OHIO DEPARTMENT TRAFFIC CRASH	REPORT *DENOTES MANDATORY	FIELD FOR SUPPLEME	NT REPORT	L	OCAL REPORT NUMBE	R*		
PHOTOS TAKEN OH-2 OH-3	2,0,2,1,-,0,0,0,1,0,5,5,0,							
SECONDARY CRASH	REPORTING AGENCY NAME*	1	NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR		
PRIVATE PROPERT		<b>.</b> 0 <sub>1</sub> 6	5 <sub>1</sub> 7 <sub>1</sub> 0 <sub>1</sub> 3 <sub>1</sub>	1 - SOLVED	0,2	1 98 - ANIMAL 99 - UNKNOWN		
1-CITY	ITY, VILLAGE, TOWNSHIP*			CRASH DATE / T	_	RASH SEVERITY 1 - FATAL		
3-TOWNSHIP	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DEG		2 - SERIOUS INJURY SUSPECTED		
2-SOUTH	RIVER					3 - MINOR INJURY		
1 11231	REFERENCE ROAD NAME (ROAD, MILEPOS	T HUIISE #/	S T ROAD TYPE	LONGITUDE DE		SUSPECTED 4 - INJURY POSSIBLE		
2- SOUTH 3- EAST	250	1,110032 #7	RUADITIE			5 - PROPERTY DAMAGE		
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE		[8 <sub>1</sub> 1 <sub>10</sub> [3 <sub>1</sub> 6 <sub>1</sub> 1 <sub>1</sub>		ONLY		
1 - INTERSECTION 1 - NORTH II	- INTERSTATE ROUTE(TP) AL - ALLEY	HW-HIGHWAY RD	- ROAD		INTERSECTION RELAT RSECTION OR ON APPRO	1		
3-HOUSE # 3-EAST	S-FEDERAL US ROUTE AV - AVENUE BL - BOULEVA		- SQUARE - STREET					
DISTANCE DISTANCE C	CR - CIRCLE	OV - OVAL TE	- TERRACE	WITHIN THE	ROADWAY	MBER OF APPROACHES		
FROM REFERENCE UNIT OF MEASURE 1 - MILES T 2 - FEET	R - NUMBERED TOWNSHIP DR - DRIVE		TRAIL A - WAY					
3-YARDS	ROUTE HE - HEIGHTS	PL - PLACE		ROADWAY DIV	IDED			
LOCATION OF FIRST HARMFUL EVI 1 - ON ROADWAY 9 - CROSSOV		NASH COLLISION/IMPACT	Т	DIRECTION OF TRAVEL		AN TYPE		
.0.1. 2-ON SHOULDER 10-DRIVEW	Y/ALLEY ACCESS BETWEEN	5 - BACKING		1 - NORTH 1 2 - SOUTH	1 - DIVIDED	FLUSH MEDIAN		
4 - ON ROADSIDE 12-SHARED	GRADE CROSSING VEHICLES IN TRANSPORT	6 - ANGLE 7 - SIDESWIPE, SAME!	DIRECTION	3- EAST	2-DIVIDED	FLUSH MEDIAN		
5-ON GORE TRAILS 6-OUTSIDE TRAFFIC WAY 13-BIKE LA	2 - REAR-END 3 - HEAD-ON	8 - SIDESWIPE, OPPOSI		4-WEST	1	, DEPRESSED MEDIAN , RAISED MEDIAN		
7 - ON RAMP 14-TOLL BO	тн	3 - OTHER / BINKNOW!	IV.		(ANY TY	PE)		
O-OT KAMI								
	- LANE CLOSURE LOCA	TION OF CRASH IN WOR 1 - BEFORE THE 1ST W			CONTOUR CONDITIONS SUF			
	- LANE SHIFT/CROSSOVER - WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNING	AREA	1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE				
LAW ENFORCEMENT PRESENT	OR MEDIAN  - INTERMITTENT OR MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA		2 - STRAIGHT GRADE 2 - WET 2 - BLAC				
	- OTHER	5 - TERMINATION AREA	A		3 - SNOW	BITUMINOUS, ASPHALT		
LIGHT CONDITION	WEATHER				4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK		
1 - DAYLIGHT 1 2 - DAWN/DUSK	1-CLEAR 6-SNOV				OIL, GRAVEL	4 - SLAG, GRAVEL, STONE		
3 - DARK - LIGHTED ROADWAY	2-CLOUDY 7-SEVE	ERE CROSSWINDS VING SAND, SOIL, DIRT, S	snow		6 - WATER (STANDING, MOVING)	5 - DIRT		
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTIN		ZING RAIN OR FREEZIN IER / UNKNOWN	IG DRIZZLE		7 - SLUSH	9 - OTHER/UNKNOWN		
9-OTHER/UNKNOWN					9 - OTHER/UNKNOWN			
NARRATIVE					Á	Indicate the north		
UNIT 2 WAS TRAVELING	ORTHBOUND ON				A	an "N" on the compass diagram.		
RIVER ST. IN FRONT OF	250 RIVER ST. IN							
THE LEFT LANE. UNIT 1	WASALSO							
TRAVELING NORTHBOU				i (	Z			
THE RIGHT LANE ALON					VOT TO S	CALE		
1 MADE AN UNSAFE LAN		_	1					
ATTEMPTED TO MERGE		RST		RIVER ST.				
2 WAS OCCUPYING, STR		250 POVER ST						
				<u> </u>				
	- APPLICATION OF THE PROPERTY			!				
enacu processos save /	DICDATOLI DATE (TIME	ADDRIVAL TAXABLE STATE						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED D	l Les	REPORT TAKEN BY POLICE AGENCY		
TOTAL TIME   OTHER TO	3   0   2   0   2   1   /   1   9   3   7     0   6   3   Tal   Officer's Name*			6 3 0 2 0 2 1 CER'S NAME*	2,0,2,2	MOTORIST		
1	Hadaway, Joseph		wen, Ja		12	SUPPLEMENT (CORRECTION OR ADDITION		
0 5 4 0 3 0 0	7 5 2 OFFICER'S BADGE NUM			Y OFFICER'S BADGE N	IUMBER*	TO AN EXISTING REPORT SENT TO COPS)		

