OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*							
PHOTOS TAKEN OH-2 OH-3	2,0,2,0,-,0,0,0,4,8,6,2,							
SECONDARY CRASH OH-1P OTHER	REPORTING AGENCY NAME*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR						
PRIVATE PROPERTY	City of Kent Police	1 - SOLVED L 2 - UNSOLVED	0 3	0 3 98 - ANIMAL				
COUNTY* LOCALITY* LOCATION:C	CRASH DATE / TIME* CRASH SEVERITY							
6,7 1 2-VILLAGE Kent	0,3,0,6,2,0,2,0		2-SERIOUS INJURY					
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST	LATITUDE DE		SUSPECTED  3 - MINOR INJURY					
13 7 WLJI	FAIRCHILD	AV	41.15.83.76					
2- SOUTH	The state of the s	ILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE		4 - INJURY POSSIBLE		
	MANTUA		ST	-8,1,,3,5,9	4,7,6	5 - PROPERTY DAMAGE ONLY		
REFERENCE POINT DIRECTION 1 - INTERSECTION FROM REFERENCE 1 - NORTH IR	ROUTE TYPE  - INTERSTATE ROUTE(TP)  AL - A	ROAD TYPE  ALLEY HW-HIGHWAY R	RD - ROAD	[and	NTERSECTION REL			
4 2-MILEPOST 3 O COUTU	D I EDERAL DO MODIL		Q - SQUARE	WITHIN INTERSECTION OR ON APPROACH				
4 - WEST SE	CR -	T - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES					
FROM REFERENCE UNIT OF MEASURE	R - NUMBERED COUNTY ROUTE CT - (	COURT PK - PARKWAY T	L -TRAIL	ROADWAY				
7 0 2 2-FEET 3-YARDS	ROUTE DR - L	DRIVE PI - PIKE V HEIGHTS PL - PLACE	VA - WAY	ROADWAY DIVIDED				
LOCATION OF FIRST HARMFUL EVE	NT MANNE	ER OF CRASH COLLISION/IMPA	CT	DIRECTION OF TRAVE		EDIAN TYPE		
1 - ON ROADWAY 9 - CROSSOVE 2 - ON SHOULDER 10 - DRIVEWA	ER 1 - NOT CO	DLLISION 4-REAR-TO-REAR		1 - NORTH		DED FLUSH MEDIAN		
	GRADE CROSSING 2 TWO M	OTOR		2-SOUTH 3-EAST	11 1	FEET ) DED FLUSH MEDIAN		
4 - ON ROADSIDE 12 - SHARED 5 - ON GORE TRAILS	USE PATHS OR TRANS 2 - REAR-I	SPORT 7 - SIDESWIPE, SAMI		4- WEST	(≥4	FEET ) DED, DEPRESSED MEDIAN		
6 - OUTSIDE TRAFFIC WAY 13-BIKE LAN	IE 3-HEAD-I				4 - DIVII	DED, RAISED MEDIAN		
7 - ON RAMP 14-TOLL BOO 8 - OFF RAMP 99-OTHER / 1					1	TYPE) R/UNKNOWN		
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE		
I WORKERS SPECIAL	- LANE CLOSURE	1 - BEFORE THE 1ST \ WARNING SIGN	WORK ZONE	2	. 4 .	1		
	- LANE SHIFT/CROSSOVER - WORK ON SHOULDER	2 - ADVANCE WARNIN			1 - DRY	1 - CONCRETE		
	OR MEDIAN - INTERMITTENT OR MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA			2-WET	2 - BLACKTOP, BITUMINOUS,		
ACTIVE SCHOOL ZONE 5	- OTHER	5 - TERMINATION ARI	EA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT		
LIGHT CONDITION	WEATHER				5 - SAND, MUD, DIR	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,		
1 - DAYLIGHT 4 2 - DAWN/DUSK		6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL  6 - WATER (STANDI	STONE		
3 - DARK - LIGHTED ROADWAY	3-FOG, SMOG, SMOKE	8 - BLOWING SAND, SOIL, DIRT,			MOVING)	9 - OTHER/UNKNOWN		
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTIN		9 - FREEZING RAIN OR FREEZI 99 - OTHER / UNKNOWN	NG DRIZZLE		7 - SLUSH			
9 - OTHER / UNKNOWN				- 1 4550 0	9 - OTHER/UNKNOW	N		
NARRATIVE						Indicate the north direction with		
20-4862					7	an "N" on the compass diagram.		
