OHIO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER*				
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION								2 0 2 2 2 - 0 0 0 0 0 4 6 7 5				
OH-1P OTHER REPORTING AGENCY NAME*							NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR		
PRIVATE PROPERTY City of Kent Police							6   7   0   3	L 2 - UNSOLVED	0 2	LU L 1 99 - UNKNOWN		
COUNTY* LOCALITY*	/ILLAGE, TOWNSHIF			CRASH DATE /T		CRASH SEVERITY 1 - FATAL						
	VILLAGE Ken TOWNSHIP Ken		OCATION ROAD I	NAME		ROAD TYPE	[0:3:2:6:2:0:2:2:		2 - SERIOUS INJURY SUSPECTED			
ROUTE TYPE ROUTE NU $ \begin{array}{c c} S & R \\ \hline \end{array} $	S - :	SOUTH   EAST					4,1 <sub>]•</sub> [1 <sub> </sub> 3 <sub> </sub> 4 <sub> </sub>	3 - MINOR INJURY SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE							ROAD TYPE	LONGITUDE DE		4 - INJURY POSSIBLE		
ROUTE TYPE ROUTE NU	S - SOUTH E - EAST WATER						$ \mathbf{S} \cdot \mathbf{T} $	**** 8   1   e   3   3   8	2 1 1 0	5 - PROPERTY DAMAGE ONLY		
REFERENCE POINT	DIRECTION	WEST	ROUTE TYPE	<u> </u>		ROAD TYPE			INTERSECTION RE			
1 - INTERSECTION 1 2 - MILE POST	FROM REFERENCE N - NORT S - SOUTH	. 1	NTERSTATE ROU				RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH WITHIN INTERCHANGE AREA NUMBER OF APPROACHES				
	E-EAST W-WEST	100-11	EDERAL US ROU TATE ROUTE	IIE.	BL - BOULEVARD	MP - MILEPOST	ST - STREET					
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	CR - N	UMBERED COUN	ITY ROUTE			TE -TERRACE TL -TRAIL		ROADWAY			
	1 - MILES 2 - FEET	R	UMBERED TOWN OUTE	NSHIP			WA - WAY	X ROADWAY DIVIDED				
LOGATION	3 - YARDS		<u> </u>			PL - PLACE			. [			
1 - ON ROADWA	N OF FIRST HARMF AY 9 - CR	OSSOVER		1-1	MANNER OF CRASH NOT COLLISION 4		461	DIRECTION OF TRAVE		MEDIAN TYPE IDED FLUSH MEDIAN		
0 1 2-ON SHOULD			LLEY ACCESS ADE CROSSING	<b>2</b>   -	TWO MOTOR	- BACKING - ANGLE		_3 s - south	11 4 1	FEET ) IDED FLUSH MEDIAN		
4 - ON ROADSII	DE 12-S	ARED USE		•	TRANSPORT 7	- SIDESWIPE, SAM		E - EAST W - WEST	(≥4	FEET ) IDED, DEPRESSED MEDIAN		
5 - ON GORE 6 - OUTSIDE TR	RAFFIC WAY 13-BI	KE LANE				- SIDESWIPE, OPP - OTHER / UNKNO			4 - DIV	IDED, RAISED MEDIAN		
7 - ON RAMP 8 - OFF RAMP		LL BOOTH HER/UNK	NOWN							IER/UNKNOWN		
WORK ZONE RELA	TED		WORK ZONE TY	PE	LOCATIO	N OF CRASH IN W	ORK ZONE	CONTOUR	CONDITION	S SURFACE		
WORKERS PRESEN			ANE CLOSURE ANE SHIFT/CROS	COMED	1-	BEFORE THE 1ST WARNING SIGN	WORK ZONE	1	2	2		
		. 3-W	ORK ON SHOULD		1	ADVANCE WARNI		1 - STRAIGHT LEVEL	1-DRY	1 - CONCRETE		
, hand	LAW ENFORCEMENT PRESENT OR MEDIAN  4 - INTERMITTENT OR MOVING WORK  4 - ACTIVITY							2 - STRAIGHT GRADE	2-WET 3-SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT		
ACTIVE SCHOOL Z	ONE	5 - 0	THER	·····	5 -	TERMINATION A	TION AREA 4 - CURVE GRADE 4 - ICE 3.					
