OHIO DEPARTMENT TRAFFIC CRA	LOCAL REPORT NUMBER*										
PHOTOS TAKEN OH-2 O	H-3 LOC	AL INFORMATION	ELD FOR SUPPLEME		2,0,2,1,-,0,0,0,1,5,9,5,3,						
☐ OH-1P ☐ O		NCIC*	HIT/SKIP	TS UNIT IN ERROR							
SECONDARY CRASH PRIVATE PROP	[0]	6   7   0   3	1 - SOLVED	0 1 98-ANIMAL							
1 - CITY	ION: CITY, VIL	LAGE, TOWNSHIP*			CRASH DATE /		CRASH SEVERITY				
6 7 1 2-VILLAGE Ken	t				019121712101211	/11314151	5 1 - FATAL 2 - SERIOUS INJURY				
ROUTE TYPE ROUTE NUMBER PREFIX N - N S - S E - E	OUTH LOC	ATION ROAD NAME		ROAD TYPE	LATITUDE DE	CIMAL DEGREES	SUSPECTED				
3 E-E		CHOOL		ST	[4:1] <sub>0</sub> :1   4:3	2   0   7	3 - MINOR INJURY Suspected				
ROUTE TYPE ROUTE NUMBER PREFIX N - N	ORTH REF	ERENCE ROAD NAME (ROAL	OUSE #)	ROAD TYPE	LONGITUDE D	ECIMAL DEGREES	4 - INJURY POSSIBLE				
ROUTE TYPE ROUTE NUMBER PREFIX N - N S - S E - E E - E - E - E - E - E - E -	AST VI	NE			ST	- [8:1]e:3:5:1	1,2,4,	5 - PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION	Jest H	ROUTETYPE		ROAD TYPE			INTERSECTION F				
1 - INTERSECTION N - NORTH 2 - MILE POST S - SOUTH	100		L - ALLEY V - AVENUE		D - ROAD Q - SQUARE	X WITHIN INTE	RSECTION OR ON	APPROACH			
3-HOUSE # E-EAST W-WEST	1000	EITHE OUTTOOLE	L - BOULEVARD	MP - MILEPOST S	NUMBER OF APPROACHES						
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE	CR - NUM	IBERED COUNTY ROUTE	R - CIRCLE T - COURT	OV - OVAL TI	Y						
1 - MILES 2 - FEET	TR - NUM	BEREDTOWNSHIP	R - DRIVE		L - TRAIL 'A - WAY	ROADWAY DIV	TOED.				
3-YARDS	1100	н	PL - PLACE		ROADWAY DIV	INFO					
LOCATION OF FIRST HARMFUL 1 - ON ROADWAY 9 - CROS	L EVENT SSOVER			H COLLISION/IMPAC - REAR-TO-REAR	т	DIRECTION OF TRAVE	EL MEDIAN TYPE				
	VEWAY/ALLE	EY ACCESS BE	TIMEEN	- REAK-TU-REAK 6 - BACKING		N - NORTH S - SOUTH		DIVIDED FLUSH MEDIAN (<4 FEET) DIVIDED FLUSH MEDIAN (≥4 FEET)			
J-IN WEDIAN 11-KAI	LWAY GRADE ARED USE PA	CROSSING VE	HICLES IN 6	- ANGLE ' - SIDESWIPE, SAME	DIRECTION	E - EAST					
5 - ON GORE TRA	ILS			3 - SIDESWIPE, OPPOS		W-WEST	3 - DI	VIDED, DEPRESSED MEDIAN			
6-OUTSIDE TRAFFIC WAY 13-BIK 7-ON RAMP 14-TOL	L BOOTH	3 - HE.	AD-ON 9	- OTHER / UNKNOW	/N			VIDED, RAISED MEDIAN NY TYPE)			
8-OFF RAMP 99-OTH	IER/UNKNO	WN					9-0T	HER/UNKNOWN			
WORK ZONE RELATED		RK ZONE TYPE	LOCATIO	N OF CRASH IN WO	RK ZONE	CONTOUR	CONDITION	NS SURFACE			
WORKERS PRESENT		CLOSURE SHIFT/CROSSOVER	1-	BEFORE THE 1ST W WARNING SIGN	VORK ZONE	_1_	1	2			
LAW ENFORCEMENT PRESENT	3-WORK	CON SHOULDER		ADVANCE WARNING	G AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE			
		RMITTENT OR MOVING WOR		ACTIVITY AREA		2 - STRAIGHT GRADE	2-WET	2 - BLACKTOP, BITUMINOUS,			
ACTIVE SCHOOL ZONE	5 - OTHE	IR	5 -	TERMINATION ARE	A	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT			
LIGHT CONDITION		WEATH	HER			9 - OTHER/UNKNOWN	5 - SAND, MUD, D	IRT, 4 - SLAG, GRAVEL,			
1 - DAYLIGHT 1 2 - DAWN/DUSK		1-CLEAR 2-CLOUDY	6 - SNOW 7 - SEVERE	CROSSWINDS			OIL, GRAVEL 6 - WATER (STAN	STONE			
3 - DARK - LIGHTED ROADWAY	E 8-BLOWING	S SAND, SOIL, DIRT,			MOVING)	9 - OTHER/UNKNOWN					
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIG	9 - FREEZIN	G RAIN OR FREEZII / UNKNOWN	NG DRIZZLE		7 - SLUSH 9 - OTHER/UNKNO						
9 - OTHER / UNKNOWN							7-UIHER/UNKNI	NWO			
NARRATIVE								Indicate the north direction with			
Unit 2 was stopped eastbo			he					an "N" on the compass diagram.			
