OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTES	MANDATORY FIELD FOR SUPP	PLEMENT REPORT	,	LOCAL REPORT NUMBER	*
PHOTOS TAKEN OH-2 X 0H-3	LOCAL INFORMATION			$2 \cdot 0 \cdot 2 \cdot 4$	O _ O _ O _ O _ O	4 8 6
OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Poli	ce	0,6,7,0,3	1 - SOLVED	0_2_0	2 98 - ANIMAL 99 - UNKNOWN
1 - CITY	Y, VILLAGE, TOWNSHIP*			CRASH DATE /	1.000 (COO)	SH SEVERITY FATAL
6 7 1 2-VILLAGE Kent			4	0 1 1 2 2 0 2 4	11849 5	SERIOUS INJURY
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		SUSPECTED
E - EAST W - WEST	WOLCOTT		$\mathbf{A}_{\perp}\mathbf{V}$	41,163	7,3,6	MINOR INJURY SUSPECTED
	REFERENCE ROAD NAME (ROA	AD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D	ECIMAL DEGREES 4 -	INJURY POSSIBLE
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	252			-81,35,9	.3.6.0.	PROPERTY DAMAGE
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			INTERSECTION RELATED	07.043350
N-NORTH	- INTERSTATE ROUTE(TP)	AL - ALLEY HW- HIGHWA			RSECTION OR ON APPROA	
3-HOUSE # E-EAST	TEGERAL OF ROOTE	AV - AVENUE LA - LANE BL - BOULEVARD MP - MILEPOS	SQ - SQUARE ST - STREET		DOLLANOE AREA	
	- STATE ROUTE	CR - CIRCLE OV - OVAL	TE - TERRACE	WITHIN INTE		BER of APPROACHES
FROM REFERENCE UNIT OF MEASURE	MUMPEDED TOWNSHIP	CT - COURT PK - PARKWA			ROADWAY	
2-FEET 3-YARDS	ROUTE	DR - DRIVE PI - PIKE HE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	/IDED	
LOCATION OF FIRST HARMFUL EVEN	IT M	ANNER OF CRASH COLLISION/	IMPACT	DIRECTION OF TRAVE	L MEDIAN	TVPF
1 - ON ROADWAY 9 - CROSSOVER	R 1-N	OT COLLISION 4 - REAR-TO-R		N - NORTH		LUSH MEDIAN
	TALLET ACCESS 1 1 T	ETWEEN 5-BACKING WO MOTOR FHICLES IN 6-ANGLE		S - SOUTH	(<4 FEET) LUSH MEDIAN
4 - ON ROADSIDE 12-SHARED U		LITTOLLS IN	E, SAME DIRECTION	E - EAST W - WEST	(≥4 FEET)
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	en 1907 19	EAR-END 8 - SIDESWIPE EAD-ON 9 - OTHER / UN	E, OPPOSITE DIRECTION			EPRESSED MEDIAN RAISED MEDIAN
7 - ON RAMP 14-TOLL BOOT	Н	Z O TILLY OF			(ANY TYPE 9 - OTHER/UN	
8-OFF RAMP 99-OTHER/UI	VKNOWN					
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRASH	IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE
	LANE SHIFT/CROSSOVER	WARNING SI	IGN	_1_	_2_	
LAW ENFORCEMENT PRESENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WA		1 - STRAIGHT LEVEL	1 - DRY 2 - WET	1 - CONCRETE
The production of the producti	INTERMITTENT OR MOVING WO	RK 4-ACTIVITY AF	REA	2 - STRAIGHT GRADE 3 - CURVE LEVEL	3 - SNOW	2 - BLACKTOP, BITUMINOUS,
ACTIVE SCHOOL ZONE 5-	OTHER	5 - TERMINATIO	IN AREA	4 - CURVE GRADE	4 - ICE	ASPHALT 3 - BRICK/BLOCK
LIGHT CONDITION		THER		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL,
1 - DAYLIGHT 2 - DAWN/DUSK	1-CLEAR 0 4 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS	3		6 - WATER (STANDING,	STONE 5 - DIRT
3 - DARK - LIGHTED ROADWAY	No. of the second second	OKE 8 - BLOWING SAND, SOIL,	DIRT, SNOW		MOVING)	9 - OTHER/UNKNOWN
4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FI 99 - OTHER / UNKNOWN	REEZING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNOWN	
9 - OTHER / UNKNOWN	53 250 250 251				9-0THER/ONKNOWN	
NARRATIVE					A	Indicate the north
UNIT 2 BACKED OUT FROM	A DRIVEWAY					an "N" on the compass diagram.
