OHIO DEPARTMENT TRAFFIC CR	ASH RE	LOCAL REPORT NUMBER*								
	0H-3 LOC		$2 \cdot 0 \cdot 2 \cdot 2 \cdot 2 \cdot - 0 \cdot 0 \cdot 0 \cdot 0 \cdot 6 \cdot 0 \cdot 6 \cdot 2$							
SECONDARY CRASH OH-1P	J. 11 L. 1	ORTING AGENCY NAME*		NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	1			
PRIVATE PR		ty of Kent Poli	ice	<u> </u>	6   7   0   3	L12 - UNSOLVED	0_2_	U Z 99 - UNKNOWN		
1 - CITY 2 - VILLAGE TO	-	AGE, TOWNSHIP*				CRASH DATE /T	ــ ا	CRASH SEVERITY  1 - FATAL		
J-10WNSHIP		ATION ROAD NAME					2 - SERIOUS INJURY SUSPECTED			
S. S. E. S. E.	SOUTH CT	MMIT			$\mathbf{S} \cdot \mathbf{T}$		3 - MINOR INJURY			
77	- NORTH REF	ERENCE ROAD NAME (RO	USE #)	ROAD TYPE LONGITUDE DECIMAL DEGREES			SUSPECTED 4 - INJURY POSSIBLE			
E E	SOUTH 80:				8 <sub>1</sub> 1 <sub>10</sub> 3 <sub>4</sub> 2 <sub>1</sub>	0.0.0.	5 - PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION	-WEST	ROUTE TYPE	ROAD TYPE	<u> </u>	***************************************	NTERSECTION RE				
1 - INTERSECTION   FROM REFERENCE   N - NOR   S - SOU'	1	RSTATE ROUTE(TP)			RD - ROAD	WITHIN INTER	RSECTION OR ON A	PPROACH		
3 3- HOUSE # S-SOUTE - EAST W-WES	1 00-120	ERAL US ROUTE E ROUTE	AV - AVENUE BL - BOULEVARD		SQ - SQUARE ST - STREET	WITHIN INTER	RCHANGE AREA	NUMBER OF APPROACHES		
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURI	CR - NUM	BERED COUNTY ROUTE			TE - TERRACE TL - TRAIL		ROADWAY			
1 - MILE 2 - FEE	S TR-NUM	BERED TOWNSHIP	DR - DRIVE	PI - PIKE	WA - WAY	X ROADWAY DIV	IDED			
	s	·	HE - HEIGHTS	PL - PLACE		123				
LOCATION OF FIRST HARM 1 - ON ROADWAY 9 - C	FUL EVENT ROSSOVER	1	MANNER OF CRASH NOT COLLISION 4		ACT	DIRECTION OF TRAVE		MEDIAN TYPE IDED FLUSH MEDIAN		
69	RIVEWAY/ALLI	EY ACCESS 2	BETWEEN 5 TWO MOTOR 5	- BACKING		N - NORTH 4 S - SOUTH	4 (<4	4 FEET )		
4 - ON ROADSIDE 12-S	HARED USE PA	. CKOSSING	A THIO TO III	- ANGLE - SIDESWIPE, SAM	ME DIRECTION	E - EAST W - WEST	(≥4	IDED FLUSH MEDIAN 4 FEET )		
5 - ON GORE	RAILS SIKE LANE			- SIDESWIPE, OPF - OTHER / UNKNO			4 - DIV	IDED, DEPRESSED MEDIAN IDED, RAISED MEDIAN		
7 - ON IVANII	OLL BOOTH THER/UNKNO						I	(ANYTYPE) OTHER/UNKNOWN		
O O T INAM	***************************************	RK ZONE TYPE	LOCATIO	N OF CRASH IN W	ODY ZONE	CONTOUR	CONDITION	S SURFACE		
WORK ZONE RELATED	1 - LAN	E CLOSURE		BEFORE THE 1ST		1 2		2		
WORKERS PRESENT		E SHIFT/CROSSOVER K ON SHOULDER	2 -	WARNING SIGN ADVANCE WARNI	NG AREA	1 - STRAIGHT LEVEL		1 - CONCRETE		
LAW ENFORCEMENT PRESENT L	OR IV	EDIAN RMITTENT OR MOVING W		TRANSITION ARE	A	2 - STRAIGHT GRADE	2 - BLACKTOP, BITUMINOUS,			
ACTIVE SCHOOL ZONE	5 - OTH			TERMINATION A	REA	3 - CURVE LEVEL	3 - \$NOW	ASPHALT		
LIGHT CONDITION		WE	ATHER	**************		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DI	3 - BRICK/BLOCK RT, 4 - SLAG, GRAVEL,		
I - DAYLIGHT  1 2 - DAWN/DUSK	1.	1-CLEAR 2-CLOUDY	6 - SNOW	CROSSWINDS			OIL, GRAVEL 6 - WATER (STAN	STONE		
3 - DARK - LIGHTED ROADWAY	ا ا	I L Z I	MOKE 8-BLOWING		T, SNOW		9 - OTHER/UNKNOWN			
4 - DARK - ROADWAY NOT LIGHT 5 - DARK - UNKNOWN ROADWAY		4 - RAIN 5 - SLEET, HAIL		IG RAIN OR FREE: / UNKNOWN	ZING DRIZZLE					
9 - OTHER / UNKNOWN							9 - OTHER/UNKNO	, , , , , , , , , , , , , , , , , , ,		
NARRATIVE								Indicate the north		
Unit #1 was stopped in t	raffic on	E. Summit St.	•					an "N" on the compass diagram.		