stop sign at Vine St. Unit	t 2 start	ed forward as									
Unit 1 was Southbound o	n Vine	St. Unit 1 ran t	he								
stop sign without stoppin	g. Unit	2 struck unit 1	in								
the side.							Vine St				
The state of the s				E, 64	shool St						
	*****			<del></del>							
AND THE RESIDENCE OF THE PROPERTY OF THE PROPE						T					
CRASH REPORTED DATE / TIME	DISP	ATCH DATE / TIME	RIVAL DATE / TIME		SCENE CLEADED	ATE / TIME	REPORT TAKEN BY				
			₩ 2011				N POLICE ASSUME				
TOTAL TIME OTHER	TOTAL	OFFICER'S NAME*	<u>/_2;0;2,1;/,1;3;3;0; 0;9;2,7,2;0;2,1;/,1;4;0;1;  ==                                 </u>				MOTORIST -				
ROADWAY CLOSED INVESTIGATION TIME	Ennemoser, James				SUPPLEMENT (CORRECTION OF ADDITION						
	*		Y OFFICER'S BADGE N	UMBER*	TO AN EXISTING REPORT SENT TO COPS)						
V V V I L L V	1,3,5	2 2 6			2 , 5	1 3 1		_1			



HSY8304 OH1U 1/19 [760-0820]

2 1 0 2 1 1 - 1 0 1 0 1 1 5 9 5 3 OWNER NAME: LAST, FIRST, MIDDLE (XISAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE I X SAME AS DRIVERS DAMAGE 0 | 1 | DICKEY, PATRICK, LAWSON DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 227 VALLEYVIEW ST, Kent, OH 44240 1 2 - MINDR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN 1 1 1 DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE  $O_{\perp}H_{\perp}$ FKD3617 J<sub>1</sub>T<sub>1</sub>D<sub>1</sub>K<sub>1</sub>B<sub>1</sub>2<sub>1</sub>0<sub>1</sub>U<sub>1</sub>8<sub>1</sub>9<sub>1</sub>7<sub>1</sub>8<sub>1</sub>5<sub>1</sub>5<sub>1</sub>3<sub>1</sub>7<sub>1</sub>3 2 10 10 19 1 Toyota INSURANCE COMPANY INSURANCE VERIFIED INSURANCE POLICY # COLOR VEHICLE MODEL **ALL STATE** 992159100 GRN **PRIUS** 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 DEVICE HIT/SKIP UNIT 2 - 10.001 - 26K LBS PLACARD 0 1 J 3 - >26K LBS 11 1 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) B - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEEL CHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26-BICYCLE 5 - CARGO VAN BICYCLE 16. FARM FOUIPMENT 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) 0 # 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 1 - NONE 6 - PUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99-OT-LER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING B - 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 23-SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12-CONCRETE MIXER 0 1 CARGO I NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOY 10-FLAT BED 14-GARBAGE/REFUSE BODY \* 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99-OT-LER / UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEFRING 8 - TRAILER FOILIPMENT 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-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99-OTHER/UNKNOWN 8 - 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 3-STRIKING 0 1 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE SPECIFIED LOCATION 19-STANDING 9 - LEAVING TRAFFIC LANE 1-12 - REFERTO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK 15 - WALKING, RUNNING, PRE-CRASH 4 - OVERTAKING/PASSING 10-PARKED 20-OTHER NON-MOTORIST 0 | 5 | DIAGRAM JOGGING, PLAYING 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN 21 - STANDING OUTSIDE 99 - UNKNOWN 11-SLOWING OR STOPPED 16-WORKING 13-TOP DISABLED VEHICLE & STRUCK 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 2 - FAILURE TO YIELD PARKED POSITION 8-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED 3 - RAN RED LIGHT EQUIPMENT 9-IMPROPER LANE CHANGE 23-OPENING DOOR INTO 0 4 ILLEGALLY 2 - TW0-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 NON-COLLISION 1 2 0 1 · OVERTURN/ROLLGVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - ANIMAL -- FARM EQUIPMENT TRAVEL UNIT / NON-MOTORIST DIRECTION 23-STRUCK BY FALLING. 