OHIO DEPARTMENT UNIT **LOCAL REPORT NUMBER** 2,0,2,1,-,0,0,1,0,5,5,0, UNIT # OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER! OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER) DAMAGE 0 1 BIATS, KONNOR, ROSARIO DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER! 1 - NONE 3 - FUNCTIONAL DAMAGE 1384 BUCKINGHAM GATE BLVD, Cuyahoga Falls, OH 44221 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 OH BCH33Z 1 G T G 5 C E A 8 M 1 2 1 6 6 8 2 2 1 0 2 1 **GMC** INSURANCE COMPANY INSURANCE VERIFIED **INSURANCE POLICY #** COLOR VEHICLE MODEL **PROGRESSIVE** 946887269 TAN CANYON TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE City Service 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 PLACARD  $\begin{bmatrix} 0 & 1 \end{bmatrix}$ J 3 - >26K LBS 1 L. T. 7 - MOTORCYCLE 2-WHEELED 1 - PASSENGER CAR 12-GOLF CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBU F 19-BUS (16+ PASSENGERS) 24 - WHEEL CHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNITTRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN BICYCLE 16 - FARM FOILIPMENT 22 - ANIMAL WITH RIDER OF 27 - TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) I # OFTRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS 1 - NONE 6 - PUS - 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 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0 1 CARGO INOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY \* 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99-OTHER/UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING B - TRAILER FOULDMENT 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 CROSSWALK AT INCIDENT SCENE 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10-DRIVEWAY ACCESS -TOP [ 13 ] -ALL AREAS [15] NON-MOTORIST 2 - INTERSECTION - UNMARKED CROSSWALK 99-OTHER/UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS - UNIT NOT AT SCENE [ 16 ] AT IMPACT 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13-NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 3 3-STRIKING 0 3 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE SPECIFIED LOCATION 19-STANDING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 10-PARKED 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 99 - UNKNOWN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING & STRUCK DISABLED VEHICLE IN TRAFFIC 6 - MAKING LEFTTURN 17 - PUSHING VEHICLE 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN 12-DRIVERLESS TRAFFIC 1-NONE 7 - LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL 8 - FOLLOWING TOO CLOSE / ACDA PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAILURE TO YIELD 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 3 - RAN RED LIGHT 14-STOPPED OR PARKED EQUIPMENT 9 - IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 0 9 2 - TW0-WAY 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19-LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY CONTRIBUTING 5 - UNSAFE SPEED CIRCUMSTANCES 5 - UNSAFE SPEED 15 - SWERVING TO AVOID 3 - FLASHER 6 - NO CONTROL SPILLING 99 - OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING 6-IMPROPERTURN 12-IMPROPER BACKING # of THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 2 - INVOLVED-ACTIVE CROSSING EVENTS 1 2 0 1 - OVERTURN/ROLLGVER
2 - FIRE/EXPLOSION 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM **EQUIPMENT** TRAVEL 23-STRUCK BY FALLING, **UNIT / NON-MOTORIST DIRECTION** 3 - IMMERSION 18-ANIMAL - DEER B - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 19-ANIMAL - OTHER 1 - NORTH 5 - NORTHEAST J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 6 - NORTHWEST 2 - SOUTH 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT 2 \_\_ то \_\_1\_\_\_ LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24-OTHER MOVABLE OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST B - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL 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 51 - WALL 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 46 - FENCE 27 - BRIDGE PIER OR ABUTMENT <u>0</u>,2,0, RARRIER 40 - UTILITY POLE 53-TUNNEL 2 - CALCULATED / EDR 47 - MAIL BOX 28 - BRIDGE PARAPET

