OF PUBLIC SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*									
OH-2 OH-3	\  \( \begin{aligned} a									
PHOTOS TAKEN X OH-1P OTHER	REPORTING AGENCY NAME		***************************************	NCIC*	HIT/SKIP	UNIT IN ERROR				
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Poli	ice	<b>0</b>	6,7,0,3	1 - SOLVED L 2 - UNSOLVED	0_2_	0 2 98 - ANIMAL 99 - UNKNOWN			
I 1-CITY I	Y, VILLAGE, TOWNSHIP*		CRASH DATE / TI	ME*	CRASH SEVERITY 1 - FATAL					
6 7 1 2-VILLAGE Kent				0 9 0 4 2 0 2 2	1425 5	J 2 - SERIOUS INJURY				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DEC		SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH S - SOUTH L E - EAST W - WEST	MANTUA			S T	[4,1], $[1,5]$ 8	3 - MINOR INJURY SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH	REFERENCE ROAD NAME (RO	DAD, MILEPOST, HOUSE	E #)	ROAD TYPE	LONGITUDE DEC	IMAL DEGREES	4 - INJURY POSSIBLE			
E - EAST W - WEST	FAIRCHILD			$A_{\perp}V_{\perp}$	$-81_{0}360$	$2 \downarrow 4 \downarrow 0$	5 - PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION	ROUTE TYPE		AD TYPE		I	NTERSECTION REL	ATED			
1-INTERSECTION N-NORTH IR	- INTERSTATE ROUTE(TP) - FEDERAL US ROUTE			RD - ROAD SQ - SQUARE	X WITHIN INTER	SECTION OR ON APP	PROACH			
3-HOUSE # L E-EAST	- STATE ROUTE	BL - BOULEVARD MP	- MILEPOST	ST - STREET	WITHIN INTER	CHANGE AREA	NUMBER OF APPROACHES			
	- NUMBERED COUNTY ROUTE	1		TE - TERRACE TL - TRAIL		ROADWAY				
	- NUMBERED TOWNSHIP ROUTE	DR - DRIVE PI	- PIKE	WA - WAY	ROADWAY DIV	IDED				
3 -YARDS		HE - HEIGHTS PL	- PLACE			1				
LOCATION OF FIRST HARMFUL EVE! 1 - ON ROADWAY 9 - CROSSOVE		MANNER OF CRASH CO NOT COLLISION 4 - RE		ACT	DIRECTION OF TRAVEL		EDIAN TYPE			
0 1 2-ON SHOULDER 10-DRIVEWAY	Y/ALLEY ACCESS 6	BETWEEN 5-BA	ACKING		N - NORTH S - SOUTH	(<41	DED FLUSH MEDIAN FEET )			
3 - IN MEDIAN 11-RAILWAY ( 4 - ON ROADSIDE 12-SHARED U	GIVADE CHOSSING	VEHICLES IN 6-A	NGLE Ideswipe, san	AE DIRECTION	E - EAST W - WEST		DED FLUSH MEDIAN FEET )			
5 - ON GORE TRAILS	2 -	REAR-END 8 - SI	IDESWIPE, OPP	OSITE DIRECTION	W - WEST	1	DED, DEPRESSED MEDIAN DED, RAISED MEDIAN			
6-OUTSIDETRAFFIC WAY 13-BIRE LAN 7-ON RAMP 14-TOLL BOO	1 -	HEAD-ON 9'- 0	THER / UNKNO	WN		(ANY	TYPE)			
8-OFF RAMP 99-OTHER/U	NKNOWN					1	R/UNKNOWN			
WORK ZONE RELATED	WORK ZONE TYPE	l l	F CRASH IN W		CONTOUR	CONDITIONS	SURFACE			
l [	- LANE CLOSURE - LANE SHIFT/CROSSOVER	WA	ARNING SIGN			2	_2_			
LAW ENFORCEMENT PRESENT L 3	- WORK ON SHOULDER OR MEDIAN	1.	VANCE WARNI ANSITION ARE		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE		1 - CONCRETE 2 - BLACKTOP,			
1 <del></del>	- INTERMITTENT OR MOVING V	1	TIVITY AREA		3 - CURVE LEVEL	3-SNOW	BITUMINOUS, ASPHALT			
ACTIVE SCHOOL ZONE 5	- OTHER	5-18	RMINATION A	REA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK			
LIGHT CONDITION  1 - DAYLIGHT	1 - CLEAR	EATHER 6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIR'	'   4 - SLAG, GRAVEL,			
1 2-DAYLIGHT 2-DAWN/DUSK	0.4	7 - SEVERE CRO	OSSWINDS			6 - WATER (STANDI	NG, 5-DIRT			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, S 4 - RAIN	MOKE 8-BLOWING SA 9-FREEZING R				MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN			
5 - DARK - UNKNOWN ROADWAY LIGHTIN		99 - OTHER / UN				9 - OTHER/UNKNOW	/N			
9 - OTHER / UNKNOWN		<del></del>			<u> </u>					
NARRATIVE					•		Indicate the north direction with			
Unit 1 was turning from north	to east on Fairchil	ıd					an "N" on the compass diagram.			
