OFF PUBLIC SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*						
X PHOTOSTAKEN X OH-2 X OH-3	Y OH.3 LOCAL INFORMATION						
SECONDARY CRASH OH-1P OTHER	REPORTING AGENCY NAME		NCIC*	HIT/SKIP NUMBER OF UN		UNIT IN ERROR	
COUNTY* LOCALITY* LOCATION: CIT	City of Kent Pol	ice	0 16 7 10 3	1 - SOLVED		0 2 98 - ANIMAL 99 - UNKNOWN	
1-CITY 2-VILLAGE Kont	Y, VILLAGE, TOWNSHIP*			CRASH DATE /	37001	CRASH SEVERITY 1 - FATAL	
3-TOWNSHIP TECHT	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		2 - SERIOUS INJURY	
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2- SOUTH 3 - EAST 4 4 WFST	MAIN		ST			SUSPECTED 3 - MINOR INJURY	
1 11201	REFERENCE ROAD NAME (R	OAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D		SUSPECTED 4 - INJURY POSSIBLE	
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	1080		itoxa (()			5 - PROPERTY DAMAGE	
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE		811,03,8,0	INTERSECTION REL	ONLY	
1 100011	INTERSTATE ROUTE(TP)	AL - ALLEY HW- HIGHWAY	RD - ROAD		RSECTION OR ON API		
3-HOUSE # L 3-EAST	FEDERAL US ROUTE STATE ROUTE	AV - AVENUE LA - LANE BL - BOULEVARD MP - MILEPOST	SQ - SQUARE ST - STREET				
	NUMBERED COUNTY ROUTE	CR - CIRCLE OV - OVAL	TE - TERRACE		ROADWAY	NUMBER OF APPROACHES	
	NUMBERED TOWNSHIP ROUTE	DR - DRIVE PI - PIKE	TL - TRAIL WA - WAY		Contract of the contract of th		
3-YARDS		HE - HEIGHTS PL - PLACE	PERM	ROADWAY DIN	IDED		
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER		MANNER OF CRASH COLLISION/IN NOT COLLISION 4 - REAR-TO-RE/		DIRECTION OF TRAVE	1	EDIAN TYPE	
	ALLEY ACCESS	BETWEEN 5 - BACKING	-10	1 - NORTH		DED FLUSH MEDIAN FEET)	
4 - ON ROADSIDE 12-SHARED US	RADE CRUSSING	VEHICLES IN 6-ANGLE TRANSPORT 7-SIDESWIPE,	SAME DIRECTION	3- EAST		DED FLUSH MEDIAN	
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE		REAR-END 8-SIDESWIPE, HEAD-ON 9-OTHER/UNK	OPPOSITE DIRECTION	4- WEST		DED, DEPRESSED MEDIAN DED, RAISED MEDIAN	
7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER / UN	н	7-01HER/0NK	MOSAIA		(ANY	TYPE)	
	WORK ZONE TYPE	1000770110707070				R/UNKNOWN	
	LANE CLOSURE	LOCATION OF CRASH IN 1 - BEFORE THE 1	ST WORK ZOVE	CONTOUR	CONDITIONS 1	SURFACE	
	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIG 2 - ADVANCE WAR		1 - STRAIGHT LEVEL	1-DPV	2	
LAW ENFORCEMENT PRESENT	OR MEDIAN	3-TRANSITION A	REA		2-WET	1 - CONCRETE 2 - BLACKTOP	
A DESCRIPTION OF THE PROPERTY	INTERMITTENT OR MOVING W OTHER	ORK 4 - ACTIVITY ARE 5 - TERMINATION		3 - CURVE LEVEL	3 - SNOW	BITUMINOUS ASPHALT	
LIGHT CONDITION	WE	ATHER		4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK	
1 - DAYLIGHT	1-CLEAR	6-SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT OIL, GRAVEL	4 - SLAG, GRAVEL, STONE	
1 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	0,1, 2-CLOUDY 3-FOG, SMOG, SM	7 - SEVERE CROSSWINDS 10KE 8 - BLOWING SAND, SOIL D	IRT, SNOW		6 - WATER (STANDIN MOVING)	VG, 5 - DIRT	
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FRE			7 - SLUSH	9 - OTHER/UNKNOWN	
9 - OTHER / UNKNOWN	3 decei mare	77-01112K7 ONKNOWA			9 - OTHER/UNKNOW	N	
NARRATIVE		PAR A BENTY				Indicate the north	
Unit #1 was in the center lane,	facing E/B on W.	. Main			1	direction with an "N" on the compass diagram.	