3-6-20								
On this date, Unit # 1 was	stopped in the straigh	ıt						
through lane facing W/B on			u v	1 1 1 Apr 70	u-			
Unit # 2 was stopped in the		PARCINLD AV	* 2	PARICHED A	TE (BREDGE) AND Z CORN S	DAV		
striking the vehicle in front			<i>y</i> ~					
traveling W/B on the Fairch	THAN FT.	3 30 W						
lane and had to swerve arou	0			Mnos				
that was stopped in the curb								
went around the DAV it trie		ge.						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED I	ATE/TIME	REPORT TAKEN BY		
0,3,0,6,2,0,2,0,/,2,1,4,3,0,3	0,6,2,0,2,0,/,2,1,5,0,0	\3\\0\6\\2\\0\2\\0\\/\\2	1,5,3,0			MOTORIST		
TOTAL TIME OTHER TO		C	CHECKED BY OFFICER'S NAME*					
	OFFICER'S BADG		MBER* CHECKED BY OFFICER'S BADGE NUMBER* (CORRECT)					
0,6,7,0,6,0,1	3,0,2,1,5		2 , 2	9	1 1			

HSY8304 OH1U 1/19 [760-0820]



2,0,2,0,-,0,0,0,0,4,8,6,2, OMINER PHONE: INCLUSE AREA CODE ( SAME AS DRIVER) OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER) DAMAGE 0 2 SHAW, DEBRA, A DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 3354 30TH ST , CLEVELAND , OH 44109 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 LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 5, NP, E, T, 4, 6, C2, 7, H2, 7, 6, 9, 8, 8 O H GONEGRL 2,0,0,7, Hyundai **INSURANCE COMPANY** INSURANCE POLICY # INSURANCE VERIFIED COLOR VEHICLE MODEL STATE FARM 9873787E0135 SIL SONATA TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED INTERLOCK CLASS # PLACARD ID # 1 - ≤10K LBS 2 - 10,001 - 26K LBS DEVICE HIT/SKIP UNIT 0,2 PLACARD 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 12 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 0 1 3 - SPORT UTILITY VEHICLE 24 - WHEELCHAIR (ANY TYPE) 9 - AUTOCYCLE 14-SINGLE UNITTRUCK 23-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 BICYCLE 16-FARM FOILIPMENT 22 - ANIMAL WITH RIDER OF 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 WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 0 4 - HIGH AUTOMATION I 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16. FARM 21 - MAIL CARRIER 0,1, 2-TAX 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 - VEHICLETOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLF 12 - CONCRETE MIXER 0.1 INOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99 - OTHER / UNKNOWN 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER FOUIPMENT 10 - DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT - NO DAMAGE [ 0 ] ☐ - UNDERCARRIAGE [ 14 ] 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER CROSSWALK 4 - MIDBLOCK - MARKED AT INCIDENT SCENE 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS -TOP [ 13 ] -ALL AREAS [ 15 ] NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99 - OTHER / UNKNOWN B - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CROSSWALK 5 -TRAVEL LANE - OTHER LOCATION TRAILS - UNIT NOT AT SCENE [ 16] 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 4 1 1 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE SPECIFIED LOCATION 19-STANDING 3-STRIKING 9 - LEAVING TRAFFIC LANE 0,8, 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 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 21 - STANDING OUTSIDE 99 - UNKNOWN 11-SLOWING OR STOPPED 13-TOP 16 - WORKING DISABLED VEHICLE IN TRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9 - 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 - ROUNDARDUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT