OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*								
PHOTOSTAKEN OH-2 OH-3	$\begin{bmatrix} 2 & 0 & 2 & 2 & 2 & -1 & 0 & 0 & 0 & 0 & 4 & 9 & 1 & 8 & 1 \end{bmatrix}$								
X OH-1P OTHER	REPORTING AGENCY NAME		***************************************	NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR		
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Pol	ice	101	6 7 0 3	1 - SOLVED 2 - UNSOLVED	0_2_	0 2 99 - UNKNOWN		
1 - CITY	TY, VILLAGE, TOWNSHIP*		CRASH DATE / TIME* CRASH SEVERITY 1 - FATAL						
6 7 1 2-VILLAGE Kent	T	r	0 3 3 0 2 0 2 2		2 - SERIOUS INJURY				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W.WEST	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DEC	IMAL DEGREES	SUSPECTED 3 - MINOR INJURY			
W HEST	GOUGLER			AV	[4,1]0 1 5 4	SUSPECTED			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	REFERENCE ROAD NAME (R	UAD, MILEPOST, HOU	SE#)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE		
	PARK	T	**************************************	$A \setminus V$	8 1 3 6 0		ONLY		
REFERENCE POINT DIRECTION FROM REFERENCE I. R. NORTH IR	ROUTE TYPE - INTERSTATE ROUTE(TP)	1	ROAD TYPE W-HIGHWAY F	RD - ROAD		NTERSECTION RE L RSECTION OR ON AP			
2 MILEDOCT 1 CONTROL	- FEDERAL US ROUTE	AV - AVENUE L BL - BOULEVARD M		Q - SQUARE ST - STREET			_2		
	L-STATE ROUTE R-NUMBERED COUNTY ROUTE	1		E - TERRACE	X WITHIN INTER	RCHANGE AREA	NUMBER OF APPROACHES		
FROM REFERENCE UNIT OF MEASURE	R - NUMBERED TOWNSHIP			TL - TRAIL WA- WAY		ROADWAY			
2 - FEET	ROUTE	1	L - PLACE	WA- WAI	ROADWAY DIV	IDED			
LOCATION OF FIRST HARMFUL EVE		MANNER OF CRASH		ст	DIRECTION OF TRAVE	. М	EDIAN TYPE		
1-ON ROADWAY 9-CROSSOVI	V/ALLEV ACCESS	NOT COLLISION 4- BETWEEN 5-	REAR-TO-REAR BACKING		N - NORTH		DED FLUSH MEDIAN FEET)		
	GRADE CROSSING USE PATHS OR	A THIOTTO HA	ANGLE	E DIDECTION	E - EAST		DED FLUSH MEDIAN FEET)		
5 - ON GORE TRAILS	2-		SIDESWIPE, SAM SIDESWIPE, OPPO		W-WEST	3 - DIVI	DED, DEPRESSED MEDIAN		
6-OUTSIDETRAFFIC WAY 13-BIKE LAN 7-ON RAMP 14-TOLL BOO	J .	HEAD-ON 9-	OTHER / UNKNO	WN		(AN)	DED, RAISED MEDIAN (TYPE)		
8-OFF RAMP 99-OTHER/	JNKNOWN			***************************************		9 - OTH	ER/UNKNOWN		
WORK ZONE RELATED	WORK ZONE TYPE	I	OF CRASH IN WO		CONTOUR	CONDITIONS			
	LANE CLOSURE ? - LANE SHIFT/CROSSOVER	\	WARNING SIGN		_1_	_1_	_2		
LAW ENFORCEMENT PRESENT	3 - WORK ON SHOULDER OR MEDIAN		ADVANCE WARNII RANSITION ARE		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE		1 - CONCRETE 2 - BLACKTOR		
] present	I - INTERMITTENT OR MOVING \ 5 - OTHER		ACTIVITY AREA CERMINATION AR	PFΛ	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT		
					4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK		
LIGHT CONDITION 1 - Daylight	1 - CLEAR	EATHER 6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIF OIL, GRAVEL	T, 4 - SLAG, GRAVEL, STONE		
2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY	0 1 2-CLOUDY	7 - SEVERE C MOKE 8 - BLOWING		WOMP T		6 - WATER (STAND MOVING)	ING, 5 - DIRT		
4 - DARK ROADWAY NOT LIGHTED	4 - RAIN	9 - FREEZING	RAIN OR FREEZ			7 - SLUSH	9 - OTHER/UNKNOWN		
5 - DARK UNKNOWN ROADWAY LIGHTIN 9 - OTHER / UNKNOWN	IG 5-SLEET, HAIL	99 - OTHER /	UNKNOWN			9 - OTHER/UNKNO	WN		
NARRATIVE							Indicate the north		
Unit 2 was traveling north bo	and on Condon	1 770				<	direction with an "N" on the		
							compass diagram.		
