OFF USE SAFETY TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER*					
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION								2,0,2,1,-,0,0,0,1,8,8,1,7,					
C SECONDARY COASH							NCIC*	HIT/SKIP	NUMBER OF U		UNIT IN ERROR		
	PRIVATE PE	ROPERTY	City of K	ent Polic	e	LO ₁	6 7 0 3	1 - SOLVED	0.2	_ 0	98 - ANIMAL 99 - UNKNOWN		
COUNTY* LOCALITY*	LOCA		VILLAGE, TOWNSH	IIb*			CRASH DATE /	TIME*	1:	ASH SEVERITY - FATAL			
0 / 1 3-T	OWNSHIP Ke							11111212101211	/ ₁ 1 _[0 _[3 ₁ 0 _]	. 3	- SERIOUS INJURY		
ROUTE TYPE ROUTE NUMBER OF STREET	S	- SOUTH	LOCATION ROAD			ROAD TYPE	LATITUDE p	CIMAL DEGREES	1	SUSPECTED			
W-WEST							PK	4,1,1,5,0,7,2,2			- MINOR INJURY Suspected		
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST W - W - WEST					OUSE #)	ROAD TYPE	LONGITUDE D	ECIMAL DEGREES		- INJURY POSSIBLE			
						\mathbf{A}, \mathbf{V}	-8 ₁ 1 ₁₀ 3 ₁ 6 ₁ 8	9,1,7	5.	PROPERTY DAMAGE ONLY			
REFERENCE POINT 1 - INTERSECTION	DIRECTION FROM REFERENCE	IR -	ROUTE TYP		L - ALLEY	ROAD TYPE HW-HIGHWAY R	RD - ROAD	l 🖂	INTERSECTIO		I		
1 2-MILE POST 3-HOUSE #	N - NOR' S - SOUT E - EAST	H US-	FEDERAL US RO		V - AVENUE		Q - SQUARE	X WITHIN INTE	RSECTION OR (ON APPROA	СН . 4 .		
	W-WES		STATE ROUTE		L - BOULEVARD R - CIRCLE		T - STREET E - TERRACE	WITHIN INTE	RCHANGE ARE	EA NUM	BER OF APPROACHES		
FROM REFERENCE	DISTANCE UNIT OF MEASURI 1 - MILE	100	NUMBERED COU	NTY ROUTE C	T - COURT								
2,0,0,	2 2-FEET		NUMBERED TOW ROUTE	D	R - DRIVE E - HEIGHTS	PI - PIKE V	VA - WAY	ROADWAY DI	/IDED				
	OF FIRST HARM			1		H COLLISION/IMPA	r T	PVD5671011	.				
1 - ON ROADWAY	Y 9-CI	ROSSOVER		1 - NO	T COLLISION	4 - REAR-TO-REAR	.	N - NORTH 1 - DIVIDI			MEDIAN TYPE IDED FLUSH MEDIAN 4 FEET) IDED FLUSH MEDIAN		
0 1 2-ON SHOULDE			ALLEY ACCESS RADE CROSSING	, 7 , TW	O MOTOR	5 - BACKING 6 - ANGLE							
4 - ON ROADSIDI 5 - ON GORE		HARED US RAILS	E PATHS OR	TR	ANSPORT	7 - SIDESWIPE, SAMI		E - EAST W - WEST		(≥4 FEET)		
6 - OUTSIDE TRA	AFFIC WAY 13-B	IKE LANE		3 - HE		8 - SIDESWIPE, OPPO 9 - OTHER / UNKNOV				DIVIDED, R	DEPRESSED MEDIAN RAISED MEDIAN		
7 - ON RAMP B - OFF RAMP		OLL BOOTH THER/UNI							9-	OTHER/UN			
WORK ZONE RELATI	ED.		WORK ZONE TY	PF	LOCATIO	IN OF CRASH IN WO	DK 70NE	CONTOUR	CONDIT	INNE	SURFACE		
		1-1	ANE CLOSURE			BEFORE THE 1ST V		1 1	1		2		
WORKERS PRESENT			ANE SHIFT/CRO VORK ON SHOULI		2	WARNING SIGN - ADVANCE WARNIN	IG AREA	1 - STRAIGHT LEVEL			1-CONCRETE		
LAW ENFORCEMEN	T PRESENT L		RMEDIAN		1	TRANSITION AREA		2 - STRAIGHT GRADE			2 - BLACKTOP,		
ACTIVE SCHOOL ZO	NE		NTERMITTENT O THER	IR MUVING WUR	1	- ACTIVITY AREA - TERMINATION ARE	EΑ	3 - CURVE LEVEL	3 - SNOW		BITUMINOUS, ASPHALT		
LIGHT CO	ONDITION			WEATI	4FD			4 - CURVE GRADE	4 - ICE		3 - BRICK/BLOCK		
1 - DAYLIGHT			1-CL		6 - SNOW			9 - OTHER/UNKNOWN	OIL, GRAVE		4 - SLAG, GRAVEL, STONE		
2 - DAWN/DUSK 3 - DARK - LIGHT	TED ROADWAY			OUDY IG SMAG SMAK		CROSSWINDS	CMOW		6 - WATER (ST MOVING)	ANDING,	5 - DIRT		
4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZI					9 - FREEZIN	IG RAIN OR FREEZI			7 - SLUSH		9 - OTHER/UNKNOWN		