EQUIPMENT 9 - IMPROPER LANF CHANGE 23 - OPENING DOOR INTO 0,1, ILLEGALLY 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN 19 - LOAD SHIFTING/FALLING/ 2 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY 15 - SWERVING TO AVOID 3 - FLASHER CONTRIBUTING 5 - UNSAFE SPEED 6 - NO CONTROL 11-DROVE OFF ROAD 99 - OTHER IMPROPER ACTION 16 - WRONG WAY 20 - IM PROPER CROSSING 6 - IMPROPERTURN # of THROUGH LANES 12-IMPROPER BACKING RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS \_ 2 2 - INVOLVED-ACTIVE CROSSING EVENTS 1 2 0 1 - OVERTURN/ROLLCVER 3 - INVOLVED-PASSIVE CROSSING 6 - FOUIPMENT FAILURE 11 - CROSS CENTER! INF -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 2 - FIREJEXPLOSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM EQUIPMENT TRAVEL UNIT / NON-MOTORIST DIRECTION 23 - STRUCK BY FALLING. 3 - IMMERSION 18-ANIMAL - DEER 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 5 - NORTHEAST 19 - ANIMAL - OTHER 1 - NORTH 1 4 - JACKKNIFF 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13-OTHER NON-COLUSION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 5 - CARGO / EQUIPMENT 10-CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 3 TO 4 LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24-OTHER MOVABLE CBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST B - 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 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 51 - WALL STRUCTURE 1 - STATED / ESTIMATED SPEED SUPPORT 34 - MEDIAN GUARDRAIL 52 - BUILDING 46-FENCE 0,0,0 27 - BRIDGE PIER OR ABUTMENT 40-JITH ITY POLE BARRIER 53-TUNNEL 2 - CALCULATED / EDR 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE OR SUPPORT 54-OTHER FIXED OBJECT 48.TREE 3 - UNDETERMINED 29 - BRIDGE RAIL POSTED SPEED BARRIER 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 30-GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 3 5 1 MOST HARMFUL EVENT ☐ FIRST HARMFUL EVENT

LOCAL REPORT NUMBER



**LOCAL REPORT NUMBER** 2,0,2,0,-,0,0,0,4,8,6,2 OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE ( SAME AS DRIVER DAMAGE 0,3 STEWART, MARY DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 19705 KENSINGTON DR ,MOKENA ,IL 60448 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 3,GNAXYE,X4,KS,5,5,4,8,9,2 2,0,1,9 I L F393199 Chevrolet INSURANCE COMPANY INSURANCE POLICY # INSURANCE VERIFIED COLOR VEHICLE MODEL NATION WIDE 9958888756331 BLU **EOUINOX** TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED CLASS # PLACARD IN # 1 - ≤10K LBS. HIT/SKIP UNIT DEVICE 2 - 10,001 - 26K LBS 0 2 PLACARD 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-WHEELED 0 3 - SPORT UTILITY VEHICLE 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 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 BICYCLE 5 - CARGO VAN 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17 - MOTORHOME 99 LUNKNOWN OR HIT/SKIP (ATV / UTV) 00 # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN 12 MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 0 4 - HIGH AUTOMATION 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16-FARM 21 - MAIL CARRIER 0,1, 2-TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER LUNKNOWN 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 BODYTYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0 1 / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13 - AUTO TRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10 - FLAT BED 14-GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99-OTHER/UNKNOWN **⊕** 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT - 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 AT INCIDENT SCENE 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS \_\_-TOP [ 13 ] -ALL AREAS [15] NON-NOTORIST 2-INTERSECTION-UNMARKED CROSSWALK 99-OTHER/UNKNOWN B - SIDEWALK 11 - SHARED USE PATHS OR CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION - UNIT NOT AT SCENE [16] TRAILS 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT 2-NON-COLLISION OR LEAVING VEHICLE 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 0 3 - CHANGING LANES 3 3-STRIKING 0 - NO DAMAGE SPECIFIED LOCATION 19-STANDING 14 - UNDERCARRIAGE 9 - LEAVING TRAFFIC LANE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 15 - WALKING, RUNNING, 10-PARKED 20 - OTHER NON-MOTORIST DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 21 - STANDING OUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 16 - WORKING 13 - TOP DISABLED VEHICLE & STRUCK IN TRAFFIC 6 - MAKING LEFT TURN 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 / ACOA 18 - OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE EQUIPMENT 23-OPENING DOOR INTO  $1_{1}5_{1}$ ILLEGALLY 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN 19 - LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY 15 - SWERVING TO AVOID CONTRIBUTING 5 - UNSAFE SPEED 3 - FLASHER 6 - NO CONTROL SPILLING 11-DROVE OFF ROAD 99 - OTHER IMPROPER ACTION 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/ROLLOVER
2 - FIRE/EXPLOSION 6 - EQUIPMENT FAILURE 3 - INVOLVED-PASSIVE CROSSING 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM EQUIPMENT TRAVEL UNIT / NON-MOTORIST DIRECTION 23-STRUCK BY FALLING. 3 - IMMERSION 18-ANIMAL - DEER B - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 1 4 - JACKKNIFF 9 - RAN OFF ROAD LEFT 19-ANIMAL - OTHER 5 - NORTHEAST 13-OTHER NON-COLLISION ANYTHING SET IN MOTION 5 - CARGO / EQUIPMENT 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 10-CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 3 TO 4 LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24-OTHER MOVABLE CBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25-IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 50-WORK ZONE MAINTENANCE 43-CURB / CRASH CUSHION 32 - PORTABLE BARRIER EQUIPMENT 38-OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26-BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 51-WALL 39-LIGHT/LUMINARIES 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED SUPPORT 34 - MEDIAN GUARDRAIL 46-FENCE 52-BUILDING 27 - BRIDGE PIER OR ABUTMENT 0,1,5 BARRIER 40-UTILITY POLE 51-TUNNEL 47 - MAILBOX 2 - CALCULATED / EDR 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE 3 - UNDETERMINED 29-BRIDGE RAIL BARRIER OR SUPPORT POSTED SPEED 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 30-GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42-CULVERT 3 5 1 MOST HARMFUL EVENT FIRST HARMFUL EVENT

OHO DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
							2.0.2.00.0.0.0.4.8.6.2.							
UNIT #									DATE OF BIRTH AGE GENDER					
	ARNOLD, WILLIAM, JAMES								0,7,1,8,1,9,8,2,3,7, M					
	ESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE													
