OF PUBLIC SAFETY TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT							LOCAL REPORT NUMBER*				
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION									0 _ 0 _ 0 _	0 3 8	6,2,
OTHER REPORTING AGENCY NAME*							NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS		N ERROR 8 - ANIMAL
	☐ PRIVATE P	ROPERTY	City of Ke	ent Police	â	L O L	6,7,0,3	L 2 - UNSOLVED	.0 .2 .	$\begin{bmatrix} 0_{\perp} 2_{\parallel} \end{bmatrix}$	9 - UNKNOWN
COUNTY* LOCALITY*		CRASH DATE / TIME * CRASH SEVERITY									
3-1	VILLAGE KE	**************************************		0/3/2/2/2/0/2/5//1/2/0/9/ 5 2 - SERIOUS INJURY							
B I		- SOUTH	LOCATION ROAD	NAME			ROAD TYPE	LATITUDE DE		SUSPE 3 - MINOF	00007-001-0000
	<u> </u>	- WEST	RIVER				$S \perp T$	41,15,2		SUSPE	CTED
ROUTE TYPE ROUTE NU	2	- SOUTH	REFERENCE ROA	D NAME (ROAD,	MILEPOST, H	OUSE #)	ROAD TYPE	LONGITUDE DE	(i) 527 152		Y POSSIBLE RTY DAMAGE
	<u> </u>	- WEST	MAIN				ST	-8 ₁ ,3 ₆ 1		ONLY	
REFERENCE POINT 1 - INTERSECTION	DIRECTION FROM REFERENCE 1 - NOR	IR - I	ROUTE TYPE NTERSTATE ROU	Contractor to	- ALLEY	ROAD TYPE HW-HIGHWAY R	D - ROAD		INTERSECTION RE		
1 2- MILE POST 3- HOUSE #	2 2-SOU 3-EAS	TH US-F	EDERAL US ROU	1.	- AVENUE		Q - SQUARE	_		PROACH	
	4 - WE	ST SR-S	STATE ROUTE	CR	- BOULEVARD - CIRCLE		T - STREET E - TERRACE	WITHIN INTE	RCHANGE AREA	NUMBER OF	APPROACHES
DISTANCE FROM REFERENCE	UNIT OF MEASUR 1 - MIL	RE	NUMBERED COUN	CT	- COURT		L - TRAIL		ROADWAY		
1.5.0	2 2-FEE	T F	ROUTE	DK.	- DRIVE - HEIGHTS	PI - PIKE W	/A - WAY	ROADWAY DIV	IDED		
	N OF FIRST HARM			MANI	NER OF CRAS	H COLLISION/IMPA	СТ	DIRECTION OF TRAVE	_ N	EDIAN TYPE	
1 - ON ROADWA		ROSSOVER	1157466566		ACCEN	- REAR-TO-REAR		1 - NORTH	1 - DIVI	DED FLUSH N	MEDIAN
0 1 3-IN MEDIAN			ALLEY ACCESS ADE CROSSING	6 TWO	MOTOR	5 - BACKING 5 - ANGLE		2 - SOUTH 3 - EAST	2 - DIVI	FEET) DED FLUSH N	MEDIAN
4 - ON ROADSID 5 - ON GORE		SHARED USE TRAILS	PATHS OR	TRAI 2 - REAF		7 - SIDESWIPE, SAME 3 - SIDESWIPE, OPPO		4 - WEST		FEET) DED, DEPRES	SED MEDIAN
6 - OUTSIDE TR	ALLIO WAL	BIKE LANE TOLL BOOTH		3 - HEAD		9 - OTHER / UNKNOV				DED, RAISED (TYPE)	MEDIAN
7 - ON RAMP 8 - OFF RAMP		OTHER / UNK	NOWN						325000	ER/UNKNOWN	í
WORK ZONE RELAT	TED		WORK ZONE TYP	PE	LOCATIO	N OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS		SURFACE
WORKERS PRESEN			ANE CLOSURE ANE SHIFT/CROS	COVED	1	BEFORE THE 1ST V	WORK ZONE	_1_	1		2
LAW ENFORCEMEN		, 3-W	ORK ON SHOULD		1 7	- ADVANCE WARNING AREA 1 - STRAIGHT LEVEL 1 - DRY				1-00	NCRETE
EAW ENFORCEMEN	VI PRESENT		R MEDIAN NTERMITTENT OF	R MOVING WORK		-TRANSITION AREA - ACTIVITY AREA		57 0.00 (0.00	2 - WET		ACKTOP, TUMINOUS,
ACTIVE SCHOOL ZO	ONE	5 - 0	THER		5	TERMINATION ARE	EA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE		PHALT
	CONDITION		0	WEATHE	ER	9 - OTHER/UNKNO			5 - SAND, MUD, DIR	-	ICK/BLOCK AG, GRAVEL,
1 - DAYLIGHT 2 - DAWN/DUSK			1-CLI		6 - SNOW 7 - SEVERE	OW OIL, GRAV VERE CROSSWINDS 6-WATER (S				0.000	ONE
3 - DARK - LIGH		ED		[1] [1] 이 기업을 보고 있다면 하면 10 [1] (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		G SAND, SOIL, DIRT, IG RAIN OR FREEZI			MOVING)		HER/UNKNOWN
	DWAY NOT LIGHT NOWN ROADWAY		4 - RA 5 - SLI	EET, HAIL		/ UNKNOWN	NG DRIZZLE		7 - SLUSH 9 - OTHER/UNKNOV	vn	
9 - OTHER / UNK	NOWN										
NARRATIVE										dire	icate the north
UNIT 1 AND 2	WERE DI	RIVING	NORTH	BOUND C	ON						'N'' on the npass diagram.
RIVER ST. UI	NIT 1 WAS	S IN TH	IE LEFT I	LANE.							
