OFFICIAL SAFETY TRAFFIC CRASH	REPORT *DENOTES MANDATORY F	LOCAL REPORT NUMBER*				
X PHOTOS TAKEN OH-2 X OH-3	2,0,2,0,-,0,0,0,2,5,3,2					
SECONDARY CRASH OH-1P OTHER	REPORTING AGENCY NAME*	NCIC*	HIT/SKIP NUMBER OF U			
PRIVATE PROPERTY	City of Kent Police	<u>.0,6,7,0,3</u>	T DISOLUCIO	0 1 98 - ANIMAL 99 - UNKNOWN		
1-CITY	Y, VILLAGE, TOWNSHIP*		CRASH DATE / TIME*	CRASH SEVERITY 1 - FATAL		
3-TOWNSHIP TELL	LOCATION ROAD NAME	1	0,2,0,4,20,2,0,/,1,1,0,6,	2 - SERIOUS INJURY		
2- SOUTH		ROAD TYP		SUSPECTED 3 - MINOR INJURY		
4-WEST	SUNNYBROOK REFERENCE ROAD NAME (ROAD, MILEPOST,	R D	41,13,43,76	SUSPECTED		
2- SOUTH	REFERENCE ROAD NAME (ROAD, MILEPUSI,	HOUSE #) ROAD TYP	and the second second	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE		
S R 261 3- EAST 4-WEST	DOUTETWEE		-81,36,1,96,1	ONLY		
1-INTERSECTION FROM REFERENCE 1- NORTH IR -	ROUTE TYPE INTERSTATE ROUTE(TP) AL - ALLEY	ROAD TYPE HW-HIGHWAY RD - ROAD	INTERSECTION OR O	The state of the s		
3- HOUSE # 3- EAST	FEDERAL US ROUTE AV - AVENUE	LA - LANE SQ - SQUARE D MP - MILEPOST ST - STREET		4		
Diametria di Santana	STATE ROUTE CR - CIRCLE	OW - OVAL TE - TERRACE				
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR -	NUMBERED TOWNSHIP DR - DRIVE	PK - PARKWAY TL - TRAIL PI - PIKE WA - WAY	ROADV	AY		
2-FEET 3-YARDS	ROUTE HE - HEIGHTS	PL - PLACE WA - WAY	X ROADWAY DIVIDED			
LOCATION OF FIRST HARMFUL EVEN		SH COLLISION/IMPACT	DIRECTION OF TRAVEL	MEDIAN TYPE		
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY.	ALLEY ACCESS BETWEEN	4 - REAR-TO-REAR 5 - BACKING		DIVIDED FLUSH MEDIAN (< 4 FEET)		
3 - IN MEDIAN 11-RAILWAY G	RADE CROSSING TWO MOTOR VEHICLES IN	6 - ANGLE	3-EAST 2-	DIVIDED FLUSH MEDIAN		
4 - ON ROADSIDE 12 - SHARED US 5 - ON GORE TRAILS	2 - REAR-END	7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTIO	I 4-WEST I	(≥4 FEET) DIVIDED, DEPRESSED MEDIAN		
6-OUTSIDE TRAFFIC WAY 13-BIKE LANE 7-ON RAMP 14-TOLL BOOT	J-READ-UN	9 - OTHER / UNKNOWN	4-1	DIVIDED, RAISED MEDIAN (ANY TYPE)		
8-OFF RAMP 99-OTHER/UN			1	OTHER/UNKNOWN		
WORK ZONE RELATED	WORK ZONE TYPE LOCATI	ON OF CRASH IN WORK ZONE	CONTOUR CONDITI	IONS SURFACE		
INDOVEDS DESCRIP	LANE CLOSURE LANE SHIFT/CROSSGVER	 BEFORE THE 1ST WORK ZONE WARNING SIGN 	1 1	2		
TI LAW ENFORCEMENT PROCESSIT	WORK ON SHOULDER	2 - ADVANCE WARNING AREA	1-STRAIGHT LEVEL 1-DRY	1 - CONCRETE		
4-		3 - TRANSITION AREA 4 - ACTIVITY AREA	2 - STRAIGHT GRADE 2 - WET	2 - BLACKTOP, BITUMINOUS,		
ACTIVE SCHOOL ZONE 5-	OTHER	5 - TERMINATION AREA	3 - CURVE LEVEL 3 - SNOW 4 - CURVE GRADE 4 - ICE	ASPHALT		
LIGHT CONDITION	WEATHER		9-OTHER/UNKNOWN 5-SAND, MUD	3 - BRICK/BLOCK DIRT 4 - SLAG, GRAVEL,		
1 - DAYLIGHT 1 2 - DAWN/DUSK	1-CLEAR 6-SNOW 7-SEVER	E CROSSWINDS	OIL, GRAVE	STONE		
3 - DARK - LIGHTED ROADWAY	3-FOG, SMOG, SMOKE 8-BLOWI	NG SAND, SOIL, DIRT, SNOW	6 - WATER (ST	. 3-DIKI		
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING		ING RAIN OR FREEZING DRIZZL R / UNKNOWN		9 - OTHER/UNKNOWN		
9 - OTHER / UNKNOWN		Marie Control	9 - OTHER/UNK	CNOWN		
NARRATIVE				Indicate the north		
Unit 1 was westbound on S	R 261 turning left			direction with an "N" on the compass diagram.		