		P				compass diagram.
STRIKING UNIT 1 WHICH V	VAS IN FRONT OF					
452 WOLCOTT AVE.						Ž.
					Not To	Scale
				1		
		WOL	COTTAVE	, l (
			<u> </u>	iii		
				Unit 1		
			452	WOLCOTT		
				AVE.		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE /		SCENE CLEARED	I⊽I	POLICE AGENCY
[0,1,1,2,2,0,2,4,/,1,8,5,8,0,1,1]		θ_{1} 0 1 1 2 2 0 2 4			4 ₁ / ₁ 1 ₁ 9 ₁ 2 ₁ 0 ₁	MOTORIST
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT		nt Chanman	Short, Ja		片	SUPPLEMENT
	Redekel, Gla	BADGE NUMBER*		BY OFFICER'S BADGE	NUMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)
			CHECKED			

LOCAL REPORT NUMBER

2 0 2 4 - 0 0 0 0 0 4 8 6

					2 0 2 4 5	0 0 0 0 0 4 0 0
0 1 NEHE	ME: LAST, FIRST, MIDDLE (SAME) Z, ALICIA, MA	RIE	Redacted per	r ORC 149.43(A)(1)	DAM	AMAGE MAGE SCALE
	EET, CITY, STATE, ZIP (SAME AS DRIV TT AVE, Kent,				2 1 - NONE 2 - MINOR DAMA	3 - FUNCTIONAL DAMAGE AGE 4 - DISABLING DAMAGE
	R: NAME, ADDRESS, CITY, STATE, ZIE		COMMERCIAL CARRIE	R PHONE: INCLUDE AREA CODE	9-	UNKNOWN
						AGED AREA(S) E ALL THAT APPLY
OH JFG79		VEHICLE IDENTIFICATION # $X_iJ_iE_iV_iS_iJ_iL_1_3_0$	2.9.5 2.0.1		12	
INSURANCE INSUR	ANCE COMPANY OGRESSIVE	INSURANCE POLICY # 975765182	COLOR	CHETTOICE	10 11 12 1	10 11 12 1
	OF USE VERNMENT IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPA		9 10 2 3 3	9 10 2 3
INTERLOCK DEVICE H	#OCCUPANTS O O	VEHICLE WEIGHT GVWR/GCW 1 - ≤10KLBS. 2 - 10,001 - 26K L 3 - >26KLBS.	MATERIAL RELEASED	OUS MATERIAL CLASS # PLACARD ID #	8 7 6 5	8 7 6 5 5 4
UNIT TYPE 4 - PICKUP 5 - CARGO VAN 6 - VAN (9-15 S)	VAN (MINIVAN) 8 - MOTORCYCLE 3-W TY VEHICLE 9 - AUTOCYCLE 10 - MOPED OR MOTOR BICYCLE 11 - ALL TERRAIN VEH (ATV / UTV)	HEELED 13-SNOWMOBILE 14-SINGLE UNITTRUCK RIZED 15-SEMI-TRACTOR 16-FARM EQUIPMENT	18-LIMO (LIVERY VEHICLE) 19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE 21-HEAVY EQUIPMENT 22-ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	9	12 11 11 10 2 9 3 8 4 7 6
	PERATING IN AUTONOMOUS	D - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	N 9 - UNKNOWN	11 12 7	6 11 12 1
MODE WHEN	RASH OCCURRED? 9-CTHER/UNKNOWN AUTOM MODE	0 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - FULL AUTOMATION	5 M500000000000000	10 11 1 2 3 3	9 9 3
1 - NONE 2 - TAXI SPECIAL 3 - ELECTRONIC	6 - BUS - CHARTER/TV 7 - BUS - INTERCITY RIDE SHARING 8 - BUS - SHUTTLE	OUR 11-FIRE 12-MILITARY 13-POLICE	16-FARM 17-MOWING 18-SNOW REMOVAL	21 -MAIL CARRIER 99 -OTHER / UNKNOWN	8 7 6 5	8 7 5 5
FUNCTION 4 - SCHOOL TRA	NSPORT 9 - BUS - OTHER SIT/COMMUTER 10 - AMBULANCE	14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPME	19-TOWING NT 20-SAFETY SERVICE PATROL		6	6
O 1 1 - NO CARGO B / NOTAPPLO 2 - BUS		ANOTHER 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BO) 7 - GRAIN/CHIPS/GRAVEL	9 - CARGO TANK	12-CONCRETE MIXER 13-AUTOTRANSPORTER 14-GARBAGE/REFUSE 99-OTHER / UNKNOWN	9 3 9	12 12 12
VEHICLE 2 - HEAD LAMP DEFECTS 3 - TAIL LAMPS	S 5 - STEERING	7 - WORN OR SLICKTIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN	6 - NO DAMAGE [0	6 G G G G G G G G G G G G G G G G G G G
1 - INTERSECTION CROSSWALK NON-MOTORIST 2 - INTERSECTION CROSSWALK AT IMPACT	ON – UNMARKED 4 - NIDBLOCK – MARK	KED 7 - SHOULDER / ROADSIDE B - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER / UNKNOWN	☐- TOP [13]	-ALL AREAS [15]