approaching Park Ave. in the		***************************************			1 1.	1 &			
was traveling north bound	approaching Park	Ave. in			1 ' 2		lot To Scale		
the number 1 lane. Unit 2 at	ttempted to make	a left				GOUGLER AVE			
turn from the number 2 lan	e and made conta	ct with				RAVE			
Unit 1.				PARK AVE.			•		

		***************************************			1 1				
	***************************************	***************************************] [
	***************************************				Li	1			
	BIODATOLI DATE /TIME	100	THE PART PERS		CACHE ALEADER	DATE /TYSSE	T DEDORT TAKEN DV		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME		NIVAL DATE / TIM		SCENE CLEARED		REPORT TAKEN BY POLICE AGENCY		
	13 0 2 0 2 2 / 1 8 1 OTAL OFFICER'S NAME*	2,0,0,3,3,0,				$\frac{ 2 }{ 1 } \frac{1}{ 3 } \frac{5}{ 2 }$	MOTORIST		
	Allen, Lee	W	[[] []				SUPPLEMENT (CORRECTION OR ADDITION		
		R'S BADGE NUMBER	*		(CORRECTION on ADDITION OF AN EXISTING REPORT SEAT TO				
	6 2 2 5 1	<u>ا</u> ا		2 1 4	1 3 1	1	J		

LOCAL REPORT NUMBER

2,0,2,2,-,0,0,0,0,4,9,1,8,

UNIT#	IT # OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER)				UDE AREA CODE (x isame as driver)	DAMAGE				
	SMICKLEVICH, DA			L		DAMAGE SCALE				
9	DRESS: STREET, CITY, STATE,			2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE						
	TUA ST ,Kent ,OH 4			0	DUONE	9 - UNKNOWN				
COMMERC	IAL CARRIER: NAME, ADDRE	ESS, CITY, STATE, ZIP		GOMMERCIAL GARRIER	PHONE: INCLUDE AREA CODE	DAMAGED AREA(S)				
3.0.07477	1 70=U0= D) A== #	VEI(TO) E	IDENTIFICATION II	Tyrutairy	AD VEHTOLE MAKE	INDICATE ALL THAT APPLY				
i I	LICENSE PLATE # JIU7400		IDENTIFICATION # $_1$ G_1 X_1 F_1 C_1 8 $_1$ 1 $_1$ 5 $_1$ 2	VEHICLE YE	1					
OH			ISURANCE POLICY #	COLOR	5 Jeep VEHICLE MODEL	11 12 0	11 12 1			
INSURAN VERIFIE	GEICO)41654051	BLK	CHEROKEE	10 12 2	10			
	TYPE OF USE	100	US DOT #	TOWED BY: COMPAN			10.00 - 2			
COMME		IN EMERGENCY RESPONSE		,		9 3 3	9 9 3 3			
	<u> </u>	1/54	IICLE WEIGHT GVWR/GCWR		OUS MATERIAL	8 4 4	8 4 -			
INTERL	OCK HIT/SKIP UNIT	#OCCUPANTS	1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	I L. RELEASED	CLASS# PLACARD ID#	8 7 5 4	8 7 9 5 4			
DEVICE	ED	0 1	3 - >26K LBS.	PLACARD		7	12 7 6			
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	18 - LIMO (LIVERY VEHICLE)	23-PEDESTRIAN/SKATER	6 11	12			
Α 2	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24-WHEELCHAIR (ANY TYPE)	10	11 1 2			
UNIT TYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST	formes	10 2			
UNIT TYPE		10 - MOPEO OR MOTORIZED Bicycle		21 - HEAVY EQUIPMENT	26-BICYCLE	9	9 3 3			
	5 - CARGO VAN	11 - ALL TERRAIN VEHICLE		22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN	Λ.	Heli. 7.			