0	177 BERWIN DR ,Stow ,OH 44224  JURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME CITY) SAFETY EQUIPMENT SEATING DOCUMENT AND DAG HEAVE   CHECKED   TRANSPORT													
Ž	INJURED TAKEN BY SAFENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, OLT) SAFETY EQUIPMENT USED O. 4							DOT-COMPLIANT						
OL STATE		OFNEE MIMOED		055511				0,4						
07	CODE							OFFENSE DESC	RIPTION		CITATION NU	JMBER		
O, H	L RL459257									DDILC	TEST(S)			
OL CLASS	SELECT UP TO 2	RESIRICITOR SELECT		FRACTED ALCOHOL / DRUG SUSPECTED  ALCOHOL MARIJUANA			COMPLIEN	STATUS TYP		STATUS TYPE RESULT SELECTUPTO 4				
4	السالسا	0,3		1 OTHER DRUG			1 ,	1 1		1				
UNIT #	NAME: LAST, F	IRST, MIDDLE						DATE OF BIRTH			AGE GENDER			
0,2	742										2 F			
	ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE													
3354 30TH ST , CLEVELAND , OH 44109  INJURED TAKEN TO: MEDICAL FACILITY (HAME, CITY) SAFETY EQUIPMENT USED 0.4 DOT-COMPLIANT MC HELMET 0.1 1 1 1 1														
E INJURIES	INJURED E	MS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-Com	SEATING POSITION	AIR BAG USAGE	EJECTION TRAPPED		
2 5	BY							USED 0 4	MC HEL		1	1 1 1		
OL STATE		CENSE NUMBER		OFFEN	SE CHAR	GED	LOCAL	OFFENSE DESC	CRIPTION CITATI			JMBER		
<b>O</b> , H	-1	06												
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT I		/ER TRACTED		HOL / DRUG SUSPI		CONDITION	ALCO STATUS TY	HOL TEST	DRUG STATUS   TYPE	TEST(S) RESULT SELECT UP TO 4		
1		41 10 10	BY	1	ALCOHOL MARIJUANA						ALBOLI SELECTORIO			
4				Ţ	01	HER DRUG		1						
UNIT#	NAME: LAST, F		DICK						DATE OF BIRTH AGE GENDER					
	-1	RT, RYAN, PAT	RICK						0,3,1,1,2,0,0,3,1,6, M					
ADDRESS	S: STREET, CITY, STA		TZTONI A		CO 4 44				CONTACT P	HONE - INCLUDE AREA C	ODE	- 3/4		
19/0		NGTON DR ,MO	KENA						L					
Z	TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	CNAME, CITY)	SAFETY EQUIPMENT	DOT-COM	PLIANT	AIR BAG USAGE	EJECTION TRAPPED		
	J BY					,		0,4						
OL STATE		CENSE NUMBER			CODE			OFFENSE DESC	OFFENSE DESCRIPTION			CITATION NUMBER		
OL STATE	S36373			4511.21A			Assured Clea			60732				
E OL CLASS	SELECT UP TO 2	RESTRICTION SELECT	DIST	VER TRACTED		COHOL MAI		CONDITION	STATUS TY	PE VALUE	STATUS TYPE	RESULT SELECT SPICE		
. 4			BA	1.		HER DRUG	ANAUUA	1 .	1 1		1			
INJ	URIES	SEATING POSITION		IR BAG		OL CLAS	S	OL RESTRIC	1	DRIVER DISTRAC		EST STATUS		
1-FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP	LOYED	7	1-CLASS A		1-ALCOHOLINTER	CONTRACTOR OF THE PARTY OF THE	1 - NOT DISTRACTED	William Co. March & Co. Co. Co. Co.	EGIVEN		
	D SERIOUS INJURY D MINOR INJURY	2-FRONT MIDDLE	2 - DEPLOYE	Charles Santa		2 - CLASS B		2 - COL INTRASTAT	Start of the Start of the	2 - MANUALLY OPERATINI Electronic Commun	TOATION	REFUSED		
4 - POSSIBLE	THE RESERVE OF STREET	:3 - FRONT - RIGHT SIDE	3 - DEPLOYE 4 - DEPLOYE	ED SIDE 3 - CLASS C ED BOTH FRONT / SIDE 4 - REGULAR CLASS			3 - CORRECTIVE LE 4 - FARM WAIVER	NSES	DEVICE TEXTING, TYPING, DIALING		GIVEN, CONTAMINATED PLE / UNU SABLE			
5 - NO APPARE	The same of the same of the same of	4-SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP.	PLICABLE (OHIO = D)			5 - EXCEPT CLASS	A BUS	3 -TALKING ON HANDS, FREE		4 - TEST GIVEN, RESULTS KNOWN			
INJURE	D TAKEN BY	.5-SECOND - MIDDLE	9 - DEPLOY!	ENT UNKNOWN 5 - M/C MOPED ONLŸ 6 - EXCEI 6 - NO VALID OL & ĈLA			6 - EXCEPT CLASS & CLASS B BUS	1	COMMUNICATION DEVI	ICE 5-TEST	GIVEN, RESULTS Nown			