facing W/B. Unit #2 w	as travel	ing directly be	hind	·			I	**************************************		
Unit #1 and failed to m	***************************************									
distance ahead and str	uck Omit	#1. Property	Damage							
only.		***************************************	······································		. Summit St	800		D		
***************************************		***************************************	***************************************				. — — —			
	***************************************									
							nit 1— — —			
A			***************************************			•				
			***************************************	-						
***************************************			entermoteristico de la constitución	-						
CRASH REPORTED DATE / TIME	DIS	PATCH DATE / TIME	AR	RIVAL DATE / TIN	ΛE.	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY		
$\begin{bmatrix} 0_{1}4_{1}1_{1}9_{1}2_{1}0_{1}2_{1}2_{1}/_{1}1_{1}4_{1}0_{1}5 \end{bmatrix}$	0.4.1.9	2.0.2.2./.1.4.1	1 0 4 1 9	12:0:2:2:/:	1.4.1.5	0.4.1.9.2.0.2	2./.1.4.4.0	POLICE AGENCY		
TOTAL TIME OTHER	TOTAL	OFFICER'S NAME*			Снескей ву OF	FICER'S NAME*	<u> </u>	MOTORIST MOTORIST		
ROADWAY CLOSED INVESTIGATION TIM	MINUTES	Ennemoser,	James 1'S BADGE NUMBE	Ennemoser, James			SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO GOPS)			
	0.6.9	,	_	K.,		HECKEO BY OFFICER'S BADGE NUMBER*  10 AN EXISTING REPORT SENT TO				

LOCAL REPORT NUMBER

2 + 0 + 2 + 2 + - + 0 + 0 + 0 + 0 + 6 + 0 + 6 + 2

UNIT#	OWNER NAME: LAST, FIRST	, MIDDLE (X) SAME AS DRIVER)		OWNER PHONE: INCLUD	E AREA CODE (X) SAME AS DRIVER)	DAMAGE					
1	VICAREL, MONICA	<u> </u>		_	İ	DAMAGE SCALE					
1	DRESS: STREET, CITY, STATE,	_			İ	2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
	AN RD ,Ravenna ,O			Canada Canada C	NONE	9 - UNKNOWN					
COMMERC	IAL CARRIER: NAME, ADDRE	:55, GITY, STATE, ZIP		COMMERCIAL CARRIER F	PHONE: INCLUDE AREA CODE	DAMAGED AREA(S)					
LD CTATE	LIGHUSE DI ATE #	VEUTOLE	IDENTIFICATION #	VENTOLE VEA	R VEHICLE MAKE	INDICATE ALL THAT APPLY					
OH	LICENSE PLATE # JDX3300		IDENTIFICATION #   B   7   H   G   4   8   7   1	VEHICLE YEA   8   3     2   0   1   7							
Ĭ			SURANCE POLICY #	COLOR	VEHICLE MODEL	11 12	11 12				
INSURAN VERIFIE	ALL STATE	<b>.</b>	2974657	BLU	SANTA FE	10	10				
	TYPE OF USE		US DOT #	TOWED BY: COMPANY		10 2	10, 2				
COMMER		IN EMERGENCY RESPONSE	1 1 6 6 1 1			9 9 3 3	9 3 3				
-			LE WEIGHT GVWR/GCWR HAZARDOUS MATERIAL  MATERIAL CLASS # PLACARD ID #				3 4 7				
INTERL	:     HIT/SKIP UNIT		1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	MATERIAL C	LASS # PLACARD ID #	8 7 6 5 4	8 7 9 5 4				
EQUIPP	PED	0 2	3 - >26K LBS.	PLACARD L		7 6 11	12 7 6				
				B-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER		12				
	2 - PASSENGER VAN (MINIVAN)			9-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10 \ 11	2				
UNIT TYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 10-moped or motorized		D-OTHER VEHICLE 1-HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - Bicycle	9 10	$\frac{1}{3}$ $\frac{2}{3}$				
	5 - CARGO VAN	BICYCLE		2 - ANIMAL WITH RIDER OR	27 -TRAIN	8					
		11 - ALL TERRAIN VEHICLE	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8 7 6 4					
01	# of TRAILING UNITS	(ATV/UTV)				12 7	6 5 12				
