OF PUBLIC SAPETHAN I RAFFIC	GRASH KEI	ORT *DENOTE	S MANDATORY FIE	LD FOR SUPPLEM	MENT REPORT		OCAL REPORT NU	MBER*	
PHOTOS TAKEN OH-2	OH-3 LOCA	LINFORMATION				2,0,2,0,	. 0,0,0,	1,9,2,1,5,	
SECONDARY CRASH		******	NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR			
PRIVATI	E PROPERTY Cit	y of Kent Poli	ice	0	6,7,0,3	2 1-SOLVED 2-UNSOLVED	0,2	0 1 98 - ANIMAL 99 - UNKNOWN	
_ 1-CITY	OCATION: CITY, VILL	AGE, TOWNSHIP*				CRASH DATE /T		CRASH SEVERITY 1 - FATAL	
3-TUWNSHIP	Kent				The state of	1,1,2,0,2,0,2,0	1717 5	2 - SERIOUS INJURY	
ROUTE TYPE ROUTE NUMBER PREFI	2-SOUTH	TION ROAD NAME			ROAD TYPE	LATITUDE DES	THAL DEGREES	SUSPECTED	
	4 - AA E 2 1	IRCHILD			$\mathbf{A} \mathbf{V}$	41,166	2 6 9	3 - MINOR INJURY SUSPECTED	
ROUTE TYPE ROUTE NUMBER PREFIT	2-SOUTH REFE	RENCE ROAD NAME (RO	DAD, MILEPOST, H	OUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE	
ROUTE TYPE ROUTE NUMBER PREFI	3-EAST NE	WCOMER			RD	-81,392	5,1,6,	5 - PROPERTY DAMAGE ONLY	
REFERENCE POINT DIRECTIO	CE	ROUTE TYPE		ROAD TYPE			NTERSECTION RE		
	OUTH	RSTATE ROUTE(TP) RAL US ROUTE	AL - ALLEY AV - AVENUE		RD - ROAD SQ - SQUARE	X WITHIN INTER	RSECTION OR ON AP	•	
	AST SR-STAT	Market Inches	BL - BOULEVARD		ST - STREET	WITHIN INTER	RCHANGE AREA	NUMBER OF APPROACHES	
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEA	E CR-NUM	BERED COUNTY ROUTE	CR - CIRCLE CT - COURT		TE - TERRACE TL - TRAIL	E AMONTONE IN	ROADWAY	ucosanii kus	
1-1	MILES TR-NUM	BERED TOWNSHIP	DR - DRIVE		WA - WAY	ROADWAY DIVIDED			
2 0 2 3-4			HE - HEIGHTS	PL - PLACE		MONDWAY BIV	IDED		
2 - ON SHOULDER 3 - 1 N MEDIAN 3 - 1 N MEDIAN 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 3	RMFUL EVENT) - CROSSOVER .O-DRIVEWAY/ALLE .1-RAILWAY GRADE .2-SHARED USE PA' TRAILS .3-BIKE LANE .4-TOLL BOOTH 19-OTHER / UNKNOV	Y ACCESS CROSSING THS OR 2-3-	NOT COLLISION 4 BETWEEN TWO MOTOR VEHICLES IN TRANSPORT REAR-END	H COLLISION/IMP/ 1 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAN 3 - SIDESWIPE, OPP 9 - OTHER / UNKNO	AE DIRECTION POSITE DIRECTION	DIRECTION OF TRAVEI 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	1 - DIVII (< 4 2 - DIVII (≥ 4 3 - DIVII 4 - DIVII	EDIANTYPE DED FLUSH MEDIAN FEET) DED FLUSH MEDIAN FEET) DED, DEPRESSED MEDIAN DED, RAISED MEDIAN 'TYPE) ER/UNKNOWN	