LIGHT ( 1 - DAYLIGHT	CONDITION		1-04		ATHER 6 - SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL					
1 2-DAWN/DUSK			.0.2.2-CL	OUDY	7 - SEVERE CROSSWINDS				STONE DING, 5 - DIRT			
3 - DARK - LIGH	HTED ROADWAY DWAY NOT LIGHTE	D	3-FOG, SMOG, SMOKE 8-BLOWING SAND, SOIL, DIF				•		MOVING) 7-SLUSH	9 - OTHER/UNKNOWN		
5 - DARK – UNK 9 - OTHER / UNI	(NOWN ROADWAY L	IGHTING	G 5 - SLEET, HAIL 99 - OTHER / UNKNOWN						9-OTHER/UNKNO	wn		
NARRATIVE	KITOTITI						<del>de gager, lyan, yan</del> ,			Indicate the north		
	AIN TINITE		VEDE CT	CODDE'	DAT					direction with an "N" on the		
UNIT ONE A		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			DAI					compass diagram.		
THE RED L	····		······································		\ TTT   1 T							
VEHICLES	······································		***************************************		***************************************							
NORTH ON		,										
GREEN AND	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·				S.F	R. 261				
SLOW AND	·							4-				
UNIT TWO.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						un for				
ASSURED C	LEAR DIS	SIAN(	JE AND (	CITED		16   1   6   1   10   5,R. 261						
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************		**********************	-							
					······							
		***************************************		4 may 4 c	γ	<u> </u>	·	22-11-21				
CRASH REPORTED			DISPATCH DATE			IRIVAL DATE / TIN		SCENE CLEAREI		REPORT TAKEN BY  POLICE AGENCY		
0   3   2   6   2   0   2   2   /   1   1   1   4   8     0   3   2   6   2   0   2   2   /   1   1   1   5   3     0   3   2   6   2   2   2   7   7   1   1   1   5   3   1   1   1   1   1   1   1   1   1						121012121/ <sub>1</sub>		0   3   2   6   2   0   2 FICER'S NAME*	12/112/2/3	MOTORIST		
							Ennemo	oser, James Supplement Correction as Addition				
$\begin{bmatrix} 0 & 0 & 0 \end{bmatrix}$	0 , 3 , 0 ,	0,6	0 2	_	'S BADGE NUMBE	R*		BY OFFICER'S BADGE	NUMBER*	TO AN EXISTING REPORT SENT TO ODPS)		
	v   v   v			<u> </u>	<u> </u>		4   3		<u> </u>			

LOCAL REPORT NUMBER

2 0 2 1 2 1 - 10 10 10 14 16 17 15 1

UNIT#	OWNER NAME: LAST, FIRST	-		OWNER PHONE - IMPLIE	E AREA COME (   V   SAME AS DRIVER)	DAMAGE DAMAGE SCALE				
LO 1 1 J SHYNE, MERRI, CHRISTIE     J DAMAGE SCALE       DWNER ADDRESS: STREET, CITY, STATE, ZIP (∑ SAME AS ORIVER)     1 - NONE 3 - FUNCTIONAL DAMAGE										
4742 GOOSEBERRY KNL, Brimfield Twp, OH 44240										
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN										
			DAMAGED AREA(S)							
LP STATE	LICENSE PLATE #		E IDENTIFICATION #	VEHICLE YEA		INDICATE ALL THAT APPLY				
O H	GNY5598		$E_1 V_1 7_1 E_1 W_1 1_1 8_1 4_1 0$			11 0	11 12 1			
INSURA VERIFI	NCE INSURANCE COMPA		NSURANCE POLICY #	COLOR	VEHICLE MODEL	12	12			
TYPE OF USE US DOT # TOWED BY: COMPANY NAME										
COMMERCIAL GOVERNMENT RESPONSE										
			HICLE WEIGHT GVWR/GCWR		IS MATERIAL					
INTER DEVICE EQUIP	HIT/SKIP UNIT		1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	MATERIAL C	LASS# PLACARD ID#	8 7 6 5	8 7 6 5 4			
— EQUIP	PED		3 - >26K LBS.	PLACARD L		7 5	12 1 5			
		7 - MOTORCYCLE 2-WHEELED			23 - PEDEŞTRIAN / SKATER	40.	12			
0 1	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 3-WHEELED			24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/_				
UNIT TYPE	4 - PICK UP	10 - MOPEO OR MOTORIZED			26-BICYCLE	9	9 3 3			