- <del></del>			A 1/4 1/17411172***	AANDIMANIA	A LULIANAMI	11 12	6 11 12 1				
<u> </u>	WAS VEHICLE OPERATING IN AUT MODE WHEN CRASH OCCURRED?		-	- CONDITIONAL AUTOMATION - HIGH AUTOMATION	y - UNKNUWN	10 11 2	10 11 2				
_2_	1-YES 2-NO 9-OTHER/UNKN	1 0 1		- FULL AUTOMATION		10 2	10 2				
	3.7 7 7 10 10 7 10 10 10	MODE LEVEL				9 9 3	9 9 3				
		6 - BUS - CHARTER/TOUR		6-FARM	21 - MAIL CARRIER	3 4 7					
0 1		7 - BUS - INTERCITY		7 - MOWING	99-OTHER/UNKNOWN		8 \				
	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	8 - BUS - SHUTTLE 9 - BUS - OTHER		8 - SNOW REMOVAL 9 - Towing		7 6 5					
FUNCTION	5 - BUS - TRANSIT/COMMUTER										
			· · · · · · · · · · · · · · · · · · ·		12-CONCRETE MIXER	12 8	12 12				
10111	1 - NO CARGO BODY TYPE /NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6111.6616	3 - POLE 9 - CARGOTANK	13 - AUTO TRANSPORTER	12					
CARGO	2 - BUS	4 - LOGGING	1 0100000000000000000000000000000000000	O-FLAT BED	14-GARBAGE/REFUSE						
BODY Type			7 ODSTRUGUIDOSODANES	11-DUMP	99-OTHER/UNKNOWN		A 3 9 <b>3 9 3 3</b> 3 9 <b>3 9</b> 3 1				
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	- MOTOR TROUBLE	99-OTHER/UNKNOWN	ا ب	•				
VEHICLE		5 - STEERING		10-DISABLED FROM PRIOR	77 VIII CAT VIII AUGUS	°	6 6				
DEFECTS		6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		<u> </u>					
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	- MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE [ 0 ]	- UNDERCARRIAGE [14]				
1 1 1	CROSSWALK	4 - MIDBLOCK - MARKED		10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	☐-TOP [13]	- ALL AREAS [15]				
NON-MOTORIST	2 - INTERSECTION – UNMARKED	CROSSWALK		11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		_				
LOCATION AT IMPACT	CROSSWALK	5 -TRAVEL LANE -OTHER LOCATION		TRAILS		- UNIT NO	DT AT SCENE [16]				
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	INITIAL POINT OF CONTACT					
1	2 - NON-COLLISION	2 - BACKING		14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	0 - NO DAMAGE	14 - UNDERCARRIAGE				
h c=====	3-STRIKING 111			SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	0 6 1-12 - REFER TO	UNIT 15-VEHICLE NOT AT SCENE				
ACTION	4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTIONS			JOGGING, PLAYING	21-STANDING OUTSIDE	DIAGRAM	99 - UNKNOWN				
	& STRUCK	6 - MAKING LEFT TURN	IN TRAFFIC	16 - WORKING	DISABLED VEHICLE	13 - TOP					
	9-OTHER/UNKNOWN	- minuted and 1 10000		17 - PUSHING VEHICLE	99-OTHER/UNKNOWN	T	RAFFIC				
	1 - NONE	7-LEFT OF CENTER		17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL				
	2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACD		18-OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN				
1011	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED Illegally	EQUIPMENT 19-LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	1 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN				
	4 - RAN STOP SIGN	10 - IMPROPER PASSING	15 - SWERVING TO AVOID	SPILLING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL				
G CIRCUMSTANCE	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  SEQUENCE	E OF EVENTS	pin nor an promine				ON ROAD	1 - NOT INVOLVED				
E SEGUENCI	LV EVENIO		NON-COLLISION			2	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				