(southbound) onto Sunnybro	ok Rd. Unit 2 was					
eastbound on S R 261, and w	as passing through the		1:1			
green light at Sunnybrook Ro	d. Two independant	NOT TO BUAT				
witnesses verified that Unit 2	had the green light.					
Unit 1 turned in front of Unit	t 2, causing Unit 2 to					
strike Unit 1 in the right fron	t. Unit 1 then					
rolled over and rotated at lea	st 180 degrees and	gé gé	SR.	261		
came to rest off the southeast	corner of the	ILIMATIBROOK OR				
intersection on it's top. Unit	2 traveled off the	NIS	1 !	Ţ		
southeast corner of the inters	section and struck a					
		RRIVAL DATE / TIME	SCENE CLEARED DATE / TIME	REPORT TAKEN BY		
0,2,0,4,2,0,2,0,/,1,1,0,6,0,2,0		1 ₂ 0 ₂ 0 ₁ 1 ₁ 1 ₁ 0	0,2,0,4,2,0,2,0,/,1,2,1	POLICE AGENCY MOTORIST		
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT			CHECKED BY OFFICER'S NAME* Ennemoser, James			
	OFFICER'S BADGE NUMBE		SUPPLEMENT (CORRECTION OR ADDITION TO AM EXISTING REPORT SENT TO COPE)			
0 6 0 1 8 0 2 4						

2,0,2,0,-,0,0,0,2,5,3,2,_,

UNIT#	OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) AHART, ALAN, CAPE				PHONE: INC.	USE AREA CODE (SAME AS DRIVER)	DAMAGE				
	DDRESS: STREET, CITY, STATE			L		J	DAMAGE SCALE				
430 R	URNS CT ,Ke	nt OH 44240		1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE							
	CIAL CARRIER: NAME, ADD		Commercial Carrier PHONE: include area code				Z-MINUKU	AMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN			
		read on A practical		- Commi	ENGLAL GARRIER	PHUNE: INCLUDE AREA CODE					
LP STATE	LICENSE PLATE #	VEHICI	E IDENTIFICATION #	1	VEHICLE YEAR VEHICLE MAKE		DAMAGED AREA(S) INDICATE ALL THAT APPLY				
A	HWC5724	2 GNAXHI	E, V, 6, J, 6, 1, 0, 8, 4		2 0 1						
7410410.4	INSTIDANCE COME		INSURANCE POLICY #		COLOR	VEHICLE MODEL	11 12	11 12 1			
X VERIFI	STATE FA	D 3 4	C317763B1535B	X	VHI	EQUINOX	10	2 10 12			
	TYPE OF USE	COLUMN TO THE REAL PROPERTY.	US DOT#		BY: COMPAN		10 2	10.000			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		City S	Service		9 9 3	3 9 9 3			
INTER	LOCK —	#OCCUPANTS VE	HICLE WEIGHT GVWR/GCWR	I CO MA		US MATERIAL CLASS # PLACARD ID #					
DEVIC	E HIT/SKIP UNI	T 0 2	1 - ≤10K LBS 2 - 10,001 - 26K LBS	I RE	LEASED	CLASS W PLACARDID W	8 7 5	4 8 7 5 4			
Equir		0.2	3 - >26K LBS	☐ PL	ACARD L		7 5	12 7 5			
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED		8-LIMO (LIVEI		23 - PEDESTRIAN / SKATER	°	12			
0.3	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		9-BUS (16+ PA		24 - WHEELCHAIR (ANY TYPE)	10/	11 2			
UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED		10 - OTHER VEHI 21 - HEAVY EQUI		25 - OTHER NON-MOTORIST 26 - BICYCLE		9 3 3			
	5 - CARGO VAN	BICYCLE		2 - ANIMAL WIT		27 -TRAIN	_				
d .	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DR	AWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 5 4			
	# OFTRAILING UNITS	witter/					12	7 6 5 12			
	WAS VEHICLE OPERATING IN AU	TOMOMOUS	O - NO AUTOMATION 3	CONDITIONS	I AUTOMATICA	O HELVEDONIA	11 12	6 11 12 1			
2	MODE WHEN CRASH OCCURRED			- CONDITIONA - HIGH AUTOM	L AUTOMATION NATION	NWUNNU - C	10 11 1	2 10 11 2			
2	1-YES 2-NO 9-OTHER/UNK	MOTOROMODS		- FULL AUTON			10 2	10 2			
	1 NAME	MODE LEVEL					9 3	3 9 9 3 3			
,0,1,	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY		6-FARM		21 - MAIL CARRIER	7 5 7				
	3 - ELECTRONIC RIDE SHARING			.7 - MOWING .8 - SNOW REMO	IVAI	99-OTHER/UNKNOWN	X	8 6 5 4			
