OF PUBLIC SAFETY TRAFFIC CRASH REPORT *DENOTES MANDATORY F	IELD FOR SUPPLEMENT REPORT	L	CAL REPORT NUMBER*		
T PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION		2,0,2,3,-	0_0_0_0_4_2_6_5		
OH-1P OTHER REPORTING AGENCY NAME*	OH-1P OTHER REPORTING AGENCY NAME* NCIC*				
COUNTY* LOCALITY* I-CITY LOCATION: CITY, VILLAGE, TOWNSHIP*	$\lfloor 0 \rfloor 6 \lfloor 7 \rfloor 0 \rfloor 3 \rfloor$	1 - SOLVED L 12 - UNSOLVED CRASH DATE / T	0 1 98 - ANIM [0 1 99 - UNK IME* CRASH SEVERITY	KNOWN	
6 7 2 -VILLAGE Kent		0 3 1 8 2 0 2 3	11215 5 1-FATAL		
N. MODELL	ROAD TYPE	LATITUDE DEC	2 - SERIOUS INJU	JRY	
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH LOCATION ROAD NAME S - SOUTH S - SOUTH CRAIN 3	$\mathbf{A}_{L}\mathbf{V}_{L}$	41,158	0 6 5 3 - MINOR INJUR' SUSPECTED	:Y	
ROUTE TYPE ROUTE NUMBER PREFIX N-NORTH S-SOUTH E-EAST W-WEST W-WEST	HOUSE #) ROAD TYPE	LONGITUDE DE			
	$S_{\perp}T_{\perp}$	$-81_{0}35_{0}$	1 8 0 S PROPERTY DA	4MAGE	
REFERENCE POINT DIRECTION ROUTE TYPE 1-INTERSECTION PROW REFERENCE IR - INTERSTATE ROUTE (TP) AL - ALLEY	ROAD TYPE HW-HIGHWAY RD - ROAD		NTERSECTION RELATED		
1 2-MILE POST 4 S-SOUTH US-FEDERAL US ROUTE AV - AVENUE	LA - LANE SQ - SQUARE	l	RSECTION OR ON APPROACH		
DISTANCE DISTANCE CR - NUMBERED COUNTY ROLLTE	D MP-MILEPOST ST - STREET OV - OVAL TE - TERRACE	☐ WITHIN INTER	RCHANGE AREA NUMBER OF APPRO	ACHES	
1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE	PK - PARKWAY TL - TRAIL PI - PIKE WA - WAY		ROADWAY		
5 2 3-YARDS ROUTE HE - HEIGHTS	PL - PLACE	ROADWAY DIV	IDED	W	
	SH COLLISION/IMPACT 4 - REAR-TO-REAR	DIRECTION OF TRAVEL	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
0 6 3 IN MEDIAN 13 PAYIMAY CRAPE CROSSING 1 TWO MOTOR	5 - BACKING 6 - ANGLE	N - NORTH S - SOUTH	1 - DIVIDED FLUSH MEDIAN (<4 FEET)	-	
4 - ON ROADSIDE 12-SHARED USE PATHS OR TRANSPORT	7 - SIDESWIPE, SAME DIRECTION	E - EAST W - WEST	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)		
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 3- HEAD-ON	8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN		3 - DIVIDED, DEPRESSED MI 4 - DIVIDED, RAISED MEDIA		
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UNKNOWN			(ANYTYPE) 9 - OTHER/UNKNOWN		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ION OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS SURFAC	CE	
1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST WORK ZONE WARNING SIGN	1	1 2	_i	
I I AW ENCODEEMENT DECENT	2 - ADVANCE WARNING AREA 3 - TRANSITION AREA		1 - DRY 1 - CONCRETE		
ACTIVE COLLOCK TONIE	4 - ACTIVITY AREA 5 - TERMINATION AREA	2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 2 - BLACKTOP BITUMING ASPHALT	óus,	
LIGHT CONDITION WEATHER	J-1ERMINATION AREA	4 - CURVE GRADE	4 - ICE 3 - BRICK/BLO		
1 - DAYLIGHT 1 - CLEAR 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, QIL, GRAVEL 4 - SLAG, GRA STONE	AVEL,	
2 - DAWN/DUSK 7 - SEVEF 3 - DARK - LIGHTED ROADWAY 2 - CLOUDY 7 - SEVEF 3 - FOG, SMOG, SMOKE 8 - BLOWN	E CROSSWINDS NG SAND, SOIL, DIRT, SNOW		6-WATER (STANDING, MOVING) 5-DIRT		
4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZ	ING RAIN OR FREEZING DRIZZLE R/UNKNOWN		7 - SLUSH 9 - OTHER/UN	IKNOWN	
9 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN		
NARRATIVE			Indicate th	with	
UNIT 1 WAS TRAVELING WESTBOUND ON CRAIN	_		an "N" on i compass di		
AVE. A CABINENT DOOR ON THE PASSENGER	_				
SIDE OF THE VEHICLE CAME OPEN AND	-		_		
STRUCK A UTILITY POLE LOCATED NEAR THE	147 CRAIN AVE.	PRIVATE DRIVE	(\$ z=)		
NORTHWEST CORNER OF THE INTERSECTION	POINT OF IMPACT —	TILITY POLE	CRAIN AVE.		