5 - DARK – UNKN 9 - OTHER / UNKN		IGHTING	5 - SL	EET, HAIL	99 - OTHER	/ UNKNOWN			9 - OTHER/UN	KNOWN			
NARRATIVE									.	Ι Λ	Indicate the count		
LINITE 1 XXA C TE	TED ANZENE E	DIC N	WECKED OF	White Chi							Indicate the north direction with an "N" on the		
UNIT 1 WAS T											compass diagram.		
HAYMAKER	PKWY. A	ND W	AS STO	PPED AT	THE								
RED LIGHT	IN THE I	EFT 7	TURN LA	NE ONI	Y.			ا اص	1		=		
UNIT 2 WAS	TRAVEL	LING	WESTBO	DUND AN	ND ND	1		CHESTNUTST	ÎNDIT	0 95415			
WAS STOPPE						l		88					
								-Unit 2-	HAYM	IAKER PKW			
THE RED LIC								Ung 12 TRAPPIC BIGH	B				
GREEN, UNI	T 1 DID N	OT M	IAKE A I	EFT TU	RN								
AND CONTIN	NUED ST	RAIG	HT INTO	THE				7/	ð.				
ONCOMING	LANE O	FTRA	VEL. UN	IT 1					ř				
ATTEMPTED	- 59,000				ANE								
I————————								′ /					
OF TRAVEL A			PED UNI			MIAI BARR ARVA		60FVF 01					
						RIVAL DATE / TIME		SCENE CLEARED		1501	POLICE AGENCY		
1 1 1 1 2 2 1 0 1 2 1 1 TOTAL TIME	/ 1 1 0 3 1 0 1 OTHER	1 1 1 1 TOTAL			1 1 1 1 2				1,/,1,1,0	3 =	MOTORIST		
ROADWAY CLOSED INVES		MINUTE		, Jaeger		CHECKED BY OFFICER'S NAME*					SUPPLEMENT		
	2 0	0 -		OFFICER'S B	ADGE NUMBER			Y OFFICER'S BADGE N	IUMBER*	\dashv	(CORRECTION OF ADDITION TO AN EXISTING REPORT SENT TO COPS)		
0,0,0	3 0	_ 0 _6_	3 2	2 2	<u> </u>		2 4	3					

2,0,2,1,-,0,0,0,1,8,8,1,7,

UNIT#		ST, MIDDLE (SAME AS DRIVE	Rì	OWNER PHONE:	INCLUDE AREA CODE (SAME AS ORIVER	DAMAGE					
0 1	BISUTTI, JUSTIN,		<u></u>			DAMAGE SCALE					
-	DORESS: STREET, CITY, STATI					2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
	CIAL CARRIER: NAME, ADD			COMMERCIAL CARD	HER PHONE: INCLUDE AREA CODE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN					
		,		I I I I	I I I I I I						
LP STATE	LICENSE PLATE #	VEHIC	LE IDENTIFICATION #	VEHICLE	YEAR VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY					
ОЛН	HON3172		B ₁ C ₁ 5 ₁ J ₁ H ₁ 6 ₁ 0 ₁ 7 ₁			42					
INSURA	NCE INSURANCE COM		INSURANCE POLICY #	COLO		11 12 0	11 12 1				
X INSURA	GRANGE INSU	JRANCE	4679565	SIL	FORESTER	10 12	2) 10 12 2				
	TYPE OF USE		US DOT #	TOWED BY: COMP.	ANY NAME	10 2	11502				
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		J		9 9 3	3 9 9 3				
INTER	LOCK	#DCCUPANTS V	EHICLE WEIGHT GVWR/GCWR	HAZAR MATERIAL	DOUS MATERIAL CLASS # PLACARD ID #						
DEVICE EQUIP	E HIT/SKIP UNI		1 - ≤10K LBS. 2 - 10,001 - 26K LBS	☐ RELEASED	CLASS II PLACARD ID W	8 7 6 5	4 8 7 5 4				
		0 2	3 - >26K LBS	PLACARD	<u> </u>	7 5	12 7 5				
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER		12				
0 1	3 - SPORT BITH ITY VEHICLE	9 - AUTOCYCLE		19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/	11 2				
UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED		21 - HEAVY EQUIPMENT	26-BICYCLE	9	9 3 3				
	5 - CARGO VAN	BICYCLE	16-FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR	27 - TRAIN	_	0 11 4				
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICL	E 99 - UNKNOWN OR HIT/SKIP	8	7 5 4				
00_	# OF TRAILING UNITS					12	7 5 12				