SPECIAL FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER		9-TOWING	JAME		7 6 5	7 6 5			
	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT 2		RVICE PATROL						
0.1	1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER 8	- POLÉ		12-CONCRETE MIXER		12 12 12			
0 1	I NOT APPLICABLE	MOTOR VEHICLE	CHACRIE	- CARGO TANK		13-AUTOTRANSPORTER	12				
BODY	2 - BUS	4 - LOGGING		O-FLAT BED		14-GARBAGE/REFUSE	R HR.	3 9 1 3 9 3			
TYPE			7 - GRAIN/CHIPS/GRAVEL 1	1-DUMP		99-OTHER/UNKNOWN	,600,	3 9 3 3			
1 1 1	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES 9	- MOTOR TROU	BLE	99-OTHER / UNKNOWN	•				
	2 - HEAD LAMPS	5 - STEERING		O-DISABLED F	ROM PRIOR		•	6 6 6			
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT							
	1-INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE 9	- NEDIAN/CRO	SSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE	[0] - UNDERCARRIAGE [14]			
HOW MOTORIET	CROSSWALK	4 - MIDBLOCK - MARKED		O-DRIVEWAY A		AT INCIDENT SCENE	TOP [13]	X - ALL AREAS [15]			
LOCATION	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK 5 -TRAVEL LANE - OTHER LOCATION		1 - SHARED USE	E PATHS OR	99-OTKER/UNKNOWN					
AT IMPACT				TRAILS			[_] - UN	IT NOT AT SCENE [16]			
	1 - NON-CONTACT	1 - STRAIGHT AHEAD		3-NEGOTIATIN		18 - APPROACHING	INITI	AL POINT OF CONTACT			
4		2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 1 9 - LEAVING TRAFFIC LANE	4 - ENTERING O Specified L		OR LEAVING VEHICLE 19-STANDING	0 - NO DAMA				
ACTION		4 - OVERTAKING/PASSING		5 - WALKING, RI		20 - OTHER NON-MOTORIST		R TO UNIT 15 - VEHICLE NOT AT SCENE			
	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING		21 - STANDING OUTSIDE	DIAGR	AM 99 - UNKNOWN			
		6 - MAKING LEFT TURN	IN TRAFFIC 16-WORKING				13 - TOP				
	9-OTHER/UNKNOWN		TE BRITEREIDO	ruanina VE	.niGLE	99 - OTHER / UNKNOWN		TRAFFIC			
		7 - LEFT OF CENTER	DARKED SCRITTON	7 - VISION OBST		21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
0.2	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8-FOLLOWING TOO CLOSE / ACD. 9-IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	B-OPERATING I EQUIPMENT		22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
0 2	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 1	9 - LOAD SHIFTI		23 - OPENING DOOR INTO ROADWAY	2 2 TW0-WAY	2 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING		11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	SPILLING		99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
	6-IMPROPERTURN	12 - IMPROPER BACKING	16 - WRONG WAY 2	0 - IMPROPER C	ROSSING		# OF THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS				3000		ON ROAD	1 - NOT INVOLVED			
2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS	E BAII WALLEY	utoi e	22 10000 7000 11000	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
1 2 0		7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF 1	6 - RAILWAY VEI 7 - Animal — F		22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - MANDEOCHASSINE CHOSSING			
0.1		8 - RAN OFF ROAD RIGHT	TRAVEL	8-ANIMAL - 0		23-STRUCK BY FALLING,	UNIT / NO	N-MOTORIST DIRECTION			
2 0 1		9 - RAN OFF ROAD LEFT	13 OTHER NAM COLLISIAN	9-ANIMAL - 0		SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST			
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14-PEDESTRIAN	-MOTOR VEHI Transport		BY A MOTOR VEHICLE	FROM 3 TO L	2 - SOUTH 6 - NORTHWEST			
3	LUGG ON GIRF!		15-PEDALCYCLE 2	1 - PARKED MOT		24-OTHER MOVABLE CBJECT	FRUM TO L	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST			