AT CRAIN AVE./N. DEPEYSTER ST.	UNIT 1			-	
INVESTIGATION REVEALED THAT THE			•	_	
OPENING OF THE DOOR WAS THE RESULT OF	Not To Sca	/e 1 \ \	N.DEPENSIER ST.		
EQUIPMENT FAILURE AND HAPPENED VERY	\	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
SHORTLY BEFORE THE POLE WAS STRUCK.					
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME	RRIVAL DATE / TIME	SCENE CLEARED	DATE/TIME REPORT TAKEN	N RV	
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$					
TOTAL TIME OTHER TOTAL OFFICER'S NAME*	CHECKED BY OFF	ICER'S NAME*	MOTORIST		
ROADWAY CLOSED INVESTIGATION TIME MINUTES Bowen, Jared OFFICER'S BADGE NUMB	Bowen, J	ared BY OFFICER'S BADGE	SUPPLEMEN (CORRECTION OR 10 AM EXISTING REPORT)	ADDITIO	
$\begin{vmatrix} 0 & 0 & 0 & 0 & 3 & 0 & 0 & 4 & 6 & 2 & 1 & 4 & 4 & 4 & 4 & 4 & 4 & 4 & 4 & 4$	2 1	4	1		

LOCAL REPORT NUMBER

 $\begin{bmatrix} 2 & 0 & 2 & 3 & -1 & 0 & 0 & 0 & 0 & 4 & 2 & 6 & 5 \end{bmatrix}$

						2 0 2 3 - 0	0 0 0 0 4 2 0 3
0.1	OWNER NAME: LAST, FIRST CITY OF KEN DRESS: STREET, CITY, STATE,	NT FIRE DEP	ARTMENT	CWNER PHONE: INCLU Redacted per OF	DE AREA CODE (SAME AS DRIVER) RC 149.43 (A)(1)(mm	· ·	DAMAGE AMAGE SCALE
320 DI	EPEYSTER ST	T.Kent.OH 4	3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
	IAL CARRIER: NAME, ADDRE			9 - UNKNOWN			
				MAGED AREA(S)			
LP STATE	LICENSE PLATE #		IDENTIFICATION # $[T_13_14_10_1C_1S_1T_1]$	$2 \begin{bmatrix} 1 \end{bmatrix} \begin{bmatrix} VEHICLE YEA \\ 2 \end{bmatrix} \begin{bmatrix} 2 \end{bmatrix} \begin{bmatrix} 0 \end{bmatrix} \begin{bmatrix} 0 \end{bmatrix}^2$		INDICA	ATE ALL THAT APPLY
	INSURANCE COMPA		SURANCE POLICY #	COLOR	Seagrave VEHICLE MODEL	11 12	11 12
X INSURAN VERIFIE	US SPECIA	\mathbf{LTY} INS. $\begin{vmatrix} \mathbf{n} \\ \mathbf{p} \end{vmatrix}$	KG81410292	YEL	ACUICLE MODEL	10 12 2	10 12
	TYPE OF USE		US DOT #	TOWED BY: COMPANY	NAME	10 2	10.
