OHIO DEPARTMENT TRAFFIC CRASH	REPORT *DENOTES MA	NDATORY FIELD FOR SUPPLEM	ENT REPORT	L	OCAL REPORT NUMBER	*
☐ 0H-2 ☐ 0H-3	LOCAL INFORMATION			2.0.2.4	- 101010102	2 3 6 2
PHOTOS TAKEN X OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Police	_ 0 _	6,7,0,3	1 - SOLVED	0_2_0	2 98 - ANIMAL 99 - UNKNOWN
1 - CITY	, VILLAGE, TOWNSHIP*			CRASH DATE / 1	TIME* CRA	SH SEVERITY - FATAL
6,7 1 2-VILLAGE Kent				$\lfloor 0 \rfloor 2 \rfloor 1 \rfloor 6 \rfloor 2 \rfloor 0 \rfloor 2 \rfloor 4 \rfloor$	/.1.9.0.6. 5	- SERIOUS INJURY
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH 3 E - EAST W. WEST	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE	2	SUSPECTED - MINOR INJURY
3 E-EAST W-WEST	SUMMIT		$S \perp T$	4,1,,1,4,1,	2 3 4	SUSPECTED
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	REFERENCE ROAD NAME (ROAD, I	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	**************************************	- INJURY POSSIBLE
E - EAST W-WEST	LOOP		$R_{\perp}D$	-8 ₁ 1 ₁ 3 ₁ 3 ₁ 6 ₁	0_2_6_	PROPERTY DAMAGE ONLY
REFERENCE POINT DIRECTION 1-INTERSECTION FROM REFERENCE IR -	ROUTE TYPE INTERSTATE ROUTE(TP) AL	ROAD TYPE - ALLEY HW- HIGHWAY F	RD - ROAD		INTERSECTION RELATED	
1 2-MILE POST 4 S-SOUTH US-			SQ - SQUARE	X WITHIN INTE	RSECTION OR ON APPROA	сн . 4 .
3-H005E # E-EAST	STATE ROUTE		ST - STREET	WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT		TL - TRAIL		ROADWAY	
1 3 3 2 - FEET	ROUTE	- DRIVE PI - PIKE \ - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	IDED	
LOCATION OF FIRST HARMFUL EVEN		NER OF CRASH COLLISION/IMPA	CT	DIRECTION OF TRAVE		W TVD5
1 - ON ROADWAY 9 - CROSSOVER	1 - NOT (COLLISION 4-REAR-TO-REAR		N - NORTH		LUSH MEDIAN
0 1 2-ON SHOULDER 10-DRIVEWAY/	TWO	WEEN 5-BACKING MOTOR 6-ANGLE		S-SOUTH	(<4 FEET) LUSH MEDIAN
4 - ON ROADSIDE 12-SHARED US	E PATHS OR TRAN	NSPORT 7 - SIDESWIPE, SAM		E - EAST W - WEST	(≥4 FEET	
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAR 3 - HEAD	1969 - Marie			4 - DIVIDED, F	RAISED MEDIAN
7 - ON RAMP 14-TOLL BOOTS 8 - OFF RAMP 99-OTHER / UN					9 - OTHER/UN	
5-VIT NAME	WORK ZONE TYPE	LOCATION OF CRASH IN WO	DK ZONE	CONTOUR	CONDITIONS	SURFACE
	LANE CLOSURE	1 - BEFORE THE 1ST		2	4	2
3-	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNIN	NG AREA	1 - STRAIGHT LEVEL	1 - DRY	1-CONCRETE
LAW ENFORCEMENT PRESENT	OR MEDIAN	3 - TRANSITION AREA	Α	2 - STRAIGHT GRADE	2-WET	2 - BLACKTOP,
The second contract of	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION AR	EA	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT
LIGHT CONDITION	WEATHE	R		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK
1 - DAYLIGHT	1-CLEAR	6 - SNOW		7- OTHER GINKNOWN	OIL, GRAVEL	4 - SLAG, GRAVEL, STONE
3 - DARK - LIGHTED ROADWAY	0 6 2-CLOUDY	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT	SNOW		6 - WATER (STANDING, MOVING)	5 - DIRT
4 - DARK - ROADWAY NOT LIGHTED	4 - RAIN	9 - FREEZING RAIN OR FREEZ	#1.000000000000000000000000000000000000		7 - SLUSH	9 - OTHER/UNKNOWN
5 - DARK — UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN	
NARRATIVE		1			A	Indicate the north
LINET 1 WAS TO AVEL INC E AS	T DOUND ON E					direction with an "N" on the
UNIT 1 WAS TRAVELING EAS	a-Armidotania (Aparta Socialità in resta anterio) — 20-2000 milliori (Aparta Socialità in Aparta Socialità					compass diagram.
SUMMIT ST. APPROACHING	G LOOP RD. AND					
BEGINNING TO SLOW DOW	N. UNIT 2 WAS					
TRAVELING BEHIND UNIT	1 AND FAILED TO		Summitsi	(Z	//	/
LEAVE ENOUGH DISTANCE	BETWEEN HER A	ND		Not To So	cale	S. S
UNIT 1 CAUSING THE ACCI	DENT.		· Aller			
ATTEMPTING TO AVOID TH		<u>r</u>	S. II	P	17	7
2 DROVE OFF THE ROAD R	IGHT AND STRUCK	ζ		>	1/2	
A UTILITY POLE (228904D 5	3933).				7	
				//		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED	<u></u>	EPORT TAKEN BY
[0,2,1,6,2,0,2,4,/,1,9,0,6,,0,2,1]	$6_{1}2_{1}0_{1}2_{1}4_{1}/_{1}1_{1}9_{1}0_{1}9_{1}$	0,2,1,6,2,0,2,4,/,1	9 1 3 0	0,2,1,6,2,0,2,4	4 ₁ / ₁ 2 ₁ 0 ₁ 1 ₁ 6 X	POLICE AGENCY
TOTAL TIME OTHER TOTA	L OFFICER'S NAME*	C	HECKED BY OFFI	CER'S NAME*		MOTORIST
ROADWAY CLOSED INVESTIGATION TIME MINUT	Knapp, Derek I		elson, J	OSh By Officer's Badge N	IIIMBED*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)
0 0 0 0 2 0 0 8		JGE NUMBER"		BY OFFICER'S BADGE N	TOMBER	on white and nervel sent to USFS)