1 <u>- 1 0</u>	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	TDAVEL	17 - ANIMAL — FARM	EQUIPMENT 23-STRUCK BY FALLING,	UNIT / NON-N	OTORIST DIRECTION				
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWA		18-ANIMAL DEER 19-ANIMAL OTHER	SHIFTING CARGO OR		1 - NORTH 5 - NORTHEAST				
4L	J 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	TA-AUADO MICHINIA	14-PEDESTRIAN 15-PEDALCYCLE	TRANSPORT	24 - OTHER MOVABLE OBJECT	FROM 3 TO 4					
3	J	COLLTET	ID-PEDALUTULE  N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE			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		44 - DITCH	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 ABUTMENT	34-MEDIAN GUARDRAIL Barrier	40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	53 - TUNNEL		2 - CALCULATED / EDR				
	28-BRIDGE PARAPET 35-MEDIAN CONCRETE		41 - OTHER POST, POLE	48-TREE	54-OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
			OR SUPPORT		OO ATHER CHRISTIANIN	LOGICO SECED					
6	29 - BRIDGE RAIL	SARRIER		49 - FIRE HYDRANT	99-OTHER/UNKNOWN	l					
6	29-BRIDGE RAIL 30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	49-FIRE HYDRANT	33-01UCK! OKKNOMN	3 5					

LOCAL REPORT NUMBER

 $\begin{bmatrix} 2 & 0 & 2 & 2 & 2 & -1 & 0 & 0 & 0 & 0 & 6 & 0 & 6 & 2 \end{bmatrix}$ 

i I	OWNER NAME: LAST, FIRST			OWNER PHONE: INCLU	DE AREA CODE ( same as driver)	DAMAGE					
	RANALLI, KENNE' DRESS: STREET, CITY, STATE,	<u>'</u>				DAMAGE SCALE  1 - NONE 3 - FUNCTIONAL DAMAGE					
4	LAWN DR ,PITTSB	2.3				2 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
COMMERC	IAL CARRIER: NAME, ADDRI	ESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN					
LP STATE	LICENSE PLATE #	VEHICLE	IDENTIFICATION #	VEHICLE YEA	AR VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY					
$P \mid A$	GCY3693		IV <sub>1</sub> 2 <sub>1</sub> E <sub>1</sub> T <sub>1</sub> 3 <sub>1</sub> 5 <sub>1</sub> 5 <sub>1</sub> 5	l l		0	12				
INSURAL VERIFI	CE INSURANCE COMP	i i	SURANCE POLICY #	COLOR	VEHICLE MODEL Juke	11 12	11 12				
- VERIFII	ED LIBERTY MUT	UAL A	.0S2881730994019 US DOT #	BLK TOWED BY: COMPANY		10 11 2	11 1 1 2				
COMME		IN EMERGENCY RESPONSE	1 1 1 1			9 3 3	9 9 3				
INTER	OCK	#UCCUPANIS	HICLE WEIGHT GVWR/GCWR 1 - ≤10K L8S.		US MATERIAL CLASS# PLACARD ID#	7 5 7	8 7 5 74				
INTERI DEVICE EQUIP	HIT/SKIP UNIT	$\begin{bmatrix} & & & & & & & & & & & & & & & & & & &$	2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD		7 6 5	12 7 6 5				
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	12 6				
0 1	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE		19 - BUS (16+ PASSENGERS) 20 - Other Vehicle	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10					
UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED		21 - HEAVY EQUIPMENT	26 - BICYCLE	9 0 2 3 3					
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN						
	# of TRAILING UNITS	(ATV/UTV)	17 - MOTURNOME	(	99 - UNKNOWN OR HIT/SKIP	8 7	6 12				
	<u> </u>	TONOMOUS	A MOAUTOMATION	2 COMPLETONAL AUTOMATICAL	O HAIZKONIA	11 12 7	6 11 12 1				
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED	! O .		3 - CONDITIONAL AUTOMATION 4 - High Automation	9 - UNKNUWN	10 11 1 2	10 11 1 2				