Ave from N Mantua St. Unit 2	was turning from	west				· ·				
to north on Fairchild Ave. Un	it 2 ran the red									
					넒	!!.				
traffic light and stuck Unit 1.					K MANTUA ST		NOT TO SCALE			
			FAIR	CHILD AVE.		FAIR	CHILD AVE. (BRIDGE)			
						<b>3</b>				
				=	→ TRAFFIG SIG	NAL				
					)   (a)	Û Û⇔ ¥				
					N. MANTUAST	つのugler ave				
					<u> </u>	8				
	1 1 1	1 1 1								
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIV	VAL DATE / TIN	AE	SCENE CLEARED	DATE/TIME	REPORT TAKEN BY			
0,9,0,4,2,0,2,2, / 1,4,2,5		2,6,0,9,0,4,2	<b>10,2,2</b> /			2,/,1,4,5,8	POLICE AGENCY			
	TAL OFFICER'S NAME*	log			D BY OFFICER'S NAME*					
MIN	Ems, Char						SUPPLEMENT (CORRECTION OR ADDITIO			
1	OFFICE	R'S BADGE NUMBER*		CHECKE	D BY OFFICER'S RANGE	NUMBER'*	TO AN EXISTING REPORT SENT TO ODES			

2 0 2 2 2 - 0 0 0 1 4 9 1 2

					OWNER PHONE: 1975 IN	DE AREA COOF ( TSAME AS DRIVER)	DAMAGE				
O 1 SWANTEK, SHAWN  OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER)					<u></u>		DAMAGE SCALE  1 - NONE 3 - FUNCTIONAL DAMAGE				
		DRESS: STREET, CITY, STATE, Z COUNTRY LN		ls .OH 44023		į	3 - FUNCTIONAL DAMAGE  2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
1		IAL CARRIER: NAME, ADDRE	<u> </u>	15,011 11020	COMMERCIAL CARRIER F	PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
							DAMAGED AREA(S) Indicate all that apply				
		LICENSE PLATE # JFA7424		IDENTIFICATION # $\mathbf{E}\mathbf{X}\mathbf{G}\mathbf{U}2_{1}6_{1}4_{1}1$	VEHICLE YEAR 2 1 0 1 1 (	<b>列Hyundai</b>	12	TE ALL THAT APPLY			
	INSURAN VERIFIE	INSURANCE COMPA		SURANCE POLICY # 52612965	BLK	VEHICLE MODEL Veloster	10 11 12 1	10 11 12 2			
ľ		TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY; COMPANY	NAME	10 2	10, 2			
	INTERL DEVICE EQUIPE		#UUUUPANIS	ICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS.  2 - 10,001 - 26K LBS.	MATERIAL C	US MATERIAL Lass # Placard ID #	9 8 3 4 7 0 0 4	8 7 5 4			
	O 1 UNIT TYPE	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE	13 - SNOWMOBILE 14 - Single Unit Truck 15 - Semi-tractor	18-LIMO (LIVERY VEHICLE) 19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE 21-HEAVY EQUIPMENT 22-ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANYTYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	10 9	1 1 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
VEH	2	WAS VEHICLE OPERATING IN AUT MODE WHEN CRASH OCCURRED? 1-YES 2-NO 9-OTHER/UNKN	. 0	1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - High automation 5 - Full automation	9 - UNKNOWN	10 11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 9 9 3 3			
	0,1 SPECIAL FUNCTION	2 - TAXI 3 - ELECTRONIC RIDE SHARING	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	16 - FARM 17 - MOWING 18 - Snow Removal 19 - Towing 20 - Safety Service Patrol	21 - MAIL CARRIER 99 - Other / Unknown	8 7 6 5	8 7 6 6 6 12 12 12 12			
	O 1 CARGO BODY TYPE	/NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	CHASSIS  6 - CARGO VAN/ENCLOSED BOX  7 - GRAIN/CHIPS/GRAVEL	8 - POLE 9 - CARGOTANK 10-FLAT BED 11-DUMP	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 H 3 9	3 9 3 3			