HSY7001 OH1 1/19 [760-0820] PAGE **1** 0F **5**

LOCAL REPORT NUMBER

2

ı	0	2	4	-	0	0	0	0	2	3	6	2	
i													

	_	-	-	-	-		-			
_				_	_	_	_	٨١	-	

1 - NONE

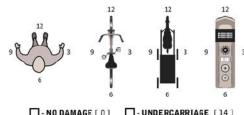
3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE

12

9 - UNKNOWN

DAMAGED AREA(S) INDICATE ALL THAT APPLY

11 12 11 10 1 10 9 3 3 4 4 5 5	3	, (1 12 1 10 2 9 9 3 8 6 4 4 7 5 5
7 6	5 11 12 10 11 10 9 9 0 0	X	6 5
11 12 11 12 12 19 9 3	7 6	10 11	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1



- NO DAMAGE [0]	- UNDERCARRIAGE [14
□-TOP [13]	- ALL AREAS [15]

- UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT

0 - NO DAMAGE

14 - UNDERCARRIAGE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE

DIAGRAM

13-TOP

99 - UNKNOWN TRAFFIC

TRAFFIC CONTROL

- TWO-WAY

1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL ☐ 3 - FLASHER

5 - YIELD SIGN 6 - NO CONTROL RAIL GRADE CROSSING

3 - INVOLVED-PASSIVE CROSSING

SH LANES

1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING

UNIT / NON-MOTORIST DIRECTION

1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 4 TO 3 3-EAST 7-SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN

	, consider controller
UNIT SPEED	DETECTED SPEED
0 1 0	1 - STATED / ESTIMATED SPEED
$\begin{bmatrix} 0 & 1 & 0 \end{bmatrix}$	2 - CALCULATED / EDR
POSTED SPEED	3 - UNDETERMINED
3 5	

								$Z_{\perp}U_{\perp}Z_{\perp}A_{\perp}$
	UNIT #	OWNER NAME: LAST, FIRE DAGISTAN, 1	ST, MIDDLE (SAME AS DRIVER)		Rec	R PHONE: INCLUI lacted per (DRC 149.43(A)(1)	
	OWNER AD	DRESS: STREET, CITY, STATE	, ZIP (X SAME AS DRIVER)					1 - NONE
		LOOP RD ,Ke		1 S				2-MINOR
	COMMERC	CIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		Con	MERCIAL CARRIER F	PHONE: INCLUDE AREA CODE	
1	P STATE	LICENSE PLATE #		E IDENTIFICATION #		VEHICLE YEA		INI
-		JVM1160		4,3,3,NU1,9,3,	8,8,9	$2_{1}0_{1}2_{1}2$	_ II y till till till	12 1
	X INSURAN	INSURANCE COMP ED STATEFAR		NSURANCE POLICY #		WHI	VENUE WODEL	10 12
▐		TYPE OF USE		US DOT#	TOWE	D BY: COMPANY		10 11 1 2
L	COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE			HAZARDOU	IS MATERIAL	9 9 3
	INTERL	OCK HIT/SKIP UNI	#OCCUPANTS	HICLE WEIGHT GVWR/GCWR 1 - ≤10KLBS.	- 1 -		LASS # PLACARD ID #	8 7 5
	EQUIP	ED MINISTER SAL	. 0 1 _	2 - 10,001 - 26K LBS 3 - >26K LBS.		PLACARD		7 6 5
		1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART 13 - SNOWMOBILE			23 - PEDESTRIAN / SKATER	10
	$0_{1}3_{1}$	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	20 - OTHER V		24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	,
ľ	INIT TYPE		10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR	21 - HEAVY E		26-BICYCLE	9 (
		5 - CARGO VAN 6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME		PRANCE VELICA E	27 -TRAIN 99 - UNKNOWN OR HIT/SKIP	8
H	_0_	# of TRAILING UNITS	(ATV/UTV)					12
VEHICL	- 10	WAS VEHICLE OPERATING IN AU	TONOMOUS	0 - NO AUTOMATION	3 - CONDITIO	NAL AUTOMATION	9 - UNKNOWN	11 12
>	. 2 .	MODE WHEN CRASH OCCURRED	o?	1 - DRIVER ASSISTANCE	4 - HIGH AUT			10 11 1
	_	1-YES 2-NO 9-CTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUT	UMAIIUN		9 9 3
	0.1	1 - NONE	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE	16-FARM 17-MOWING		21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 4 5
ı	U 1	2 - TAXI 3 - ELECTRONIC RIDE SHARING		12 - MILITARY 13 - POLICE	18-SNOW RE		99-UTHER/UNKNOWN	7 6
F	UNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19-TOWING	SERVICE DITRO		6
┡		5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT			10.000000000000000000000000000000000000	3
	0_1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE 9 - CARGO TA		12 - CONCRETE MIXER 13 - AUTOTRANSPORTER	12
	CARGO BODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10-FLAT BEI		14-GARBAGE/REFUSE	9 P P 3
┡	TYPE	30 *** GP386577.550 Plents	064,0000,025,000		11-DUMP		99-OTHER / UNKNOWN	
	VEHICLE	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICKTIRES B - TRAILER EQUIPMENT	9 - MOTORTI 10 - DISABI F	OUBLE D From Prior	99-OTHER / UNKNOWN	6
	DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDEN			
ľ		1-INTERSECTION-MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/	CROSSING ISLAND	12 -FIRST RESPONDER	☐ - NO DAMA
N	DN-MOTORIST	CROSSWALK 2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	10 - DRIVEWA		AT INCIDENT SCENE 99 - OTHER / UNKNOWN	☐-TOP [13]
	LOCATION AT IMPACT	CROSSWALK	5 -TRAVEL LANE - OTHER LOCATIO		TRAILS	USE PAINS UK		
		1-NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIA	TING A CURVE	18-APPROACHING	INI
	4	2-NON-COLLISION 3-STRIKING 1 1	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE		G OR CROSSING D LOCATION	OR LEAVING VEHICLE 19-STANDING	0 - NO DAI
	ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10 - PARKED	15 - WALKING	DI AVIIVO	20-OTHER NON-MOTORIST	0 6 1-12 - REF
		5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	11 - SLOWING OR STOPPED INTRAFFIC	16 - WORKING		21 - STANDING OUTSIDE DISABLED VEHICLE	13-T0P
L		9-OTHER/UNKNOWN	0 - MAKING ELFT TORK	12 - DRIVERLESS	17-PUSHING	VEHICLE	99 - OTHER / UNKNOWN	
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM A PARKED POSITION	17 - VISION O		21 -LYING IN ROADWAY	TRAFFICWAY FLOW
	0.1	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACD 9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED	EQUIPME	NT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY
	ONTRIBUTING	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SH	FTING/FALLING/	ROADWAY 99 - OTHER IMPROPER ACTION	2 2 - TWO-WAY
	IRCUMSTANCES		11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPE		99-UTHER IMPROPER ACTION	# of THROUGH LANES
EVENT(S	EQUENCE	OF EVENTS						ON ROAD
Ā	2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	16 - RAILWAY	VEHICLE	22 - WORK ZONE MAINTENANCE	
1	2_0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAL	- FARM	EQUIPMENT	UNIT /
,		3 - IMMERSION 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	18-ANIMAL 19-ANIMAL	DLL.	23 - STRUCK BY FALLING, SHIFTING CARGOOR	JAM 7
ľ		5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOTOR V TRANSPO	EHICLE IN	ANYTHING SET IN MOTION BY A MOTOR VEHICLE	4
3	لللا	LOSS OR SHIFT		15-PEDALCYCLE	21 - PARKED	MOTORVEHICLE	24 - OTHER MOVABLE OBJECT	FROM LT T
		25 - IMPACT ATTENUATOR	COLLISIO 31-GUARDRAIL END	N WITH FIXED OBJECT 37-TRAFFIC SIGN POST	43-CURB		50 - WORK ZONE MAINTENANCE	
4		/ CRASH CUSHION 26-BRIDGE OVERHEAD	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH		EQUIPMENT 51 - WALL	UNIT SPEED
5	تــــــــــــــــــــــــــــــــــــــ	STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT / LUMINARIES SUPPORT	45 - EMBANK 46 - FENCE	MOEDI I	52 - BUILDING	,0,1,0,
		27 - BRIDGE PIER ORABUTMENT 28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST POLE	47 - MAILBOX		53 - TUNNEL 54 - OTHER FLYED OR JECT	