COMME	RCIAL X GOVERNMENT	IN EMERGENCY LL	1	114747000	IC MATERIAL	9 3 3	3 9 9 3
INTERL	оск	#UUGUPANIS	ICLE WEIGHT GVWR/GCWR 1 - ≤10K L8S.		US MATERIAL LASS # PLACARD ID #		8 4 7
INTERL DEVICE EQUIPE	ED HIT/SKIP UNIT		2 - 10,001 - 26K LBS 	B. RELEASED PLACARD		6	8 6 4
	1 - PASSENGER CAR		12-GOLF CART	18-LIMO (LIVERY VEHICLE)	23-PEDESTRIAN/SKATER	6	11 12 7 6
. 2. 0.	2 - PASSENGER VAN (MINIVAN)		13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANYTYPE)	10 /	11 2 1
UNIT TYPE	3 - SPORT UTILITY VEHICLE		14-SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST	<u></u>	10 2
	4 - PICK UP 5 - CARGO VAN	DIOVOLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - TRAIN	9	9 🖼 3
		11 - ALL TERRAIN VEHICLE	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	$\overline{\lambda}_{\mathbf{g}}$	/Tel 5 74
0	# OF TRAILING UNITS	(ATV / UTV)				12	7 6 5 12
1	WAS VEHICLE OPERATING IN AUT	CONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	6 - IINKNUMI	11 12 1	6 11 12 1
	MODE WHEN CRASH OCCURRED?	_	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION	A - MARMOMAN	10 11 1 2	10 11 1 2
2	1-YES 2-NO 9-OTHER/UNKN		2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		10 2	10 2
	1 - NONE	MODE LEVEL 6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	0 3 4	8 3 4 3
			12-MILITARY	17 - MOWING	99-OTHER/UNKNOWN	B 7 5 4	8 7 6 4
CDECIAL	3 - ELECTRONIC RIDE SHARING		13 - POLICE	18-SNOW REMOVAL		7 6 5	7 6
	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		14 - PUBLIC UTILITY	19-TOWING		6	6
			15 - CONSTRUCTION EQUIPMENT				12 12 12
$\mathbf{I}_{\perp}\mathbf{U}_{\perp}\mathbf{I}_{\perp}$	1 - NO CARGO BODYTYPE : /NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	5 - INTERMODAL CONTAINER CHASSIS	B - POLE 9 - CARGO TANK	12-CONCRETE MIXER	12	
CARGO BODY	2 - BUS		6 - CARGO VAN/ENCLOSED BOX	10-FLAT BED	13-AUTOTRANSPORTER 14-GARBAGE/REFUSE	o Ma	
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99-OTHER/UNKNOWN		3 9 1 3 9 8 3
		4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6	
VEHICLE			8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR		·	6 6 6
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		☐ - NO DAMAGE	[0]
	ADADAMATIK		6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER	_	<u> </u>
NON-MOTORIST	CROSSWALK 2 - INTERSECTION – UNMARKED	ODOCCIALLY	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS	AT INCIDENT SCENE 99-OTHER/UNKNOWN	☐-TOP [13]	-ALL AREAS [15]
LOCATION AT IMPACT	ADAGAULL IZ	5 -TRAVEL LANE - OTHER LOCATION	O - SIVE WALK	11-SHARED USE PATHS OR Trails	Vinani samoni	UNI	IT NOT AT SCENE [16]
	1-NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING		
3		2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	1 NITI 0 - NO DAMA	AL POINT OF CONTACT GE 14 - UNDERCARRIAGE
ACTION			9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	1	RTO UNIT 15 - VEHICLE NOT AT SCENE
	5- BOTH STRIKING ACTIONS		10 - PARKED 11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGR	
	& STRUCK	6 - MAKING LEFTTURN	IN TRAFFIC	16 - WORKING	DISABLED VEHICLE	13 - TOP	
	9-OTHER / UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN	Ţ-	TRAFFIC