UNIT 2 WAS								W?MAIN?ST		_	
TRIED TO TU										_	
PARKING LO								RIV	VER?ST	ŞZ _	
UNIT 1 IN TH	IE LEFT I	LANE. U	UNIT 2 ST	RUCK		<u>Li</u> BF	RARY	===		Vot To Se	cale
UNIT 1.									May 1		
								1	\		
									I		
									[
								I.	1 1		
					(Sec.)						
CRASH REPORTED D			ISPATCH DATE /			RIVAL DATE / TIME		SCENE CLEARED I			TAKEN BY E AGENCY
0,3,2,2,0,2,5		_			0,3,2,2				5,/,1,2,3,4,	МОТО	
TOTAL TIME ROADWAY CLOSED INVE	OTHER ESTIGATION TIME	TOTAL MINUTE		s name* oll, Sean I)	K	unka. L	cer's NAME* eonard B			.EMENT
				OFFICER'S BAL				BY OFFICER'S BADGE N	IUMBER*	(CORREC	CTION OR ADDITION ING REPORT SENT TO ODPS)
0 0 0 0	1 0	0.3	4 2	2 0		and the	2 , 5	0 1	i i		

OF PU	BELIC SAFETY UNIT						0, 0, 0, 0, 3, 8, 6, 2,			
UNIT #	OWNER NAME: LAST, FIRS			OWNER PHONE: INC.	UDE AIEA CODE (S SAME AS DRIVER) R ORC 149.43(A)(1)		DAMAGE			
-	LOGAR, SYD		LACE	INCONCIEDIC	.rt Orto 140.40(A)(1)	1 - NONE 3 - FUNCTIONAL DANAGE				
4403 I	EDSON RD ,B	rimfield Twp	,OH 44240			2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
COMMERC	CIAL CARRIER: NAME, ADDR	ESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: ENCLUDE AREA CODE	9 - UNKNOWN				
LP STATE	LICENSE PLATE #		LE IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		AMAGED AREA(S) ATE ALL THAT APPLY			
$\mathbf{O}_{\mathbf{H}}$	KNA1697		$S_1B_1MB_3O_5$		_ Chettore	11 12 1	11 12			
X INSURA VERIFI	NCE INSURANCE COMP. FARMERS		INSURANCE POLICY # 191127375	WHI	TRAX	10 12 2	10 12 2			
	TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPAN		10 2	10 2 -			
COMME	RCIAL GOVERNMENT	RESPONSE	EHICLE WEIGHT GVWR/GCWR		US MATERIAL	9 9 3 4	3 9 3 4			
DEVIC	E HIT/SKIP UNIT	T #UCCUPANTS	1 - ≤10KLBS. 2 - 10,001 - 26KLBS.	RELEASED	CLASS # PLACARD ID #	8 7 6 4	8 7 5 5			
EQUIP		7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS.	18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	7 6 5	12 7 6			
0.3	2 - PASSENGER VAN (MINIVAN)			19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10	11 1 2			
UNITTYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED		20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - BICYCLE	9	10 2 3			
	5 - CARGO VAN	BICYCLE		22 - ANIMAL WITH RIDER OR	27 -TRAIN	_	8 11 4			
00	0 - VAN (913 3CA13)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4			
00_	# of TRAILING UNITS		a Properties and Secretary		(T) (1.0000000-00	11 12 1	6 11 12			
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED			3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	9 - UNKNOWN	10 11 1 2	10 11 1 2			
2	1-YES 2-NO 9-OTHER/UNK	OWN AUTONOMOUS	3	5 - FULL AUTOMATION		9 10 2 3	3 9 9 3			
	1 - NONE	6 - BUS - CHARTER/TOUR		16-FARM	21 - MAIL CARRIER		8 4			
0,1	2 FLECTRONIC DIDE CHARING	7 - BUS - INTERCITY 8 - BUS - SHITTLE		17 - MOWING 18 - SNOW REMOVAL	99 - OTHER / UNKNOWN	8 7 6 5 4	8 7 6 5 4			
SPECIAL FUNCTION		9 - BUS - OTHER		19-TOWING		6 6	7 6 5			
	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT		And the Annual Control of the Annual Control	9	12 12 12			
[0,1]	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHE MOTOR VEHICLE	0111.0010	8 - POLE 9 - CARGOTANK	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER	12				
CARGO BODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	10-FLAT BED	14-GARBAGE/REFUSE	98 83 9	3 9 1 3 9 1 3			
TYPE			The contract of the contract o	11-DUMP	99 - OTHER / UNKNOWN					