WORK ZONE RELATED	Wo	RK ZONE TYPE	LOCATIO	N OF CRASH IN W	ORK ZONE	CONTOUR	CONDITIONS	SURFACE	
WORKERS PRESENT		CLOSURE SHIFT/CROSSOVER	1.	BEFORE THE 1ST WARNING SIGN	WORK ZONE	1	1 1	2	
LAW ENFORCEMENT PRESENT	3-WORK	ON SHOULDER		- ADVANCE WARNI		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE	
		EDIAN RMITTENT OR MOVING W		-TRANSITION ARE - ACTIVITY AREA	Α	2-STRAIGHT GRADE	2-WET	2 - BLACKTOP, BITUMINOUS,	
ACTIVE SCHOOL ZONE	5 - OTHE			-TERMINATION AF	REA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT	
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWA 4 - DARK - ROADWAY NOT LIG 5 - DARK - UNKNOWN ROADW 9 - OTHER / UNKNOWN	HTED	1-CLEAR 2-CLOUDY	NOKE 8-BLOWING 9-FREEZIN	CROSSWINDS G SAND, SOIL, DIR NG RAIN OR FREEZ / UNKNOWN		9-OTHER/UNKNOWN	5 - SAND, MUD, DIR OIL, GRAVEL 6 - WATER (STANDI MOVING) 7 - SLUSH 9 - OTHER/UNKNOW	STONE NG, 5 - DIRT 9 - OTHER/UNKNOW!	
NARRATIVE								Indicate the north	
UNIT1 & 2 WERE W	/R ON FAII	CHILD AVE	ΔT				<	direction with an "N" on the	
NEWCOMER RD. U								compass diagram.	
TRAFFIC. UNIT 2 F									
TRAFFIC AND STR			JIT 1				Lenn.		
UNIT 2 THEN LEFT				אמד דם	SCALE				
NO KNOWN INJUR				2		. L.7 Ng.	50.		
DAMAGE TO UNIT		WARD.							
TRAFFIC CRASH.	1. 01111 2	CAUSED III			29.	-P+	Unit	Unit 2	
TRAFFIC CRASH.				177	= 1			=45	
A WITNESS BROWN		SIRLE SUSPE	ECT						
A WITNESS PRUVII	DED A POS								
A WITNESS PROVID VEHICLE PLATE N									
VEHICLE PLATE N	UMBER T		ΔD	RIVAL DATE / TIM	E	SCENE CLEADER	ATE / TIME	DEDOOT TAVEN DV	
VEHICLE PLATE N	UMBER T	HAT WAS		RIVAL DATE / TIM		SCENE CLEARED		REPORT TAKEN BY POLICE AGENCY	
VEHICLE PLATE N CRASH REPORTED DATE / TIME 1, 1, 2, 0, 2, 0, 2, 0, /, 1, 7, 1 TOTAL TIME OTHER	TUMBER T DISP. 1, 1, 1, 2, 0, 2 TOTAL	HAT WAS ATCH DATE / TIME 2,0,2,0,/,1,7,1 OFFICER'S NAME*	8,1,1,2,0	2,0,2,0,/,1	1 7 3 1 1	1,1,2,0,2,0,2,0			
VEHICLE PLATE N CRASH REPORTED DATE / TIME 1, 1, 2, 0, 2, 0, 2, 0, /, 1, 7, 1	UMBER T	HAT WAS ATCH DATE / TIME 2,0,2,0,/,1,7,1 OFFICER'S NAME* Fuller, Jame	8,1,1,2,0	2,0,2,0,/,1	1,7,3,1,1 CHECKED BY OFF Gaydosh	1,1,2,0,2,0,2,0	0,/,1,7,4,7,	POLICE AGENCY	