		7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA	13 - IMPROPER START FROM A PARKED POSITION	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
$0_{1}1_{1}$			14-STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22-NOT DISCERNIBLE 23-OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN
	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15-SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/	ROADWAY	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
CIRCUMSTANCES	1	11 - DROVE OFF ROAD	16 - WRONG WAY	SPILLING 20-IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES	
SEQUENCE		12 - IMPROPER BACKING			·	# OF THROUGH LANES	RAIL GRADE CROSSING 1 - NOT INVOLVED
JEWUENUE	. UF EVEN 13		NON-COLLISION			2	1 2 - INVOLVED-ACTIVE CROSSING
1 0 6		•	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING
		7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	OPPOSITE DIRECTION OF Travel	17-ANIMAL — FARM 18-ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NO	ON-MOTORIST DIRECTION
$_{2}$ 0 $_{2}$		O DANI OFF DOAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL - OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST
	5 - CARGO / EQUIPMENT	TO COOCE MENTAN	13-OTHER NON-COLLISION 14-PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE	FROM 1 3 1 TO 1	2 - SOUTH 6 - NORTHWEST 4 1 3 - EAST 7 - SOUTHEAST
3 4 0	LOSS OR SHIFT		15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	FROM S TO	4 - WEST 8 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
	OF IMPACT ATTENUATOR		WITH FIXED OBJEC		FA LUADIA TANIF TANIF TANIF		9 - OTHER / UNKNOWN
4	LANGOU AUGUSTAN	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CURB 44 - Ditch	50 - WORK ZONE MAINTENANCE EQUIPMENT	UNIT SPEED	DETECTED SPEED
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 - WALL		1 - STATED / ESTIMATED SPEED
5	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	SUPPORT 40 - UTILITY POLE	46-FENCE 47-MAILBOX	52 - BUILDING 53 - Tunnel	0,2,0	2 - CALCULATED / EDR
Ī.,		35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	48 - TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED
61	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99-OTHER/UNKNOWN	LOSIED SPEED	2 CHOCIEMBIAED
2 .		2				2 , 5 ,	
	FIRST HARMFUL EVEN	ı ∟ Most H⊿	ARMFUL EVENT				1

OFF PUBLIC BAFFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER										
UNIT #									2 (L2 + 0 + 2 + 3 + - + 0 + 0 + 0 + 0 + 4 + 2 + 6 + 5 + DATE OF BIRTH AGE GENDER							
0,1									DATE OF BIRTH AGE GENDER 1 1 1 2 5 1 9 8 2 4 0 M								
	DRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE						
(2)												ORC ₁ 149.43 (A)(1)(mm)					
H	TAKEN BY	EMS AGENCY (NAME)		IŅJUREDI	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 0 4		T-COMPLIAN		N AIR BAG	USAGE	JECTION 1	TRAPPED		
OL STATE									0 1	CITAT	ION NUN	MBER					
O H	Redact	ted per ORC 4501	:1-12				CODE					İ					
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U	DIST	/ER RACTED	_	HOL / DRUG SUSPI		CONDITION	STATUS	ALCOHO TYPE		STATUS	DRUG TYPE	IEST(S) RESULT	SELECT UP TO 4		
	_N		BY	1		HER DRUG	KIJUANA	1 1	, 1	1	_	. 1	. 1				
UNIT#	NAME: LAST,	FIRST, MIDDLE			Olympia and the second		7711		** . W	D/	ATE OF BIRTH			AGE	GENDER		
Appres	OTDEET DITY O	TATE WO							<u></u>		<u> </u>			ليلا			