St waiting to turn into 1089 V	V. Main St. Unit	#2				~	
was directly behind Unit #1 a							
an assured and clear distance			(N)				
		K Unit	_4	1089			
#1 then went of off the right s							
Both vehicles were moved fro	m the crash scen	e.					
			W Man St				
	Milliofordia formanagamanagia. Ayar di visa da si	Dr.		ed parameter	2	1 1 1 1 1 1 1 1	
			ewing is approximate at not to scale				
о ботакар и прередения как в выпарать преводать до него в откор и филом изменения изменения выпарать форму выпамы на га	er e	-PATAN-Garrano salah sahan-aya drasso sala-a			1080		
The second distribution that offices also plays appropriate contracting this will distribute the companion and distribute the companion and the contracting and the company are	ra-manifelia palalahan antan menangan kelalahan dalah dapat menangan sebas salah menangan pengangan sebas sebas						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE /TI	ME	SCENE CLEARED I	ATE /TIME	DEDON'T TAKEN OV	
		AUTHE DATE/II	****	SULITE GLEAKED [MIE / ITME	REPORT TAKEN BY	
	2.2.0.2.1./.1.0.0	3 0 3 2 2 2 0 2 1 4	1 0 0 3 0	3 2 2 2 2 2 2		X POLICE AGENCY	
TOTAL TIME OTHER TOTAL	L OFFICER'S NAME*				,/,1,0,5,7	POLICE AGENCY MOTORIST	
0,3,2,2,2,0,2,1,/,1,0,0,3,0,3,2,	officer's name* Ennemoser,		CHECKED BY OFFI Ennemose	CER'S NAME*	1/11/0151/		

0 1 MOTT, DAVID, JOHN

UNIT # OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVERS

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)

LOCAL REPORT NUMBER 2,0,2,1,-,0,0,0,0,4,4,8,3, OWNER PHONE: (40,306 AREA CODE (DE SAME AS DRIVER) DAMAGE DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE

	MINIC DR ,Cuyaho		3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE						
COMMER	CIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP	100	COMMERCIAL CARRIE	A PHONE: INCLUDE AREA CODE	9 - UNKNOWN			
LP STATE	LICENSE PLATE #	VEHIO	CLE IDENTIFICATION #	VEHICLE Y	FAR / MEUTOL B MANUE	DAMAGED AREA(S) INDICATE ALL THAT APPLY			
OH	JIC8620		B, T, 8, M, N, 6, 1, 3				PIONIE ALE IMAI AFFLI		
X INSUR	ANCE INSURANCE COM		INSURANCE POLICY #	COLOR	VEHICLE MODEL	11 12	11 12 1		
VERIF			9797824A2035	BLK	RAM 1500	10 12	2 10 11 12 2		
Сомм	TYPE OF USE ERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPA	YY NAME	10 2	19,5 2 2		
			VEHICLE WEIGHT GVWR/GCWR	HAZARD	OUS MATERIAL	9 9 3	3 9 9 3		
DEVIC	E HIT/SKIP UN	#UCCUPANIS	1 - ≤10K LBS	MATERIAL	CLASS # PLACARD ID #	8 7 5	7		
EQUIF	PED	0,1	2 - 10,001 - 26K LB 3 - >26K LBS	PLACARD		7 6	12		
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELE		18 - LIMO (LÍVERY VEHICLE)	23-PEDESTRIAN/SKATER	6	11 12 1		
0,4	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 3-WHEELE	D 13-SNCWMOBILE 14-SINGLE UNIT TRUCK	19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24-WHEELCHAIR (ANY TYPE)	10	11 1 2		
UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - Bicycle	1 ./	9 3 3		
200	5 - CARGO VAN	BICYCLE 11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR	27 -TRAIN	+	_ 8 M 4		
. 0	6 - VAN (9-15 SEATS)	(ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 /4		
0 O	# OF TRAILING UNITS					12	7 6 5 12		
A H	WAS VEHICLE OPERATING IN ALL MODE WHEN CRASH OCCURRED		0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	12			
2	1-YES 2-NO 9-OTHER/UNK		1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 1	2 10 11 1		
		MODE LEVE	13	J - F GCE AD TORRATION		9 9 3	3 9 9 3		
	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARW	21 - MAIL CARRIER	8 4 -	-		