d.	5 - CARGO VAN	BICYCLE		CHIEFE ABOUT VERNALE	27 - TRAIN	<del>-</del>				
<u> </u>	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8 🔪				
	# of TRAILING UNITS		- w t - tt - White - th -			111	7 6 11 12 1			
	WAS VEHICLE OPERATING IN AU			3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 12 2	10 12 1 2			
2 .	MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK		O DADTIAL BUTOMATION	4 - HIGH AUTOMATION 5 - Full Automation		10 10 2	10 2 2			
	1-1E0 2-NO 7-01HEK/UNK	NOWN AUTONOMOUS Mode Level		- OLE AUTOMATION		9 3	3 9 9 3			
	1 - NONE	6 - BUS CHARTER/TOUR		16-FARM	21 - MAIL CARRIER	$\frac{3}{7}$ $\frac{4}{5}$ $\frac{7}{5}$				
$\begin{bmatrix} 0 & 1 \end{bmatrix}$	2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY		17 - MOWING 18 - Snow Removal	99-OTHER/UNKNOWN		8 6			
SPECIAL	4 4 - SCHOOL TRANSPORT	9 - BUS - OTHER		19-TOWING		7 6	5			
i gitarra	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12			
	1 - NO CARGO BODYTYPE			8 - POLE	12-CONCRETE MIXER	12				
CARGO	/ NOT APPLICABLE 2 - BUS	MOTOR VEHICLE 4 - LOGGING	A CAROCALILATERAL CORD DON	9 - CARGOTANK	13-AUTOTRANSPORTER	8.8				
BODY Type	2 - 003	4 - LOUGING	= 001/4//00//00/00/00/1/PI	10-FLAT BED 11-DUMP	14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 ( 3 ) 3 9	a 9 <b>3 </b> 3  3  3  3  3  3  3  3  3  3  3  3			
,,,,	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99-OTHER/UNKNOWN					
VEHICLE	2 - HEAD LAMPS	5 - STEERING		10-DISABLED FROM PRIOR	77-OTHER) UNKNOWN	6				
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		□-NO DAMAGE	_			
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER	LJ - NO DAMAGE	[0] _1-UNDERGARRIAGE [14]			
L L L	CROSSWALK T 2-INTERSECTION UNMARKED	4 - MIDBLOCK - MARKED Crosswalk	7 - SHOULDER / ROADSIDE	10 - DRIVEWAY ACCESS	AT INCIDENT SCENE 99-OTHER/UNKNOWN	☐-TOP [13]	- ALL AREAS [15]			
LOCATION AT IMPAC	CROSSWALK	5 - TRAVEL LANE OTHER LOCATI	8 - SIDEWALK on	11 - SHARED USE PATHS OR TRAILS	77-OTHER TORRIOWN	UN	IT NOT AT SCENE [16]			
AI IMPAU	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING					
2	2 - NON-COLLISION	2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	0 - NO DAMA	AL POINT OF CONTACT AGE 14 - UNDERCARRIAGE			
3		3 - CHANGING LANES	9 LEAVING TRAFFIC LANE	SPECIFIED LOCATION  15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST 21-STANDING OUTSIDE	1 1 2 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCEI				
ACITON	4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING	10~PARKED 11-Slowing or Stopped	JOGGING, PLAYING		DIAGRAM 99 - UNKNOWN				
	& STRUCK	6 - MAKING LEFT TURN	IN TRAFFIC	16 - WORKING	DIŞABLED VEHIÇLE	13 - TOP	İ			
	9 - OTHER / UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC			
	1 - NONE	7 - LEFT OF CENTER	13-IMPROPER START FROM A PARKED POSITION	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8-FOLLOWING TOO CLOSE / AC 9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN  2 - SIGNAL 5 - YIELD SIGN			
<u> </u>	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15-SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/	ROADWAY	2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
G CIRCUMSTANC	IG 5 - UNSAFE SPEED	11 - DROVE OFF ROAD	16-WRONG WAY	SPILLING 20 - IM PROPER CROSSING	99-OTHER IMPROPER ACTION	# **********************************	RAIL GRADE CROSSING			