LOCAL REPORT NUMBER

1111770 11						2,0,2,0,-,0	0 0 1 9 2 1 5			
UNIT #	ROSZKOWS	KI, JON, MI	CHAEL	OMNED PRONE		D	DAMAGE AMAGE SCALE			
OWNER A	DDRESS: STREET, CITY, STAT ADALINE DR	E, ZIP (X SAME AS DRIVER)	4224			2 1-NONE	3- FUNCTIONAL DAMAGE			
COMMER	CIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP	R PHONE: INCLUDE AREA CODE	2 - MINUR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN						
I D CTAYE	LINCHES NAME OF ASSET						MAGED AREA(S)			
O H	HYA8848	2 HGF B2	E IDENTIFICATION # F, 5, 4, D H5, 2, 5	8,9,2, VEHICLE YE	3 Honda	INDICA 12	TE ALL THAT APPLY			
X INSURA	INSURANCE COMI		INSURANCE POLICY # 4574546	COLOR BLU	CIVIC MODEL	10 12 1	" " " " " " " " " " " " " " " " " " " "			
COMME	TYPE OF USE	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPAN		9 9 3				
			EHICLE WEIGHT GVWR/GCWR		DUS MATERIAL CLASS # PLACARD ID #	-	, - 10; - J			
DEVICE EQUIP	E HIT/SKIP UNI	0,1	1 - ≤10K LBS 2 - 10,001 - 26K LB i 3 - >26K LBS	1 M BELEVEED	CLASS # PERCARDID#	70	8 7 8 8			
0.4	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED	12-GOLF CART 13-SNOWMOBILE	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	1			
UNIT TYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24-WHEELCHAIR (ANY TYPE) 25-OTHER NON-MOTORIST	10/	11 1 2 2			
	- 4 - PICK UP - 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15-SEMI-TRACTOR 16-FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - TRAIN	•	9 3			
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	7.	74			
	# OF TRAILING UNITS					11 12 7	6 5 11 12 1			
> =	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	9 - UNKNOWN	10 12 2	10 11 2			
2	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS	A DARTIN AUTOMATATION	5 - FULL AUTOMATION		9 3	9 9 3			
	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER		8 4			
0,1,	3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY B - BUS - SHUTTLE	12 - MILITARY 13 - POLICE	17 - MOWING 18 - SNOW REMOVAL	99-OTHER/UNKNOWN	8				
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER	14-PUBLIC UTILITY 19-TOWING			8 5	6 5			
0.4	1 - NO CARGO BODY TYPE		15 - CONSTRUCTION EQUIPMENT 5 - INTERMODAL CONTAINER	B - POLE	12 CONCRETE MINES		12 12 12			
0,1	/ NOT APPLICABLE 2 - BUS	MOTOR VEHICLE	CHASSIS	9 - CARGOTANIC	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12				
BODY	2 - 802	4 - LOGGING	6 - CARGO VA-VENCLOSED BOX 7 - Grain/Chips/Gravel	10-FLAT BED 11-DUMP	14 - GARBAGE/REFUSE	9 P 9 9	3 9 7 3 9 🚳 3			
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLIGKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	0	0			
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10 - DISABLED FROM PRIOR	TO-OTHER / UNKNOWA	6				
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		- NO DAMAGE [
	CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	□-TOP (13)				
LUCATION	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		-ALL AREAS [15]			
AT IMPACT	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	TRAILS 13 - NEGOTIATING A CURVE	18-APPROACHING	LI- UNIT	NOT AT SCENE [16]			
4	2 - NON-COLLISION	2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	INITIAL 0 - NO DAMAGE	POINT OF CONTACT 14 - UNDERCARRIAGE			
ACTION	4 - STRUCK PRE-CRASH	3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10-PARKED	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	0, 6, 1-12 - REFERT	O UNIT 15-VEHICLE NOT AT SCENE			
	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED IN TRAFFIC	JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	DIAGRAM 13 - TOP	99 - UNKNOWN			
	9 - OTHER / UNKNOWN	6 - MAKING LEFTTURN	12 - DR; VERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWA		TRAFFIC			
		7 - LEFT OF CENTER	13 - IMPROPER START FROM A	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACD 9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
لتات	4 - RAN STOP SIGN 5 - UNSAFE SPEED	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/ SPILLING	ROADWAY	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
	6-IMPROPER TURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IN PROPER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS					ON ROAD	1 - NOT INVOLVED			
1 4 0		6 - EQUIPMENT FAILURE	EVENTS 11-CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WCRK ZONE MAINTENANCE	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
		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 / NON-	MOTORIST DIRECTION			
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19-ANIMAL - OTHER	SHIFTING CARGO CR ANYTHING SET IN MOTION		1 - NORTH 5 - VORTHEAST			
3[]	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14-PEDESTRIAN 15-PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE 24-OTHER MOVABLE CBJECT	FROM 3 TO	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST			
	SELECTION SELECT		N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE F - STRUCK	THE STATE		4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
4	/ 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	HAITY				
100	26 - BRIDGE OVERHEAD	33 - MEDIAN GABLE BARRIER	39-LIGHT/LUMINARIES SUPPORT	45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED			
	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	0 0 0	2 - CALCULATED / EDR			
6	29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	49 - TREE 49 - FIRE HYDRANT	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
1		36-MEDIAN OTHER BARRIER	42 - CULVERT			3 5				
	FIRST HARMFUL EVEN	H T20M - IMOST H	ARMEIN EVENT							

