OHIO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER*				
		The second second	OCAL INFORMA				2,0,2,0,-,0,0,0,1,8,1,6,9,					
PHOTOS TAKEN		OTHER F	REPORTING AGE	NCY NAME*			HIT/SKIP NUMBER OF UNITS UNIT IN ERROR					
SECONDARY CRASH		City of Kent Police  O, 6, 7, 0					1 - SOLVED 0 2 98 - ANIMAL 2 - UNSOLVED 0 2 99 - UNKNOW					
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*								CRASH DATE /		SH SEVERITY - FATAL		
3-1	VILLAGE Ker						1119	11052020		5	- SERIOUS INJURY	
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2-SOUTH LOCATION ROAD NAME							ROAD TYPE LATITUDE D				SUSPECTED	
	AACOL	PROSPE	CT			ST	4,1,15,1,9,9,6 3-MINOR IN					
ROUTE TYPE ROUTE NU	SOUTH		AD NAME (RO	AD, MILEPOST, H	OUSE #)	ROAD TYPE	LONGITUDE D	4 .	4 - INJURY POSSIBLE			
		EAST 2	214					-8 <sub>1</sub> 1 <sub>10</sub> 3 <sub>1</sub> 6 <sub>1</sub> 7	4 3 6	5 -	PROPERTY DAMAGI	
REFERENCE POINT	DIRECTION FROM REFERENCE		ROUTE TYP			ROAD TYPE	1/42		INTERSECTION	RELATED		
3 2-MILE POST	1 - NORT 2 - SOUT	ii l	NTERSTATE ROL	100	AL - ALLEY AV - AVENUE		RD - ROAD SQ - SQUARE	WITHIN INTE	RSECTION OR ON	APPROA	СН	
3-HOUSE #						Mary Department of the	ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHE				
DISTANCE FROM REFERENCE	DISTANCE	CR - N	- NUMBERED COUNTY ROUTE - NUMBERED TOWNSHIP ROUTE - NUMBERED TOWNSHIP ROUTE - NEIGHTS - HEIGHTS				E - TERRACE					
PROBERENCE	UNIT OF MEASURE 1 - MILE	S TR-N					L - TRAIL VA - WAY					
	2-FEET 3-YARD					PL - PLACE						
1 - ON ROADWAY 2 - ON SHOULDER 10 - DRIVEWAY/ALLEY ACCESS 3 - IN MEDIAN 11 - RAILWAY GRADE CROSSING 4 - ON ROADSIDE 12 - SHARED USE PATHS OR 5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 7 - ON RAMP 14 - TOLL BOOTH						5 - BACKIN <mark>G</mark> 5 - ANGLE 7 - SIDESWIPE, SAM	EAR-TO-REAR  ACKING  NGLE  IDESWIPE, SAME DIRECTION  IDESWIPE, OPPOSITE DIRECTION  THER / UNKNOWN  ACKING  1 - NORTH  2 - SOUTH  3 - EAST  4 - WEST  3 - DIVIDE  4 - DIVIDE  (ANY T				CLUSH MEDIAN ) DEPRESSED MEDIAN RAISED MEDIAN E)	
8-OFF RAMP	99-0	THER / UNK	NOWN						9-0	THER/UN	KNOWN	
UNORKERS PRESENT  LAW ENFORCEMENT PRESENT  LAW ENFORCEMENT PRESENT  1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 4					ON OF CRASH IN WO  - BEFORE THE 1ST' WARNING SIGN  - ADVANCE WARNIN  - TRANSITION AREA  - ACTIVITY AREA  - TERMINATION AR	WORK ZONE NG AREA	CONTOUR  1 1-STRAIGHT LEVEL 2-STRAIGHT GRADE 3-CURVE LEVEL 4-CURVE GRADE	1 - DRY 2 - WET 3 - SNOW 4 - ICE	NS	2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK		
3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - FOG, SMOG, SMOKE 8 - BLOWIN 4 - RAIN 9 - FREEZI						CROSSWINDS G SAND, SOIL, DIRT NG RAIN OR FREEZ / UNKNOWN		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN		4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOW	
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Jnit #2 was ba	acking out	of the	driveway	at 214	S				deleteral de la companya de la compa		direction with an "N" on the	
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Unit #2 back	ed into the	front (	of Unit #1	l. Ther	е	7						
were no injuries.						*						
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CRASH REPORTED	DATE /TIME		ICDATOU DATE	ITTACE.	-	DD(AL DATE (TITLE	1					