Z	6 - IMPROPERTURN	12-IMPROPER BACKING				# OF THROUGH LANES ON ROAD	1 - NOT INVOLVED			
G CIRCUMSTANC IN SEQUENCE	E OF EVENTS		NON-COLLISION			3	1 2 - INVOLVED-ACTIVE CROSSING			
1 2 1 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE	16-RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAL FARM 18 - ANIMAL DEER	EQUIPMENT 23 - Struck by Falling,	UNIT/N	ON-MOTORIST DIRECTION			
2	3 - IMMERSION  J 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL — OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST			
	5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN	13-OTHER NON-COLLISION 14-Pedestrian	20 - MOTOR VEHICLE IN Transport	BY A MOTOR VEHICLE	FROM L 4 TO	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST			
3	LOSS OR SHIFT J		15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24-OTHER MOVABLE OBJECT	FROM L TO	4 - WEST 8 - SOUTHWEST			
	OF TAIDANT ATTENUATAN		ON WITH FIXED OBJEC		EA JUADY TONE MAINTENAMO		9 - OTHER / UNKNOWN			
4	25-IMPACT ATTENUATOR J / 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			
	26 - BRIDGE OVERHEAD Structure	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 - WALL		1 - STATED / ESTIMATED SPEED			
5	27 - BRIDGE PIER OR ABUTMEN	34-MEDIAN GUARDRAIL T Barrier	SUPPORT 40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	52-BUILDING 53-Tunnel	0 1 5	2 - CALCULATED / EDR			
	28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE 41 - OTHER POST, POLE		48-TREE	54-OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
6	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99-OTHER/UNKNOWN					
, 1	」 FIRST HARMFUL EVE	1	HARMFUL EVENT			5 0				
	AND I HANNITUL EVE	INIUSI								

OHIO DEPARTMENT
OF PUBLIC SAFETY
SAFETY SERVICE - PROTECTION
OF PUBLIC SAFETY **LOCAL REPORT NUMBER** 2 + 0 + 2 + 2 + - + 0 + 0 + 0 + 0 + 4 + 6 + 7 + 5 +OWNER PHONE. MINING AND COME ( SAME AS DRIVER OWNER NAME: LAST, FIRST, MIDDLE ( same as driver) DAMAGE 0 | 2 | BOWMAN, TRACY, L DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (XI SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 2360 INDUSTRY RD , Atwater , OH 44201 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE MAKE VEHICLE YEAR  $1 + N_1 + A_1 + A_1 + A_1 + A_1 + A_2 + A_3 + A_4 + A_4 + A_5 +$  $O \mid H \mid$ JJG7349 2 | 0 | 0 | 5 | Nissan INSURANCE INSURANCE COMPANY
VERIFIED ALLSTATE INSURANCE POLICY # COLOR VEHICLE MODEL 826 275 586 TEA ALTIMA TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK
DEVICE
EQUIPPED MATERIAL RELEASED CLASS # PLACARD ID # 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. HIT/SKIP UNIT PLACARD 0 12 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 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (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 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) O\_\_ # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 0 2 - PARTIAL AUTOMATION \_\_\_ 1-YES 2-NO 9-OTHER/UNKNOWN 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/UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 14-PUBLIC UTILITY 19. TOWING 9 - BUS - OTHER 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 /NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13 - AUTO TRANSPORTER 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 2 - BUS 4 - LOGGING 14-GARBAGE/REFUSE 7 - GRAIN/CHIPS/GRAVEL 99 - OTHER / UNKNOWN 11 - DUMP 