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 19-ANIMAL - OTHER 1 - NORTH 5 - VORTHEAST J 4 - JACKKNIFF 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13-OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 5 - CARGO / EQUIPMENT 10-CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT 1 \_ to <u>2</u>\_ 7 - SOUTHEAST LOSS OR SHIFT 3 - EAST 24 - OTHER MOVABLE OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50-WORK ZONE MAINTENANCE / CRASH CUSHION 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44 - DITCH EQUIPMENT **UNIT SPEED** DETECTED SPEED 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 51 - WALL STRUCTURE 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 46-FENCE 27 - BRIDGE PIER OR ABUTMENT 40-UTILITY POLE BARRIER ─ 2 - CALCULATED / EDR 53-TUNNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE OR SUPPORT 54-OTHER FIXED OBJECT 4R-TREE 3 - UNDETERMINED 1 29 - BRIDGE RAIL BARRIER POSTED SPEED 99 - OTHER / UNKNOWN 49 - FIRE HYDRANT 30-GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 2 5 1 MOST HARMFUL EVENT ☐ FIRST HARMFUL EVENT

LOCAL REPORT NUMBER



HSY8304 OH1U 1/19 [760-0820]

**LOCAL REPORT NUMBER** 2,0,2,1,-,0,0,0,1,5,9,5,3, OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS ORIVER) UNIT # OWNER PHONE: INCLUDE AREA GODE (X) SAME AS DRIVER DAMAGE 0 | 2 | TASSONE, MARY, M DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 327 SCHOOL ST, 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 LP STATE | LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE OHI HOM9465  $[2_{1}T_{1}3_{1}F_{1}1_{1}R_{1}F_{1}V_{1}1_{1}M_{1}C_{1}2_{1}3_{1}3_{1}0_{1}8_{1}0_{1}]_{1}2_{1}0_{1}2_{1}1_{1}$ Tovota INSURANCE COMPANY INSURANCE VERIFIED **INSURANCE POLICY #** VEHICLE MODEL COLOR **GRANGE** 4033671 WHI RAV 4 TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED INTERLOCK CLASS # PLACARD ID # 1 - <10K LBS HIT/SKIP UNIT DEVICE 2 - 10.001 - 26K LBS PLACARD 0 1 J 3 - >26K LBS  $\perp \perp \perp$ 7 - MOTORCYCLE 2-WHEELED 1 - PASSENGER CAR 12-GOLF CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEEL CHAIR (ANY TYPE) 0 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNITTRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26-BICYCLE 5 - CARGO VAN BICYCLE 16-FARM FOULPMENT 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 # OFTRAILING 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 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS 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/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 CARGO I NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGO TANK 13-AUTO TRANSPORTER 2 - BUS 4 - LOGGING 4 - CARGO VANIENCI OSED BOX 10-FLAT BED 14-GARRAGE/REFUSE BODY \* 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99 - OTHER / UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99-OTHER/UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER FOILIPMENT 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-MOTORIST 2-INTERSECTION-UNMARKED CROSSWALK 99-OTHER/IINKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CROSSWALK 5 - TRAVEL LANE - OTHER LISCATION 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 3 3-STRIKING 0 - NO DAMAGE 0 1 3 - CHANGING LANES 14 - UNDERCARRIAGE SPECIFIED LOCATION 19-STANDING 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. 