1 - NON-CONTAC 2 - NON-COLLIS 2 - NON-COLLIS 3 - STRIKING 4 - STRUCK 5 - BOTH STRIK & STRUCK 9 - OTHER / UNK	ON 2 - BACKING 3 - CHANGING LANES PRE-CRASH 4 - CVERTAKINGPASS ING ACTIONS 5 - MAKING RIGHT TU 6 - MAKING LEFT TUF	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE SING 10 - PARKED IRN 11 - SLOWING OR STOPPED	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGSING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAMAGE 1-12 - REFER TO DIAGRAM 13 - TOP	POINT OF CONTACT 14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
1 - NONE 2 - FAILURE TO' 3 - RAN RED LIG 4 - RAN STOP SI CONTRIBUTING 5 - UNSAFE SPE CIRCUMSTANCES 5 - UNSAFE SPE	HT 9-IMPROPER LANE C GN 10-IMPROPER PASSI	HANGE 14-STOPPED OR PARKED ILLEGALLY 15-SWERVING TO AVOID	18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/ SPILLING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
6-IMPROPERT	URN 12 - IMPROPER BACKI	NG	20 - IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED
2 0 1 - OVERTURNI	ROLLOVER 6 - EQUIPMENT FAIL		16-RAILWAY VEHICLE	22 -WORK ZONE MAINTENANCE	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
3 - IMMERSION 2 L J 4 - JACKKNIFE 5 - CARGO / EQL	8 - RAN OFF ROAD RIG 9 - RAN OFF ROAD LE IPMENT 10 - CROSS MEDIAN	GHT 12 - DOWNHILL RUNAWAY	17 - ANIMAL — FARM 18 - ANIMAL — DEER 19 - ANIMAL — OTHER 20 - MOTOR VEHICLE IN TRANSPORT	EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGOOR ANYTHING SET IN MOTION BY A MOTOR VEHICLE	4	MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SQUTH 6 - NORTHWEST 3 3 - EAST 7 - SQUTHEAST
3 L L L L LOSS OR SHI		15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	FROM TO TO	4 - WEST 8 - SOUTHWEST
25 - IMPACT ATT	ENUATOR 31 - GUARDRAIL END	LISION WITH FIXED OBJE	CT - STRUCK 43-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN
26-BRIDGE OVE	RHEAD 33 - MEDIAN CABLE B 34 - MEDIAN GUARDR	ARRIER 39-LIGHT/LUMINARIES AIL SUPPORT	44 - DITCH 45 - EMBANKMENT 46 - FENCE	EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED
27 - BRIDGE PAR 28 - BRIDGE PAR 6 29 - BRIDGE RAI	APET 35 - MEDIAN CONCRET L BARRIER	OR SUPPORT	47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	2 - CALCULATED / EDR 3 - UNDETERMINED
30-GUARDRAIL 1 FIRST HAR		ARRIER 42-CULVERT MOST HARMFUL EVENT			2 5	

LOCAL REPORT NUMBER

2 0 2 4 - 0 0 0 0 0 4 8 6

							0 0 0 0 0 4 0 0
	OWNER NAME: LAST, FIRS PLOTTS, STI	EPHEN, MIC	HAEL	Redacted per	ORC 149.43(A)(1)	J DAI	MAGE SCALE
	DORESS: STREET, CITY, STATE RAIN AVE, K		n			2 1 - NONE 2 - MINOR DAMA	3 - FUNCTIONAL DAMAGE AGE 4 - DISABLING DAMAGE
	IAL CARRIER: NAME, ADDR		0	COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	The state of the s	UNKNOWN
							AGED AREA(S)
	LICENSE PLATE # GSU4065		EIDENTIFICATION # $F_1K_9E_1U_37_5$	4,9,7, 2,0,1,		INDICATI	E ALL THAT APPLY
INSURAL VERIFI			NSURANCE POLICY # 088137 - SFP - 35	COLOR	VEHICLE MODEL CAMRY	10 11 12 1	10 11 12 1
COMME	TYPE OF USE RCIAL GOVERNMENT [IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPAN		9 10 2 3 3	9 10 2 3
INTERI DEVICE EQUIP	K K HIT/SKIP UNI	#OCCUPANTS VE	HICLEWEIGHT GVWR/GCWR 1 - <10KLBS. 2 - 10,001 - 26KLBS. 3 - >26KLBS.	MATERIAL RELEASED	CLASS # PLACARD ID #	7 0 5	8 7 6 5 5 4