0,1	7 FL FCTBOWG SIDE SULPHING	7 - BUS - INTERCITY 8 - BUS - SHITTLE	12 - MILITARY 13 - POLICE	17 - MCWI YG 18 - SNOW REMOVAL	99-OTHER/UNKNOWN	8 6 3	4 8 7 6 14		
SPECIAL FUNCTION	4 - SCHOOL TRAYSPORT	9 - BUS - OTHER	14 - PUBL C UTILITY	19-TOWING		7 6	7 8		
	5 - BLS - TRANSIT/COMMUTER	10-AMBULANCE	15-CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL					
0,1,	1 - NO CARGO BODY TYPE / NOT APPLICABLE		R 5 - IVTERMODAL CONTAINER	8 - POLE	12 - CONCRETE MIXER		12 12 12		
CARGO	CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSE			9 - CARGO TANK	13 - AUTO TRANSPORTER	8 8			
			7 - GRAIN/CHIPS/GRAVEL	10-FLAT BED 11-DUMP			9 46 3 9 7 3 9 8 3		
24.5	1 - TURN SIGNALS	4 - BRAKES	7 HORN OR CLICKTION				1831		
VEHICLE	2 - HEAD LAMPS	5 - STEERING	7 - WORN OR SLICKTIRES B - Trailer Equipment	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR	99-OTHER/UNKNOWN	6			
	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6		
		3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAH/CROSSING ISLAND	12-FIRST RESPONDER	☐-NO DAMAG	E(0) - UNDERCARRIAGE [14]		
HON-MOTORIST	CROSSWALK 2 - INTERSECTION - UNMARKED	4 - MIDSLOCK - MARKED	7 - SHOULDER / ROADSIDE	10-DRIVEWAY ACCESS	AT INCIDENT SCENE	☐-TOP [13]	- ALL AREAS [15]		
LOCATION AT IMPACT	CDOCCIUM /	CROSSWALK 5 -TRAVEL LANE - OTHER LOCAT	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN				
ATIMPAGE		1 - STRAIGHT AHEAD	7 - MAKING U-TURN				NIT NOT AT SCENE [16]		
4	2-NON-COLLISION	2 - BACKING		13 - NEGOTIATING A CURVE 14 - Entering or Crossing	18 - APPROACHING OR LEAVING VEHICLE	TINI	TAL POINT OF CONTACT		
	3-STRIKING 111	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANCING	0 - NO DAM			
ACTION	4- STRUCK PRE-CRASH 5- BOTH STRIKING ACTIONS	4 - CVERTAKING/PASSING	10 - PARKED	15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST JOGGING, PLAYING 21 - STANDING DUTSIDE		0 5 1-12 - REFI	ER TO UNIT 15 - VEHICLE NOT AT SCENE		
	P CTDUCY	6 - MAKING LEFTTURN	11 - SLOWING OR STOPPED In traffic	16-WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13 - TOP	99 - UNKNOWN		
7000	9 - OTHER / UNKNOWN	7 9111	12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC		
		7 - LEFT OF CENTER		17 - VISION OBSTRUCTION	21 - LYI NG IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL		
		8 - FOLLOWING TOO CLOSE / AC 9 - IMPROPER LANE CHANGE	DA PARKED POSITION 14-STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOLT 4 - STOP SIGN		
(4)	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY	6 2 SIGNAL 5 - YIELD SIGN		
CIRCUMSTANCES		11 - DROVE OFF ROAD	1/ 11/2010 1-1011	SPILLING 20-1W PROPER CROSSING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL		
SERVENA-		12-IMPROPER BACKING		EG-1 PENGYER CRUSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING		
SEMUENCE	OF EVENTS		EVENTS			4 .	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING		
11 6 1 0 1		6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING		
		7 - SEPARATION OF UNITS	TRAVEL	17 - ANIMAL - FARM	EQUIPMENT 23 - STRUCK BY FALLING,	HMT / N	ON-MOTORIST DIRECTION		
		8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	16-ANIMAL — DEER 19-ANIMAL — OTHER	SHIFT NG CARGO OR	UNII / N	1 - NORTH 5 - NORTHEAST		
	5 - CARGO / EQUIPMENT	10-CROSS MEDIAN	13 TURNED MURICULITRIAN	20 - MOTOR VEHICLE IN	ANYTHING SET IN MOTION By a moter vehicle	4	2 - SOUTH 6 - NORTHWEST		