			ISPATCH DATE			RIVAL DATE / TIME		SCENE CLEARED	*		POLICE AGENCY	
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TOTAL TIME OTHER TOTAL OFFICER'S NAME* Oldham, Peter Drake						Nelson, Josh				SUPPLEMENT		
			S BADGE NUMBE	CORRECTION OR ALT TO AN EXISTING REPORT SEE								
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**LOCAL REPORT NUMBER** 2,0,2,0,-,0,0,0,1,8,1,6,9 OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) OWNER PHONES INC. AND AREA COME AND AREA OF THE AREA O DAMAGE 0 1 SMITH, BRANDI, M DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP ( SAME AS DRIVER 1 - NONE 3 - FUNCTIONAL DAMAGE 122 POE LN ,XENIA ,OH 45385 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 # **VEHICLE IDENTIFICATION #** INDICATE ALL THAT APPLY VEHICLE YEAR VEHICLE MAKE 1, HGCT, 1, B, 8, 3, GA0, 1, 1, 4, 8, 1, O H JAV9742 2 0 1 6 Honda INSURANCE COMPANY INSURANCE VERIFIED INSURANCE POLICY # COLOR VEHICLE MODEL Ohio Mutual Ins AA0 0027671 00 BLK CIVIC TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK MATERIAL RELEASED CLASS # PLACARD ID # 1 - ≤10K LBS DEVICE HIT/SKIP UNIT 2 - 10,001 - 26K LBS 0,1PLACARD 1 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTGRCYCLE 2-WHEELED 12-GOLF CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24-WHEELCHAIR (ANY TYPE) 14-SINGLE UNIT TRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEWI-TRACTOR 21 - HEAVY EQUIPMENT 26-BICYCLE 5 - CARGO VAN BICYCLE 16-FARM FOULPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKID (ATV/UTV) # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 0 4 - HIGH AUTOMATION 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS 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 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 12 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER B - POLE 12-CONCRETE MIXER 0,1, INOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY . 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99-OTHER/UNKNOWN 0 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99 - OTHER LUNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT - NO DAMAGE | 0 1 - UNDERCARRIAGE [ 14 ] 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAWCROSSING ISLAND 12-FIRST RESPONDER CROSS WALK 4 - MIDBLOCK - MARKED AT INCIDENT SCENE 7 - SHOULDER / ROADSIDE 10-DRIVEWAY ACCESS T-TOP ( 13 ) T-ALL AREAS [15] NON-MOTORIST 2-INTERSECTION-UNMARKED CROSSWALK 99 - OTHER / UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CRESSWALK 5 -TRAVEL LANE -OTHER LOCATION TRAILS -UNIT NOT AT SCENE [16] 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT 2 - NON-COLLISION OR LEAVING VEHICLE 2 - BACKING 8 - ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING 1 0 3 - CHANGING LANES 4 3-STRIKING SPECIFIED LOCATION 19-STANDING 0 - NO DAMAGE 14 - UNDERCARRIAGE 9 - LEAVING TRAFFIC LANE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 15 - WALKING, RUNNING 1,1, 10-PARKED 26 - OTHER NON-MOTORIST 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN JOGGING, PLAYING DIAGRAM 21 - STANDING OUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 16-WORKING 13 - TOP & STRUCK IN