10-PARKED 20 - OTHER NON-MOTORIST 10 112 DIAGRAM JOGGING, PLAYING 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN 21 - STANDING OUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 13 - TOP 16 - WORKING DISABLED VEHICLE & STRUCK IN TRAFFIC 6 - MAKING LEFTTURN 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 2 - FAILURE TO YIELD PARKED POSITION 8-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDAROUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT EQUIPMENT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 10 112 - TW0-WAY 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19 - LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY 15 - SWERVING TO AVOID 3 - FLASHER CONTRIBUTING 5 - UNSAFE SPEED 6 - NO CONTROL SPILLING 11 - DROVE OFF ROAD 99 - OTHER IMPROPER ACTION 16 - WRONG WAY 20 - IM PROPER CROSSING 6 - IMPROPERTURN 12 - IMPROPER BACKING # of THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING 2 NON-COLLISION 1 2 0 1 · OVERTURN/ROLLGVER 3 - INVOLVED-PASSIVE CROSSING 6 - FOULPMENT FAILURE 22 - WORK ZONE MAINTENANCE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE OPPOSITE DIRECTION OF 2 - FIRE/EXP\_OSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM EQUIPMENT TRAVEL UNIT / NON-MOTORIST DIRECTION 23 - STRUCK BY FALLING 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 5 - NORTHEAST 19-ANIMAL - OTHER 1 - NORTH 1 4 - JACKKNIEE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13-OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NDRTHWEST 5 - CARGO / EQUIPMENT 10-CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT то 3 4 LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24-OTHER MOVABLE OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50-WORK ZONE MAINTENANCE / CRASH CUSHION 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44 - DITCH EQUIPMENT HNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 51 - WALL 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL SUPPORT 52-BUILDING 46 - FENCE 27 - BRIDGE PIER OR ABUTMENT 0 0 5 40-UTILITY 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 AR TREE 3 - UNDETERMINED 1 29 - BRIDGE RAIL POSTED SPEED BARRIER 99 - OTHER / UNKNOWN 49 - FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 2,5 1 MOST HARMFUL EVENT 

OHIO DES	OF PURIS BAFFY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
								2+0+2+1+-+0+0+0+1+5+9+5+3+							
UNIT#									DATE OF BIRTH AGE GENDER						
0.1	DICKEY, PATRICK, LAWSON							1 2 / 0 7 / 1 9 8 1 3 9 M							
ADDRESS:	STREET, CITY, ST.	- '	<b>NTE</b> 4.4	2.40					CONTACT PHONE - INCLUDE AREA CODE						
<u> </u>	VALLEYVIEW ST, Kent, OH 44240														
INJURIES	INJURED I	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT OF THE PROPERTY						
	J	ICENSE NUMBER		OFFEN	SE CHAF	OCED	1.0041	OFFENSE DESC		1	L L L L CITATION NUMBER				
OL STATE	OF ERRIOR E	ICENSE NOMBER		331.		KUED	LOCAL	Operation		iala	14897	NUMBER			
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UPTO3 DRT			OHOL / DRUG SUSPECTED		CONDITION		ALCOHOL TEST		DRUG TEST(S)			
	SELECT UP TO 2  RESTRICTION SELECT UP TO 3  DRIVER DISTRACT BY							CONDITION	STATUS TYP		STATUS TYPE RESULT SELECT UPTO4				
4				_1	01	THER DRUG		1	1 1	_	1 1				
UNIT#	NAME: LAST, F	*							DATE OF BIRTH AGE GENDE						
0.2	TASSO	NE, MARY, M							1 2 / 2 3 / 1 9 4 3 7 7				_ <b>F</b>		
ADDRESS:	: STREET, CITY, ST	,							CONTACT PH	IONE - INCLUDE AREA CO	300E				
o		LST,Kent,OH	44240												
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT	DOT-COMP		AIR BAG USAG	E   EJECTION	TRAPPED		
	BY							0.4	MC HELW	0 1	11	1 1 1			
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAF	RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITATION	NUMBER			
OL STATE O, H	Lennonnesses		2011							IOI TECT		10.75			
UL CLASS					VER TRACTED ALCOHOL / DRUG SUSPECTED CONDITION  ALCOHOL X MARLIUANA				STATUS TYPE VALUE STATUS TYPE RESULT SE						
4			, ,	1	$\equiv$	THER DRUG		1 ,	1 1 1		1 1				
UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER						
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE					
010R												1 1	1		