54 - OTHER FIXED OBJECT

99 - OTHER / UNKNOWN

POSTED SPEED

\_2 , 5 ,

29 - BRIDGE RAIL

30 - GUARDRAIL FACE

☐ FIRST HARMFUL EVENT

35 - MEDIAN CONCRETE

36 - MEDIAN OTHER BARRIER

BARRIER

41 - OTHER POST, POLE

OR SUPPORT

42 - CULVERT

1 MOST HARMFUL EVENT

48-TRFF

49-FIRE HYDRANT

3 - UNDETERMINED

LOCAL REPORT NUMBER

						Z U Z I I - I	0,0,0,1,0,5,5,0,
UNIT #	OWNER NAME: LAST, FIRE MERCURY, MONI	_	R1	OWNER PHONE: N	TE SEES FRONT / TO F . WE -C OBTINE B)		DAMAGE
	DDRESS: STREET, CITY, STATE	<del>-</del> /		L		1 - NONE	3 - FUNCTIONAL DAMAGE
1	NS CT ,Kent ,OH 44					3 2- MINOR D	
COMMER	CIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	R PHONE: INCLUDE AREA CODE	1	9 - UNKNOWN
							DAMAGED AREA(S)
LP STATE	LICENSE PLATE #		LE IDENTIFICATION #	VEHICLE YE		INDI	CATE ALL THAT APPLY
OH	JKJ2451		F <sub>1</sub> K <sub>1</sub> 7 <sub>1</sub> C <sub>1</sub> U <sub>1</sub> 5 <sub>1</sub> 2 <sub>1</sub> 2 <sub>1</sub>				12
X INSURA VERIFI	NCE INSURANCE COMP ED PROGRESSIVE		INSURANCE POLICY # 940162044	WHI	CAMRY	12	12
	TYPE OF USE	-	US DOT #	TOWED BY: COMPAN		10 11 1	10 11 2
COMME		IN EMERGENCY RESPONSE	1 1 1 1 1 1	TOTAL OF THE STATE		9 9 3	3 9 9 3
INTER	lock		EHICLE WEIGHT GVWR/GCWR		OUS MATERIAL	8 4 -	
DEVIC	E     HIT/SKIP UNI	r	1 - ≤10K LBS. 2 - 10,001 - 26K LBS	RELEASED	CLASS # PLACARD ID #	B 7 5 5	4 B 7 5 4
		0,3	3 - >26K LBS.	PLACARD		7 6 5	11 12 7 6 5
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	40.0	12
0_1	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNITTRUCK	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	15-SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26-BICYCLE	9	0 0 3 3
	5 - CARGO VAN	BICYCLE  11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN	\ \—	• • • •
	6 - VAN (9-15 SEATS)	(ATV/UTV)	17 - MOTORHOME	Animat-nuamu aeuicce	99 - UNKNOWN OR HIT/SKIP	8	< 7 5 × 4
	# of TRAILING UNITS					12	5 11 12
	WAS VEHICLE OPERATING IN AU	•		3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	12	, 12
2 .	MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK		1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION		10 11	10 11 1
لــــــا	163 2-NO 7-018EK/UNK	NODE LEVEL	a a	5 - FULL AUTOMATION		9 9 3	3 9 9 3
	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4 -	
0 1	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99-OTHER/UNKNOWN	B 7 5	4 8 7 4
SPECIAL	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	9 - BUS - SHUTTLE 9 - BUS - OTHER	13-POLICE 14-Public Utility	18-SNOW REMOVAL 19-TOWING		7 5	7 6 5
FUNCTION	5 - BUS -TRANSIT/COMMUTER		15-CONSTRUCTION EQUIPMENT				
	1 - NO CARGO BODYTYPE	3 - VEHICL FTOWING ANOTHE		B - POLE	12 - CONCRETE MIXER		12 12 12
0 1	/ NOT APPLICABLE	MOTOR VEHICLE	CHACCCC	9 - CARGOTANK	13 - AUTO TRANSPORTER	12	
CARGO BODY	2 - BUS	4 - LOGGING		10-FLAT BED	14-GARBAGE/REFUSE	R MAR.	
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99-OTHER/UNKNOWN	,600,	9 g T 3 9 🐯 3
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6	00
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEI EUTITE	ACCIDENT		□- NO DAMAGE	[0] UNDERCARRIAGE [14]
	1 - INTERSECTION – MARKED CROSSWALK	3 - INTERSECTION - OTHER		9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER		_