3	WAS VEHICLE OPERATING IN A U	TONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	ON G-UNKNOWN	12	6 11 12				
2	MODE WHEN CRASH OCCURRED			4 - HIGH AUTOMATION	on 7 - unknown	10 11 1 7	2 10 11 1 2				
2	1-YES 2-NO 9-OTHER/UNK			5 - FULL AUTOMATION		10 2	10 2				
	1 - NONE	6 - BUS - CHARTER/TOUR		1/ FARM	21 MAIN CARRIED	9 3	9 9 3				
1011	2 - TAXI 7 - BUS - INTERCITY			16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	1 5 7	4 N. H. 7.				
SPECIAL	7 FI COTRADIO DIOS CULTURES O DUO CULTURE S			18-SNOW REMOVAL	77 VINEAT CHARGIN	6	6				
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19-TOWING		,	6 5				
	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATRO	L	j	12 12 12				
1011	1 - NO CARGO BODYTYPE /NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	21224112	8 - POLE	12 - CONCRETE MIXER	12					
CARGO	2 - BUS	4 - LOGGING	/ 04 000 WANTENO . COED COM	9 - CARGOTANK	13-AUTOTRANSPORTER	. 8.8					
BODY Type			7 CRAINICHIACICRANICI	10-FLAT BED 11-OUMP	14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 () 3 9	3 9 7 3 9 🚳 3				
	3. Tunk pickets	A DOLLIES			10.		Q •				
VEHICLE	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING		9 - MOTOR TROUBLE 10-disabled from Prior	99-OTHER/UNKNOWN	6	,				
	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6 6				
	1 - INTERSECTION - MARKED	2 INTERPESTION ATUER	/ BIGUOLE LANE			- NO DAMAGE	[0] - UNDERCARRIAGE [14]				
	CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED		9 - MEDIAN/CROSSING ISLAN 10-driveway access	D 12-FIRST RESPONDER AT INCIDENT SCENE	☐-TOP [13]	- ALL AREAS [15]				
NON-MOTORIST LOCATION	2 - INTERSECTION - UNMARKED	CROSSWALK		11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		M-ALL AREAS [15]				
AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		☐ - UNI	IT NOT AT SCENE [16]				
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	INITI	AL POINT OF CONTACT				
, 3	2-NON-COLLISION 3-STRIKING 0 3	2 - BACKING 3 - CHANGING LANES		14 - ENTERING OR CROSSING Specified Location	OR LEAVING VEHICLE 19-Standing	0 - NO DAMA					
ACTION	4- STRICK PRE-CRASH	4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST	0 1 1-12-REFER	RTO UNIT 15 - VEHICLE NOT AT SCENE				
	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11-SLOWING OR STOPPED	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGRAM 99 - UNKNOWN					
	& 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				
	1 - NONE	7 - LEFT OF CENTER	DARKED BOCITION	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL				
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8-FOLLOWING TOO CLOSE / ACI 9-IMPROPER LANE CHANGE	DA PARKED POSITION :	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN				
0 9	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY	19 - LOAD SHIFTING/FALLING	23-OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY	2 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	10- WHOME WAY	20 - IN PROPER CROSSING		# OF THROUGH LANES	RAIL GRADE CROSSING				
SEQUENCE	OF EVENTS						1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING				