VEHICLE		4 - BRAKES 5 - STEERING		9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR	99 - OTHER / UNKNOWN	6				
		6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		□- NO DAMAGE	0]			
	CDOCCUUALV	3 - INTERSECTION - OTHER		9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE	— □- TOP [13]	- ALL AREAS [15]			
NON-MOTORIST	2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	B - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	99 - OTHER / UNKNOWN	<u></u>				
AT IMPACT	***************************************	5 - TRAVEL LANE - OTHER LOCATI		TRAILS		∐ - UNI	T NOT AT SCENE [16]			
	A 11011 AN LITATON	1 - STRAIGHT AHEAD 2 - BACKING		13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	18-APPROACHING OR LEAVING VEHICLE	1000 NOVE 1000 N	L POINT OF CONTACT			
4 ACTION	3-STRIKING UI	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	0 - NO DAMA	GE 14 - UNDERCARRIAGE TO UNIT 15 - VEHICLE NOT AT SCENE			
ACTION	5 - BOTH STRIKING ACTIONS	4 - CVERTAKING/PASSING 5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 -STANDING OUTSIDE	DIAGR 13-TOP	AM 99 - UNKNOWN			
	& STRUCK 9-OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN TRAITIO	16-WORKING 17-Pushing Vehicle	DISABLED VEHICLE 99 - OTHER / UNKNOWN	15-101	TRAFFIC			
	5/19/20/20	7 - LEFT OF CENTER	13 - IMPROPER START FROM A	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
0.4		8 - FOLLOWING TOO CLOSE / AC 9 - IMPROPER LANE CHANGE	DA PARKED POSITION 14-STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
<u>0</u> 1	4 - RAN STOP SIGN	10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/	ROADWAY	12 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
CONTRIBUTING CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	15 1100010 11111	SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS	ZE-JIII IOI EN DIONITO				ON ROAD	1 - NOT INVOLVED			
1 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	16-RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
1 2 0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17 - ANIMAL — FARM	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NO	N-MOTORIST DIRECTION			
2		8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	18-ANIMAL — DEER 19-ANIMAL — OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST			
		10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 2 TO	1 3 - EAST 7 - SOUTHEAST			
3	2000 Ort Shift I	CULLIER	15-PEDALCYCLE ON WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE	EV-VIII EN MOVABLE UDJEVI		4 - WEST 8 - SOUTHWEST			
4_	LADIAH AHAHIAH	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50-WORK ZONE MAINTENANCE EQUIPMENT	er e	9 - OTHER / UNKNOWN			
	26-BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	44 - DITCH 45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED			
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	AO HITH ITW DOLF	46-FENCE 47-MAILBOX	52 - BUILDING 53 - TUNNEL	$\begin{bmatrix} 0_{\perp} 2_{\perp} 5_{\perp} \end{bmatrix}$	2 - CALCULATED / EDR			
4 1 1 .	28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE	48 - TREE	54-OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
6		36 - MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN					

2 5