1 - NOT TRANS	SPORTED .	6-SECOND-RIGHT SIDE				0-140 WEID OF		7 - EXCEPT TRACTO		4 - TALKING ON HAND-HEI COMMUNICATION DEVI	ICE .	House the second		
/TREATED	AT SCENE	7-THIRD-LEFT SIDE (MOTORCYCL SIDE CAR)	The same of the same	ECTION	el tara	OL ENDORSE	MENT	8 - INTERMEDIATE	LICENSE	5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE	AN 1-NON	HOL TEST TYPE		
3-POLICE		8-THIRD - MIDDLE 2 - PARTIALLY EJEC							MIT	6 - PASSENGER	2 - BL00	COLD SALLANDERS OF THE		
9-OTHER/U	NKNOWŊ	9 THIRD - RIGHT SIDE	3-TOTALLY	主治12年10年6月1日 日本帝医院的外国的政治规则从45年6月1日			RESTRICTIONS		7-OTHER DISTRACTION		3 URINE			
SAFFTY	EQUIPMENT	10 - SLEE ER SECTION  OF TRUCK CAB	4 - NOT APP	LICABLE		N -TANKER		10 - LIMITED TO DAY 11 - LIMITED TO EM	ASSESSED TO SHEET SHEET	8-OTHER DISTRACTION O	4 - BRE) Outside 5 othe			
1 - NONE USE	and the second second second	11- PASSENGER IN OTHER  ENCLOSED CARGO AREA	T	RAPPED		Q - MOTOR SCOOTER R - THREE WHEEL M	TARCYCLE	12 - LIMITED - OTHI		THE VEHICLE				
The second second	R BELT ONLY USED	(NON-TRAILING UNIT, BUS,	1 - NOTTRA			S - SCHOOL BUS	, , , , , , , , , , , , , , , , , , , ,	13 - MECHANICAL D	EVICES	9-OTHER/UNKNOWN	DR 1-NON	UG TEST TYPE		
100000000000000000000000000000000000000	IELT ONLY ÜSED PICK UP WITH CAP) 2 - EXTRICAT LDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHANI			TED BY IICAL MEANS T DOUBLE & TRIPLE TRAILERS			(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		2-BLOOD			
5 - CHILD RES	RESTRAINT SYSTEM - CARGO AREA 3 - FREED B			X - TANKER / HAZMAT			ADAPTIVE DEVICES)  14 - MILITARY VEHICLES ONLY		1 - AP,PARENTLY NORMAL		3 - URINE			
FORWARD	FACING 13 TRAILING UNIT NON-MECHANICAL				MEANS 14- MILLTARY VE 3 GENDER 15- MOTOR VEHIC			THE WAY TO SEE THE PARTY OF THE	2 - PHYSIGAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPR		4-OTHER			
6 - CHILD RES	ESTRAINT SYSTEM — 14 RIDING ON VEHICLE EXTERIOR (MON-TRAILING UNIT)				F-FEMALE			AIR BRAKES		ANCRY DIS (REFD)		DRUG TEST RESULT(S)		
7 - BOOSTER	ER SEAT 15 - NON-MOTORIST				M - MALE			16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		4 - ILLNESS 5 - Fell Asleep, Fainted,		1-AMP ETAMINES		
8 - HELMET I					U - OTHER/UNKNOWN			18-OTHER		FAT GUED, ETC.		2 - BARBITURATES 3 - BENZODIAZEPINES		
	(NEES, ETC.)									6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		4 - CANNABINOIDS		
10 - REFLECTI	FIFTH CHAPTER SANS			An in						5-000	5-COCAINE			
11 - LIGHTING / BICYCLE	– PEDESTRIAN Only									<b>中国共享的</b>	6-OPIATES/OPIOIDS 7-OTHER			
99-OTHER/U	INKNOWN		2 2								The second second second	ATIVE RESULTS		

OHIO DE	OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER							
w.	ACCOLUMN / AATIME32 WONEHARM						2,0,2,0,-,0,0,0,4,8,6,2,							
UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
01	ARNOLD, ALISSA, H							1,2,0,8,1,9,8,2,3,7, F						
ADDRESS:	IDRESS: STREET, CITY, STATE ZIP						CONTACT PHONE - INCLUDE AREA CODE							
	3177 BERWIN DR ,Stow ,OH 44224													
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
_ 5 _	BY L					0.4	MC HELMET 0 3 1 1 1							
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER							
02	ANDI	RA, HEAVANN	I, DE				0,8,0,5,1,9,9,8,21 F							
ADDRESS:	ADDRESS: STREET, CITY, STATE, 71P							- INCLUDE AREA CO	DE					
3042	ELYRIA AVE ,LORAIN ,OH 44055							<u> </u>						
INJURIES	INJURED TAKEN	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPME						DOT-COMPLIANT						
5	BY					0.4	MC HELMET 0 3 1 1							