NON-MOTORIST	2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	AT INCIDENT SCENE 99-OTHER / UNKNOWN	☐-TOP [13]	- ALL AREAS [15]
LOCATION AT IMPACT	CROSSWALX	5 - TRAVEL LANE - OTHER LOCATE		TRAILS	,, others armoun	□ - UA	IIT NOT AT SCENE [ 16 ]
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING		
. 4	2 - NON-COLLISION	2 - BACKING		14 - ENTERING OR CROSSING	OR LEAVING VEHICLE		AL POINT OF CONTACT
ACTION	3-STRIKING UII	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19 - STANDING 20 - Other Non-Motorist	0 - NO DAM/	AGE 14 - UNDERCARRIAGE R TO UNIT 15 - VEHICLE NOT AT SCENE
ACTION	5 - BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING	10 - PARKED 11 - Slowing or Stopped	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAG	
	& STRUCK	6 - MAKING LEFT TURN	IN TRAFFIC	16-WORKING	DISABLED VEHICLE	13 - TOP	
	9-OTHER/UNKNOWN		12-DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC
		7 - LEFT OF CENTER	DADLED BOCKTON	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	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 - ROUNDABOUT 4 - STOP SIGN
0 1	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY	19-LOAD SHIFTING/FALLING/	23 - GPENING DOOR INTO ROADWAY	12 - TW0-WAY	6 2 - SIGNAL 5 - YIELD SIGN
CONTRIBUTING CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL
	6-IMPROPERTURN	12 - IMPROPER BACKING		20 - IM PROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
SEQUENCE	OF EVENTS					2	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING
11 2 1 0 1	1 - OVERTURN/ROLLCVER	6 - EQUIPMENT FAILURE	EVENTS 11-CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		2 - INVOLVED-PASSIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1 2 0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	00.000177.0107.07100.00	17 - AHIMAL — FARM	EQUIPMENT		
21 1	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12 DOWNHILL BUNAWAY	18-ANIMAL - DEER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / N	DN-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST
2[	4 - JACKKNIFE 5 - CARGO / EQUIPMENT	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	13-OTHER NON-COLLISION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	ANYTHING SET IN MOTION By a motor vehicle	_	2 - SOUTH 6 - NORTHWEST
31	LOSS OR SHIFT	31000 1110/1111	14-PEDESTRIAN 15-PEDALCYCLE	TRANSPORT	24 - OTHER MOVABLE OBJECT	FROM 2 TO	
		COLLISIO	ON WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE - STRUCK			4 - WEST B - SOUTHWEST
4	LODACH CHEHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN
	2/ DOIDES OUEDUSAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER		44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL	SUPPORT	46 - FENCE	52 - BUILDING	, 0 . 2 . 0	1 - STATED / ESTIMATED SPEED
	OR REIDER DADAREY	BARRIER 35 - MEDIAN CONCRETE	43 OTHER BOST BOLE	47 - MAILBOX	53 - TUNNEL	0 2 0	2 - CALCULATED / EDR
	29 - BRIDGE RAIL	BARRIER	OR SUPPORT	48-TREE 49-FIRE HYDRANT	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED
4	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	The state of Marie 1	2000	2 5	
	FIRST HARMFUL EVEN	T L MOST	HARMFUL EVENT		The Paris State Commence of the Commence of th	2 5	