1	0 - MIL (3-13 3EK13)	(ATV/UTV)	17 - MOTORHOME		99 - UNKNOWN OR HIT/SKIP	8	6			
	# of TRAILING UNITS					11 12 7	6 11 12			
1	WAS VEHICLE OPERATING IN AUT			3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 12	10 12 2			
2	MODE WHEN CRASH OCCURRED	U		4 - HIGH AUTOMATION			10 11 2			
	1-YES 2-NO 9-OTHER/UNKN	OWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3 3	9			
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARM	21 - MAIL CARRIER	8 4	8 4 -			
Λ.1.		7 - BUS - INTERCITY		17 - MOWING	99 - OTHER / UNKNOWN	8 7 5 4	8 7 8 4			
0 1	3 - ELECTRONIC RIDE SHARING			18 - SNOW REMOVAL		7 6	7 6			
SPECIAL FUNCTION		9 - BUS - OTHER	14-PUBLIC UTILITY	19-TOWING		6	6			
	5 - BUS-TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12			
	1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POLE	12-CONGRETE MIXER	12				
01	/ NOT APPLICABLE	MOTOR VEHICLE	CHASSIS	9 - CARGO TANK	13-AUTO TRANSPORTER	0 A				
CARGO BODY	2 - BUS	4 - LOGGING		10-FLAT BED	14-GARBAGE/REFUSE	. R A B.	3 9 7 3 9 8 3			
TYPE			7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99-OTHER/UNKNOWN					
		4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6				
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10 - DISABLED FROM PRIOR			6 6 6			
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		☐ - NO DAMAGE [0]			
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAN	12-FIRST RESPONDER .	LI-NO DAMAGE	OI CIPERONIMAN EXT			
لللا	CROSSWALK	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	☐-TOP [13]	- ALL AREAS [15]			
LOCATION	2 - INTERSECTION – UNMARKED CROSSWALK	CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHÁRED USE PATHS OR	99-OTHER/UNKNOWN	[T] HAY	NOT AT SCENE [16]			
AT IMPACT	UNOUTHER	5 - I RAVEL LANE - OTHER LOCATIO	N	TRAILS		□-0iii	NOT AT SCENE [10]			
		1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING OR LEAVING VEHICLE	INITIA	L POINT of CONTACT			
5 .	2-NON-COLLISION	2 - BACKING 3 - Changing Lanes	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMAG	E 14 - UNDERCARRIAGE			
	3-STRIKING UIII 4-STRUCK PRE-CRASH	3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10-PARKED	15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST		TO UNIT 15 - VEHICLE NOT AT SCENE			
7011011	5 - BOTH STRIKING ACTIONS	S - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGR/	M 99 - UNKNOWN			
	& STRUCK	6 - MAKING LEFT TURN	IN TRAFFIC	16 - WORKING	DISABLED VEHICLE	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	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
	2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACT	DA PARKED POSITION 14-STOPPED OR PARKED	18-OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
$\begin{bmatrix} 0 & 1 \end{bmatrix}$	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	ILLEGALLY	EQUIPMENT 19-LOAD SHIFTING/FALLING	23 - OPENING DOOR INTO ROADWAY	1 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTIN	4 - RAN STOP SIGN	10-IMPROPER PASSING	15 - SWERVING TO AVOID	SPILLING	99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
GIRCUMSTANCE	G S 5 - UNSAFE SPEED 6 - IMPROPERTURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING		# of through lanes	RAIL GRADE CROSSING			
CIRCUMSTANCE SEQUENC	E OF EVENTS	AND THE RESIDENCE				ON ROAD	1 - NOT INVOLVED			
n SEUDENC B	- U, ETEILIG		NON-COLLISION			2	1 2 - INVOLVED-ACTIVE CROSSING			
1 2 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	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NO	N-MOTORIST DIRECTION			
21	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12-DOWNHILL RUNAWAY	18 - ANIMAL — DEER 19 - ANIMAL — OTHER	SHIFTING CARGO OR		1 - NORTH 5 - NORTHEAST			