TRAFFIC DISABLED VEHICLE 6 - MAKING LEFT TURN 9-OTHER / UNKNOWN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 12-DR VERLESS TRAFFIC 1-NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD 8-FOLLOWING TOO CLOSE / ACDA 19-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE EQUIPMENT 0,1 23 - OPENING DOOR INTO ILLEGALLY 2 - TW0-WAY 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 SPILLING 6 - NO CONTROL 11 - DROVE OFF ROAD 99 - OTHER IMPROPER ACTION 16 - WRONG WAY 20 - IN PROPER CROSSING 6 - IMPROPER TURN 12 - IMPROPER BACKING # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD SEQUENCE OF EVENTS 1 - NOT INVOLVED 2 2 - INVOLVED-ACTIVE CROSSING **EVENTS** 1 2 0 1 - OVERTURN/ROLLCVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTER! INF -16 - RAILWAY VEHICLE 22 - WCRK ZONE MAINTENANCE 3 - INVOLVED-PASSIVE CROSSING 2 - FIRE/EXP\_OSION OPPOSITE DIRECTION OF 7 - SEPARATION OF UNITS 17 - AHIMAL - FARM EQUIPMENT TRAVEL 3 - IMMERSION 23-STRUCK BY FALLING. UNIT / NON-MOTORIST DIRECTION 8 - RAN CFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGO CR J 4 - JACKKNIFF 9 - RAN OFF ROAD LEFT 19-ANIMAL - OTHER 1 - NORTH 5 - NORTHEAST 13-OTHER NON-COLLISION ANYTHING SET IN MOTION 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 2 - SOUTH 6 - NORTHWEST 10 - CROSS MEDIAN BY A MOTOR VEHICLE. 14-PEDESTRIAN TRANSPORT FROM 2 TO 1 LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24-OTHER MOVABLE CRIECT 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST B - SOUTHWEST 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 51 - WALL 39-LIGHT/LUMINARIES 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED 34 - MEDIAY GUARDRAIL SUPPORT 45 FENCE 52-BUILDING 27 - BRIDGE PIER OR ABUTMENT 0,0,0 BARRIER 40-UTILITY POLE 47 - MAILBOX 53-TUNNEL 2 - CALCULATED / EDR 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE 29 - BRIDGE RAIL BARRIER OR SUPPORT POSTED SPEED 3 - UNDETERMINED 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 30-GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 2 5 1 MOST HARMFUL EVENT



2,0,2,0,-,0,0,0,1,8,1,6,9, OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER OWNED PHONE - THE SECTION AND ADDRESS OF 0 2 CASAMENTO, VINCENT, A DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 214 PROSPECT ST, Kent, OH 44240 1 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE O. H. HYM6864 1,9,XF,C1,F,3,0,HE0,1,7,3,6,1 2.0.1.7 Honda INSURANCE COMPANY INSURANCE VERIFIED **INSURANCE POLICY #** COLOR VEHICLE MODEL **Progressive** 935005262 **GRY** CIVIC TYPE OF USE US DOT # **TOWED BY: COMPANY NAME** COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED INTERLOCK CLASS # PLACARD ID # 1 - <10K LBS HIT/SKIP UNIT DEVICE 2 - 10.001 - 26K LBS 0,1 PLACARD 3 - >26K LBS 11 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) B - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 24-WHEELCHAIR (ANY TYPE) 14-SINGLE UNIT TRUCK 20-OTHER VEHICLE 25 - CTHER NON-MOTORIST UNIT TYPE 4 . PICKUP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26-BICYCLE 5 - CARGO VAN BICYCLE 16-FARM FOUIPMENT 22 - ANIMAL WITH RIDER OF 27 - TRAIN 11 - ALL TERRAIN VEHICLE AYIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17-MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) 00, # OFTRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 0 4 - HIGH AUTOMATION 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 14-FARM 21 - MAIL CARRIER 0,1, 2 - TAXI 7 - BUS - INTERCITY 12-MILITARY 17 - MCWING 99-OT-ER/UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - CTHER 14-PUBLIC UTILITY 19-TOWING 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER B - POLE 12 - CONCRETE MIXER 0,1 INCT APPLICABLE VOTOR VEHICLE CHASSIS 9 - CARGOTANA 13-AUTOTRANSPORTER CARGO 2 - 805 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT 8FD 14-GARBAGE/REFUSE BODY 4 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99-OTHER LIKNOWN 0.0 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99-OTHER/UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING R - TRAILER FOILIPMENT 10 - DISABLED FROM PRIOR 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 CROSS WA < AT INCIDENT SCENE 4 - MODBLOCK - MARKED 7 - SHOULDER / ROADSIDE 13-DRIVEWAY ACCESS -TOP L 13 | -ALL AREAS [ 151 NON-MOTORIST 2 - INTERSECTION - UNMARKED CROSSWALK 99-DTHER UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CRESSWA. 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**LOCAL REPORT NUMBER** 

OHIO DE OF PUBL	ONIO DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER					
UNIT #								2,0,2,0,-,0,0,1,8,1,6,9						
								DATE OF BIRTH AGE GENDER 1 2 0 5 1 9 8 1 3 8 F						
ADDRESS	DRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
		XENIA ,OH 453	85					L						
INJURIES	IES INJURED EMS AGENCY (NAME)				INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED				1791	AIR BAG USAGE	EJECTION	TRAPPED		
OL STATE	OPERATOR	LICENSE NUMBER		0,			OFFENSE DESC	MC HELME	1	1 1 1				
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. 4 .	M				ALCOHOL MARIJUANA			STATUS TYPE	VALUE	STATUS TYPE	RESULT	SELECT UP TO 4		
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ADDRESS:	STREET, CITY, S					-			NE - INCLUDE AREA CO		6	F		
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× _	INJURED TAKEN BY	EMS AGENCY (NAME)					SAFETY EQUIPMENT	DOT-COMPLIA	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
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OMI W	NAME: LASI,	FIK21, MIDDLE						Di	ATE OF BIRTH		AGE	GENDER		
ADDRESS:	STREET, CITY, ST	TATE, ZIP						CONTROL BUCK						
8									CONTACT PHONE - INCLUDE AREA CODE					
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAK	EN TO: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	707.0	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
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OL STATE	TE OPERATOR LICENSE NUMBER			OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	RIPTION		CITATION NU	MBER			
OL CLASS	ENDORSEMENT	RESTRICTION WAS	UPTOS DRIV	ED	AL COLLOL I POLICE CUE			ALCONO.						
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	ALTERNATION AND ADDRESS OF THE PARTY OF THE		The state of the last of the l		OTHER DRUG				•					
1-FATAL	RIES	1-FRONT-LEFT SIDE	1 - NOT DEPL	OYED	OL CLASS 1 CLASS A		OL RESTRICT	TION(S) DR	IVER DISTRACTI	ON TE	ST STATE			