O ADDRESS:	STREET, CITY, S	IATE, ZIP							CONTA	CT PHO	NE - INCLUDE AREA (CODE					
INJURIES		EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			SEATING POSITIO	N AIR BAG	USAGE	EJECTION	TRAPPED		
ION /	TAKEN By							USED	MC WC	T-COMPLIAT HELMET	NII	_					
OL STATE	OPERATOR I	LICENSE NUMBER		OFFEN	SE CHAR	GED	LOCAL	OFFENSE DESC	RIPTION	I	1	CITA	TION NUI	MBER			
OL CLASS	ENDORSEMENT	RESTRICTION SELECT U	PTO3 DRIV	/ER	AI CO	HOL / DRUG SUSP	ECTED	CONDITION	سين	ALCOHO	I TEST		DBITC	TEST(S)			
OL OLAGO	SELECT UP TO 2	RESTRICTION SELECTO		RACTED			RIJUANA	CONDITION	STATUS		VALUE	STATUS	TYPE		SELECT UP TO 4		
	L				ОТ	HER DRUG					• — — —				لاللا		
UNIT#	NAME: LAST,	FIRST, MIDDLE								D	ATE OF BIRTH		1	AGE	GENDER		
ADDRESS:	STREET, CITY, S	TATE, ZIP			*****				CONT	CT PHO	NE - INCLUDE AREA	CODE	_		<u> </u>		
OTOR.												1 '		1	, ,		
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	□D0.	T-Complia HELME	SEATING POSITION	N AIR BAI	G USAGE	EJECTION	TRAPPED		
OL STATE	OPERATOR I	LICENSE NUMBER		OFFEN	SE CHAR	OED.	LIGON	<u> </u>			r				لا		
E COLONIA	-, -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			J OFFEN	or onak	MAL W	LOCAL	OFFENSE DESC	WIL 1101	RIPTION CITATION NUMBER							
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U		/ER (RACTED	ALCO	HOL / DRUG SUSP	ECTED	CONDITION	STATUS	ALCOHO	L TEST VALUE	STATUS	DRUG TYPE	TEST(S) Selectorio		
			BY	MAGILE	=	COHOL MA	RIJUANA		JIMIUS	"""	VALUE	STATUS	ITPE	KESULI	SELECTOP 104		
And the state of the state of	JRIES	SEATING POSITION	L	IR BAG		OL CLAS	s	OL RESTRIC	TION(S) <u>D</u> F	RIVER DISTRAC	TION	LLLLI TE	ST STA	TUS		
1 - FATAL 2 - Süspected	SERÍOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - COL INTRASTAT	\$1.00 miles	CE 1-	NOT DISTRACTED Manually operatio		1 - NONE	GIVEN			
3 - SUSPECTED	MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYE	D SIDE		3-CLASS C		3 - CORRECTIVE LE			MANUALLY UPERATI ELECTRONIC COMMU DEVICE (TEXTING, TY	NICATION		GIVEN, CON	ITAMINATED		
4 - POSSIBLE IN 5 - NO APPAREN		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYE 5 - NOT APP		INT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS	A BUS		DIALING) Talking on Hands-F		N. 186 36 1	LE / UNUSA Given, res	ABLE Sults known		
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOYN	AENT UNKN	OWN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS & CLASS B BUS	a 1.65 11 11		COMMUNICATION DE Talking on Hand-Hi	VICE	5 - TEST (Unkno	GIVEN, RES Own	SULTŜ		
1 - NOT TRANSP 7 TREATED A		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO	0.000		COMMUNICATION DEV OTHER ACTIVITY WIT	VICE	ALCO	HOL TE	ST TYPE		
2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 8-THIRD – MIDDLE	1 - NOT EJEC	CTED		H - HAZMAT		8 - INTERMEDIATE RESTRICTIONS			ELECTRONIC DEVICE		1 - NONE 2 - BLOOD				
9 - OTHER/UNK	KNOWN	9 - THIRO - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY	EJECTED		M - MOTORCYCLE P - Passenger		9 - LEARNER'S PER RESTRICTIONS			PASSENGER OTHER DISTRACTION		3 - URINE				
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP	LICABLE		N -TANKER Q - Motor Scooter		10 - LIMITED TO DAY 11 - LIMITED TO EM		8-	INSIDE THE VEHICLE OTHER DISTRACTION	14 15 KW VI	4 - BREAT 5 - OTHER	9 10 4 6			