49-FIRE HYDRANT

48-TREE

54 - OTHER FIXED OBJECT

99-OTHER/UNKNOWN

41 - OTHER POST, POLE

OR SUPPORT

28-BRIDGE PARAPET

30-GUARDRAIL FACE

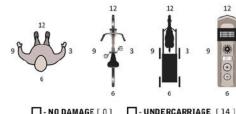
29-BRIDGE RAIL

35 - MEDIAN CONCRETE

ullet FIRST HARMFUL EVENT oxdots Most Harmful event

36 - MEDIAN OTHER BARRIER 42 - CULVERT

	LOCAL REPORT NUMBER 2
DRIVER)	DAMAGE
۱)(1)	DAMAGE SCALE
	4 1 - NONE 3 - FUNCTIONAL DANAGE
ODE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
ODE I I	DAMAGED AREA(S)
KE	INDICATE ALL THAT APPLY
	12 12
EL	1 1 12
	10 10 11 1 2
	9 10 2 3 3 9 10 3 3
- 11	
D#	8 7 5 4
ш	7 6 5 11 7 6 5
R YPE)	10 12 2
T	10 11 1 2
	9 9 3 3
IP	7 7 5 7
ir.	6
	11 12 1 6 11 12 1
	10 11 1 2 10 11 1 2
	10 2 - 10 2
	9 9 3 3 3
	8 7 5 4
	7 6 5
	6