LOCAL REPORT NUMBER 2,0,2,0,-,0,0,1,9,2,1,5, OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: (102-02) AREA CODE (SAME AS DRIVER) UNKNOWN DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP I SAME AS DRIVER 1 - NONE 3 - FUNCTIONAL DAMAGE UNKNOWN J 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) LP STATE LICENSE PLATE # INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE INSURANCE COMPANY **INSURANCE POLICY #** INSURANCE COLOR VEHICLE MODEL VERIFIED RED TYPE OF USE TOWED BY: COMPANY NAME US DOT # COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL CLASS # PLACARD ID # INTERLOCK 1 - ≤10K LBS. DEVICE X HIT/SKIP UNIT 2 - 10.001 - 26K 195 0,1 PLACARD 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 0 3 - SPORT UTILITY VEHICLE 2 - PASSENGER VAN (MINIVAN) B - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24-WHEEL CHAIR (ANY TYPE) 9 - AUTOCYCLE 14-SINGLE UNITTRUCK 20-OTHERVEHICLE 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 OF 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) # OFTRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTGMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 4 - HISH AUTOMATION 1 -YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS 1 - NONE 6 - BUS - CHARTER/TOUR 11 -FIRE 16-FARM 21 - MAIL CARRIER 9 9 2 - TAXI 7 - BUS - INTERCITY 12-MILITARY 17 - MOW/NG 99 - OTHER LINKNOWS SPECIAL 3 - ELECTRONIC RICE 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 12 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 9,9 / NOT APPLICABLE **VOTOR VEHICLE** CHASSIS 9 - CARGOTANK 13 - AUTO TRANSPORTER ini s 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE * 7 - GRAIN/CHIPS/GRAVET TYPE 11 - DUMP 99-OT-ER LHKNOWN 00 9,9 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99-OTHER/UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING B - TRAILER FOUIPMENT 10-DISABLED FROM PRIDE 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 **CRESSWALK** 4 - VIDSLOCK - MARKED AT INCIDENT SCENE 7 - SHOULDER LEGANSIDE 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 CROSS WALK 5 - TRAVELLANE - OTHER Location TRATES X - UNIT NOT AT SCENE (161 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING 2 - NON-COLLISION 2 - BACKING B - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING OR LEAVING VEHICLE INITIAL POINT OF CONTACT 3 O 1 3 - CHANGING LANES SPECIFIED LOCATION 0 - NO DAMAGE 14 - UNDERCARRIAGE 3-STRIKING 19-STANDING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4. STRUCK 1,2, PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING. 10-PARKED 20 - OTHER NON-WOTORIST 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURY JOGGING, PLAYING 21 - STANDING OUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 16 - WORKING 13-TOP & STRUCK DISABLED VEHICLE IN TRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 9-CTHER/UNKNOWN 99 - OTHER / HINKNOWS 12 - DRIVERLESS 1-NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION CESTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL 2 - FAILURE TO YIELD PARKED POSITION 8-FOLLOWING TOG CLOSE / ACDA 13-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 0 8 3 - RAN RED LIGHT 14-STOPPED OR PARKED EQUIPMENT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - TW0-WAY ILLEGALLY 2 - SIGNAL 5 - YIELD SIGN 19-LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID 3 - FLASHER 6 - NO CONTROL SPILLING 99 - OTHER IMPROPER ACTION 11 - DROVE OFF BOAD 16 - WRONG WAY 20 - IMPROPER CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD SEQUENCE OF EVENTS 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 2 **EVENTS** 1 2 0 1 - OVERTURN/ROLLCVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 3 - INVOLVED-PASSIVE CROSSING 22 - WCRK ZONE MAINTENANCE OPPOSITE DIRECTION OF 2 - FIRE/EXP_OSION 7 - SEPARATION OF UNITS EQUIPMENT 17 - ANIMAL - FARM TRAVEL UNIT / NON-MOTORIST DIRECTION 3 - IMMERSION 23-STRUCK BY FALLING, 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEFR 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR ANYTHING SET IN MOTION 19-ANIMAL - OTHER 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 1 - NORTH 5 - NORTHEAST 13-OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10-CROSS MEDIAN 2 - SOUTH 6 - NORTHWEST BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM | 3 | TO | 4 LOSS OR SHIFT 3 - FAST 7 - SOUTHEAST 24 - OTHER MOVABLE CRUECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 8 - SOUTHWEST 4 - WEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER/UNKNOWN 25-IMPACT ATTENUATOR 31 - GUARDRA!L END 37 - TRAFFIC SIGN POST 43-CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44 - DITCH **EQUIPMENT** UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45-EVBANKMENT 51 - WALL STRUCTURE 34 - MEDIAN GUARDRAIL SUPPORT 1 - STATED / ESTIMATED SPEED 52-BUILDING 46 - FENCE 27 - BRIDGE PIER OR ABUTMENT BARRIER 40 - UTILITY POLE 53-TUNNEL 2 - SALCULATED / EDR 47 - MAIL BOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED CRUECT 48 - TREE 29 - BRIDGE RAIL BARRIER 3 - UNDETERMINED POSTED SPEED OR SUPPORT