1 - NONE USED 2 - Shoulder e		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	14. 1 - Nottrai	RAPPED		R - THREE-WHEEL M	OTORCYCLE	12 - LIMITED - OTHI			THE VEHICLE Other / Unknown		DRU	G TEST	TYPE		
3 - LAP BELT OF	NLY USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - EXTRICA	TED BY		S - SCHOOL BUS T - Double & Triple	TRAILERS	13 - MECHANICAL D (Special Brak Controls, or C	ES, HAND		CONDITION		1 - NONE 2 - BLOOK				
5 - CHILD REST		12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - FREED B			X - TANKER / HAZMAT		ADAPTIVE DEV	(CES)	130	APPARENTLY NORMA	L	3 - URINE				
FORWARD FA	ACING	13 - TRAILING UNIT 14 - Riding on Vehicle Exterior	NON-MEC	CHANICAL M	ILANS	GENDE	প্রকর্ম ব্রুক্টা ১ ভূমিকুল ব্রুক্ট	15 - MOTOR VEHICLI		T 3.	PHYSICAL IMPAIRME Emotional (e.g., dep		4 - OTHEI				
	REAR FACING (NON-TRAILING UNIT)				F-FEMALE AIR BRAKES M-MALE 16-OUTSIDE MIR)R	A North Control	ANGRY, DISTURBED) ILLNESS			TEST R Etamines	ESULT(S)			
8 - HELMET US	ED	99-OTHER/UNKNOWN				U - OTHER / UNKNOWN	v.	17 - PROSTHETIC AI 18 - OTHER	0	5-	FELL ASLEEP, FAINTE FATIGUED, ETC.	D,	2 - 8AR8	ITURATES			
9 - PROTECTIVE (ELBOW, KN	EES, ET.C.)							TA-ALLEY		6-1	UNDER THE INFLUEN OF MEDICATIONS / DR		and district the second	ODIAZEPIN Abinoids	ÆS		
10 - REFLÈCTIVE 11 - LIGHTING -											OT MICOTOATIONS / DR /ALCOHOL OTHER / UNKNOWN		5 - COCAI	3,3645	ne		
/ BICYCLE O	NLY									y-!	VIOEK/UNKNUWN		6 - OPTAT 7 - OTHE	ES/0P1011 R	υδ		
99 - OTHER/UNI	Mark Control					is a layed	4.34						8 - NEGA	TIVE RESU	LTS		

	September Affective Occupant / Witness Addendum							LOCAL REPORT NUMBER						
	UNIT # NAME: LAST, FIRST, MIDDLE							(2,0,2,3,-,0,0,0,4,2,6,5,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-						
	Ol BYRNES, CHRISTOPHER, J								DATE OF BIRTH AGE GENDER 0 7 0 6 1 9 9 1 3 1 M					
Į.	ADDRESS: STREET, CITY, STATE, ZIP								0 + 7 + 0 + 6 + 1 + 9 + 9 + 1 3 + 1 M CONTACT PHONE - INCLUDE AREA CODE					
CCUPAN									er QRC	149.43				
		INJURED TAKEN BY	EMS Agency (NAME)	TO THE COMPLIANT I	SEATING POSITION		.							
	5		· · · · · · · · · · · · · · · · · · ·		<i>y</i>	v s	$\lfloor 0 \rfloor 4 \rfloor$	☐ MC HELMET	_0 _5_		_1	1		
	UNIT#		T, FIRST, MIDDLE OTICAT RIPAT	DIEVS				ļ	OF BIRTH		AGE	GENDER		
I N							1 1 2 CONTACT PHONE			5 ₁ 7 ₁	<u>M</u>			
OCCUPAN	320 S DEPEYSTER ST, Kent, OH 44240							Redacted			(A)(1)	(mm)		
ă-		INJURED TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: Medical Facilit	Y (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION					
	_ 5_	BY			USED LO 14				0 3	1	1_	_1		
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OCCUPAN	AUUKE35:	. orkeel, GITY,	OTATE, AIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
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ı	5023a (1 5 0 m	STEERING CONTRACTOR	TAKEN BY	FORWAR	D FACING	6 - SEC0	ND – RIGHT SI	DE 9 - DEPLOYMENT UNKNOWN						
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NAME: LAST, FIRST, MIDDLE						DA	E OF BIRTH		AGE	GENDER				
ADDRESS: STREET, CITY, STATE, ZIP						L CONTACT TO		<u> </u>		1				
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