O_1 UNITTYPE	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN 19-15 SEATSI	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPEO OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV/UTV)	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	9	11 12 1 10 10 2 9 3 3 0 7 5 5 6
	# of TRAILING UNITS		. Secondonia concentr			11 12 7	6 11 12
2	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK	POWN AUTONOMOUS MODE LEVEL		3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	- 3000000000000000000000000000000000000	10 12 1 11 1 1 10 9 9 3	10 12 1 10 2 9 9 3
	2 - TAXI 3 - ELECTRONIC RIDE SHARING	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY	16-FARM 17-MOWING 18-SNOW REMOVAL 19-TOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 6 5	8 7 6 5 5
	5 - BUS-TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12
O 1 CARGO BODY TYPE	1 - NO CARGO BODYTYPE /NOTAPPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POLE 9 - CARGOTANK 10 - FLAT BED 11 - DUMP	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 3 9	3 9 3 3
		4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICKTIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99-OTHER / UNKNOWN	6 - NO DAMAGE [0	6 G G G G G G G G G G G G G G G G G G G
NON-MOTORIST LOCATION AT IMPACT	CROSSWALK 2 - INTERSECTION - UNMARKED	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVE WAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	☐- TOP [13]	-ALL AREAS [15]
3 ACTION	2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTTHSTRIKING PRE-CRASH ACTIONS	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - CVERTAKING/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 INTRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGSING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAMAGE 1-12 - REFER TO DIAGRAM 13 - TOP	POINT OF CONTACT 14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
1_2	2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACD 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START FROM A A PARKED POSITION 14 - STOPPED OR PARKED ILL EGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY # of THROUGH LANES	TRAFFIC CONTROL
SEQUENCE	OF EVENTS	- In southing				ON ROAD	1 - NOT INVOLVED
1 2 1	1 - OVERTURNIROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	NON-COLLISION 11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF TRAVEL	16-RAILWAYVEHICLE 17-ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NON-F	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING MOTORIST DIRECTION
3	4 - JACKKNIFE	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	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 1 TO 2	1 - NORTH 5 - NORTHEAST 2 - SQUTH 6 - NORTHWEST 3 - EAST 7 - SQUTHEAST 4 - WEST 8 - SQUTHWEST
	25 - IMPACT ATTENUATOR	COLLISIO 31-GUARDRAIL END	N WITH FIXED OBJECT 37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN
5	/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT	44 - DITCH 45 - EMBANKMENT 46 - FENCE	EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED 0 0 3	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCIUMATED / EDD