99-OTHER UNKNOWN

5

, 3

49-FIRE HYDRANT

30 - GUARDRAIL FACE

FIRST HARMFUL EVENT

36 - MEDIAN OTHER BARRIER

42-CULVERT

MOST HARMFUL EVENT

DHIO DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
						2,0,2,0,-,0,0,0,1,9,2,1,5,								
	INIT * NAME: LAST, FIRST, MIDDLE O 1 ROSZKOWSKI, MAX, MICHAEL							DATE OF BIRTH AGE GENDER						
	DDRESS: STREET, CITY, STATE, ZIP							0,2,1,1,2,0,0,3,1,7, M						
=		E DR ,Stow ,OH	44224						CONTACT PH	IONE - INCLUDE AREA	COOE			
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKENTO	: MEDICAL FACILITY	NAME, CITY		DOT-Comp	SEATING POSITIO	N AIR BAG USAGE	EJECTION TRAP	PPED	
5	BY L			191				USED 0 4	MC HELMET 0, 1 1 1					
OL STATE	OPERATOR L	OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL OFFENSE DESCRIPTION OF CODE						RIPTION		CITATION N	UMBER			
O, H,	ENDORSEMENT	RESTRICTION SELECT	UPTO3 DRI	VED 1	41.0	01101 1 00110 01100			N COL	110) 7567				
OL OLKSS	SELECT UP TO 2	RESTRICTION SELECT		TRACTED		OHOL / DRUG SUSPE LCOHOL MAR		CONDITION	STATUS TYPE	HOL TEST E VALUE	STATUS TYPE	G TEST(S) RESULT SELECT #	IPTO 4	
_4				_1		THER DRUG		1	1 1		1 1			
UNIT #	NAME: LAST,				6)6					DATE OF BIRTH		AGE GENE	DER	
0,2	UNKN		-		_					1.1.1.				
OKI		A1.C, 2.11							CONTACT PH	IONE - INCLUDE AREA O	CODE			
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	TAKEN TO	: MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITIO	N AIR BAG USAGE	EJECTION TRAPE	PED	
5	BY L							USED 9 9	MC HELM	LIANT	9	1 1		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION N	UMBER		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	Inna Inna	urn I					11001	101 7707				
OL OLASS	SELECT UP TO 2	RESIRICITOR SELECT		TRACTED		DHOL / DRUG SUSPE LCOHOL MAR	LUANA	CONDITION	STATUS TYPE	HOL TEST VALUE	STATUS TYPE	G TEST(S) RESULT SELECT UI	JP TO 4	
				9	0	THER DRUG		9	1 1		1 1		0	
UNIT#	NAME: LAST,	FIRST, MIDDLE								DATE OF BIRTH		AGE GEND	DER	
ADDRESS.	STREET, CITY, ST	TATE TIP			•									
ADDICESS.	. 31 KLL1, 6111, 31	A1 C, 21F							CONTACT PH	ONE - INCLUDE AREA C	ODE			
ADDRESS:	INJURED	EMS AGENCY (NAME)		INJUREDT	AKENTO	: MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITIO	N AIR BAG USAGE	EJECTION TRAPP		
	TAKEN BY							USED	DOT-COMPL	ANI	AIN BAG USAGE	EJECTION TRAPP	FED	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION N	UMBER		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	unzaz Inna	, T					ALGOV	101 7507				
OL CLASS	SELECT UP 102	RESIRICTION SELECT		TRACTED		CHOL / DRUG SUSPE	CTED LJUANA	CONDITION	STATUS TYPE	VALUE	STATUS TYPE	RESULT SELECT UP	PIDS	
					0.	THER DRUG								
1-FATAL	JRIES	1 FRONT LEFT SIDE	1 - NOT DEP	IR BAG LOYED	21,15	OL CLASS 1-CLASS A		OL RESTRIC	Contract of the Party	ORIVER DISTRACT	The second section of the second	EST STATUS		
2 - SUSPECTED		(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYE	D FRONT		2 - CLASS B		2 CDL INTRASTATE		- MANUALLY OPERATING	GAN 2 TEST	E GIVEN T refused		