<u></u>	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS Mode Level	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3 3	$\begin{array}{cccccccccccccccccccccccccccccccccccc$				
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARM	21 - MAIL CARRIER	8 4 -	8 4				
0 1		7 - BUS - INTERCITY		17 - MOWING	99-OTHER/UNKNOWN	8 7 6 5 4	8 7 6 5 4				
SPECIAL	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	9 - BUS - SHUTTLE 9 - BUS - OTHER		18 - SNOW REMOVAL 19 - TOWING		7 6	7 6				
	5 - BUS -TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12				
0 . 1 .	1 - NO CARGO BODYTYPE /NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	AU LANTA	8 - POLE	12 - CONCRETE MIXER	12					
CARGO	2 - BUS	4 - LOGGING		9 - CARGO TANK 10 - FLAT BED	13-AUTOTRANSPORTER 14-Garbage/Refuse	a Ma	3 9 3 3				
BODY TYPE			7 00411101110010010101	11 - DUMP	99-OTHER/UNKNOWN						
	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6					
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6				
			C DIAVOLET AND	A MENTANIADANANA INI AND	IA FINAT DEADAINEA	🔲 - NO DAMAGE (	0] 🔲 - UNDERCARRIAGE [14]				
	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]	- ALL AREAS [ 15 ]				
LOCATION		CROSSWALK 5 -TRAVEL LANE - OTHER LOCATIO	8 - SIDEWALK	11 - SHARED USE PATHS OR Trails	99-OTHER/UNKNOWN	∏-unt	T NOT AT SCENE [16]				
AT IMPACT	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18 - APPROACHING						
,	2 - NON-COLLISION	2 - BACKING		14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	INITIA O - NO DAMAC	L POINT OF CONTACT GE 14 - Undercarriage				
	3-STRIKING 0 1	3 - CHANGING LANES	9 - LEAVINGTRAFFIC LANE	SPECIFIED LOCATION  15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST		TO UNIT 15 - VEHICLE NOT AT SCENE				
ACITON	4- STRUCK PRE-CRASH 5- BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	10 - PARKED 11 - Slowing or Stopped	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGRAM 99 - UNKNOWN					
	& STRUCK	6 - MAKING LEFT TURN	INTRAFFIC	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN	13 - 10P					
;	9 - OTHER / UNKNOWN 1 - NONE	7 - LEFT OF CENTER	12 - DRIVERLESS  13 - IMPROPER START FROM A	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TDARFYALIAU ALL	TRAFFIC				
	2 - FAILURE TO YIELD	8-FOLLOWING TOO CLOSE / ACI	DA PARKED POSITION	18-OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN				
<u> 0 8</u>	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	14 - STOPPED OR PARKED Illegally	EQUIPMENT  19 - LOAD SHIFTING/FALLING/	23-OPENING DOOR INTO ROADWAY	1 1 2 - TWO-WAY	6 2-SIGNAL 5-YIELD SIGN				
CONTRIBUTING CIPCUMSTANCE	G 5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - Wrong Way	SPILLING	99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL				
<u> </u>	6-IMPROPERTURN	12-IMPROPER BACKING	an mond hal	20 - IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED				
M SEQUENC	E OF EVENTS		NON-COLLISION			2	1 2 - INVOLVED-ACTIVE CROSSING				
1 2 1 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING				
	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	17 - ANIMAL — FARM 18 - Animal — Deer	23-STRUCK BY FALLING,	UNIT / NO	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				
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRANSPORT	BY A MOTOR VEHICLE 24 - Other Movable object	FROM 3 TO L	4 3 - EAST 7 - SOUTHEAST				
