OP PUBLIC SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*								
PHOTOS TAKEN 0H-2 0H-3	LOCAL INFORMATION	ORY FIELD FOR SUPPLEME	2,0,2,0,-,0,0,0,2,8,0,5,						
OH-1P OTHER	REPORTING AGENCY NAME*	1	NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR			
PRIVATE PROPERTY	City of Kent Police		7,0,3	1 - SOLVED L 2 - UNSOLVED	0,2	2 98 - ANIMAL			
1-CITY	VILLAGE, TOWNSHIP*				RASH SEVERITY 1 - FATAL				
3-TOWNSHIP	LOCATION DOAD NAME			U.Z.U.7.Z.U.Z.U./ .Z.1.2.9. 5 2 - SERIOUS INJURY					
2-SOUTH	LOCATION ROAD NAME MAIN		ROAD TYPE	LATITUDE DEC	SUSPECTED 3 - MINOR INJURY				
4 - WE31		S T	4,1,1,5,4	SUSPECTED					
2- SOUTH	2- SOUTH								
REFERENCE POINT DIRECTION			CT	-81,33,3,3	0,0,1,	5 - PROPERTY DAMAGE ONLY			
1 - INTERSECTION 1 - NORTH IR -	ROUTE TYPE INTERSTATE ROUTE(TP) AL - ALLE	ROAD TYPE Y HW- HIGHWAY RD	- ROAD	INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH					
1 2-MILE POST 2-SOUTH US-	FEDERAL US ROUTE AV - AVEN		- SQUARE	2					
DICTANCE DICTANCE	STATE ROUTE NUMBERED COUNTY ROUTE CR - CIRCL		- STREET - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES					
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR -	NUMBERED TOWNSHIP DR - DRIVE		-TRAIL	ROADWAY					
2-FEET 3-YARDS	ROUTE HE - HEIGH		A - WAY	ROADWAY DIVIDED					
LOCATION OF FIRST HARMFUL EVENT		CRASH COLLISION/IMPAC	T	DIRECTION OF TRAVEL	MEDI	AN TYPE			
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10-DRIVEWAY/	ALLEY ACCESS BETWEEN	SION 4 - REAR-TO-REAR 5 - BACKING		1 - NORTH	1 - DIVIDED	DIVIDED FLUSH MEDIAN			
	RADE CROSSING TWO MOTO VEHICLES	IN 6-ANGLE		2-SOUTH 3-EAST	2 - DIVIDED	FLUSH MEDIAN			
5 - ON GORE TRAILS	E PATHS OR TRANSPOR 2 - REAR-END	7 - SIDESWIPE, SAME I 8 - SIDESWIPE, OPPOSI		4 - WEST), DEPRESSED MEDIAN				
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 7 - ON RAMP 14-TOLL BOOTH	3 - HEAD-ON	9 - OTHER / UNKNOW	N		4 - DIVIDED (ANY TY	, RAISED MEDIAN PE)			
8-OFF RAMP 99-OTHER / UN	KNOWN				9 - OTHER/L	INKNOWN			
WORK ZONE RELATED		OCATION OF CRASH IN WOR		CONTOUR	CONDITIONS	SURFACE			
WODEFER PRESENT	ANE CLOSURE ANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST W WARNING SIGN	ORK ZONE	_2_	3	2			
	VORK ON SHOULDER	2 - ADVANCE WARNING 3 - TRANSITION AREA	AREA		1 - DRY	1 - CONCRETE			
4-1	NTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA			2-WET 3-SNOW	2 - BLACKTOP, BITUMINOUS,			
	THER	5 - TERMINATION ARE	Α		4 - ICE	ASPHALT 3 - BRICK/BLOCK			
LIGHT CONDITION 1 - DAYLIGHT	WEATHER 1-CLEAR 6-SA	NOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL,			
3 2-DAWN/DUSK	.0.6. 2-CLOUDY 7-SE	EVERE CROSSWINDS			6 - WATER (STANDING,	STONE 5 - DIRT			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3-FOG, SMOG, SMOKE 8-BI 4-RAIN 9-FF	LOWING SAND, SOIL, DIRT, S REEZING RAIN OR FREEZIN			MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN			
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL 99 - 0	OTHER / UNKNOWN			9 - OTHER/UNKNOWN				
NARRATIVE									
20-2805					4	Indicate the north direction with an "N" on the			
					4	compass diagram.			
2-7-20									
On this date, Unit #1 was si	tting stationary on				_				
Loblolly Ct waiting to make a					Labiaty Ct				
St. Unit #2 was traveling E/B				the st					
approaching Loblolly Ct. The		E. M	ain St						
Unit #2 came to a quick stop a					G	Đ			
into Loblolly Ct to avoid hitti									
front of her. When Unit #2 sw									
#1 in the front drivers wheel and pushed Unit #1. As									
	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	= 21	SCENE CLEARED D		REPORT TAKEN BY			
[0,2,0,7,2,0,2,0,/,2,1,2,9,]		0,7,2,0,2,0,/,2,	1,3,4,0	0,2,0,7,2,0,2,0,/,2,2,1,3					
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT				TICER'S NAME*					
	OFFICER'S BADGE NO	UMBER*	CHECKED E	BY OFFICER'S BADGE NUMBER* SOFFICER'S BADGE NUMBER* CORRECTION OF REPORT SERVICE SERVICES					
0,0,0,0,6,0,1,0	2 1	141							