LOCAL REPORT NUMBER 2 . 0 . 2 . 5 . - . 0 . 0 . 0 . 0 . 3 . 8 . 6 . 2 . OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) OWNER PHONE: INCLUDE ASEA CODE (SAME AS DE REDACTED PER ORC 149.43(A)(1) WILLIAMS, VIC, M DAMAGE SCALE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 1 - NONE 3 316 DALE DR 102 ,Kent ,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) INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** LP STATE LICENSE PLATE # VEHICLE YEAR VEHICLE MAKE 2 0 0 8 Honda 5, F, NY, F, 1, 8, 5, 9, 8, B0, 1, 8, 1, 1, 4 O H KCK3507 INSURANCE VERIFIED **INSURANCE COMPANY** INSURANCE POLICY # COLOR VEHICLE MODEL PROGRESSIVE BLK983619580 PILOT TYPE OF USE US DOT# TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR INTERLOCK DEVICE #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS RELEASED HIT/SKIP UNIT 2 - 10.001 - 26K LBS EQUIPPED $0_{\perp}4$ PLACARD J 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 0 3 - SPORT UTILITY VEHICLE 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNITTYPE 4 - PICKUP 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 ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV/UTV) 00 # OF TRAILING UNITS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 16-FARM 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 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 - 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 0.1 / NOTAPPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER 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 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR VEHICLE 2 - HEAD LAMPS 5 - STEERING DEFECTIVE ACCIDENT **DEFECTS 3-TAIL LAMPS** 6 - TIRE BLOWOUT - NO DAMAGE [0] - UNDERCARRIAGE [14] 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 12-FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [15] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11-SHARED USE PATHS OR LOCATION CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS AT IMPACT 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 0 3 3 - CHANGING LANES 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 3___ 3-STRIKING 0 - NO DAMAGE 14 - UNDERCARRIAGE 19-STANDING SPECIFIED LOCATION 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY 1-NONE 7 - LEFT OF CENTER TRAFFIC CONTROL TRAFFICWAY FLOW 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 EQUIPMENT 23 - OPENING DOOR INTO 0.9 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN 1 ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 1 2 0 1 - OVERTURNIROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 16-RATI WAY VEHICLE 22 - WORK ZONE MAINTENANCE 11 - CROSS CENTERLINE -OPPOSITE DIRECTION OF EQUIPMENT 2 - FIRE/EXPLOSION 17 - ANIMAL - FARM 7 - SEPARATION OF UNITS

2L		3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	TRAVEL 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 CARGOOR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	UNIT / NON-M	OTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
				N WITH FIXED OBJEC	T - STRUCK			9 - OTHER / UNKNOWN
4[25 - IMPACT ATTENUATOR / CRASH CUSHION	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
5	نب	26-BRIDGE OVERHEAD STRUCTURE 27-BRIDGE PIER ORABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER	39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMBANKMENT 46 - FENCE 47 - MAILBOX	51 - WALL 52 - BUILDING 53 - TUNNEL	0,2,0	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR
6∟	ш	28-BRIDGE PARAPET 29-BRIDGE RAIL 30-GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	48-TREE 49-FIRE HYDRANT	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED
		FIRST HARMFUL EVEN	T 1 MOST H	IARMFUL EVENT			5	