ADDRESS:	INJURED I	EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT	DOT-COMP	SEATING POSITION	AIR BAG USAGI	E EJECTION	TRAPPED		
0N/ 	BY L				USEU			MC HELMET							
OL STATE				SE CHAR	ARGED LOCAL OFFENSE DESC			RIPTION CITA			TION NUMBER				
<u> </u>				<u> </u>											
OL CLASS	SELE P		DRIS	VER TRACTED		DHOL / DRUG SUSPE		CONDITION	STATUS TYP	OL TEST VALUE	STATUS TYP	E RESULT	SELECTUP 4		
				i	=	THER DRUG			, ,,				0 0 1		
	JRIES	SEATING POSITION	А	IR BAG	O TOTAL	OL CLASS		OL RESTRIC	TION(S)	DRIVER DISTRACT	ION	TEST STA	TUS		
1-FATAL 2-SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYI			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTATI	arustar ill	1 - NOT DISTRACTED		NE GIVEN			
3 - SUSPECTED		2 - FRONT - MIDDLE	3 - DEPLOY			3-CLASS C		3 - CORRECTIVE LE		2 - MANUALLY OPERATING ELECTRONIC COMMUNI	ICATION 3.TE	ST REFUSED St given, con	TAMINATED		
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		ED BOTH FRO	NT/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DEVICE (TEXTING, TYP: DIALING)	JA.	MPLE / UNUSA St given, res	THE DESIGNATION		
5 - NO APPAREN	VI INJURY	(MOTORCYCLE PASSENGER)	5 - NOT APP 9 - DEPLOYI	LICABLE Ment unkno	)WN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS A 6 - EXCEPT CLASS A		3 - TALKING ON HANDS-FR. COMMUNICATION DEVI	Lt.	ST GIVEN, RES	ATTEMPTED TO SECTION		
INJURED 1-NOTTRANSP	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAND-HEL COMMUNICATION DEVI	Daniel Little	KNOWN			
/TREATED AT		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		ECTION		OL ENDORSEN	IENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		- OTHER ACTIVITY WITH	AN	OHOL TES	TTYPE		
2 - EMS 3 - POLICE		8-THIRD-MIDDLE	1 - NOT EJE 2 - PARTIAL			H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9-LEARNER'S PER	AAIT	ELECTRONIC DEVICE  6 - PASSENGER	1 - NO 2 - BL				
9-OTHER/UNK	CNOWN	9-THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS		7 - OTHER DISTRACTION	3-UR				
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP	LICABLE		N-TANKER		10 - LIMITED TO DAY 11 - LIMITED TO EMP		INSIDE THE VEHICLE  B - OTHER DISTRACTION OF	4-BR UTSIDE 5-OT				
1 - NONE USED	and all areas blocked and	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		Q - MOTOR SCOOTER  R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE	R	THE VEHICLE		RUG TEST	TYDE		
2 - SHOULDER B 3 - LAP BELT ON	BELT ONLY USED	(NON-TRAILING UNIT, BUS, PICK UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS		13 - MECHANICAL DE (SPECIAL BRAKE	AICE2	9 - OTHER / UNKNOWN	1 - NO	best during the same			
California Marienta	LAP BELT USED	12 - PASSENGER IN UNENCLOSED	MECHAN	IICAL MEANS	2019	T DOUBLE & TRIPLET  X-TANKER / HAZMAT	IRAILERS	CONTROLS, OR O	THER	- APPARENTLY NORMAL	2 - BL				
5 - CHILD RESTI FORWARD FA	RAINT SYSTEM - ACING	CARGO AREA 13-TRAILING UNIT	3 - FREED B	IY Chanical M	EANS		15 66	14 - MILITARY VEHIC	CLES ONLY 2	-PHYSICAL IMPAIRMENT	3 - UR 1 4 - 0T				
6 - CHILD RESTI	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				GENDER F-FEMALE	2 (2)	15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT 3	- EMOTIONAL (E.G., DEPRE. ANGRY DISTURBED)	SSED	G TEST RE	SULT(S)		
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		- ILLNESS	Harrison of the same of	IPHETAMINES			
8 - HELMET US	ED	99 - OTHER / UNKNOWN				U OTHER/UNKNOWN		17 - PROSTHETIC ALC	5	- FELL ASLEEP, FAINTED, FATIGUED, ETC.		RBITURATES			
9 - PROTECTIVE (ELBOW, KNE								an official	6	- UNDER THE INFLUENCE	A CA	NZODIAZEPINI NNABINOIDS	:2		
10 - REFLECTIVE CLOTHING									OF MEDICATIONS / DRUG /ALCOHOL	5 - CO	5 - COCAINE				
	1 - LIGHTING – PEDESTRIAN / BICYCLE ONLY							9	- OTHER / UNKNOWN	6-0P 7-0T	IATES / OPIOID	S			
99 - OTHER / UNKNOWN												HER GATIVE RESUL	TS		