2	4 - JACKKNIFE 5 - CARGO / EQUIPMENT	9 - RAN OFF ROAD LEFT 10 - Cross median	13-OTHER NON-COLLISION	20 - MOTOR VEHICLE IN	ANYTHING SET IN MOTION By a motor vehicle		2 - SOUTH 6 - NORTHWEST			
	LOSS OR SHIFT	TO - CHOSS MEDIAN	14-PEDESTRIAN 15-PEDALCYCLE	TRANSPORT	24 - OTHER MOVARI F ORJECT	FROM 2 TO L				
31	I	COLLIEN	ON WITH FIXED OBJEC	21 - PARKED MOTOR VEHICLE T - STRUCK	•		4 - WEST 8 - SOUTHWEST			
	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN			
4	/ CRASH CUSHION	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT E3 WALL	UNIT SPEED	DETECTED SPEED			
	26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT / LUMINARIES Support	45 - EMBANKMENT	51 - WALL 52 - BUILDING		1 - STATED / ESTIMATED SPEED			
5[J 27 - BRIDGE PIER OR ABUTMENT	34-MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	53 - TUNNEL	$0 \cdot 2 \cdot 0$	2 - CALCULATED / EDR			
	28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	48 - TREE	54-OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
6	30 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49 - FIRE HYDRANT	99-OTHER/UNKNOWN					
1		1				2 5				
	J FIRST HARMFUL EVE	NT L MOST	HARMFUL EVENT			1	İ			

LOCAL REPORT NUMBER

 $\begin{bmatrix} 2 + 0 + 2 + 2 + - + 0 + 0 + 0 + 0 + 4 + 9 + 1 + 8 + - \end{bmatrix}$

U	NIT#	OWNER NAME: LAST, FIRST	, MIDDLE (same as driver)	997 999 999	OWNE	R PHONE: INCLU	DÉ AREA CODE (SAME AS DRIVER)		DAMA	\GE		
		WISEMAN, NOREE							AMAGE			
4		DRESS: STREET, CITY, STATE,	1		3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE							
		R MEADOW BLVD IAL CARRIER: NAME, ADDRE	· · · · · · · · · · · · · · · · · · ·	14241	- C	Henory Cannen	DUONE	9 - UNKNOWN				
	JINNERG	IAL GARRIER: NAME, ADDRE	105, VII 1, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			DAMAGED AREA(S)				
1 P	STATE	LICENSE PLATE#	VEHICLE	IDENTIFICATION #		VEHICLE YEA	AR VEHICLE MAKE			THAT APPLY		
		HFV6205		I C 3 H H 2 5 0 19	18.1	2 0 1 '	.	42		12		
_			· · · · · · · · · · · · · · · · · · ·	NSURANCE POLICY#		COLOR	VEHICLE MODEL			11 12 1		
<u>X</u>	INSURAN VERIFIE	GRANGE	1	075868		BLK	CROSSTREK	0 11 2		10		
		TYPE OF USE	— IN ENERGENCY	US DOT #	TOWE	D BY: COMPANY	NAME	10 2		10 2		
	COMMER	CIAL GOVERNMENT	IN EMERGENCY L	L L L . L . L	,	UAZADDA	He MATTERIAL	9 9 3	3	9 9 3 3		
	INTERL	OCK	#OCCUPANTS VE	HICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.			US MATERIAL CLASS # PLACARD ID #					
<u> </u>	JEVICE LEQUIPP	HIT/SKIP UNIT	I I	2 - 10,001 - 26K LBS.	processing .			B 6				
			0 2	3 - >26K LBS.		PLACARD L		7 6	1 <u>1</u> 	2 7 6 5		
		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED			VERY VEHICLE) Passengers)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10 /	11 12			
	$0 \mid 3 \mid$	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		20 - OTHER VI		25 - OTHER NON-MOTORIST		10			
UN	IIT TYPE	4 - PICK UP	10-MOPED OR MOTORIZED	15 - SEMI-TRACTOR	21 - KEAVY E	QUIPMENT	26 - BICYCLE	9	9	3 3		
		5 - CARGO VAN	BICYCLE			WITH RIDER OR	27 - TRAIN	-	8			
Ц		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-	DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8 🗸		4		
L		# OF TRAILING UNITS						11 12 1	7	5 12 1		
		WAS VEHICLE OPERATING IN AUT		0 - NO AUTOMATION	3 - CONDITIO	NAL AUTOMATION	9 - UNKNOWN	12	•	12		
≯	7	MODE WHEN CRASH OCCURRED	1 0 1		4 - HIGH AUT					10 11 1 2		
		1-YES 2-NO 9-OTHER/UNKN	IOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AU	IUMALION		9 9 3	3	9 9 3 3		
		1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM		21 - MAIL CARRIER	8 1 4		8 1 4		
Ι,	0 - 1 -	2 - TAXI	7 - BUS - INTERCITY		17 - MOWING		99-OTHER/UNKNOWN	8 7 5 4		8 7 5 4		