	25 IMPACT ATTENUATED		N WITH FIXED OBJECT -		(9 - OTHER / UNKNOWN			
4	LODACU CHEDION	31 - GUARDRAIL END 32 - PORTABLE BARRIER		3 - CURB 4 - Ditch		50 - WORK ZONE MAINTENANCE EQUIPMENT					
	26-BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER		5 - EMBANKMEN	NT	51 - WALL	UNIT SPEED	DETECTED SPEED			
5	STRUCTURE	34 - MEDIAN GUARDRAIL	SUPPORT 4	6-FENCE		52 - BUILDING	, 0 , 2 , 0 ,	1 - STATED / ESTIMATED SPEED			
	OR BRIDGE DARANCE	BARRIER 35 - MEDIAN CONCRETE	AT OTHER DOCT BOLE	7 - MAILBOX		53-TUNNEL		2 - CALCULATED / EDR			
	29-BRIDGE RAIL	BARRIER	OR SUPPORT 45	8-TREE 9-FIRE HYDRAI	NT	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
4	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	- rine irrunal			2 5				
	FIRST HARMFUL EVEN	T Z MOST H	ARMFUL EVENT				2 5				

LOCAL REPORT NUMBER

2,0,2,0,-,0,0,0,0,2,5,3,2

UNIT # OWNER NAME: LAST, FIR:	ST, MIDDLE (X SAME AS DRIVER)		Ohines BRUNE . I'm	THE ACCUPANT (TELEVANE AC HOUSE)		AMAGE			
0 2 SCHWEITZE), D	L		DAMAGE DAMAGE SCALE					
OWNER ADDRESS: STREET, CITY, STATE 1495 EASTWOOD	AVE Akron	TH 44305			1 - NONE 3 - FUNCTIONAL DAMAGE				
COMMERCIAL CARRIER: NAME, ADD	COMMERCIAL CAPRIE	PHONE: INCLUDE AREA CODE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN						
				- I - I - I - I - I - I - I - I - I - I	DAMAGED AREA(S)				
O H GFL8915	AT1 R K2 4	BO, 8, U3, 0,4	VEHICLE YE	0		ALL THAT APPLY			
		SURANCE POLICY #	8,3,2,2,0,0, COLOR	VEHICLE MODEL	12	11 12			
INSURANCE COMP VERIFIED ALLSTATI		26742694	GRY	AVALON	10 10 2	10 12			
TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPAN			5.500.2			
COMMERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	HICLE WEIGHT GVWR/GCWR		DUS MATERIAL	9 3 3	9 3 3			
INTERLOCK HIT/SKIP UNI	T	1 - ≤10K LBS.	MATERIAL	CLASS # PLACARD ID #	8 7 5 4	1 1 3 7			
EQUIPPED	0,1	2 - 10,001 - 26K LBS 3 - >26K LBS	PLACARD		7 6 5	12 7 6 5			
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED		18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)		12			
3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		20-OTHER VEHICLE	25 - OTHER NON-MOTORIST	/ /	11 2 2			
UNIT TYPE 4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE		21 - HEAVY EQUIPMENT	26 - BICYCLE	9	9 2 3 3			
6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT 17-MOTORHOME	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - Unknown or hit/skip	. 7.	7 74			
# of TRAILING UNITS	(ATV / UTV)				12 7	6			
WAS VEHICLE OPERATING IN AU	TONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12	6 5 11 12 1			
MODE WHEN CRASH OCCURRED	. 0	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION	Greatenn	10 11 2	10 11 2			
1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3 3	9 9 3 3			
1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER					
0,1 2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY		17 - MOWING	99-OTHER/UNKNOWN	B 7 5 4	8 7 5 4			
SPECIAL SELECTRONIC RIDE SHARING	9 - BUS - OTHER		18-SNOW REMOVAL 19-TOWING		7 6 5	7 5			
5 - BUS TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT				12 12 12			
0, 1 1 - NO CARGO BODYTYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	PHACETE	8 - POLE	12 - CONCRETE MIXER	12	12 12 12			
CARGO 2.BUS	4 - LOGGING	CARCONALIENE OCER BOY	9 - CARGO TANK 13-FLAT BED	13 - AUTO TRANSPORTER 14 - Garbage/Refuse	· Ma				
TYPE		7 CONTINUENTACIONALES	11 - DUMP	99 - OTHER / UNKNOWN	9 6 5	© 3 9 T 3 9 👰 3			