OFF PUBLIC BAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER								
SAFETY - MERVI	CE - PROTECTION	010K131 / 140) IA – IA I	1010	K12	ı			2 0	2 5 - 0	$0_{\perp}0_{\perp}$	0 3	8 6	_2		
UNIT#	NAME: LAST	, FIRST, MIDDLE								DATE OF BIRTH			AGE	GENDER		
0,1	LOGA	R, SYDNEY, WAI	LLAC	\mathbf{E}					1 2	$12 \cdot 0 \cdot 2 \cdot 0$	101	1 2	2 3	F		
	STREET, CITY, S		OTT		^				CONTACT PHONE - INCLUDE AREA CODE							
0		RD ,Brimfield Tw	р ,ОН						REDACTED PER ORC 149.43(A)(1)							
INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	USED	Прот-с∘	SEATING POSIT	ION AIR BA	G USAGE	EJECTION	TRAPPED		
5	BY				=			0_4_		LMET 0 1		<u> </u>		L		
OLSTATE	OPERATOR LICENSE NUMBER OFFEN REDACTED PER ORC 4501:1-12				E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITA	TATION NUMBER				
O, H,	ENDORSEMEN			WED.	41.0	OHOL / DRUG SUSPE		CONDITION	AL O	COHOL TEST		DRUG	TEST(S)		
- UL GLASS	SELECT UP TO 2			TRACTED	_	LCOHOL MAR		CONDITION	STATUS T		STATUS			SELECTUPTO4		
4		ے سے سے ا		1		THER DRUG		1	_1	1	_1_	_1_	ا ا	لسالسال		
UNIT #	NAME: LAST	FIRST, MIDDLE						Å		DATE OF BIRTH	-	\top	AGE	GENDER		
0,2	WILL	IAMS, VIC, M							0 7	2 2 2 2 0	$0_{\perp}0_{\perp}$	4 2	2 0 1	F		
	STREET, CITY, S									PHONE - INCLUDE AREA						
316 D	ALE DI	R 102 ,Kent ,OH 4	4240						REDA	CTED PER	ORC	149.	43(A)	(1)		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-C:		ION AIR BA	G USAGE	EJECTION	TRAPPED		
ON _ 5	BY							0_4	∟ МС НЕ	LMET 0 1		1	_1_	_1_		
OL STATE	OPERATOR REDAC	LICENSE NUMBER CTED PER ORC 450	1:1-12	OFFENS		RGED	LOCAL	OFFENSE DESC	RIPTION		2000000000000	TION NU	UMBER			
OH				331.1			X	Signals Befor			285	28586				
OL CLASS	SELECT UP TO 2		DIST	VER TRACTED	_	CHOL / DRUG SUSPE	E CTED RIJUANA	CONDITION	STATUS T	YPE VALUE	STATUS		RESULT	SELECTUPTO4		
. 4	1 10	1 2 12 1 2 2 2	BY	1	=	THER DRUG	NOONIN	1 .	1	1	1 1	1	1 1	E 11 3		
UNIT#	NAME: LAST	, FIRST, MIDDLE			_					DATE OF BIRTH		Т	AGE	GENDER		
										1 1 1 1	T E	111	1-1-1			
ADDRESS:	STREET, CITY, S	STATE, ZIP							CONTACT	PHONE - INCLUDE AREA	CODE					
TOR											1	1 1				
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□ DOT-C	SEATING POSIT	ION AIR BA	G USAGE	EJECTION	TRAPPED		
	BY							- L	Ш мс не	LMET			ىـــا	ш		
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITA	TION NU	UMBER			
			- I		1000.707			5 30 00 00 00 00 00 00 00 00 00 00 00 00	AL C	COHOL TEST		DDU	TEST(S			
OL CLASS	SELECT UP TO 2			TRACTED		DHOL / DRUG SUSPE		CONDITION	STATUS T		STATUS			SELECTOP 104		
			_ .		=	THER DRUG				_ •	نـــا			لـــالـــالـــ		
	RIES	SEATING POSITION		IR BAG		OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DISTRA	CTION	State of the last	EST STA	TUS		
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERAT	INC AN	1 - NONE	E GIVEN REFUSED			
3 - SUSPECTED		2 - FRONT - MIDDLE	3- DEPLOYE			3 - CLASS C		3-CORRECTIVE LE		ELECTRONIC COMMI	JNICATION	3-TEST	GIVEN, CON	TAMINATED		
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOYE 5 - NOTAPP	ED BOTH FROM	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARMWAIVER	Due	DIALING)			PLE / UNU SA GIVEN, RES	ULTS KNOWN		
5 - NO APPAREN	INJURY	(M0TORCYCLE PASSENGER)		MENT UNKNO	WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS		3 - TALKING ON HANDS COMMUNICATION DE		5 - TEST	GIVEN, RES			
1 - NOT TRANSP	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	D TDAILED	4 - TALKING ON HAND-P COMMUNICATION DE			NOWN .			