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 DEFECTIVE ACCIDENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT - undercarriage [14] □-NO DAMAGE [0] 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 12 - FIRST RESPONDER AT INCIDENT SCENE CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS -TOP [13] □ - ALL AREAS [15] NON-MOTORIST 2-INTERSECTION - UNMARKED 99-OTHER/UNKNOWN CROSSWALK 11 - SHARED USE PATHS OR 8 - SIDEWALK LOCATION AT IMPACT CROSSWALK - UNIT NOT AT SCENE [ 16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS 1 - STRAIGHT AHEAD 13 - NEGOTIATING A CURVE 18 - APPROACHING 1 - NON-CONTACT 7 - MAKING U-TURN INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 0 - NO DAMAGE 14 - UNDERCARRIAGE 4 0 1 3 - CHANGING LANES 19-STANDING SPECIFIED LOCATION 3 - STRIKING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE PRE-CRASH 4 - OVERTAKING/PASSING 0 6 ACTION 4- STRUCK 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN 21 - STANDING OUTSIDE 11-SLOWING OR STOPPED 13 - TOP 16-WORKING DISABLED VEHICLE **INTRAFFIC** & STRUCK 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99-OTHER/UNKNOWN 9 - OTHER / UNKNOWN 12-DRIVERLESS TRAFFIC 13-IMPROPER START FROM A 1 - NONE 7-LEFT OF CENTER 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAIL URE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23-OPENING DOOR INTO 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN  $0 \mid 1$ ILLEGALLY 19-LOAD SKIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLÄSHER 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 - INVOLVED-ACTIVE CROSSING 3 NON-COLLISION 1 2 1 0 1 - OVERTURN/ROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 17 - ANIMAL - FARM EQUIPMENT 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS TRAVEL UNIT / NON-MOTORIST DIRECTION 23-STRUCK BY FALLING, 18-ANIMAL - DEER 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER 1 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 2 - SOUTH 6 - NORTHWEST 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10-CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT 3 - EAST 7 - SOUTHEAST 24 - OTHER MOVABLE OBJECT LOSS OR SHIFT 15-PEDALÇYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 31 - GUARDRAIL END 25 - IMPACT ATTENUATOR 37 - TRAFFIC SIGN POST 43-CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION EQUIPMENT 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 39-LIGHT/LUMINARIES 51 - WALL 33 - MEDIAN CABLE BARRIER 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE 34-MEDIAN GUARDRAIL SUPPORT 52-BUILDING 46-FENCE 1  $\begin{bmatrix} 0 & 0 & 5 \end{bmatrix}$ 27 - BRIDGE PIER OR ABUTMENT BARRIER 40 - UTILITY POLE 53-TUNNEL 2 - CALCULATED / EDR 47 - MAILBOX 28-BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE 3 - UNDETERMINED POSTED SPEED 29 - BRIDGE RAIL BARRIER OR SUPPORT

49-FIRE HYDRANT

99-OTHER/UNKNOWN

, **5** , **0** ,

30 - GUARDRAIL FACE

→ FIRST HARMFUL EVENT

36 - MEDIAN OTHER BARRIER

42-CULVERT

1 MOST HARMFUL EVENT

OFF PUBLIC SAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER							
										2 0 2 2 2 - 0 0 0 0 4 6 7 5					
UNIT#	NAME: LAST, FIRST, MIDDLE SHYNE, MERRI, CHRISTIE							DATE OF BIRTH AGE GENDER							
	STREET, CITY, STATE, ZIP							1 1 2 1 0 5 1 1 9 6 7 5 4 F							
2	742 GOOSEBERRY KNL ,Brimfield Twp ,OH 44240									HONE - INCLUDE AREA C	ODE.				