3	J	COLLISI	ON WITH FIXED OBJEC	21 - PARKED MOTOR VEHICLE T - STRUCK			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN				
4	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		DETECTED SPEED				
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 - WALL	UNIT SPEED	1 - STATED / ESTIMATED SPEED				
5	STRUCTURE  27 - BRIDGE PIER OR ABUTMEN	34 - MEDIAN GUARDRAIL T Barrier	SUPPORT 40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	0 1 0	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				
61	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER		49 - FIRE HYDRANT	99 - OTHER / UNKNOWN						
. 1	I FIDST HADMFIII EVE	NT   1   MOST	HADMEIII EVENT			3 5					

DHIO DEP.	CONTROL OF PURISHER AFTER MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER						
									12 10 12 12 1- 10 10 10 10 16 10 16 12					
UNIT#	NAME: LAST, FIRST, MIDDLE VICAREL, MONICA, LYNN								DATE OF BIRTH AGE GENDER AGE GENDER AGE GENDER					
	STREET, CITY, STATE, ZIP								0 2 / 2 5 / 1 9 7 9 4 3 F					
-	2 SUSAN RD ,Ravenna ,OH 44266									THORL	- INCLUDE AREA	Juuc		1
o Injuries	INJURED	EMS AGENCY (NAME)			AKEN TO:	MEDICAL FACILITY	NAME, C(TY)		DOT :	COMPLIANT	SEATING POSITIO	N AIR BAG	USAGE EJECTION	TRAPPED
5	TAKEN BY							USED 0 4		IELMET	0 1	1	1	1
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	FENSE CHARGED LOCAL OF			OFFENSE DESC	DFFENSE DESCRIPTION			CITATION NUMBER		
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. 4	BY				1 OTHER DRUG			, 1	1	1 .		1	1	
UNIT #	NAME: LAST,	FIRST, MIDDLE							,	DAT	E OF BIRTH		AGE	GENDER
$\begin{bmatrix} 0 & 2 \end{bmatrix}$	RANA	LLI, ELENA, M							1 1	/ 2	8,/,2	00	1 2 0	F
ADDRESS:	STREET, CITY, ST	•							CONTAC	T PHONE	- INCLUDE AREA	CODE		'
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INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	TAKEN TO:	MEDICAL FACILITY	(NAME, C(TY)	USED		COMPLIANT		ON AIR BAG	USAGE EJECTION	TRAPPED
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473 O  INJURIES  OL STATE  P A	UPERATURI	ICENSE NUMBER		333.		GED .	CODE	Maximu		ad Li	imite	141		
P A OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP	TO3 DRIV	<u> </u>		HOL / DRUG SUSPI	ECTED	CONDITION	. A	LCOHOL	TEST		DRUG TEST(S	
	SELECT UPTO 2		DIST BY	TRACTED ALCOHOL MARIJUANA							TYPE RESUL	T SELECT UPTO 4		
3	3			1 OTHER DRUG			<u> </u>							
UNIT#	NAME: LAST,	FIRST, MIDDLE							DATE OF BIRTH AGE GENDER					
ADDRESS	: STREET, CITY, S	TATE 700							CONTACT PHONE - INCLUDE AREA CODE					
ADDRESS	: SIKEEI, GIIY, S	IAIE, ZIP							OUTTACT FINITE - MOLDOL ANDA VODE					
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OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL OFFENSE DES			CRIPTION CITATION			TION NUMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2		DIS	VER TRACTED	-	HOL / DRUG SUSP LCOHOL   MA		CONDITION	STATUS	TYPE	VALUE	STATUS	DRUG TEST( TYPE RESU	S) LT SELECTOPIO4
	<u> </u>		BY	1		THER DRUG	NIJOANA	`],	1 1		•			
200 400 200	URIES	SEATING POSITION		AIR BAG		OL CLAS	\$	OL RESTRI		DR	IVER DISTRA	CTION	TEST ST	ATUS
1 - FATAL 2 - SUSPECTER	D SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DER 2 - DEPLOY	1946		1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTE 2 - CDL INTRASTA	and the state of the	11 11 11 11	OT DISTRACTED IANUALLY OPERAT	ING AN	1 - NONE GIVEN 2 - TEST REFUSED	