	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE — 1	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE	4	3 - INVOLVED-PASSIVE CROSSING				
1 2 0		7 - SEPARATION OF UNITS	ARRAGING SIGNATION OF	17 - AHIMAL — FARM	EQUIPMENT						
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12_DOWNHILL BUNAWAY	IB-AHIMAL - DEER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NO	ON-MOTORIST DIRECTION				
2[4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	13 OTHER NOW COLLISION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	ANYTHING SET IN MOTION	1	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24-OTHER MOVABLE CBJECT	FROM 3 TO L					
3[]		COLLIETO	15-PEDALCYCLE 3N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE			4 - WEST 8 - SOUTHWEST				
		31 - GUARDRAIL END		- STRUCK 13-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN				
4	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	14 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED				
S1 1 .	STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	CHREST	15 - EMBANKMENT 16 - Fence	51 - WALL 52 - BUILDING		1 - STATED / ESTIMATED SPEED				
5[27 - BRIDGE PIER OR ABUTMENT	BARRIER	40 - UTILITY POLE	17 - MAILBOX	53 - TUNNEL	0,1,5	2 - CALCULATED / EDR				
61 1 1	28-BRIDGE PARAPET 29-BRIDGE RAIL	15 - MEDIAN CONCRETE 41 - OTHER POST, POLE 48 BARRIER OR SUPPORT		4B - TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER 42 - CULVERT 49		19-FIRE HYDRANT	99-OTHER/UNKNOWN						
1	FIRST HARMFUL EVEN	T 1 MOST	HARMFUL EVENT			3 5					

J FIRST HARMFUL EVENT

MOST HARMFUL EVENT

, 3 , 5 ,

OHIO DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
								2,0,2,1,-,0,0,0,1,8,8,1,7,						
UNIT#	NAME: LAST, FIRST, MIDDLE BISUTTI, STACY, L							DATE OF BIRTH AGE GENDER						
0,1	STREET, CITY, STATE, ZIP								0,5 / 1, 9, / ,1 9 7, 5, 4, 6				F	
6725 V	WAKEFIELD RD ,Hiram ,OH 44234								CONTACT PHONE - INCLUDE AREA CODE					
2	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: N					: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT SEATING POSITION AIR			GE EJECTION	TRAPPED	
OL STATE		ICENSE NUMBER						0,4				11	_1_	
O, H	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL CODE			OFFENSE DESCRIPTION Driving in Marked La				NUMBER			
OL CLASS	ENDORSEMENT	RSEMENT RESTRICTION SELECT UPTO 3 D			IRIVER ALCOHOL / DRUG SUSPECTED			CONDITION		COHOL TEST	16820	RUG TEST(S		
	SELECT UP TO 2			TRACTED	_	LCOHOL MA		1	STATUS T		STATUS TY		T SELECT UP TO 4	
4	لـــالـــا		<u> </u>	_1		THER DRUG		1	1	1	1	1_		
UNIT#	NAME: LAST, F								DATE OF BIRTH		AGE	GENDER		
0.2		RT, RHEA, O							0 5	<u>/ 1, 7, / ,1</u>	9 6 4	5 7	F	
ADDRESS:	STREET, CITY, ST	ATE, ZIP AVE "Ravenna	OIL	142 66					CONTACT	CONTACT PHONE - INCLUDE AREA CODE				
ADDRESS: 821 W INJURIES 5		EMS AGENCY (NAME)	,UH ²		AVENTO	: MEDICAL FACILITY		CAFFYY FAMINAFAT	L	I				
NON 5	TAKEN BY	Ello Adello I (MAIRE)		INJUREDI	AKEN IU	: MEDICAL PACILITY	(NAME, CITY)	USED 0 4	DOT-CO	MPLIANT	N AIR BAG USA	AIR BAG USAGE EJECTION TRAPPED		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	E CHA	RGED	LOCAL	OFFENSE DESC	11	LMEI 0 1	CITATION	CITATION NUMBER		