	DECTAI	3 - ELECTRONIC RIDE SHARING			18 - SNOW RE	MOVAL		7 8 5		7 6 6		
FU	INCTION		9 - BUS - OTHER		19-TOWING			6		6		
!		5 - BUS - TRANSIT/COMMUTER		15-CONSTRUCTION EQUIPMENT		SERVICE PAIROL			12	12 12		
١.	0 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	4114 4414	8 - POLE		12 - CONCRETE MIXER	12	1			
ď	CARGO		4 - LOGGING		9 - CARGOTA 10 - FLAT BE		13-AUTO TRANSPORTER 14-Garbage/Refuse		1	(1)		
	BODY Type			7 40411/4/1700/4041/5	11.DUMP	U	99-OTHER/UNKNOWN	9 (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		3 9 1 3 9 😂 3		
1		1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTORT	DALID) C	99-OTHER/UNKNOWN		7	$ar{\Theta}$		
L V			5 - STEERING	8 - TRAILER EQUIPMENT		D FROM PRIOR	77-OTTLERY ONANOWA	6	į			
D	EFECTS		6 - TIRE BLOWOUT	DEFECTIVE	ACCIDEN	IT		—		0 0		
		1 - INTERSECTION - MARKED	3 - INTERSECTION OTHER	6 - BICYCLE LANE	9 - MEDIAN	CROSSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE	[0]	U-UNDERCARRIAGE [14]		
L		CROSSWALK	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10-DRIVEW		AT INCIDENT SCENE	☐-TOP [13]		- ALL AREAS [15]		
NO	N-MOTORIST Ocation	2 - INTERSECTION UNMARKED CROSSWALK	CROSSWALK	8 - SIDEWALK		USE PATHS OR	99-OTHER/UNKNOWN]				
	T IMPACT	UNUSUNALN	5 -TRAVEL LANE OTHER LOCATIO	N .	TRAILS			П-0и	LINUIA	AT SCENE [16]		
			1 - STRAIGHT AHEAD	7 - MAKING U-TURN		ATING A CURVE	18 - APPROACHING Or Leaving Vehicle	INITI	AL POIN	IT OF CONTACT		
,	4	2-NON-COLLISION 3-STRIKING 0 6	2 - BACKING 3 - Changing Lanes	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE		NG OR CROSSING Ed Location	19-STANDING	0 - NO DAMA	GE	14 - UNDERCARRIAGE		
7			4 - OVERTAKING/PASSING	10-PARKED	15 - WALKIN		20 - OTHER NON-MOTORIST	1 1 1-12 - REFE		IT 15 - VEHICLE NOT AT SCENE		
		5- BOTH STRIKING ACTIONS	5 - MAKING RIGHTTURN	11-SLOWING OR STOPPED		G, PLAYING	21 - STANDING OUTSIDE	13 - TOP	Verini	99 - UNKNOWN		
		& STRUCK	6 - MAKING LEFT TURN	IN TRAFFIC	16-WORKIN		DISABLED VEHICLE 99 - OTHER / UNKNOWN	15 100				
		9-OTHER/UNKNOWN		12 - DRIVERLESS					TRA	FFIC		
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / AC	13-IMPROPER START FROM A PARKED POSITION		OBSTRUCTION Ing defective	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW		TRAFFIC CONTROL		
	0 (3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	EQUIPN		23-OPENING DOOR INTO	1 - ONE-WAY 1 2 - TWO-WAY	,	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN		
	0 6	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID		RIFTING/FALLING/	ROADWAY	1 2 - 1 WU-YVAT	6	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
G CIR	INTRIBUTING RCUMSTANCE:	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	16 - WRONG WAY	SPILLIN 20-IMPROF	VG Per crossing	99-OTHER IMPROPER ACTION	A wunguess a sur-				
Ė_		6-IMPROPERTURN	12-IMPROPER BACKING		mirnor	QIIOVUIIV		# OF THROUGH LANES ON ROAD		RAIL GRADE CROSSING 1 - NOT INVOLVED		
SINE AS	EQUENCE	OF EVENTS		NAM COLUTETON				2	, 1	2 - INVOLVED-ACTIVE CROSSING		
	2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE	16 - RAILWA	YVEHICLE	22 - WORK ZONE MAINTENANCE			3 - INVOLVED-PASSIVE CROSSING		
1[# U	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF Travel	17 - ANIMAI	L FARM	EQUIPMENT	HATT / N	N-MOT	ORIST DIRECTION		
		3 - IMMERSION	B - RAN OFF ROAD RIGHT	12-DOWNHILL RUNAWAY	18-ANIMAI 19-ANIMAI		23-STRUCK BY FALLING, Shifting Cargo or	ן יייייעי איזיייעי איזיייעי איזיייעי איזיייעי	o itri¥iU l	1 - NORTH 5 - NORTHEAST		
2(L	4 - JACKKNIFE 5 - CARGO / EQUIPMENT	9 - RAN OFF ROAD LEFT 10 - Cross Median	13-OTHER NON-COLLISION		VEHICLE IN	ANYTHING SET IN MOTION By a motor vehicle		4	2 - SOUTH 6 - NORTHWEST		