/TREATED AT	Programme and the second	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)		ECTION	75	OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WI	THAN	1 - NONE		ST TYPE		
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOTEJE	CTED LY EJECTED		H - HAZMAT M - MOTORCYCLE		9-LEARNER'S PER	MIT	6 - PASSENGER		2 - BL00				
9 - OTHER / UNK	NOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS		7 - OTHER DISTRACTION		3 - URIN 4 - BREA				
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY 11 - LIMITED TO EMI		8 - OTHER DISTRACTION		5 - OTHE				
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		R. THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		9 - OTHER / UNKNOWN		DR	UG TEST	TYPE		
2 - SHOULDER B 3 - LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRAI 2 - EXTRICA			S - SCHOOL BUS		13 - MECHANICAL DI (SPECIAL BRAK	ES, HAND			1 - NONE				
	LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHAN	ICAL MEANS		T - DOUBLE & TRIPLE X - TANKER / HAZMAT		CONTROLS, OR O ADAPTIVE DEVI		1 - APPARENTLY NORM		2 - BL00 3 - URIN				
5 - CHILD RESTE FORWARD FA	RAINT SYSTEM - CING	13 - TRAILING UNIT	3- FREED B NON-MEG	Y Chanical Me	ANS	GENDER	new hove	14 - MILITARY VEHICLE		2 - PHYSICAL IMPAIRM	ENT	4 - OTHE				
6 - CHILD REST	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	2 MILHOOL	3 - EMOTIONAL (E.G., DE ANGRY, DISTURBED)	PRESSED,	DRUG	TEST RE	SULT(S)		
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4 - ILLNESS			HETAMINES			
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER		5 - FELL ASLEEP, FAINT FATIGUED, ETC.	EU,		BITURATES Zodiazepini	ES		
9 - PROTECTIVE (ELBOW, KNE										6 - UNDERTHE INFLUEN OF MEDICATIONS / DI			NABINOIDS			
10 - REFLECTIVE										/ALCOHOL		5 - COCA	AINE TES / OPIOID)\$		
11 - LIGHTING - F / BICYCLE ON										9- OTHER/UNKNOWN		7 - OTHE				
99 - OTHER / UNK	NOWN											8 - NEG	ATIVE RESUL	LTS		

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0	OF PUBL	C SAFETY	CCUPANT /	WITHE	SS ADDENDUM				LOCAL REP	ORT NUMBE	R			
_~	K.					51 		2 0 2 5	0_0	0,0,	3 ₁ 8 ₁ 6			
	UNIT#		T, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER		
	02 BURNHAM, FIONA, ELYSE								0 8 1 1 2 0 0 3 2 1 F					
PAN	ADDRESS: STREET, CITY, STATE, ZIP								REDACTED PER ORC 149.43(A)(1)					
OCCUPAN	4480 \$	STHY 4	3 4 ,Brimfield	Twp ,OH	44240		e	REDACTI	ED PER	ORC	49.43	(A)(1) ₁		
9		INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
	5	BY					_0_4 _	☐MC HELMET	0 6	1_	_ 1	11		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
	02	ROGI	ERS, SOPHIA,	ROSE				0,7,0,	4 _ 2 _ 0	0 _ 3 _	2 1	F		
NAC	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	ODO 4	40.42	(4)/4)		
OCCUPAN	129 N	LINCO	DLN ST ,Kent	OH 44240	0			REDACTE	ED PER	ORC 1	49.43	(A)(1)		
0	NJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