3	LOSS OR SHIFT		25 8584 5464 5	TRANSPORT 21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	FROM4 TO			
100	25 - IMPACT ATTENUATOR		N WITH FIXED OBJECT				4 - WEST 8 - SOUTHWEST 9 - OTHER / JNKNOWN		
4	/ CRASH CUSHION	31 -GUARDRAIL END 32 -PORTABLE BARRIER		43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	714177 00000			
	26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED		
	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL Barrier	AR LITH ITY DOLE	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - Tunnel	0 0 0	1 - STATED / ESTIMATED SPEED		
	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	35-MEDIAN CONCRETE Barrier	41 - OTHER POST, POLE	46 - TREE	54 - OTHER FIXED OBJECT	BOCTTO COLO	2 - CALCULATED / EDR		
		36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49 - FIRE HYDRANT	99-OTHER/UNKNOWN	POSTED SPEED	3 - UNDETERMINED		
1	FIRST HARMFUL EVENT	1 MOST	HARMFUL EVENT			2 5			
	1U 1/19 [760-0820]						PAGE 2 OF 5		



LOCAL REPORT NUMBER
2 0 2 1 - 0 0 0 0 0 4 4 8 3

UNIT#	OWNER NAME: LAST, FIRS			OWNER	PHONE: No	TE AREA COTE (SAME AS DRIVER)		DAMAGE			
	EASTERLING, EL			L				DAMAGE SCALE			
	DRESS: STREET, CITY, STATE						4 1-NONE	3 - FUNCTIONAL DAMAGE			
	X AVE ,Franklin Tw SIAL CARRIER: NAME, ADDR	•					2- WINOR				
OUMMERC	FIRE GRANIER: NAME, ADD	(E33, CITT 5 ATE, ZIP		COMME	RCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
LP STATE	LICENSE PLATE #	VEHICL	E IDENTIFICATION #	l v	EHICLE YE	AR VEHICLE MAKE		DAMAGED AREA(S) ICATE ALL THAT APPLY			
OH	GVN5319		D, U ₁ 5 ₁ A ₁ 1 ₁ 0 ₁ 1 ₁ 8 ₁		2 , 0 , 1 ,						
INSURAL VERIFI	INSURANCE COMP		INSURANCE POLICY #		COLOR	VEHICLE MODEL	0 12	11 12 1			
△ VERIFI		9	911683050	T	PE	PRIUS	10 11 1	2 10 12 2			
	TYPE OF USE	IN EMEDGENCY	US DOT #		BY: COMPAN	YNAME	10 2 -	100002			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		City S		OUS MATERIAL	9 9 3	3 8 8 3			
INTERI	оск	MUCCUPANIS	EHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS	□ MA	ATERIAL	CLASS # PLACARD ID #	7 0 7				
EGUIP	ED HIT/SKIP UNI	0,1,	2 - 10,001 - 26K LBS		LEASED		Y				
	1 - PASSENGER CAR	7 - MCTCRCYCLE 2-WHEELED	3 - >26K LBS	16-LIMO (LIVER		22 DESCENSION LOWATER	6 5	11 6 5			
0.1	2 - PASSENGER VAN (MINIVAN)	and the second s	13-SNCWMCBILE	19-BUS (16+ PA		23 - PEDESTRIAN / SKATER 24 - WHEE_CHAIR (ANY TYPE)	10 /	7 7			
0,1,	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNIT TRUCK	26 - OTHER VEHI		25-OTHER NOV-VOTORIST	_	10 2			
UNIT TYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15-SEVI-TRACTOR	21 - HEAVY EQUI		25-BICYCLE	9	9 3 3			
		11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT 17-MCTORHOME	22 - ANIMAL WIT AYIMAL-DRA	H RIDER OR AWN VEHICLE	27 - TRAIN	_				
		(ATV/UTV)	1) - Inc Old Old E			99 - UNKNOWN OF HIT/SKIP	8	× 1 5 × 4			
	# OF TRAILING UNITS						11 12 1	7 6 11 1			
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED		POLTAMOTUA ON - 0	3 - CONDITIONAL		9 - UNKNOWN	10 12	12			
2	1-YES 2-NO 9-CTHER/UNK	1 0 1	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH AUTOM 5 - FULL AUTOM			11 11 2	10 11 1			
		MODE LEVEL	a Thorne Portunition	3 - I CEL MUIGA	ATION		9 9 3	3 9 9 3			
		6 - BUS - CHARTERTOUR	11 -FIRE	16-FARW		21 - MAIL CARRIER	- · · -				
0 1	2 - TAX! 3 - ELECTROMIC RIDE SHARING	7 - 3JS - INTERCITY	12 - MILITARY	17 - MOWING		99-OTHER / UNKNOWN	B 7 5	4 8 7 5 4			
SPECIAL		9 - BUS - CTHER	13-POLICE 14-PUBLIC UTILITY	18 - SNOW REMCVAL			7	7 6			
FORCITOR	5 - BLS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFETY SER	VICE PATRO			6			