1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTORTROUBLE	99 - OTHER / UNKNOWN	6	0			
VEHICLE 2 - HEAD LAMPS DEFECTS 3 - TAIL LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT	= 14		6 6 6			
	6 - TIRE BLOWOUT				- NO DAMAGE [0]	- UNDERCARRIAGE [14]			
1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED		9 - MEDIAN/CROSSING ISLAND 10-DRIVEWAY ACCESS	12 -FIRST RESPONDER AT INCIDENT SCENE	☐-TOP [13]				
NON-MOTORIST 2 - INTERSECTION - UNMARKED LOCATION CROSSWALK	CROSSWALK		11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN	7 _	-ALL AREAS [15]			
AT IMPACT	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		M TINU - D	OT AT SCENE [16]			
1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING		13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE	INITIAL P	OINT OF CONTACT			
3-STRIKING UI	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMAGE	14 - UNDERCARRIAGE			
	4 - OVERTAKING/PASSING		15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST	1 2 1-12 - REFER TO DIAGRAM	UNIT 15 - VEHICLE NOT AT SCENE			
5 - BOTH STRIKING ASSTRUCK	5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN	IN LIMIT IL	16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13 - TOP 99 - UNKNOWN				
9 - OTHER / UNKNOWN		12-DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		RAFFIC			
1 - NONE	7 - LEFT OF CENTER	DARKED BOCITION	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
2-FAILURE TO YIELD 0 1 3-RAN RED LIGHT	8-FOLLOWING TOO CLOSE / ACDA 9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY	1 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
CONTRIBUTING 5 - UNSAFE SPEED 6 - IMPROPERTURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	14	20 - IM PROPER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE OF EVENTS	Ann res En encoling				ON ROAD	1 - NOT INVOLVED			
	(COMPANYED CAN HOS	EVENTS		The late to the same of	2	1 2 - INVOLVED-ACTIVE CROSSING			
1 - OVERTURN/ROLLOVER 2 - FIRE/EXP_OSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING			
2 INMEDIAN	B - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL - DEER	23-STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NON-M	SOTORIST DIRECTION			
2 0 8 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		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - VORTHWEST			
LOSS OR SHIFT	10 - GHOOD MEDIAN	14-PEJESTRIAN	TRANSPORT 21 - PARKED MOTOR VEHICLE	BY A MOTOR VEHICLE 24-Other Movable object	FROM 4 TO 3	3 - EAST 7 - SOUTHEAST			
- PLANTING		N WITH FIXED OBJECT	- STRUCK	September 4		4 - WEST B - SOUTHWEST 9 - OTHER / UNKNOWN			
4 25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER		43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT					
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	AN AUTHORN BALL	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	0,5,0	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR			
28 - BRIDGE PARAPET 61 1 29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE	48 - TREE	54-OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
30 - GUARDRAIL FACE	36-MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN		- virel similes			
1 1 FIRST HARMEN EVEN	1 1 1 1 1 1 1 1 1 1 1 1 1	ADMEUL EVENT			5 0				

OF PUBLIC BAPETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
	UNIT # NAME: LAST, FIRST, MIDDLE								2,0,2,0,-,0,0,0,2,5,3,2,					
. 0 . 1		G, TYLENE, AN	N											GENDER