	5	BY			Akron Childrens	Hosp	0_4	MC HELMET	0 4	11	_ 1	1		
ľ	UNIT#	NAME: LAS	T, FIRST, MIDDLE		·			DAT	E OF BIRTH		AGE	GENDER		
	02	GERA	CI, RYLEIGH	I, MAE				0 8 1	7 . 2 . 0	0 4	2.0	F		
ANT	ADDRESS:	STREET, CITY,	STATE, ZIP				- 5	CONTACT PHONE						
9,	755 VA	ANDER	BILT DR ,MO	NROEVI	LLE ,PA 15146			REDACTE	ED PER	ORC 1	49.43	(A)(1)		
8	NJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NANE, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
П	5	BY					0 4	MC HELMET	0 3	_ 1	1 1	1		
7	UNIT#	NAME: LAS	T, FIRST, MIDDLE		<u></u>			DAT	E OF BIRTH		AGE	GENDER		
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ANT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN														
ŏŢ	NJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
		TAKEN BY					USED	MC HELMET	1 1		11	de a		
		INJU	RIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG	USAGE			
	1- FATA	L.		1 - NONE US			T - LEFT SIDE	FD.	1 - NOT DE	PLOYED				
۱	2-SUSF	PECTEDSE	RIOUS INJURY		E OCCUPANT (MOTORCYCLE DRIV ER REIT ONLY USED) 2 - FRONT – MIDDLE			2 - DEPLOYED FRONT						
1	3-SUSF	PECTED MI	NOR INJURY		3 - FRONT - RIGHT SIDE			E 3 - DEPLOYED SIDE						
ı	4 - POSS	SIBLE INJU	RY		T ONLY USED 4 - SECOND - LEFT SID (MOTORCYCLE PASS			FRANKLOVEF			Н			
П	5 - NO A	PPARENT	NJURY		ESTRAINT SYSTEM – 5 - SECOND – MIDDLE			5 - NOT APPLICA						
		INJURED	TAKEN BY	100 CONTRACTOR (100 CONTRACTOR)	D FACING 6 - SECOND - RIGHT SI									
П		TRANSPOR		6 - CHILD RI	ESTRAINT SYSTEM -									
П	2- EMS	ATED AT S	CEINE	7 - BOOSTER	O THIRD MIDDLE			1 - NOT EJECTED						
П	3- POLI			8 - HELMET		PE 2 - PARTIALLY FIECTED								
П		ER / UNKNO	WN		TVE PADS USED	PADS USED 10 - SLEEPER SECTION (11 - PASSENGER IN OTH)				UF I RUCK CAB				
L		GEN	IDER	(ELB0W,	KNEES, ETC.)	CARG	O AREA (NON-TE	RAILING UNIT,	4 - NOT APPLICABLE					
Ĭ	F - FEMA	11-11-11			TVE CLOTHING		PICK-UP WITH CAP ENGER IN UNE			TRAP	PED			
	M - MALE			11 - LIGHTIN / BICYCL	G – PEDESTRIAN F ONLY		0 AREA	NOLUSED	1 - NOT TR					
	U - OTHER / UNKNOWN 13 - TRAILING UNIT						2 - EXTRICATED BY MECH				CAL			
1							IG ON VEHICLE TRAILING UNIT)	EXTERIOR	MEANS					
1						15 - NON-I	MOTORIST		3 - FREED MEANS	BY NON-M	ECHANIC	AL		
Ц						99 - OTHE	R / UNKNOWN							
100	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ADDDECC	STREET SITY	AT 175 710					CONTACT PHONE						
×	AUDKESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	IDE				
	NAME. LAS	ST, FIRST, MIDD	I.E.					DAT	E OF BIRTH		AGE	GENDER		
	INAMIE: LAS	oi, Fiksi, midd	LC						L OF BIKTH		AGE	dender.		
WITNESS	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
≥								1 1 1	1 1	1 1	3 3	1 1		
2	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS									_1_1_1	s 15 1		1		
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