4 - POSSIBLE IN		3 FRONT RIGHT SIDE	3 - DEPLOYE 4 - DEPLOYE	D SIDE D Both From	NT / SIDE	3 - CLASS C 4 - REGULAR CLASS		3 CORRECTIVE LEI	NSES	DEVICE (TEXTING TYP	11ate 3-1E31	TGIVEN, CONTAMINATI PLE / UNUSABLE	TED .	
5 - NO APPAREN	T INJURY	4 SECOND LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP			(OHIO = D) 5 - MAC MOPED ONLY		5 EXCEPT CLASS A	THE CONTRACTOR AND ADDRESS.	DIALING) -TALKING ON HANDS-FR	EE 4 TEST	GIVEN, RESULTS KNO	own	
INJURED	A STATE OF THE STA	5 - SECOND MIDDLE 6 - SECOND RIGHT SIDE	9 - DEPLOYA	AENT UNKNO	WN	6 - NO VALID OL		6 EXCEPT CLASS A & CLASS B BUS	A CONTRACTOR OF THE PARTY OF TH	COMMUNICATION DEVI	TIME	rgiven results Nown		
1 - NOT TR INSPI TREATED AT		7-THIRD-LEFT SIDE	EJ	ECTION		OL ENDORSEM	ENT	7 EXCEPT TRACTO		COMMUNICATION DEVI		OHOL TEST TYPI	E.	
2-EMS 3-POLICE		8 THIRD MIDDLE	1 - NOT EJEC 2 - PARTIALI			H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVICE	1 NONE 2 BLOO			
9 OTHER/UNK	NOAN	9 THIRD - RIGHT SIDE	3-TOTALLY	ALC: NO.		M - MOTORCYCLE P - PASSENGER		9 LEARNER'S PERI RESTRICTIONS		- PASSENGER - OTHER DISTRACTION	3 URIN	AND THE RESERVE OF THE PARTY.		
SAFETY E	QUIPMENT	10 SLEEPER SECTION OF TRUCK CAB	4 NOT APPI	LICABLE	N	N-TANKER		10 LIMITED TO DAY		INSIDE THE VEHICLE - OTHER DISTRACTION O	4-BREA UTSIDE 5 OTHE		Y	
1 - NONE USED	CITABLY HATE	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	The latest constraint of the	RAPPED		Q - MOTOR SCOOTER R THREE WHEEL MOT	ORCYCLE	12 - LIMITED - OTHE	R	THE VEHICLE OTHER / UNKNOWN		UG TEST TYPE		
2-SHOULDER BI 3-LAP BELT ON		(NON TRAILING UNIT BUS PICK-UP WITH CA.)	1 - NOTTRAF	A POLICE OF THE PARTY OF THE PA	7, -2	S - SCHOOL BUS	DAN SPA	13 - MECHANICAL DE (SPECIAL BRAKE	S, HAND	La State La Co	1 NONE	CONTRACTOR AND ADDRESS OF THE	(150)	
4 - SHOULDER &		12 PASSENGER IN UNENCLOSED CARGO AREA		ICAL MEANS		T DOUBLE & TRIPLESTI X-JANKER HAZMAT	MAILEKS	CONTROLS, OR OT ADAPTIVE DEVICE	HER	CONDITION - APPARENTLY NORMAL	2 - BL00 3 - URIN	MEDICAL PROPERTY AND ADDRESS.		
5 - CHILD RESTR FORWARD FAI	CING	13 - TRAILING UNIT		HANICAL ME	ANS	GENDER	200	14 - MILITARY VEHIC	LES ONLY 2	PHYSICAL IMPAIRMENT				
6-CHILD RESTR REAR FACING		14 RIDING ON VEHICLE EXTERIOR (N. N-TRAILING UNIT)				F FEMALE		AIR BRAKES		- EMOTIONAL (. G. DEPRE Angry Distorce)	DRUG	TEST RESULT(S	S)	
7 - BOOSTER SEA		15 - NON-MOTORIST 99 - OTHER/UNKNOWN				M - MALE U - OTHER / UNKNOWN		16-OUTSIDE MIRROR 17-PROSTHETIC AID		ILLNESS FELL ASLEEP, FAINTED		HETAMINES		
8 - HELMET USE 9 - PROTECTIVE	PADS USED						7.0	18 - OTHER		FAT G ED ETC.	3 - REN7	BITURATES Zodi <u>a</u> zepines		
(ELBOW KNE 10 - REFLECTIVE									6-	UNDER THE INFLUENCE OF MEDICATIONS / DRUG	S 4-CANN	VABINOIDS		
11 - LIGHTING - P	EDESTRIAN								9-	ALCOHOL OTHER UNKNOWN	5-COCA 6-OPIA	INE Tes/opioids		
/ BICYCLE ON 99 - OTHER / UNKI											7 QTHE	R		
THE PARTY OF SALES	AND THE PARTY OF		Tell hand	The last		CC.	A POLICE OF		No. of the last		8 NEGA	ATTVE RESULTS	5355	

