMET			D – RIGHT SIDE PER SECTION (							
	9 - OTHE	ER / UNKNO			IVE PADS USED (NEES, ETC.)		ENGER IN OTH							
1	F-FEMA		IDER	10- REFLECT	IVE CLOTHING	BUS, P	ICK-UP WITH CAP	)						
	M - MALE			11 - LIGHTING / BICYCLE	G – PEDESTRIAN 12 - PASSENGER IN UNE			NCLOSED	TRAPPED  1-NOTTRAPPED					
	U - OTHE	R / UNKNO	WN	99 - OTHER / L		13 - TRAIL			2 - EXTRICATED BY MECHANICAL			ΔL		
						14 - RIDING ON VEHICLE (NON-TRAILING UNIT)		EXIERIOR	MEANS					
						15 - NON-N	MOTORIST R/UNKNOWN		3 - FREED MEANS	3 - FREED BY NON-MECHANIC MEANS				
	NAME: LAS	T, FIRST, MIDD	LE			33- OTHE	K / ONKNOWN	DAT	E OF BIRTH		AGE	GENDER		
WITNESS									_ / /		NuL.	GENDER		
MIT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COE	E		V m		
3														
25	NAME: LAS	IT, FIRST, MIDD	LE					DAT /	E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
3			<u> </u>					A THE						
S	NAME: LAS	T, FIRST, MIDD	LE			<u> </u>		DAT	E OF BIRTH		AGE	GENDER		
WITNESS	Annores	STREET OUT.	STATE 710											
×	VNN4F22:	STREET, CITY,	STALE, ZIP					CONTACT PHONE	CONTACT PHONE - INCLUDE AREA CODE					