	S: STREET, CITY, S		- 1	-	-				0, 5, 1, 1, 1, 9, 7, 8, 4, 1, F					
-	20 000	BROOK RD C ,k	Cent ,C)H 4424	40				L	FINOTAL - INCLUDE	AREA CODE			
2	TAKEN	EMS AGENCY (NAME)				O: MEDICAL FACILITY	(NAME, CITY	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED					
OL STATE	-	Kent Fire	Kent Fire UHPMC 0,4							MC HELMET 0 1 4 1			1_1_	1
O. H.	RL256			4511.		RGED	LOCAL	Right of Way	OTATION HOUBE			NUMBER		
OL CLASS	,		RESTRICTION SELECT UP TO 3 ORI			IVER ALCOHOL / DRUG SUSPECTED				COHOL TEST	01	1589	G TEST(S	
4	SECECTORIOZ		BY	STRACTED		ALCOHOL MAR	ANAUUS	1 .	STATUS	YPE VALUE	STATU	JS TYP	E RESULT	SELECT UP TO 4
UNIT#	NAME: LAST,	EIDST MIDDLE	<u> </u>	1	□ 0	THER DRUG				1	11	_		
0.2		EITZER, RICH	ARD.	D									GENDER	
	STREET, CITY, ST	and the second of the second o	,				100			PHONE - INCLUDE A	~	L	6.8	M
		OOD AVE ,Akro	n ,OH	44305						THE THOUGHT	THE CODE			
INJURIES	TAKEN	EMS AGENCY (NAME)				: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	MPLIANT	SITION AIR	BAG USAGE	EJECTION	TRAPPED
		Kent Fire		UHPI			1.004	0.4	MC HE	LMET 0	1	4	1	_1_
OL STATE	RT826			UFFERSE	E CHAI	KGED	LOCAL	OFFENSE DESC	RIPTION		cı	TATION !	IUMBER	
OL CLASS	1,000			IVER	ALC	OHOL / DRUG SUSPE	CTED	CONDITION	ALC	COHOL TEST	B. S. College	DRU	G TEST(S)	
1 , 4,	30000107102		8 A	STRACTED		_	RUUNA		STATUS T		STATU	IS TYPI		SELECT UP TO 4
UNIT#	NAME: LAST,	FIRST MIDDLE			<u></u> 0	THER DRUG		1	1	1	1	_		
	Trime: Exci,	TROT, INDUCE								DATE OF BIRT	TH		AGE	GENDER
ADDRESS	STREET, CITY, ST	ATE, ZIP	-	7	-				CONTACT	PHONE - INCLUDE A	9FA CODE			
010										1 1 1				
ADDRESS:	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDTA	KENTO	: MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT	DOT-Co	MPLIANI	SITION AIR	BAG USAGE	EJECTION	TRAPPED
		ICENSE NUMBER		OFFENSE	CHAL	PCED	LOCAL	0555455.056	MC HE	LMET	_			
OL STATE				OI I ENGL	- Unai	NGCO	CODE	OFFENSE DESC	RIPTION		cn	TATION N	UMBER	
OL CLASS	ENDORSEMENT SELECTUP TO 2	RESTRICTION SELECT		IVER STRACTED F	ALC	DHOL / DRUG SUSPE	CTED	CONDITION	ALC STATUS T	OHOL TEST			G TEST(S)	Nuts to
			BY		=	LCOHOL MAR	LJUANA		SIAIUS	YPE VALUE	STATU	STYPE	RESULT	SELECT DV 104
INJU	JRIES	SEATING POSITION		AIR BAG		OL CLASS		OL RESTRIC	L L_ T[0N(S)	DRIVER DIST	RACTION		TEST STAT	
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEI 2 - DEPLOY	The second second		1-CLASS A	200	1 - ALCOHOL INTER	LOCK DEVICE	1 - NOT DISTRACTED)	NAME AND ADDRESS OF	E GIVEN	05
3 - SUSPECTED	MINOR INJURY	2 - FRONT - MIDDLE	3 - DEPLOY			2 - GLASS B 3 - GLASS C		2 - CDL INTRASTAT		2 - MANUALLY OPER ELECTRONIC COM	MUNICATION		T REFUSED T given, cont	AMINATED
4 - POSSIBLE IN 5 - NO APPAREN	The state of the s	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOY 5 - NOT APP	ED BOTH FRONT	T/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER	buc	DEVICE (TEXTIN DIALING)		SAN	IPLE / UNU SAE T GIVEN, RESU	BLE
INJURED	TAKEN BY	(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE	The same of the	MENT UNKNOW	ń	5 - M/C MOPED ONLY		5 - EXCEPT CLASS A 6 - EXCEPT CLASS A	Charles and the All	3 -TALKING ON HAN COMMUNICATION		5-TES	T GIVEN, RESU	The state of the s
1 - NOT TRANSP	ORTED	6 - SECOND - RIGHT SIDE	4	ting to		6 - NO VALID OL		& GLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON HAN COMMUNICATION		1	NOWN	الماس والمعدد
2 - EMS	I JUENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJE	CTED		OL ENDORSEM H-HAZMAT	ENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY ELECTRONIC DEV		1 - NON	OHOL TES	ITALE