OHIO DE OF PUBL	OFF DEPARTMENT MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER						
					KIJ				2.0.	2 1 - 0 0	0,1,	$0_{1}5_{1}5$	0
UNIT#	NAME: LAST, I		DOCADIO						DATE OF BIRTH AGE GENDER				
0 1	STREET, CITY, ST	KONNOR, ROS	AKIU	ARIU					0 8 / 0 9 / 1 9 9 9 2 1 M				
		GHAM GATE B	LVD,	Cuyal	hoga	Falls ,OH	44221	l	CONTACT PHONE - INCLUDE AREA CODE				
INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDI	TAKEN TO	: MEDICAL FACILITY	(NAME:CITY)	SAFETY EQUIPMENT	DOT-COA	SEATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED
	BY L							0,4	MC HEL		1	11	_1
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS		RGED	LOCAL	OFFENSE DESC				NUMBER	
	ENDODOSALSHI			331.0			X	Driving i			15065		
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		TRACTED	_	DHOL / DRUG SUSP LCOHOL MA		CONDITION	STATUS TY	OHOL TEST PE VALUE S	TATUS TY	UG TEST(S PE RESULT	SELECT UP TO 4
4		0,3		1		THER DRUG		1	1 1		1 1	L	н н т
UNIT #	NAME: LAST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER
0,2	MERC	URY, JAZELLE	, <b>A</b>						0 1 /	0 6 / 2 0	0 4	1 7	F
ADDRESS	: STREET, CITY, ST.	•	4.0						CONTACT F	PHONE - INCLUDE AREA CO	DE		1
424 B		T ,Kent ,OH 442	40	т——					1				
ADDRESS 424 B INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDT	AKEN TO	; MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COM		AIR BAG USAI	AIR BAG USAGE EJECTION TRAPPED	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAF	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION	NUMBER	
O, H							CODE						
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		HOL / DRUG SUSP	77	CONDITION	ALC:	OHOLTEST PE VALUE S	DR STATUS   TY	UG TEST(S	SELECT UPTO 4
4 .			BY	1	=	LCOHOL MAI	RUUANA	1 .	1 1		1 1		
UNIT#	NAME: LAST, F	FIRST, MIDDLE				THER DADG				DATE OF BIRTH		AGE	GENDER
									/	/			GENDER
ADDRESS	SS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
OTOR													
ADDRESS INJURIES	INJURED I	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-Cox	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED
<sup>0</sup>	BY							U3EU	MC HELMET				
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAR	RGED LOCAL CODE		OFFENSE DESC	RIPTION		CITATION NUMBER		1
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UPTO3 DRT	VED.	41.00	Wal I Balla cues			AI C	OHOL TEST		UG TEST(S	
OL OLKSS	SELECT UP TO 2	RESTRICTION SELECT	DIS	TRACTED		DHOL / DRUG SUSPI	RIJUANA	CONDITION	STATUS TY		TATUS TY		SELECT UP 104
			ے اب		01	THER DRUG		ļ L		•			
INJU 1-FATAL	JRIES	SEATING POSITION  1-FRONT-LEFT SIDE	A 1 - NOT DEP	IR BAG		OL CLASS	S S	OL RESTRIC		DRIVER DISTRACT		TEST STA	TUS
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOY			2-CLASS B		2 - CDL INTRASTATI	COUNTS CITAL	1 - NOT DISTRACTED 2 - MANUALLY OPERATING	AN 2-TI	ONE GIVEN Est refused	