	1 - NG CARGO BODYTYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER	B - PCLE		12 - CONCRETE MIXER	A THE LATE	12 12 12			
0,1	/ NOT APPLICABLE	VOTORVEHICLE	CHASSIS	9 - CARGOTANK		13-ALTOTRANSPORTER	12				
CARGO BODY	2 - BUS	4 - LOGGING	6 - CARGO VA WENCLOSED BOX	10-FLAT BED		14-GARBAGE/REFUSE	all o				
TYPE			7 - GRAIN/CHIPS/GRAVEL	11 - CUMP		99-OTHER LUNKNOWN	,003	9 9 1 3 9 1 3			
		4 - BRAKES	7 - WORN OR SLICKTIFES	9 - MOTOR TROU	B.E	99-OTHER / UNKNOW'S		0			
		5 - STEERING	8 - TRAILER EQUIPMENT	10-DISABLED FI	ROM PRIOR						
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT							
Electric line		3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIANICROS	SSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE	[0] -UNDERCARRIAGE [14]			
NON-MOTORIST	CROSSWALK 2-INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10-CRIVEWAY A	CCESS	AT INCIDENT SCENE	☐-TOP [13]	-ALL AREAS [15]			
LUCATION		CROSSWALK 5 -TRAVEL LANE - Other Location	B - SIDEWALK	11-SHARED USE TRAILS	PATHS OR	99-OTHER/UNKNOWN	П.,,	IT NOT AT CASH CALL			
AT IMPACT							□-UF	NIT NOT AT SCENE [16]			
		1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE	13 - NEGOTIATING		1B-APPROACHING OR LEAVING VEHICLE	INITI	IAL POINT OF CONTACT			
3		3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED		19-STANDING	8 - NO DAW	AGE 14 - UNDERCARRIAGE			
ACTION	4 - STRUCK PRE-CRASH	4 - CVERTAKING/PASSING		15 - WALKING, RL		20-OTHER NON-VOTORIST	1 1 1-12 - REFE	RTO UNIT 15 - VEHICLE NOT AT SCENE			
	5 - BOTH STRIKING ACTIONS & STRUCK		11-SLOWING OR STOPPED Intraffic	JOGGING, PL	ATINO	21 - STANDING OUTS DE DISABLED VEHICLE	13 - TOP	99 - UNKNOWN			
	9-CTHER/UNKNOWN	6 - MAKING LEFT TURN	12-DRIVERLESS	17 - PUSHING VE	HICLE	99-OTHER / UNKNOWN					
7 1	1-NGNE	7-LEFT OF CENTER		17 - VISION OBST	SICTION	21 - FAING IN DUMPHRA		TRAFFIC			
-		8-FOLLOWING TOO CLOSE / ACT	DA PARKED POSITION	16-OPERATING		21 - LYING IN ROADWAY 22 - NCT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL			
, 0 , 8 ,	3 - RAN RED LIGHT	9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED ILLEGALLY	EQUIPMENT		23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOLT 4 - STOP SIGN			
CONTRIBUTING	4 - RAY STOP SIGN	10-IMPROPER PASSING	15 - SWERVING TO AVOID	19-LOAD SHIFT! SPILLING	NG/FALLING/	RCADWAY	2 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	2G-IVPROPER C	ROSSING	99-OTHER IMPROPER ACTION	# of THROUGH LANES				
SEQUENCE	OF EVENTS	12-1mrnoren enontila					ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
- Lagario			EVENTS				4	1 2 - INVOLVED-ACTIVE CROSSING			
1 2 0		6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16-RAILWAY VE	H!CLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
1		7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL	17 - ANIVAL - F		EQUIPMENT	HMIT / M	ON-MOTORIST DIRECTION			
2 0 8	3 - IMMERSION 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12-DOWNHILL RUNAWAY	16-ANIMAL - D 19-ANIMAL - C		23 - STRUCK BY FALLING, SHIFTING CARGO CR	UNII/N	1 - NORTH 5 - NORTHEAST			
	5 - CARGO EQUIPMENT	10-CROSS MEDIAN	13-OTHER NON-COLLESION 14-PEDESTRIAN	20 - MOTOR VE-10	CLEIN	ANYTHING SET IN MOTION BY A MOTER VEHICLE		2 - SOUTH 6 - NORTHWEST			
3	LOSS OR SHIFT		15-PECALCYCLE	TRANSPORT 21 - PARKED MOT		24-OTHER MOVABLE OBJECT	FROM 4 TO				
111			N WITH FIXED OBJECT					4 - WEST E - SOUTHWEST			