☐-TOP [13] - ALL AREAS [15]

- UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT 14 - UNDERCARRIAGE 0 - NO DAMAGE

DIAGRAM

1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

13-TOP

	TRAF	FIC	
1 - ONE-WAY 2 - TWO-WAY	_ 2	TRAFFIC CON' 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER	4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL
of THROUGH LANES	_1	RAIL GRADE CRO 1 - NOT INVOLVED 2 - INVOLVED-ACT	VECROSSING

UNIT / NON-MOTORIST DIRECT

	- 7					
					1 - NORTH	5 - NORTHEAST
				•	2 - SOUTH	6 - NORTHWEST
FROM L	4	ĵ	TO L	3	3 - EAST	7 - SOUTHEAST
					4 - WEST	8 - SOUTHWEST
						9 - OTHER / LINKNOWN

UNIT SPEED	DETECTED SPEED
0 2 5	1 - STATED / ESTIMATED SPEED
$\begin{bmatrix} 0_{\perp} 2_{\perp} 5_{\perp} \end{bmatrix}$	2 - CALCULATED / EDR
POSTED SPEED	3 - UNDETERMINED
3 5	

OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER LANDRUM, HANNAH, MORGAN OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)

4514 JISCO WEST RD JACKSON OH 45640 COMMERCIAL CARRIER: NAME ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CO **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MA LP STATE LICENSE PLATE # J.T.DK.N.3.D.U.4.D.0.3.4.9.1.7.5 2 0 1 Toyota O H JTE1206 INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MOD PROGRESSIVE BLUPRIUS 972587988 TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE **Bakers Towing** HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD 1 - ≤10KLBS. RELEASED HIT/SKIP UNIT 2 - 10.001 - 26K LBS 0,2PLACARD J 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATE 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY T 0 1 2 - PASSENGER 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIS UNITTYPE 4 - PICKUP 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 ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SK (ATV/UTV) 00 # OF TRAILING UNITS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION 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 9 - BUS - OTHER 14 - PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99 - OTHER / UNKNOWN 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR VEHICLE 2 - HEAD LAMPS 5 - STEERING DEFECTIVE ACCIDENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS AT IMPACT 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 0 1 3 - CHANGING LANES 3___ 3-STRIKING 19-STANDING SPECIFIED LOCATION 9 - LEAVING TRAFFIC LANE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED JOGGING, PLAYING 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY 1-NONE 7 - LEFT OF CENTER