В О Н							CODE				CITATION NOMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECTION		IVER ALCOHOL / DRUG SUSPECTED			CONDITION	AL.(OHOL TEST	DF	UG TEST(S			
. 4			BY	TRACTED 1	=		RLJUANA			YPE VALUE			SELECT UPTO 4	
UNIT#	# NAME: LAST, FIRST, MIDDLE			OTHER DRUG			1	_1	1					
Old F W	NAME: USI,	TR31, MIDDLE								DATE OF BIRTH		AGE	GENDER	
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
TORI									CONTACT FROME - INCLUDE AREA CODE					
ADDRESS:		EMS AGENCY (NAME)		INJURED TA	AKEN TO:	MEDICAL FACILITY	CNAME, CITY)	SAFETY EQUIPMENT		SEATING POSITIO	N AIR BAG USA	GE EJECTION	TRAPPED	
0 L	TAKEN				USED				DOT-COMPLIANT MC HELMET					
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	FFENSE CHARGED LOCAL OFFENSE DESC			RIPTION CITE			TATION NUMBER			
OL STATE														
≥ OL CLASS	SELECT UP TO 2	RESTRICTION SELECT	DIS	DRIVER DISTRACTED ALCOHOL / DRUG SUSPECTED BY ALCOHOL MARIJUANA			CONDITION	ALCOHOL TEST STATUS TYPE VALUE S		DRUG TEST(S) STATUS TYPE RESULT SELECT UP IC				
			, , , , , ,		=	THER DRUG	KIDUANA	ļ. ,						
INJU	RIES	SEATING POSITION		IR BAG		OL CLASS	S	OL RESTRIC	TION(S)	DRIVER DISTRACT	TION	TEST STA	TUS	
1 - FATAL 2 - Suspected S	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOY			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER		1 - NOT DISTRACTED 2 - MANUALLY OPERATING		ONE GIVEN		
3 - SUSPECTED N		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOY			3-CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUN DEVICE (TEXTING, TYP	ICATION 3-T	EST REFUSED Est given, con		
4 - POSSIBLE IN. 5 - NO APPARENT		4 - SECOND - LEFT SIDE	4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN			(OHIO = D) 5 - M/C MOPED ONLY		4 - FARM WAIVER 5 - EXCEPT CLASS A	DIALING)		4 T	AMPLE / UNUSA Est given, res	LANCOUNT OF	
INJURED T		(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE						6 - EXCEPT CLASS A		3 -TALKING ON HANDS-FR COMMUNICATION DEVI	ICE 5-T	5 - TEST GIVEN, RESULTS		
1 - NOTTRANSPO	ORTED	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON HAND-HEL COMMUNICATION DEVI	LD ICE	NKNOWN		
/TREATED AT 2 - EMS	SCENE	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJE	ECTION	ulado e	OL ENDORSEM	MENT	8 - INTERMEDIATE RESTRICTIONS		5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE	AN 1-N	COHOL TES	TTYPE	
3 - POLICE		8-THIRD - MIDDLE 2- PARTIALLY						9 - LEARNER'S PERMIT		6 - PASSENGER		2 - BL00D		
9-OTHER/UNK	NWOWN	9-THIRD - RIGHT SIDE 10-SLEEPER SECTION	3 - TOTALLY 4 - NOT APP			P - PASSENGER N -TANKER		RESTRICTIONS 10 - LIMITED TO DAY	IGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE		RINE REATH		
SAFETY EQ	LUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER				Q - MOTOR SCOOTER		11 - LIMITED TO EMP	LOYMENT	8 - OTHER DISTRACTION O THE VEHICLE		THER		