		2 - HEAD LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICKTIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTORTROUBLE 10-DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN	6 □ - NO DAMAGE	6 6 6  [0] UNDERCARRIAGE [14]			
	NON-MOTORIS' LOCATION AT IMPACT	CROSSWALK  2 - INTERSECTION – UNMARKED	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER/UNKNOWN	☐-TOP [13]	☐-ALL AREAS [15]			
	4 ACTION	2-NON-COLLISION 0 6	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, FUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAMA	RTO UNIT 15-VEHICLE NOT AT SCENE			
(\$).	0 1 CONTRIBUTIN	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 6 5 - UNSAFE SPEED 6 - IMPROPER TURN	7-LEFT OF CENTER 8-FOLLOWING TOO CLOSE / ACD. 9-IMPROPER LANE CHANGE 10-IMPROPER PASSING 11-DROVE OFF ROAD 12-IMPROPER BACKING	13 - IMPROPER START FROM A A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/ SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	TRAFFICWAY FLOW  1 - ONE-WAY  2 - TWO-WAY  # of THROUGH LANES	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN  2 - SIGNAL 5 - YIELD SIGN  3 - FLASHER 6 - NO CONTROL  RAIL GRADE CROSSING			
FVFNT(c)	SEQUENC	E OF EVENTS	AR-100 NO EN DAVING				ON ROAD	1 - NOT INVOLVED			
FVF	11 2   0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	NON-COLLISION 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE 17 - Animal — Farm	22 - WORK ZONE MAINTENANCE EQUIPMENT		2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
	2L	5 - CARGO / EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN  C O LLISIO	TRAVEL 12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION 14-PEDESTRIAN 15-PEDALCYCLE IN WITH FIXED OBJEC	18-ANIMAL — DEER 19-ANIMAL — OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE T — STRUCK	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM <u>1</u> то	1 - NORTH   5 - NORTHEAST     2 - SOUTH   6 - NORTHWEST     3 - EAST   7 - SOUTHEAST     4 - WEST   8 - SOUTHWEST     9 - OTHER/UNKNOWN			
	5 <u> </u>	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE J 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET J 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	43 - CURB 44 - DITCH 45 - EIMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	50 - WORK ZONE MAINTENANCI EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	UNIT SPEED  0 2 0  POSTED SPEED  3 5	DETECTED SPEED  1 - STATED / ESTIMATED SPEED  2 - CALCULATED / EDR  3 - UNDETERMINED			
	1 1	LEIDST HADMEIII EVE	NT     NOOT	HADMEIII EVENT							

UNIT #	OWNER NAME: LAST, FIRST	T, MIDDLE (X) SAME AS DRIVER) N. EUGENE		OWNED BHOME.	Theire Core (Minime As Bounes)		DAMAGE AMAGE SCALE			
OWNER	ADDRESS: STREET, CITY, STATE,	ZIP (X) SAME AS DRIVER)		<u></u>		3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
	VAN DR ,Kent			COMMERCIAL CARRIER P	HONE: INCLUDE AREA CODE	9 - UNKNOWN				
						DAMAGED AREA(S) INDICATE ALL THAT APPLY				