INJURIES	INJURED E	MS AGENCY (NAME)		INJURED TA	AKEN TO: I	MEDICAL FACILITY	(NAME, CITY)		DOT-Com	SEATING POSITIO	N AIR BAG	USAGE EJECTION	TRAPPED		
INJURIES  5	BY							USED 0 4	MC HEL		1	_1	1 1		
OL STATE	OPERATOR LI	CENSE NUMBER		OFFENS		GED	LOCAL CODE	OFFENSE DESC		CITATION NUMBE			<del></del>		
OL STATE OL CLASS				<u> </u>	333.03A X				Assured Clear Distan			23410			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U		VER TRACTED	-	HOL/DRUG SUSPI Cohol     Mai	E <b>CTED</b> Rijuana	CONDITION	STATUS TY	DHOL TEST PE VALUE	STATUS	TYPE RESUL	T SELECT UPTO 4		
, 4		 		1	-	HER DRUG	NIO OAITA	1 1	<b>1</b> 1 1		1	, 1   , , ,	H H 1		
UNIT #	NAME: LAST, F	IRST, MIDDLE						DATE OF BIRTH	1	AGE	GENDER				
$0_12$	BOWM	AN, HOPE, ROS	$\mathbf{E}$					4	0 7 / 1 5 / 2 0 0 2 1 9 F						
ADDRESS	: STREET, CITY, STA	ATE, ZIP							CONTACT F	HONE - INCLUDE AREA	CODE				
<b>2360</b> 1		, Atwater, RY RD	OH 4	4201					L						
2360 I	TAKEN	EMS AGENCY (NAME)		INJURED T	AKEN TO:	MEDICAL FACILITY	(NAME, CITY)	lusen	DOT-Cox	IPLIANT	N AIR BAG	USAGE EJECTION	TRAPPED		
	BY	CORNER MULEUR					1	0.4	MC HEL	MET 0 1	<u>ا                                     </u>	1 1	1		
OL STATE	UPERATUR LI	ICENSE NUMBER		OFFENS	E CHAR	GED	LOCAL	OFFENSE DESC	RIPIION		CITAL	TION NUMBER			
O, H,	ENDORSEMENT	RESTRICTION SELECT U	PTO3 NPT	IVER T	AI CO	HOL / DRUG SUSP	FCTED.	CONDITION		OHOL TEST		DRUG TEST(S	5)		
OL OLAGO	SELECT UP TO 2	NEGINIOTION SELECT O		TRACTED			RIJUANA	CONDITION	STATUS TY		STATUS		T SELECT UPTO 4		
4	الـــالـــا			_1	ОТ	HER DRUG		1	1	1	_1_	1			
UNIT#	NAME: LAST, F	TRST, MIDDLE							DATE OF BIRTH AGE GENDER						
	3														
ADDRESS	: STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
MADDRESS	INJURED I	EMS AGENCY (NAME)		Linimena	CAVEN TO	MEDICAL FACILITY	ANAME OF THE	Leafety Collement	<u> </u>	SEATING POSITI	OM AID DAG	G USAGE   EJECTIO	TRADDED		
INJUNIES O	TAKEN BY	EMS AGENOT (NAME)		INJUKEU	IAKEN IU:	(MEDIOAL FACILITY	(NAME, GLIT	USED	DOT-Co	MPLIANT	ON AIR BAI	G OSAGE   EJECTION	TRAPPED		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAR	GED	LOCAL	OFFENSE DES	CRIPTION		CITA	TION NUMBER	J   L		
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OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT L	JPT03 DR	IVER STRACTED	ALCO	HOL / DRUG SUSF	ECTED	CONDITION	ALC STATUS T	OHOL TEST /PE VALUE	STATUS	DRUG TEST(	S) LT select de 104		
			BY			-	RIJUANA	<b>\</b>							
. LINI	URIES	SEATING POSITION	L	AIR BAG		HER DRUG OL CLAS	S	OL RESTRIC	TION(S)	DRIVER DISTRA	CTION	TEST ST	ATUS		
1 - FATAL		1 - FRONT - LEFT SIDE	1 - NOT DE	4 6 6 6 6		1 - CLASS A		1 - ALCOHOL INTE		1 - NOT DISTRACTED		1 - NONE GIVEN			
100 000	D SERIOUS INJURY D MINOR INJURY	(MOTORCYCLE DRIVER) 2 - FRONT – MIDDLE	2 - DEPLOY 3 - DEPLOY	YED FRONT		2 - CLASS B 3 - CLASS C		2 - CDL INTRASTA 3 - CORRECTIVE L	植物 化氯化甲酚	2 - MANUALLY OPERATI ELECTRONIC COMMU		2 - TEST REFUSED 3 - TEST GIVEN, CO	化二甲烷烷 医二甲二甲烷		
4 - POSSIBLE		3 - FRONT – RIGHT SIDE	化邻磺胺基苯酚	YED BOTH FRO	ONT/SIDE	4 - REGULAR CLASS		4 - FARM WAIVER	LNOLO	DEVICE (TEXTING, T DIALING)	YPING,	SAMPLE/UNU	SABLE		
5 - NO APPARE	NT INJURY	4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT AP	"我们不是什么是什么	A1/71	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 -TALKING ON HANDS- COMMUNICATION DE		4 - TEST GIVEN, R 5 - TEST GIVEN, R	賴 杂文人 化水石		
111 . 10 . 4	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLUI	YMENT UNKN	UVAN	6 - NO VALID OL		6 - EXCEPT CLASS & CLASS 8 BUS		4 - TALKING ON HAND-H	ELD	UNKNOWN			