		LOSS OR SHIFT	TO-CUOSS INCLINI	14 - PEDESTRIAN 15 - PEDALCYCLE	TRANS	PORT	24 - OTHER MOVABLE OBJECT	FROM 2 TO	_4_	3 - EAST 7 - SOUTHEAST		
3			COLLIES	ON WITH FIXED OBJEC		D MOTOR VEHICLE				4 - WEST 8 - SOUTHWEST		
		25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	VI	50 - WORK ZONE MAINTENANCE			9 - OTHER / UNKNOWN		
4		/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	U/11 C 117	EQUIPMENT 51 - WALL	UNIT SPEED	.]	DETECTED SPEED		
		STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT / LUMINARIES Support	45 - EMBAN 46 - FENCE		52-BUILDING			1 - STATED / ESTIMATED SPEED		
5		27 - BRIDGE PIER OR ABUTMENT	BARRIER	40 - UTILITY POLE	47 - MAILB		53 - TUNNEL	0 2 5		2 - CALCULATED / EDR		
		28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE Barrier	41 - OTHER POST, POLE OR SUPPORT	48 - TREE		54-OTHER FIXED OBJECT	POSTED SPEED		3 - UNDETERMINED		
6	L	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER		49-FIRE H	YURANT	99-OTHER/UNKNOWN					
	_1	FIRST HARMFUL EVE	NT L 1 I MOST	HARMFUL EVENT				2 5				
		VM MVMI										

OHIO DEF	OHIO DEPARTMENT MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER						
								[2,0,2,2,-0,0,0,4,9,1,8,-]					
UNIT#	NAME: LAST, FIRST, MIDDLE SMICKLEVICH, DAVID, ALLAN								DATE OF BIRTH AGE GENDER				
0,1	STREET, CITY, STATE, ZIP								0 2 1 4 1 1 9 7 2 5 0 M				
C	MANTUA ST, Kent, OH 44240								L	PHONE - INCLUDE AREA C	ODE		
INJURIES	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT								DOT-C	SEATING POSITIO	N AIR BAG	USAGE EJECTION T	RAPPED
<u>5</u>	BY							0 4	MC HELMET 0 1 1 1 1				
OL STATE O, H	CODE						CRIPTION CITATION NUMBER						
						.01	COHOL TEST		DRUG TEST(S)				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP		FRACTED		HOL / DRUG SUSPE		CONDITION			STATUS	TYPE RESULT SEC	ECT UPTO 4
4				1 OTHER DRUG			1	_1_	1	1_			
UNIT #	NAME: LAST, FI	RST, MIDDLE	٠,	•		·		···		DATE OF BIRTH		AGE G	ENDER
<u>.0,2</u>	WISEM	IAN, LAWRENCI	E, JO	SEPE	I				1 2	/ 1 3 / 1	96	4 5 7	<u>M</u>
ADDRESS	: STREET, CITY, STA	•		_					CONTACT	PHONE - INCLUDE AREA	CODE		
2014		EADOW BLVD ,S	Street						L	i			
2014 DIVINION TO THE STATE OF T	INJURED E TAKEN BY	MS AGENCY (NAME)		INJURED	TAKEN TO:	MEDIGAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 0 4	□ мс н	SOMPLIANT SEATING POSITION OF THE PROPERTY OF	ON AIR BAG	USAGE EJECTION 1	TRAPPED 1
OL STATE	OPERATOR LI	CENSE NUMBER		OFFEN	SE CHAR	GED	LOCAL	OFFENSE DESC	RIPTION		CITAT	TION NUMBER	
EOH				331.0	80		CODE	Driving i	n Mar	ked La	216	38	
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP	DIS	VER TRACTED		HOL / DRUG SUSPE		CONDITION		COHOL TEST TYPE VALUE	STATUS	DRUG TEST(S) TYPE RESULT SE	LECT UP TO 4
. 4			BY	11		COHOL MAF HER DRUG	RIJUANA	1	1	1	1	1	
UNIT#	NAME: LAST, F	IRST, MIDDLE						4	DATE OF BIRTH AGE GENDER				
L1	J												
	S: STREET, CITY, STA	ATE, ZIP							CONTAC	T PHONE - INCLUDE AREA	CODE		ł
NOTOR	Januara Tr	THE SOUTH OF THE STATE OF THE S		Turren		MEDICAL PACIFIES		LOAFETY FALIDMENT	<u> </u>	SEATING POSITI	ANI AIR BA	A HOLOE ELECTION	<u> </u>
INJURIES	INJURED E TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKEN 10:	MEDICAL FACILITY	(NAME, CITY	USED		COMPLIANT SEATING PUSITI	UN ALK BAI	G USAGE EJECTION	TRAPPED
	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAR	GED	LOCAL	OFFENSE DES	SCRIPTION CITATION NUM			TION NUMBER	
OL STATE	اد						CODE						į
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U	DIS	IVER TRACTED							TYPE RESULTS	ELECT UP 104	
			BY		- Inmed	HER DRUG	KIJUANA	` 			ļ. ,		
INJ	URIES	SEATING POSITION		AIR BAG		OL CLAS	s	OL RESTRIC	CTION(S)		CTION	TEST STAT	