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
- COOLANT / WITHESS ADDENDOM								2,0,2,1,-,0,0,1,5,9,5,3,						
	UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER					
PAN	ADDRESS:	STREET, CITY,	STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE										
OCCUPAN														
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	CILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
		BY					U SED	MC HELMET	, ,	[ [,	.l	, ,		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
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ANT	ADDRESS:	STREET, CITY,	STATE, ZIP	CONTACT PHONE	- INCLUDE AREA CO	DE								
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ō	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	CHLITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		BY			USED			MC HELMET	, , ,	ļ,				
	UNIT#	NAME: LAS	T, FIRST, MIDDLE		DATE OF BIRTH AGE GENDER									
ANT	ADDRESS:	STREET, CITY,	STATE, ZIP				<del></del>	CONTACT PHONE - INCLUDE AREA CODE						
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	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFE			DOT C	SEATING POSITION AIR BAG USAG		EJECTION	TRAPPED		
		BY		:		USED	DOT-COMPLIANT MC HELMET	ļ. , ,	,	J. ,				
ĵ	UNIT#								E OF BIRTH		AGE	GENDER		
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ANI	ADDRESS:	STREET, CITY,	STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE										
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0	INJURIES	INJURED TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FAC	CILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT Course	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		8Y					USED	DOT-COMPLIANT MC HELMET				, ,		
٦.		INJU	IRIES	SAFETY	' EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE			
	1 - FATA	\L		1 - NONE US			T - LEFT SIDE	1 - NOT DEPLOYED				7		
	2 - SUSPECTED SERIOUS INJURY VEHICLE OCCUPAN					2 FRONT MIRRIE			ER) 2 - DEPLOYED F		RONT			
	3 - SUSPECTED MITHUR INJURY			2 FORMT PICUT CINE			3 - DEPLOYED SIDE							
	4 - PUSSIBLE INJURY						LAMBED USES COTAS	ED BOTH						
ı	5 - NO APPARENT INJURY 5 - CHILD RESTRAINT SYSTEM -						ND - MIDDLE	ENGER)	FRONT/SIDE  5 - NOT APPLICABLE					
INJURED TAKEN BY FORWA				FORWARD	FACING		ND – RIGHT SIC	)E	9 - DEPLOYMENT UNKNOWN					
			Access to the Control of the Control	6 - CHILD RE	STRAINT SYSTEM –	D – LEFT SIDE ORCYCLE SIDE	CAR)		EJECTION EJECTION					
			7 - BOOSTER		D - MIDDLE		1 - NOT EJ	of City on the city of	J N					
				8 - HELMET	USED 9 - THIRD - RIGHT 10 - SLEEPER SEC				2 - PARTIALLY EJECTED					
				9 - PROTECT	IVE PADS USED		PER SECTION O ENGER IN OTHI			Y EJECTED				
١,	GENDER (ELBOW, KNEES, ETC.) CARGO AREA (NO						O AREA (NON-TR	RAILING UNIT,	4 - NOT AP					
	F - FEMALE 10 - REFLECTIVE CLOTHING BUS, PICK-UP WITH CA													
	M - MALE		A/AI	/ BICYCLE		CARG	O AREA LING UNIT	1 - NOTTRAPPED						
	U - OTHER / UNKNOWN 99 - OTHER / UI				INKNOWN	EXTERIOR 2 - EXTRICATED BY MECHANICAL								
					(NON-	(NON-TRAILING UNIT)			MEANS					
1	15 - NON-MOTORIST 99 - OTHER / UNKNOWN							3 - FREED BY NON-MECHANI MEANS				4L		
2	NAME: LAS	ST, FIRST, MIDDI	English and the second			99 - OTHE	K / UNKNOWN	DAT	E OF BIRTH		405	OFNIDED		
255		Tracy,							3, / 1 9	5.7	AGE 6 4	GENDER M		
WITNESS		STREET, CITY,			· · · · · · · · · · · · · · · · · · ·			CONTACT PHONE		-	y r	171		
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		T, FIRST, MIDDI						DATE OF BIRTH AGE GENDER						
WITNESS														
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER						
ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PROVI						
WITN	ADDRESS: SIKEEL, CHT, SIALE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
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