LP STAT	LICENSE PLATE # JWP7670	VEHICLE I 3 B 7 H F 1 3	DENTIFICATION # 7.4. Y. M2.2.4."	$7_12_13_1_12_10_10_10_1$		INDICA	ALL ITIAL APPLY			
X INSU	RANCE INSURANCE COMPA	ANY INS	SURANCE POLICY#	COLOR	VEHICLE MODEL	1 0	11 12 1			
<b>I</b> △ VER	IFIED HALL GRE	EEN INS COS	V 3402173615 US DOT #	RED TOWED BY: COMPANY	RAM 1500	10 12 2	10 11 1 2			
□сом	MERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	U3 DOT #			9 3	3 9 9 3			
INT	ERLOCK TICE HIT/SKIP UNIT	#OCCUPANTS VEHI	CLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS	MATERIAL C	JS MATERIAL Lass # Placard ID #	8 7 6 4	8 7 5 5			
			3 - >26K LBS.	PLACARD L  18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	7 6 1	12 7 6 5			
10,4	2 - PASSENGER VAN (MINIVAN)	B - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANYTYPE)	10	11 2			
	- 3 - SPOKI UILLITY VEHICLE	10 - MOPED OR MOTORIZED		20 - OTHER VEHICLE 21 - Heavy Equipment	25 - OTHER NON-MOTORIST 26 - BICYCLE	9 (	9 3 3			
	5 - CARGO VAN 6 - VAN (9-15 SEATS)		16-FARM EQUIPMENT 17-Motorhome	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP		$\begin{bmatrix} 8 & 4 & 4 \\ 7 & 5 & 5 \end{bmatrix}$			
	# of TRAILING UNITS	(ATV/UTV)	17-MOTORATORE		33 - OHANOWN ON 111 133A11	12	5 12			
	WAS VEHICLE OPERATING IN AU	TONOMOUS	O - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12	6 11 12 1			
2	MODE WHEN CRASH OCCURRED		1 - DRIVER ASSISTANCE 2 - Partial Automation	4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 1 2 2	10 11 1 2 2			
<u></u>	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS Mode Level	z - rantiac automation			9 9 3	3 9 9			
Λ 1	1 - NONE . 2 - Taxi		11 - FIRE 12 - MILITARY	16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 5 74	8 7 6 74			
U 1	3 - ELECTRONIC RIDE SHARING		13 - POLICE	18-SNOW REMOVAL	77-VIIIEN BANKSAN	7 6 5	7 6 6			
FUNCT	ION 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFFTY SERVICE PATROL		6	- 6			
	. 1 - NO CARGO RODYTYPE	3 - VEHICLE TOWING ANOTHER		8 - POLE	12 - CONCRETE MIXER	12	12 12 12			
$\begin{bmatrix} 0_1 \end{bmatrix}$	/ NOT APPLICABLE	MOTOR VEHICLE	CHASSIS 6 - CARGO VAN/ENCLOSED BOX	9 - CARGO TANK	13 - AUTO TRANSPORTER	1.7				
BOD'	Υ "-500		7 - GRAIN/CHIPS/GRAVEL	10-FLAT BED 11-DUMP	14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 ( ) 3 9	e 3 9 T 3 9 D 3			
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6				
VEHIC	LE 2 - HEAD LAMPS TS 3 - TAIL LAMPS		8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT			6 6 6			
DEFEC		6 - TIRE BLOWOUT			14 FIDAT SCANNINGS	☐-NO DAMAGE	[0]			
LL	1 - INTERSECTION - MARKED  CROSSWALK	4 - MIDSLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE	9 - MEDIAN/CROSSING ISLAND 10-DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	<b>□-TOP</b> [13]	- ALL AREAS [ 15 ]			
LUCAT		CROSSWALK  5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	□ - UN	IT NOT AT SCENE [16]			
AT IMP	ACT 1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13-NEGOTIATING A CURVE	18 - APPROACHING		0.11 Maria - 1 M			