1 - NOTTRANS /TREATED		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE		JECTION		OL ENDORS	MENT	7 - EXCEPT TRACT 8 - INTERMEDIAT		COMMUNICATION DE 5 - OTHER ACTIVITY WI	(21 Carta) 1 (1)	ALCOHOL T	EST TYPE		
2 - EMS		(MOTORCYCLE SIDE CAR) 8-THIRD – MIDDLE	1 - NOT EJ			H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVIC		1 - NONE 2 - Blood			
3 - POLICE 9 - Other/Un	NKNOWN	9-THIRD - RIGHT SIDE	A 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ALLY EJECTED Ly ejected		M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PE RESTRICTIONS		6 - PASSENGER 7 - OTHER DISTRACTION	V.	3 - URINE			
		10 - SLEEPER SECTION OF TRUCK CAB		PPLICABLE		N - TANKER		10 - LIMITED TO DA	医乳腺性坏疽 化二磺基	INSIDE THE VEHICL  8 - OTHER DISTRACTION	10 A 10 A 10	4 - BREATH 5 - OTHER			
1 - NONE USE	EQUIPMENT D	11 - PASSENGER IN OTHER Enclosed Cargo area	31, 84 N. e.	TRAPPED	siye siyel	Q - MOTOR SCOOTER R - THREE-WHEEL I		11 - LIMITED TO EI 12 - LIMITED - OTI		THE VEHICLE		DRUG TES	TTVD-		
The state of the s	R BELT ONLY USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTR	<b>"我们的",不是</b>		S - SCHOOL BUS		13 - MECHANICAL (Special bra		9-OTHER/UNKNOWN		1 - NONE			
4 SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED		12 - PASSENGER IN UNENCLOSED	2 - EXTRICATED BY MECHANICAL MEANS			T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT		CONTROLS, OR ADAPTIVE DE	OTHER	GONDINIO  1 - APPARENTLY NORM	CONDITION				
	5 - CHILD RESTRAINT SYSTEM - CARGO AREA FORWARD FACING 13 - TRAILING UNIT			NON-MECHANICAL MEANS			14 - MILITARY VE		HICLES ONLY 2-PHYSICAL IM		J Unific				
6 - CHILD RES	STRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR		GENDE F-FEMALE			K	15 - MOTOR VEHIC AIR BRAKES	LES WITHOUT	3 - EMOTIONAL (E.G., DE ANGRY, DISTURBED)	PRESSED,	DRUG TEST	RESULT(S)		
REAR FACI 7 - BOOSTER		(NON-TRAILING UNIT)				F-FEMALE M-MALE		16 - OUTSIDE MIRI		4-ILLNESS	URBED) DR		ES		
8 - HELMET L		99-OTHER/UNKNOWN				U - OTHER / UNKNOV	/N	17 - PROSTHETIC <i>i</i> 18 - Other	AID	5 - FELL ASLEEP, FAINT FATIGUED, ETC.	ED,	2 - BARBITURATE 3 - BENZODIAZEF			
	VE PADS USED (NEES, ETC.)							7.77		6- UNDER THE INFLUE		4 - CANNABINOID			
10 - REFLECTI	VE CLOTHING									/ALCOHOL		5 - COCAINE	0100		
11 - LIGHTING / BICYCLE	– PEDESTRIAN ONLY									9-OTHER/UNKNOWN		6-OPIATES/OPI 7-OTHER	OID2		
99-0THER/U	and the second second											8 - NEGATIVE RE	SULTS		

D	OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER						
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۱	UNIT #		FIRST, MIDDLE	DATE OF BIRTH AGE GENDER										
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IVdn		STREET, CITY, S	•	CONTACT PHONE - INCLUDE AREA CODE										
9	INJURIES		IBIA RD ,MEI	MA,UII	SAFETY EQUIPMENT	L								
		TAKEN BY	LING AGENCT (WAINE)		USED 0 4	DOT-COMPLIANT 0 3 1 1 1 1								
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	, ,	THATE CAN	, i i i i i i i i i i i i i i i i i i i					/ .	. /					
A NT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN														
ĕ	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		BY			USED LINE			MC HELMET	L	L	L	L		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATI	E OF BIRTH		AGE	GENDER		
CCUPAN	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		1		
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Ĭ	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facilit	y (name, city)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
											Ш			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH	}	AGE	GENDER		
Ę	ADDRESS	: STREET, CITY,	STATE 71D		CONTACT PHONE - INCLUDE AREA CODE									
OCCUPAN	ADDNESO.		5171 L) LII			CONTROLL	- INCCODE AREA GO	oc.						