PARKED POSITION

14 - STOPPED OR PARKED

15 - SWERVING TO AVOID

NON-COLLISION

OPPOSITE DIRECTION OF

11 - CROSS CENTERLINE -

12 - DOWNHILL RUNAWAY

13 - OTHER NON-COLLISION

COLLISION WITH FIXED OBJECT - STRUCK

37 - TRAFFIC SIGN POST

38 - OVERHEAD SIGN POST

39-LIGHT/LUMINARIES

41 - OTHER POST, POLE

SUPPORT

40 - UTILITY POLE

OR SUPPORT

42 - CULVERT

3 MOST HARMFUL EVENT

ILLEGALLY

16 - WRONG WAY

TRAVEL

14-PEDESTRIAN

15-PEDALCYCLE

18-OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/

16 - RAILWAY VEHICLE

17 - ANIMAL - FARM

18-ANIMAL - DEER

19-ANIMAL - OTHER

20 - MOTOR VEHICLE IN

21 - PARKED MOTOR VEHICLE

TRANSPORT

45 - EMBANKMENT

49-FIRE HYDRANT

43-CURB

44 - DITCH

46-FENCE

48-TREE

47 - MAILBOX

23 - OPENING DOOR INTO SPILLING 99-OTHER IMPROPER ACTION 20 - IMPROPER CROSSING

OWNER PHONE: INCLUDE AREA CODE (SAME AS Redacted per ORC 149.43(A

22 - WORK ZONE MAINTENANCE

22 - NOT DISCERNIBLE

ROADWAY

EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGOOR ANYTHING SET IN MOTION BY A MOTOR VEHICLE

24 - OTHER MOVABLE OBJECT

50 - WORK ZONE MAINTENANCE EQUIPMENT 51-WALL 52 - BUILDING 53-TUNNEL 54 - OTHER FIXED OR JECT

99-OTHER/UNKNOWN

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2 - FAILURE TO YIELD

3 - RAN RED LIGHT

4 - RAN STOP SIGN

6-IMPROPERTURN

2 - FIRE/EXPLOSION

5 - CARGO / EQUIPMENT

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

26-BRIDGE OVERHEAD

27 - BRIDGE PIER ORABUTMENT

FIRST HARMFUL EVENT

STRUCTURE

28-BRIDGE PARAPET

30 - GUARDRAIL FACE

29-BRIDGE RAIL

LOSS OR SHIFT

3 - IMMERSION

2 0 1 - OVERTURNIROLLOVER

CONTRIBUTING 5 - UNSAFE SPEED

SEQUENCE OF EVENTS

0 8 4 - JACKKNIFE

4 0

0 8

8 - FOLLOWING TOO CLOSE / ACDA

9-IMPROPER LANE CHANGE

10-IMPROPER PASSING

12 - IMPROPER BACKING

6 - EQUIPMENT FAILURE

7 - SEPARATION OF UNITS

8 - RAN OFF ROAD RIGHT

9 - RAN OFF ROAD LEFT

10 - CROSS MEDIAN

31 - GUARDRAIL END

32 - PORTABLE BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

BARRIER

33 - MEDIAN CABLE BARRIER

36 - MEDIAN OTHER BARRIER

11 - DROVE OFF ROAD

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OF DIADET SAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER							
SAFETY - MERVI	ICE - PROTECTION	010K121 / 140) -	1010	K12				2 0	2 4 - 0 0	0.0.0	2,3	6 ₁ 2 ₁		
UNIT#	NAME: LAST	, FIRST, MIDDLE								DATE OF BIRTH		AGE	GEND	ER	
0,1	1 DAGISTAN, MURAT						0 9 1 5 1 9 6 9 5 4 M								
ADDRESS: STREET, CITY, STATE, ZIP 1442 LOOP RD, Kent, OH 44240								Redacted per ORC 149.43(A)(1)							
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		- DOT-Co	SEATING POSITIO	ON AIR BAG U	SAGE EJECT	ION TRAPP	PED	
<u> 5</u>	BY							USED 0 4	MC HE	LMET 0 1	11	_1	11		
OL STATE		LICENSE NUMBER TED PER ORC 450	1:1-12	OFFENS	SE CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITATI	ON NUMBE	R		
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	ALC	OHOL / DRUG SUSPI	ECTED	CONDITION	STATUS T	YPE VALUE		DRUG TES	T(S) SULT SELECTUP	DTOA	
4	SELECTOFIUZ		BY	1	=	LCOHOL MAR	RIJUANA	4		1	1	1	OLI SELECTOR	104	
4			ے اِنت	1	□ ∘	THER DRUG		1		<u> </u>		1	البالبال		
UNIT #		FIRST, MIDDLE	MOD	CAN						DATE OF BIRTH	0 4	AGE	GEND	ER	
0,2	STREET, CITY, S	RUM, HANNAH,	MUK	GAN					75	1 8 2 0 PHONE - INCLUDE AREA		19	_ _r _		
=		WEST RD ,JACK	SON (OH 45	640					acted per O		9 43(4)(1)		
INJURIES		EMS AGENCY (NAME)	30N,			MEDICAL FACILITY	NAME CITY	SAFFTY FAILIPMENT		SEATING POSITIO			/	PEN	
	TAKEN BY						CHAMIE, CLITZ	USED 0 4	MC HE	MPLIANT	1		11		
OL STATE		LICENSE NUMBER	1.1 12	OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	RIPTION		CITATION NUMBER					