1 - FATAL	D SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF 2 - DEPLOY	100000		1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTE 2 - CDL INTRASTA		1 - NOT DISTRACTED 2 - MANUALLY OPERAT	ING AN	1 - NONE GIVEN 2 - TEST REFUSED	
	D MINOR INJURY	2 - FRONT - MIDDLE	3 - DEPLOY			3 - CLASS C		3 - CORRECTIVE L	Marie State of the	ELECTRONIC COMMU	JNICATION	3 - TEST GIVEN, CONT/	
4 - POSSIBLE 5 - NO APPARE	4、 1966年, 2016年 1977年 19	3 - FRONT – RIGHT SIDE 4 - Second – Left side	4 - DEPLOY 5 - NOT API	(AUTO D)			4 - FARM WAIVER 5 - EXCEPT CLASS	R DIALING)			SAMPLE / UNU SAB 4 - TEST GIVEN, RESU	 A. Yang, A. S. Papil 	
		(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE		MENT UNKN	10WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS	ASSA COMMUNICATION DEVICE 5 - TEST GIVEN, RESULTS				LTS
1 - NOT TRANS		6 - SECOND – RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACT		4 - TALKING ON HAND-H COMMUNICATION DE		ALCOHOL TEST	TYPE
/TREATED	AT SCENE	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJI	JECTION ECTED		OL ENDORSE H - HAZMAT	MENT	8 - INTERMEDIAT RESTRICTIONS		5 - OTHER ACTIVITY WI ELECTRONIC DEVICE		1 - NONE	
3 - POLICE		8 - THIRD - MIDDLE 9 - Third - Right Side	- A 4-6 - 7	LLY EJECTE	D	M - MOTORCYCLE		9 - LEARNER'S PE RESTRICTIONS	RMIT	6 - PASSENGER		2 - BLOOD 3 - URINE	
9-OTHER/U	NKNOWN	10 - SLEEPER SECTION	3 - TOTALL 4 - NOT AP	2000		P - PASSENGER N -TANKER		10 - LIMITED TO DA	The second of the second	7 - OTHER DISTRACTION INSIDE THE VEHICL		4 - BREATH	
	EQUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER	1.0	TRAPPED		Q - MOTOR SCOOTER		11 - LIMITED TO EI 12 - LIMITED - OTI	CA140 - 1	8 - OTHER DISTRACTION	N OUTSIDE	5-OTHER	
1 - NONE USE 2 - Shoulder	R BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTR			R - THREE-WHEEL M S - School Bus	OTORCYCLE	13 - MECHANICAL	DEVICES	9-OTHER/UNKNOWN		DRUG TEST T 1 - NONE	TYPE
3 - LAP BELT	ONLY USED R & Lap Belt Used	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRIC MECHA	CATED BY Inical Mean	YS	T - DOUBLE & TRIPL	grand the late		OTHER	CONDITIO		2-BLOOD	
5 - CHILD RES	STRAINT SYSTEM -	CARGO AREA 13 - TRAILING UNIT	3 - FREED	X_TANKER/HA7MAT			ADAPTIVE DE 14 - MILITARY VEI	5 940 A 196	1 - APPARENTLY NORM 2 - Physical impairm	and the second	3 - URINE 4 - OTHER		
FORWARD 6 - CHILD RES	FACING Stráint system –	14 - RIDING ON VEHICLE EXTERIOR				GENDE F-FEMALE	R	15 - MOTOR VEHIC AIR BRAKES	LES WITHOUT	3 - EMOTIONAL (E.G., DE Angry, Disturbed)		DRUG TEST RE	SULT(S)
REAR FAC 7 - BOOSTER	ING	(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIR		4 - ILLNESS		1 - AMPHETAMINES	
8 - HELMET	the state of the state of the state of	99-OTHER/UNKNOWN				U - OTHER / UNKNOW	N	17 - PROSTHETIC <i>i</i> 18 - Other	/10	5 - FELL ASLEEP, FAINT Fatigued, etc.	TED,	2 - BARBITURATES 3 - BENZODIAZEPINE	s
	(VE PADS USED (NEES, ETC.)		11.					J. W 1		6- UNDER THE INFLUE of Medications/1		4 - CANNABINOIDS	
10 - REFLECTI	IVE CLOTHING									/ALCOHOL 9-OTHER/UNKNOWN		5 - COCAINE 6 - OPIATES / OPIOIDS	•
11 - LIGHTING / BICYCLE	- PEDESTRIAN I Only		5 2 1 1 2 2 1							3- OTHER LONKNOWN		7 - OTHER	
99-0THER/U	INKNOWN											8 - NEGATIVE RESUL	T\$

OHIO DEF	SOFT PUBLIC BAFFAT OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER							
∞	L							2,0,2,2,-,0,0,0,4,9,1,8,						
UNIT#	NAME: LAST	DATE OF BIRTH AGE GENDER												
02		MAN, NOREE	1 0 / 1 9 / 1 9 6 4 5 7 F											
2	ADDRESS: STREET, CITY, STATE, ZIP 2014 DEER MEADOW BLVD ,Streetsboro ,OH 44241								CONTACT PHONE - INCLUDE AREA CODE					
E LUITE	INJURED	EMS AGENCY (NAME)	,Street	INJURED TAKEN TO: MEDICAL FACILITY	(MANE CITY)	SAFETY EQUIPMENT	<u>L</u>	EATING POSITION	AID BAG HSAGE	E-FECTION	TRADDEN			