6	DO DOIDGE DADADES	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	53 -TUNNEL 54 -OTHER FIXED OBJECT 99 -OTHER / UNKNOWN	POSTED SPEED	2 - CALCULATED / EDR 3 - UNDETERMINED
1	FIRST HARMFUL EVEN	1	IARMFUL EVENT			2 5	

OHIO DE	PARTMENT M	OTORIST / NO	N-M	Пото	DIC.	т			(2)	LOCAL REF	PORT NUMI	BER	
SAFETY MAN	ICE - PROTECTION	010K131 / 140	114-14	1010	K13				2 0 1	2 4 - 0 0	0.0	0.4.8	8_6
UNIT#	NAME: LAST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER
0,1									ىب			عبال	
ADDRESS:	: STREET, CITY, ST.	ATE, ZIP							CONTACT	PHONE - INCLUDE AREA O	CODE	7550	
<u> </u>										<u> </u>			
INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-Cor	SEATING POSITIO	N AIR BAG U	SAGE EJECTION	TRAPPED
	BY							سا	Ш мс неі	LMET L	J		نــــا
OLSTATE	OPERATOR L	ICENSE NUMBER		OFFENS	E CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATIO	ON NUMBER	
										ALIOL TEST		DUC TEST/S	
≥ OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		TRACTED	25/1/3/1	COHOL MAP		CONDITION	STATUS TY	OHOL TEST PE VALUE		TYPE RESUL	T SELECTUPTO4
			"	1	=	THER DRUG	NIDOANA	. 1 .	1	1 <u> </u>	1	1	
UNIT #	NAME: LAST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER
0,2,	PLOTI	rs, stephen, m	ICHA	EL					0.3	1.4.1.9	8.5	3.8	M
	: STREET, CITY, ST.									PHONE - INCLUDE AREA O			112
237 E	CRAIN	AVE ,Kent ,OH 4	4240						Reda	cted per OF	RC 14	9.43(A)	(1)
-	INJURED	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITIO			, ,
5 .	TAKEN BY							USED 0 1	MC HE		1	. 1	1 .
OLSTATE	OPERATOR L	ICENSE NUMBER		OFFENS	E CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATIO	ON NUMBER	ستسار
O, H,		TED PER ORC 450	1:1-12				CODE	Starting and			2711		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT		IVER		HOL / DRUG SUSPE		CONDITION	ALC	OHOL TEST		RUG TEST(S	
	SELECT UP TO 2		DIS	STRACTED	AI	COHOL MAR	RIJUANA	0.00	STATUS TY	YPE VALUE	STATUS		T SELECTUPTO4
4	لــالــا			1	01	THER DRUG		1	1	1	_1	1	الالا
UNIT#	NAME: LAST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER
									لبا	1 1 1		نانا ا	ر ــــــا ا
ADDRESS:	STREET, CITY, ST.	ATE, ZIP							CONTACT	PHONE - INCLUDE AREA O	ODE		
										1 1 1	1 1		
M INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-Cor	SEATING POSITIO	N AIR BAG U	SAGE EJECTION	TRAPPED
	BY							U3E#	Шмс неі				نــــار
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	E CHAF	GED	LOCAL	OFFENSE DESC	RIPTION		CITATIO	ON NUMBER	•
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER STRACTED	_	HOL / DRUG SUSPE		CONDITION	STATUS TY	OHOL TEST (PE VALUE		ORUG TEST(S	T SELECTOP TO 4
	10 3500 PR		BY		=	COHOL MAF	RIJUANA					40.10	
TNIII	JRIES	SEATING POSITION		AIR BAG		THER DRUG OL CLASS		OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST STA	ATUS
1 - FATAL	NIE3	1-FRONT-LEFT SIDE	1- NOT DE	Supplied to	100	1 - CLASS A		1 - ALCOHOL INTER	and the second second	1 - NOT DISTRACTED	1000	- NONE GIVEN	The second
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2- DEPLOY	'ED FRONT		2 - CLASS B		2 - CDL INTRASTAT	E ONLY	2 - MANUALLY OPERATIN ELECTRONIC COMMUN		-TEST REFUSED	
3 - SUSPECTED 4 - POSSIBLE IN		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOY	'ED SIDE 'ED BOTH FROM	IT / CIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE LE 4 - FARMWAIVER	NSES	DEVICE (TEXTING, TYP		-TEST GIVEN, COI SAMPLE / UNUS	