4	25 - IMPACT ATTENUATOR / CRASH CUSHION	31-GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB		50 - WORK ZONE MAINTENANCE		9 - OTHER / JNKNOW\			
ATT.	26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38-OVERHEAD SIGN POST 39-LIGHT/LUMINARIES	44 - DITCH 45 - EMBANKMEN	NT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED			
51	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL	SUPPORT	46 - FENCE	,	52-BUILDING	, 0 . 1 . 5	1 - STATED / ESTIMATED SPEED			
	28 - BRIDGE PARAPET	BARRIER 33 - MEDIAN CONCRETE	49 - UTILITY POLE 41 - OTHER POST, POLE	47 -MAILBOX		53 -TUNNEL	0 1 , 5	2 - CALCULATED / EDR			
6	29-BRIDGE RAIL	BARRIER	OR SUPPORT	46 - TREE 49 - FIRE - YDRAI	NT	54-OTHER FIXED GELECT 99-CTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
4	30-GUARDRAIL FACE	36-WEDIAN OTHER BARRIER	42 - CULVERT	A THE STURM			2 -				

OHIO DE	ONE DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER						
									2,0,2,1,-,0,0,0,4,4,8,3,					
UNIT#	MOTT, DAVID, JOHN								DATE OF BIRTH AGE GENDER					
0,1	STREET CITY, STATE, ZIP									0 4 / 0 3 / 1 9 5 8 6 2 M				
_	694 DOMINIC DR ,Cuyahoga Falls ,OH 44223								CONTACT PHONE - IN					
INJURIES	S INJURED EMS AGENCY (NAME) INJURED TAKEN 10: MEDICAL FACILITY (NAME, CITY: SAFETY EQUIPMENT USED USED OF A SECOND								DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED					
	<u> </u>									IELMET 0 1	1	_1_	1	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	ISE CHÂ	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION	NUMBER		
	ENDORSEMENT	RESTRICTION		IVER	ALC	OHOL / DRUG SUSPI	ECTED	CONDITION	A	LCOHOL TEST	DR	UG TEST(S		
	SELECT UP TO 2		8 Y	STRACTED		ALCOHOL MAR			STATUS	TYPE VA UL	STATUS TY	PE RESUL		
2				1		THER DRUG		1	1	1	1 1			
UNIT #	NAME: LAST,	FIRST, MIDDLE ERLING, JESSIC	T A							DATE OF BIRTH		AGE	GENDER	
	STREET, CITY, ST		A, L						0 2	/ 0 2 / 1	980	4 1	F	
=		E ,Franklin Twp	OH 4	4266					CONTAC	T PHONE - IN L E A EA				
INJURIES		EMS AGENCY NAME)			TAKENT	MEDICAL FACILITY	Number of	SAFETY EQUIPMENT		COMPLIANT SEATING POSITIO	N AIR BAG USAI	E EJECTION	TRAPPED	
5	BY							USED 0 4		ELMET 0 , 1	1	1	1	
OL STATE	OPERATOR L	ICENSE NUMBER		1	SE CHA	RGED	LOCAL	OFFENSE DESC			CITATION	NUMBER		
OL STATE OL O, H	ENDORSEMENT			333.			X	Maximu	_		61428			
OL CLASS	SELECT UP TO 2	RESTRICTION		IVER TRACTED				CONDITION	STATUS	TYPE VALUE	DRUG TEST(S) STATUS TYPE R U T			
_1					7 OTHER DRUG			1	1	1	1 1			
UNIT#	NAME: LAST, I	FIRST, MIDDLE					-			DATE OF BIRTH		AGE	GENDER	
ADDRESS	STREET, CITY, ST	ATT TID						Auto		(, , / ,	اسيسا			
M ADDRESS:	STREET, GITT, ST	AIT,/IP							CONTAC	T PHONE - INCL. E A EA C	ODE			
INJURIES		EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	NAME, CITY	SAFETY EQUIPMENT		SEATING POSITION	N ATD DAR HEAD	E FIFETION	TRAPPED	
ADDRESS:	TAKEN BY							USED		ELMET SEATING FOSTITO	AIR DAG USAG	EJECTION	IKAPPEU	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL OFF			OFFENSE DESC	RIPTION		CITATION	NUMBER		
3		T		L										
OL CLASS	ENDORSEMENT SE	RESTRICTION		VER TRACTED		OHOL / DRUG SUSPE		CONDITION	STATUS	COHOL TEST	STATUS TYP	JG TEST(S	FECTORIO	
		ے تیا لیے				THER DRUG								
INJU 1-FATAL	RIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DEF	AIR BAG	Name of	OL CLASS 1-CLASS A		OL RESTRIC		DRIVER DISTRACT		TEST STA	TUS	
2 - SUSPECTED S		(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOY	ED FRONT		2 - CLASS E		2 D INTRASTATE		1 - NOT DISTRACTED 2 - MANUALLY PERATING				