OF Publ	SONO BRANTHEN OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER						
		200					2,0,2,0	- 0 0	0,1,9	2,1	5		
UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER					
ADDRESS: STREET, CITY, STATE, ZIP								- INCLUDE AREA CO	DE L				
ADDRESS													
INJURIES		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACE	LITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR RAG ISAGE	EJECTION	TDADDED		
	BY			The state of		USED	DOT-COMPLIANT MC HELMET				TRACT CD		
UNIT#	NAME: LAS	T, FIRST, MIDDLF		-			DAT	E OF BIRTH		AGE	GENDER		
								COI DIKIII		AGE	GENDER		
ADDRESS	: STREET, CITY	STATE, 71P					CONTACT PHONE	- INCLUDE AREA CO	OF				
ADDRESS													
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACI	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT 0	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	BY					USED	DOT-COMPLIANT MC HELMET						
UNIT#	NAME: LAS	T, FIRST, MIDDLE			- Made and		DAT	E OF BIRTH		AGE	GENDER		
ADDRESS	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE .				
INJURIES	INJURED	EMS ABENCY (NAME)		INJURED TAKEN TO MEDICAL FACI	LETY (NAME, CITY)	SAFETY EQUIPMENT	- DOT Communication	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	ВҮ					USED	DOT-COMPLIANT MC HELMET						
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
ADDRESS	: STREET, CITY	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
ADDRESS								1 1	1 1				
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO MEDICAL FACI	LITY (NAME, CITY) SAFETY EQUIPMENT		DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	BY						MC HELMET						
	V-4007110750	JRIES		Y EQUIPMENT USED		SEATING POS	ITION	That say	AIR BAG U	AGE			
1 - FATA		DIOLE IN HIDV	1 - NONE US VEHICLE	ED - COCCUPANT	The second secon	IT – LEFT SIDE ORCYCLE DRIV	FR)	1 - NOT DE	PLOYED				
		RIOUS INJURY		ER BELT ONLY USED		IT - MIDDLE	2 - DEPLOYED FRONT						
RECEIPED IN	SIBLE INJU		3 - LAP BEL	T ONLY USED		IT - RIGHT SIDE		3 - DEPLOY					
	PPARENT		4 - SHOULD	ER & LAP BELT USED		ND – LEFT SIDI ORCYCLE PASS	Charles at the Constitution of the Constitutio						
	INTURED	TAKEN BY		ESTRAINT SYSTEM - D FACING		ND - MIDDLE	5 - NOT APPLICABLE						
1 - NOT	TRANSPOR			ESTRAINT SYSTEM –		ND – RIGHT SIC D – LEFT SIDE	9 - DEPLOYMENT UNKNOWN						
	EATED AT S		REAR FA			ORCYCLE SIDE	CAR)	STATE OF THE PARTY.	EJECTIO	N			
2 EMS			7 - BOOSTER	RSEAT		D – MIDDLE D – RIGHT SIDE		1 - NOT EJ	ECTED				
3 - POL			8 - HELMET		The state of the second	PER SECTION (2 - PARTIA	LLY EJECTE	D			
9 - OTH				TIVE PADS USED KNEES, ETC.)	11 - PASS	ENGER IN OTH	ER ENCLOSED	3 - TOTALL	Y EJECTED				
	37 A	NDER		TIVE CLOTHING	BUS, P	O AREA (NON-TE PICK-UP WITH CAI	AALLING UNIT, 4 - NOT APPLICABLE						
F - FEMA				G - PEDESTRIAN	12 - PASSENGER IN UNENCLOSED CARGO AREA			THE SE	TRAPPE	D			
WIND ALEXANDS	R/UNKNO	WN	/ BICYCL		ALC: THE RESERVE AND THE PARTY OF THE PARTY	LING UNIT	1 - NOT TRAPPED						
			99 - OTHER /	UNKNUWN		NG ON VEHICLE	EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS					
5.7						TRAILING UNIT) MOTORIST		THE RESERVE	BY NON-ME	CHANICA	AL.		
						R/UNKNOWN		MEANS					
	ST, FIRST, MIDI					500	DAT	E OF BIRTH		AGE	GENDER		
		NIEL, PAUL					0,9,1,			5 4	M		
3//O	OAK D	D,Stow,,OH	14224				CONTACT PHONE	- INCLUDE AREA COI	DE				
William	ST, FIRST, MIDE		7744				L				_		
							DATE OF BIRTH AGE GENDER						
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE						
							CONTACT PHURE - INCLUDE AREA CODE						
	NAME: LAST, FIRST, MIDDLE						DAT	E OF BIRTH		AGE	GENDER		
ADDRESS							AND GENER						
ADDRESS	STREET, CITY	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
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LOCAL REPORT NUMBER

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INVESTIGATED AS BEING INCORRECT.