Children Committee	1 - NONE USED 11 - PASSENGER IN UTHER ENCLOSED CARGO AREA 2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT BUS,		TRAPPED			K-TINGE-MILLE MOTORGIGEE		12 - LIMITED - OTHE 13 - MECHANICAL DE	LIMITED - OTHER THE VEHICLE MECHANICAL DEVICES 9 - OTHER / UNKNOWN		DRUG TEST TYPE		TYPE	
3 - LAP BELT ONL		PICK-UP WITH CAP) 2 - EXTRICATED BY				S - SCHOOL BUS (SPECIAL BRAI T - DOUBLE & TRIPLE TRAILERS CONTROLS; OR			S, HAND	CONDITION	10.000	1 - NONE 2 - RI 00D		
4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM -		12 - PASSENGER IN UNENCLOSED CARGO AREA	X - TANKER / HAZMAT			ADAPTIVE DEVIC	ES)	1 - APPARENTLY NORMAL		2 - BLOOD 3 - URINE				
FORWARD FAC 6 - CHILD RESTR		13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	MANICAL ME	HANICAL MEANS GENDER			14 - MILITARY VEHIC 15 - MOTOR VEHICLE		2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRE	4.0	THER			
REAR FACING		(NON-TRAILING UNIT)				F-FEMALE M-MALE		AIR BRAKES 16 - OUTSIDE MIRROR		ANGRY, DISTURBED) 4 - ILLNESS	DRU	JG TEST RE	SULT(S)	
7 - BOOSTER SEA 8 - HELMET USE		15 - NON-MOTORIST 99 - OTHER / UNKNOWN		M - MALE U - OTHER / UNKNOWN			17 - PROSTHETIC AID		5 - FELL ASLEEP, FAINTED,		MPHETAMINES ARBITURATES			
9 - PROTECTIVE I	PADS USED							18-OTHER		FATIGUED, ETC. 6- UNDER THE INFLUENCE		ENZODIAZEPINE	S	
10 - REFLECTIVE										OF MEDICATIONS / DRUG /ALCOHOL	GS 4-C	ANNABINOIDS CAINE		
11 - LIGHTING - PI / BICYCLE ONI										9-OTHER/UNKNOWN	6 - 01	PIATES/OPIOID	S	
99-OTHER/UNKNOWN											7 - 0° 8 - N	THER Egative resul	TS	

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER					
								2 0 2 1 - 0 0 0 1 8 8 1 7					
	UNIT#	NAME: LAST, FIRST, MIDDLE							E OF BIRTH		AGE	GENDER	
<u>_</u>	01	BISUTTI, LORELEI, L							6, / 2	1 6	0, 5	M	
OCCUPANT			160	CONTACT PHONE - INCLUDE AREA CODE									
000		WAKEFIELD DR ,HIRAM ,OH 44234 INJURED EMS ABENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME CITY) SAFETY FAILUREMENT								<u></u> _			
	. 5 .	TAKEN	ENIS ABENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT	1 ~ ~	AIR BAG USAG	E EJECTION	TRAPPED	
2	UNIT#	NAME	T FIRST MIDNIF				0,4	MC HELMET	0 6	1 1	1_1_	_1_	
		NAME: LAS	ST, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
ANT	ADDRESS:	STREET, CITY,	STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE							
OCCUPAN					INJURED TAKEN TO: MEDICAL FACILITY (NAME, GITY) SAFETY EQUIPM			, contract Filling	IC - INCLUDE AREA CODE				
ŏ-	INJURIES	INJURED TAKEN	EMS Agency (NAME)						SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED	
		BY				USED	DOT-COMPLIANT MC HELMET	, , ,					
	UNIT#	NAME: LAS	T, FIRST, MIDDLE			DAT	E OF BIRTH		AGE	GENDER			
<u>-</u> -													
CCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
	MULIPIES	INJURED	EMS Agency (NAME)		IN HIDER TAKEN TO AT			<u> </u>					
	JRIEJ	TAKEN BY	ENIS PUENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED	
	UNIT#	NAME: IAS	T. FIRST, MIDDLF								<u> </u>	GENDER	
		NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE				
ANT	ADDRESS:	STREET, CITY,	STATE, ZIP			-		CONTACT PHONE - INCLUDE AREA CODE					
CCUPAN					,	MOLOBE AREA GO	DE.						