3		2 - BACKING J 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19-Standing	INITI 0 - NO DAMA	<b>al point</b> of <b>contact</b> Ge 14 - undercarriage			
ACTI	ON 4-STRUCK PRE-CRASI	H 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	15-WALKING, RUNNING,	20 - OTHER NON-MOTORIST	0 1 1-12 - REFE	R TO UNIT 15 - VEHICLE NOT AT SCENE			
	5 - BOTH STRIKING ACTIONS & STRUCK		11 - SLOWING OR STOPPED In traffic	JOGGING, PLAYING 21 - STANDING OUTSID 16-WORKING DISABLED VEHICLE		13 - TOP	99 - UNKNOWN			
	9-OTHER/UNKNOWN	6 - MAKING LEFTTURN	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 22 - Not discernible	TRAFFICWAY FLOW	TRAFFIC CONTROL			
$_10_1$	2-FAILURE TO YIELD  3-RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED ILLEGALLY	18-OPERATING DEFECTIVE EQUIPMENT	23 - OPENING DOOR INTO	1 - ONE-WAY 2 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN			
CONTRIB	4 - RAN STOP SIGN UTING 5 - UNSAFE SPEED ANCES 6 - INCORPORTUDIN	10-IMPROPER PASSING 11-DROVE OFF ROAD	15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
CIRCUMST SEQUE	6-IMPROPERTURN	12-IMPROPER BACKING	16 - WRONG WAY	20-IMPROPER CROSSING		# of THROUGH LANES	RAIL GRADE CROSSING  1 · NOT INVOLVED			
E SEQUE	NCE OF EVENTS		NON-COLLISION			3	1 2 - INVOLVED-ACTIVE CROSSING			
1 2 L	0 1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16-RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAL — FARM 18 - ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / N	ON-MOTORIST DIRECTION			
2	J 4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION	19-ANIMAL — OTHER 20-Motor Vehicle in	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
21	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS. MEDIAN	14 - PEOESTRIAN 15 - PEDALCYCLE	TRANSPORT 21 - PARKED MOTOR VEHICLE	BY A MOTOR VEHICLE 24 - Other Movable object	FROM 4 TO				
31			N WITH FIXED OBJEC	T - STRUCK			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
4L	25 - IMPACT ATTENUATOR / 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 SUPPORT	45 - EMBANKMENT	51 - WALL 52 - Building		1 - STATED / ESTIMATED SPEED			
5	27 - BRIDGE PIER OR ABUTMEN	District II	40 - UTILITY POLE	46-FENCE 47-Mailbox	53 - TUNNEL	0,0,5	2 - CALCULATED / EDR			
6	28-BRIDGE PARAPET 29-BRIDGE RAIL	35-MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	48-TREE 49-Fire Hydrant	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
1	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT			3,5				
	<ul> <li>FIRST HARMFUL EVE</li> </ul>	NT   1   MOSTH	IARMFUL EVENT			,	Ì			

OHODERAFTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER								
								2 0 2 2 - 0 0 0 1 4 9 1 2							
UNIT#	NAME: LAST, FIRST, MIDDLE SWANTEK, ANDREW, LAWRENCE								DATE OF BIRTH   AGE   GENDER						
0 1		STREET, CITY, STATE, ZIP								0 5 1 1 7 2 0 0 0 2 2 2 0 M					
121	5 COUNTRY LN ,Chagrin Falls ,OH 44023								CONTACT F	HONE * INCCUDE AREA CO	JUE				
9	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT								DOT Com	SEATING POSITION	AIR BAG I	USAGE EJECTION	TRAPPED		