	D MINOR INJURY	2-FRONT-MIDDLE	Contract of	PLOYED FRONT 2 - CLASS B PLOYED SIDE 3 - CLASS C				3 - CORRECTIVE L		ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,			3 - TEST GIVEN, CONTAMINATED	
4 - POSSIBLE I 5 - NO APPARE		3 - FRONT - RIGHT SIDE 4 - Second - Left Side	4 - DEPLOY 5 - NOT API	'ED BOTH FR	ONT/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLAS	R DIAL		DIALING)		SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN	
		(MOTORCYCLE PASSENGER)  5 - Second – Middle	可能 1947 PS	OYMENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLAS				SS A COMMUNICATION DEVICE 5 TEST GIVEN, R				ESULTS		
1 - NOT TRANS	PORTED	6 - SECOND - RIGHT SIDE		6 - NO VALID OL & CLASS B BU 7 - Except trac				US 4 - TALKING ON HAND-HELD				EST TYPE		
/TREATED / 2 - EMS	AT SCENE	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOTEJ	EJECTION OL ENDORSEMENT 8- INTERMEDIA				8 - INTERMEDIAT RESTRICTION	ATE LICENSE 5 - OTHER ACTIVITY WITH AN 1 - NONE				1 - NONE	
3 - POLICE		8 - THIRD - MIDDLE 9 - Third - Right Side	2 - PARTIA	FIALLY EJECTED M - MOTORCYCLE			9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER		2 - BLOOD 3 - Urine			
9-OTHER/UN	IKNOWN	10 - SLEEPER SECTION	3 - TOTALL 4 - NOT AP	Y EJECTED Plicarie	gi esti	P - PASSENGER N - TANKER		10 - LIMITED TO D			THER DISTRACTION NSIDE THE VEHICL		4 - BREATH	
	EQUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER		TRAPPED		Q - MOTOR SCOOTER		11 - LIMITED TO E	7000 F		THER DISTRACTION	N OUTSIDE	5-OTHER	
1 - NONE USEC 2 - Shoulder	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTR			R - THREE-WHEEL N S - SCHOOL BUS	IOTORCYCLE	13 - MECHANICAL	DEVICES	9-(	THER/UNKNOWN		DRUG TES 1-NONE	STTYPE
3 - LAP BELT (	Start Physics and	PICK-UP WITH CAP)	2 - EXTRIC MECHA	ATED BY NICAL MEAN	NS	T - DOUBLE & TRIPL	Villa in the control	0011111020701	OTHER		CONDITION		2 - BL00D	
5 - CHILD RES	& LAP BELT USED Traint system –	CARGO AREA 3 - FREED		X_TANKER/HA7MAT		<b>T</b> .	ADAPTIVE DE 14 - MILITARY VE	A 100 M 100 M	1. 1. 1	APPARENTLY NORN Physical impairn		3 - URINE 4 - OTHER		
FORWARD 6-CHILD RES	FACING Traint system -	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	HUN-W	LUITANIUAL	III LAITS	GENDE	R	15 - MOTOR VEHIC AIR BRAKES	LES WITHOU	T 3-	EMOTIONAL (E.G., DI NGRY, DISTURBED)		DRUG TEST	RESULT/SY
REAR FACI	NG	(NON-TRAILING UNIT) 15 - NON-MOTORIST				F - FEMALE M - MALE		16 - OUTSIDE MIR			LLNESS		1 - AMPHETAMIN	
7 -BOOSTER S 8 -HELMET U		99 - OTHER / UNKNOWN				U - OTHER / UNKNOW	'N	17 - PROSTHETIC 18 - OTHER	AID		ELL ASLEEP, FAIN ATIGUED, ETC.	TED,	2 - BARBITURATE	
	VE PADS USED Nees, etc.)						e galeria Lengt	TO-OTHER		6-1	UNDER THE INFLUE		3 - BENZODIAZEI 4 - CANNABINOII	
10 - REFLECTIV	VE CLOTHING								OF MEDICATIONS / DRU / ALCOHOL			5 - COCAINE	MINE	
11 - LIGHTING / Bicycle	– PEDESTRIÁN ONLY			+ **. ***						9-(	OTHER / UNKNOWN		6-OPIATES/OPI 7-OTHER	IOID2
99 - OTHER/UI													8 - NEGATIVE RE	SULTS

D	OHIO DEP	C SAFETY	CCUPANT / V	LOCAL REPORT NUMBER										
	. ,							2,0,2,2,-,0,0,0,6,0,6,2,						
	UNIT#		FIRST, MIDDLE	<b>T</b> 7				DATE OF BIRTH AGE GENDER						