OH	REDACTED PER ORC 4501:1-12								Maximum Speed Limits			27174			
OL CLASS	SELECT UP TO 2			VER TRACTED	_	COHOL / DRUG SUSPI	ECTED RIJUANA	CONDITION	STATUS T	YPE VALUE		TYPE RES	SULT SELECTUP	PT04	
. 4		1	,	1	=	THER DRUG	VIDO ANA	1 .	1 1	1	1	1		- 1	
UNIT#	NAME: LAST	, FIRST, MIDDLE								DATE OF BIRTH		AGE	GEND	ER	
									1 1	1 1 1 1	1 1	11-1-1	-11	1	
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE								
IOI										1 1 1	1 1				
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED1	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	SEATING POSITIO	ON AIR BAG L	SAGE EJECT	ION TRAPP	PED	
BY BY			USED				MC HELMET				ے ا				
OL STATE	OL STATE OPERATOR LICENSE NUMBER			OFFENSE CHARGED LOCAL OFFENSE DES				RIPTION			TATION NUMBER				
		÷													
OL CLASS	SELECT UP TO 2			VER TRACTED		COHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE		TYPE RES		P104	
	1 11			- 1	=	THER DRUG	WO AIRA		l				1 1 1	-1	
INJU	RIES	SEATING POSITION	A	IR BAG		OL CLAS	S	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST :	TATUS		
1 - FATAL	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERATION		- NONE GIVEN			
3 - SUSPECTED		2 - FRONT - MIDDLE	3- DEPLOYE			3 - CLASS C		3-CORRECTIVE LE		ELECTRONIC COMMU	NICATION :	-TEST GIVEN	CONTAMINATI	ED	
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		ED BOTH FRO	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DIALING)		SAMPLE / UI - TEST GIVEN		own	
5 - NO APPAREN	I INJURY	(M0TORCYCLE PASSENGER)	5-NOTAPP 9-DEPLOYI	LICABLE MENT UNKNO	WN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HANDS-F COMMUNICATION DEV	REE	-TEST GIVEN			
INJURED 1 - NOT TRANSP	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	D TDAILED	4 - TALKING ON HAND-HE COMMUNICATION DEV	/ICE	UNKNOWN			
/TREATED AT	and the second second	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		ECTION		OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WIT	HAN	- NONE	TEST TYPI	Ε	
2 - EMS 3 - POLICE		8-THIRD - MIDDLE	1 - NOTEJE	CTED Ly ejected		H - HAZMAT M - MOTORCYCLE		9-LEARNER'S PER	MIT	6 - PASSENGER		- BL00D			
9 - OTHER / UNK	(NOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS		7 - OTHER DISTRACTION INSIDE THE VEHICLE		- URINE - BREATH			
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY		8 - OTHER DISTRACTION		- OTHER			
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		R-THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		7 THE VEHICLE 9 - OTHER / UNKNOWN		DRUG TE	STTYPE		
2 - SHOULDER B 3 - LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS		13 - MECHANICAL DI (SPECIAL BRAK	ES, HAND	CONDITION		- NONE			
4 - SHOULDER & LAP BELT USED		12 - PASSENGER IN UNENCLOSED CARGO AREA				T - DOUBLE & TRIPLE TRAILERS CONTROLS, C X - TANKER / HAZMAT ADAPTIVE D					2 - BLOOD 3 - URINE				
5 - CHILD RESTRAINT SYSTEM – FORWARD FACING		13 - TRAILING UNIT	NON-MECHANICAL MEANS			14 - MILITAI				2 - PHYSICAL IMPAIRME	NT 4-OTHER				
	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	I DOMITH C.	3 - EMOTIONAL (E.G., DEPR ANGRY, DISTURBED)		RUG TEST	RESULT(S)	
REAR FACING 7 - BOOSTER SEAT		15 - NON-MOTORIST	- NON-MOTORIST			M - MALE 16 - OUTSIDE MII II - OTHER / IINKNOWN 17 - PROSTHETIC						1 - AMPHETAMINES			
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC ALL 18 - OTHER		FATIGUED, ETC.		- BARBITURA - BENZODIAZI			
9 - PROTECTIVE (ELBOW, KNE										6 - UNDER THE INFLUENCE OF MEDICATIONS / DR	UGS 4	- CANNABINO	.DS		
10 - REFLECTIVE 11 - LIGHTING - F										/ALCOHOL 9-OTHER/UNKNOWN		- COCAINE - OPIATES / OF	PIOIDS		
/ BICYCLE ON	NLY											-OTHER			
99 - OTHER / UNK	(NOWN										8	- NEGATIVE R	ESULTS		