5 1	TAKEN BY	LING AGENCY (NAME)	DOT-COMPLIANT MC HELMET	0 3	1 1	1	1							
UNIT#	NAME-1AS	T, FIRST, MIDDLE				0,4,		OF BIRTH		AGE	GENDER			
	I I I I I I I I I I I I I I I I I I I	, Tho I mode					/ .	1/1			,			
ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE							
ADDRESS:														
INJURIES	TAKEN USED					SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	BY L					<u> </u>	MC HELMET							
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDER			
	<u></u>						<u> </u>	/			L			
ADDRESS	S: STREET, CITY,	STATE, ZIP					CONTACT PHONE	• INCLUDE AREA CO	DE					
ADDRESS	IMILIDES	EMS Reguer (https://		IN HIDED TAVEN TO, \$2 P-	w/m	CACCTY COURSELY		SEATING POSITION	AID DAO HEACT	CICATION	TRAPPED			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILIT	Y (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING PUSITION	AIN BAU USAGE	EJECTION	IKAPPED			
				,				or provid	<u> </u>	005	OF NDED			
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAII /	E OF BIRTH /		AGE	GENDER			
ADDRESS	S: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO						
ADDRESS		•												
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILIT	Y (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
L	TAKEN BY					USED	MC HELMET	لــــــــــــــــــــــــــــــــــــــ						
The second second	INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION	av satja Noracis	AIR BAG U	SAGE				
1 - FAT			1 - NONE US VEHICLE	ED - OCCUPANT		IT – LEFT SIDE ORCYCLE DRIV	ER)	1 - NOT DE						
		ERIOUS INJURY Inor injury	katan dalah dal	ER BELT ONLY USED	2 - FR0N	IT – MIDDLE	2 - DEPLOYED FRONT							
	SIBLE INJU		3 - LAP BEL	ONLY USED 3 - FRONT - RIGHT SID 4 - SECOND - LEFT SID				4 - DEPLO	San Jackson					
5 - NO	APPARENT	INJURY		ER & LAP BELT USED (MOTORCYCLE PASS			SENGER) FRONT/SIDE							
5 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	INJURED	TAKEN BY		ESTRAINT SYSTEM – 5 - SECOND – MIDDLE RD FACING 6 - SECOND – RIGHT SI			5 - NOT APPLICABLE IDE 9 - DEPLOYMENT UNKNOWN							
	TRANSPOR	The state of the s		RESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE										
	REATED AT S	CENE	REAR FA		E CAR) EJECTION 1 - NOT EJECTED									
2 - EM:			7 - BOOSTEI 8 - HELMET	网络电影 化二氯二酚 经工业	DE 2 DARTIALLY ELECTED									
	HER / UNKN	own .		TIVE PADS USED	 A. A. A. A. A. A. A. 		ER IN OTHER ENCLOSED 3 - TOTALLY EJECTED							
		NDER		KNEES, ETC.)	CAR	GO AREA (NON-T PICK-UP WITH CA	TRAILING UNIT, 4 - NOT APPLICABLE							
F-FEM	IALE			TIVE CLOTHING IG – PEDESTRIAN	12 - PASS	SENGER IN UNI	Dispersion Liberty of the confidence of the conf							
M - MAL	LE Er/Unkno	NA/NI	/ BICYCL		the first of the first	GO AREA (LING UNIT	1 - NOTTRAPPED							
0.011	ER / UNIXING		99 - OTHER/	UNKNOWN	14 - RIDI	NG ON VEHICLI	IVICANO							
						-TRAILING UNIT) -MOTORIST	기하다면 현기적 기관하다 그 제공		BY NON-M	ECHANIC	AL			
					. (7) - 1214	ER/UNKNOWN		MEAN	S					
	AST, FIRST, MID	DLE			······································		DA	TE OF BIRTH		AGE	GENDER			
SER							1 1 1	/			<u> </u>			
ADDRES	S: STREET, CIT	Y, STATE, ZIP					CONTACT PHON	= - INCLUDE AREA C	ODE					
NAME	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDE							
S	TRAINET EARLY THROUGHDULE						/	1/1						
ADDRES	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHON	E - INCLUDE AREA	CODE	<u> </u>	!-			
								1 1						
NAME: I.	.AST, FIRST, MIC	DDLE					DA	TE OF BIRTH		AGE	GENDER			
S ABBRES	C. STREET AT	V PTATE 715					CONTACT PHON	F - 100 USE	1 1		<u> </u>			
AUDRES	SS: STREET, CIT	1, 31A1 E, Z1P					GOMINGI PHON	- INGLUDE AREA	oout.	, .	r			
			**************************************		In the second second									