3 - POLICE 9 - OTHER / UNK	NOWN	8-THIRD - MIDDLE 9-THIRD - RIGHT SIDE	2 - PARTIÁI 3 - TOTALLY	LY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER		2 - BLO 3 - URI	14 54 Per 130	6.11
12-13	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP			P - PASSENGER N - TANKER		10 - LIMITED TO DAY	Control of the second	7-OTHER DISTRACT INSIDE THE VEHI	CLE	4 - BRE		199
1 - NONE USED	GOIPWENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		Q - MOTOR SCOOTER R - THREE WHEEL MOT	ODCVCI E	11 - LIMITED TO EMP 12 - LIMITED - OTHE	A THE STATE OF THE	8 - OTHER DISTRACT THE VEHICLE	TON OUTSIDE	de Bu	Vita Contact	
2 - SHOULDER B 3 - LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA	100	1,83	S - SCHOOL BUS		13 - MECHANICAL DE (SPECIAL BRAKE		9-OTHER/UNKNOW	N	DR 1-NON	UG TEST I	TYPE
4 - SHOULDER &	LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	MÈCHAN	IICAL MEANS		T - DOUBLE & TRIPLET X - TANKER / HAZMAT	RAILERS	CONTROLS, OR OT ADAPTIVE DEVICE	THER	CONDITI 1 - APPARENTLY NOR	THE RESIDENCE OF THE PARTY OF	2 - BL00	200	
5 - CHILD RESTR FORWARD FA	CING	13-TRAILING UNIT	3 - FREED B	CHANICAL MEA	NS	GENDER	REP 1	14 - MILITARY VEHIC	A 100 Jan 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 - PHYSICAL IMPAIR	MENT	3 - URI1 4 - OTHI	Rose in	
6-CHILD RESTR		14- RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 MOTOR VEHICLE AIR BRAKES		3 - EMOTIONAL (E.G. ANGRY, DISTURBED)	DEPRESSED,	DRUG	TEST RES	SULT(S)
7 - BOOSTER SE	METER PER BUSINESS	15 - NON-MOTORIST 99 - OTHER / UNKNOWN				M - MALE U - OTHER / UNKNOWN		16 - OUTSIDE MIRROI 17 - Prosthetic aid	THE RESERVE OF	4 - ILLNESS 5 - FELL ASLEEP, FAIR	NTFD.	The Contract of	HETAMINES BITURATES	
9- PROTECTIVE	PADS USED				(18-OTHER		FATIGUED, ETC.		3-BEN	ZODIAZEPINES	
(ELBOW, KNE 10 - REFLECTIVE	CLOTHING				1:6'-					OF MEDICATIONS /		4 - CANI 5 - COCA	VABINOÌDS JNE	
11 - LIGHTING - P / Bicycle on	EDESTRIAN ILY									9- OTHER / UNKNOWN	V	6-OPIA	TĒS/OPIOIDS	
99-OTHER/UNK	NOWN											7 - OTHE 8 - NEG/	R ATIVE RESULT	S

OHIO DEP	SUPPRIADE AREATY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER					
								2,0,2,0,-,0,0,0,2,5,3,2				
UNIT#		T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER					
01		SFORD, SANI	DRA, M	1,2,0,3,1,9,4,9,7,0, F								
	STREET, CITY,		CONTACT PHONE - INCLUDE AREA CODE									
495/8		BROOK RD	C, Kent, U	H 44240 INJURED TAKEN TO: MEDICAL FACIL		1. 1. 1.		21				
. 3	INJURED TAKEN	Kent Fire		SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION		EJECTION	TRAPPED			
				UHPMC		0,4	LIMC HELMET	0 3	4	1	_1	
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE OF BIRTH AGE GEND				GENDER	
ADDRESS.	STREET, CITY,	STATE 710										
ADDRESS:		31616, 211					CONTACT PHONE	INCLUDE AREA CO	ĐE			
INJURIES	INJURED EMS AGENCY (NAME)			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT				SEATING POSITION	AIR RAG IISAGE	I E I E CTION	TRAPPED	
	TAKEN			USED			DOT-COMPLIANT		ANI BAG GOAGE	Carotton	INAFFED	
UNIT#	NAME: LAS	T, FIRST, MIDDLE								AGE	GENDER	
1 1								E OF BIRTH		Auc	DENDER	
ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO				
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACI	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	BY					USED	MC HELMET					
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
		_120-										
ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	OE .			