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Ū	OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER						
_								2,0,2,4,-,0,0,0,2,3,6,2,						
	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
	02 FRANCE, JULIA, ROSE								0,3,3,0,2,0,4,1,9,F					
PAN	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA GODE						
OCCUPANT	242 FLORENCE AVE ,JACKSON ,OH 45640							Redacted per ORC 149.43(A)(1)						
٥	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	5	BY					0 4	☐MC HELMET	0 3	1	1_			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
								سسا		نـــا				
PAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN.														
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	لــــا	BY					L	MC HELMET			لــــا	ــــا ا		
	UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE						
j														
ANT	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
0CCUPANT														
9	INJURIES		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	1 1	TAKEN BY					USED	MC HELMET	1 1 1	ı	1			
i	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
									T T T		E E 3			
ANT	ADDRESS:	DDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE						
OCCUPANT														
8	INJURIES		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		TAKEN BY					USED	MC HELMET			d	de s		
		INJL	IRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE			
	1 - FATAL 1 - N						T - LEFT SIDE							
	2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 3 - LAP				LE OCCUPANT (MOTORCYCLE DRI			ER)	YED FRONT					
					ER BELT ONLY USED		IT - MIDDLE IT - RIGHT SIDE		3 - DEPLO	3 - DEPLOYED SIDE				
							ND - LEFT SIDI		4 - DEPLO					
	5 - NO APPARENT INJURY				ER & LAP BELT USED		ORCYCLE PASS ND – MIDDLE	ENGER)						
							ND - RIGHT SIE	E	5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN					
					6 - CHILD RESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE									
	/TREATED AT SCENE			REAR FA			ORCYCLE SIDE D – MIDDLE	CARI	EJECTION					
	2 - EMS 3 - POLICE			7 - BOOSTER 8 - HELMET			D - RIGHT SIDE	1 - NOT EJECTED 2 - PARTIALLY EJECTED						
	9 - OTHER / UNKNOWN				TVE PADS USED		PER SECTION (UF I RUCK CAB			LU			
ı	(ELB)				KNEES, ETC.)	ENGER IN OTH O AREA (NON-TE	LIK LIVOLOGED							
	GENDER 10- REFLEC				TVE CLOTHING	(P)								
	M - MALE 11- LIGHTIN / BICYCL			G - PEDESTRIAN	ENCLOSED TRAPPED 1 - NOTTRAPPED									
	U - OTHER / UNKNOWN				/ UNIXNOWN 13 - TRAILING UNIT					TED BY MECHANICAL				
				99- OTHER?	ONKNOWN		NG ON VEHICLE TRAILING UNIT)	EXTERIOR	MEANS					
							MOTORIST			BY NON-ME	CHANIC	AL		
						99 - OTHE	R / UNKNOWN		MEANS					
S	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS										الت				
WIT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
			72						- AF F775''		10-	Lague		
SS	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
×		. Street, of the						, , , , ,	I I	1 1	1 21	31 3		
8	NAMELLAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH	' 	AGE	GENDER		
SS	NAME. CAS										p p 0	112		
WITNESS		STREET, CITY,							1 1 1	DE L		لـــــا		

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