5 - NO APPAREN		4 - SECOND - LEFT SIDE	5- NOTAPI		AL / SIDE	(OHIO = D)		5 - EXCEPT CLASS	A BUS	DIALING) 3 - TALKING ON HANDS-FF	RFF 4	- TEST GIVEN, RE	SULTS KNOWN
THURSDA	TAKEN BY	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	9- DEPLOY	MENT UNKNO	WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS	4	COMMUNICATION DE V	ICE 5	-TEST GIVEN, REUNKNOWN	SULTS
1 - NOT TRANSP	TAKEN BY PORTED	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON HAND-HE COMMUNICATION DEV	ICE	Total Control National Control	CT TVDE
/TREATED A	TSCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		JECTION		OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	I AN	ALCOHOL TE - NONE	SI ITPE
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOTEJE 2 - PARTIA	ECTED LLY EJECTED		H - HAZMAT M - MOTORCYCLE		9 - LEARNER'S PER	MIT	6 - PASSENGER		- BLOOD	
9-OTHER/UNK	CNOWN	9 - THIRD - RIGHT SIDE	3-TOTALL			P - PASSENGER		RESTRICTIONS		7 - OTHER DISTRACTION		- URINE	
CAFFTY F	OUTDMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPI	PLICABLE		N - TANKER		10 - LIMITED TO DAY		INSIDE THE VEHICLE 8 - OTHER DISTRACTION (- BREATH - OTHER	
1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	T	RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MO	TORCYCLE	11 - LIMITED TO EMI 12 - LIMITED - OTHE		THE VEHICLE	30.0.02		
2 - SHOULDER E	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1- NOTTRA	APPED	East.	S - SCHOOL BUS	TORGTGLE	13 - MECHANICAL D		9 - OTHER / UNKNOWN	1	- NONE	TYPE
3 - LAP BELT ON		PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRIC MECHAI	ATED BY NICAL MEANS		T - DOUBLE & TRIPLE	TRAILERS	(SPECIAL BRAK CONTROLS, OR O	THER	CONDITION		- BLOOD	
	& LAP BELT USED RAINT SYSTEM –	CARGO AREA	3- FREED	ВУ		X - TANKER / HAZMAT		ADAPTIVE DEVI		1 - APPARENTLY NORMAL		- URINE	
FORWARD FA	ACING	13 - TRAILING UNIT	NO N-ME	CHANICAL ME	ANS	GENDER	Tento	15 - MOTOR VEHICLE		2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPRI		- OTHER	
6 - CHILD RESTI REAR FACIN	RAINT SYSTEM – IG	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F - FEMALE		AIR BRAKES	.0	ANGRY, DISTURBED)	D	RUG TEST R	
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE U - OTHER / UNKNOWN		16 - OUTSIDE MIRRO 17 - PROSTHETIC ALI		4 - ILLNESS 5 - FELL ASLEEP, FAINTED		- AMPHETAMINES - BARBITURATES	S
8 - HELMET US		99 - OTHER / UNKNOWN				5 - OTHER / OWKNOWN		18-OTHER		FATIGUED, ETC.	3	- BENZODIAZEPIN	NES
9 - PROTECTIVE (ELBOW, KNE										6 - UNDER THE INFLUENCE OF MEDICATIONS / DRU	E A	- CANNABINOIDS	
10 - REFLECTIVE										/ALCOHOL	5	- COCAINE	
11 - LIGHTING - I / BICYCLE OF										9 - OTHER/UNKNOWN		- OPIATES / OPIOI - OTHER	DS
99 - OTHER / UNK												- NEGATIVE RESU	ILTS

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O	OCCUPANT / WITNESS ADDENDUM				2 0 2 4	LOCAL REPO			6			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE						E OF BIRTH	101010	AGE	GENDER
	1 1								1 1 1		1 (
ANT	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA GO	DE		
OCCUPAN												
ō	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED
ľ	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER
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ľ	UNIT#	NAME: LAS	T, FIRST, MIDDLE		J			DAT	E OF BIRTH		AGE	GENDER
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OCCUPAN	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		
၁၁၀	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED
	1 1	TAKEN BY					USED	DOT-COMPLIANT MC HELMET				
7	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH	<u> </u>	AGE	GENDER
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PANT	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		
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		ВУ	10150		V FAULDMENT HOER		OF AT INC. DOC	MC HELMET	\Box	AVA DAG I	10105	
Ì	1 - FATA		JRIES	1 - NONE US	Y EQUIPMENT USED		SEATING POS IT – LEFT SIDE	IIIUN	1 - NOT DE	AIR BAG L	SAGE	
			RIOUS INJURY		OCCUPANT	(MOT	ORCYCLE DRIV	ER)		YED FRONT		
	3 - SUSI	PECTED MI	NOR INJURY		ER BELT ONLY USED		IT – MIDDLE IT – RIGHT SIDE		3 - DEPLO	YED SIDE		
ı	4 - POSS	SIBLE INJU	RY		T ONLY USED ER & LAP BELT USED		ND - LEFT SID		4 - DEPLO			
	5 - NO A	PPARENT	INJURY		ESTRAINT SYSTEM -		ORCYCLE PASS ND – MIDDLE	5 - NOT APPLICABLE				
	100	INJURED	TAKEN BY		D FACING		ND - RIGHT SI	9 - DEPLOYMENT UNKNOWN				
ı		TRANSPOR EATED AT S		6 - CHILD RI	ESTRAINT SYSTEM – CING		D – LEFT SIDE ORCYCLE SIDE					
	2 - EMS			7 - BOOSTER	RSEAT		D - MIDDLE	1 - NOT EJECTED				
	3- POLI	ICE		8 - HELMET	USED		D – RIGHT SIDE PER SECTION (2 PARTIALLY ELECTED				
	9 - OTHI	ER / UNKNO)WN		TIVE PADS USED KNEES, ETC.)		ENGER IN OTH	HER ENCLOSED 3 - TOTALLY EJECTED				
			IDER		TIVE CLOTHING		PICK-UP WITH CA		4 - NOT AP	PLICABLE		
	F - FEMA M - MALI				G - PEDESTRIAN		ENGER IN UNE 10 AREA	NCLOSED	1 - NOT TR	TRAPP	ED	
	U - OTHE	R / UNKNO	WN	/ BICYCL 99 - OTHER /			LING UNIT			CATED BY N	IECHANI	CAL
							NG ON VEHICLE TRAILING UNIT)	EXTERIOR	MEANS			
							MOTORIST R/UNKNOWN		3 - FREED MEANS	BY NON-M	ECHANIC	AL
		ST, FIRST, MIDD						1000 0000 0000	E OF BIRTH	A120 1 1000	AGE	GENDER
WITNESS			AMILLE, ELI	ZABETH				1,0,2,			4 4	F_
M		STREET, CITY,	TT AVE ,Kent	ОН 442	40			Redacte			9.43(<i>F</i>	\)(1)
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WITNESS	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		
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TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH
24-486		MO(10/2 1/24

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

1, Camille Brinted HEREBY MAKE T	HIS VOLUNTARY STATEMENT TO
OFC RedeRer # 210 AT 452	WOLLOTT AVE
OFFICER'S NAME	LOCATION
the Eurogyro delivery person dropped forch. While I was getting it	ed our food on the
forch. While I was getting it	I have the two
cars crash. I looked up + the driv	
into my reighbor's car. the c	lawer pulled
Forward of istopped. I went.	to get Shoes h
When I came back he was gor Called neighbor + Eurogyro.	1ta
Car was possibly a light colo with a delivery topper (Jidn at which).	red sedan (aray)
with a delivery topper (didn	4 get a good look
at which).	J J
•	
•	
ADDRESS OF WITNESS	PHONE Redacted per ORC 149.43(A)(1) Redacted per ORC 149.43(A)(1)
SIGNATURE OF WITNESS OFFICER'S SIGNATURE OF WITNESS OFFICER'S SIGNATURE OF WITNESS	Recuper # 210
1 CONTRACTOR OF THE PROPERTY O	New of the