2,0,2,0,-,0,0,0,0,2,8,0,5₁ UNIT # OWNER NAME: LAST, FIRST, MIDDLE (\(\infty\) SAME AS ORIVER)

NEMETH, ERIC, STEPHEN OWNER PHONE: INCLUDE AREA CODE (X) SAME AS DRIVER DAMAGE DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVERD 1 - NONE 3 - FUNCTIONAL DAMAGE 3062 ALEXA CT, TWINSBURG TWP, OH 44087 J 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP 9 - UNKNOWN COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** INDICATE ALL THAT APPLY VEHICLE YEAR VEHICLE MAKE 3, F, A6, P, 0, L, U3, J, R1, 2, 4, 8, 2, 5, O H HYA4977 2.0.1.8 Ford INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL INSURANCE VERIFIED **PROGRESSIVE** 904006348 WHI **FUSION** TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE City Service 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 0,1, PLACARD 13 - >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 1 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 - UNKNOWN OR HIT/SKIP (ATV/UTV) 0 # OFTRAILING 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 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 11-FIRE 6 - BUS - CHARTER/TOUR 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 B - POLE 12 - CONCRETE MIXER 0.1 /NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTO TRANSPORTER CARGO 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 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 - ENTERINGTRAFFIC LANE 14 - ENTERING OR CROSSING 1 1 3 - CHANGING LANES 4 0 - NO DAMAGE 14 - UNDERCARRIAGE SPECIFIED LOCATION 19-STANDING J 3-STRIKING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 15 - WALKING, RUNNING, 1,1, ACTION 4- STRUCK PRE-GRASH 4 - OVERTAKING/PASSING 10-PARKED 20 - OTHER NON-MOTORIST DIAGRAM JOGGING, PLAYING 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 13 - TOP 16 - WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99-OTHER/UNKNOWN 9 - OTHER / UNKNOWN 12 - DRIVERLESS TRAFFIC 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 B-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 0 1 3-RAN RED LIGHT 1 - ONE-WAY 1 - ROUNDARDUT 4 - STOP SIGN 14 - STOPPED OR PARKED 9-IMPROPER LANE CHANGE EQUIPMENT 23-OPENING DOOR INTO 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 CONTRIBUTING 5 - UNSAFE SPEED 3 - FLASHER 6 - NO CONTROL SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IN 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/ROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE 2 - FIRE/EXPLOSION OPPOSITE DIRECTION OF 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM EQUIPMENT. TRAVEL UNIT / NON-MOTORIST DIRECTION 23-STRUCK BY FALLING. 18-ANIMAL - DEER 3 - IMMERSION B - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST A . JACKKNIFE 19-ANIMAL - OTHER 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION ANYTHING SET IN MOTION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - VORTHWEST 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14 - PEDESTRIAN TRANSPORT FROM 2 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 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 51-WALL 33 - MEDIAN CARLE RAPRIER 39-LIGHT/LUMINARIES 45-EMBANKMENT STRUCTURE SUPPORT 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL 46-FENCE 52-BUILDING 0,0,027 - 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 1 29-BRIDGE RAIL OR SUPPORT POSTED SPEED 99 - OTHER / UNKNOWN 49 - FIRE HYDRANT 30-GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 1 5 1 MOST HARMFUL EVENT ☐ FIRST HARMFUL EVENT