00	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILIT	Y (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	1 1	TAKEN BY					USED	DOT-COMPLIANT MC HELMET				, ,		
		INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	AGE			
	1 - FATA	하는 사람이 되었다. 그는 그들은 그는 그는 그를 보고 하는 것이 되는 것이 없는 것이 없었다. 그는 사람이 되었다. 그 사람이 되었다.						FR)	1 - NOT DEPLOYED					
	2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 2 - SHOULDER BEL 4 - POSSIBLE INJURY 3 - LAP BELT ONLY				ER BELT ONLY USED	400 TO THE RES	IT – MIDDLE		2 DEPLOYED FRONT					
					3 - FRONT - RIGHT SID				3 - DEPLOYED SIDE 4 - DEPLOYED BOTH					
		APPARENT		4 - SHOULDI	ER & LAP BELT USED		ORCYCLE PASS		FRONT/SIDE					
	of Sec.	5 - CHILD RESTRAINT SYSTEM - INJURED TAKEN BY FORWARD FACING					ND - MIDDLE	ne .	5 - NOT APPLICABLE					
	1 - NOT	TRANSPOR	Continues and the second continues and the second		ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			9 9 - DEPLOTIMENT UNKNOWN						
	100	EATED AT S	CENE	REAR FA	회사들의 이 전 교육이 되어 있었다.	CAR)	i. Barran na marin	EJECTI	N					
	2 - EMS			7 - BOOSTEF	- 1985년 1985년 1985년 - 1985년 1985 - 1985년	D – MIDDLE D – RIGHT SIDI		1 - NOT EJECTED 2 - PARTIALLY EJECTED						
ľ	3 - POL	ICE IER/UNKNO	OVA NI	8 - HELMET	TIVE PADS USED	建铁子等的 保证规则证	PER SECTION	三角 医多种皮肤结束的复数形式		일하다 우리 하지?	ָּטַ-			
	7-011		NDER		KNEES, ETC.)		SENGER IN OTH GO AREA (NON-T							
	F-FEM	WILLIAM WILLIAM			TIVE CLOTHING		PICK-UPWITH CA SENGER IN UNI	A SECTION AND A SECTION OF		TRAPPI	<b>3</b> D			
	M - MAL	Part of the Control		11 - LIGHTIN / BICYCL	G – PEDESTRIAN E ONLY	CAR	GO AREA	1 - NOTTRAPPED						
	U - OTH	ER/UNKNO	WN	LING UNIT NG ON VEHICLI	E EXTERIOR 2 - EXTRICATED BY MECHANICAL									
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						A 55 (A 55 (A)	-MOTORIST Er/Unknown		MEAN		.UNANIC	AL.		
	NAME: LA	AST, FIRST, MIDI	N Testalia III gustusia eus. DLE	Region for sever	<u>i degrada, a de la suscidad d</u>			<u> </u>	TE OF BIRTH		AGE	GENDER		
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Same?	ADDRESS	S: STREET, CITY	, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA C	ODE				
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	NAME: L	AST, FIRST, MID	DLE				· · · · · · · · · · · · · · · · · · ·	DA	TE OF BIRTH		AGE	GENDER		
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