٦	NJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
J		ВҮ						MC HELMET			ـــاـ		
1	1 - FATA		IRIES	The state and the state of	EQUIPMENT USED	NAME OF STREET	SEATING POS	TION		AIR BAG U	SAGE		
100			RIOUS INJURY	1 - NONE US VEHICLE	OCCUPANT	2 THOM CELL GIBE			1 - NOT DEPLOYED				
ı			NOR INJURY	2 - SHOULDE	R BELT ONLY USED		T - MIDDLE		2 - DEPLOY				
ı	4 - POSS	IBLE INJU	RY	3 - LAP BELT		T – RIGHT SIDE ND – LEFT SIDE			- DEPLOYED BOTH				
ı	5 - NO A	PPARENT I	NJURY		R & LAP BELT USED STRAINT SYSTEM –		ORCYCLE PASS	ENGER)	FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN				
	CONTROL STREET	and the second between	TAKEN BY	FORWARD			ND – MIDDLE ND – RIGHT SID	E					
ı		RANSPOR		6 - CHILD RE	ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE (24.0)					
ı	2 - EMS			7 - BOOSTER	SEAT 8 - THIRD - MIDDLE			CAR	1 - NOT EJI	EJECTI	ON	Settlende	
	3 - POLI	CE		8 - HELMET	USED 9 - THIRD - RIGH				2 - PARTIALLY EJECTED				
	9 - OTHE	R/UNKNO	WN		IO - SLEEPER SECTION (IVE PADS USED 11 - PASSENGER IN OTHI KNEES, ETC.) CARGO AREA (NON TE			ER ENCLOSED 3 - TOTALLY EJECT					
P		CIPS TO S	DER		TIVE CLOTHING CARGO AREA (NON-TR, BUS, PICK-UP WITH CAP)								
19	F - FEMAI M - MALE			11 - LIGHTING	- PEDESTRIAN	12 - PASSE	2 - PASSENGER IN UNENCLOSED TRAF				ED		
- 0	U - OTHER / UNKNOWN				13 - TRAILING UNIT				1 - NOT TRAPPED				
ı				99-OTHER/U	UNKNOWN 14 - RIDING ON VEHICLE I (NON-TRAILING UNIT) 15 - NON-MOTORIST			EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS			AL	
i										BY NON-ME	N-MECHANICAL		
	NAME-LAS	T, FIRST, MIDOL	F			99 - OTHE	R/UNKNOWN		MEANS				
22	-niii LA3	i, rina i, MIDOL	-1-					DATE /	OF BIRTH	T	AGE	GENDER	
7	ADDRESS:	STREET, CITY, S	STATE, ZIP	· .				CONTACT PHONE	- INCLUDE AREA COD	 E			
								- INCLUDE AREA CODE					
2	NAME: LAST	T, FIRST, MIDDL	.E					DATE	OF BIRTH		AGE	GENDER	
, L	ADDRESS: STREET, CITY, STATE, ZIP												
Singly of 1, 31A(L) LIF							CONTACT PHONE - INCLUDE AREA CODE						
NAME: LAST, FIRST, MIDDLE							DATE OF COLUMN						
							DATE OF BIRTH AGE GENDER						
1	ADDRESS:	STREET, CITY, S	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
									1_1_1			, ,	