3 - SUSPECTED N 4 - POSSIBLE IN.		3 - FRONT - RIGHT SIDE	3 - DEPLOY		NT / SIDE	3 - CLASS C 4 - REGULAR CLASS		3 ORRECTIVE LEI	NSES	ELECTRONIC OMMUN DEVICE (TEXTIN TYP	INC 3-10	ST		
5 - NO APPARENT		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	LICABLE (OHIO = D)			5 EXCEPT CLASS A B S		DIALING) 3-TALKING N HANDS-FR	A TO				
INJURED 1	TAKEN BY	5 SECOND - MIDDLE	9-DEPLOY	AENT UNKNOWN 5 M/C MOPED ONLY 6 - NO VALID OL			6 EXCEPT CLASS A & LASS B BUS		COMMUNICA ION DEVI	CE 5-TE	ST IKNO			
1 - NOT TRANSPO		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE		IECTION.			ENT	7 EXCEPT TRACT I	R TRAILER	4 - TALKING ON HAND-HEL COMMUNICATION DEVI	CE ALC	COHOL TES	TTYPE	
2 - EMS		(MOTORCYCLE SIDE CAR)	1 - NOT EJE	ECTION OL ENDORSEMENT TED H-HAZMAT			8-INTERMEDIATE LICENSE RESTRICTIONS		5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE	AN 1 NO				
3 POLICE 9-OTHER/UNK	HO HAN	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	2 PARTIAL	Y EJECTED M MOTORCYCLE			9 LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER		2 BLOOD 3 URINE			
		10 - SLEEPER SECTION OF TRUCK CAB	3-TOTALLY 4 NOT APP			P - PASSENGER N - TANKER		10 LIMITED TO DAYL	IGHT ONLY	7 - OTHER DISTRAC ION INSIDE THE VEHICLE	4 BR			
1 - NONE USED	LUIPMENT	11 - PASSENGER IN OTHER	T	RAPPED	120	Q - MOTOR SCOOTER		11 - LIMITED T EMP 12 - LIMITED - OTHER		8 OTHER DISTRACTION O THE VEHIC E	UTSIDE 5 OT	HER		
	ULDER BELT ONLY USED ENCLOSED CARGO AREA (NON-TRAILING UNIT BUS, 1 - NOT TRAPPED				File.	R - THREE-WHEEL MOT S - SCHOOL BUS	ORCYCLE	13-MECHANI AL DE	- MECHANI AL DEVICES		The second second	RUG TEST	TYPE	
	P BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATE OULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHANIC			ITED BY ICAL MEANS		T - DOUBLE & TRIPLE T	RAILERS	(SPECIAL BRAKES, HAND CONTROLS OR OTHER		CONDITION		1 NONE 2 BL D		
5 - CHILD RESTR	RESTRAINT SYSTEM - CARGO AREA 3 - FREED BY			Y Chanical Mi	ANS	X - TANKER / HAZMAT		ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL		INE		
6 - CHILD RESTR	AINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR		Trans	131	GENDER F-FEMALE		15 MOTOR VEHICLES AIR BRAKES	TUOHTIW	3 - EMOTIONAL (SC 0,			
REAR FACING 7 - BOOSTER SEA		(NON-TRAILING UNIT) 15 - NON-MOTORIST				M-MALE		16 OUTSIDE MIRROR		4- ILLNESS	The same of the sa	G TEST RE Phetamines	SULT(S)	
8 - HELMET USE	D	99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 PROSTHETIC AID		5- FELL ASLEEP FAINTED FATIGUED ETC	2 BA	RBITURATES		
9 - PROTECTIVE I								18- THER		6- UNDER THE INFLUENCE	4 4	NZODIAZEPINE NNABINOIDS	S	
10 - REFLECTIVE										OF MEDICATIONS DRUG /ALCOHOL	13	AINE		
11 - LIGHTING - PI / BICYCLE ON										9- OTHER / UNKNOWN	6 OP 7 OTI	IATES / OPIOIOS	S	
99 - OTHER / UNKN	NOWN		AL PERSON								GA IVE RESUL	TS		

OF PUE	LIC SAFETY	CCUPANT	/WITHE	SS ADDENDU	M			LOCAL REF	ORT NUMBER			
			2,0,2,1,-,0,0,0,0,4,4,8,3,									
UNIT#	NAME: LA	ST, FIRST, MIDDLE						TE OF BIRTH		AGE	GENDER	
Annece	S: STREET, CITY	CTATE TIO										
ADDRES	s. sincer, ciii	, SIATE, ZIP					CONTACT PHON	E - INCLUDE AREA O	CODE			
INJURIES	INJURED	EMS AGENCY (NAME)										
	TAKEN	and Macher Middle		INJURED TAKEN TO: MEDICAL FA	CILITY (NAME, CITY)	SAFETY EQUIPMEN USED	DOT-COMPLIAN	SEATING POSITIO	AIR BAG USAGE	EJECTION	TRAPPE	
UNIT#	NAME: 14	ST, FIRST, MIDDLE	100				MC HELMET		J			
		7,11431,141000					DA	TE OF BIRTH		AGE	GENDER	
ADDRESS	STREET, CITY	, STATE, ZIP						/		11.		