LOCAL REPORT NUMBER

51 - WALL

52 - BUILDING

53-TUNNEL

54-OTHER FIXED OBJECT

99-OTHER/UNKNOWN

, 0 , 2 , 0 ,

POSTED SPEED

_3 , 5 ,

45 - EMBANKMENT

49-FIRE HYDRANT

46-FENCE

48.TREE

47 - MAILBOX

26 - BRIDGE OVERHEAD

27 - BRIDGE PIER OR ABUTMENT

☐ FIRST HARMFUL EVENT

STRUCTURE

28-BRIDGE PARAPET

30 - GUARDRAIL FACE

1 29-BRIDGE RAIL

33 - MEDIAN CABLE BARRIER

36 - MEDIAN OTHER BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

BARRIER

39-LIGHT/LUMINARIES

SUPPORT

40 - HTH ITY POLE

41 - OTHER POST, POLE

OR SUPPORT

42 - CULVERT

1 MOST HARMFUL EVENT

1 - STATED / ESTIMATED SPEED

2 - CALCULATED / EDR

3 - UNDETERMINED

CHIED DEPARTMENT MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER									
							2.0.2.00.0.0.2.8.0.5								
0.1	NAME: LAST, FIRST, MIDDLE 1 NEMETH, ERIC, STEPHEN								DATE OF BIRTH AGE GENDER						
-	ADDRESS: STREET, CITY, STATE, ZIP								0 8 2 0 1 9 9 6 2 3 M						
ADDRESS: STREET, CITY, STATE, ZIP 3062 ALEXA CT, TWINSBURG TWP, OH 44087 INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 10, 4										THOUSE AREA O	, out				
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED	TAKENTO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	SIMPLIANT	EATING POSITION	N AIR BAG USA	AGE EJECTIO	N TRAPPED	
	BY					·		0,4	□MC HE		0 1	_1_	11	_1_	
OL STATE		OPERATOR LICENSE NUMBER OFFENSE				HARGED LOCAL OFFENSE DESC			RIPTION			CITATIO	NUMBER		
OL CLASS	TW82		TUPTO3 DR	IVER	ALC	OHOL / DRUG SUSPI	ECTED	CONDITION	Ald	OHOL TO	ST	DI.	RUG TEST(31	
	SELECTUPT02			TRACTED	_	LCOHOL MA		CONDITION		YPE				LT SELECT UPTO 4	
4						OTHER DRUG			1 1			1		_ال_ال_	
. 0 . 2 .	NAME: LAST,	first, middle ELL, EMILY, JA	Water								OF BIRTH		AGE	GENDER	
	STREET, CITY, ST		INL								1 9		2.0	F	
7	. 6.0	CK DR ,Ravenna	Twp.	OH 4	4266				CUNTACT	PHONE -	INCLUDE AREA C	00E			
INJURIES		EMS AGENCY (NAME)				: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SE	ATING POSITION	N AIR BAG USA	IGE EJECTION	N TRAPPED	
5	BY							USED 0 4	MC HE	MPLIANT	0 . 1	1	1	1	
OL STATE		ICENSE NUMBER		1	OFFENSE CHARGED LOCAL CODE		OFFENSE DESC	RIPTION			CITATION NUMBER				
OL STATE	UK448			331.			X	Failure to Co				61618	1618		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELEC		TRACTED	_	OHOL / DRUG SUSPE LCOHOL MAR		CONDITION		OHOL TE			PE RESUL	S) LT SELECT UPTO 4	
4	 			1		THER DRUG	(WOANA	1 ,	1	1		1			
UNIT#	NAME: LAST,	FIRST, MIDDLE	**							DATE	OF BIRTH		AGE	GENDER	
										<u> </u>					
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTACT	PHONE -	INCLUDE AREA CO	ODE			
INJURIES	INJURES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT								les	ATING DACITION	1				
STROLO INJURIES	TAKEN BY		INJURED PARENTO			Manual Marca	LEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED					
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAI	RGED	LOCAL	OFFENSE DESC	FENSE DESCRIPTION CITATION			NUMBER	<u> </u>		
1010							CODE								
OL CLASS	ENDORSEMENT SELECTUP 102	RESTRICTION SELECT		TRACTED		COHOL / DRUG SUSPE	CTED RIJUANA	CONDITION	ALC STATUS TY	OHOL TE		DR STATUS TY	PE RESUL	TSEE PIU4	
						THER DRUG									
INJU 1-FATAL	IRIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DEP	IR BAG		OL CLASS		OL RESTRIC		of the second	RDISTRACT	ALCOHOL TO THE	TESTST	ATUS	