<b>5</b> 5	TAKEN BY							USED 0 4	DOT-COMPLIANT 0 1 1 1 1 1						
OL STATE	OPERATOR LI	CENSE NUMBER		OFFENS	E CHARG	ED	LOCAL CODE	OFFENSE DESC	CRIPTION CITAT			ON NUMBER	·		
O <sub>H</sub>															
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP	DIST	/ER TRACTED	_	HOL/DRUG SUSPE		CONDITION	STATUS TYPE	HOL TEST PE VALUE	STATUS	TYPE RESUL	T SELECT UPTO 4		
. 4		(1 1 11 1 1 1 1	BY	1	=	HER DRUG	DUANA	. 1	1 1	.   -	1	1			
UNIT #	NAME: LAST, FI	IRST, MIDDLE		السسساء						DATE OF BIRTH		AGE	GENDER		
<b>_0,2</b> _	LONG,	LOGAN, EUGEN	<b>VE</b>						<u> 0   9  </u>	$1 \downarrow 5 \downarrow 2 \downarrow 0$	0.3	1.8	M		
ADDRESS	STREET, CITY, STA	•	• • • • •						CONTACT P	HONE - INCLUDE AREA C	UVE				
728 IV		Kent ,OH 44240							L		· .		- ,		
728 IV 728 IV INJURIES 5 OL STATE	INJURED E TAKEN BY	EMS AGENCY (NAME)		USED			SAFETY EQUIPMENT USED 0 4	DOT-COM	PLIANT	N AIR BAG	USAGE EJECTION	TRAPPED 1			
OL STATE	OPERATOR LI	CENSE NUMBER		OFFENS		GED	LOCAL CODE	OFFENSE DESC	RIPTION			ION NUMBER			
O.H.	4			331.1			X	Right of Way		OLIOL TECT	219		~ \		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP	PTO3 DRI' DIS' BY	VER TRACTED	_	HOL / DRUG SUSPE COHOL  MAF		CONDITION	STATUS TY	OHOL TEST PE VALUE	STATUS	TYPE RESU	LT SELECT UPTO 4		
4			".	1	=	HER DRUG									
UNIT#	NAME: LAST, F	IRST, MIDDLE	•					<u> </u>		DATE OF BIRTH		AGE	GENDER		
LL_	J														
ADDRESS	S: STREET, CITY, STA	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
010	Swigner I r	THE ASENDY WHEN		Inumper	414541.70	MEDIONI FACTITE		CAFFTY FORIDAFIN	T DOT 0 SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
INJORTES	INJURED E TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COM	MPLIANT	AIR BAG	OSAGE   EJECTIO	N TRAPPED				
OL STATE	OPERATOR L	ICENSE NUMBER					OFFENSE DES	CRIPTION CITAL			TION NUMBER				
	,			CODE											
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U		IVER STRACTED		HOL / DRUG SUSP		CONDITION		OHOLTEST /PE VALUE	STATUS	DRUG TEST	S) LT select up to 4		
			ВҮ			.COHOL MAI THER DRUG	RIJUANA		<u> </u>						
INJ	URIES	SEATING POSITION		AIR BAG		OL CLAS	s	OL RESTRI	CTION(S)	DRIVER DISTRAC	TION	TEST S	TATUS		
1 - FATAL	D SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTE 2 - COL INTRASTA		1 - NOT DISTRACTED 2 - MANUALLY OPERATI	NC AN	1 - NONE GIVEN 2 - TEST REFUSE			
. (C) for 1971, 4-7	D SERIOUS INJURY	2 - FRONT - MIDDLE	3-DEPLOY	电复动压缩点		3 - CLASS C		3-CORRECTIVE L	Company of the Co	ELECTRONIC COMMU DEVICE (TEXTING, T)	NICATION ;	3 - TEST GIVEN, C	ONTAMINATED		
4 - POSSIBLE		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	(Section 2)	/ED BOTH FRO	NT/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER	A DIIC	DIALING)		SAMPLE / UNI 4 - TEST GIVEN, F	Maria Araba Araba		
5 - NO APPARE		(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE	5 - NOT AP 9 - DEPLOY	PLICABLE Yment unkn	DWN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS 6 - EXCEPT CLASS	S A	3 -TALKING ON HANDS-I COMMUNICATION DE		5 - TEST GIVEN, F UNKNOWN	RESULTS		