2	I							1	<u> </u>			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACI	LITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
		JRIES	L CAFETY	V FOULDMENT HOED			MC HELMET			نــــا	نــــــــــــــــــــــــــــــــــــــ	
1 - FATA		7.1123	1 - NONE US	Y EQUIPMENT USED	the Utana and a second	SEATING POS IT – LEFT SIDE	IIIUN		AIR BAG U	SAGE		
		RIOUS INJURY	A STREET OF STREET STREET	OCCUPANT		ORCYCLE DRIV						
3 - SUS	PECTED MI	NOR INJURY	2 - SHOULDI	DER BELT ONLY USED 2 - FRONT - MIDDLE			2 DEDLOVED CIDE					
4 - POSS	SIBLE INJU	IRY		LT ONLY USED 3 - FRONT - RIGHT SID 4 - SECOND - LEFT SID			E 4 - DEPLOYED BOTH					
5 - NO A	PPARENT	INJURY		9 - THIRD - RIGHT SIDE			ENGER)	FRONT/SIDE				
	INJURED	TAKEN BY	The same of the sa				9- DEPLUYME		A SECTION AND ASSESSMENT	NOWN		
	TRANSPOR								Zabytis.			
2 - EMS	AND AREA		7 - BOOSTER				UMIC	1 NOT E	EJECTION 1 - NOT EJECTED			
3 - POLI			8 - HELMET				Service Control of the Control of th	2 - PARTIALLY EJECTED				
9 - OTH	ER / UNKNO	OWN	Address of the second of the beautiful to	TIVE PADS USED	THE RESERVE TO SHARE	PER SECTION ENGER IN 0TH			3 - TOTALLY EJECTED			
March Challen Co.	GEI	NDER		KNEES, ETC.) TIVE CLOTHING		O AREA (NON-TI		4 - NOT ÄPPLICABLE				
F-FEMA				G – PEDESTRIAN	12 - PASS	ENGER IN UNE						
M - MAL	E Er/Unkno	WN	/ BICYCL			O AREA LING UNIT		1 - NOTTRAPPED				
			99 - OTHER /	UNKNOWN	14 - RIDING ON VEHICLE		EXTERIOR	2 - EXTRICATED BY MECHANICA MEANS			CAL	
						TRAILING UNIT)			BY NON-ME	CHANIC	ΔL	
						R / UNKNOWN		MEANS				
	ST, FIRST, MIDE						DAT	E OF BIRTH		AGE	GENDER	
		ELYSE, A					0,4,2,			3 2	F	
	REACC		24 Curch	ogo Folio OII 440	221		CONTACT PHONE	- INCLUDE AREA CO	DE			
			24,Cuyah	oga Falls, ,OH 442	221		L					
DOAL	NAME: LAST, FIRST, MIDDLE DOAK, TAMMY, LYNNE							E OF BIRTH	7 2	AGE	GENDER	
ADDRESS: STREET, CITY, STATE, ZIP						0 9 0 9 1 9 7 2 4 7				<u> </u>		
ADDRESS 1034	PARK A	AVE ,Ravenna	,,OH 4426	66								
	ST, FIRST, MIDE	DLE					DAT	E OF BIRTH		AGE	GENDER	
45.55												
ADDRESS	: STREET, CITY	, STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			



Continuation Narrative Continuation

LOCAL REPORT NUMBER

2 0 2 0 - 0 0 0 0 2 5 3 2

cross walk post. All occupants suffered minor injuries.