2 - SUSPECTED	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOY	INVESTMENT OF		2 - CLASS B		1 - ALCOHOL INTER	Tale Special Action 1	1 - NOT DI 2 - MANU/	STRACTED ALLY OPERATING	() 하다 하는 사람이 하는데	ONE GIVEN		
3 - SUSPECTED 4 - POSSIBLE IN		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOY	ED SIDE Ed both fro	NT/CINE	3 - CLASS C 4 - REGULAR CLASS		3 CORRECTIVE LE	NSES	DEVICE	RÓNIC COMMUNI (TEXTING, TYP)	CATION 3 T	EST GIVEN, COI	NTAMINATED	
5 - NO APPAREN		4 - SECONO – LEFT ŠIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	21000074264	N I 7 JIVE	(OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS A	BUS	DIALIN 3-TALKIN	IG) Ig on Hands-Fri	4 7	EST GIVEN, RE		
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOY	MENT UNKNO	OWN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS		COMMI	INICATION DEVI	CE 5 T	EST GIVEN RE	SULTS	
1 - NOT TRANSP		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	F.	IECTION		OL ENDORSEN	SENT	7 - EXCEPT TRACTO	100	COMMI	INICATION DEVI	CE AL	COHOL TE	ST TYPE	
2 - EMS		(MOTORCYCLE SIDE CAR) 8-THIRD - MIDDLE	1 - NOT EJE	CTED		H - HAZMAT		8 - INTERMEDIATE RESTRICTIONS	LICENSE	ELECT	ACTIVITY WITH RONIC DEVICE	1-N	IONE		
3 - POLICE 9 - OTHER / UNK	(NOWN	9-THIRD - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY	LY EJECTED		M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSE	VGER DISTRACTION		ILOOD IRINE		
SAFETYE	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP			N-TANKER		10 - LIMITED TO DAY	CONTRACTOR OF STREET	INSIDE	THEVEHICLE		REATH		
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	ŢI	RAPPED		Q - MOTOR SCOOTER R - THREE WHEEL MOT	TORCYCLE	11 - LIMITED TO EMP 12 - LIMITED - OTHE	Column Tolking (Column)	THE VE			THER		
STATE OF THE PARTY	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT TRAPPED 3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED BY				S - SCHOOL BUS 13 - MECHANICAL DEV				9-OTHER	/UNKNOWN	I - N	DRUG TEST KONE	TYPE		
4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHANIC		ICAL MEANS	CAL MEANS Y TANKED / HAZMAT		CONTROLS, OR OTHER ADAPTIVE DEVICES)		CONDITION 1 - APPARENTLY NORMAL			2 - BLOOD 3 - URINE					
FORWARD FACING 13-TRAILING UNIT NON-MECI			IANICAL MEANS			14 - MILITARY VEHICLES ONLY 2		2 - PHYSICAL IMPAIRMENT 4		4-0	THER				
6 - CHILD RESTR		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE	E MARKET	AIR BRAKES		3 - EMOTIC	NAL (E. EPRES ISTURBE)		JG TEST RI	ESULT(S)	
7 - 800STER SE	AT	15 - NON-MOTORIST				M - MALE U - OTHER / UNKNOWN	1	16 - OUTSIDE MIRRO 17 - PROSTHETIC AID	(2005594) P	4- ILLNES	S LEEP, FAINTED,	1-A	MPHETAMINES	The second second	
8 - HELMET USE 9 - PROTECTIVE	PADS USED	99-OTHER/UNKNOWN				I STRINGTH	at a	18 - OTHER		FATIGUE	ED, ETC.	3-B	ARBITURATES Enzodiazepin	ES	
(ELBOW, KNE 10 - REFLECTIVE										OF MED	THE INFLUENCE ICATIONS / DRUG	is 4-L	ANNABINOIDS	EF. Ly	
11 - LIGHTING - P	PEDESTRIAN							FAMES STATE		9- OTHER		CALL ASSESSED	OCAINE Piates/opioii	os e	
/ BICYCLE ON 99 - OTHER / UNK	Designation of the Co.												THER	211	
	ALEXANDER CONTRACTOR		/ Catalogue	STATE SPECE	2.00	ESTATE STREET	1000	Name of the Control o	WILLIAM TO STATE	THE SECOND	Marie Land	B-N	EGATIVE RESÙ	LID	



CONTINUATION Narrative Continuation

LOCAL REPORT NUMBER

2 0 2 0 - 0 0 0 0 2 8 0 5

Unit #2 continued to turn right, it struck Unit #1 a second time in rear left door. Both Units then came to a stop. The driver of Unit #2 was issued a cite for failing to control her vehicle.

Officer Brooks 215