1 NOTTRANS	D TAKEN BY Sported	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACT		4 - TALKING ON HAND-H COMMUNICATION DE		ALCOHOL T	EST TYPE		
/TREATED 2 - EMS	AT SCENE	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJ	JECTION FCTED	1.44	OL ENDORSE H-HAZMAT	MENT	8 - INTERMEDIAT RESTRICTIONS		5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE		1 - NONE			
3 - POLICE		8-THIRD - MIDDLE	医二种皮质性动脉炎	LLLY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PE	RMIT	6 - PASSENGER		2 - BLOOD 3 - URINE			
9-OTHER/U	NKNOWN	9-THIRD - RIGHT SIDE 10-SLEEPER SECTION		Y EJECTED Plicable		P - PASSENGER N - TANKER		RESTRICTIONS 10 - LIMITED TO DA	医二十二甲醇甲醇二溴烷	7 - OTHER DISTRACTION INSIDE THE VEHICLE		4 - BREATH			
	EQUIPMENT	OF TRUCK CAB 11 - Passenger in Other		TRAPPED		Q - MOTOR SCOOTER	Property of	11 - LIMITED TO EI		8 - OTHER DISTRACTION THE VEHICLE	OUTSIDE	5 - OTHER	강강됐		
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 TE 1-NONE	STTYPE		
3 - LAP BELT	ONLY USED R & Lap Belt Used	PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED	2 - EXTRIC	CATED BY Nical Mean	S	T,- DOUBLE & TRIPL	e Marie de La Caración de la Caració	(SPECIAL BRA	OTHER	CONDITION		2 - BL00D			
5 - CHILD RES	STRAINT SYSTEM -	CARGO AREA 13-TRAILING UNIT	3-FREED	BY Echanical N	AF ANS	X -TANKER / HAZMA	a Tagan	ADAPTIVE DE 14 - MILITARY VEI		1 - APPARENTLY NORM 2 - PHYSICAL IMPAIRM	作业原作业 经定债	3 - URINE 4 - OTHER	70 m 25 m 26 m Ngjaran 1981		
FORWARD 6 - CHILD RES	STRÁINT SYSTEM –	14 - RIDING ON VEHICLE EXTERIOR				GENDE F-FEMALE	R	15 - MOTOR VEHIC AIR BRAKES	LESWITHOUT	3 - EMOTIONAL (E.G., DE ANGRY, DISTURBED)	PRESSED,	DRUG TEST	RESULT/S)		
REAR FAC 7 - BOOSTER		(NON-TRAILING UNIT)  15 - NON-MOTORIST				M - MALE		16-OUTSIDE MIR	e a diaban Militari	4 - ILLNESS		1 - AMPHETAMI			
8 - HELMET	USED	99-OTHER/UNKNOWN				U - OTHER / UNKNOW	N	17 - PROSTHETIC	UIA	5 - FELL ASLEEP, FAINT FATIGUED, ETC.	ED,	2 - BARBITURAT 3 - BENZODIAZE	医牙齿管 医抗压力性		
	IVE PADS USED Knees, etc.)									6 - UNDER THE INFLUE OF MEDICATIONS / D		4 - CANNABINOI			
10 - REFLECTI	100									/ALCOHOL 9-OTHER/UNKNOWN		5 - COCAINE 6 - OPIATES / OP	IOIDS		
/ BICYCLE	the first term of the contract of						Ar. S			A ATHERT OHMOTAL		7-OTHER			
99-OTHER/U	JNKNOWN											8 - NEGATIVE R	ESULTS		

OHIO DEP	SOFFURING SAFERE OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER					
INIT #	NAME LAG	CINOX HUDBLE					DATE OF BIRTH AGE GENDER					
UNIT #	1	i, first, middle <b>HELL, HANN</b> A	AH. LYNI	N			, 0 , 4 , 0 , 2		0.3.1	19	F	
	STREET, CITY,			CONTACT PHONE - INCLUDE AREA CODE								
ADDRESS:	SUMM	ER EVENING	DR ,CAN	AL FULTON ,OH	44614		l .	1 2 1 1	· · ·			
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED				
5	BY					0.4	MC HELMET	0 3	1	_1	_1	
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE	E OF BIRTH		AGE	GENDER	
										ٔ لــــــــــــــــــــــــــــــــــــ		
ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COI	DE			
TNILIDIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILIT	IN (NAME CITY)	SAFETY EQUIPMENT						
MJORIES	TAKEN BY	EMS AGENUT (NAME)		USED DOT-COMPLIANT MC HELMET					AIN DAG VOAGE	Lucion		
UNIT#	NAME: LAS	T, FIRST, MIDDLE			DAT	E OF BIRTH		AGE	GENDER			
	111111111111111111111111111111111111111	,,										
ADDRESS	S: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA GO	DE			
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facilit	JURED TAKEN TO: Medical Facility (NAME, CITY)   SAFETY EQUIPMENT USED			SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	BY L						MC HELMET		<u></u>	لــــــا	L	
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
ADDDECC	arnest out	OTATE 7ID					CONTACT PHONE			<u> </u>		
ADDRESS	3: STREET, CITY	, STATE, ZIP					CONTACT PHONE	INCLUDE AREA CO	DE			
injuries	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
i 1 1	TAKEN BY				•	USED	DOT-COMPLIANT MC HELMET					
	INJ	URIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE		
1 - FAT			1 - NONE US	ED- OCCUPANT	化基金铁 在一起的现在分词 经销售	IT – LEFT SIDE ORCYCLE DRIV	'FR)	1 - NOT DE				
1.4045.9		ERIOUS INJURY INOR INJURY		ER BELT ONLY USED		IT – MIDDLE			YED FRONT YED SIDE			
A. S. S. S.	SPECTED IN SSIBLE INJI		3 - LAP BEL	T ONLY USED	**							
	APPARENT		4 - SHOULD	ER & LAP BELT USED	& LAP BELT USED (MOTORCYCLE PAS:			FRONT				
	INJURED	TAKEN BY		ESTRAINT SYSTEM – D FACING	5 - SECOND - MIDDLE 5 - NOT APPLICABLE 6 - SECOND - RIGHT SIDE 9 - DEPLOYMENT UNKNOW!					KNIONAIN		
1 - NO	TTRANSPO	Company of the Compan	6 - CHILD R	ESTRAINT SYSTEM –				9 - DEPLO		Production of the second of th		
	REATED AT S	SCENE	REAR FA 7 - BOOSTEI	방송성이 아이셔서 그는 것을 하다.	医斯内氏动脉 除疗法	D – MIDDLE	(UAR)	1 NOTE	EJECT	ON	A - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -	
2 - EM 3 - POL			8 - HELMET	하면 맛있다면서 어디 가지나니다.		D – RIGHT SID		1 - NOT EJECTED 2 - Partially Ejected				
	HER/UNKN	own		TIVE PADS USED		EPER SECTION SENGER IN OTH	OF TRUCK CAB IER ENCLOSED	特 化性质流流	LY EJECTE			
	GE	NDER		, KNEES, ETC.) TIVE CLOTHING	医内囊性切除 医多性畸形 化二氯	GO AREA (NON-T	TRAILING UNIT, 4 - NOT APPLICABLE					
F-FEM		사이 경기 가장 경기를 받고 1981년 - 1981년		IG – PEDESTRIAN	12 - PASS	SENGER IN UNI	tig file to the control of the contr		TRAPP	ΈD		
M - MAI U - OTH	LE IER/UNKNO	) WN	/ BICYCL	E ONLY		GO AREA ILING UNIT		1 - NOTT				
			99 - OTHER/	UNKNOWN		NG ON VEHICL -TRAILING UNIT)		2 - EXTRI MEAN	CATED BY N S	VIECHAN	CAL	
					1,34	- MOTORIST			BY NON-M	ECHANIC	CAL	
					99 - OTH	ER/UNKNOWN		MEAN	3		440.46	
NAME: L	AST, FIRST, MID	DLE					DA	TE OF BIRTH	1	AGE	GENDER	
ADDRES	S: STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA	ODE .			
×										1 1		
NAME: L	NAME: LAST, FIRST, MIDDLE						DA	TE OF BIRTH		AGE	GENDER	
NESS												
ADDRES	SS: STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA	CODE			
NAME	LAST, FIRST, MII	DDI E	T				n/	TE OF BIRTH		AGE	GENDER	
S HANE:	unai, rinai, Will	/Vut.							, , ,	A III	WEITER!	
ADDRES	SS: STREET, CIT	Y, STATE, ZIP	, ., .		· · · · · · · · · · · · · · · · · · ·		CONTACT PHON	IE - INGLUDE AREA	CODE			
5									1 1			