3 - SUSPECTED 4 - POSSIBLE II		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYI	ED SIDE Ed both fro	NT / CIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE LE	NSES	ELECTRONIC COMMUNIC DEVICE (TEXTING, TYP)	No 3-11	EST GIVEN, CON Ample/Unusa	
5 - NO APPAREN		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	COLUMN TO SERVICE	MILZINE	(0HI0 = D)		4 - FARM WAIVER 5 - EXCEPT CLASS A	A BUŜ	DIALING)  3 -TALKING ON HANDS-FRE	A T1	EST GIVEN, RES	The free of the
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOYI	MENT UNKNO	WN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS	l .	COMMUNICATION DEVIC	E 5-TI	EST GIVEN, RES Nknown	ULTS
1 - NOT TRANSF		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE		ECTION		OL ENDORSEI	MENT	7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE	E AL	COHOL TES	ST TYPE
2 - EMS		(MOTORCYCLE SIDE CAR)	1 - NOT EJE	The second second		H - HAZMAT	WENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY WITH A ELECTRONIC DEVICE	1-N		
3 - POLICE 9 - OTHER/UNI	(NOWN	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY	LY EJECTED		M - MOTORCYCLE P - PASSENGER		9-LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER 7 - OTHER DISTRACTION	2 B 3-U		
	200	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP			N-TANKER		10 - LIMITED TO DAY	LIGHT ONLY	INSIDE THE VEHICLE	4 - B	REATH	
1-NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	TI	RAPPED		Q - MOTOR SCOOTER		11 - LIMITED TO EMP 12 - LIMITED - OTHE		8 - OTHER DISTRACTION OU THE VEHICLE	TSIDE 5-0	THER	
RODENHUNGSTON	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTRA	PPED		R - THREE-WHEEL MO S - SCHOOL BUS	TURCTULE	13 - MECHANICAL DE	VICES	9 - OTHER / UNKNOWN	1 - N	ORUG TEST	TYPE
3 - LAP BELT OF 4 - SHOULDER &	LAP BELT USED	PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	ITED BY IICAL MEANS		T - DOUBLE & TRIPLE		CONTROLS, OR O' ADAPTIVE DEVICE	THER	CONDITION	2 - B		
153 PS- 7 PS- 154 PS	RAINT SYSTEM -	CARGO AREA  13 - TRAILING UNIT	3 - FREED B	Y Chanical Me	ANS	X-TANKER/HAZMAT		14 - MILITARY VEHIC	COLUMN TO STATE OF THE PARTY.	1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT	3 - U		
6 - CHILD REST	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G., DEPRES ANCRY DISTURBED)	SED,		SULTC
7 - BOOSTER SE		(NON-TRAILING UNIT) 15 - NON-MOTORIST		F-FEMALE M-Male			16 - OUTSIDE MIRRO		4 - ILLNESS	Contract Contract	JG TEST RE Mphetamines	.501(5)	
8 - HELMET US	ED	99-OTHER/UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		ARBITURATES	
9 - PROTECTIVE (ELBOW, KN								AU-VIIILR		6- UNDER THE INFLUENCE	4 0	ENZODIAZEPINI Annabinolos	F2
10 - REFLECTIVE										OF MEDICATIONS / DRUG /ALCOHOL	5 - C(	DCAINE	
11 - LIGHTING ~ / BICYCLE O										9- OTHER / UNKNOWN	6-01 7-0	PIATES/OPIOID Ther	2
99 - OTHER / UNI	CNOWN											EGATIVE RESUL	LTS

OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER								
					JO TIDDENDON	"		2 0 2 1 - 0 0 0 1 0 5 5 0						
	UNIT#	110-00	T, FIRST, MIDDLE				_	DATE OF BIRTH AGE GENDER						
,_	02 MERCURY, CADEN, T								0 3 / 2 6 / 2 0 0 7 1 4 M					
PAN	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
OCCUPAN	424 B	URNS	CT ,Kent ,OH	L				9						
0	_	INJURED TAKEN	EMS ABENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
	5	BY L					0.4	MC HELMET	0 3	1 1	_1_	_1		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE			<u>-</u>		DATE OF BIRTH AGE GENDER						
	_02_	MERC	CURY, CAMR	EN, C				0 4 / 3	0, /, 2 0	0, 9,	1 2	M		
PAN		STREET, CITY,			CONTACT PHONE	- INCLUDE AREA CO	DE							
CCUPAN	424 B	URNS (	CT,Kent,OH	44240				1						
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACI	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPE						
	5	ВҮ		<u></u>			0,4	MC HELMET 0 6 1 1 1 1						
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER						
PAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COI	DE.				
CCUPAN														
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACI	LITY (HAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	بيا	BATT.					U31.0	MC HELMET						
	UNIT#	NAME: LAS	ME: LAST, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER		
<u>.</u>								1 1 1 1	1/1		1 1			
CCUPAN	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
กออ									l		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		
	لــــا	8Y						MC HELMET						
ı		land the same	RIES		' EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE			
	1 - FATA			1 - NONE US VEHICLE	ED - OCCUPANT		T – LEFT SIDE ORCYCLE DRIV	FR)	1 - NOT DEPLOYED					
			RIOUS INJURY	170 S. T. E. S.	R BELT ONLY USED		T - MIDDLE	2 - DEPLOYED FRONT						
		IBLE INJU	NOR INJURY	3 - LAP BELT			T - RIGHT SIDE	드립스 경기 1 시간 경기 전환 경기 등 경기 경기 등 전기 등 기계를 되지 않는 것이 없는 것은 것이 없다.						
		PPARENT I		4 - SHOULDE	ER & LAP BELT USED  4 - SECOND - LEFT SIDI (MOTORCYCLE PASS  ESTRAINT SYSTEM - 5 - SECOND - MIDDLE				The second second	4 - DEPLOYED BOTH FRONT/SIDE				
								5 - NOT APPLICA				San Arti		
	1 NOT		TAKEN BY	FORWARI		DE 9 - DEPLOYMENT UNKNOWN								
		TRANSPOR ATED AT S		REAR FAC	STRAINT SYSTEM -	CAR) EJECTION								
	2 - EMS			7 - BOOSTER	SEAT		1 - NOT EJ							
	3 - POLI	CE		8 - HELMET	USED		D – RIGHT SIDE PER SECTION (		2 - PARTIA	LLY EJECTE	D			
	9 - OTHE	R / UNKNO	WN		IVE PADS USED		ENGER IN OTH	STATE OF THE PERSON STATE	3 - TOTALL	Y EJECTED				
		GEN	IDER		KNEES, ETC.)		O AREA (NON-TE PICK-UP WITH CAI		4 - NOT APPLICABLE					
	F-FEMALE 11-LIGHTING - PEDESTRIAN 12- PASSENGER IN UN						ENGER IN UNE			TRAPPE	D	The second second		
	M - MALE / BICYCLE ONLY CARGO AREA U - OTHER / UNKNOWN 13 - TRAILING UNIT							1 - NOTTRAPPED						
	99 - OTHER / UNKNOWN 14 - RIDING ON VEHICL					Company of the last	EXTERIOR 2 - EXTRICATED BY MECHANICAL MEANS							
							TRAILING UNIT)			BY NON-ME	CHANICA	VI.		
							MOTORIST R/UNKNOWN		MEANS	A SECTION AND ADDRESS OF THE PARTY OF THE PA	CHANICA			
ľ	NAME: LAS	T, FIRST, MIDDI	LE		CONTRACT AND PARTY OF THE ACTUAL VALUE		1 2 2 2 2	DATI	E OF BIRTH	Star	AGE	GENDER		
ESS								1 6 1	1/1 1	1 1				
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE								
NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER								
ADDRESS: STREET, CITY, STATE, 71P														
ADDRESS: STREET, CITY, STATE, 71P								CONTACT PHONE - INCLUDE AREA CODE						
	AUDRESS:	SIKEEI, LIIT,	other part									1		
5														
SS		T, FIRST, MIDDI		· · · · · · · · · · · · · · · · · · ·				DATI	E OF BIRTH		AGE	GENDER		
ITNESS	NAME: LAS		LE					DATI			AGE	GENDER		