UNIT#		T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER							
_03_	KORI	DES, MATTHE	EW, T				0 5 2 1 2 0 0 3 16 M							
ADDRESS	STREET, CITY,						CONTACT PHONE - INCLUDE AREA CODE							
		CT ,TINLEY ,	1L 60487											
INJUNIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
5	BY					0,4	MC HELMET	0 3	1_	1	1			
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER			
ADDRESS	: STREET, CITY,	STATE ZIP					CONTACT PHONE	- INCLUDE AREA CO	OE					
ADDRESS		duri com								1 1				
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO. MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
	BY						MC HELMET		L					
2 FAT	ATTENDED	JRIES	All the second second	/ EQUIPMENT USED	TEA - DATE - STATE - S	SEATING POS	ITION	DESTRUCT	AIR BAG	USAGE	2/5920			
1 - FATA		RIOUS INJURY	1 - NONE US VEHICLE	OCCUPANT		T – LEFT SIDE ORCYCLE DRIV	ER)	1 - NOT DE						
2017/2/20		NOR INJURY	2 - SHOULDE	R BELT ONLY USED		T - MIDDLE	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE							
W 4157	SIBLE INJL		3 - LAP BELT	TONLY USED		T – RIGHT SIDE ND – LEFT SIDE								
5 - NO A	PPARENT	INJURY	4 - SHOULDE	ER & LAP BELT USED	(MOTORCYCLE PASSENGER)			FRONT/SIDE						
	INTERPEN	TAKEN RY	A STATE OF THE PARTY OF THE PAR	ESTRAINT SYSTEM –	STATE OF THE PARTY	5 - SECOND - MIDDLE			5 - NOT APPLICABLE					
INJURED TAKEN BY FORWARD FACING  1 - NOT TRANSPORTED 6 - CHILD RESTRAINT SYSTEM -					6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE			9 - DEPLOYMENT UNKNOWN						
NAME OF THE PARTY	EATED AT S	THE RESIDENCE OF STREET, SALES AND ADDRESS OF THE PARTY O	REAR FA		(MOT	(MOTORCYCLE SIDE CAR)			EJECTION					
2- EMS	2 - EMS 7 - BOOSTER SEAT				8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE			1 - NOT EJECTED						
3 - POLICE 8 - HELMET USED					THE LOCAL PROPERTY.	10 - SLEEPER SECTION OF TRUCK CAB			2 - PARTÍALLY EJECTED					
9 - OTHER / UNKNOWN 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)				Colony Bridge of the Colon State	CARCO AREA (NON TRANSITION INTERNAL			The state of the s	LLY EJECTED					
Parameter	ALIDATED IN	NDER		IVE CLOTHING		BUS, PICK UP WITH CAP)			4 - NOT APPLIGABLE					
F-FEMA M-MAL	SECTION V. F. SCHOOL			G - PEDESTRIAN		2 - PASSENGER IN UNENCLOSED CARGO AREA			TRAPPED					
CARLEDO ATELS	R/UNKNO	WN	/ BICYCLI	THE PARTY OF THE PARTY OF THE PARTY.	Mind States States	13 - TRAILING UNIT			1 - NOTTRAPPED					
99 - OTHER / UNIKNO			nvikuomu	IG ON VEHICLE	EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS								
				(NON-TRAILING UN				3 - FREED BY NON-MECHANICAL						
Man h					THE POST CONTRACTOR	R/UNKNOWN		MEANS						
	ST, FIRST MIDE	LE					DAT	E OF BIRTH		AGE	GENDER			
ADDRESS											ـــــا اـ			
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE								
									1_1_	1 1				
NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
ADDRESS: STREET, CITY, STATE, ZIP						Loon Touris								
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE								
NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE   GENDER								
						DAI	COLDIKIN		AGE	GENUER				
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
							1 1							



OHIO DEPARTMENT Narrative Continuation

LOCAL REPORT NUMBER

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

was a sheet of ice and Unit #3 slid into Unit #1 and Unit # 2 at the same time. There were no injuries reported on scene. The driver of Unit # 3 was issued a cite.

Officer Brooks 215