	01		REL, ZACHAR	1 2 / 2 1 / 2 0 1 6 0 5 M										
		STREET, CITY, S	RD ,Ravenna ,	CONTACT PHONE - INCLUDE AREA CODE										
ĝ -		INJURED	EMS AGENCY (NAME)	011 44200	SAFETY EQUIPMENT	L I I I I I I I I I I I I I I I I I I I								
i	5	TAKEN 1	ZHO NIZHOT (HAHL)		USED 0 5	DOT-COMPLIANT 0 4 5 5 1 1 1								
	UNIT#		, FIRST, MIDDLE			DATE OF BIRTH AGE GENDER								
		Trans.	, r mo i model											
Z	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN														
ĕ	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)	SAFETY EQUIPMENT	T DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED									
		BY			MC HELMET	ٔ ــــــــــــــــــــــــــــــــــــ	 		L					
	UNIT#	NAME: LAS	T, FIRST, MIDDLE	•				DATE	OF BIRTH		AGE	GENDER		
NAG	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COI	DE				
OCCUPAN				·····										
	INJURIES	INJURED TAKEN BY	EMS Agency (NAME)		INJURED TAKEN TO: Medical Facility	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
			**************************************		<del>,</del>					<u> </u>				
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATI	E OF BIRTH		AGE	GENDER		
Z	ADDDECC	: STREET, CITY,	CTATE 7ID					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN	ADDRESS	: 31 KEE1, 011 1,	STATE, AF					OUNTACT PROME	- INGCODE AREA CO	DE,				
ĕ	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	Y (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	1 1	TAKEN BY					USED	DOT-COMPLIANT MC HELMET	l		ļ. ,	1 1		
Ī		INJU	JRIES	SAFETY	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE			
	1 - FAT	AL		1 - NONE US	and the contract of the contra		T - LEFT SIDE							
	, f. 19		RÍOUS INJURY		OCCUPANT ER BELT ONLY USED	Control of the Control of	ORCYCLE DRIV T – MIDDLE	EK)	YED FRONT					
	1.5		INOR INJURY		TONLY USED			3 - DEPLOYED SIDE						
		SIBLE INJU APPARENT		4 - SHOULDI	ER & LAP BELT USED		ND – LEFT SID ORCYCLE PASS		4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE					
	J-140 F				ESTRAINT SYSTEM -		ND – MIDDLE ND – RIGHT SI							
	1 NOT	TRANSPOR	TAKEN BY		D FACING ESTRAINT SYSTEM –	1DE 9 - DEPLOYMENT UNKNOWN								
		EATED AT S	transfer and the first control of the first control	REAR FA		CAR)	0 N							
	2 - EMS	S		7 - BOOSTEF	RSEAT		D – MIDDLE D – RIGHT SIDI		1 - NOT EJECTED					
	3 - P0L			8 - HELMET			化复数流光管 医二氏压性管	N OF TRUCK CAB 2 - PARTIALLY EJECTED						
	9 - OTH	IER / UNKN			TIVE PADS USED KNEES, ETC.)	a transfer of the second	the state of the s	HER ENCLOSED 3 - TOTALLY EJECTED TRAILING UNIT, 4 - NOT APPLICABLE						
	F FF64	s 11 mm 15 mm	NDER	10 - REFLECT	TIVE CLOTHING	BUS, I	PICK-UP WITH CA	(AP)						
	F-FEM. M-MAL			11 - LIGHTIN /BICYCL	G - PEDESTRIAN		SENGER IN UNI GO AREA	IENCLOSED TRAPPED  1 - NOTTRAPPED						
:	U - 0THI	ER/UNKNO	WN	99 - OTHER /	전문적하는데 그 그렇게 모르는데?	•	LING UNIT	2 - FXTRICATED BY MECHANICAL						
ł	14 - RIDING ON VEHIC (Non-trailing un								MEAN					
	14.35					State of the State	MOTORIST		3 - FREED MEAN	) BY NON-MI S	ECHANIC	AL		
	NAME	AST, FIRST, MID	N.F.			99 - 01 HI	ER/UNKNOWN		TE OF BIRTH		AGE	GENDER		
ý	NAME: LA	ASI, FIKSI, WID	DLE					/ /	. / .	, , ,	AGE	GENDER		
	ADDRESS	S: STREET, CITY	, STATE, ZIP					CONTACT PHONI	E - INCLUDE AREA O	0DE				
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