ADDRESS							CONTACT PHON	E - INCLUDE AREA C	3DDE			
	INJURED	EMS ABENCY NAME		INJURED TAKEN TO: MEDICAL FAC	CILITY (NAME, CITY)	SAFETY EQUIPMEN		SEATING POSITION	1	1	1	
	BY				.,	USED	DOT-COMPLIANT	SCALING PUSITION	AIR BAG USAGE	EJECTION	TRAPPED	
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DA	TE OF BIRTH				
							/ /	/		AGE	GENDER	
ADDRESS	STREET, CITY,	STATE, ZIP					CONTACT PHON	E - INCLUDE AREA CO	NDE .			
INJURIES	TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	BY					0320	MC HELMET		ļ			
# TINU	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
ADDDESS	STREET COM							1/1		1 1 1		
ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES	INJURED	EMS AGENCY NAME)										
	TAKEN BY	and Age to Manie		IN UP O TAKEN TO MEDICAL FAC	LITY (NAME, CTTY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	INJU	RIES	SAFETY	EQUIPMENT USED	ST HONDSON	CEATING DOS	MC HELMET					
1 - FATA	AL.		1 - NONE US		The second second	SEATING POS T-LEFT SIDE	IIIUN	17/17/12 13/12/0	AIR BAG US	AGE		
2 - SUS	PECTED SE	RIOUS INJURY		OCCUPANT	(MOT	DRCYCLE DRIV	ER)	1 - NOT DE 2 - DEPLOY				
1500		NOR INJURY		R BELT ONLY USED	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE							
	SIBLE INJU		3 - LAP BELT	R & LAP BELT USED	4 - SECOND - LEFT SIDE 4 - DEPLOYED BOTH							
3 - NU A	PPARENT I	NJURY		STRAINT SYSTEM -	(MOTORCYCLE PASSENGER) FRONT/SIDE 5 - SECOND MIDDLE FANGE AND APPLICABLE							
1 107		TAKEN BY	FORWARD	FACING	5 - SECOND - MIDDLE 5 - NOT APPLICABLE 6 - SECOND - RIGHT SIDE 9 - DEPLOYMENT UNKNOW				LANALON			
1 100 hrs 125 Authorite	TRANSPOR EATED AT SO		6 - CHILD RE REAR FAC	ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE (CADI					
2 - EMS			7 - BOOSTER	R SEAT 8 - THIRD - MIDDLE				1 - NOT EJE	EJECTIO	N		
3 - POLI			8 - HELMET	JSED		RIGHT SIDE PER SECTION O			LLY EJECTE			
9 - OTH	ER / UNKNO	WN	9 - PROTECTI	VE PADS USED (NEES, ETC.)	11 - PASSE	NGER IN OTH	ER ENCLOSED	ED 3- TOTALLY EJECTED				
		DER	10 - REFLECTI		CARGO BUS. PI	CARGO AREA (NON-TRAILING UNIT, 4 - NOT APPLICABLE						
F - FEMA M - MALE			11 - LIGHTING	- PEDESTRIAN	12 - PASSE	2 - PASSENGER IN UNENCLOSED TRAPPED CARGO AREA						
U - OTHE	R/UNKNOV	VN	/ BICYCLE		13 - TRAIL		1 - NOTTRAPPED					
			99 - OTHER / U	NKNOWN		G ON VEHICLE	EXTERIOR 2- EXTRICATED BY MECHANICAL MEANS					
					15 - NON-N	RAILING UNIT)			BY NON-MEC	HANICA	1	
NAME	T LIDET ASSE					R/UNKNOWN		MEANS				
	T, FIRST, MIDDL	, BRIAN, A						OF BIRTH		AGE	GENDER	
	STREET, CITY, S							9, / 19		1	M	
			W,MASSI	LLON, ,OH 4464	7		CONTACT PHONE	INCLUDE AREA CODE				
NAME: LAS	T, FIRST, MIDDL	E	7 - 10 - 10				DATE	OF BIRTH		105		
							DATE OF BIRTH AGE GENDER					
ADDRESS:	ADDRESS: STREET, CITY, STATE, 71P						CONTACT PHONE - INCLUDE AREA CODE					
NAME-140	T, FIRST, MIDDL											
INAME: LAS	i, rikal, MHDDL	C.					DATE	OF BIRTH		AGE	GENDER	
ADDRESS:	STREET, CITY, S	TATE, ZIP					CONTACT					
						1	CONTACT PHONE -	INCLUDE AREA CODE				
V 9355 AU4	240 500									1		