2 - SUSPECTED S		(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYE	D FRONT	2 CLASS B		2 - COL INTRASTATE		OT DISTRACTED IANUALLY OPERATING A	1 - NONE IN 2 - TEST				
	- SUSPECTED MINOR INJURY 2-FRONT - MIDDLE - POSSIBLE INJURY 3-FRONT - RIGHT SIDE		3 - DEPLOYE	D SIDE D Both Front/	3 - CLASS C SIDE 4 - REGULAR CLASS		3 - CORRECTIVE LEN 4 - FARM WAIVER	D	LECTRONIC COMMUNIC Evice (Texting, Typin	TION 2 TEST CINEN CONTANTANTO				
5 - NO APPARENT	- NO APPARENT INJURY 4 - SECOND = LEFT SIDE (MOTORCYCLE PASSENGER)		5 - NOT APPL	ICABLE	(OHO = D)		5 - EXCEPT CLASS A	DUA	DIALING)  3 -TALKING ON HANDS-FREE		4 TEST GIVEN, RESULTS KNOWN			
	INJURED TAKEN BY 5- SECOND - MIDDLE		9 - DEPLOYMENT UNKNOWN 5 - MJC MOPED ON 6 - NO VALID OL				6 - EXCEPT CLASS A & CLASS B BUS	THE RESERVE OF THE PARTY OF THE	OMMUNICATION DEVICE ALKING ON HAND-HELD	5 - TEST GIVEN, RESULTS UNKNOWN				
	NOT TRANSPORTED 6 - SECOND - RIGHT SIDE  /TREATED AT SCENE 7 - THIRD - LEFT SIDE		EJECTION OL ENDORSE			MENT	7 - EXCEPT TRACTOR	TRAILER C	DMMUNICATION DEVICE	ALCO	ALCOHOL TEST TYPE			
2 - EMS 3 - POLICE	8 THES MADE		1 - NOT EJEC		H - HAZMAT	H - HAZMAT RESTRICT			THER ACTIVITY WITH A Lectronic Device	1 - NONE				
	- OTHER / UNKNOWN 9-THIRD - RIGHT SIDE		2 - PARTIÁLL 3 - TOTALLY E			M - MOTORCYCLE P - Passenger		The same of the sa	6 - PASSENGER 7 - OTHER DISTRACTION		2 BLOOD 3 Urine			
SAFETY EQUIPMENT 0FTRUCK CAB		4 NOT APPL	ICABLE	N - TANKER	N - TANKER		IGHT ONLY	INSIDE THE VEHICLE  8 - OTHER DISTRACTION OUTSIDE		4 BREATH				
1 - NONE USED	- NONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		TR	Q - MOTOR SCOOTER  R - THREE WHEEL MOT	TORCYCL F	11 - LIMITED TO EMP. 12 - LIMITED - OTHER	TI .	HE VEHICLE						
	- SHOULDER BELT ONLY USED (NON-TRAILING UNIT: BUS, - LAP BELT ONLY USED PICK-UP WITH CAP)		1 - NOTTRAPI 2 - EXTRICAT		S - SCHOOL BUS	S - SCHOOL BUS		VICES 9-0	9-OTHER/UNKNOWN		DRUG TEST TYPE  1 NONE			
	SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA		MECHANICAL MEANS 3 - FREED BY		X-TANKER/HAZMAT	T DOUBLE & TRIPLE TRAILERS  X-TANKER / HAZMAT		HER	CONDITION  1 - APPARENTLY NORMAL		2 - BL00D			
FORWARD FAC	FORWARD FACING 13-TRAILING UNIT		NON-MECHANICAL MEANS			GENDER		ES ONLY 2 PH	2 PHYSICAL IMPAIRMENT		3 URINE 4-OTHER			
6 - CHILD RESTRA REAR-FACING		14 RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			F-FEMALE		15 - MOTOR VEHICLES AIR BRAKES 16 - OUTSIDE MIRROR	48	AOTIONAL (E.G., DEPRESS Ervadisturbed)	and the second second	EST RESU	ULT(S)		
7 - BOOSTER SEA	OSTER SEAT 15 - NON-MOTORIST				M - MALE U OTHER / UNKNOWN	The second secon			4- ILLNESS 5 - FELL ASLEEP FAINTED,		1 - AMPHETAMINES			
9 - PROTECTIVE F	PADS USED	· · · MITTER / DISKITUTE			- The Community		17 - PROSTHETIC AID 18 - OTHER	FA	TIGUED, ETC.	2 BARBI 3 BENZO	TURATES DIAZEPINES			
(ELBOW, KNEE 10 - Reflective (								OF	DER THE INFLUENCE MEDICATIONS DRUGS		STATE OF STA			
11 - LIGHTING - PE / BICYCLE ONL	EDESTRIAN								LCOHOL Her/Unknown	5 - COCAII 6 - OPIATE	NE S/OPIOIDS			
99 - OTHER / UNKN					The same of the					7-OTHER				
CVGGGG GUAN	1 4/40 5700 450	01	Contract of the Contract of th	-	-1-	11 11 11	Chicago Contract	and the second	3. 6 - 3	8 NEGAT	IVE RESULTS	32 Clot		